



Annual Report for HMP Cardiff by its Independent Monitoring Board

1 September 2011 – 31 August 2012

Section 1

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:

1.1 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.

1.2 Inform promptly the Secretary of State, or any official to whom he has delegated authority as it judges appropriate, any concern it has.

1.3 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.

Section 2

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Section 3

Description of Cardiff Prison

3.1 HMP Cardiff is a large city, male, Category B local prison in public ownership. The current Operational Capacity (Op Cap) is 804 with plans for a modest uplift of a 10-12 bed Category D Resettlement unit In April 2013 in the old Painting and Decorating shop. There is no fundamental change in the type of accommodation available with the exception of the substantial refurbishment and change of use of several workshops.

3.2 The Governor is committed to delivering the Fair and Sustainable organisational package with all people and structures in place by April 2013. This process is demanding and involves the loss of key rank structures and the introduction of reduced numbers of replacement ranks. This new structure will be required to deliver substantive efficiency savings within the imminent Competitions and Benchmarking programme.

3.3 The Governor intends to identify, develop and deliver, where possible, prisoner population increases in line with any opportunities through NOMS. In particular, he will look to promote the value of Cardiff by bidding for additional spaces (120) on the recently demolished G Wing site in addition to the 10/12 bed Category D Resettlement unit mentioned above.

3.4 He has responded to the Government's "Rehabilitation Revolution" by implementing working workshops in partnership with outside businesses and community bodies such as Railtrak and the Welsh Highways Agency and others are in negotiation. In partnership with the CLINKs resettlement charity and HMP Prescoed, Cardiff has opened the second CLINKs restaurant providing high quality resettlement opportunities for Welsh based prisoners as chefs, front of house staff and cleaners.

3.5 Strategies and plans are in place to develop and improve Cardiff's approach to drug and alcohol reduction by:

3.5.1 An aspiration to introduce a drug recovery wing on D wing.

3.5.2 Agreeing a clear drug detoxification strategy with the local health board that balances the need to reduce dependency with the concern to protect life.

3.5.3 The improvement of shared knowledge of drug use amongst prisoners between departments.

3.5.4 Considering the introduction of targeted compliance testing where appropriate and effective (e.g. Category D unit)

3.6 The Governor is developing Cardiff's physical Visits facilities and improving prisoners' families experience in partnership with the Prison Advice and Care Trust (PACT).

Section 4

Executive Summary

4.1.1 Welsh Assembly Government (WAG) Law compels public establishments in Wales to be bi-lingual. The Governor is seeking to comply with this in a sensible and appropriate way through translation of critical information and the availability of a reasonable number of bi-lingual staff. It should be noted that there are a substantive number of Welsh first language prisoners in English prisons; particularly around the border such as Liverpool. (Paragraph 5.1.1)

4.1.2 The Learning and Skills Department have demonstrated excellent energy and initiative in implementing the Governments 'Rehabilitation Revolution' at Cardiff in partnership with a range of commercial employers. (Paragraph 5.1.2)

4.1.3 The delivery and assessment of remedial training and education for prisoners with Special Educational Needs and Specific Learning Difficulties is hampered by high levels of turnover. (up to 90 prisoners per week) (Paragraph 5.1.3)

4.1.4 Very high utilisation rates (60%) of the gymnasium suggest that investment in its basic infrastructure would be appropriate and beneficial to the health of the whole Establishment. It is becoming dilapidated but financial provision appears to compete with other key areas of Learning and Skills. (Paragraph 5.1.4)

4.1.5 There have been very positive improvements in the overall performance of Healthcare largely achieved through better management and improved staffing. (Paragraph 5.1.5)

4.1.6 The rate of population turnover and the apparent prevalence of mental illnesses amongst prisoners, means that the In-reach Team are always under enormous pressure to keep pace with demand. (Paragraph 5.1.6)

4.1.7 The Governor is tackling the 'smoking' dilemma in a measured and sensitive way but he is clear that the law must be complied with at some point in the future. (Paragraph 5.1.9)

