

Report on an unannounced short follow-up inspection of

HMP Askham Grange

30 May – 2 June 2011

by HM Chief Inspector of Prisons

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Introduction

Askham Grange is an open resettlement prison, which at the time of this inspection held 124 women and young adult women. It also held 10 mothers and their babies. The prison governor manages both Askham Grange and New Hall, which is 40 miles away. This did not appear to create any problems for Askham Grange.

Our previous inspection in 2008 described Askham Grange as outstanding and found that outcomes for prisoners were good in every area. This short follow-up inspection focussed on the relatively minor areas where we did identify room for improvement at our last inspection.

Women continued to tell us they felt very safe and did not raise any significant concerns with us. However, we were disappointed that the prison had not made more progress in implementing the small number of recommendations we made last time – most of which would have been straightforward to do so. In particular, more work needs to be done to improve day to day communication and planning between health care and other departments.

Women were well treated and relationships with staff were good. We were pleased to see that child care professionals were now involved in running the mother and baby unit, but more could still be done to improve the unit – a more child-friendly environment would be created if discipline staff did not wear uniforms and discipline staff needed more child care training. There was no opportunity for mothers to cook meals for their children. Work on diversity issues was generally sound. There was good work done with women who had problems with drugs and women were very positive about the health care they received. Although women could access counselling support in the community, we were disappointed to see that the prison no longer employed a counsellor to support those with legacies of bereavement and abuse for whom primary mental health services were not suitable.

The prison continued to provide a good range and quality of education, training and work and women were positive about the opportunities offered. We were pleased to see that the ‘virtual campus’ was soon to be introduced into the prison, which would give women controlled access to the internet for education purposes. There was still no suitable outdoor physical education facility.

Resettlement outcomes were good at our last inspection and the prison was making progress in implementing our recommendations to improve them further. However, although the prison was alert to the needs of the different needs of the women it held, the reducing re-offending strategy would benefit from addressing the needs of short-sentenced women more clearly. There was good support for women with alcohol-only problems. Women appreciated the opportunities they had to maintain contact with their families but there were insufficient telephones for the number of women held.

Askham Grange continues to be an impressive prison and for the most part it had improved or maintained the high standards we found at our last inspection. However, the prison should not rest on its laurels. There is still room for improvement and in some areas we were disappointed that more progress had not been made. Nevertheless, the improvements that are required start from a very high base and this should not detract from what are, once again, very positive inspection findings.

Fact page

Task of the establishment

Askham Grange is an open establishment operating a resettlement regime for women and young adult women. It is also able to provide accommodation and care for up to 10 mothers and babies.

Prison status

Public

Region/Department

Yorkshire region

Number held

124

Operational capacity

128

Date of last full inspection

29 September – 3 October 2008

Brief history

The original manor house was built as a private residence in 1846. It was leased to the former Prison Commissioners in 1946 and sold to them in 1950. Askham Grange has operated as a women's open establishment ever since.

Short description of residential units

The main house comprises a mix of single and shared accommodation up to six occupants. The mother and baby unit is all single rooms. The annex accommodates women on stage two of the resettlement scheme mainly in single rooms.

Escort contractor

G4S

Health service commissioner and providers

Commissioner: NHS North Yorkshire and York

Health care provider: Harrogate and District Foundation Trust

IDTS/mental health provider: NHS North Yorkshire and York

Learning and skills providers

The Manchester College

Section 1: Summary

Introduction

- 1.1 The purpose of this inspection was to follow up the recommendations made in our last full inspection of 2008 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, even the most vulnerable, are held safely
Respect	prisoners are treated with respect for their human dignity
Purposeful activity	prisoners are able, and expected, to engage in activity that is likely to benefit them
Resettlement	prisoners are prepared for their release into the community and helped to reduce the likelihood of reoffending.

- 1.2 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

- 1.3 At our inspection in 2008, we found that the establishment was performing well against this healthy prison test. We made four recommendations in this area, of which none had been achieved, one partially achieved and three had not been achieved. We have made no further recommendations.
- 1.4 Askham Grange continued to be very safe and most recommendations could be quickly and easily achieved. The prison still used its own transport for some women but many continued to arrive in cellular vans despite their suitability for open conditions. The violence reduction policy had been reviewed but sections on governance and strategies to resolve problems of communal living had been omitted, despite having been included in previous versions. Safer custody meetings were still poorly attended but a recent review of team membership had appropriately reduced the number required to attend. Monitoring had increased to involve different departments and there was generally good investigation into allegations of bullying,

mostly associated with relationship problems and disagreements between women. For the few women placed on formal monitoring, there was little evidence of regular entries on case notes or in the central observation book.

