



# HMP Woodhill



**Independent Monitoring Board**

# **Annual Report June 2009/May 2010**

## Section 1

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### 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 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.

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## Section 3

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### HMP WOODHILL

#### 3.1 Role and Accommodation

One of the Establishment's main roles is that of a local prison serving the Crown and Magistrates' Courts. The prison holds male remand and sentenced prisoners of eighteen years old and above.

HMP Woodhill is one of eight prisons within the High Security Estate. It is a highly complex prison. As well as having a Local Prison function, HMP Woodhill holds Category A prisoners, Young Offenders, has a Close Supervision Centre (CSC), housing some of the most difficult prisoners in the system, and two Protected Witness Units. The accommodation consists of six separate House Units and a First Night Centre.

In March 2008 HMP Woodhill's Operational Capacity (OC) was increased from 807 to 819 prisoners. Woodhill's Certified Normal Accommodation (CNA) is 661.

#### 3.2 Contractors, Agencies and Voluntary Organisations

Manchester College – Education contract

Primary Care Trust – Healthcare

Lead Psychiatrists (MHIT and CSC)

Aramark –Kitchen contract

DHL - Canteen

Probation Service

Police Liaison

Samaritans

Citizens Advice Bureau

Chaplaincy volunteers

Drug Strategy Group

Careers Advice Service

St. Giles Trust

Clear Springs

Pact (Prisoners Advice and Care Trust)

Shannon Trust

Prison Me No Way

Red Cross

Age Concern

## Section 4

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### EXECUTIVE SUMMARY

#### 4.1 Overall Judgement

HMP Woodhill is a complex, diverse establishment and consequently very demanding to manage. It has been a particularly challenging period with a new Governing Governor taking office, changes in the Senior Management Team and three inquests against a backdrop of unprecedented change and budget constraints. HMP Woodhill continues to effectively balance the needs of the main population with the security requirements for the management of the Category A population.

The inquests highlighted concerns around the delivery of Healthcare and the complexity and lack of clarity within the management structure. The Head of Healthcare has made steady progress in addressing these weaknesses. HMP Woodhill Senior Management Team has effectively and robustly responded to recommendations.

The Board is delighted that the Workshops are at last being built and nearing completion. The Establishment has struggled to meet its requirements for purposeful activity and this new facility will at last offer the opportunities for work based training that are so badly needed.

Decency and Safety are well established and Diversity continues to be driven forward. There are some excellent initiatives in place for older prisoners and those with disabilities. Meetings have a much wider multi disciplinary representation. The sharing of information across units is improving. Facilities have been extended and improved for prisoners held on discreet units in HU6. The Board welcomes the refurbishments and improvements that have been made to the fabric of the prison and to the living and working environment for prisoners and staff.

The Board raised concerns in last year's report that changes were not given sufficient time to bed in. During this reporting year the Prison Service introduced two major initiatives and the scale and speed of change has increased to unprecedented levels. The Establishment has had to change from LIDS to C-NOMIS - the new National Offender Management Information System, work through Workforce Modernisation, re-profile, and finally implement In Vision - a central detailing model. This has been achieved whilst managing continuing staff shortages and driving down costs to achieve identified savings. HMP Woodhill has successfully met the Restructuring requirements and the National Management benchmark figure for efficiency savings.

In May 10 sickness levels were at an all time low and the Establishment had risen forty seven places on the Prison Performance Rating System.

The impact of such rapid and widescale Nationally driven change, together with budget restrictions and staff shortages, has had an effect on staff morale. However, Senior Management recognises the pressures on staff, particularly around the challenging introduction of Invision and C-Nomis. Considerable effort and resource have gone into managing this Business change. The Governor has introduced Strategic Briefings to all Managers, staff recognition including Team of the Month, Staff and Governor Forums and development meetings for all Managers.

The Board fears that for the Ministry of Justice to meet the additional savings required going forward by continuing to drive change at this rate, a detrimental impact on prisoners, staff, and the work the prison does in preparing prisoners for release may result.

## **4.2 Issues of excellence not requiring a response**

The email visits booking line is up and running.

The 'email a prisoner' initiative is working well with over seventy emails being processed by the Post Room each week.

Open ACCT documents now follow prisoners as they leave their units to attend activities, visits, Healthcare appointments and adjudications.

Monthly Family Visit Days take place allowing Fathers to spend valuable time with children.

Window grills have arrived and are being fitted. They will stop the unsightly and unhygienic litter gathering below the windows on the units.

Considerable improvements have been made in the Kitchen by painting and reorganising the area.

Considerable improvements have been made in Reception. There is a new counter area, new paint throughout, electrics in holding cells, and an information board.

The Governor is now responding directly to issues raised in IMB Rota Reports.

The Head of Healthcare has taken responsibility for the Mental Health Team and Substance Misuse Therapy which are now integrated into the Health Team.

A comments book has been installed in Visits where visitors can note their observations. The Board welcomes the proposal for a clinic where a Governor will be available in the Visitor's Centre to listen to prisoners' families.

The Disability Awareness Day, 23/9/09, was a great success with 14 stalls and 256 prisoners and 40 staff attending.

There have been two Security Fairs for all staff to attend, promoting awareness and understanding of Security.

Non flexible Personal Officer work is included in the new detail.

Woodhill won the Closed and High Security Category and was awarded runner up with a Highly Commended at the Prison Service Wildlife Awards.

The grounds and gardens have been extended and developed to include the growing of fruit and vegetables and a Faith Garden.

The Board welcomes the initiative of Integrity Testing of prisoner Complaints/ Requests.

Healthcare Partnership Board Meetings are back on track and are now held monthly.

Six prisoners raised an impressive £1955.50 for Children in Need covering 874 miles (Lands End to John O'Groats) on treadmills, static bikes and rowing machines.

The Official Prison Visitor scheme is being initiated by Chaplaincy. The Co-ordinating chaplain is the Official Prison Visitor (OPV) Liaison. There are four volunteers who are awaiting CRB clearance and then the scheme will be publicised and rolled out.

Fortnightly reviews take place of all in-patients located in HealthCare

The installation of a computer terminal in the Healthcare Inpatients Wing Office.

The prison celebrated the Diwali festival for the first time on October 17<sup>th</sup>.

A hot option is now being offered to prisoners at lunchtime.

The implementation of the new core day and new profiles give prisoners an additional half an hour out of cell each day.

The Young Offenders and pupils from Stantonbury Campus worked together to produce a DVD on Knife Crime.

The Prisoner Unite to Keep Kids Addiction Free (PUKKA) project has been extended to include work with Muslim pupils

An improved score for the Measuring Prisoners' Quality of Life (MPQL)

### **4.3 Issues of concern requiring a response**

#### **4.3.1. Matters on which a response is requested from the Minister for Justice**

The Board remains deeply concerned about the extended period of time and perceived inefficiency taken for Counter Terrorist and other security checks. Recruitment remains a constant challenge. There are vacancies for Officers, OSG's and Healthcare staff. In February 2010 there were candidates who had been waiting for the vetting procedures to be resolved since May 2009. 6.1,5.3

*This, as highlighted in the 2008 - 9 Annual Report, needs to be addressed as a matter of urgency.*

The Board continues to be concerned by the number of overcrowding drafts. These have now been extended to include remand as well as convicted prisoners. They have a serious negative impact on the prisoners involved. The Board wrote to the Prisoner Movements Unit in April 10 and were disappointed in the quality of the response which neither addressed the problem nor explained the rationale behind the decisions taken. 6.2

Too frequently prisoners who are transferred to HMP Woodhill have to restart their HDC paperwork as it is not forwarded by the previous establishment. The Board is concerned that there is no apparent standardisation for the process of transferring documentation from one prison or probation area to another.6.2A

The Board requests that consideration is given to improving the communications between outside probation services and the prison. 6.2A

The Board is concerned at the length of time some Foreign National prisoners are held post- sentence at HMP Woodhill, beyond the control of local management. The Board would welcome any initiative that would improve communications with Embassies. The Board would also welcome the streamlining of information-gathering by the different agencies involved, thereby reducing the repetition of work.6.2B

The Board is concerned at the length of time prisoners with severe mental illness remain at HMP Woodhill. 5.3A

The Board requests consideration is given to requiring private sector prisons to use C-NOMIS.6.7

The Board would welcome consideration for equal access to dental treatment for remand and convicted prisoners. 5.3

#### **4.3.2 Matters on which a response is requested from the Director/Area Manager**

The Board continues to request that funding is secured for additional fully compliant Disabled Designated Accommodation (DDA) cells, Constant Watch and Safer Cells.5.1, 5.4, 6.2

The Board requests that the promised funding for the refurbishment of the Visits area to include the Visits balcony and disabled access to toilet facilities is honoured. 5.1, 6.2

The Board continues to request that funding is secured to complete the much needed refurbishment of shower blocks on House Units. 6.1

The Board continues to request that funding is secured for the refurbishment of the kitchen to meet the needs of the increased population. 6.1, 6.6

The Board requests that consideration is given to establishing a laundry at HMP Woodhill. 6.1

The Board requests that consideration is given to funding improvements to Reception. 6.1

The Board requests that consideration is given to requiring the supplier to increase the number of telephones available for prisoners. 6.1

The Board requests that consideration is given to improving the speed and efficiency of the transfer of paperwork for prisoners who are moved within the CSC system. 5.5.D

The Board requests that consideration is given to ensuring office space and the number of PCs available for staff is sufficient for their needs. 6.1, 6.2A

The Board requests that consideration is given to improving access/facilities for disabled and older prisoners. 5.1, 5.2

The Board requests procedures and support for the implementation of IT systems are improved and that SLAs are put in place with provider and support organisations. 6.7.

#### **4.3.3 Matters on which a response is requested from the PCT and SHA**

The Board continues to be deeply concerned with the longstanding shortfall in all Healthcare staff. *This, as highlighted in the 2008 - 9 Annual Report, needs to be addressed as a matter of urgency.*

The Board requests that the establishment of a Primary Mental Health Team is pursued with urgency. 5.3, 5.3A

The Board requests that consideration be given to review the selection process for acceptance into secure hospitals. 5.3A

The Board continues to have concerns around the efficiency of the appointment booking service and requests that sufficient resource is given to ensuring delivery of a system that services all prisoner groups. 5.3

The Board would like consideration given to a system whereby evening medication is given at a more appropriate time. 5.3

The Board request consideration is given to provide out of hours basic pain relief for prisoners. 5.3

#### **4.3.4 Matters on which a response is requested from the Prison**

The Board requests that the telephone booking line and processes for booking visits are improved and closely monitored to ensure delivery of an effective and timely service. 6.2

The Board requests assurance that the internal pin phones will be fully and effectively resourced.6.2

The Board requests assurance that all Healthcare staff are sufficiently supported and trained in order that they are confident in wearing their name badges.5.3

The Board requests that additional staff are trained as Negotiators for Incidents following an exercise which highlighted insufficient numbers in the Establishment. 6.1

The Board requests that consideration is given to risks associated with gang culture when high numbers of FN prisoners are housed together on a Wing. 6.2B

The Board requests that the initiative for placing trained Listeners on hold is pursued more robustly.5.4

The Board requests that the Personal Officer scheme is supported by ensuring continuity of staff groups on Wings.5.4

The Board requests that the prisoner complaints hot line (Annual Report 08-09) is developed and made full use of.6.2

The Board requests that the meal times are re-examined to give prisoners a more suitable time for lunch and evening meals 6.6

The Board requests that Management robustly monitor the use of IEP schemes and Special Accommodation to ensure appropriate use. 6.2

The Board request that Management use every skill and strategy available to reduce the incidence of prisoners being accommodated on the FNC and Induction Unit for lengthy periods of time. 6.2, 5.5.D

## Section 5

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### STATUTORY REPORTS

#### 5.1 Diversity

For most of the year the Race Equality Action Team (REAT) met on a monthly basis with the Diversity Management Team (DMT) meeting every three months. In April 2010 the two meetings merged - the DMT Agenda was added to the REAT Agenda and the first meeting took place. This newly formed alliance is known as DREAT. DREAT meetings are now scheduled to take place on a monthly basis with the former DMT Agenda being added quarterly. It is yet to be seen how this will work out in practice but could result in a considerable time saving for staff who need to attend both these meetings and should save on overlap.

