



Annual Report
of the
Independent Monitoring Board
at
HMP Frankland

for reporting year
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Monitoring fairness and respect for people in custody

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Statutory role of the Independent Monitoring Board

The Prison Act 1952 requires every prison to be monitored by an independent Board appointed by the Secretary of State from members of the community in which the prison is situated.

The Board is specifically charged to:

- 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.
- Inform promptly the Secretary of State or any official to whom he has delegated authority as it judges appropriate any concern it has.
- 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 the prison's records.

Executive Summary

The business plan launched during 2015 remains the significant vehicle for carrying the essential developments and improvements to prison life which have been prioritised in this reporting period. The key issues highlighted last year surrounding security, decency, re-offending, safety, people and performance are still very active ingredients in the plan but further and specific operational initiatives have now been put in place, helping to deliver recently introduced Ministerial Priorities. These include;

- Working with education providers to prioritise the role of education in reducing re-offending (9.2) A positive response to the Dame Sally Coates review of education in prison.
- Enhancing the existing commitment to improve the volume and diversity of work for prisoners to gain vocational qualifications (9.1,9.2) and structured engagement with more employers who are prepared to provide work in prisons as an initial preparation for ultimate release. (10.3)
- Working together with treatment providers to continue to enable those with drug and alcohol addiction and mental health problems to access appropriate interventions leading to sustainable recovery. (11.2)
- Support and facilitate productive family relationships throughout a prisoner's sentence. (5.6)

Healthcare is an area of the prison services which has seen a significant number of new initiatives, delivering prisoner benefits, introduced over the reporting period (8.1) and in spite of the fact that the department is still understaffed, with recruitment and retention a serious concern, it is recognised that the safe and timely way services have been delivered to the prisoners have been mostly better, and in no instance worse, than would have been the case in the community.

The prison was already moving significantly along a progression pathway with the tangible benefits of the 'pride, principle and purpose' objectives but the formal introduction of the Rehabilitative Culture (RC) has been an important and overarching feature in promoting positive changes in the mind-set of the whole prison. (11.1). It is an ongoing and long term program which touches all aspects of prison life. Originally started in the High Security Estate (HSE), it is intended to emphasise and provide support and pathway facilities for prisoners to reduce the negative impact of long term imprisonment and with help and guidance embrace the opportunities of re-categorisation, risk reduction and a productive, purposeful and structured route to ultimate release. The Board recognises the value of

successfully increasing the numbers of both prisoners and staff participating and wholeheartedly supports this initiative.

The prison has remained a very strong Level 3 throughout the reporting period and in the opinion of the Board is a safe, decent and secure establishment.

Question for the Prison Service

1. The CTC process has, if anything, become more complicated and intensive. It now involves the applicant being provided with a “document checking tool” to allow some ID information to be inputted on a computer, but not an iPad, and then printed off and physically brought to a vetting appointment at the prison. The vetting clerk then fills in a “clearance request form” and sends it to Shared Services. The applicant will then receive an on-line questionnaire and guidance document. This also involves uploading documents and a photograph, a daunting prospect for some.

Potentially good members have been lost in the past through the time taken element, but this new protocol, which may be deemed more efficient in some quarters does nothing to actually speed up the process and adds further negative aspects for candidates who do not have either the equipment or confidence and expertise (or even the resolve) to continue with the application. Most applicants who can afford the time and make the necessary commitment to an IMB, know the value of community service but may only have very basic IT expertise.

The Board fully appreciates the importance of the enhanced clearance, but maybe Governing Governor discretion to allow limited, temporary access prior to full clearance, say, just for board meetings might be included in the Memorandum of Understanding between the IMB National Council and NOMS for relevant establishments.

2. It is a frustration for patients as well as the healthcare management that the failure to deliver consistent GP cover across the week, as well as sessions that start and complete on time to avoid unnecessary cancellations, continues to impact the quality of provision as well as the trust and confidence patients have in the department’s services. Spectrum, the subcontractor responsible for the GP provision in the prison, needs to address these shortfalls as a matter of urgency.
(8.1.4)

Questions for the Governor

1. The Board very much recognises the importance of the Rehabilitative Culture and the need to promote the message. Prisoner champions wear the identifying shirts, ‘nailing their colours to the mast’ as it were. If staff, uniformed and otherwise and not just the existing champions, could be encouraged to display some symbol, say, a pin badge or tie pin, to indicate their engagement with the RC, it would significantly enhance the working

together ethos and give the committed prisoners a greater degree of confidence in their own promotional work with their peers. (11.1)

2. The Board would welcome an upgrade of the intercom system in the MPU interview room ("bubble"). Prisoners are seen in this room by a variety of people, invariably in the context of confidentiality and sensitivity and conversations have to be conducted with the parties basically shouting at each other. It is not conducive to meaningful dialogue. (6.2)
3. The Board is aware of an ongoing problem with the condition and cleanliness of prison issue bedding, particularly sheets, which are returned from the central processing laundry at Holme House. Can a solution be found or is this entirely outside the prison's control? (7.5)
4. The Board would welcome greater emphasis being given to the use of the Employment and Training Portfolio in sentence planning. The Board regards it as a particularly important tool and it is essentially unfair to a prisoner if its potential contribution in key decision making is omitted. (9.3)

Description of the prison

Accommodation

HMP Frankland was the first purpose built dispersal prison and opened in 1983 on the outskirts of Durham City. Providing a maximum security environment for adult convicted males serving sentences of over four years and remand Cat A prisoners. The prison has an operational capacity of 859 and employs 882 staff.