4.1.8 The timely completion of the Clink restaurant project represents a commendable cooperative private/public sector project and has great potential for skills training, high quality resettlement and positive public relations. (Paragraph 5.2.3)

4.1.9 The effectiveness of the Resettlement department is undermined by staffing pressures, high rates of turnover and turbulence and budgetary constraints. (Paragraph 5.2.5)

4.2.1 Two healthy initiatives arising from Safer Custody reviews are a Mental Health Awareness training session for all discipline staff and additional training to reduce the number of Governor administered punishments and apply other discretionary measures available under Incentives and Earned Privileges (IEP) provisions at Wing level. (Paragraphs 5.3.5 and 5.3.6)

4.2.2 The Board will routinely attend more Induction sessions and put in place measures to help ensure that the purpose and accessibility of Members is readily understood. (Paragraphs 6.2 and 6.3)

Particular Issues requiring a Response

4.2.3 Policy matters on which a reply from the Minister is sought.

- a. The Board would benefit from an understanding of UK policy towards smoking in prisons by Staff and prisoners and the relevant timescale for implementation. (Paragraph 5.1.9)
- b. The Board consistently reports on the stresses placed on the Prison Service by the award of custodial sentences to offenders with Mental Health problems. Difficulties are magnified by high rates of turnover and short lengths of sentence. Are alternatives being explored? (Paragraph 5.1.6)

4.2.4 Other matters which require the attention of the Minister.

The Minister may wish to note the potential problems with the provision of bi-lingual facilities for Welsh (first language) speaking prisoners and their dependants in English prisons. (Paragraph 5.1.1)

4.2.5 Operational matters requiring a response prepared or commissioned by the Prison Service.

- a. The Board sees potential for the successful engagement of a range of potential employer organisations to support and underwrite skills and employment resettlement training, to be rolled out as exemplary practice to other similar prisons. (Paragraph 5.1.2)
- b. The Board commends the Gymnasium Staff for the intensity and beneficial effects of their work and considers it highly desirable that funds are invested in the Gymnasium infrastructure. (Paragraph 5.1.4)

Section 5

Equality and Inclusion

5.1.1 HMP Cardiff has an effective and proactive Diversity and Equality Team with volunteer members on each wing providing grassroots feedback. The Board has witnessed the effectiveness of the prison's policies during the resolution and management of a wide variety of equality and inclusion issues including transgender, ethnicity, cultural, sexual orientation, age and disability. The Team have an informative intranet site which reports on issues and logs key data about protected characteristic prisoners. The availability of Welsh speakers on the staff and the necessity to transform to a much more bilingual establishment in terms of essential documentation is being addressed to conform to WAG law.

Education, Learning and Skills

5.1.2 Education, Learning and Skills is a buoyant and well led function of HMP Cardiff. Much innovation and enterprise has been demonstrated in the setting up of collaborative ventures with outside employers and charities concerned with track laying and maintenance, road maintenance, computer refurbishment, multi-media projects, car engine maintenance, contract work for exhaust, brake and tyres businesses, reprographics and bicycle refurbishment. Competence qualifications are awarded to meet potential employers' needs and clear pathways to potential future employment are set up.

5.1.3 Initial screening is carried out during induction to assess work suitability and more comprehensive assessment and support is offered to all prisoners with literacy and numeracy problems. Many do not wish to take up the offer preferring to work to have a better wage. For many prisoners, their short sentencing time obviates provision of significant and meaningful remedial education.

5.1.4 The Gymnasium falls under the functional direction of Learning and Skills. Sessions are in demand and over 60% of prisoners participate in mainstream and remedial activities. Infrastructure investment is required if this high level of participation is to be sustained.

Healthcare and Mental Health

5.1.5 This year has seen a significant management restructure and reorganising within Health Care, with the appointment of a new Clinical Director and Senior Nurse Manager. The Cardiff and Vale UHB continue to be the main service provider commissioned by HMP Cardiff. Staff are mainly HMPS employed but will eventually migrate to Health Board ownership. The Health Care facility, a twenty-two bedded stand alone property, has excellent facilities available and continues to provide for the prison population in HMP Cardiff and also other local prisons who require assistance.