The DREAT Meeting is chaired by the No 1 Governor and includes representatives from all departments within the prison including the Race Equality Officer (REO) and the Co-ordinating Chaplain. On occasions, a member of the local Muslim community attends. It is a PSO requirement that all members of DREAT should receive training specific for this role. Unfortunately, extensive enquiries by the prison appear to show that no National course is available to meet this need. This is, to say the least, unhelpful and the Establishment continues to pursue this matter.

At least two prisoners (Diversity Representatives) attended the erstwhile REAT meeting and will continue to attend the appropriate part of the DREAT meeting. They make a valuable contribution to the meetings, bringing matters that arise from their regular Wing meetings. Their work in this regard has recently been recognised by a small agreed payment based on the fact that the job is regarded as part-time. Identifying T-shirts are provided to make them more easily recognisable on the Wings, but new supplies of these often take time to become available due to the slowness of procurement processes, which is less than helpful in aiding recognition. Training is also provided for them by the REO to enable them in the work they do. It is unfortunate that there is a high turn-over of Diversity Reps. as prisoners make progressive moves out of the Establishment and circumstances can sometimes mean that the prison can lose a substantial number of trained Reps. all at the same time. This is probably unavoidable but means additional work in selecting and training new people willing to do the work.

It has been noted what a positive contribution the current REO makes both to the various meetings and to the way racial matters are being dealt with in and around the Establishment. Due to the REO's enthusiasm, confidence is growing, albeit slowly, in the RIRFs application system of making complaints of a racist nature.

All areas regarding BME prisoners, who represent some 30% of the HMP Woodhill population, are carefully monitored, and SMART Data for the year does not show any worrying trends. Almost all categories fall within range, but any unusual trend is carefully monitored, investigated, followed up and reported back to the DREAT Meetings for discussion and appropriate action.

There is an increasing number of older prisoners within the Establishment and prisoners with a declared disability account for almost 23% of the population. There are also some 37% of prisoners with a mental health issue.

The Disabled and Older Prisoners Liaison Officer (DOPLO) has been extremely active both inside the Establishment and with making outside contacts, and special activities take place on a regular basis for older and disabled prisoners. The availability of good-condition wheel-chairs has improved and Age Concern has been able to arrange visits to older prisoners alongside providing help and advice. HU4B accommodates the majority of older and disabled prisoners, and a ramp has been fitted to facilitate access onto the exercise yard. A cell in Healthcare converted to meet the needs of disabled prisoners was out of use for some time in its initial stages due to certain aspects making it unsuitable to house prisoners, e.g. accessible possible ligature points. This cell is now in use under certain circumstances. The Disabled and Older prisoner Forums continue to be well attended with representatives from Healthcare, Kitchen, Canteen and Aramark. Carer, Wheelchair Training and Fire Buddy training are planned for this year. Forty green fleeces have been ordered and are in use for older prisoners. Showers on the ground floor of the Vulnerable Prisoner Unit have been improved with the addition of a non-slip floor and grab rails and a walk in bath has been fitted. CAMEO, a non religious Chaplaincy group for prisoners over 50 years of age, meets weekly. An Information Booklet for Older and Disabled prisoners has been produced and is available on all the Wings. A survey of older and disabled prisoners in January 10 showed more prisoners reported being treated well than in the previous survey in September 09.

Problem areas that have been highlighted are:

- Lack of disabled toilet facilities in Reception

- High step at entrance to Reception

- No grab rails or non slip floor in gym shower area.

- No disabled access to second floor Education

- No disabled toilet facilities available in Education area

- No access to legal visits area for disabled prisoners or visitors

- Disabled prisoners not able to access Wing offices or Information rooms which are on the first floor of all Wings.

- Several prisoners reported difficulty accessing top bunks without steps and a safety rail on the side of the bed. It is reported that some prisons provide these.

The Diversity Calendar continues to grow and Black History Month was celebrated with a special event in October 2009 when the kitchen provided appropriate regional dishes. A Family Fun Day is planned for July 2010 and there is a lot of enthusiasm for this forthcoming event. The prison celebrated the Diwali festival for the first time on October 17<sup>th</sup>.

Religious artefacts have, on occasions, been the subject of misunderstandings and have sometimes been difficult to obtain via the Canteen, run by DHL, but Chaplaincy has produced an excellent illustrated manual conforming to latest PSO requirements to aid staff. Artefacts allowed in possession are now obtainable via the Chaplaincy rather than the Canteen on a not-for-profit basis. Chaplaincy and Resettlement teams are introducing 'Storybook Dads' from the beginning of December.

The core day on Friday has been adjusted to allow for Muslim prayers to start at 13.00 hrs in the Chapel.

During the year a Survey Questionnaire was given to people visiting prisoners and to prisoners receiving visitors in order to assess any Diversity problems that might be occurring. Collation of this data is virtually complete, and initial indications show that one of the main problems appeared to be the system of booking for visits. However, other indications were that, generally, visitors to the prison of all cultural backgrounds report that they were being dealt with effectively and with due regard to diverse cultural and religious needs and, also, with dignity and respect. One or two specific

negative instances had arisen but were dealt with speedily, apparently effectively and lessons were learned.

Staff training in all aspects of Diversity has high priority and the “Challenge It Change It” course is one of the successes. The prison is on target with numbers of staff attending this excellent piece of training. A new course run by the Chaplaincy, entitled “Faith Awareness”, was less well attended than was hoped and the DREAT Meeting realised that this may have been because it was too long and had a misleading title. The course is to be re named ABC – Awareness of Belief and Culture. It is planned as a two module course for ease of access to encourage take up. Older Prisoner training, Mental Health Awareness and Disability Awareness are regularly available for all staff.

There is a lot of energetic goodwill on the part of the DREAT team to raise Diversity awareness through training within the Establishment. However there is some concern that not all staff at HMP Woodhill have yet fully embraced the concept of Diversity.

RESPECT and GALIPS continue to have active representation within the prison and representatives attend the DREAT meetings along with an Occupational Health Advisor and Disability Network representative.

Copies of the Complaints and Racist Incidence guidance for staff and prisoners are issued to all prisoners as part of the Induction programme. Prisoners who are unable to read or require translation are provided with support from staff or given access to language line or written translations or other translation services. The Prisoners Information Book for Male Prisoners and Young Offenders is available in twenty seven languages.

Work-Life-Balance statistics show that applications from staff are evenly split over all age groups and, gratifyingly, between both male and female staff.

Overall, Diversity has an increasing stature within the Establishment and many staff are to be congratulated on their enthusiasm for this positive result.

## **5.2 Learning and Skills**

The Education Department runs a variety of courses for the prisoners.

The Core subjects are English and Maths which are taught up to Level 2, IT and ESOL.

As well as these they provide:

- Teaching reading for non-readers.

- Music.

- Art.

- Business studies.

- Catering.

- Health and Safety.

- Social and Life skills.

Prisoners who receive Education go every day; some are full time students, some part time. The full time students must study a different subject morning and afternoon, the part time students study for half a day every day. The exceptions to this are the Catering and Business study courses, these are full time but concentrate on only one subject.

Catering is full time for three weeks.

Business studies is full time for six weeks.

The department has capacity for ninety students. The number attending varies as prisoners are moved out but there are always applications to fill the gaps.

Normal class sizes are one tutor to eight students but the non-reader classes have one tutor to three students. This is a better ratio for non-readers; also the classroom they use is very small and only holds the smaller number comfortably.

The tutor for the non-readers is employed for the mornings only and the class is for the first half of the morning – one and a half hours. During the second half the tutor works with students on site in:

- Gardening.
- Faith Management.
- Waste Management.
- Environment Groups.

As well as classes in the Education department, some tutors hold classes on the wings for Young prisoners and Vulnerable prisoners. These include:

- Art
- English.
- Maths.
- Information Technology.
- Music.
- Gardening.

There is no disabled access to second floor Education and no disabled toilet facilities available in Education area. The location of a class was altered to enable a prisoner in a wheelchair to attend.

Manchester College has the contract to provide the Education at Woodhill and various other prisons. They are in the process of changing and standardising the curriculum so that when prisoners are moved to another prison they will be able to continue their courses without a break. This is a good idea if all prisons adopt the same system.

Unfortunately, Manchester College are also subject to efficiency savings and reductions have been made to some staff contracts. The loss of teaching positions has created concern amongst Manchester City College staff. Core delivery targets are set Nationally and Woodhill have raised this as management issue for the college.

## **5.2A Physical Education (PE)**

### **Gymnasium**

The Gym provides several Educational courses which are run like the academic ones – prisoners taking the courses do so on the same fulltime or part time basis.

The Courses include:

Fitness Instructors Level 1 and Level 2.

Basic Healthy Living.

First Aid.

FA Sports Injuries. This one is almost an introduction to Physiotherapy and reaches quite a high level.

There are also Leisure classes. These include:

Weightlifting.  
5 a Side football.  
Cardio-Vascular schedules.  
Circuit training.  
Badminton.  
Short tennis.  
Basketball.  
Volleyball.  
Uni Hoc.  
Handball.

Gym induction is now mandatory.

The gym is open every day for morning and afternoon sessions and in the evenings from Monday to Thursday. On average there are between forty five and sixty prisoners in each session. Prisoners from Healthcare continue to attend gym in high numbers. The over fifties exercise sessions are also popular.

### **5.3 Healthcare**

The management of the Healthcare Team have had huge challenges in restructuring and addressing the many weaknesses in the delivery of Healthcare. Progress is being made and is ongoing.

The Board welcomes the more cohesive Healthcare with a simplified management structure. MHIT, Primary Health Inreach Team, Substance Misuse Service and the senior psychiatrist are now managed by the Head of Healthcare.

Sickness levels are being better managed and starting to reduce.

The PCT have completed all reviews of Deaths in Custody at HMP Woodhill.

The recommendations from the Coroner's and Ombudsman's reports are well underway to being fully completed:

Partnership Board Meetings are now held monthly.

GPs appointed to work in the prison now have an induction pack.

ACCT Foundation, basic life support and defibrillator training are now delivered to all Healthcare staff.

A full review of urgent medical protocol has been completed to ensure that new GPs are inducted to the establishment comprehensively and are familiar with the limitations to care dictated by security requirements.

The policy for Pathways of Care from Hospital Admission to Prison Aftercare Post Discharge includes:

Bed watch Protocol  
Admission to Hospital Protocol  
Hospital Visits Protocol  
Discharge from Hospital Protocol  
Aftercare Protocol

The Introduction of SystemOne will ensure clear audit trails for appointment tracking. TPP SystemOne Prison is a Computerised Medical Record Booking System. Phase 1 went live in November 09 to a largely positive reception, with GPs and Dentists being particularly supportive. All letters and documents are scanned in, are accessible to the whole medical team, and patient pathways have improved. Phase 2 – the prescribing/pharmacy component is soon to be completed.