The main prisoner accommodation consists of nine units as follows

- Four original wings – A, B, C and D. Each can house up to 108 vulnerable prisoners.
- Two wings, F and G, which opened in 1998. They can house up to 206 ordinary location prisoners.
- The Westgate Unit (capacity 65) opened in 2004 for prisoners with severe personality disorders (SPD). It includes the Psychologically Informed Planned Environment (PIPE) (capacity 21) opened in May 2012.
- J wing which opened in 2009 and which can house up to 120 ordinary location prisoners.
- An inclusive and segregated unit will open shortly as the first in the High Security Estate (HSE) to hold exclusively prisoners with extremist views.

The following Agencies provide support to the prison.

- Healthcare for prisoners is provided by G4S with a breakdown of subcontractors and Macmillan Nurses.
- Learning and Skills development is provided by NOVUS.
- Security support is provided by Durham Police (2 Police Liaison Officers).
- Prisoner Escort Services are provided by GEO/Amey for all prisoners other than Cat A.
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The following voluntary organisations and volunteers help in the smooth running of the prison:

- The North East Prison After Care Society (NEPACS) volunteers work alongside prison staff to assist in the day to day running of the visitor's centre and providing support to families.
- The Sunderland branch of the Samaritans provide training for Prison Listeners.

- Pastoral visitors and official prison visitors, coordinated by the Chaplaincy are available to prisoners.
- The Sunderland branch of Mind provides counselling support for prisoners with mental health problems.

4. Safety in Custody

4.1 Frankland is part of the High Security Estate (HSE) and as such generally receives only prisoners transferred in from other jails. Late arrivals are rare and prisoners make overnight stops at other establishments appropriate to their category where particularly long journeys are involved. All arrivals are screened, their clothes and property checked for prohibited items and they are seen by a nurse. Accompanying information is noted regarding any particular issues and the prisoner is located in one of the dedicated induction wings. Occasionally prisoners arrive and are placed in segregated conditions prior to risk assessments regarding re-location.

4.2 Separation of prisoners into vulnerable and normal location wings does much to reduce violence and bullying. Following very intensive risk assessments, some prisoners not convicted of sex offences are located on VP wings for their own safety. During the reporting period around 20% of the VP population fell into this category.

Staff are aware of the problems between the vulnerable and normal location prisoners and areas of potential conflict are managed well. Areas where integration occurs, typically meetings, such as the Prisoner's Consultative Committee, or visits, within the same location, are invariably trouble free. Tensions between different groups, across all locations, are monitored and a strategy to protect high risk/ profile prisoners is in place.

4.3 Staff are particularly alert to vulnerability issues and in the case of self-harming and suicide prevention a pro-active approach is adopted through the very effective use of the Assessment Care Custody and Teamwork (ACCT) process. Full risk assessments are carried out, with input from mental health and other relevant disciplines, and appropriate measures put in place to reduce that risk with a detailed ACCT log maintained and individual reviews carried out at regular intervals with a designated member of staff responsible for each case. Observations of the prisoner at risk are maintained at appropriate intervals including constant watch for those assessed to be at the highest risk. The ACCT document is only closed once the issues on the caremap have been addressed and the case review team assesses it is safe to do so. IMB members regularly monitor the number of open ACCTs, at times checking entries and, when appropriate, entering their own observations.

There has been a significant increase in the number of reported self-harming incidents over the last year (76%) but the figures are somewhat skewed in as much as 38% of the total incidents were accounted for by only 9 prisoners with one individual responsible for three times more recorded incidents than the next highest.

Listeners, who are trained by the Samaritans and are available day and night to prisoners experiencing personal crises almost certainly deter some men from self-harming. Samaritan phone links are available at any time.

4.4 The levels of violence are stringently recorded in great detail and bullying and victimisation are taken seriously and dealt with robustly. Incidences of assault on staff and prisoner on prisoner violence were comparative with the previous year but considering the size and nature of the prisoner population the overall figures are extremely low. The prison is committed to implementing the use of body worn video cameras following a successful pilot. A further safety centred initiative will see the recruitment of prisoner violence reduction representatives to work with Safer Prisons staff to reduce levels of violence, promoting the RC and pro-social behaviour.

4.5 Overall, prisoner perceptions of safety are generally positive. Due to the nature of the dispersal system prisoners, both privately (in individual meetings with IMB members) and in open meeting forums, are apt to make comparisons with other jails and Frankland is, in the main, favourably reported in this context.

