



ANNUAL REPORT

HMP/YOI HOLLOWAY

2010

STATUTORY ROLE OF THE IMB

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and IRC to be monitored by an Independent Board appointed by the Home Secretary from members of the community in which the prison or centre is situated.

The Board is specifically charged to:

(1) satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release.

2) inform promptly the Secretary of State, or any official to whom s/he has delegated authority as it judges appropriate, any concern it has.

(3) report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively its members have right of access to every prisoner and every part of the prison and also to the prison's records.

The Independent Monitoring Board of HMP/YOI Holloway is committed to being a diverse board and to carrying out its work in a way that recognises diversity.

Reporting Period

1st January 2010 to 31st December 2010

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1. DESCRIPTION OF HMP/YOI HOLLOWAY

Holloway was opened in 1852 as a mixed prison to serve the City of London. In 1903, due to a growing demand for space for women prisoners, Holloway became an all-female prison. Between 1971 and 1985 the old Holloway Castle buildings were demolished and replaced on the same site with the current establishment. The building was designed to meet the perceived needs of women prisoners, offering medical and psychiatric services for some women and a training regime for the majority. It was also intended that Holloway should be a local prison. The accommodation is split between five bedroom dormitories and single rooms, in a layout that is not ideal for staff supervision.

Holloway today acts as a local prison holding adult women and female young offenders remanded or sentenced by the inner London courts. The prison holds a significant number of foreign national women. On average they represent more than 30% of the population.

There are specialist wings for life sentenced prisoners, substance misuse treatment and mothers with babies in addition to a mental health inpatient assessment wing and a First Night in Custody wing.

Across the prison there are sufficient places in education, activities and work to enable all the women to take part in these activities each working day.

Holloway holds some of the most vulnerable female prisoners in the prison system.

Certified Normal Accommodation (CNA being the measure of uncrowded capacity): 533

Operational capacity: 533

Total population on 31.12.10 was 432.

Of these 223 were sentenced adults, 43 sentenced young offenders, 156 unconvicted adults, 10 unconvicted young women.

Ethnic breakdown of prisoner population on 31.12.10:

BME: 33.4%, White: 58.3%, Not declared: 8.3%

Ethnic and gender breakdown of staff on 31.12.10:

BME: 42.89%, White: 48.14%, Not declared: 8.97%

62.6% of staff were female

2. EXECUTIVE SUMMARY

- The Independent Monitoring Board is of the opinion that Holloway continues to be a decent prison where the majority of staff are hard working, doing their best to support prisoners in a caring and clean environment where diversity is fully recognised.
- The ambience of the prison is enhanced by the work of those women who keep it clean and by the efforts of the Gardening Team, who strive to enhance the outdoor environment for the benefit of women on exercise.
- Unfortunately the high levels of staff sickness and anxiety regarding cuts in funding have had a detrimental effect on staff morale.
- The Board is grateful to the management and staff of Holloway with whom a sound professional relationship has been built up and we are pleased to report that our observations are regularly noted by the current Governor.
- Facilities for those with disabilities are a cause of concern but the Board believes that this issue is now being investigated thoroughly. (Ref: 3.1)
- The long waiting time for dental treatment has been a concern throughout the year and the Board hopes that the dental service might be extended. (Ref:3.3)
- The external vetting of staff (by Shared Services or the Independent Safeguarding Authority) appears to take an exceptionally long time, an example being the case of a Band 7 nurse appointed in May but still not in post at the end of the year.(Ref 3.3)
- In the 2009 Annual Report it was stated, “As highlighted in previous reports the board is concerned that women with serious mental health needs continue to be held in custody. There have been cases where women are sectioned in Holloway, go to hospital where they are medicated, and on discharge return to prison where they cannot be medicated without their consent. Other women simply cannot cope in the community on release and leave prison unsupported, often returning within a short time. The board continues to ask that robust community support be put in place to assist these women.” This situation has not improved. (Ref: 3.2)
- The board continues to be extremely concerned that the transfer to hospital of some women with severe and complex mental health needs can take a very long time, causing further distress to the women in question and putting enormous pressure on both mental health and discipline staff in the prison. There have been three instances of severe delays in 2010. (Ref : 3.2)

- The Board believes that the HoST programme was most successful and hopes that a way can be found to revive the work done by this team. (Ref: 3.3)
- The need for a programme to address the abuse of alcohol is urgent. Two bids for such services were unsuccessful and a new programme which is proposed would not appear to be appropriate given the high level of alcohol abuse exhibited by women in Holloway.(Ref:3.3)
- It is also a concern that access to Learning and Skills may become limited in the case of women on remand, life sentenced prisoners with more than two years to serve and Foreign National prisoners. (Ref: 3.3)
- It is of concern that women who spend long periods in the Care, Separation and Reintegration Unit (CSRU) leave their cells for only very short periods and are often not offered purposeful activities. It is also hoped that SMARG meetings will recommence. (Ref: 3.5)
- The board is hopeful that recent advice offered to staff regarding the completion of Use of Force records will result in a more systematic approach. (Ref: 3.5)
- The development of Induction has moved on during the year but there is still much work to be done to ensure that the programme responds to PSI 52/2010. (Ref: 4.5)
- The Board is very concerned by the lack of programmes nationally suitable for all women, but particularly for those serving life sentences. It is to be hoped that Lifer training will be considered when appropriate for all Officers who work regularly on the Lifer Unit. (Ref: 4.3, 4.6, 4.8 and 4.9)
- The long running problems with the visits booking line are a source of real anxiety for prisoners and their relatives.(Ref: 4.12)
- As reported in 2009 Holloway's boilers have been in desperate need of replacement for too long and the temporary boilers are unreliable, especially in cold weather. At times the temperature in Learning and Skills and some residential areas has plummeted causing closures of classes and the need to provide extra blankets etc... Women who work all day in the kitchens often return to their units to find that there is no hot water for them to shower. The Works Department spends an inordinate amount of time and energy trying to keep the boilers going at the expense of other important jobs and there is a real possibility that the boilers will collapse entirely. This is a disgrace in a civilised society.(Ref: 4.13)