- 1.5 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Respect

- 1.6 At our inspection in 2008, we found that the establishment was performing well against this healthy prison test. We made 52 recommendations in this area, of which 21 had been achieved, 11 partially achieved, 19 had not been achieved and one was not longer applicable. We have made one further recommendation.
- 1.7 Rooms were still cramped and the number of beds had not been reduced. The mother and baby unit was a safe and supportive environment but the policy was poorly constructed and discipline staff working on the unit still wore uniforms. Few discipline staff had received childcare training. Child care professionals were now involved in running the unit and there was good joint working between unit and nursery staff. Child-appropriate meals and child nutrition education were provided but mothers could not cook for their children.
- 1.8 Systems to identify the needs of new arrivals with disabilities were good but there was no formal care planning. The diversity policy included all minority groups but there was insufficient consultation to ensure their needs were identified and addressed. Monitoring related only to ethnicity and only covered areas required by NOMS, although any concerns were properly investigated and addressed through the race equality action team (REAT). Apart from an annual population profile, the allocation of black and minority ethnic women to Askham Grange was not monitored to establish and address any potential equality issues. Foreign national issues were included at REAT meetings but monthly free telephone calls were still given only to foreign national women who had not had a domestic visit. The chapel now provided suitable faith provision for all women.
- 1.9 Integrated drug treatment system (IDTS) staff were suitably trained and there were good links between them, the counselling, assessment, referral, advice and throughcare service and health care staff. Health care staff communicated with other prison departments but joint care planning between health care and the prison on a day-to-day basis did not always effectively support the changing conditions of some women. Exit questionnaires introduced by the primary care trust showed predominantly good to excellent feedback of women's experience of health care. The health care skill mix was appropriate and staff received regular training. There had been insufficient recent first aid and mental health awareness training for discipline staff and only a few had received defibrillator training. Women could be referred to counsellors in the community but no longer had access to a counsellor in the prison.
- 1.10 Women could change the products available through the prison shop but there was not enough consultation with black and minority ethnic women. Fridges were provided to store perishable goods but were little used due to the risk of theft. Women could not self-cater.
- 1.11 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Purposeful activity

- 1.12 At our inspection in 2008, we found that the establishment was performing well against this healthy prison test. We made five recommendations in this area, of which two had been achieved, one partially achieved and two had not been achieved. We have made no further recommendations.
- 1.13 Women were positive about the range and quality of education and training and understood the purpose of community placements and what they were expected to achieve. Transport arrangements for women returning from outside work after dark had not improved. Links between the library and work activities had been strengthened and internet access was soon to be introduced to the library and to a 'virtual campus' in education. There was still no suitable outdoor physical education facility.
- 1.14 On the basis of this short follow-up inspection, we considered that the establishment was making sufficient progress against our recommendations.

Resettlement

- 1.15 At our inspection in 2008, we found that the establishment was performing well against this healthy prison test. We made 17 recommendations in this area, of which 10 had been achieved, two partially achieved and five had not been achieved. We have made no further recommendations.
- 1.16 The reducing re-offending strategy had been reviewed and included information about how the needs of some specific groups would be met, although not everything was in place as described. Although there was no specific focus on women at Askham Grange for only a short time, the prison was alert to the needs of specific groups and making some progress to meet their needs. The strategy reflected engagement with voluntary and community groups under each pathway and included action plans.
- 1.17 The child protection policy had been reviewed and encompassed broader safeguarding issues but there was not enough emphasis on staff training. Parole reports were up to date and psychology reports prepared for the Parole Board were proportionate for women at this stage of their sentence.
- 1.18 There was active support for women with alcohol-only problems and the substance use policy was comprehensive and included alcohol but contained no action plans, targets or performance measures.
- 1.19 Women appreciated the opportunities for contact with their family and friends. No additional telephones had been provided and incoming call facilities were available only in the main house. Women were asked who they wanted to invite to their sentence planning meeting but were unaware that this could include family members.
- 1.20 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 needs of women with disabilities should be effectively identified on arrival and ongoing support should be put in place to cover all aspects of their lives with regularly reviewed care plans. (HP37)**
Partially achieved. Identification procedures were good. Women completed a self disclosure form on arrival and these were cross-referenced with health care. Any woman with a disability identified by health care who had not completed a form was asked if she wanted the disability liaison officer to be informed. All women with a disability were discussed at a monthly forum but there was no involvement from them individually and the meeting did not feed into a care plan process. (See also paragraph 2.18.)
- 2.2 **Allocation arrangements to Askham Grange should be examined and monitored over time to ensure equality and an appropriate representation of black and minority ethnic women. (HP38)**
Not achieved. Data on the ethnicity of new arrivals were collated for each financial year. In April 2009 – March 2010, 13% of women had been from a black or minority ethnic background. This was similar to the previous year's total of 12% but was not compared with the rest of the female estate and there had been no investigation into whether allocation arrangements ensured equality for black and minority ethnic prisoners.
We repeat the recommendation.
- 2.3 **More effective communication and interaction between health care and the other prison departments should be established to improve the integrated care of women. (HP39)**
Partially achieved. The health care manager was a member of the senior management team, the health care team was represented and engaged in the range of prison-wide strategic and operational meetings and health care was well embedded in the assessment, care in custody and teamwork (ACCT) process. A working group had recently been set up with health care, PE and catering to run a healthy lifestyles programme, the pilot funded and supported by the primary care trust (PCT). Another working group led by health care addressed physical and learning disability and diversity issues. However, day-to-day communication and joint care planning between health care and the prison was ineffective and did not always support some women's changing condition.
We repeat the recommendation.
- 2.4 **The reducing re-offending strategy should include how the needs of specific groups of women at Askham Grange, such as young adults, lifers and those staying a short time, will be met. (HP40)**
Achieved. The resettlement and reducing re-offending strategy had been reviewed in October 2010 and included how the needs of some specific groups of prisoners would be met. However, not everything was in place as described, such as support meetings for life-sentenced prisoners. The last lifer forum had been in July 2010. The strategy identified the needs of young women and some work had recently been started with Centrepoint to develop support for this group. An older prisoner strategy had also been produced. There was as yet

no focus on women who stayed only a short time but the prison was alert to the needs of specific groups and was making some progress to meet their needs.