4.6 There were two deaths in custody during the reporting period, both from natural causes. The IMB was involved in the initial assessments following both deaths. In the first case the Ombudsman emphasised that the prisoner had received the standard of care he would have had in the community and praised the prison for the early intervention of the family liaison officer. In the second case he recommended the use of a structured tool to improve the quality of initial assessments and this has now been introduced

5. Equality and fairness

5.1 The Board believes that senior management remain committed to the equitable treatment of all prisoners to make them feel safe and respected with access to all regimes and facilities equally.

5.2 The monthly consultation meeting of the Diversity and Equality Action Team (DEAT), attended by a Board member is valued as a useful forum to discuss any issues raised by the prisoners representatives and there is an obvious willingness to accommodate and resolve them.

The Board receives very few applications concerning this area but there is a dedicated complaints procedure and Discriminating Incident Reporting Forms (DIRFs) are readily available to all. All replies are routinely checked against various quality criteria by the Deputy Governor. A more focused management structure has been introduced, as recommended in the 2016 HMIP report.

Frankland is very experienced in dealing with a population reflecting all of the protected characteristics plus recognising the needs of other major groups like elderly prisoners to small minorities such as war veterans.

5.3 A third of the population is over 50 (and increasing) and almost 40% have a registered disability. Special landings have been designated for disabled prisoners with adapted cells, special showers and aids to support daily living including a social worker for those needing more specific care. A bid has been made for funding to install a stair lift to allow prisoners with mobility problems to visit education and library facilities, which are inaccessible to them. This was also an HMIP recommendation.

The Board's last report suggested that more needed to be done to provide some stimulation for elderly, retired prisoners and this has resulted in the setting up of a nostalgia group and a Be Active initiative. The Buddy Scheme is much appreciated by this group too.

5.4 Transgender prisoners have benefitted from some relaxations in security measures such as allowing wigs to be worn and variations to the canteen and facilities lists. The relatively small number of prisoners in this group has enabled the IMB to closely track the challenges presented and the prison's constructive response to transgender prisoners.

5.5 The chaplaincy covers all religions currently practiced in the prison plus involvement in pastoral areas like the family day visits, and the kitchen caters for all the dietary permutations and variations.

5.6 Maintaining family ties as far as possible is fundamental to the humane treatment ethos of the prison and visits are a key element. Recorded views of visitors' experiences are overwhelmingly positive. Prisoners and visitors alike, where comparisons are relevant, invariably rate the visiting experience at Frankland extremely favourably against other jails, with written and verbal testimonials, and mostly judge it to be the best. The good work of the prison staff and the North East Prison After Care Society (NEPACS) volunteers who, in many cases, know the visitors by name and are unfailingly helpful and polite. This has been enhanced by a complete refurbishment of the visitor centre and main room with new fixtures, furniture (made in the prison and showcasing the prisoners' work) and a complete decorative makeover.

NEPACS produce an extremely comprehensive but 'easy read' brochure answering every question a visitor, whether new or regular, could possibly ask and which is reviewed and updated twice a year.

During the year 10,398 adults and 2,313 children visited the prison. The monthly Visitor Voice group meetings continued to be popular and well supported. They give families the opportunity to have an input and share their views, plus increasing their knowledge of prison departments and systems whilst providing valuable feedback on the services provided to them.

Incidences of passing prohibited items or inappropriate behaviour are relatively uncommon but the CCTV monitoring system is somewhat dated and does not allow instantaneous retrieval of evidential data.

Twelve family days are held each year, some themed, typically at Easter and Christmas, with opportunities for all classes of prisoner to take part. They are invariably oversubscribed and have become a significant good behaviour motivator in order to ensure selection. Food is laid on by the prison kitchen and activities for both children and adults are provided by the staff and volunteers.

5.7 This positive promotion of family relationships is also part of the criteria when prisoners make a progressive transfer to a lower category prison, when population management will endeavour to place them as close to family and other support mechanisms as possible, in preparation for their release. It is also taken into account with transfers within the HSE, although other factors can assume a greater priority.

5.8 Interestingly the People Survey for 2016 sheds some light on the staff views in relation to prisoners' welfare. Whilst only 21% of eligible employees took part in the survey, 84% believed the establishment had a positive view on dealing with self-harm and suicide and 79% thought that the prison encouraged prisoners to treat each other with respect. These were the best results in the HSE, and the Board acknowledges the value of these outcomes on the assumption that motivated staff will embrace the RC more readily.

6. Segregation

6.1 In line with the encouragement to adopt a more enlightened and appropriate thinking, the department has been re-named Management and Progression Unit (MPU).

It can hold up to 28 prisoners and has been at or near capacity for long periods of the year. There is an overall desire, certainly within the HSE, to reduce the number of segregation cells within prisons.

6.2 The Board are informed as soon as a new prisoner arrives with the reasons why. Members mostly attend the subsequent 72 hour sign up. All prisoners are seen and spoken to by a Board member at least once a week. The Board is also informed of any use of special accommodation, in and out, and the reasons for it, plus use of restraints and dirty protests both of which are relatively infrequent occurrences. Segregated prisoners are also seen daily by a governor, a nurse where medication is required, a member of the chaplaincy and a GP every other day. All prisoners receive a health screening within 2 hours of admission to the unit and this was adhered to 100% during the reporting period. Health checks are monitored and continued at the fortnightly reviews. Prisoners can have private conversations with Board members in a closed environment (the 'bubble') with a glass partition, via a barely adequate intercom system.