2.1 Questions for the Secretary of State

It should be noted that the questions asked in this section are explicitly for the attention of the Secretary of State and not the Governor of HMP/YOI Holloway or her staff.

- In the Holloway IMB's 2009 Annual Report concern was expressed regarding the length of time it took for the transfer of mentally ill women who are assessed as in need of a hospital bed. In reply the Under-Secretary of State for Justice said, "A prison transfer project is seeking to help commissioners to effect transfers within a maximum period of 14 days." When will this be put into effect?
- The HoST Programme was part funded by the Cabinet Office. Is there any likelihood of further funding in view of the fact that the programme was deemed to be successful?
- What is the future of the integrated Drug Treatment Service?

2.2 Questions for NOMS and the Regional Custody Manager

It should be noted that the questions asked in this section are for the attention of NOMS or the Regional Custody Manager not for the Governor of HMP/YOI Holloway or her staff.

- When will Holloway's boilers be replaced?
- The external vetting of new staff appears to take a very long time. Is there any hope that this can be a speedier process?
- Why are there so few sentence related programmes (soon to be further reduced) available for women? Why has the Sycamore Tree Programme been discontinued? Can anything be done to redress this situation?
- The vans bringing prisoners to Reception frequently arrive very late – which is detrimental to staff morale and upsetting for women who have come from court. Is there anything which can be done about this?

2.3 Questions for the Governor

- The Visits' Booking Line continues to be seriously compromised due to staffing issues making it difficult for both legal and family visits to be booked. This is particularly upsetting for women who are anxious to maintain contact with their children. Are there plans to ensure that the booking line is fully staffed thus making the system more effective?

- Staff in the Care, Separation and Reintegration Unit are dedicated and caring but it is of concern that long term residents are often unable to access Education or any meaningful activity. Is there an answer to this problem?

3. AREAS WHICH MUST BE REPORTED ON

3.1 Diversity

The Diversity team has seen many staff changes in 2010. Replacements were not made immediately when staff left and cross deployment also put pressure on the team in the second half of the year. DREAT meetings became irregular from July onwards. However, the new Governor indicated her commitment to this area on her arrival in October and meetings were resumed in November.

SMART data analysis was carefully studied in the DREAT meetings to check trends, and action taken where necessary. There were 262 RIRFs (Racist Incident Reporting Forms), Complaint 1 and 2 forms in 2010 as against 210 in 2009. Of the 262, 181 were RIRFs only and of these 127 were proven and 54 not proven. The Board is satisfied that RIRFs are properly investigated.

Prisoner representatives for diversity have done a constructive job over the year. Their numbers declined to one in December but have subsequently improved.

A Sexual Orientation Policy was drafted. Equality Impact Assessments have been completed for Complaints and almost completed on PASRO/SDP. Work has been undertaken to ensure that Complaint forms are more accessible for BME ethnic groups, especially those from 'White other' groups.

375 people have been trained in 'Challenge It, Change It' since February 2009. This has included staff and volunteers who work in the prison. There remain 295 still to train including some senior managers and governors.

Several events were celebrated during the year including International Roma Day and Black History month. Ramadan was well catered for within the prison.

Foreign Nationals

The number of Foreign Nationals has remained high throughout the year and has constituted about a third of Holloway's population.

Sole detainees (very low in number) are usually moved swiftly out of Holloway unless there are reasons for not doing so (e.g. refusal by a detention centre to accept a woman because of the nature of her offence or past behaviour). The two UKBA immigration workers have been on top of their caseload despite their hours being cut and liaison with Holloway staff has been good.

Hibiscus/Female Prisoners Welfare Project continues to provide an excellent service to Foreign Nationals. Its staff hold regular monthly meetings for them which are well attended, and they also provide valuable one-to-one work with individual women. They have on average 550 appointments per month.

DASS (Detention Advisory Service) visits Holloway once a month.

A Foreign National Needs Analysis was produced by a member of the Community Mental Health Team. It highlighted several issues for Foreign Nationals (family contact, language barriers and having an understanding of the system, healthcare, immigration, resettlement, racism/bullying and isolation, issues related to prison life). Many of these issues are not peculiar to the Foreign Nationals only and Hibiscus in particular works on all of these subjects with individual women. The need for translations of forms, the isolation of those with little or no English, and the fact that much research work based on Holloway has traditionally taken little or no account of Foreign Nationals were identified. Research proposals now have to address Foreign Nationals as well as other prisoners or explain why they are being excluded. Work has been done on the translation of forms. Hibiscus workers continue to help those with no English and one has set up regular meetings for the Roma prisoners who have felt especially isolated in the past. A continuing issue has been the high cost of phone calls for Foreign Nationals. Change in this area is a prison-wide need.