5.1.6 During the year, staffing levels have been low particularly in nursing, which, along with some long term sickness contributed to delays in waiting times on occasions and must have affected patient care to a degree. Recently this has been addressed and 4 Band 5 nurses and 2 Band 3 nurses have been recruited which will assist in giving prisoners a faster and better service. A triage system is proposed using new nursing staff which will support the GP compliment. There are now two GPs who are on rota and adjustments in their schedules have improved waiting times, which had averaged at around a week for non urgent cases. Some embargo slots are built in to cater for more urgent situations. Whilst the IMB continues to get a steady flow of applications about health care needs, it is evident that the new management structure is addressing prisoners concerns in a much more transparent and proactive way. Relations with the Board have improved immeasurably. The improved communication is helping the Board to placate prisoners with concerns as well as improve the health of inmates.

5.1.7 Prisoners with mental health issues are getting assistance but the system is under strain. With an average of 360 new receptions a month, about 15 per day, the In-reach team get around 30 referrals a week which equates to 1 in 3 prisoners being referred with mental health needs. Local figures indicate that 50% are at HMP Cardiff for less than two weeks and 70% for less than four weeks. 20% of the prison population have ongoing healthcare needs. With such a transient population, long term help in this short time frame is unrealistic but the team have developed a Primary Mental Healthcare Pathway to maximise provisions and provide support. A more constructive and helpful way needs to be found to pass on data so that prisoners either moving to other establishments or even being released can be supported from where they left off in HMP Cardiff. System One has been utilised but still not all health departments (or prisons) are geared up with this communication and data tool. Further staff are needed to complete the In-reach team and they are recruiting a Band 6 RMN and a part-time Occupational Therapist, which will add positively to the already stretched team.

5.1.8 It has been disappointing and saddening that deaths in custody are still a major factor within this establishment. It was noted that a Suicide Risk Tool was not being applied within Reception but this is being re-introduced. The new extended Courts' sitting times may also impact on Healthcare reception if prisoners are received 'out of hours' and need screening. The Welsh Assembly Government (WAG) and the UHB are also aware of potential increased capacity if a new 120 bed unit is built on the site of the old G wing, and implications for Healthcare in this.

5.1.9 Healthcare has been selected as a pilot in the Stop Smoking in Prisons initiative and it is possible that in the future, the whole prison will be a 'no smoking' prison. Whilst obvious health benefits must result from this, some concern was raised as to why the most vulnerable prisoners within Health Care are to be the first. WAG are funding the nicotine patches for all who take part in this scheme and staff have received training to implement this measure, which may cause many patients some discomfort during the course and will need careful monitoring.

5.2.1 There have been some issues with escorting prisoners to clinics and when escorts are not available, patients not being able to attend their appointments. The Governor is aware of the problem and has taken steps to remedy this situation

5.2.2 A Healthcare workshop has been arranged in December to discuss the future healthcare needs and provisions for HMP Cardiff. The IMB representative has been invited to this meeting. This IMB representative also attends the quarterly Health Partnership Board meetings so communication between the Healthcare providers and IMB are good. A better spirit of co-operation exists within the Healthcare department and this can only benefit their patients and the IMB look forward to working with this team in the future.

Purposeful Activity

5.2.3 In addition to the work available under the learning and skills initiatives, work is available in the kitchens, as qualified industrial cleaners, in tea packing, Braille, painting and decorating and laundry. Work is available for Cat D prisoners in the Clink Restaurant but these are mostly provided from HMP Prescoed at the moment. Future plans will see all these workers drawn from HMP Cardiff in due course. Work is for cleaners, waiters and chefs.

5.2.4 Labour Board processes are being modified to speed up and make more transparent the allocation of work placements. Functional responsibility will fall under the head of Learning and Skills.