6.3 The 14 day reviews to assess the prisoner's current position and look for solutions to expedite his exit from the unit, are increasingly more efficient with the presence of population management, probation and psychology, in addition to chaplaincy, mental health and an IMB member. Prisoners have the opportunity at the reviews to make their own contribution, but around 50% decline to attend, particularly those with the most extended stays.

6.4 A sample of adjudications are randomly but routinely attended by Board members. Procedures are prescriptive with sentencing guidelines to ensure consistency and fairness for the prisoner and no Board member, many of whom sit in local magistrate's courts and hence very familiar with this activity, has had any concerns regarding conduct or disposals. No prisoner has made any complaints to the Board in respect of the adjudication process.

6.5 There are concerns regarding the MPU and members have observed, to varying degrees, an adverse effect on morale due, in no short measure, to periods of understaffing. Having said that the Board unanimously commends the staff who, whilst struggling to cope at times, have invariably managed to maintain the discipline and regime, working as a team in a pressurised environment. Due to the specialised functions and administrative demands on MPU staff it is not a welcome development

when frequent short term cover is needed for this key area. The Board for many years has believed that officers, in the main, were keen to work in the unit but that no longer appears to be the case.

6.6 Work has now started in order to comply with an outstanding decency issue by installing electricity into MPU cells, and this falls in line with other HSE jails. This has the potential to considerably improve the regime for the prisoners.

6.7 It is a department which generates an almost disproportionate amount of paperwork with detailed records kept concerning every aspect of a prisoner's regime, plus all the ancillary detail associated with activities such as reviews and adjudications. The Board members whilst only able to make random but regular checks, have found no deficiencies.

6.8 The progression culture is manifested in the decision not to transfer prisoners from the MPU directly to a Cat. B prison, but only, if necessary, within the HSE. Once prisoners realise that they are unable to force moves through non-compliance and poor behaviour, it is hoped that they will see the way forward is by relocating appropriately in Frankland and engaging positively with their sentence plans, personal officer and Offender Supervisor.

7. Accommodation (including communication)

7.1 Residential accommodation varies greatly between wings in a variety of ways, but all cells are single occupancy with a lavatory/ wash basin and the new transparent back small TVs. All wings have recreational/ association areas plus cooking and small scale laundry facilities. All cells have anti-ligature curtains and all wings have both bath and shower facilities, with updated privacy screens recently fitted in some areas.

7.2 Telephones are available on all wings either in booths or with fitted privacy hoods.

7.3 The original wings which accommodate the vulnerable prisoners have narrow corridors lined with cells with poor sight lines and limited natural light. This reflects their age but some of the weaknesses in design have been reduced by extending the CCTV coverage.

By contrast the newer, ordinary location wings have an open aspect with wide landings and a brighter, much less claustrophobic feel.

Prisoners are employed as cleaners and painters to keep the wings smart and well decorated.

7.4 The catering facility within the prison is well regarded for the quality of the food and the imaginative menus which the kitchen management can produce within the budgetary constraints. Mealtimes are well organised on the wings and generally run like clockwork and all medical and religious dietary requirements are catered for. A Board member inspects the kitchen once a week randomly and invariably can find no fault with hygiene or health and safety issues generally. The food, regularly tried by Board members, is tasty and wholesome, the cleanliness is good and the atmosphere normally very pleasant and friendly. Jobs for prisoners in the kitchen are much sought after and are not readily relinquished.

7.5 Whilst prisoners who use their own bedding can also use the wing laundering facility, the overwhelming majority of prison issue sheets and blankets are sent out to a central laundering facility at another local jail. During last year, complaints were made, mainly through the forum of the Prisoners Consultative Committee (PCC), on a regular basis about the poor quality of the cleaning and condition of the sheets (particularly) returned to the prison.

7.6 Another area which does raise prisoners' anxieties unduly is that surrounding property, either lost or delayed following a transfer, and tends to generate a

substantial proportion of applications received by the Board. Apart from delays or errors created by the sending establishment with cell clearances or transport issues when moved separately to the prisoner, there are some unavoidable delays in prisoners collecting their property from Reception. As with all movements, prisoners have to be individually escorted from the wings and the Reception department itself is often short staffed with the Benchmarking provisions reducing the levels deemed adequate, and then the allocated OSG's frequently not sent and also the man hours lost by officers being deployed to more immediate jobs.

7.7 The PCC holds regular monthly meetings and involves representatives of all wings (VPs and normal location) plus the Westgate sitting together debating areas of common concern, in a forum chaired by a custodial manager but attended by any relevant governors. This is regularly attended by an IMB member and is an extremely useful gauge of the pulse of the prison from the prisoners' perspective as the topics raised cover all aspects of the regime.

Catalogues have been a longstanding issue, particularly from an administrative perspective in actual ordering and the delays and attendant financial problems with out of stock items for example. Separate catalogue meetings have taken place and these 'technical' issues largely resolved. More significantly though the reduction in the number and range of mail order facilities is concerning as retailers switch to the more cost effective online shop route. Alternative methods are being investigated.

