



ANNUAL REPORT FOR HMP CARDIFF BY ITS INDEPENDENT MONITORING BOARD

1 September 2010 – 31 August 2011

Statutory Role of the IMB

The Prison 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 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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Description of Cardiff Prison

HMP Cardiff is a traditional city centre local prison with its origins dating back to 1827. Its main role was previously a holding prison for remands and trials, and short to medium term sentenced prisoners. The accommodation was predominantly Victorian with high levels of overcrowding and prisoners commonly sharing three to a cell. A new wing was built in 1996 to accommodate 200 additional men, including 96 Lifers. A major refurbishment of accommodation was completed in August 2004 with operational capacity rising to 754 spaces, and a further 70 from December 2008 creating our current operational capacity of 804.

Cardiff is a Category B local/training prison serving the courts in the eastern half of South Wales, with a base line operational capacity of 804. It holds a combination of Remands, Trials, Convicted and Sentenced and Life prisoners. It offers a wide range of opportunities in training, education, addressing offender behaviour and detoxification from drugs and alcohol. A recent Welsh prisoner's population review has resulted in Cardiff's remand catchment being extended; in Cardiff receiving Young Adults from its catchment area; and in its training prison function concentrating on less than 2 year sentenced adult prisoners. In April 2011 Residential block G wing was closed which adjusted the Operational Capacity to 804 from 824. This was the poorest accommodation at Cardiff and also allowed for significant efficiency savings to be made.

There have over the years been significant improvements in regime provision, including accredited Offending Behaviour Programmes (OBP), resettlement, induction and suicide prevention. OBP provision includes Thinking Skills, CALM, COVAID and from October an outsourced dedicated strategic drug programme (SDP) being delivered by Wales Probation Trust. COVAID is a programme addressing violent behaviour and alcohol and is delivered within the prison by outside probation partners. It has good regime provision with a number of workshops providing constructive activity.

The overall Performance Target has been consistently good with performance levels reaching a level 4 Prison in quarter 2 of 2010/11. In January 2008 HM Chief Inspectors of Prisons made a full announced visit, the report of which was published in July 2008. It was a positive report, stating that staff and management deserved considerable credit for the improvements that they had carried out (see below). This was followed up in June 2010 with an unannounced inspection by HM Chief Inspectors.

(Wales' Cardiff is well known for SORI, an intervention pioneered here, instigated by the chaplaincy team. SORI is a Restorative Justice programme which brings offenders into contact with people who have been victims, though not actually the direct victims of the prisoners taking part.

A brand new Healthcare Centre was opened in May 2008. The facility provides 21 beds, mostly commissioned by the Local Health Board equivalent of PCT). The facilities include two fully equipped Dental Surgeries, a worship room and treatment & group rooms. In May 2011 work commenced of the refurbishment and improvement of the workshop provision at HMP Cardiff. That, together with the Green Paper on the Rehabilitation Revolution, has allowed the establishment to plan more delivery of real work opportunities for prisoners working in partnership with outside organisations.

Average population breakdown: as at end May 2011.

Remand Prisoners – 33.2% Sentenced Prisoners – 66.8%

18 – 21 yrs 11.4%, 22 – 29 yrs 36.6%, 30 – 39 yrs 30.2%, 40 – 49 yrs 15.9%, 50 - 59 yrs 4.4%, 60 – 69 yrs 0.9% and 70+ yrs 0.1%

Three biggest current groups are: Under 6 month – 27.7%, 12mths – 2 yrs 20.3% and Lifers or ISP – 17.6%,

Ethnic breakdown of prisoner population:

Asian 3.1%, Black 4.8%, Mixed 8.6%, White British 83.5%

Executive Summary

One of the most significant issues bearing on this year's report is the changed occupancy arising from strategic management initiatives and organisational changes set out by NOMS Cymru. The trend has been to lose the more stable categories of prisoners and to take on responsibility for increased numbers of remand and short term personnel including young offenders. The concomitant levels of turbulence and 'churn' are being felt by all Departments. Prison management and all Staff have to work extremely hard and imaginatively to minimise the potential detrimental effects of this major change. This at a time when there is pressure on the Staff caused by manning issues, pay and potential outsourcing issues.

Healthcare remains a major concern; much of which arises from transparency issues. It is encouraging to report that the Governor has these issues very much at the forefront of his mind and has tasked his Deputy to undertake a root and branch review of all Healthcare systems. The impetus for such action was reinforced by a critical report from the Coroner into the death of an inmate who was lodged in Healthcare.