Following a Rule 43 directive, 'Admission to Secondary Care; During Admission, Transfer and After Care: HMP Woodhill' has been produced and ratified.

Secondary Health Screening is now carried out on second day after Reception as part of the New Prisoner process.

The telephone appointment system has been changed since a recent HMIP visit and a new paper application system is in place, with collections taking place each day on all House Units. The PCT hope that this further improves when the medication returns to be issued on the House Units and nursing staff are available to answer queries, complete assessments and continue to deal with applications.

All nurses are given Nursing and Midwifery Council guidance to meet the requirements for documentation standards for all medical records.

All nurses at HMP Woodhill are Cardiopulmonary Resuscitation (CPR) trained to ensure that a suitably trained member of staff is always available during both the day and the night.

A New Emergency Equipment Checking Protocol has been implemented and all emergency equipment reviewed.

Emergency triage algorithms have been reviewed.

Sufficient one-way resuscitation valves have been ordered to allow every first aid trained member of staff to carry one. Valves are now placed into each first response kit.

All emergency nursing staff are being trained in accordance with the latest Resuscitation Council guidance.

The Doctors are now attending Clinical Governance and Medicines and Therapeutics meetings.

A more effective delivery of Primary Care to House Units is starting which encompasses:

Public Health: Vaccinations, Health Promotion, Well-Man Clinics, screening programme, Sexual Health and Chronic Disease Management.

A training programme is being rolled out to RGNs relating to Chronic Diseases.

Standard Operating Procedures have been introduced regarding Chronic Disease Registers and their monitoring.

New Prisoner Processes have been established to ensure capture of referrals for Chronic Disease management.

Hep B Programme is planned to be rolled out across the prison.

Link nurses have been established in relation to Disability, Older Prisoners and Diabetes.

The establishment of a Primary Mental Health team is badly behind schedule. This is largely due to the time it has taken to change from the Central Medication model to Wing based delivery of medication. Recruitment difficulties have yet to be resolved. Refresher placements are underway for RMN staff.

The treatment rooms on the Wings which have consistently failed audits are to be updated. When work on these rooms is complete, Central Medication will end, and there will be a return to Wing based medication. Treatment rooms will be purpose adapted and fitted on HUs 1 – 5, FNC and Reception. HU6 Treatment rooms will be repainted and have secured controlled drug cabinets fitted. The refurbishment of the treatment rooms is due to be live by October 2010 and will be of much benefit including better management of infection control and dedicated Nursing staff allocated to each House Unit.

HMP Woodhill is in the last phase of prisons to roll out Integrated Drug Treatment System (IDTS), and is now in the final stages. IDTS is a National initiative, and Foundation Training started at the beginning of 2010. Although the Drug Intervention Record (DIR) cannot be incorporated into TPP System One Prison, the paper version can follow the prisoner through the IDTS journey.

HU5 will be the stabilisation unit, and will need to be staffed round the clock. The specialist cell doors with a fitted hatch are on order and expected to arrive in June/July. A specialist nurse post has been advertised and a recruitment fair is scheduled for September 2010.

The Head of Healthcare has planned training for additional staff to carry out urine testing and further training will need to be established.

Dental X ray is up and running and triage on the Wings is working well. Waiting lists are not managed as effectively as they could be. Patient 'no shows' means the dentist sees fewer patients and cannot maximise the use of their time. The Board still cannot understand the disparity in the treatment for remand and sentenced prisoners, particularly in light of the length of time some prisoners are held on remand.

Whilst Reception is physically too small for processing large numbers of prisoners either leaving from, or arriving at the prison, Health screening is working well. The administration of medication prior to leaving the establishment to go to Court is also working very well.

There were two prisoners with Asperger's in the prison in January 2010. Fortunately some staff on Healthcare and FNC had training at HMP Leyhill and HMP Hewell Grange at the end of 2009 so had a good understanding of the condition.

Through the work of the Disabled and Older Prisoner Liaison Officer (DOPLO) and Healthcare, Diabetes Awareness for prisoners is now well established with regular Diabetes UK presentations and a quarterly Diabetes Forum. Healthcare supply testing kits and strips to non insulin using diabetics, thus ensuring the PCT provide the same treatment both in and out of prison. The Diabetic Health Care Lead provides Well Man checks to prisoners on the Vulnerable Prisoner Unit and on ordinary location. This initiative has been well received and praised by prisoners.

CPR has been identified as a training need for the SO grade and is being delivered.

Clinical Governance statistics are systematically compiled to give better quality recording of data. This means that problems and causes can be more effectively identified and resolved.

## **Healthcare Inpatients**

The majority of prisoners on Healthcare Inpatients fall into the category of suffering with severe and enduring mental illness, and, as such, are patients of the Mental Health Inreach Team (MHIT). Prisoners can remain on the Wing for months awaiting transfer to secure hospitals. The Healthcare Management have kept this as a priority and continue to try and work with external providers to ensure bed spaces are used alongside priority of care. It is a challenging environment for staff with a mix of vulnerable and high risk prisoners. Staff are to be commended for the high standard of care provided to the prisoners in their charge. For months they have had to run two regimes to manage a prisoner on single unlock awaiting transfer to outside hospital. Staff are due particular recognition for their management of a prisoner on hunger strike. At the end of the reporting period the prisoner had taken only water and apple juice for forty six days.

As from September 1<sup>st</sup> 09 prisoners located in Healthcare Inpatients have been offered evening association from Monday to Thursday provided they fulfil the multi unlock risk assessment criteria. They also have access to the gym for a dedicated session each week where individually designed exercise programmes are used. Support work delivered by Psychology includes auricular acupuncture and Wing based art classes are delivered by Education. The Admission and Discharge

Policies for the In-patient Unit have been fully reviewed. All Healthcare Inpatients are formally reviewed every two weeks.

There were many prisoner complaints in 2009 that the Healthcare appointment application system was not working effectively. The Healthcare complaints policy was updated to reflect the prison and KPT perspective. By February 2010 complaint turnaround was 100% back on track. Management now 'integrity test' prisoner request/complaints. 50% of Healthcare complaints come from HU1 and HU4, reflecting the location of the greatest level of controlled drugs and chronic disease management.

Complaints about the length of time taken to get an appointment with the GP are ongoing.

Complaints about the timing of night medication and sedation are common. Prisoners complain of being very drowsy/sleepy at 9.00pm and wide awake at 4.00am or pain relief not being effective all night due to the timing of evening meds.

Prisoners also raise the issue of not being able to access basic pain relief out of hours.

TPP has assisted with the overall management of waiting lists and appointments, with the process running more smoothly than it has before. Complaints are also closely monitored by the Clinical Governance Forum and the Prisons Partnership Board.

The Board is concerned to have received reports that some nurses are refusing to wear their name badges and give their names to prisoners. This is continuing even after it was drawn to the attention of managers.

The Board has had serious concerns throughout the reporting year that areas of Healthcare have suffered with severe staff shortages. This was highlighted by a recent re-profiling exercise and skill review showing that Healthcare is significantly understaffed. The single most significant factor is the delay in vetting procedures; this has been highlighted to the Director. In addition the Head of Healthcare has been disappointed with the low calibre of candidates. The re-profiling exercise also showed work needs to be done to improve efficiency and devise shift patterns to match the prison core day.

The Performance Indicators which are submitted to the Department for Health show that Healthcare is making sure and steady progress.

### **5.3.A Mental Health Inreach Team (MHIT) & Mental Health Provision**

With the development of a cohesive management structure there is a new found optimism, improved communication and shared responsibility for the delivery of mental health services. The implementation of an effective Mental Health Service Delivery in line with Her Majesty's Chief Inspector of Prisons and Prison Health Quality Performance Indicators standards requires the formation of a Primary Mental Health Service working in close collaboration with the MHIT. The Primary Mental Health Team are still not fully functioning. The development of a Mental Health Strategy is under way and this will aim to ensure that there is a comprehensive framework of service delivery for prisoners with Mental Health problems. The failure of Central Medication resulted in the failure of plans for the release of skilled staff to comprise a Primary Mental Health Team. There is now a strategic plan in place but it is dependent on the successful recruitment of suitably qualified staff. At present recruitment is behind schedule. Some work has been done in providing refresher training for mental health trained nurses. When the refurbishment of the treatment rooms is complete, and the administration of medication returns to being wing-based, it is planned to have a duty mental health nurse based on every Wing.

MHIT have suffered with staff shortages for almost the entire reporting period. The Head of the MHIT circulated a notice on 21/12/09 explaining the extreme staff shortages on the MHIT. At times only one full time member of staff or one part time member of staff was in the prison, along with a part time administrator. There were delays in advertising the posts which have now been addressed. Staffing shortages have had the regrettable effect of prisoners' appointments for MHIT still being cancelled at short notice, and an increased length of time taken to obtain an appointment. Staff shortages have also had a negative impact on MHIT staff attendance at multi disciplinary meetings. A survey ran by DOPLO in March 2010 showed that mental health issues (37%) and depression (18%) make up the highest proportion of declared disabilities.

MHIT reported an increase in the number of referrals following the implementation of PSO 1700, though as so few prisoners are now held in the Segregation unit, the perceived workload increase has not come to fruition.

The process for transferring prisoner to secure hospitals is lengthy and complicated. Initially the prisoner is referred by Woodhill's MHIT. He will then be assessed by hospital psychiatrists, and a selection Board will meet to review referrals. This process can take up to six months which the Board finds excessive.

### **5.3.B Substance Misuse Service (SMS)**

During the reporting year nine hundred and fifty one new prisoners were referred for treatment. There were three thousand five hundred and eighty six review appointments made.

The SMS continues to use a range of pharmaceutical treatments for opiate (heroin) and alcohol dependence. Medications to ensure abstinence from heroin and alcohol are also prescribed.

All patients on treatment are seen regularly on a one-to-one basis for review, motivational interviewing, brief interventions, health promotion and education.

Non-pharmaceutical treatments to help prisoners deal with their substance misuse issues include auricular acupuncture, yoga and art.

Unfortunately there have been cases of prisoners relapsing which indicate that drugs are easily accessible to them in the prison. This however is not showing in Mandatory Drug Testing (MDT). Senior Management are taking this forward and assessing intelligence on a monthly basis at the Security Committee.

Health promotion and education sessions around substance misuse are well attended. Topics include crack awareness, alcohol awareness and harm reduction.

Healthcare Officers are now responsible for bringing prisoners to their appointments. However, only one Officer is qualified to carry out drug testing. The SMS does not have its own designated staff, and Friday sessions have been stopped as they are not provided for through In-Vision.

**PUKKA Project (Prisoners Unite to Keep Kids Addiction free)**

This successful Project has been running for several years. Woodhill prisoners plan, develop, and deliver a substance misuse awareness training for young students from Milton Keynes. All these prisoners were addicted to alcohol or drugs. Their presentation covering Alcohol Awareness and Drug Awareness is presented in a way that appeals to young people. All the men involved are hugely proud of their work. The Board regrets that it was stopped recently for security reasons, and a report has been prepared to look at restarting it with new guidelines.

It should be noted that the Public Place Violence Reduction Co-ordinator in Milton Keynes is using the Project in the community with ex-offenders who worked with PUKKA in Woodhill. It is called PUKKA OUT, and members of this team are involved in follow-up work and running awareness sessions in local schools and exclusion units.