Disability

The number of disabled prisoners has averaged 23 during the year. The year ended with specific issues being discussed by the Board, the Governor and the Diversity team regarding the needs of disabled prisoners. The Board is of the opinion that work needs to be done to ensure that these issues are speedily investigated and addressed where appropriate and we believe that the Governor is taking this issue seriously.

3.2 Healthcare

NHS Islington commissions healthcare at Holloway and there are a number of mental health providers involved in the care of the women.

The Board believes that women in Holloway receive healthcare which is at least as good as they might expect in the community.

The healthcare tender process which took place in 2010 understandably caused some concern amongst staff but in November, the contract was awarded to the Central and North West London NHS Foundation Trust (CNWL) which currently provides some key healthcare services to Holloway, most staff being employed by HMPS. Continuity will therefore be maintained and work has started to assess the challenges of the transition.

Primary Health Care

Holloway's new Wellbeing Centre, a purpose-built primary health clinic, opened in October. The number of clinics has doubled to 13 per week and appointment waiting time cut to around 48 hours. Despite these improvements, only 60-65% of women actually turn up for booked appointments but the introduction of lists detailing appointments on the wings should ease this problem.

Constant staff shortages have been problematic for management. It has been difficult to recruit to healthcare posts due to the MoJ requirement that all posts are advertised on the MoJ website, which is not normally visited by healthcare professionals. CNWL plan to change this practice and use NHS Jobs. The lack of a Band 7 nurse, appointed in May but by the year end still awaiting the result of vetting, was solved only by the appointment of an exceptional agency nurse. However, it is hoped that the new centre will help create a more cohesive primary health team and engender peer support. So far, reports are positive.

It is hoped that the valuable and popular Woman's Health Clinic will continue under the new contract.

Dentist

The large number of women drug users suffering from severe tooth decay creates particular demands on dental services and with just one day of provision a week there is a constant backlog although the treatment is good. A new contract with East Coastal and Kent Partnership NHS Trust was initiated in December as were plans to refurbish the dental suite.

Pharmacy

Pro-active work by the Pharmacy on in-possession medication means that the continuity of care for the women is maintained and patients do not suffer gaps in their medication. The IMB would like to commend the good work carried out here.

Of Concern

- Dental waiting lists are long and remain a perpetual problem.
- Delays in the vetting process seriously affect staffing.

Mental Health Assessment Unit

This specialist unit is run by experienced clinical and discipline staff who know and understand their patients well and who treat them with empathy whilst managing their sometimes challenging behaviour and maintaining discipline.

In some cases women who have been assessed as in need of a hospital bed have been moved fairly quickly but there have been three examples of women being assessed and having to wait for a very long period of time to be hospitalised. In one case the IMB believe that it was only the continuous vigilance of staff which prevented serious self-harm or worse. At the year's end one woman, assessed in August, was still waiting for a bed.

The Tillson Day Care Centre continues to be a haven for troubled women where staff calmly engage them in various activities and it is a relief that the heating here has at last been fixed.

Unfortunately the Holloway Skills Training (HoST) programme which was praised last year has come to an end due to unfortunate circumstances outside the control of the prison. This programme was a combination of individual psychotherapy and group skills sessions, partly funded by the cabinet office and was deemed to be a success in helping women. The Board considers this a great loss.

Of Concern

- The Ministry of Justice's promised 14 day period between a woman being assessed as in need of a hospital bed and her transfer to hospital has still not been met.
- The untimely ending of the HoST programme is regrettable.

Community Mental Health Team

Between 60 and 80 women are being treated by CMHT at any one time – a high proportion of the prison population. Referrals are taken from all staff and are assessed as urgent or routine and assessment is generally fast except when there are a high number of referrals in one month.

The Care Programme Approach continues to go well with weekly meetings with the women and their community team.

Preparation and training for the "Hearing Voices" group has taken place ready for a start in the New Year. It is believed that this will be of help to a large number of women.

Substance Misuse Services

Drug treatment in Holloway is delivered under the Integrated Drug Treatment Service [IDTS], through the NHS National Treatment Agency for Substance Misuse. This service aims to increase the range of treatment, notably substitute prescribing and to integrate clinical and psychological services and prison and community treatment.

On arrival women are medically assessed and if treatment for drug or alcohol misuse is needed admitted to a specialist wing, staffed by experienced nursing and prison staff. The Care Assessment Referral Advice & Throughcare [CARAT] workers, with the medical team, talk with the women about options. They give advice about other services available inside and outside not just in relation to drug treatment but also regarding housing, employment and preparing for release. Interventions are offered through Short Duration Programme [SDP] and more in-depth

Prisoner Addressing Substance Related Offending [PASRO] courses. Adfam also offer a valuable service in supporting the families of prisoners with drug misuse problems. However, PASRO and Adfam will lose their funding in 2011.

Monitoring illicit drug use in Holloway is carried out by the Security Dept using Mandatory Drug Testing [MDT], intelligence and searching.

Methadone is used to maintain those women who can't manage a detoxification programme. This option is offered, as a majority of experts think prisoners leave in a more stable condition with less chance of re-offending or over dosing which can result in death. In Holloway the number of women on methadone varies but is generally around 20%. Most reside on a dedicated maintenance wing once they have left the drug admission unit. This facilitates timely dispensing of methadone to allow women to participate in activities but at the Service User Forum meetings women have complained of feeling stigmatised.