Recommendations

Courts, escorts and transfers

- 2.5 **Women transferring to Askham Grange should not travel in cellular vans. (1.5)**
Not achieved. Officers tried to collect women from sending establishments in the prison minibus when possible but many women still arrived in vans.
We repeat the recommendation.

Residential units

- 2.6 **The number of beds in dormitories should be reduced to allow women sufficient privacy. (2.10)**
Not achieved. The dormitories contained the same number of beds (see fact page) and remained cramped with no privacy.
We repeat the recommendation.
- 2.7 **Suitable beds and mattresses should be supplied, including those to meet individual special needs. (2.11)**
Partially achieved. Many mattresses were still hard and too narrow for the bed base. Additional mattresses to meet individual special needs could be supplied when verified by health care.
We repeat the recommendation.
- 2.8 **Appropriate study space should be provided. (2.12)**
Achieved. Study space was available in the business administration and IT rooms in education.
- 2.9 **Women should be able to use the telephones in private. (2.13)**
Not achieved. Telephones could not be used in private.
We repeat the recommendation.
- 2.10 **The mildew should be removed from showers and the water-damaged ceiling repaired. The unpleasant smell from the shower areas on the second floor should be investigated and remedied. (2.14)**
Achieved. Shower areas had been refurbished, the ceiling repaired and the unpleasant smell eradicated.

Mother and baby unit

- 2.11 **The mother and baby unit policy should reflect the specific arrangements and facilities at Askham Grange. (2.31)**
Partially achieved. The up-to-date policy included some specific information about the prison but still repeated relevant Prison Service Orders rather than reflecting arrangements at Askham Grange. The policy was poorly constructed and it was difficult to distinguish arrangements particular to the mother and baby residential unit, the Barnardo's nursery and the Acorn family unit. The policy omitted the details of staffing arrangements for the mother and baby unit, as opposed to the nursery, and it was unclear whether it was aimed at staff or

prisoners.

We repeat the recommendation.

- 2.12 **More culturally diverse toys and books should be provided on the mother and baby unit. (2.32)**
Achieved. There was a good range of culturally diverse toys, play equipment and books for different ages. There were plans for the local toy library to visit so that mothers could choose toys with their children.
- 2.13 **Discipline staff should not wear prison uniforms on the mother and baby unit. (2.33)**
Not achieved. Discipline staff working on the unit had chosen to remain in uniform as they had to perform other duties off the unit. This was at odds with the overall ethos of creating as natural environment as possible for babies.
We repeat the recommendation.
- 2.14 **Night staff working on the mother and baby unit should have specific training. (2.34)**
Not achieved. Women used an intercom to contact the night orderly officer when necessary as there was no designated officer on the unit at night. Only seven of the 35 discipline staff had completed any childcare training, most several years previously.
We repeat the recommendation.
- 2.15 **Childcare professionals should be involved in the daily management of the mother and baby unit. (2.35)**
Achieved. Weekly case management meetings included the community health visitor and the nursery, education and health care managers. There was good cross working between the mother and baby residential unit and Barnardo's nursery. Individual advice for mothers on childcare issues such as nutrition, minor illnesses, vaccination and breastfeeding was provided by nursery staff and during weekly visits by the community health visitor.
- 2.16 **Mothers should be able to exercise normal parental responsibility for their babies and, in particular, should be able to cook their meals. (2.36)**
Not achieved. Despite good facilities on the unit, mothers could not cook for their children, which managers said was due to problems of food hygiene and appropriate sharing of the kitchen space. The health visitor and nursery staff gave mothers child nutrition advice but the lack of cooking opportunities was a missed opportunity for women to learn good nutritional habits and build self confidence in managing and cooking food on a budget. Women could go out on 'solo visits' to buy simple food for their children from an agreed list but this did not include uncooked meats. A good range of child appropriate food was provided in the main dining room.
We repeat the recommendation.

Personal officers

- 2.17 **The personal officer scheme should include guidance on family issues and the pro forma report should require officers to report specifically on contact with children and families. (2.48)**
Achieved. The personal officer scheme contained only brief mention of family issues and did not include specific guidance. However, the report template had been amended and required officers to comment specifically on contact with children and families.
- 2.18 **Wing files should contain care plans for prisoners with identified special needs. (2.49)**
Not achieved. There were no care plans for women with identified special needs in wing files. Plans for all such prisoners to be flagged as such on Nomis had not yet been actioned.

Although electronic care plans were available on the health care IT system, they were only accessible to health care staff, and none of the residential officers knew of their existence.
We repeat the recommendation.

Bullying and violence reduction

- 2.19 **The violence reduction policy should be updated to reflect the current arrangements for governance and include specific reference to strategies to resolve problems of communal living. (3.8)**

Not achieved. The violence reduction policy had been reviewed in April 2011. Sections on governance and strategies to resolve problems of communal living had been omitted, although these had been included in previous versions published since our last inspection. This was explained as a simple oversight.

We repeat the recommendation.

- 2.20 **Members of the safer custody team should attend meetings regularly. (3.9)**

Not achieved. Minutes of the previous three meetings recorded apologies for non-attendance and staff absence, with more people absent than attending. Even so, the prison remained a safe place, with few ACCTs opened and most open only a short time. A recent review of membership of the safer custody team had appropriately reduced the number of staff required to attend meetings.

We repeat the recommendation.