The facilities list, which is not standardised throughout the HSE, has been contentious with comparisons tending to be made as prisoners move around the dispersal system, but there have been recent concessions and prisoners have since been allowed to provide input argument to increase allowable items.

7.8 The overall relationship between prisoners and staff is good (see also RC and people survey) but mainly because the wing officers have a longer term and stable population to deal with. Prisoner information desks are available on all wings, some more prominent and pro-active than others, but all provide valuable services for the prisoners and tend to be supported by the wing staff too.

8. Healthcare and Mental Health

8.1.1 The situation in Healthcare (HCC) is very different now to how the Board saw it in the last report. The Board believes that the cause of the improvements coincides with the first full year of a new head of the unit in conjunction with the endorsement of the prison management.

8.1.2 There has been considerable capital expenditure with 2 treatment room floors being replaced (an inspection recommendation), 4 new hospital beds and new drugs cabinets installed. A well-man clinic has been set up, with particular reference to more elderly prisoners, with six monthly checks, and an older adult prisoner consultative committee formed.

8.1.3 The uptake on the smoking cessation initiative has increased significantly through the appointment of a dedicated lead nurse, the instigation of a specialist training program for staff and an advice and referral slip included in the canteen supplied to anyone buying smoking items. There are follow ups for those who give up on the program. The program itself could not be more comprehensive and supportive and becoming involved includes the prisoner signing a compact to ensure full engagement. Apart from the obvious health benefits for prisoners, and to an extent staff, the greater the success of this softly softly program the less need for more robust methods when the prison finally has no options re smoking or not.

8.1.4 The telephone appointment service has also taken off in this period and is being adopted by an increasing number of prisoners. Staff taking the calls are enjoying the experience, and prisoners appreciate the whole system working very efficiently. However, at the other end of the process the Board is still concerned by the number of prisoners not seen at the end of the GP sessions, having basically wasted either the morning or afternoon and in the process missed out on their normal activities. Whilst patients in the community can absorb the consequences of doctors running late, the core day of the prison does not allow any flexibility, creating frustration and ill feeling for the prisoners and healthcare management alike. The Board could see a value in the introduction of Advanced Nurse Practitioners (ANP) working alongside the doctors as potentially increasing capacity and efficiency.

8.1.5 Staffing in HCC overall remains a continuing problem. One issue, highlighted in previous reports but not resolved, concerns the time taken for advanced security clearance to work in the HSE. It affects many areas, including the IMB, workshops and education, but where a job is offered to someone already in employment the matter of synchronising resignation and notice periods simply compounds the

problem. There also appears to be a general shortage of suitably qualified nurses with the relevant experience.

8.1.6 On the treatment front efficiencies have been achieved by conducting MRI scans via a mobile unit located at another local jail with multiple prisoners able to be taken simultaneously. Clinically, another major breakthrough concerned two gastroscopy procedures carried out in the prison with the additional consequential cost and security benefits.

8.1.7 There are prisoners residing in HCC who have not been admitted for medical reasons and this concerns the Board. Whilst recognising that the reasons for being there invariably relate to the limited options available for locating elsewhere, they are effectively blocking beds, and they do, for all practical purposes, enjoy a better regime than would be the case on a wing.

8.1.8 A particularly imaginative initiative involves a nurse, who has been specifically trained as a Special Health Adviser to give help and advice on topics like lifestyle changes and diet for example, but who then is training twenty five selected prisoners across all of the wings, to also become health advisers, in a very pro-active prevention strategy.

8.1.9 The Healthcare Manager has practiced a policy of one to one complaints handling with prisoners himself with positive outcomes and he has also taken the PPO reports of the last six deaths in custody to confirm that any recommendations have been complied with.

8.2.1 Mental health is adequately covered with sufficient qualified staff in the department but the perennial problem, which appears to be a national one, is the fact that prison is not a suitable environment, with discipline staff not trained to cope with mentally ill prisoners, and the time it takes to transfer them to appropriate hospitals. Frankland has one particular prisoner who was advised that he would be moving to a named, designated hospital as soon as a bed became available, and more than a year later he is still here and becoming increasingly more despondent, despite the prison's best efforts on his behalf.

8.2.2 The specific objective of sustainable recovery of prisoners with drug and alcohol addictions and mental health problems has led to a close collaboration between the mental health team and DART to exchange ideas and specific prisoner treatment plans with attendance at each other's meetings and joint prisoner consultations. Additionally, the mental health team have received specific training in NPS abuse and particularly the effects and attendant problems relating to Spice.

8.2.3 Several prisoners have benefitted by completing Eye Movement Desensitisation and Reprocessing (EMDR) therapy to combat trauma nightmares and memories, typically PTSD sufferers. Cognitive Analytic Therapy (CAT) has also been introduced in the reporting period with measurable improvements in prisoners with troublesome behaviours. Good outcomes in both these areas are building blocks for progression pathways for prisoners who might have had difficulties coping otherwise because of their condition.

8.2.4 Finally, the Board would like to offer its congratulations to the Healthcare department on the positive results of major audits on Meds Management and Infection Control, (both the best in the N.E prisons cluster) and Quality of Provision.