The need to hold unconvicted Foreign Nationals or hold them beyond their release date remains an area of concern. There appears to be an irreducible number of unconvicted and sentence expired foreign national who remain incarcerated because they lack passports or other means to be repatriated.

The Board has been operating below strength for some time now and although new members are slowly percolating through, the Board's attention to the detailed running of a number of special interest areas has been lacking. Priority has been given to areas such as Healthcare, Safer Custody, Diversity and Drug Strategy and attention to additional areas will be gradually improved as more productive members are inducted.

Finally, the Board enjoys an excellent working relationship with Prison staff at all levels and there exists a positive mutual respect for each other's roles and responsibilities. I would like to formally record my thanks for the overall direction and tone set by the Governor in his management of the establishment and for the general respect and cooperativeness that this leadership fosters throughout senior management and staff.

Gerwyn Butler
Chair

Compulsory Reporting Areas

Diversity

Good progress has been achieved this year under the leadership of the Deputy Governor. Many of the key anomalies of earlier years have been rationalised and a new sense of coherence and rationality has been brought to this enormous area. Communications have been improved enormously by the appointment of volunteer Diversity representatives on each wing to coordinate feed back to Prison Forums and there is a feeling of engagement by minorities across the board. It is particularly good to see that Age is gaining an appropriate profile as an interest group.

There is good visibility of the Discrimination Incident Reporting Form process on all wings.

Learning and Skills and Resettlement

All education and training activities have been profoundly affected by the changes to prison occupancy. There is a vastly increased burden on testing and assessment for basic literacy and numeracy ability and then a much reduced opportunity for stable interventions. It is anticipated that the impacts and implications of the changes will be better resolved once systems have been running for longer.

Resettlement

The resettlement Unit is well-managed and has well motivated staff that are open to exploring new ideas. They welcome input and suggestions.

The appropriate range of services is provided to inmates to assist in their preparation for release and to address offending behaviour. Services include Legal, Bail, Probation, Accommodation, Employment, Local Authority support and benefits, personal finance and a range of practical guidance to support the challenge of the transition from custody to the outside. In addition a number of training courses will have been used to support the transition including the Thinking Skills Programme (TSP), Controlling Anger and Learning to Manage it (CALM), Control of Violence for Angry Compulsive Drinkers (COVAID) and Short Duration Programme (SDP) for offenders with substance abuse related issues. A n assessment of suitability is made by a Discharge Board held about 6 weeks prior to expected release date to validate that all discharge needs have been met.

Post-release employment and housing are critical in helping ex-offenders to resume a normal life in the community. The Key Performance Target (KPT) for such employment was not achieved at the beginning of the reporting

period because the Employment Officer was on detached duty. However by the end of the period performance was just above the target of 20%.

The KPT for Housing on discharge was exceeded over the year with an average of 99.12% against a target of 90%; a very creditable performance.

A representative of the IMB attends the bi-monthly Resettlement meetings and is always invited to ask questions or comment on matters under discussion. Resettlement staff are open and helpful when information is requested.

Healthcare and Mental Health

There have been some significant changes to the organising and running of the Healthcare facility at HMP Cardiff during the last year, with more planned for the coming months. The building, a twenty-two bedded stand alone purpose built property has excellent facilities available to provide for the prison population in Cardiff and sometimes other local prisons who require this service.

The Deputy Governor has set up a comprehensive internal review of all Healthcare functions and processes with the aim of improving patient care and service delivery overall.

A notable change was the decommissioning of 'G' Wing housing the substance misuse prisoners and staff. Some of the detox community has moved to Healthcare and the rest has been dispersed to the general population with a concentration on F1. This move has obviously improved the conditions of the prisoners who are detoxing and require medical attention. Some spin off benefits from this move have assisted in improving other clinics and services that previously had experienced problems due to lack of discipline staff accompanying prisoners. With the extra six dedicated discipline staff available to escort, attendance at appointments in other specialities (dentists, opticians etc) has been enhanced. In the latest Health Performance Indicators for prisons, there was an improvement on last year with the establishment scoring green in all areas, apart from one showing amber, involving secondary health screening, which had previously scored a red.