- 2.21 **Better records should be kept of women placed on anti-bullying monitoring. (3.10)**

Partially achieved. There were some good investigations into bullying allegations, many of which were associated with relationship problems and disagreements between the women. Many cases included supporting statements and reviews. Few women were placed on formal monitoring but when they were there was little evidence of regular entries on case notes or in the central observation book. Other education and work placements were now more involved in monitoring procedures, an improvement from the previous inspection when we reported the lack of such a contribution.

Diversity

- 2.22 **The diversity policy should be revised to take into account all minority groups and based on an assessment of their needs. The policy should include regular monitoring of data and appropriate forums to consult minority groups. (3.29)**

Partially achieved. The diversity policy had been revised to incorporate all diversity strands, although some, such as sexuality and faith, needed further development to detail how they would be managed to avoid or address discrimination. Only data relating to ethnicity were routinely monitored. In the previous year, only two forums for black and minority ethnic women had been held in July 2010 and March 2011. Ten women had attended the first and the minutes indicated meaningful dialogue driven by an appropriate agenda. However, only four women had been at the second meeting, where the minutes did not indicate the same quality of consultation and made no mention of any ongoing action points. Two older prisoner forums had been held in the same period. One in July 2010 attended by eight women had raised a range of issues but minutes of another in December 2010 attended by 15 women recorded little meaningful discussion, no follow-up of previous issues and indicated that the women had enjoyed a game of bingo. There had been no forum for women with disabilities.

We repeat the recommendation.

- 2.23 **The older prisoner policy should clarify the age group covered and work, pay and retirement issues, and set out how the particular needs of older women are met. (3.30)**
Achieved. The policy stipulated that women could retire at 60 and explained the arrangements for full-time and part-time retirement. It detailed how the needs of individual older women would be identified and addressed, with specific guidance on accommodation and access to the regime/services. It also described a formal process of regularly reviewed care plans and, while there were no care plans, we were satisfied that the individual needs of women were being met.
- 2.24 **A disability equality scheme should be in place to ensure that women with disabilities have appropriate access to facilities, such as showers, incoming telephone calls and relevant regime activities. (3.31)**
Partially achieved. A disability policy now stipulated the importance of ensuring equality of access for all women and the need to make necessary adjustments to achieve this. Showers had been significantly adapted and there was still a stair lift enabling women with mobility difficulties to get to education. Women who could not climb stairs could not use the incoming telephones and still had to take any incoming calls in the staff office.
- 2.25 **All staff should be trained in diversity. (3.32)**
Not achieved. Not all staff had been trained in diversity but the proportion of staff who had been trained in the previous 12 months had increased to 85% compared to 70% in 2008.

Race equality

- 2.26 **Attendance at the race equality action team meeting should better reflect the terms of reference. (3.46)**
Partially achieved. The governor and deputy governor attended all race equality action team (REAT) meetings and there was generally appropriate functional representation but the minutes indicated that a significant number of those who should have attended failed to do so.
- 2.27 **Race equality action team meeting minutes and SMART monitoring data should be displayed on a notice board. (3.47)**
Not achieved. REAT meeting minutes and SMART monitoring data were not displayed on notice boards.
We repeat the recommendation.
- 2.28 **Black and minority ethnic women should have access to necessary hair and skin products through the canteen and to appropriate hairdressing services. (3.48)**
Partially achieved. A limited range of appropriate hair and skin products was available through the shop but only general hair products were used in the hairdressing salon unless black and minority ethnic women brought their own to appointments.
- 2.29 **SMART monitoring data should be analysed for all relevant areas. (3.49)**
Not achieved. SMART monitoring was carried out only in the areas required by NOMS and did not cover any area that staff or prisoners might identify as a potential issue.
We repeat the recommendation.

Foreign national prisoners

- 2.30 **Foreign national issues should be a specific agenda item at the race equality action team meetings, with attendance by the foreign national coordinator should any issues need to be discussed. (3.54)**

Achieved. Only one foreign national woman had been held at Askham Grange in recent months. The foreign national coordinator had attended all REAT meetings and, despite the low numbers involved, foreign national issues were a standing agenda item.

- 2.31 **The foreign nationals policy should be amended to allow a free five minute call home, irrespective of whether or not a woman has had a visit in the previous month. (3.55)**
Not achieved. The foreign national policy, the foreign national staff guide and the information leaflet given to all foreign national women all stated that a free five-minute telephone call was provided only in lieu of a domestic visit.
We repeat the recommendation.

Legal rights

- 2.32 **Legal service advisors should complete the legal services officer training. (3.66)**
No longer applicable. There were no longer any legal service advisors. Staff in the pathway group provided advice and guidance on issues such as outstanding fines, which was acceptable.
- 2.33 **Women should be able to use telephones during working hours to contact solicitors and make other official calls. (3.67)**
Achieved. Telephones were switched on during working hours and women could make official calls when necessary.

Faith and religious activity

- 2.34 **A more appropriate multi-faith room should be provided. (5.38)**
Achieved. The chapel had been turned into a multi-faith area known as the Sanctuary and provided an appropriate area of worship for women of all faiths.

Substance use

- 2.35 **Nurses should undertake further substance use awareness training, and health service providers' skill mix should include mental health and dual diagnosis expertise. (3.76)**
Achieved. A registered mental health nurse was part of the dedicated integrated drug treatment system (IDTS) team. All three nurse team members had completed the Royal College of General Practice (RCGP) level 1 (substance use) and two of the nurses and one of the GPs were completing RCGP level 2. There were good links between the counselling, assessment, referral, advice and throughcare (CARAT) service, IDTS and health care, including joint work on substance use programmes. The community psychiatric nurse (CPN) in the in-reach team also provided good support for women with both mental health and substance use problems.