Substance misuse services are costly and intensive to deliver but with 35% of women prisoners needing immediate clinical intervention on arrival they are essential and the IMB believe them to be well and professionally delivered.

Of Concern

- The lack of resources available for alcohol abusers – an increasing group – is a concern. Two bids to the Department of Health for alcohol programmes were unsuccessful.
- The negative feelings of women on the maintenance wing might be addressed through peer support groups, on-wing activities and rewards for success.
- We are interested to note that the Coalition Government's Drug Strategy 2010 launched on 8th December 2010 appears to focus on individuals becoming free of their dependence, which would appear to be a total change of emphasis. The acronym IDTS does not feature in this strategy.

3.3 Learning and Skills

Kensington and Chelsea College (KCC) is Holloway's Offender Learning and Skills Service (OLASS) Education provider, 'Prospects' is the OLASS provider of Careers Information and Advice Service (CIAS). Overall Holloway's Learning and Skills Department has done very well this year, offering a wide choice of courses and encouraging the women to develop a learning plan and to discuss targets for their futures.

On arrival at Holloway women are given a one week Induction Education Timetable which helps them to identify courses in which they have an interest. Since November an individual review is arranged for those who do not respond, to encourage and help the development of a learning plan and to discuss targets. This is often useful in highlighting those women who have reading difficulties, dyslexia etc.

The Department is driven by accreditation and measured KPTs, yet has succeeded in providing a rich variety of extra-curricula courses thus stimulating a diverse and often short stay female population who might otherwise have been uninterested in more formal education. Sadly, in many cases these non-accredited courses are not officially recognised by the funding body.

Educational Levels 1 and 2 are well covered but there is no Level 3 provision other than that offered by distance learning and only sentenced women serving more than 1 year can apply for higher education funding.

Alongside a number of courses that encourage preparation for employment, women are able to gain City and Guilds accreditation in Cleaning and Support Services and Holloway has formed links with both local hospitals, the Royal Free and the Whittington, where women may be offered employment on release.

KCC have reinstated short courses in carpentry, painting and decorating and basic plumbing and electrics which are delivered over a period of two weeks. These courses are popular and well attended.

Courses in English for Speakers of Other Languages (ESOL) can be effective provided the women stay at Holloway for long enough.

Outreach Educational Provision

One staff member offers education to the women unable to come to Education. She sees the Women on Healthcare, CSRU, those with a disability or with mental health problems and those being bullied. There are on average 16 students doing in-cell education who receive a weekly visit but it is often difficult to motivate these women.

Careers Information Advice (CIAS)

The OLASS CIAS contract with 'Prospects' focuses on a) ensuring that learners' progress is formally recorded on to the national Learner Records Service and b) that the educational needs of women who are within 3 months of release are addressed in terms of their enrolment onto suitable courses in the community. The Prospects staff work in close liaison with the Resettlement and Job Centre Plus teams.

A job check 'phone line is available for women to get advice about the types of employment that might be available depending on the nature of their offence. Disclosure is now a little easier as the law is changing and companies are more prepared to give the women a second chance.

The Library

Library services are provided by the Borough of Islington and the Library is at the centre of many interesting projects which appear to be well attended, including monthly reading groups run by two English lecturers from Roehampton College, a monthly Learner Forum where aspects of education, qualification etc are discussed, 'Words on Wednesday' (WOW) held three

times a month which includes a creative workshop, a film discussion group and a reading group. There is collaboration between the librarians and teaching staff focusing on words and music including poetry and rap and students' work is regularly submitted for publication. Those new to reading have been encouraged to participate in the Six Book Challenge.

Exciting plans are being made for future developments including a radio station for which training has already started.

Of concern

- The Board believes that three accredited courses which are highly relevant to helping the women find employment on release – Cleaning and Support Services; Food and Hygiene Safety Certificate and the Health and Safety Certificate have not been encouraged strongly enough by either the Labour Board or the Landing Officers.
- An important opportunity has been missed by not insisting that jobs within the prison are conditional upon completing the above courses.
- It has been suggested that as a result of the Government's Offender Learning Review education funding may be withdrawn from Lifers with more than 2 years to serve, Foreign Nationals and those on Remand.

3.4 Safer Custody

This year the Safer Custody Committee delivered training to meet the PSO requirement to have all managers trained to case manager level and also worked closely with line managers to ensure that staff write quality entries in all ACCT documents. Most of the Samaritans phones are working and they are currently looking at ways of ensuring maximum availability across Holloway. Samaritans visit every Saturday and see women who have been specifically referred because they need support beyond or different to that provided by listeners and staff.

Self harm

In some months a number of prolific self harmers have dominated a significant rise in self harm incidents. The Safer Custody committee decided it would be beneficial to create a booklet for prisoners explaining the process and purpose of the ACCT document including – What is an ACCT? Why it has been started? What you can expect to happen and who is going to help you?

The IMB has noted that Senior Officers are finding it hard to organize multi-disciplinary ACCT reviews and other agencies have difficulty in finding out when and where the reviews are taking place.

The Death in Custody action plan has wisely been merged with the healthcare DIC action plan.

Of concern

- Multi-disciplinary ACCT reviews require organisation.

Violence Reduction

Staff are encouraged to ensure that all reported violent incidents are dealt with robustly. Violence Reduction staff work closely with reception staff to learn from and improve their response to the bullying exit questionnaire.