The specialist staff in the Substance Misuse Service who were previously employed by The Seagrave Trust are currently being TUPE'd across to the PCT.

CARAT (Care Assessment Referral Advice and Throughcare)

The CARAT Team was benchmarked for the first time during the reporting year and also underwent its first audit. This proved acceptable, and was the first under the new Standard 65. Appropriate remedial action has been taken as recommended.

Their Key Performance Targets (KPT) were exceeded and one thousand four hundred and twenty two Initial Assessments were carried out.

Criticisms raised by HMCIP have been addressed. Prisoners are now seen by Detox within 24 hours of arrival, and by CARATs within 48 hours.

The MDT December 09 figure of 19% was one of the highest ever. The YTD figure was actually 6.48%. After this result in December, the Senior Management Team tried to assess why this 'spike' had occurred. No specific reasons were found and the figures continue to be closely monitored.

Short Duration Programme (SDP) was reintroduced in November 09 and CARAT workers were involved throughout the process.

There is now a Compact-Based Drug Testing, (CDT), which includes Voluntary Drug Testing (VDT) and Incentive-based Drug Testing (IDT).

The Team is pleased that a Specialist Substance Misuse Worker will be joining them shortly, funded through Integrated Drug Treatment Service (IDTS).

Much of the work taking place has been influenced by the results of the Drug & Alcohol Survey carried out in the prison.

The IDTS Needs Assessment Survey has looked at the substance misuse needs within Woodhill with the aim of informing the delivery of the IDTS. The research showed that

- it is estimated that a minimum of twenty six amended doors for IDTS will be needed for unrestricted observation by healthcare staff
- drug users are most at risk at the start and end of their sentences with risks from withdrawal and suicide on first entering prison to risks of overdosing when leaving
- Woodhill's Reception process relies on drug users self-reporting their use. Those who do not disclose their use may be at high risk in the first few days.
- the proportion of new receptions who are drug users is around a third
- MDTs at Reception return a high proportion of positive results, mainly cannabis, although a quarter show positives for opiates
- the proportion of users needing maintenance programmes has been increasing
- over 70% of maintenance programmes use methadone and these numbers are increasing, leading to the general increase in these programmes overall
- a quarter of maintenance programmes use Suboxone

- generally the number of detox programmes has fallen over the period, but the proportion of these required for alcohol has increased
- the prison needs to look at how it deals with prisoners with a dual diagnosis and put policies in place for joined up working between mental health and substance misuse
- the results of drug tests should be used to refer prisoners back into treatment
- the number of triage assessments carried out by CARATs has been increasing and more than a fifth of these have been progressed to a comprehensive assessment and individualised care plan
- services need to be established for and tailored to the different needs of drug using offenders – 18-24 year olds are more likely to need services for cannabis, 25-44 year olds for heroin and over 46 year olds for alcohol
- there is a need to ensure links are established with areas where prisoners return to ensure continuity of care
- lower than expected proportions of drug users are testing positive for blood-borne viruses (BBV). To ensure that those most likely to be at risk are identified questions about vaccination history could be included in first night screening and the availability of vaccinations could be promoted.

#### **5.4 Safer Custody and Suicide Prevention**

The Safer Custody Team are a hardworking and dedicated group of staff. They provide a significant number of reports and information for monthly meetings to inform policy and decision making in endeavouring to increase prisoner safety.

During this reporting period there have been four Deaths in Custody. Three inquests into deaths in custody in HMP Woodhill have been completed, one relating to a death from the previous reporting period. Two inquests are outstanding though dates have been set.

There was a disappointing outcome to one of them. Following the Coroner's Rule 43 recommendations, the prison was given 56 days to rectify the deficiencies. The Coroner also commented on the lack of Listeners at one inquest.

One positive outcome of this is that the Primary Care Trust and senior management at Woodhill are now engaging in action. (Please also see Healthcare report)

A Multi-Agency Communications meeting was held between key personnel from HMP Woodhill, the Northants Constabulary and GSL. The meeting established more effective and efficient methods of communicating all information about prisoners.

All additional documents which arrive with a prisoner are recorded in the Record of Events Booklet by Reception staff.

There has been a full review of the Personal Officer scheme. Non- flexible Personal Officer work is now in the new detail. At present the Board are concerned that Personal Officers do not have sufficient knowledge of, and are not on the units for sufficient time, to develop relationships with the prisoners they are responsible for. The Board hopes this is due to the recent staffing issues around re-profiling and InVision.

The prison's emergency response procedure has been updated.

The Coroner judged that there was little that staff at Woodhill could have done to prevent the self inflicted death of a prisoner on April 1<sup>st</sup> 2009. The coroner was pleased to note the professionalism of the staff at the prison.

At an inquest where the Milton Keynes Coroner's Court recorded a verdict of death by natural causes. At the conclusion of the inquest the Coroner stated 'I commend the prison (and PCT) staff for their care and support given to the prisoner at the end of his life.'

In each case the Board were greatly impressed by the compassion, leadership and professionalism shown by all staff involved.

Following the death of a prisoner at HMYOI Aylesbury who had been transferred from Woodhill the Ombudsman made the following recommendations:

- To create a more robust system ensuring all ACCT documents, opened or closed accompany the prisoner to the next receiving establishment.
- That the nurse in Reception reviews the medication prescribed for all prisoners prior to transfer.

*The prisoner in this case had been on an ACCT at Woodhill which was in the post closure review phase when the transfer took place. The ACCT document was not attached to the prisoner's 2050 for the transfer. The prisoner did not receive a medication review before he was transferred.*

These recommendations were accepted by HMP Woodhill and have been actioned.

A Chartered Forensic Psychologist completed a study into self inflicted deaths in custody and near miss incidents at HMP Woodhill. No common theme could be established.

The number of Family Liaison Officers has been increased.

It is planned to have 'First Days', a Safer Custody DVD, available in holding cells. Healthcare own a series of short films aimed at first days in prison which may also be used.

The Safer Custody Team ran a 'Safer Prisons' workshop on October 28<sup>th</sup>.

CPR training has been delivered to all Senior Officers.

The Safer Custody Team meet with officer and prisoner reps from the wings, and have initiated focus groups to discuss Violence Reduction and Safer Custody in the prison.

Wing Managers hoped to identify two prisoners from each Wing to undertake the voluntary role of 'Safer Custody prisoner Reps'. Work is ongoing to identify and train prisoner reps for all wings.

Assessment, Care in Custody & Teamwork (ACCT)

The Board are pleased to report that prisoner's ACCT documents now move with them. Whilst the ACCT document is still paper-based, prisoners on ACCT are flagged on C-Nomis.

The amount of ACCTs opened increased significantly, with the most being opened on the First Night Centre. By November 2009 over four hundred ACCTS had been raised, an increase of 42% on the previous year. 75% of these were opened as a result of information from prisoners. This increase possibly could be attributed to additional ACCT training and the awareness of earlier deaths in custody. The quality of the information entered into the documents has improved following additional training during the year. This resulted in more meaningful entries. Further assistance is being given with the introduction of a Good Practice Guideline document. There has been a higher focus on all staff completing ACCT training. Monthly sessions, as well as Training Days have been provided for staff to ensure they have the appropriate skills and understanding around managing prisoners in crisis.

The prison went to great lengths to arrange for a prisoner's Mother to come in for his first ACCT review.

#### Self Harm Incidents

During the reporting period the number incidents of self harm have remained constant, being approximately 30 to 40 per month. Of these, multiple incidents can be attributed to a small amount of individuals.

The Board is sorry to report the Alternatives to Self Harm programme has been dropped and no substitute offered.

#### Listeners

There has been a constant problem during the year in maintaining an appropriate level of Listeners. The Board appreciates that in most local establishments it is difficult to maintain numbers of listeners due to the high number of prisoner movements. The Safer Custody team have tried to manage the Listeners by placing them on 'hold' (to prevent them from being moved on to another establishment) on for six months after they have completed their training. The other difficulty which also accounts for the fact Woodhill has been losing Listeners is that the Court boundaries have recently been changed.

Two intensive Listeners Training Courses are held each year. Samaritans train the Listeners, and offer ongoing support. Identifying the appropriate candidates for this role has been challenging. For the first time a Cat A prisoner based on HU6 qualified as a Listener.

However the Board note that many Wings do not have Listeners and they are brought over from other Wings when they are needed. The Board would like to see more emphasis placed on increasing the number and retention of Listeners.

Work has started looking at the use of Constant Supervision, care, management and interventions. The divided responsibilities/costs of/to custodial and medical teams need clearer definition. The Board has been greatly concerned about the shortage of constant watch cells and the necessity to use regular cells with staff standing outside using the viewing hatch. This does not allow staff to engage effectively, and the act of watching becomes intrusive staring. The Board is pleased to note that Woodhill has requested additional funding for a further two Safer Cells.

Staff training in Violence Reduction had been halted for the CNOMIS training and was therefore behind schedule at the end of 09. It was started again in the New Year with monthly sessions scheduled and is very well attended.

The Violence Reduction (VR) Co-ordinator has organised Wing-based Anti Bullying Awareness Courses, and an Alternative to Violence Project. The Alternatives to Violence Project (AVP) is held on the Young Offender Unit and runs over four days. Wing-based prisoner focus groups have been introduced. VR Co-ordinator is working hard to improve awareness, the recording of data and manage more effectively prisoners placed on Anti Bullying Strategy (ABS). The VR co-ordinator and Psychology are developing interventions for prisoners placed on ABS to reduce bullying. The ABS documentation is being updated to improve the victim and perpetrator care maps and include a Governors' check list. Management checks of Anti Bullying Strategy (ABS) documents are now made. The Board are pleased to report that victim support plans are being regularly updated and believe the focus on victims of bullying must continue to be driven forward.

The numbers of high risk Cell Share Risk Assessment locations are being monitored. There is still a need to drive forward the use of un-explained and non accidental injury forms.

## **5.5 Segregation Unit , Close Supervision Centre (CSC) and HU6**

### **5.5.1 CSC**

The Directorate of High Security segregation strategy, and PSO1700, provides clear direction for establishments on the management arrangements for dealing with prisoners held in segregation units. The Close Supervision Centre (CSC) system, at the extreme end of custody, provides accommodation, management and treatment for prisoners who are assessed as posing the most significant risk to others, or the good order of establishments. The Managing Challenging Behaviour Strategy builds on the work of the segregation units, whilst bridging the gap between segregation units and the CSC system, providing one co-ordinated system for managing difficult prisoners.

CSC units accommodate the most difficult and dangerous prisoners within small and highly supervised units, offering a risk assessed regime that enables poor behaviour and any clinical needs to be addressed and managed, in order to identify and reduce risks to enable a return to a mainstream location. The work of the CSC will emulate the work of mainstream dispersal prisons, but within an environment that enables the staff to test the risks of individuals to assess the level of freedom they can be permitted. Prisoner management in CSCs is based on multidisciplinary teamwork by prison staff and individual prisoner case management. CSC staff will encourage prisoners, and assist them in addressing their disruptive behaviour.

For the purpose of Rule 46, the CSC Management Committee (CSC MC) will act in the place of the Secretary of State.

A CSC Management Committee (CSC MC) meeting is held monthly to:

- Consider for assessment prisoners referred through the guidance set out in the CSC Referral Manual;
- Consider recommendations about the future management of prisoners within the CSC system;
- Consider and authorise the de-selection of prisoners from the CSC system;
- Authorise and facilitate the movement of prisoners between the CSC sites, and authorise movement of prisoners back into the mainstream environment.