Health services

- 2.36 **The prison partnership board should investigate why some women believe they are not always treated professionally and with care when they visit healthcare. (4.42)**
Achieved. The PCT had introduced an exit questionnaire given to all women about to leave Askham Grange. Evaluation showed predominantly good to excellent feedback. Most women we spoke to said they had been treated appropriately and the few complaints about staff attitude appeared to relate to one particular member of staff. There were few formal complaints

and efforts were made to address problems quickly through a meeting between the health care manager and the woman concerned.

2.37 Clinical governance meetings should be reintroduced. (4.43)

Partially achieved. There were no specific meetings. Clinical governance was an agenda item at the health care steering group but there was limited detail of the incidents and complaints reported.

2.38 A skill mix review should be undertaken to ensure that healthcare staff have the relevant skills, competencies and knowledge to meet the full needs of the prison population, including mental health needs. (4.44)

Achieved. A skill mix review had been carried out and a training plan was almost complete. The current skill mix was appropriate for the population and staff received regular training from the PCT. Some staff had undertaken specialist training, including nurse prescribing, minor illnesses, diabetes and paediatric resuscitation.

2.39 First aiders/discipline staff on duty when healthcare is closed should be trained in the use of the automatic defibrillator. (4.45)

Not achieved. Only 11 of the 35 discipline staff had received first aid training in the previous year and only five been trained to use the defibrillator.

We repeat the recommendation.

2.40 The childbirth pack should be re-sited centrally so that all staff have access to it when healthcare is closed. (4.46)

Not achieved. No emergency childbirth packs were held centrally. The PCT had advised the prison that there was no need for packs as arrangements to contact the on-call GP or the emergency ambulance were equivalent to those for women in the community. This was acceptable.

2.41 The clinical records for women who have been released should be kept securely in accordance with data protection and the Caldicott guidance. (4.47)

Achieved. All paper records of women discharged from Askham Grange were held securely in the main prison building basement and only health care staff had access to this locked area.

2.42 Women with disabilities should receive an occupational therapy assessment and equipment and adaptations provided without delay. (4.48)

Achieved. All new arrivals were asked if they had a disability and a detailed screening using the Barthel Index (activities of daily living assessment) was used on those who said they did. Women were referred for an occupational therapy assessment as necessary. Simple aids to daily living were provided by the community occupational therapist and the prison was responsible for arranging adaptations such as handrails and ramps.

2.43 Triage algorithms should be available and used to ensure consistency of advice and treatment. (4.49)

Not achieved. There were no triage protocols or algorithms and nurses used a system of informal triage to determine women's health needs. Some women complained that it was sometimes difficult to see a GP even when they considered the issue warranted direct access.
We repeat the recommendation.

2.44 Additional SystmOne training should be given to staff to ensure the proper management of life-long conditions. (4.50)

Achieved. There had been no specific training but staff all used SystmOne reasonably confidently and records were appropriate and complete. There was satisfactory evidence of

SystmOne use in individual records to record and follow-up chronic diseases. Nurses used the system to delegate follow-up appointments for women with specific conditions to colleagues and were working on developing reports from these follow-ups.

- 2.45 **The pharmacist should take a more active role in health initiatives at the prison, including direct contact with patients and pharmacy-led clinics. (4.51)**
Achieved. The pharmacist visited weekly and reviewed stock and prescriptions. She offered a medication review clinic to women but there had been very little take-up. She had also been involved in the annual health fair at the prison.
- 2.46 **The development of additional patient group directions should be encouraged to enable the supply of more potent medication by nursing staff to avoid unnecessary consultations with the doctor. (4.52)**
Achieved. Although there were no patient group directions, one nurse prescriber and two nurses were currently being trained. The protocol for simple medications enabled nurses to administer over-the-counter medications without a prescription. When health care was closed, women could get simple pain relief such as paracetamol and ibuprofen from the orderly officer on duty. Most women on medication could have it in possession.
- 2.47 **The controlled drug register should comply with the new format of the February 2008 regulations. (4.53)**
Achieved. The register now complied with the 2008 regulations.
- 2.48 **The written in possession policy should be reviewed to include a risk assessment. (4.54)**
Achieved. The in possession policy included a risk assessment algorithm used to assess suitability for all women needing prescribed medication.
- 2.49 **Any pre-packs to be issued against a doctor's prescription should be dual-labelled. The second label should be attached to the prescription chart so the pharmacist can check that the prescription is appropriate and correctly supplied. (4.55)**
Achieved. There was no dual labelling but most medication was issued to named patients. When nurses administered from stock, they completed the blank label on the pre-pack with the patients' name and recorded the stock provided on the woman's record on SystmOne and on a paper medication administration record. The pharmacist checked the prescription charts each week and cross checked against the amount of stock ordered. This was acceptable.
- 2.50 **All staff should have mental health awareness training. (4.56)**
Not achieved. Only seven of the 35 discipline staff had received mental health awareness training and only five of those had received training in the previous year.
We repeat the recommendation.
- 2.51 **Women should have access to the counsellor without having to make an application through healthcare. (4.57)**
Not achieved. There was no counsellor in the prison. Women could self-refer or be referred to community branches of CRUSE, MIND, Rape Crisis and Women's Aid but, apart from CRUSE, all were based in York or beyond. There was no counselling provision for women dealing with a legacy of abuse and bereavement but for whom primary mental health services were not suitable.