Listeners

An increase in the number of listeners by the end of the year has helped to spread the workload and provide a service for women in distress. A further listener recruitment is planned for February 2011.

Death in Custody

Sadly, 2010 saw a death in custody. The IMB were alerted shortly after the death and observed that all procedures were followed. These were carried out with care and compassion which was important for the women particularly as many knew the deceased.

3.5 Segregation – Care, Separation and Reintegration Unit (CSRU)

The number of segregations has varied between 11 and 24 a month and the IMB is usually informed each time a prisoner is held. Most segregations last for a few days, with a smaller number lasting longer, generally under GOOD (Rule 45/YOI Rule 49). This year saw the detention of a few long-term residents who have at times been extremely demanding of staff and, at times, dangerous (see below). The IMB is satisfied that all women held on CSRU have received a good level of care and attention with consistent opportunities for exercise and time out of their cells. The provision of constructive activities to women on the CSRU has been less good. For example, provision of in-cell education seems to have been patchy with CSRU officers waiting, somewhat passively, for offers from the Learning and Skills Department. 'Activity boxes' have not been available and excessive time may be spent by prisoners sleeping or watching television.

Unfortunately record keeping has been lacking and with no regular SMARG reports produced by the psychology department or meetings - other than one held in May - there has been no analysis or oversight of trends of the regime provided or of unit management.

In 2010 the IMB and prison staff were very concerned about one long-term resident who remained on 3 unlock for many months. Her dangerous and frightening behaviour which included assaults on several officers meant she was restricted to an extremely limited regime with minimal interaction. Despite numerous attempts by healthcare staff to have her assessed

and moved to a hospital it took months before she was accepted by a medium secure psychiatric unit; and while her confinement was deplorable, it was hard to see that any other choice was open to the prison management as they tried to explore all options.

With regard to the small number of other women who also lived on the unit for weeks or months managers generally tried to move them as soon as it was deemed safe. CSRU reviews are held within time limits and the IMB is usually informed and attend whenever they can thanks to a revived practice of holding reviews at a regular time – a welcome development. The attendance of healthcare staff at reviews has improved in the past year, although there are times when a more multi-disciplinary meeting would be an advantage. CSRU reviews have not always been rigorous about setting and then monitoring targets for prisoners. This is a concern because it can allow both staff and prisoners to develop the assumption that the prisoner will continue to be segregated regardless of her behaviour.

A number of women on open ACCT documents have been held in the CSRU, sometimes for long periods. The IMB is satisfied that this happens only when all alternative arrangements have been explored. In these cases enhanced ACCT reviews are held regularly.

Of Concern

- Prisoners who stay for long periods on the CSRU spend too much time alone in their cells with no activity provided, other than sleeping or watching television.
- Only one SMARG meeting held during the year means there has been little effective oversight of the life on the unit, trends in decisions to segregate or consistency of regime provided to prisoners on the unit.
- The IMB has been extremely concerned about the holding of mentally ill women on the CSRU for long periods in very isolated and unsuitable conditions. This problem is linked to the excessive time it takes to transfer some women who have been assessed as in need of a hospital bed which is mentioned under Healthcare.

Special Accommodation

On numerous occasions the IMB was informed that a woman was being held in Special Accommodation, however, it appears that there has been a misunderstanding of terminology and most of these cases were not Special Accommodation at all because only clothing and personal items were removed and not furniture. The board believes that these decisions were made with care and only when it was necessary to prevent a serious risk of self harm and there was no occasion in 2010 when the IMB made an objection to such arrangements or to the use of Segregation. The Board is discussing how in future it might be informed of such arrangements which fall outside the description of Special Accommodation.

During June one woman was held in continuous Special Accommodation for over a week. This was a very unusual situation, where keeping an extremely vulnerable individual safe required enormous staff time, attention and intervention and an IMB member attended the daily reviews. Fortunately the woman was eventually transferred safely to hospital. The IMB is continuing to

question the difficulties which were encountered in arranging her transfer to a more suitable environment but so far with no success.

Use of Force

Use of force was recorded 151 times in 2010 compared with 160 in 2009. 31 interventions were planned and 119 were spontaneous. Over 40% of incidents involved women in Healthcare and were usually caused by the removal of ligatures. The majority of the other cases were 'non compliance' or assaults on staff. Many incidents involved the same women. For example, in the first half of the year four women accounted for 34% of use of force. Senior managers examine all documentation which is reviewed and analysed by a monthly Use of Force committee. The data analysis has, however, been of somewhat limited scope and has not included reference to age, disability, reasons why force has been used or the number of times individual staff have used spontaneous force. In the past year there has been no evidence of excessive force, rather that force used has been necessary, reasonable and proportionate.

Of Concern

- There are ongoing concerns regarding the variable standards of the quality and content of Use of Force Records in terms of both the consistency (between logs of the same incident) and in the overall clarity of reporting of the incident. Whilst these have improved and many of the reports are of good quality, some paperwork still lacks requisite content and detail. The Head of Operations and Security has recently circulated detailed guidance to all staff to help improve report writing.
- During the year some planned interventions were not filmed. From now on every effort will be made to ensure that these are recorded both for the protection of prisoners and staff but also as the films can provide valuable learning opportunities.