Resettlement

5.2.5 The Resettlement Unit continues to work under the twin difficulties of a reducing budget and, as HMP Cardiff is a remand unit, a high turnover of inmates. It is estimated that the workload of the unit has increased by almost 100% over the last 2 years. Budgetary constraints throughout the sector have led to some agencies having to withdraw from the work they undertook in partnership with the unit. This in turn means the work within the unit is largely undertaken by the staff group which has reduced in number.

5.2.6 The aim of the unit is to remove as many barriers to reintegration back into the community as possible; both for sentenced prisoners and those remanded in custody. Nobody is excluded from the programme but individuals have to agree to attend and show a commitment to attending the programmes offered. The pre-release course offered covers accommodation issues, preparation for work and seeking employment plus money management and support to open bank accounts. As well as the programmes such as the Thinking Skills Programme (TSP), Controlling Anger and Learning to Manage it (CALM) and Building Skills for Recovery (BSR) the unit is able to facilitate individual counselling to help prisoners overcome the difficulties that may hinder their successful return to the community and their families. The unit is seeking to ensure that all staff are aware of the programmes offered and have an annual target of 25% of staff undertaking awareness raising training.

5.2.7 A pilot Driver Impact course recently took place targeted at those inmates who had current or previous driving convictions or convictions for associated offences. The programme was run in partnership with the South Wales Fire Service, South Wales Police and Cardiff Council. The feed-back from both staff and participants was encouraging and it is hoped that several courses a year can be held.

Safer Custody

5.2.8 There has been a change in staff since the previous reporting period. There are now two new part time principal officers. The team work well together and are respected throughout the prison.

5.2.9 A combined Safer Custody and Violence Reduction Meeting is held each month and is now chaired by one of the part time principal officers. Representatives from Induction, Segregation Residential Staff, Listeners, Probation, Psychology, CARATS, Healthcare and Chaplaincy should attend this meeting. Geo-Amey and IMB are invited to attend as core members. Complaints are often made by senior officers regarding poor attendance at

the monthly meetings. However, meeting times are frequently rearranged or cancelled and this could perhaps account for this problem.

5.3.1 The Standing Agenda covers a review of serious incidents, performance against targets statistics, feedback from self-harm interviews with prisoners, Assessment Care in Custody and Teamwork (ACCT) statistics and trends and all bullying and violent incidents are reviewed to identify trends that can be acted on.

5.3.2 Average figures per month for self-harm are 8, anti-social behaviour 54 and 24 open prisoner ACCTs. There were two deaths in custody and one coroner's inquest during the reporting period.

5.3.3 Information has been circulated regarding lessons learnt after the self inflicted deaths in custody during the previous reporting period. These include identification of risks in new prisoners, meticulous ACCT observations and use of double cells for prisoners on ACCTs. Additionally, the Safer Custody Team is regularly adding action plans from Audit recommendations, Ombudsman and HMCIP reports.

5.3.4 Training continued during the reporting period for the ACCT Foundation and Refresher courses, Case Managers course, ACCT assessors' course and Safer Custody Workshop for trainers. Training has been taken onto the wings for those departments where there has been an insufficient number of staff available to release members of staff without unacceptable disruption eg Segregation Unit. Listeners and Samaritans continue to provide valuable support to prisoners on the Wings.

5.3.5 **Improvements Noted.** Activity packs have been produced by a member of the Safer Custody Team for issue where appropriate to prisoners housed in safe cells. Since mental health issues appear to one of the main reasons given by prisoners when self-harming incidents are investigated an Awareness of Mental Health Issues Training Day is to be held in October 2012 to improve recognition of early indicators and remediation.

5.3.6 **Concerns Noted.** There have often been insufficient officers available to escort prisoners to healthcare for mental health assessment and treatment. There appears to be insufficient staff available to implement a treatment programme for prisoners showing extreme antisocial behaviour (ASB). The Safer Custody Team has observed very effective interventions in other prisons aimed at tackling ASB. There is concern that too much reliance is placed on Adjudications as a means of discipline rather than Officers using the Incentives and Earned Privileges (IEP) system for prisoners showing ASB.