The Board welcomes the invitation to the Chairs of the IMBs in the High Security Estate to attend the monthly MCBS/CSC Management Committee meetings and the monthly Cat A Selection Committee meetings as observers.

The Board welcomes the sharing of the CSC monitoring overview compiled by the CSC/MCBS Operational Manager

With the implementation of the Operating Manual for CSCs, behaviour management is generally better co-ordinated between HMP Woodhill, HMP Wakefield and HMP Whitemoor. However there have been instances where sending establishments have not forwarded full documentation and have had to be chased. This is unacceptable as the prisoner should be informed in writing of the reasons for his move and staff need access to all relevant information for effective risk management. Woodhill have raised this at the CSC meeting and anticipate improvements in communication.

An equivalent Incentives and Earned Privileges (IEP) scheme has been introduced with the three levels being Basic, Standard and Standard Plus. Staff at HMP Woodhill have made good use of the system and one prisoner was transferred in on Basic. Behaviour monitoring targets are linked to risk assessments and will address risk reduction not just compliance. Until all prisons are using C-NOMIS, paperwork has to supplement computer records. The Operating Manual clarified the

grounds of suitability of recommendation for assessment for the CSC system. The new operating manual also draws a distinction between remand and sentenced prisoners.

Part of the exercise yard on the CSC unit is now used for growing vegetables and plants.

The Well Being strategy for staff working in discreet units is being revitalised. Staff support through Individual Professional Development (IPD) has been around since 2008. Training is being revised and updated. It is designed to maintain and enhance the psychological well being of staff. It starts with selection, targeted training, security awareness and proactive staff support. A de-briefing strategy will be developed for staff moving off special/discreet units. HMP Woodhill is the first prison in the HSE to profile in IPD Facilitator time.

The CSC holds some of the most challenging prisoners in the HSE and the Board continues to be impressed with the high standard of work and professionalism of the staff on this unit.

### **5.5.2 HU6**

HU6 also contains four small units, two of which are Protected Witness Units (PWU) and two Cat A Units.

The second Protected Witness Unit was opened last year. The prisoners from the first unit and supervising staff did an excellent job preparing the unit. It is now fully decorated and has had cladding removed from outside fencing to allow more natural light. A horticulture area has been developed for use of the prisoners on both units which will be of great benefit, allowing better access to an outside environment and work and educational opportunities.

There is no National Policy for the management of PWs and HMP Woodhill management have worked hard to establish a strategy and clearer lines of responsibility. Previously, so little information was available on these prisoners that risk assessments could not be properly done. The regime for these prisoners has greatly improved. There are now Care and Management, and Sentence plans in place. Psychology offer one to one work.

The two remaining Wings usually accommodate Cat A prisoners, but recently a number of Cat B prisoners have been moved to the units. These smaller units with skilled staff have successfully managed some of the more demanding prisoners from normal location. They have also been used to progress prisoners to larger wings. There is good access for the Cat A prisoners to the services in the main prison.

### **5.5.3 MCBS:**

#### Aims:

1. Provide a comprehensive framework of local and central case management within the directorate, to identify the needs of difficult prisoners, challenge and manage the difficult behaviour, in order to progress and safely return to normal location
2. Improve information sharing and decision making between establishments and Headquarters
3. Improve Directorate knowledge by collating the numbers and locations of the most difficult prisoners across the estate
4. Provide a more permeable management system between segregation units, the Close Supervision Centre (CSC) system and other discrete units
5. Ensure the appropriate movement of difficult prisoners around the high security estate

6. Reduce the number and length of stay of prisoners held in DHS segregation units
  7. Improve exit arrangements for prisoners de-selected from CSC, along with those managed under local and central case management
  8. Increase staff confidence and provide an appropriate level of support.
  9. Improve awareness and use of current toolkits in place and reinforce where required
  10. Standardise appropriate procedures to improve clarity and consistency.
1. Local Establishment Panels (LEPs) – A multi-disciplinary group who are responsible for meeting regularly, as required by the Challenging Behaviour Manager, to agree and formulate effective case management plans, reviews and exit strategies, and ensuring actions are taken forward. LEPs have the responsibility for communicating the management plan to all departments involved in the prisoners' management
  2. Central Case Management Group (CMG) – A multi-disciplinary team who manage the MCBS across the Directorate, provide advice and support to establishments, take over the case management of particularly complex cases, and co-ordinate the transfer of prisoners managed under the MCBS. CMG collate figures on the types and numbers of prisoners being managed under the strategy, and will facilitate the transfer of information between establishments. The CMG receive all CSC referrals for selection and de-selection, and provide recommendations to the MCBS/CSC Management Committee.

HMP Woodhill has effectively developed the use of MCBS. The numbers of prisoners managed under LEP have ranged from two to seven. It is really encouraging to see the different skill groups working together, sharing information, ideas, and challenging one another. The strategy helps to support Wing staff and address feelings of isolation when managing challenging prisoners. The Board is impressed by the planning, exchange of information and decisions made during local meetings. It is unfortunate that often representation from MHIT was lacking due to staff shortages and lack of time. Woodhill have raised this with the MHIT Contract Manager.

It was encouraging to see a member of the MHIT from another establishment work with the team at HMP Woodhill, and the offender supervisors from both establishments, to facilitate a problem free transfer for a challenging prisoner. The Chair of the LEP was a little concerned to have four referrals to MCBS in May 10, three of whom were standard prisoners and only one on ABS.

In the middle of last year a centrally managed prisoner was transferred to HMP Woodhill under CMG, having spent some eighteen months in Segregation Units. He was located on normal location in one of the small units on HU6, and has since continued to make steady progress. It is a considerable achievement for the staff at HMP Woodhill and shows how effective the strategy can be.

#### **5.5.4 Segregation**

The changes to PSO 1700 were implemented in November 2009. Staff of all grades quickly embraced the changes. It has also resulted in improvements notifying the Board when men are first taken onto the Segregation unit.

There has been a slow but steady decline in the number of men held in the segregation unit over this reporting period, at times the unit has been empty. The average length of stay in the unit for the first quarter of 2010 was 5.2 days, a slight increase in the previous quarter's figure of 5.1 days.

Adjudications take place regularly with an outside judge hearing adjudications on Wednesdays. Efforts have been made to reduce the length of time that men are held on the unit awaiting adjudication. In the first quarter of 2010 the length of stay for men on Rule 53 (awaiting adjudication) was only one day.

The average length of stay for prisoners on Rule 55 (Cellular Confinement) in the first quarter of 2010 was 5.3 days, a reduction of eight days over the previous quarter.

Seventy two hour reviews for prisoners held on Good Order or Discipline (GOOD) take place three days a week. The Board aims to attend all reviews. The Board finds reviews are conducted in a fair and professional manner. Although the reviews are scheduled, in recent times the reviews have often been late due to operational matters. This is being monitored by the Segregation Governor and the Board hope timekeeping will be improved.

SMARG meetings were resumed during the first part of the reporting period and a Board member attends as an observer. The Board has been concerned at the lack of Governor grades attending the meeting.

The Board is pleased to report that there has been a reduction in the use of the Segregation Unit, but has been greatly concerned by the number of 'long stayers' on FNC and the Induction Unit. These prisoners fall into the category of being difficult to manage on normal location. The Board do not believe they are correctly located on these units and are pleased that management have plans in place to hold weekly review meetings to monitor these prisoners.

The Board is concerned by the recent case of accommodating a prisoner on cellular confinement (CC) on a main Wing rather than the Segregation Unit. This was due to a shortage of cells on the Segregation unit following a series of incidents where cells were damaged and out of use. There were failings in communication resulting in the prisoner not being seen on a daily basis by a Doctor or Chaplaincy. IMB has requested a formal arrangement be put in place to inform the Board of the location of all prisoners awarded periods of CC. Wing staff are fully occupied running the Wing regime and do not always have the time to ensure the correct regime is delivered to these prisoners. The interaction that is usually seen between prisoners and Segregation staff was lacking due to the time constraints of Wing staff.

## **Section 6**

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### **AREAS WHERE THE BOARD CHOOSES TO REPORT**

#### **6.1 The Prison**

The increases in the prison population and year on year reductions in funding have had a significant impact on the lives of the prisoners and the staff who work in the prison.

There have been welcome improvements in the cleanliness and presentation of many parts of the establishment. The prison now accommodates more prisoners than it was originally designed for but no building programme has been embarked on to maintain facilities at the original standard. The population at HMP Woodhill has risen from 500 to its present 819 prisoners. The Reception area has not been extended and is physically too small to process large numbers of prisoners arriving to or leaving from the Establishment. There is a lack of privacy for interviews, the area is cramped, and when busy feels frenetic and looks intimidating. It is a difficult area for staff to work in.

The kitchen remains at its original size. Although fewer meals are now prepared and cooked, it is in serious need of expansion and improved design.

The cells at HMP Woodhill were designed for single occupancy. Most now hold two prisoners. The cell is physically too small to accommodate two men and the furnishings they should have available to them. Only the cells holding two prisoners have privacy curtains for the lavatory. The majority of prisoners store food they buy from the canteen and eat their meals in their cells– a practice that is neither decent nor healthy.

A refurbishment programme has been started for the communal shower units on the main accommodation Houseblocks, but only one third have been completed. In the summer there are fly infestations and the drainage and ventilation is inadequate. There are no separate or screened areas available for prisoners who may need additional privacy.

The number of telephones available to prisoners remains the same. With the increase in population, the introduction of a Healthcare appointments booking line and telephone complaints service the number of phones is insufficient. This has been exacerbated by shortages of time between opening cells in the morning and moving to activities, and of late with loss of association time in the evenings. In the previous Annual Report the Board reported on the development of an internal prisoner complaints hot line which has not been taken forward. The Board believes this would provide valuable support for prisoners with literacy and reading difficulties.

There have been on-going complaints about the lack of kit and blankets available, and problems with laundry supply/returns. The Board find it unacceptable that some prisoners did not have access to blankets during the past very cold winter. If the prison were able to do its own laundry it would provide valuable work opportunities and hopefully reduce the loss of clothing.

During a live hostage incident training exercise a shortage of trained Negotiators for Incidents in the prison was highlighted.

The remit for staff working to support prisoners becomes steadily more complex. The roles of Offender Management, Resettlement and Probation are becoming more demanding. More staff are employed in these areas and dependence on IT systems grows. There is a shortage of computers, desks and office space available for staff. The offices used by Resettlement, Probation and Offender Management are cramped and have appalling ventilation with no effective climate control. Insufficient equipment and poor working environments have a detrimental impact on productivity.

## **6.2 The Prison Population**

The population is very complex and demanding to manage. As the reporting year has progressed the nationwide pressure on places has increased. HMP Woodhill is primarily a Core Local prison. It is very disappointing that the use of video link has fallen off dramatically since the Court boundaries have been redrawn. The change in Court boundaries has also impacted on the population. There is now more space available for receiving prisoners on overcrowding drafts, which has resulted in a high percentage of very unsettled prisoners in the establishment. The Board has become increasingly concerned with both the frequency and number, and in particular the now common practice of receiving remand as well as convicted prisoners from out of area.

At any one time approx 30% of the population will have a length of stay of less than one month.

The Establishment has limited opportunities for prisoners who stay for periods of more than twelve months.

The rapid movement of prisoners within the system inevitably puts pressure on the First Night Centre (FNC) where multiple regimes are frequently run. The FNC have started to associate young adults with adults to improve decency, to assist the regime for those accommodated on there for specific reasons

The Board have had a worrying high number of complaints about the slowness of service in activating pin phone accounts and processing visiting orders. The importance of these services to prisoners is paramount and the Board requests that the management monitor closely the effective delivery of both.