Further recommendation

- 2.52 An accessible and supportive counselling service should be provided.

Learning and skills and work activities

- 2.53 **Transport arrangements for women returning from outside work should be improved. (5.17)**

Not achieved. No transport was provided for women returning from work after dark so they continued to walk along unlit roads from the bus stop to the prison.

We repeat the recommendation.

- 2.54 **Staff should ensure that all women are clear about the purpose of community placements and involved in deciding which placement best meets their needs. (5.18)**

Achieved. Women were clear about the purpose of community placements and involved in decision making. Information about the placements available was available in the pathways centre. Each woman was mentored by an allocated SOVA volunteer and her choice of placement and suitability were discussed with her individually, including at sentence planning meetings.

Library

- 2.55 **Links between the library and work activities should be strengthened to ensure relevance of library stock and to encourage residents at work to use it. (5.19)**

Achieved. Links between the library and work activities had been strengthened. The part-time librarian occasionally attended the weekly enterprise meeting, where the needs of each woman in work were discussed, and the education manager attended the quarterly library meetings. New books had recently been bought for IT and business administration and specific library books could be ordered through York city library.

- 2.56 **Access to the internet should be available in the library. (5.20)**

Partially achieved. The electrical cabling necessary for internet access had been installed in the library and in education and the aim was for a 'virtual campus' to be available soon.

Physical education and health promotion

- 2.57 **Suitable outdoor physical education facilities should be provided. (5.29)**

Not achieved. There were still no suitable outdoor PE facilities. Women sometimes used the lawn behind the main house but this was on an informal basis.

We repeat the recommendation.

Catering

- 2.58 **There should be specific consultation with black and minority ethnic women about menu choices. (7.6)**

Not achieved. Consultation minutes indicated that black and minority ethnic women had been consulted about menu choices only once in the previous 12 months and there was no evidence that issues raised had been addressed.

We repeat the recommendation.

- 2.59 **Women should have some opportunities to cook their own meals. (7.7)**
Not achieved. Women in the mother and baby unit had been able to cook their own meals for a while but this was no longer the case and the provision had not been extended to other women.
We repeat the recommendation.

Prison shop

- 2.60 **Women should be consulted at least every three months about the product choice and black and minority ethnic women should be specifically consulted. (7.15)**
Partially achieved. Women could make changes to the canteen product list at quarterly residents' meetings and prison shop forums, both of which included black and minority ethnic women. Canteen choice had been raised at a black and minority ethnic prisoner forum in July 2010 but meetings were infrequent and there was no evidence that issues raised had been followed up at the subsequent meeting in March 2011.
We repeat the recommendation.
- 2.61 **New arrivals should be able to access the shop within 24 hours. (7.16)**
Not achieved. New arrivals could not buy goods from the shop within their first 24 hours at Askham Grange and, depending on which day they arrived, some could wait up to a week to receive their first shop order.
We repeat the recommendation.
- 2.62 **Women should be able to buy hobby materials and make-up products. (7.17)**
Partially achieved. Women could order make-up from a catalogue every three weeks. A weekly craft and hobbies club was run but there was still no provision for women to buy hobby materials.
We repeat the recommendation.
- 2.63 **Women should have easy access to a fridge to store perishable goods. (7.18)**
Achieved. Perishable goods bought from the shop could now be stored in fridges but the fridges we saw were mostly empty and some women said they were reluctant to use them as items were often stolen.

Strategic management of resettlement

- 2.64 **The reducing re-offending strategy should be updated to reflect the broad range of engagement with voluntary and community groups and to include an action plan with SMART objectives. (8.5)**
Achieved. The strategy had been updated and outlined how, through the reducing reoffending meeting, pathway leads engaged with a range of voluntary and community groups. Action plans had been developed for each pathway and in most cases included SMART objectives.

Offender management and planning

- 2.65 **The service level agreement with North Yorkshire Probation Area should be updated to reflect the work being undertaken on offender management. (8.18)**
Achieved. The service level agreement (SLA) had been reviewed in April 2010 and broadly covered the work of the offender management unit. The role of probation staff acting as offender supervisors was not described in enough detail, including no reference to expected levels of contact with prisoners or liaison with offender managers. The SLA needed further updating as the full-time senior probation officer post had recently been lost.

- 2.66 **Video or telephone conferencing facilities should be introduced to increase the participation of offender managers in sentence planning arrangements. (8.19)**
Achieved. Video/telephone conferencing had been introduced in March 2011 and had since been used twice for court appearances, once for an inter-prison visit and once for an offender management interview. Its further use to facilitate offender management meetings needed to be developed.
- 2.67 **Women should be involved in all discussions at offender management boards. (8.20)**
Achieved. While we did not observe any boards, we spoke to some women who had recently attended offender management and lifer boards. Most said they had been involved and had felt able to contribute but all said their formal structure and environment could inhibit less confident women.
- 2.68 **Quality assurance processes for OASys should be reviewed at regular intervals. (8.21)**
Achieved. There were well-established procedures for quality checking OASys. All completed OASys reports were countersigned by the head of the offender management unit. The senior officer (offender management) had shadowed a probation officer from HMP New Hall to improve her understanding of the OASys process. They now jointly quality assured 10% of all assessments completed at Askham Grange.
- 2.69 **The child protection policy should be revised to reflect the broader safeguarding children agenda backed up by regular staff training. (8.22)**
Partially achieved. The safeguarding children policy, which had been reviewed in June 2010, described procedures to respond to situations where children had been identified as being at risk of significant harm in the prison or from past experiences. It defined key concepts and arrangements for sharing information. The public protection policy included procedures for identifying prisoners who might be a risk to children. There was not enough emphasis on training, which had taken place for 14 staff in 2010. Some limited online training had also been provided but technical problems meant this could not be quantified.
We repeat the recommendation.