9. Education and Other Activities

9.1 Education in the prison covers both academic and vocational subjects and is available to all prisoners, except those engaged in the Westgate treatment service, who are effectively 'on hold' until completion. Every prisoner coming into the jail goes through an education induction to assess his basic literacy and numeracy skills and formulate options based on need going forward, with appropriate support for identified learning difficulties. Funding provision is for 20,000 hours per annum and the curriculum offers functional skills in English and Maths to level 2, Music Media, Art, ICT and Business Administration. Additionally there are Open University and other Distance Learning courses available. Approximately 250 learners attend each week and, over the past 12 months, overall achievement rates were good in the majority of subjects, with qualifications being gained in Art and Design and Music Technology. However achievements rates in Maths at Levels 3 and 2 required improvement.

9.2 Following the Dame Sally Coates review of education in prison there has been a move to link education more strategically into the establishment's employability and enterprise initiative to try and reduce re-offending tendencies, help with re-categorisation and enhance employment prospects inside or outside prison. Prisoners themselves had tended to believe that only treatment was designed to produce these outcomes. Understandably, some prisoners would also find it hard to link academic achievement in prison with employment prospects potentially many years away in the future. However, the setting up of the Enterprise scheme provided real work opportunities with the chance to learn new and associated skills. Not only are high quality goods being produced in the prison – greeting cards, gift bags and boxes and tags – but they are then sold to the general public in retail outlets in local prison visitor centres and coffee shops and a gift shop in the Metro Centre. This scheme has a genuine commercial overlay in a structured framework. Typically, classes of no more than 10 prisoners effectively form the 'business' with 5 actually working towards qualifications, for example in business administration and ICT, and the other 5, already qualified, providing the support for the enterprise, the tutors, other learners and partners within the prison. The concept is duplicated with the same operations occurring with vulnerable prisoners and also those on ordinary location, with 'competing' creativity factors in new designs or new product ideas.

Not only does this dovetail with the Dame Sally Coates review and the long term employability prospects for prisoners, but it equally creates further impetus in the progressive ethos of the prison overall, with the pro-social and working together tenets of the RC. The Board recognises the value of this for the longer term and applauds the fact that it was the first in the local prison cluster and the HSE.

9.3 Another major initiative started in this establishment and, the Board understands, which is now the role model for other local prisons, is the Employment and Training Portfolio. This is a very professionally produced bundle which includes amongst other things, information on courses, qualifications and jobs available but, most significantly, it is the prisoners educational development and growth progression record through his sentence. It starts life as a blank template which begins to be populated with a prisoner's induction assessment and from then on records every course completed, qualifications or new skills obtained and, most importantly, the relevant Oasys scores. It is a dynamic archive which the prisoner keeps in his possession and takes with him when he leaves the establishment. It allows the prisoner to identify his own needs and to set targets in conjunction with his tutor or support worker, and become fully engaged in his own rehabilitation. Arguably it is one of the more important records a prisoner has through its potential contribution to the sentence planning process and supporting applications for re-categorisation or future employments.

Unfortunately this importance is not yet universally recognised and too often Oasys scores within the Portfolio are not updated and therefore accurate, helpful information is not being considered when key decisions regarding a prisoner's future are made. It is also disappointing that the portfolio, which can make a positive contribution to sentence planning, is not always incorporated into the process.

9.4 More positively, major changes have been made with distance learners and Open University students. Around 45 prisoners were involved during the reporting period and they had very limited access to computers and little or no support from the staff. Recently however, they have been brought more closely under the Education umbrella and two classroom based sessions have been introduced to complement the in-cell study with greater IT access and the opportunity to work together with other students. The Board sees this as a very welcome development and can only encourage potential further take up of such opportunities.

9.5 There are three libraries covering the main and vulnerable prisoner populations and the Westgate. These are well managed and run by a team of 8 Durham County Council librarians. All prisoners have good access but there are difficulties for some vulnerable prisoners with mobility limitations due to the siting of the unit (see 5.0). There is a trolley service for areas like MPU or Healthcare. There is a good range of fiction titles, plus some foreign language publications, easy reads, audio books, magazines and jigsaws, plus legal texts and reference materials.

In addition, the library staff provide a range of activities including a reading mentoring scheme called 'Turning pages', the 'Six Book' reading challenge, workshops with external authors and creative writing events. Pro social activities such as quizzes, chess tournaments and regular reading groups also encourage use of the libraries. Library staff often attend family days and provide popular activities like story telling for the children.

9.6 There are three gyms and sports halls, together with an all weather pitch, that are well equipped and used by prisoners and staff. Sessions, like employment and education are allocated by the Activities Hub but the facilities are also available

during evenings and weekends. Gym sessions on the whole tend to be very sociable events with prisoners helping each other with equipment in a relaxed, purposeful and collaborative environment.

9.7 When not engaged in formal purposeful activity, prisoners can spend time out of cell using communal games facilities, cooking, taking a shower, making phone calls or in general association.