4. OTHER AREAS OF THE PRISON REGIME ON WHICH THE BOARD HAS ISSUES TO REPORT.

4.1 Adjudications and Reviews

Adjudications are held every day except Sunday and an IMB member is on duty to attend one each week with attendance recorded at 42 sessions in 2010. Records show that most believe they were conducted fairly and carefully with consistent decisions.

The Deputy Governor chairs quarterly Adjudications meetings, but unfortunately the IMB was not informed about them and therefore did not attend.

4.2 Catering and Kitchens

The challenge faced by the kitchens to provide decent food on a tight budget is acknowledged and applauded. Their efforts were rewarded in March, when the kitchen was awarded a 5 star Excellent rating by the Environmental Health Agency.

The kitchen's efforts to meet the needs of all women was well demonstrated during Ramadan when not only were those fasting provided with special menus but distinctive Eid food was prepared by Muslim prisoners. A new menu offering five choices for lunch and five in the evening was introduced in September but the rising costs of food and transport (due to fuel rises)) mean that this is already under review.

Recruiting and training kitchen workers is an ongoing problem due to the temporary nature of Holloway's residents.

NVQ

The kitchen currently has two staff who are qualified as NVQ Assessors and another NVQ Internal Verifier. However, while many of the women who have worked in the kitchen have tried to achieve NVQ levels 2 and 3 it has been difficult to retain them due to transfers or release. Plans are afoot to deliver the NVQ in smaller modules which can be transferred to other prisons or outside colleges.

4.3 Chaplaincy

This multi-faith team covers the major world religions: Christian (C of E, RC, Pentecostal, Baptist), Muslim, Jewish, Hindu, Sikh, Buddhist, Orthodox and Pagan, and additional religious leaders are frequently invited in to provide for religions not included here or to offer ministry in other languages when needed.

A wide range of timetabled services, prayer and faith meetings are provided, mostly in the multi-faith room or chapel, but also in Healthcare and Ivor Ward, and all the major religious festivals are celebrated. All these services are inclusive and attended by women of faith and others who simply value the supportive group experience. Chaplains make daily visits to all women in CSRU, Healthcare and to all new women on their 2nd day, they also provide enormous support to women who are unwell and those who have received bad news.

Of concern

- The chaplains regret the decision to end Sycamore Tree courses in victim awareness/restorative justice in London as they believe that this course is a good preparation for further restorative justice programmes and is valued by the women.

Prison Visitors

At present there are only 8 Prison Visitors. It seems that this is a sufficient number to cover the needs of the women, although more Rumanian and Bulgarian speakers would be welcome.

4.4 Induction

Several criticisms were made by HMIP on their visit earlier this year who reflected that: overall induction was poor; the needs of Foreign Nationals were not being met; there was not enough management involvement with too much responsibility being given to peer supporters; and that the review of induction review had taken too long.

The Induction Review was finally finished in the summer but management changes meant the reviewed document was not implemented until the autumn. This was to be trialled for 3 months. The new programme is very long and difficult for those with low literacy levels and for Foreign Nationals. It is still presented in one morning session. The Foreign Nationals are able to have their information completed via the use of the Language Line which is a very laborious and expensive process.

The new PSI 52/2010 recommends that Induction is held in 2 phases:

- Phase 1 for all new prisoners
- Phase 2 for all new prisoners and those ex prisoners/on transfer
- That it takes into account learning abilities and language issues
- To use visual, oral and written methods

A laptop and projector have been ordered but a 3 way phone is needed for Foreign National interviews. The touch screen computer needs to be updated and the whole Induction process needs to be changed to fulfil the requirements of PSI 52/2010 recommendations.

Of Concern

- Induction needs concerted input by management to improve this very important department.

4.5 Lifers and Indeterminate Sentenced Prisoners (IPPs)

There are currently 24 Lifers and 4 IPPs a considerable drop in numbers due to careful assessment leading to appropriate transfer. The majority of Lifers live on the Lifer Unit which is clean and well kept. Most Lifers work or attend Education and some enjoy the weekly music sessions but activities on the unit are very sparse.

Lifers have benefited from participation in a number of programmes such as the Sycamore Tree and HoST but both of these have lost their funding. Access to psychotherapy has been good but there is a real lack of appropriate courses for Lifers, especially in the very early stages of their

imprisonment, when programmes focusing on Anger Management and Domestic Violence would be of enormous benefit.

Lifers speak well of the staff who work on the unit, not all of whom are lifer trained. It is disappointing that the popular Lifer meetings have not taken place regularly, partly due to staff shortages.

There have been concerns regarding the behaviour of some residents who have formed cliques and there was a very worrying bullying situation which took some time to monitor and to manage but which has hopefully been successfully dealt with.

Of Concern:

- Lack of appropriate courses for life sentenced women.
- Lack of lifer training for officers if and when appropriate.
- Lack of suitable activities and lifer meetings.

4.6 Mother and Baby Unit and Pregnant Women

The Mother and Baby Unit has been well run by MBU trained officers who have maintained a positive culture encouraging and enabling women to take responsibility for themselves and their babies whilst providing support when needed. The women overall have confidence in the crèche workers who provide what seems to be a stimulating, calm and emotionally warm time for the babies in their care. A range of other professionals and agencies continue to address medical and other needs. The Healthcare Room has been re-furnished, as has The Lights Room, which was formally opened by Lord Ramsbotham, patron of the funding agency, Babies in Prison.