The work of the FNC has been impacted on by a number of 'long stayers' and constant watches (CW). The Board do not believe the resulting mix of prisoners conducive to the environment for prisoners coming into the prison and particularly first time prisoners. Sadly the number of prisoners requiring the support of constant watch has on a number of occasions been greater than the number of cells available. The establishment has had to use regular cells with staff standing outside staring at the prisoner through the hatch. The Board believes this to be particularly intrusive for the prisoner whilst making effective engagement with the staff almost impossible. The Board is not confident that staffs are having their recommended breaks. A bid has been submitted for funding for additional Safer Cells.

The Board commend the staff on the FNC for their dedication and the high quality of their work.

Although an infrequent occurrence and for a very short time, the Board continues to be concerned that Vulnerable Prisoners (VP) are accommodated on the Induction Unit when there is pressure on places. On occasions, non- VP prisoners have been accommodated on the VP Wing which is inappropriate.

The refurbishment of the Visits Hall has not been funded; one of the consequences is that VPs are still easily identified during visits which increases their anxiety.

In recent months, there has been an increase in the use of Special Accommodation being used. This has been due to a small number of prisoners who have repeatedly so seriously damaged cells they had to be taken out of use.

The numbers on prisoners on Basic remains extremely low, and there have been instances where standard level prisoners have been nominated for the MCBS, which implies the IEP system is not being used as robustly as it could. A review of the IEP policy is planned.

## **6.2A Indeterminate Sentencing for Public Protection (ISPP)/Lifers and Licence Recalls**

The role of Lifer Manager is full time with the support of a clerk for two days a week. The clerk's primary role in the discipline office means she is not always able to fulfil her commitments as Lifer/IPP clerk. The Lifer Manager has achieved considerable success in raising the profile of the work that is done in Woodhill for this group of prisoners. As a result staff have a much better understanding of the responsibilities they have for these prisoners. The working environment for staff in the Offender Management Unit (OMU) is inadequate for the number of staff now employed

in this area. There are insufficient PCs and desks for all the staff and the lack of ventilation is appalling.

The number of Lifers coming into the CSC for assessment has increased but the number of newly sentenced lifers coming into the Establishment remains at a constant. The number of newly sentenced IPPs also remains fairly constant. The Lifer Manager has been very pro-active in moving IPPs on after their initial sentence planning is completed. At the beginning of the reporting period there were thirty five IPP prisoners and by the end of the reporting period the number was reduced to nineteen.

Woodhill offers a number of courses that are useful as part of sentence planning, including CALM, ETS and COVAID. A useful addition would be Healthy Relationship Programme (HRP). The single greatest difficulty the Lifer Manager has is moving prisoners on. Other prisons seem to 'cherry pick' referrals or will only accept prisoners on a one for one basis.

The Public protection Unit Database (PPUD) has been introduced to manage the Parole process. Last year was a 'shadow' KPT but this year the OMU's performance will be measured. Targets are set on PPUD but staff have found these are being altered so that PPCS can meet their own targets.

The number of license recalls coming to Woodhill has been falling since November 10. This is due to the Court boundaries being changed and ending of the Early Release Scheme in April 10. The Board are pleased to report that Recall Packs are being issued on time. The single greatest problem and the one area that is constantly criticised is the performance of outside probation. The London area in particular is very complex with a number of different probation offices serving different areas of London. The difficulty prison staff have in getting reports on time is the most common cause of problems with Home Detention Curfew applications and release from court.

## **6.2B Foreign Nationals**

The growing number of Foreign National prisoners, including Detainees, from all parts of the world, means that the prison has had to find increasingly imaginative ways of dealing with the difficulties that emerge from a large number of non-English-speaking prisoners.

Information is provided in the top nine languages and the Big Word, telephone interpreting system, is in use and well advertised throughout the Establishment. Cards are available giving access codes for the top 30 languages. Training in dealing with this category of prisoner has been made available to staff, specifically in the First Night Centre and on Induction, but further difficulties can occur once men are transferred to the Wings. FN prisoners tend to be accommodated on one Wing and there are concerns that gang culture can result. Non-English speaking prisoners can, clearly, become solitary if they are unable to communicate and further training is planned to enable staff to deal with this. It should be noted that, whilst it can be useful to use other prisoners as translators, in some instances this may not be appropriate and other methods, alongside training, have to be easily available to staff. One specific instance of this is in access to Samaritan phones where prisoners are not allowed to translate for fellow prisoners. This is of particular concern if prisoners are in a vulnerable condition and become increasingly isolated through lack of communication. All problems are exacerbated if the non-English speaker also has literacy problems.

The Foreign Nationals Co-ordinator runs regular monthly Clinics for prisoners. Immigration Officers from the UK Border Agency, representatives from the Facilitated Returns Scheme (FRS) and volunteers from the Association of Visitors to Immigration Detainees (AVID) attend along with various interpreters (e.g. Chinese, Vietnamese, Arabic and Punjabi). UKBA staff are able to carry out status interviews and process emergency travel documents and residence checks for most of the prisoners attending. There are also weekly clinics covering different Nationalities which are proving useful. The FRS is working well but it is dependent on effective communications with Embassies. The Board has written to two Embassies registering their concerns over prisoners held for

excessively long periods post sentence. One letter concerned a Foreign National prisoner being served with a Section 35 Immigration Warrant which changed the way in which the Foreign Nationals Co-ordinator was required to operate. It is possible that such Warrants may become a more regular feature of her work.

Foreign National and non-English-speaking prisoner numbers are increasing. In May 10 the numbers had increased from 14% to 18% of the population. There are stricter controls for acceptance into immigration removal centres and it is important that the Prison has the appropriate tools to deal with these growing demands. There has been a considerable increase in the number of prisoners held post sentence. In May 10 one prisoner had been held for twenty five months after his release date. The Facilitated Removal Scheme works well but some Embassies are exceedingly slow in issuing travel documents. Most Embassies have a menu option on their phone lines which prisoners cannot access with the prisoner pin phone system. The greatest difficulty the Foreign Nationals Coordinator has is getting legal advice for FN prisoners who do not have access to funds. Two additional Diversity Officers have been profiled to meet the increased work load of all strands of Diversity.

FN prisoners are inducted within twenty four hours. Recently the increase in the number of FNs on remand from out of area has created a lot of extra and unnecessary work as they are transferred out to court a few days later.

The Board has concerns that the isolation of FN prisoners may be increased if their families do not speak English and would therefore be unable to book visits or access information on visits.

## **6.2C Young Offenders (YO)**

HU2 is the only House Unit in HMP Woodhill designated for young men under twenty five years old. The population is volatile and there are very few options for alternative location, so difficult individuals have to be dealt with on the Wing. A Maturity Risk Assessment involving Residential Officers, Healthcare and psychologists is seldom used.

Staff work on both A and B Wings. Unfortunately the Unit has had to operate with only two Senior Officers (SO) in recent months, and lost their former Principle Officer (PO) in the staff restructuring. The new profiles have identified an additional SO to support this young team who are feeling under pressure. Staff endeavour to make effective use of the Anti Bullying Strategy and Incentives and Earned Privileges.

Gang culture, a 'gangster' attitude and bullying are continual problems. Staff encourage the young men to take responsibility for themselves, but many of them appear to have no sense of responsibility, and simply do not care. Purposeful activity is promoted and every effort is made to provide work for these young men. Boredom is the over-riding issue. Those who have been working in the garden outside the Unit are to be commended for their efforts. They have enjoyed seeing the results of their hard work.

A recent outburst of cell damage resulted in 21 prisoners being put on Basic. Staff have found that sending a prisoner to Segregation has little effect as he is often returned to the Wing the same day. If a prisoner threatens to kill himself he is put on an ACCT. This can be used by a prisoner as a means of avoidance. If he is in the Segregation Unit and threatens suicide he will be moved out. Several young men have received Adjudications due to their refusal to transfer elsewhere. One young man caused considerable disruption in Segregation resulting in several cells being taken out of use, and electricity cut off. He was eventually moved to another establishment where there are more facilities for young men.

The Stantonbury Film Project ran for its fourth year. Young Offenders and pupils from a local college worked together to produce a film on knife crime, which is available on DVD. The Board regrets that this Project is not running again as it has produced such valuable pieces of highly commended work in recent years.

The Board regrets too that the Project working with the Metropolitan Police and excluded students has also ceased.

Many of the courses run in previous years are no longer available, but there have been some Bullying courses and a Body Bag course, with horrific scenes of accidents worldwide. This had a considerable impact on the young men.

### **6.3 Chaplaincy**

#### Chaplaincy Strengthened Faith Reduces Re-Offending

HMP Woodhill is fortunate in having a particularly strong Chaplaincy Team who make a huge positive contribution to the lives of the prisoners. Their work extends from pastoral care through to education, resettlement, building community links, reducing re-offending and staff training.

The full time chaplains, and the half-time chaplain, led by the innovative Co-ordinating Chaplain, are Church of England and Muslim. The full contingent of sessional faith chaplains cover many faiths, including Baha'I, Buddhist, Hindu, Jehovah Witness, Jewish, Latter Day Saints, Pagan, Quaker, Roman Catholic, Sikh, Spiritualist and Christian, including Salvation Army, and Methodist. An advertisement has been placed for a full-time Roman Catholic chaplain to replace the previous one who resigned. As a result the Roman Catholic congregation is poor and the study course for Roman Catholics (Lean on Me) has had to be put on hold.

Many courses and classes take place through Chaplaincy, including Problem Solving through the Bible, Roman Catholic studies, Bible study, Victim Awareness, Music group, Meditation and Prayer, Basic Islamic Beliefs, Learning to read the Holy Q'ran, Advanced Q'ran recitation, Friday Muslim prayers, Hindu prayers, and a Buddhist meeting.

Prison based initiatives include Sycamore Tree (Restorative Justice), Storybook Dads, Fathers and Children's Day in the Community Hall, and a Family Challenge Day is planned for October. A Service Level Agreement has been approved for two Sycamore Tree Courses. The current course started at the end of May with twenty two participants, including Cat A prisoners.

Faith Awareness training has been 're-badged' as the ABC course for staff, Awareness of Belief and Culture. Module 1 is related to 'Searching' and Module 2 will relate to 'Respect for Faith,' including a trip to a local mosque. The course will be delivered by the Coordinating and Muslim Chaplains.

The Coordinating Chaplain is delivering new staff training for the Care Team as part of their Induction. He also responds to invitations to speak to outside groups about the work of Chaplaincy in prisons.

The Shiva Shrine, a Hindu temple, has been installed.

Celebrations have been held for many religious festivals and menus have been arranged to link with them. The Summer Solstice Celebration was celebrated for Pagans and a Sikh festival celebrated during May.

A music initiative from an external music group has generated funding for provision of amplification equipment for the chapel. The same group enabled the donation of three guitars from a company to the chapel. These are used monthly for worship on Sundays.

Chaplaincy visit HU6, the Closed Supervision Centre, regularly and have facilitated open visits to all prisoners of faith there.

The supply of religious artefacts for prisoners is well under way. DHL are no longer able to distribute these items so they are being delivered by Chaplaincy to the Wing offices. Chaplaincy have also purchased books and CDs, which are placed in the library for prisoners' use.

The Faith Garden project is progressing well but will lose the services of the tutor who retires shortly. The Coordinating Chaplain met with a representative from the Quiet Garden Movement who is of the opinion they might be able to help with a Health Care Unit raised garden in the exercise yard similar to the projects on HU6.