10. Work, vocational training and employment

10.1 All activities, including education, are allocated by the Activities Hub and in general the prison provides sufficient work and activity places to engage most of the population in training and education, work and the gym. The part-time regime allows prisoners to engage in all the activities.

A minority of prisoners work on the wings in activities such as cleaning and painting or recycling and food preparation. Around 90 work very effectively as mentors and peer advisors.

10.2 The workshops are well managed and most prisoners engaged there develop useful skills manufacturing a range of furniture from natural timber, sheet materials and fabrics - including office and other furniture for government departments, commercial organisations and charities. The work varies from a few repetitive processes to highly skilled assembly of upholstery and prisoners are able to develop best practices and obtain qualifications working with hand tools and sewing machines. Later, with increased responsibility they have opportunities to develop specialist expertise with routers to precision cut boards for flat pack furniture and laser cutters to carve intricate name tags and labels for items sold through the social enterprise company.

10.3 All the skill sets developed in the workshops are transferable to outside employment and the prison is looking to forge valuable links with companies who would not only be suitable employers but equally are prepared to provide manufacturing work and effectively set a standard for 'real world' expectations. A major soft furnishings manufacturer is currently working with the prison in this respect. Senior executives and technical management have spent time with the prisoners and tutors and whilst there is some dislocation in the area of available technology, there have been encouraging indications that, under different circumstances, they would be happy to take a couple of the prisoners onto their payroll even at this early stage of collaboration. If this co-operation continues to develop constructively it could provide the definitive blueprint for similar mutually beneficial relationships. The Board look forward to reporting future exciting developments on this front.

11. Resettlement preparation

11.1 Resettlement is one of the basic reasons for the work of the whole prison and whilst very few prisoners are directly released into the community from Frankland there is a responsibility to make them more viable for timely progressive transfers and better able to cope with the transition. The RC initiative focuses on progression by positive reinforcement of all the existing elements of resettlement preparation.

Following a comprehensive launch, RC Champions were appointed for both prisoners and staff to cover the residential, education and workshop areas by becoming peer support workers and spreading awareness. Where prisoners have become truly committed, original initiatives have been introduced, typically the formalisation of prisoners being able to make positive inputs onto their own C-Nomis case notes, for example. This is potentially of great benefit to the prisoner for IEP upgrades, assisting in categorisation reviews and showing a pro-active attitude to the RC.

One prisoner has even had accepted and published, a substantial text on 'his belief and faith in the Rehabilitative Culture as evidence to the government's justice committee enquiry into Transforming Rehabilitation'.

Whilst figures relating to who's in and who isn't are difficult to calculate there is obviously a very committed but small percentage of prisoners who wish to serve their sentences in a pro-active, supported and conforming manner and equally a similar percentage who are non-compliant with the regime and will never buy into the RC. This leaves a variable majority who are steadily moving through their sentence plan but who with some structured peer support and an understanding of the benefits could easily engage

Success however does depend on the staff playing their part, particularly the wing based officers with the most day to day contact with the prisoners. It is the Board's view that fewer officers than prisoners are actively committed to the initiative, perhaps in part because of negative peer pressure, but, unless a greater number can be drawn in, the hoped for outcomes will take much longer to achieve.

11.2 As part of the reducing re-offending strategies a variety of programs are available which broadly address offender behaviour, usually violent, and sex offender treatments and generally there are waiting lists, particularly for the latter.

The Thinking Skills, Resolve and Self Change programmes all achieved the completion targets.

The Sex Offender Treatment Programmes, both Core and Extended and the Healthy Sex Programme (all 1:1 modules) achieved a total of 31 completions passing the target of 30, but more significantly with no drop outs.

An additional provision, started during the reporting period, which is being piloted nationally but unique to Frankland in the HSE is the Medication to Manage Sexual Arousal Service. Working with a specialist psychiatrist, men who may benefit from medication to help them control their sexual urges and experience less distress with fewer intrusive thoughts, can be referred and 10 have been selected so far.

An especially relevant programme is the Healthy Identity Intervention aimed at individuals on a 1:1 basis, who have offended because of their extremist views and actions. The therapy specialist has completed programmes with both Islamic Extremist and Extreme Right Wing prisoners. These interventions aim to promote disengagement and reduce the willingness to offend on behalf of a group, a cause or an ideology.

The Board believes these programmes are well presented, appropriate for the population and a keystone in helping offenders reduce their risk.

11.3 Prisoners who fail to reduce risks are subject to a MAPPA (Multi Agency Public Protection Assessment) 12 months prior to release using information provided by the Offender Management Unit. This helps to assess risk to the community and help to mould plans to manage and contain those risks while on licence in the community.

11.4 The Offender Management Unit continues to work hard to provide prisoners with the best possible means of useful progression through the prison system. The Board believes that it delivers a quality service to all prisoners, the prison service and to the community at large. The progression statistics for the reporting period have been very impressive.

Re-categorisation;

- Cat A - B 15
- Cat B - C 63 (The best in the HSE)
- Progressive transfers out - 114
- Sentence planning boards averaged over 80 per month.

11.5 The Westgate is a very progressive and innovative environment, albeit related specifically to the assessment and treatment of prisoners with complex personality disorders in order to reduce the risk of re-offending.