Recent initiatives resulting from the latest HMIP report action plan have done much to clarify policies and procedures for both staff and prisoners.

Segregation

5.3.7 The Segregation Unit is the prison function most frequently visited and monitored by the Board. All processes are well regularised and transparent with well maintained physical records which are regularly seen by Board members. It is well run, efficient and manned by experienced and very competent staff. All mandatory requirements for notification of events to the Board are met.

5.3.8 Board members regularly attend Adjudications in the Segregation Unit. The volume of these hearings is being addressed in part by the Safer Custody Team who feel that Officers should exercise more discretion in the use of the local powers available to them on the Wings without recourse to formal charges. This will require additional training for Officers to ensure that fair and sound disciplinary conditions are not undermined. During the reporting year there were 123 Use of Forces forms issued, Special Accommodation was used 3 times, and there were 7 dirty protests.

5.3.9 **Concerns.** A consistent ongoing concern is with prisoners who display mental health problems and are often violent, unpredictable and unreasonable.

Section 6

Induction and Reception

6.1 Induction is part of the Induction and Reception Group in Cardiff Prison. Her Majesty's Chief Inspector of Prisons indicated in his last report that Cardiff should review its induction and reception system so that every prisoner's needs were identified on his arrival at the prison. The new Induction and Reception Group was established about a year ago as a response to this and the Board has also adopted a more structured approach to monitoring this Group in the recent months. Regular visits are made to the Reception area where efforts have been made to soften the appearance and initial impression of the establishment. There are now potted artificial trees outside the door and canvas prints of Welsh scenes in Induction and Reception.

6.2 On C wing, which is now the Induction wing, the 18 staff members in the group provide continuity for prisoners when they first come into the establishment. Prisoners are seen on their first morning by the Chaplain of their chosen faith, the CARATS team to help with any drugs problems and other dependencies, they are taken to the gym for an assessment and they attend an Induction Group run by one or more of the Wing Staff. Some prisoners seem to be still in a state of shock after their Court Appearance and subsequent sentencing which has resulted in them being here. It is not clear how much of this Induction they are able to absorb. However, there is now a machine on the wing and on some other wings too which has a touch screen and is part of the LOGIPLEX system in the prison. At the touch of the screen they can call up the functions of the various parts of the prison and the services they can access in their own language.

6.3 Members of the IMB have been observers at the Induction Group. It is important for the prisoners to see IMB members and hear what the IMB do and for the Board to see some of the prisoners as they begin their sentences or remand time in the prison. The IMB is also making a contribution to the LOGIPLEX system so that prisoners can see what it has to offer.

Section 7

BOARD STATISTICS	
Recommended Complement of Board Members	17
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	13
Number of new members joining within the reporting period	3
Number of members leaving within reporting period	1
Total number of Board meetings during reporting period	12
Total number of visits to the Establishment	424
Total number of segregation reviews held	93
Total number of segregation reviews attended	9
Date of Annual Team Performance Review	TBD

Code	Subject	2009	2010	2011	2012
A	Accommodation	11	14	13	16
B	Adjudications				1
C	Equality & Diversity (inc religion)	8	6	3	7
D	Education/employment/training inc IEP	20	23	12	5
E 1	Family/visits inc mail & phone	44	39	14	7
E 2	Finance/pay				11
F	Food/kitchen related	13	8	7	4
G	Health related	40	111	103	97
H 1	Property (within current establishment)	30	49	43	29
H 2	Property (during transfer/in another establishment)			13	11
H 3	Canteen, facilities, Catalogue shopping, Argos			10	11
I	Sentence related (inc. HDC, ROTL, parole, release dates, re-cat etc)	68	55	96	38
J	Staff/prisoner/detainee concerns inc bullying	24	19	12	20
K	Transfers	31	59	21	26
L	Miscellaneous	68	118	70	36
	Total number of IMB applications				369
	Of total: number of IMB Confidential Access was:			54	41