The Chaplaincy team see every prisoner during induction, confirm the prisoner's religion and ensure it is correctly recorded on P-Nomis

The Imam oversees Friday Prayers, Halal food, Ramadan, Islamic studies, and is much involved in Resettlement and community engagement.

An Islamic tutor conducts weekly classes for all normal located prisoners including Cat A prisoners. These classes cover four topics which are specifically designed by the Imam and sessional Chaplain. The course is progressive and covers:

Basic Islamic studies- this is targeted for new Muslim prisoners and prisoners who are beginning to practice their faith.

Prayer and ablution- this is designed to encouraged prisoners into worship and focus there attention on worship.

Learning to recite Arabic- this is to encourage prisoners to learning to read Quran  
Lesson four: Advance Quranic reading- this is designed to encourage prisoners to memorise and learn to read the Quran fluently.

The Imam also holds weekly classes on the CSC and PWUs on HU6. These classes are progressive weekly classes. Recently an extra session has been added for CSC prisoners to compensate for the recent regime disruption.

In his Resettlement work, the Imam has developed links with local Imams from MK , Luton and Bedfordshire, encouraging them to engage in prison work and develop support strategies for prisoners upon release. Plans are in place to engage with fifteen Imams from surrounding prisons to increase community links. The Imam is closely involved in staff training and through community links that were build last year, has been permitted to take groups of staff for a tour in the local mosques. He also arranged for a group of young Muslim pupils from a local school to take part in the

PUKKA Project, an excellent scheme run by prisoners, and directed towards young people who come into the prison for the day and are taught the evils of alcohol and drug misuse.

Paganism is an umbrella term used by many diverse minority faiths bringing together many cultures that have very distinctive but similar belief systems. The Pagan Chaplain supports and gives pastoral care, teaching tolerance and understanding of differences and highlighting the similarities. Regular meetings are now taking place and each fellow pagan is encouraged to talk about their particular path, further information is brought to the group to share on relevant topics brought up, thus broadening points of view. Pagan books are read, discussed, and even questioned. The meetings are run as a forum with each participant being given the opportunity to engage in open debate. The Pagan Chaplain runs workshops on various topics for those at the beginning of their paths, giving an opportunity for them to gain insight from the more experienced followers.

#### **6.4 Reducing Re Offending/Resettlement**

Resettlement now has the new title, Reducing Reoffending. A new Head was appointed at the end of last year. The policy was reviewed based on a new Needs Analysis was prepared by Psychology. A new Reducing Reoffending Strategy has been put in place.

There are seven pathways:

1. Accommodation.
2. Education/Training/Employment.
3. Mental/Physical Health.
4. Drugs/Alcohol.
5. Finance/Debt/Benefit.
6. Children/Families.
7. Attitudes/Thinking/Behaviour.

An additional Pathway has recently been introduced:

Faith based interventions.

Each pathway has a lead staff member. There is a Pathways Action Plan, and much of this relates to the HMCIP Expectations of a Healthy Prison.

Daily Resettlement clinics visit Wings in turn and are open to all prisoners on a drop-in basis. Of the prisoners discharged in 2009, 96% had an address to go to. The 'How to be a Good Tenant' course, run in conjunction with the local council and Northampton Council, provides a monthly advice clinic for prisoners from the area.

The Citizens Advice Bureau workers provide a debt counselling and advice service, and run sessions on the Wings. The contract for CAB has stayed at 50 hours per week for years and the team are drowning under the pressure of work. Two staff members work a job share but each has to spend a day a week at the CAB office in the community writing up notes. CAB within the prison have tightened the criteria for seeing prisoners and no longer deal with immigration or family issues. Their work is limited to housing and debt problems but the waiting lists can mean it takes three to four weeks from a prisoner submitting an application to being interviewed.

The Job Centre Plus worker helps short-term prisoners retain their employment outside the prison, and links with local employers are being developed. As with the CAB staff the Job Centre Plus

worker does not have access to her own data base so has to spend part of her work time out of the prison

Support offered in Finance and Debt management includes a Governor liaising with Banks to help prisoners open bank accounts. A debt clinic has been set up to help prisoners to resolve their financial problems.

Creative work is taking place, such as obtaining funding to bring Relate counsellors into the prison to run classes with prisoners on relationship issues.

The Children/Families Pathway has been identified as the weakest area of support. To improve this, Story Book Dads is being introduced to help prisoners keep in close touch with their children by recording a bedtime story for them. The introduction of email visits booking has eased many of the difficulties prisoners reported in booking visits.

A new questionnaire specifically designed for Woodhill is being sent out to all prisoners to identify their needs and to assess the risks of reoffending. A new database will be created and all prisoners on Induction will be matched with the Needs Analysis.

The questionnaire, which is anonymous, does require some ability to read but prisoners can help each other complete it.

The Reducing Reoffending Team has made considerable progress in a relatively short time and aims to further develop the work in the coming year. It is unfortunate that the Reducing Re-offending meetings have not run as scheduled.

## **6.5 Psychology**

HMP Woodhill Psychology Department is a forensic psychology department. The remit of the department is frequently misunderstood and this results in a lot of referrals for counselling/anxiety/depression issues. The Department does not have the resources or skill mix to complete this type of work. The Board hopes that, when the Primary Mental Health Team are a functioning resource, this gap in provision will be met. The team have an extensive remit and have suffered from some staff shortages throughout the reporting period. One staff member will be returning to work in July following maternity leave but the Team are still one Senior Psychologist short.

The Population Needs Analysis was provided by the Psychology Team who are an integral part of Reducing Reoffending. Questions from the existing High Security Estate Needs Analysis were combined with the previous HMP Woodhill Analysis to form the questionnaire which was circulated throughout the prison. As a result, responding to identified needs, some courses were increased, such as ETS, and others, like COVAID, a course for violent and angry drinkers, decreased. CALM, an anger management course, was set up and the SDP, Short Duration Programme, was introduced for Remand prisoners with alcohol problems.

The delivery of all interventions was planned in line with the recommendations from the last Population Needs Analysis.

The team deliver one to one interventions for prisoners on the CSC, PWU and managed under MCBS.

## **ETS**

Enhanced Thinking Skills (ETS) is running and in the period from 1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010, seven ETS courses were delivered. Although the number of Enhanced Thinking Skills courses has been increased there is still a long waiting list and many prisoners are released or transferred before taking part. ETS is now being phased out and will be replaced with Thinking Skills Programme (TSP) in August 2010.

## **CALM**

Controlling Anger and Learning to Manage it (CALM) was introduced on 1<sup>st</sup> February 2010. The Department are committed to delivering two courses during the prison's current financial year; the next course is scheduled for October 2010.

## **COVAID**

The COVAID programme has been reduced from five to three groups per year. This is in line with the Needs Analysis, which did not demonstrate a significant need for the programme. The Department are committed to delivering three groups during the current financial year.

## **Short Duration Programme (SDP)**

SDP was re-introduced to HMP Woodhill as the Needs Analysis showed that this was a significant gap in the service offered to prisoners. SDP began in November 2009 with a dedicated team consisting of one senior officer and three prison officers. Course number six is due to start on Monday 8<sup>th</sup> June 2010.

## **Psychological Assessments**

The Psychology Department are responsible for providing the following assessments:

- Close Supervision Centre Selection and De-selection reports
- Category A Review reports
- Parole reports
- Age Appropriate Risk Assessments
- Full Psychological Risk Assessment to aid sentence planning etc

## **Managing Challenging Behaviour Strategy (MCBS)**

This is headed by a Senior Forensic Psychologist and the team provide input with prisoners managed by the local panel under MCBS, centrally managed prisoners under MCBS and referrals to the strategy.

## **Boards & Committees**

Psychology Department are represented and contribute at the following boards/committees:

- Senior Management Team
- National CSC Committee
- The weekly RAM board
- Violence reduction
- Suicide Prevention
- Public Protection
- Drug Strategy
- Offender Management Meeting
- Segregation Reviews
- Reducing Reoffending Committee (the Psychology department also complete the Population Needs Analysis for this committee)

## 6.6 Kitchens

The kitchen has had a change of management and staff training is much improved. Kitchen staff have worked very hard to provide a better service. The Board is pleased to report the reintroduction of a hot option at lunch time which was much appreciated during the cold winter months. The Kitchen managers have developed good working relationships with Chaplaincy, Healthcare, Diversity managers and Wing staff. Comments books are available on all the Wings and prisoners are encouraged to put in both positive and negative comments. The purchasing of flasks for Ramadan again proved a good investment as the kitchen has to provide some ninety to a hundred meals, including five or six Special Diets. The kitchen has been fully painted and equipment is being better handled and maintained. Outside contracts are in place and broken and damaged equipment is repaired more quickly now. The broken floor tiles have been patched. The walk-in freezers have eased the problems of storage. There were issues with food temperatures not being recorded properly on leaving the kitchen. This has been rectified and temperature charts are kept up to date. The Senior Management Team (SMT) Servery Inspection and Food Temperature Log requires the temperature of all food be recorded when arriving at the servery. The log is in the form of a booklet allowing continuity checks and trends to be identified. If any temperature of less than sixty three degrees c is recorded the kitchen must be immediately notified. At present there are only hot trolleys for the transport of food from the kitchens to the Wings. As the old trolleys are replaced the new ones will have a chiller cabinet which will deliver salad and fruit in better condition. It is un-usual not to see a full complement of prisoners working. The management of kitchen workers is more professional.

There have been many complaints about the timings of the week-end and evening meals. In order to fit the core day lunch is served at 11.45am Monday to Thursday and 11.15am on Friday. The evening meal is served at 4.45 and 4.30 respectively. At the week-end brunch is served at 11.45am and the evening meal at 5.00pm. The Board would like management to consider later timings for the prisoners' evening meal.

The kitchen has a very limited food preparation area. The kitchen is long overdue for refurbishment with funding being repeatedly knocked back. The Board again requests that funding is made available to fully capitalise on the potential for the kitchen to provide meaningful work and training for prisoners. Any improvements to the kitchen need to take into account and address the flawed basic design which includes several "blind spots".

## 6.7 A Period of Change

During the reporting period the prison has worked through Workforce Modernisation, the implementation of C-NOMIS (computerised prisoner records), Re Profiling and the implementation of the new profiles with In Vision (computerised central detailing model). Workforce Modernisation has effectively made the Principle Officer role obsolete and, together with the new profiles, the percentage of Managers has been reduced to meet the target of 19%.

C-NOMIS prisoner numbers are national numbers, and stay with the prisoner for life. In the event of a prisoner returning to prison, the core details will still be held by the Service under the prisoner's unique number. The rollout of C-NOMIS across the public sector prisons has been phased, meaning for months prisoners have had two numbers and the difficulties for all prisons of dealing with two systems running together has been widespread and challenging. Nationally and locally there were difficulties reconciling the roll. The change from LIDS to C-NOMIS was a huge challenge for the establishment. C-NOMIS went live on Sunday 2<sup>nd</sup> August 2009. Over seven hundred staff were trained during the preceding eight weeks, with all other training going on hold. The C-NOMIS

changeover produced a number of unforeseen difficulties compounded by the management changes leading up to its implementation. Difficulties included issuing all prisoners with new numbers which had a knock on effect on booking visits, prisoners pay and informing non English speakers of all the changes. Canteen was particularly badly affected. There are some worrying limiting factors to C-NOMIS:

- Prisoners with a disability cannot be flagged up.
- Segregation records are not on the system
- ACCT documents are not on the system, though prisoners on ACCT are flagged
- There are difficulties totalling the number of prisoners and finding their location on the system

When the changeover was complete the entire training schedule for the whole prison was behind schedule. It has been a huge Management challenge to get training back on target.