There continues to be 24 hour nursing cover and the GP medical service contract was changed in April 2011 from Serco Health to being provided by Cardiff & Vale UHB. This has resulted in another full time GP being added to the team and has had a significant effect in reducing the waiting times over previous months and hence prisoner health needs.

Electronic communication between Healthcare and the hospitals has sometimes been a problem, especially in the matter of discharge and medication. The electronic patient IT record system has still not been introduced but all cables and screens are now in place to go live in November

2011. It is envisaged that communication will improve when this is bedded in and staff training is completed to facilitate this.

HMP Cardiff has changed its prisoner population this year to accommodate remand and young adult prisoners with less than two year sentences. Increased pressure on Healthcare has resulted because of the rapid turnover and throughput of these individuals. They present with various medical conditions that are just being dealt with when they are moved on or out, and the process starts again. Planning for this type of prisoner needs to be followed through in future assessments in Healthcare.

Prisoners with mental health issues continue to be a problem and questions remain as to the suitability of prisons for some of these individuals. The integrated Mental Health Team is provided by Cardiff and Vale UHB. They deal with prisoners who have a severe and enduring mental illness and carry out risk assessments and undertake discharge planning for prisoners who are due to be released. Recently, a full time Occupational Therapist was recruited who has experience in working with prison personnel, and efforts are being made to get Counsellors from a nearby University to assist with treatments. This is an area that needs to be monitored so prisoners are provided the best support possible in dealing with their mental instability or emotional deficiencies.

Safer Custody and Violence Reduction

There are 2 part time managers, 1 full time officer, 1 full time civilian worker and a clerical worker in the Safer Custody Team. The members of this team work well together and are respected within the prison.

ACCT (Assessment Care in Custody and Teamwork) procedures are well used. Since June 2010 case management has been fully delegated to Wing SOs. It is the responsibility of the Wing Manager to inform Oscar 1 when an ACCT is opened. Safer Custody nominate a Case Manager, who is responsible for ensuring that an assessment is carried out and will then complete an 'Action following Assessment' and Care Map with the Assessor. The Safer Custody Team is available to oversee the ACCT booklets and offer support and guidance. A member of the team is available 7 days of the week. ACCT post closure monitoring reviews are in use; the first being mandatory at 7 days. Further reviews are at agreed dates.

Most ACCTs were opened in Reception, Induction and the Detoxification area. All members of staff have access to ACCT documents and Care Maps.

The Safer Custody strategies include locating risk assessed prisoners in double cells and allowing access to Listeners whenever possible. A free phone is available to Samaritans. Prisoners who are considered to be at an elevated risk are housed in safe cells. Prisoners at risk are visited frequently by the SO and the civilian member of the Safer Custody team

Managers have received Case Management training and further training was provided at the monthly training sessions at the beginning of the reporting period. These sessions have now been increased to 2 per month.

During the reporting period 251 ACCTs were opened. There were 116 incidents of self-harm these are higher figures than 2009/2010 and reflect the change in the ages of prisoners now admitted to HMP Cardiff. Concern has been felt that little activity, apart from a 2 hour art session, has been provided for prisoners who have self-harmed and are situated in Health Care. Towards the end of this reporting period an Occupational Therapist and a technician have been provided to Inreach. It is hoped that prisoners who have self harmed and are situated in Health Care can participate in the sessions provided.

During the reporting period there were 3 deaths in custody together with one prisoner who died while he was in police custody.

There were 7 Coroner's inquests during the reporting period. Great concern was felt by the IMB regarding the inquest into the death of a prisoner who took his own life in October 2009. The concern was also expressed in the 'Rule 43 Coroner's Report' written by the Coroner and sent to the Lord Chancellor and prison Governors. Similarly, concern was expressed by the Ombudsman. A series of failures were listed throughout this prisoner's period in prison and action plans have been drawn up in reply to the questions raised by both the Coroner and the Ombudsman. The Board will continue to monitor resolution of the systemic issues raised.

Violence Reduction

One officer from the Safer Custody Team deals with Violence Reduction (Anti-social Behaviour) and Bullying.

There were 394 incidents of anti-social behaviour investigated during the reporting period. This is an increase on last year's figures 277 incidents. This most probably reflects the change in the prison population and the increase in the number of younger prisoners.