Babies stay on the unit for up to nine months and in 2010 there was only one case of concern when a transfer of a mother and her baby to a unit taking older babies was delayed till the baby was almost 11 months old. This was not considered in the child's best interest and caused by the reluctance of 2 other prisons to accept them and the absence of robust management by social services.

Several staffing issues have arisen during the year. This included an attempt to reduce the weekday daytime staffing to one officer which was unrealistic given the workload and led to the reintroduction of another staff member. Since April, the level manager has been a temporary appointment but hopefully longer-term arrangements will soon be finalised and help engender a longer-term approach.

Of Concern

- The team, apparently responsible for the specialist Mother and Baby training for officers, has recently cancelled a course, with the possible effect that officers without specialist MBU training may in future work regularly on the unit.

Pregnant women are, on the whole, well supported medically, by voluntary agencies and by the prison regime. The National Childbirth Trust is running an anti-natal training program for officers and nurses. Crucial emotional support has been provided for women who have miscarried, had a stillbirth or been separated from their babies at birth or during their first few months. This is provided by Care Confidential, the Post-Adoption Centre and from within Holloway.

The 3 monthly Maternal Health and Paediatric Care Providers meeting, attended by senior medical staff from both Holloway and The Whittington Hospital as well as senior Holloway managers, is important in co-ordinating the cross-site management of women's pregnancies, childbirth and post natal/neonatal care. Tensions inevitably arise from time to time, requiring mutual understanding of the very different hospital and prison cultures. It is hoped that tensions recently observed in senior Whittington staff at this meeting can be resolved in the interests of all, especially the women patients.

4.7 Probation

The Probation department has continued to provide an excellent service despite the reduction of the team from 4.5 to 4. There will be no replacement although the workload remains the same. Each Probation officer has around 19 cases including Lifers, IPPs, OMS 2 (high and very high risk), and PPOs. The figures have hardly changed over the year with totals of 82 in January and 77 in December. Probation staff are concerned about the lack of courses for the women and the Probation contract is under review.

4.8 Psychology

In April the Head of Psychology left Holloway and the future of this service was very uncertain, however the eventual appointment of a new Head of Psychology in October gave the board hope of an improvement in this area. A needs analysis was initiated and in December all women were invited to complete a questionnaire.

The only programme offered is the Thinking Skills Programme and the lack of programmes available for women in general is detrimental to women seeking parole. It is hoped that some new programmes will lead to internal accreditation.

Unfortunately, work which had started to help women with learning disabilities ended with the departure of the trainee psychologist who was leading the group.

Areas of concern

- As was reported in 2009 there is still no Domestic Violence programme available in Holloway nor one for those affected by prostitution. 1 in 4 women in Holloway are affected by one or both of these and nothing accredited is on offer.

- There are many women in Holloway who have learning disabilities and the work started to look into this issue has lapsed.

4.9 Reception

The HMIP report earlier this year made several criticisms of the Reception department. Treatment of women by staff was inconsistent and could be curt and unhelpful, processing took too long, there was a lack of privacy during interviews and healthcare arrangements were not good and not in confidence. As a result an action plan was developed which new staff were tasked to carry out.

The following improvements have been helped by moving three Senior Officers to work in reception, staff wearing name badges and the introduction of monthly staff meetings. The area has been refurbished and is cleaner and more welcoming. Tea and toast is provided for morning arrivals and hot food in the evening. Staff are monitoring the length of time it takes to process each new arrival.

Reorganising the reception layout will start in early 2011. The plans have been drawn up with full involvement of the staff and the Governor who is very keen for changes to be made. The reception healthcare refurbishment is also due to start soon. PACT staff continue to interview and support new prisoners from Monday to Friday evenings. Their contract is under review. The enthusiasm and commitment shown by the Staff and the changes made so far augers well for the future.

Of concern

- Late van arrivals. This is a persistent problem and a log has been kept since July. In November 63% were late.

4.10 Resettlement

The resettlement department is running smoothly with plenty of support from various organisations – St Mungos, St Giles Trust, CAST, CIAS, Working Chance and Job Centre Plus.

Job Centre Plus organises the H.O.P.E course (Holloway Opportunity to Progress to Employment) which is well attended; the course improves the employability of the women after being released and covers CV preparation, filling of application forms, interview techniques and mock interviews. The Job Club is still running and remains part of the plan to develop employment provision for prisoners.

There are full time Bail and Legal service Officers who provide information regarding legal services, including legal aid and bail applications. They also make sure that court papers are prepared for all unsentenced women.

4.11 Security

Security is well managed by a strong team although continuity has been challenged by personnel changes throughout the year. In addition the Intelligence Liaison Officer funded by

the Metropolitan Police only works on a part time basis as she is shared with HMP Pentonville. Multi disciplinary meetings have been held regularly each month, and have been well attended, focused and sensitive to the need to balance decency with effective security arrangements. The Security Intelligence Officer provides a monthly report based on and incorporating a comprehensive range of intelligence data. Intelligence assessments are reviewed monthly and action points agreed and acted upon. As in 2009, the department has regularly received over 300 SIRs (security information reports) per month, mostly from discipline staff. These are generally good quality submissions based on sound observations.

The Security department has tried to generate a number of initiatives, including the launch of a Security Communications Strategy and a series of focus weeks, designed to drive up standards and improve Holloway's security perception and performance. Dog handlers and the dedicated three person Security Team have been deployed more frequently and have a greater presence and increased visibility in Visits, Reception and around the prison.