Indeterminate-sentenced prisoners

- 2.70 **Lifers should be consulted on the structure and format of lifer boards in order to ensure maximum participation. (8.23)**
Not achieved. All lifers and indeterminate-sentenced prisoners were notified before a board and asked if there was anyone they particularly wanted to attend. Some lifers commented on the formal structure of boards and the presence of some staff they had not previously worked with. Lifer forums would have been an appropriate place to consult women about the structure and format of boards but there were records of only one such forum held in July 2010.
We repeat the recommendation.
- 2.71 **Reports prepared for the Parole Board should be on time so that women are not disadvantaged by having parole hearings delayed. (8.24)**
Achieved. Parole reports were up to date. We looked at a sample of dossiers from the previous year and most had been submitted to the Parole Board several days early.
- 2.72 **Discussions should take place with the Parole Board to determine the need for such detailed reports for all women lifers at this stage of their sentence. (8.25)**
Achieved. Discussions had taken place with the Parole Board and we looked at requests for psychology reports for current life-sentenced prisoners. Reports had not been required for all and in some cases simple addendums to previous reports had been requested. Overall, these were proportionate for women at this stage of their sentence.

Resettlement pathways

- 2.73 **Succession planning arrangements should be in place for peer accommodation advisers. (8.27)**
Achieved. Staff were aware of the need for succession planning for the three peer accommodation advisers. One woman had achieved a level 2 qualification in information advice and guidance and was due to move on to paid work in the community. Another prisoner was being trained in the role. Funding for level 2 training for this role was not available.
- 2.74 **The drug and alcohol strategy documents should contain detailed action plans, targets and performance measures. (8.44)**
Not achieved. The substance use policy was up to date, comprehensive and included alcohol but contained no action plans, targets or performance measures. We were pleased to see active support for women with alcohol-only problems.
We repeat the recommendation.
- 2.75 **The number of outgoing telephones should be increased and they should be available 24 hours a day. (8.65)**
Not achieved. No additional telephones had been provided so there were still only three outgoing telephones for up to 90 women in the main house, one for up to 22 women in the annex and one for up to 10 women in the mother and baby unit. None was available 24 hours a day.
We repeat the recommendation.
- 2.76 **Women living away from the main house should be provided with an incoming call facility. (8.66)**
Not achieved. Incoming call facilities were available only in the main house.
We repeat the recommendation.
- 2.77 **There should be transport arrangements to help visitors to get to and from the prison. (8.67)**
Not achieved. No transport was provided to help visitors travelling by public transport get to and from the prison. The cost of providing transport to and from York station was prohibitive and a survey carried out since the last inspection showed that most visitors travelled by car.
- 2.78 **The resettlement strategy should include an action plan and targets for the delivery of agreed objectives for the children and families pathway. (8.68)**
Achieved. The resettlement strategy included an action plan and targets.
- 2.79 **Families should be invited and encouraged to participate in key aspects of prisoners' sentences where appropriate. (8.69)**
Partially achieved. Although prisoners were asked who they wanted to invite to their sentence planning meeting, neither prisoners nor officers apart from one offender supervisor were aware that this included family members. Partners and family members were often involved in planning meetings for women on the mother and baby unit.
We repeat the recommendation.

Section 3: Summary of recommendations

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

Main recommendations	To the governor
3.1 Allocation arrangements to Askham Grange should be examined and monitored over time to ensure equality and an appropriate representation of black and minority ethnic women. (2.2)	
3.2 More effective communication and interaction between health care and the other prison departments should be established to improve the integrated care of women. (2.3)	
Recommendations	To the governor
Courts, escorts and transfers	
3.3 Women transferring to Askham Grange should not travel in cellular vans. (2.5)	
Residential units	
3.4 The number of beds in dormitories should be reduced to allow women sufficient privacy. (2.6)	
3.5 Suitable beds and mattresses should be supplied, including those to meet individual special needs. (2.7)	
3.6 Women should be able to use the telephones in private. (2.9)	
Mother and baby unit	
3.7 The mother and baby unit policy should reflect the specific arrangements and facilities at Askham Grange. (2.11)	
3.8 Discipline staff should not wear prison uniforms on the mother and baby unit. (2.13)	
3.9 Night staff working on the mother and baby unit should have specific training. (2.14)	
3.10 Mothers should be able to exercise normal parental responsibility for their babies and, in particular, should be able to cook their meals. (2.16)	
Personal officers	
3.11 Wing files should contain care plans for prisoners with identified special needs. (2.18)	

Bullying and violence reduction

- 3.12 The violence reduction policy should be updated to reflect the current arrangements for governance and include specific reference to strategies to resolve problems of communal living. (2.19)
- 3.13 Members of the safer custody team should attend meetings regularly. (2.20)