The main sources of information for investigation comes from Wing Information books, staff members, and SIRs (Security Information Reports)

The Segregation Unit

The segregation unit is well managed by dedicated staff who relate professionally, efficiently and humanely to the prisoners in their care. The unit is always clean and tidy. Prisoners in the unit are visited every day by a Governor, Health Care staff and the Chaplaincy. The IMB rota member always visits daily during their duty week. The IMB are always informed by telephone message of new arrivals in the unit.

All paperwork is kept up to date and is available on request. There is a thorough audit trail of all dealings, incidents and interactions on the unit. Forms detailing Use of Force, Special Accommodation and Mechanical Restraints are routinely copied to the IMB.

Adjudications and Reviews are conducted according to legal and procedural requirements and the duty IMB member is routinely informed of hearings. Governors and Staff manage the process well although the venue is cramped and not conducive to the conduct of an important formal function of the Prison. An external adjudicator hears referred cases at the Prison monthly and the Seg staff support this function well with evidence, documentation, escorts, legal representatives and witnesses to manage.

During the reporting year there were 70 Use of Force forms generated, Special Accommodation was used 6 times and there were 21 dirty protests. The staff deal with dirty protests hygienically and prisoners are offered showers daily. These protests cause massive disruption of routine and accommodation availability in Seg. Cell cleaning is carried out by contractors.

There are often concerns with prisoners whose offending behaviour is associated with mental health problems. There is generally an effective link with the In Reach team but identifying more suitable accommodation is a problem.

Other Areas of the Prison Regime on which the Board has Issues to Report

Catering The Board commends the sustained high level of performance of the Catering function at Cardiff. Under the professional and responsive leadership of the Catering Manager, all staff achieve consistently high standards of catering for a diverse and demanding community within the constraints of the prison regime.

Deportees The Board frequently encounters cases of apparent stagnation of foreign nationals who have no clear deportation route. This usually occurs when the repatriation country presents a safety risk to the individual, movement is physically difficult, the individual lacks a passport or other travel documentation and relocation to an Immigration Holding Centre is not agreed. The upshot is that individuals remain within a prison regime when they are no longer prisoners of the Criminal Justice System. This is an injustice which places additional strains on the Prison Regime.

Induction Changes to occupancy have substantially impacted the throughput rate of the Induction unit. Additionally, many of those inducted are at the younger end of the age range and are likely to be more disorientated than others. The Board will focus more on this activity in the near future and work with Prison Staff to address any shortcomings as necessary.

Transport The change of Prison Transport provider created many problems and changed prison routines. Reception Staff displayed commendable flexibility coping with the disruption and minimising any impact on movement.

The Work of the Board

Activities and Composition

	2008/2009	2009/2010	2010/2011
BOARD ENTITLEMENT	17	17	17
NUMBER OF BOARD MEMBERS AT START OF REPORTING YEAR	8	12	13
MEMBERS AT END OF YEAR	11	12	12
NEW MEMBERS JOINING	4	1	4
MEMBERS LEAVING	3	1	5
TOTAL NUMBER OF BOARD MEETINGS	12	12	12
AVERAGE ATTENDANCE AT BOARD MEETINGS	9	8	7
FORMAL COMPLAINTS			54
APPLICATIONS RECEIVED	379	552	383
ADUDICATIONS HELD	1444	1691	1240
ADUDICATIONS ATTENDED	394	741	459
SEG REVIEWS HELD	299	132	70
SEG REVIEWS ATTENDED	63	23	10
USE OF FORCE FORMS USED	65	78	70
SPECIAL ACCOMODATION USED	4	2	6
DIRTY PROTESTS	23	17	21

Applications

	2006/7	2007/8	2008/9	2009/10	2010/11
ACCOMMODATION	22	22	11	14	13
DIVERSITY RELATED	7	4	8	6	3
EDUCATION/EMPLOYMENT	23	19	20	23	12
VISITS	33	19	44	39	14
FOOD/KITCHEN	13	10	13	8	7
HEALTH	54	59	40	111	103
STAFF/DOCTOR				12	15
MEDICATION				27	38
APPOINTMENTS				9	18
DENTIST				24	20
OTHER				39	12
PROPERTY	44	34	30	49	43
SENTENCE RELATED	62	42	68	55	96
STAFF/PRISON RELATED	17	12	24	19	12
TRANSFERS	66	42	31	59	21
MISC	66	66	68	79	58
APPLICATIONS RECEIVED	416	365	379	552	383
ADJUDICATIONS HELD					1240
ADJUDICATIONS ATTENDED					459