Despite the various security initiatives 2010 saw the worrying emergence of a particularly insidious gang of women who instigated intimidation and fear across the prison. The main participants and perpetrators have been identified and dealt with while a major enquiry is investigating why and how the gang was able to form and operate undetected for several months. Measures have been put in place to ensure that the gang is not able to re-group or re-invent itself. The re-introduction of a part time Intelligence Analyst (a full time post which was vacant for some months) who will assist in analysing information should also help.

Of concern:

- The emergence of a gang culture which, once identified, was dealt with effectively. At the year's end regular monitoring was in place.

4.12 Visitors' Centre, Booking line, Visits

Visitors are still experiencing severe problems getting through to the Booking Line with the length of time they are left on hold before getting through being a serious concern. Others are extremely frustrated that it takes so long to book a visit.

These problems have been caused by the ongoing shortage of staff manning the booking line throughout the year. Staff sickness and annual leave have not been covered while staff have been removed to carry out other work or multiple duties. On many occasions the booking line has been closed over the weekend because there have been no staff available.

A Christmas Family Day event was very well attended by prisoners' relatives and children. The feedback from the prisoners was very positive. It is also a pleasure to report that the monthly family days are a great success.

4.13 Works

As last year, as soon as the winter weather started too much time and energy has been focused on constant repairs to the aged boilers. Yet again there have been areas of the prison which have lost all heating and contingency plans have had to be put in place while repairs were carried out. The Board continues to be concerned that there could be a complete breakdown.

4.14 Young Women

2010 saw the relocation of the Young Women (YOs) to the main units. This decision was taken partly as a response to national policy but also to allow a more creative use of staffing.

Prior to their relocation there had been fairly frequent meetings (intended to be held once a month) and many of the points that the YOs raised would resonate with women throughout Holloway such as the cost of canteen. Other points which perhaps reflected their needs included their desire for vocational training e.g. plumbing and painting rather than the courses (education) most of which they had done at school.

Opinion is split over locating YOs across the prison, however, it is common practice through the rest of the estate so Holloway was unusual in offering the two wings. It is also worth noting that some young women have always been held on units with the older women as this was seen as the only way to improve their behaviour and successfully manage them – interestingly, the effectiveness of this was rated at 50-50.

It is too early to draw any conclusions about how the young women have adapted to integration but despite problems on the YO's units they were, at time of closing, well run and the women themselves praised the regime and the Officers with whom they generally had a good relationship.

5. THE WORK OF THE INDEPENDENT MONITORING BOARD

Each week at least four board members visit the prison, two on rota, one dealing with applications from the women and one monitoring adjudications. Members also observe at meetings relevant to their Special Areas. The Board has met monthly with the Governor and the Head of Healthcare or their representatives.

Three members attended the National Conference (one an NC member). The Board has held regular training sessions prior to Board meetings, usually conducted by a department from within the prison but sometimes led by board members with appropriate expertise. Board members have also attended training with staff, for example, Diversity training, Hostage Taking, P-NOMIS, a number of Clinical Forums organised by the Healthcare Department and events organised by PeTAR (Prison Education Training and Research). Members have been involved in the training of new staff, discipline and civilian, to inform them of the role of the IMB.

National courses attended included the Vice Chairs' Course and Mental Health. One member attended the Alcohol Consultation event. Training visits took place to four London hostels which regularly house Holloway women on release and Board members hosted visitors from the Ukrainian Kharkiv Institute, HMP Bronzefield, HMP Send, IRC Yarlswood and HMIP in relation to OPCAT.

Each board member has a Special Interest area and attends meetings as an observer. Board members attended an inquest into a Death in Custody. A successful Annual Team Performance Review was held in October with all set targets completed by the year end.

The Chair met with the Governor monthly, attended quarterly meetings of the London Area IMB Chairs with the Area Manager and half yearly Women's Policy Group meetings.

The board continues to be grateful for the good working relationships which have been fostered with management and staff.

5.1

BOARD STATISTICS	
<i>Recommended Complement of Board Members</i>	20
<i>Number of Board members at the start of the reporting period</i>	17
<i>Number of Board members at the end of the reporting period</i>	19
<i>Number of new members joining within the reporting period</i>	5
<i>Number of members leaving within reporting period</i>	3
<i>Number of attendances at meetings other than Board meetings</i>	130 (estimated)
<i>Total number of visits to the prison (including all meetings)</i>	675
<i>Total number of applications received</i>	595
<i>Total number of segregation reviews held</i>	Figures not available

5.2 PRISONER APPLICATIONS TO THE BOARD

Code	Subject	2010	% of Apps. received	2009	% of Apps. received
A	Accommodation	22	3.7	26	6.0
B	Adjudications	34	5.7	8	1.8
C	Diversity related	9	1.5	2	0.5
D	Education/employment/training	31	5.2	16	3.7
E	Family/visits/telephones	42	7.1	16	3.7
F	Food/kitchen related	12	2.0	19	4.4
G	Health related	106	17.8	109	25.1
H	Property/Mail	108	18.2	91	21
I	Sentence related	37	6.2	27	6.2
J	Staff/prisoner/detainee related	84	14.1	61	14
K	Transfers	16	2.7	12	2.8
L	Miscellaneous	94	15.8	47	10.8
	Total number of applications	595		434	