Diversity

- 3.14 The diversity policy should be revised to take into account all minority groups and based on an assessment of their needs. The policy should include regular monitoring of data and appropriate forums to consult minority groups. (2.22)

Race equality

- 3.15 Race equality action team meeting minutes and SMART monitoring data should be displayed on a notice board. (2.27)
- 3.16 SMART monitoring data should be analysed for all relevant areas. (2.29)

Foreign national prisoners

- 3.17 The foreign nationals policy should be amended to allow a free five minute call home, irrespective of whether or not a woman has had a visit in the previous month. (2.31)

Health services

- 3.18 First aiders/discipline staff on duty when healthcare is closed should be trained in the use of the automatic defibrillator. (2.39)
- 3.19 Triage algorithms should be available and used to ensure consistency of advice and treatment. (2.43)
- 3.20 All staff should have mental health awareness training. (2.50)
- 3.21 An accessible and supportive counselling service should be provided. (2.52)

Learning and skills and work activities

- 3.22 Transport arrangements for women returning from outside work should be improved. (2.53)

Physical education and health promotion

- 3.23 Suitable outdoor physical education facilities should be provided. (2.57)

Catering

- 3.24 There should be specific consultation with black and minority ethnic women about menu choices. (2.58)
- 3.25 Women should have some opportunities to cook their own meals. (2.59)

Prison shop

- 3.26 Women should be consulted at least every three months about the product choice and black and minority ethnic women should be specifically consulted. (2.60)
- 3.27 New arrivals should be able to access the shop within 24 hours. (2.61)
- 3.28 Women should be able to buy hobby materials and make-up products. (2.62)

Offender management and planning

- 3.29 The child protection policy should be revised to reflect the broader safeguarding children agenda backed up by regular staff training. (2.69)

Indeterminate-sentenced prisoners

- 3.30 Lifers should be consulted on the structure and format of lifer boards in order to ensure maximum participation. (2.70)

Resettlement pathways

- 3.31 The drug and alcohol strategy documents should contain detailed action plans, targets and performance measures. (2.74)
- 3.32 The number of outgoing telephones should be increased and they should be available 24 hours a day. (2.75)
- 3.33 Women living away from the main house should be provided with an incoming call facility. (2.76)
- 3.34 Families should be invited and encouraged to participate in key aspects of prisoners' sentences where appropriate. (2.79)

Appendix I: Inspection team

Joss Crosbie	Inspector
Paul Fenning	Inspector
Martin Owens	Inspector
Nicola Rabjohns	Health care inspector

Appendix II: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	6	113	96
Recall		2	1.6
Convicted unSENTENCED			
Remand			
Civil prisoners		3	2.4
Detainees			
Total	6	118	100

Sentence	18–20 yr olds	21 and over	%
UnSENTENCED			
Less than 6 months		2	1.6
6 months to less than 12 months			
12 months to less than 2 years	2	11	10.5
2 years to less than 4 years	1	31	25.8
4 years to less than 10 years	3	50	42.7
10 years and over (not life)		4	3.2
ISPP			
Life		20	16.1
Total	6	118	100

Age	Number of prisoners	%
Please state minimum age	18	
Under 21 years	6	4.8
21 years to 29 years	29	23.4
30 years to 39 years	34	27.4
40 years to 49 years	37	29.8

50 years to 59 years	15	12.1
60 years to 69 years	3	2.4
70 plus years	0	
Please state maximum age	66	
Total	124	100

Nationality	18–20 yr olds	21 and over	%
British	6	112	95.2
Foreign nationals		5	4.0
Not stated	1		0.8
Total	6	118	100

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Cat A			
Cat B			
Cat C			
Cat D			
Other-Open	6	118	100
Total	6	118	100

Ethnicity	18–20 yr olds	21 and over	%
<i>White</i>			
British	6	91	78.2
Irish		1	0.8
Other white		5	4.0
<i>Mixed</i>			
White and black Caribbean		1	0.8
White and black African		1	0.8

White and Asian		1	0.8
Other mixed		5	4.0
<i>Asian or Asian British</i>			
Indian		2	1.6
Pakistani		3	2.4
Bangladeshi		1	0.8
Other Asian			
<i>Black or black British</i>			
Caribbean		4	3.2
African		1	0.8
Other black		1	0.8
<i>Chinese or other ethnic group</i>			
Chinese			
Other ethnic group		1	0.8
Not stated			
Total	6	118	100

Religion	18–20 yr olds	21 and over	%
Baptist			
Church of England		43	34.7
Roman Catholic		30	24.2
Other Christian denominations		9	7.3
Muslim		7	5.6
Sikh		2	1.6
Hindu			
Buddhist		1	0.8
Jewish			
Other			
No religion	6	26	25.8
Total	6	118	100

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	1	0.8	16	12.9
1 month to 3 months	2	1.6	19	15.3
3 months to 6 months			23	18.5
6 months to 1 year	1	0.8	38	30.6
1 year to 2 years	2	1.6	22	17.7
2 years to 4 years				
4 years or more				
Total	6	4.8	118	95.2

Main offence	18–20 yr olds	21 and over	%
Violence against the person	4	35	31.0
Sexual offences			
Burglary		3	2.0
Robbery		9	7.0
Theft and handling		13	10.0
Fraud and forgery		11	8.0
Drugs offences	1	38	31.0
Other offences		6	4.0
Civil offences		3	2.0
Offence not recorded/holding warrant			
Total	6	118	100