Officers are specially trained and work more closely with the prisoners than in other parts of the jail, alongside the clinical teams and complimentary activity therapists providing an all-round treatment plan.

Prisoners are referred to the unit from both wing management inside the prison and also a smaller, but increasing number, by Offender Managers in the community.

Outside referrals are actively encouraged and promotional activities are undertaken to stimulate this. The assessment waiting time however for new arrivals remains between 3-6 months depending on individual needs and the complexity of each case.

Upon completion of treatment, prisoners are transferred according to their ongoing treatment needs. This may be to access mainstream accredited treatment interventions, PIPE services, or therapeutic communities, most commonly within the HSE or Category B prisons. Many progressed prisoners have gone onto achieve Category C and D status, and a small number have now achieved release into the community, and the Progression Team continue to track and monitor them for the duration of their imprisonment and licence. The team frequently receive letters from ex residents who have left Frankland, after completion of treatment, which endorse the work of the unit. Other graduates still in the jail but back on a wing, often return to the unit to talk to and encourage new arrivals which speaks volumes for the work carried out and their belief in the benefits for them.

At the end of the reporting period 37 prisoners had completed treatment, a 54% increase on the previous year. Also, over the year, 4 re-categorisations were achieved, with a further 3 recommended and awaiting national board approval, an obvious encouragement to others on the unit. Additionally, 46 sentence planning boards were held and 30 Offender Assessment Systems (OASYS) completed, on a unit with a total capacity of 66, of which around 8 were prisoners undergoing assessment procedures.

An interesting further development, outside of the treatments and the therapeutic activities, such as art, music and drama, has been the production of a newsletter/booklet called Progression Pathway Press, a joint enterprise between prisoners and the progression department. This started life as a discussion forum relating to progression and eventually turned into a working party to create a publication. It includes progression news items, interviews conducted by prisoners with their peers and staff, letters outlining the thoughts of graduates of the treatment and lighter features such as a quiz, Sudoku and cartoons. Any initial apprehension that the staff felt as the project progressed was replaced by a feeling of humility and surprise at the depth of involvement of the men participating and the amount of personal information they would share. Two quarterly editions have now been published and distributed to all staff, prisoners and commissioners and will continue at this frequency.

The Westgate was awarded EE status during the reporting period and the Board acknowledges the very safe and supportive environment for prisoners and staff. It is impossible not to notice when visiting at any time, the unity and harmonious relationship which exists between prisoners and staff in this very impressive unit.

The work of the IMB

The effective strength of the Board has not changed during the reporting period with still only 5 experienced members available. Consequently, the disappointments and frustrations at not being able to monitor all the relevant activities to the extent the Board would have liked also remain and this is reflected in some aspects of this report.

It has been possible to recruit and retain three new members who have just now reached the point of “flying solo” and the Board is in the process of acquiring a further member through a transfer from another establishment. Four other applicants are currently in the interminably long appointment process, including a female wheelchair user who will bring a different perspective to the work. Whilst recognising the necessity of the enhanced clearance for regular entry to the jail, the Board did raise the issue of the time it takes to complete the process in the last report and its negative impact, not just on prospective IMB members but more particularly on job candidates moving from external paid employment. It remains a major problem.

The revised working practices mentioned in the last report remain the same with essential visits applications and reviews prioritised with Rotas 1 & 2 combined specifically into prisoner focused activities.

Relations with the staff at all levels remains excellent and the Board is grateful for their help and expertise.

Relations with prisoners is also generally good and whilst, because of the lack of numbers, the Board’s profile has remained low, members have still managed to retain a level of confidence and attend to all applications in a timely fashion. The Board believes that the RC has brought a new mood into the prison and although the initiative has not yet achieved the level of importance it deserves, it has gained more than just a foothold and can only grow positively with time and the continued efforts of those who already appreciate the ultimate rewards.

Tony Houldsworth

Independent Monitoring Board HMP Frankland

March 2017

BOARD STATISTICS	
Recommended Complement of Board Members	18
Number of Board members at the start of the reporting period	5
Number of Board members at the end of the reporting period	9
Total number of visits to the Establishment	306
Total number of segregation reviews attended	26

Applications

Code	Subject	Current reporting year	Previous reporting year
A	Accommodation Including laundry, clothing, ablutions	1	1
B	Discipline including adjudications, IEP, sanctions	15	3
C	Equality	4	6
D	Purposeful Activity including education, work, training, library, regime, time out of cell	5	9
E1	Letters, visits, phones, public protection restrictions	5	17
E2	Finance including pay, private monies, spends	4	5
F	Food and kitchens	-	3
G	Health including physical, mental, social care	15	30
H1	Property within this establishment	9	20
H2	Property during transfer or in another establishment or location	3	12
H3	Canteen, facility list, catalogue(s)	2	9
I	Sentence management including HDC, ROTL, parole, release dates, re-categorisation	11	8
J	Staff/prisoner concerns including bullying	14	11
K	Transfers	10	7
	Total number of IMB applications	120	159

Miscellaneous - 22 current year (included in grand total)
Confidential Access - 17 current year (included in grand total)