At present private sector prisons do not have C-NOMIS and there are no plans to implement the system. The public sector prisons are still in the process of changing systems. Unless all prisons use it, it will remain a flawed and expensive system.

HMP Woodhill continues to suffer from staff shortages. In March 10 HMP Woodhill was thirty eight officers and fifteen Officer Support Grades (OSG) short. The biggest delay in getting staff in post is caused by delays in security vetting.

There was an increase in the incidence of lock downs and loss of evening association.

An experienced Re-profiling Team were drafted into Woodhill to look at the Units across the whole prison. They reviewed the regimes, staff numbers and shift patterns. A new Core Day and new regimes were devised. The new Core Day has a common start time for staff.

There will be a saving of eleven prison officers. In May 10 HMP Woodhill was thirty two Officers short, so the new figure will be a shortfall of twenty one Officers. There will be a saving of seven Senior Officers, and Woodhill will gain nine and a half OSGs. The OSGs will take on some work previously executed by Officers. There is to be non- flexible Personal Officer work as a result of the findings at a recent inquest. The Externals group is changing from twenty two Officers to ten Officers. Nothing has been written into the profiles regarding the unpredictability of bed watches, Cat A escorts and constant watches, but the Externals group have the capacity to work more flexible hours to accommodate these.

HU 5 will become a specialised unit dealing with all drug issues (IDTS), and HU1A will become the Induction unit. Reception will remain a separate unit with constant, experienced staff. Drug Strategy and Visits staff will be dispersed across the prison. There will be shifts allocated specifically for drug testing.

In May 10, HMP Woodhill implemented InVision together with the new profiles. The Board believes it was the only prison to attempt to do both together and this decision was taken to ensure efficiency savings were realised, as well as delivery of Invision within the Nationally allocated timescales. The results were stressful for staff and management. The system did not appear to be able to cope with the number of shift patterns that had built up, particularly around Work Life Balance. The inflexibility of the system, the resulting inability of staff to book leave and overtime, and the lack of facility to forward plan caused great conflict. Whilst the system is designed to be run by one and a half members of staff, Senior Management responded to the problems by very heavily resourcing the implementation. Responsibility was moved to a different management area, to allow daily focus and

a communication strategy to be delivered to all staff. At the time of writing Unit Managers still have to do detailing as the system only seems to be able to generate numbers of staff.

The Board have reported through 'Rota Reports' that there may be a link between low staff morale and complications with the InVision deployment and ongoing InVision Service.

The Board is greatly concerned to have identified the following issues:

### **System rollout**

User acceptance testing was not provided.

There was no 'Operational Readiness and acceptance' signoff by Woodhill.

Project deliverables were not made clear to Woodhill Staff.

No qualified Project Manager was made available for the transition of InVision into Woodhill.

Woodhill Senior Management Team were not invited to sign-off the completed Project as Operationally 'ready and accepted'.

Once the installation was completed by the InVision deployment team they left Woodhill to undertake their next InVision deployment.

### **3<sup>rd</sup> Party System Support by EDS (supplier of IT systems and support)**

There is no Service Level Agreement in place with EDS for InVision as a Managed Service.

There is no system backup currently available. This means that data corruption or loss cannot be restored from a backup facility.

There is no out of hours support available. When InVision stops working during these hours then the system remains down until the next working day.

The quality of Support is 'hit and miss' depending upon who you speak to at EDS. The InVision Team at Woodhill have not kept a log of Incidents.

There appears to be no change or release management control of InVision fixes. All fixes are undertaken in 'Live'.

There does not appear to have been sufficient training or support for staff implementing the system.

The Board was aware that lock downs were not being spread evenly and fairly across the Wings. This was addressed and planned lock downs are now published and prisoners informed. Wing regime is vulnerable to change as a result of the unpredictability of, Constant Watches, Bed Watches Cat A escorts and . It is hoped that when InVision is fully functioning this problem will ease.

Against this background staff and management have to be commended for achieving considerable performance success. The prison moved up forty seven places in the Prison Performance Rating System. Staff sickness is at its lowest figure ever.

## Section 7

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### THE WORK OF THE INDEPENDENT MONITORING BOARD

Board members have attended the following training courses organised by the Secretariat:

Foundation Course

Experienced Members Course

Tri annual review training

Board members have attended the following training courses organised by HMP Woodhill:

Challenge it, Change It (Diversity)

ACCT refresher course

Professional Standards

Conditioning and Anti Bullying

Security Key Talk

Personal Protection

Disability Awareness

The Board have invited the following speakers to Board meetings:

Dedicated Search Team

Police Liaison Officer

Safer Custody Team

Head of Security

Head of Healthcare

Reprofiling Team

The Chair attended the IMB High Security Estate Chairs quarterly meetings.

The Chair attended three CSC/MCBS meetings

The Chair attended a Cat A review meeting

The Chair and the Vice Chair attended a Cat A Allocation and Management Training day.

The Vice Chair attended the IMB London Area Chairs quarterly meetings.

A Board member made an out of hours night visit.

The Board hosted the IMB High Security Estate Bi-annual Conference. The Board were delighted to welcome delegates from all the High Security Estate IMBs. Speakers at the Conference were:

Danny Mc Allister, Director High Security Estate

Nigel Newcomen, Deputy Chief Inspector Prisons England and Wales

Stephen Shaw, Prisons and Probation Ombudsman England and Wales

Baroness Stern, CBE Senior Research Fellow at the International Centre for Prison Studies

Jonathan Aitken

The Rt Hon Sir William Gage

CSC Operational Manager

HMP Woodhill Chaplaincy Team

Dr. Peter Selby, President IMB National Council

Presentations were given on Reception and Personal Protection/Control and Restraint techniques.

In Nov. 09 Her Majesty's Inspectorate Team carried out a full unannounced inspection, the report from which has not yet been published. The Inspectorate found some House Units were not sufficiently familiar with IMB. In response the Chair altered the rota to increase the number of visits per month to the House Units. The increase equates to 100% for the Young Offender and Vulnerable Prisoner Wings.

The Board would like to thank the IMB clerk for all her hard work and support during the year. The Board also give thanks to members of the Admin team who provide cover if the clerk is away.

<b>BOARD STATISTICS</b>	
Recommended Complement of Board Members	20
Number of Board members at the start of the reporting period (incl. three members in their probationary year and one member on sabbatical)	14
Number of Board members at the end of the reporting period (incl. four members in their Probationary year and two members on sabbatical)	14
Number of new members joining within the reporting period	5
Number of members leaving within reporting period	5
Total number of Board meetings during reporting period	12
Average number of attendances at Board meetings during reporting period	8

Number of attendances at meetings other than Board meetings	55
Total number of visits to the prison/IRC (including all meetings)	710
Total number of applications received (General and Confidential)	459
Total number of segregation reviews held	98
Total number of segregation reviews attended	93

### Section 7.1 Applications

Code	Subject	2006/7	2007/8	2008/9	2009/10
A	Accommodation	2	3	3	6
B	Adjudications	2	4	3	2
C	Diversity related	14	6	5	4
D	Education/employment/training	20	13	3	10
E	Family/visits	16	21	7	15
F	Food/kitchen related	23	11	11	12
G	Health related	35	22	18	20
H	Property	54	71	47	38
<b>I &amp; K</b>	Sentence related & Transfers	58	69	46	84
J	Staff/prisoner/detainee related	31	14	6	19
K	(Transfers)				
L	Other	87	91	115	143
	<b>Total number of general applications</b>	342	325	264	351

As a Core Local Prison the Board receive a large number of applications on all aspects of sentencing, transfer and immigration. The considerable increase in complaints mirrors the increasing number of overcrowding drafts and associated complaints.

The Board received a high number of complaints about pin phone access and booking visits.

With the introduction of C-Nomis there were a high number of complaints relating to the transfer of prisoners' monies.

Canteen issues have eased since the difficulties around C-Nomis have been worked through. However the Board remains concerned by the number of complaints about price increases.

The Board have welcomed the initiative of working more closely with HMIP this year and look forward to a developing relationship.

The Board members at Woodhill have worked exceptionally hard this year. The Board is six members short of a full compliment and only has eight full members. This small number of fully trained members have undertaken all duties whilst providing mentoring for new members. The increased workload has proved off putting for some newly appointed members who sadly decided during their probationary year IMB was not for them.

**Mary-Anne Dixey**  
**IMB Chairman**  
**HMP Woodhill**

## Section 8

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### GLOSSARY OF PRISON-RELATED ABBREVIATIONS USED

**ACCT-** Assessment, Care in Custody & Teamwork – replacement for F2052SH

**ABS** Anti-Bullying System

**BME-** Black & Minority Ethnic

**CARATS-** Counselling, Assessment, Referral, Advice & Throughcare Scheme – drug & alcohol team

**CNA-** Certified Normal Accommodation

**C & R-** Control & Restraint

**CSC** -Close Supervision Centre

**ETS-** Enhanced Thinking Skills – an OBP

**FNC-** First Night Centre

**F2050-** Prisoner's basic record

**F2052A-** Prisoner's wing record

**F2052SH-** Record for prisoner currently at risk of self-harm

**GOOD-** Good Order or Discipline – Segregation under Rule 45/49 (historically GOAD)

**HCC-** Health Care Centre

**HMCIP-** Her Majesty's Chief Inspector of Prisons

**HU-** House Unit

**IEP-** Incentives and Earned Privileges – Prisoners can be on Basic, Standard or Enhanced

**IMB-** Independent Monitoring Board

**IRC-** Immigration Removal/Reception Centre

**KPI/KPT-** Key Performance Indicator/Target

**LIDS-** Local Inmate Database System – IMB can use this to check location, dates, etc.

**MHIT-** Mental Health Inreach Team

**NOMS-** National Offender Management Strategy

**PCT-** Primary Care Trust

**PMU-** Population Management Unit  
(central)

**CNOMIS-** Prisoner Nation Offender  
Management Information System

**PO-** Principal Officer

**POA-** Prison Officers' Association – the  
main trade union

**PQR-** Post Quality Review

**PPO-** Prisons and Probation Ombudsman

**PUKKA-** Prisoners Unite to Keep Kids  
Addiction free

**REAT-** Race Relations Action Team

**RRLO-** Race Relations Liaison Officer

**ROTL** - Release on Temporary Licence –  
e.g. to work in mess; town visits; home  
leave

**SO-** Senior Officer

**VP-** Vulnerable Prisoner

**WFM-** Workforce Modernisation

**YO-** Young Offender

Cc:

Rt. Hon Kenneth Clarke. Lord Chancellor and Secretary of State for Justice

Mr. Phil. Wheatley. Director General of the National Offender Management Service

Mr. Crispin Blunt MP. Parliamentary Under-Secretary of State for Justice

Mr. Suma Chakrabarti Permanent Secretary

M. Michael Spurr. Chief Executive Officer  
Mr. Danny McAllister. Director of High Security Prisons  
Mr. D Grieve QC. Attorney General  
Mr. Nick Hardwick. HM Chief Inspector of Prisons  
The Prisons and Probation Ombudsman  
Baroness Vivien Stern. Senior Research Fellow at the International Centre for Prison Studies  
Ms. Juliet Lyon. Director Prison Reform Trust  
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