Annual report
of the
Independent Monitoring Board
at

HMP Durham

for reporting year
1 November 2018 – 31 October 2019

Published
March 2020

Monitoring fairness and respect for people in custody
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A  Introductory sections 1 – 3

1. 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 or centre is situated.

The Independent Monitoring Board (IMB) is specifically charged to:

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

(2) inform promptly the Secretary of State, or any official to whom they have 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 to the prison’s records.
2. Executive summary

This report presents the findings of the IMB of HMP Durham for the period 1 November 2018 to 31 October 2019. Evidence comes from observations made on visits, scrutiny of records and data, informal contact with prisoners and staff, surveys and prisoner applications.

Main judgements

- Last year the main issue affecting the prison was safety. The prison has tackled this issue well, however the Board is concerned to see an increase in the number of incidents of self-harm. (4.4.2)

- The Board is concerned that whilst the funding arrangements for education have changed, after seven months they are not fully up and running. (9.1.2)

Main areas for development

To the Minister

- Overcrowding in the prison was highlighted last year and continues to be a major problem. It is accepted that overcrowding is a national issue, but, given that prisons such as Durham now operate with a higher dynamic operational capacity, the Board feels this area should constantly be looked at. (3.2)

- The Board understands there may be a national shortage of category B places, however the prison still remains unable to move category B prisoners on for a variety of reasons, e.g.:
  
  a. other prisons unable/unwilling to accept them i.e. cherry picking – a major issue, reflected in prisons declining to take prisoners with medical conditions requiring additional follow up at external hospital appointments
  b. an inadequate number of high security placements
  c. waiting lists for NHS mental health unit beds
  d. immigration detainees awaiting deportation

This issue, whilst mainly relating to category B, applies to all convicted prisoners, including those who are category C.

The Board has raised this issue with the Minister, but still feels this is not being addressed. (3.

To the Prison Service

- There is concern that foreign national prisoners are left on their own, with little contact with the Home Office. (5.4.3)
To the Governor

- The holding area in reception still needs to provide some diversionary material. (4.1.2)
- Locating vulnerable prisoners (VPs) in reception continues to give cause for concern. (4.1.3)
- Signage within the search area (reception) should be improved. (4.1.7)
- There are concerns about the increase in self-harm incidents. (4.4.2)
- We are concerned about the deterioration in the delivery of induction. A new system commenced in September 2019. The Board looks to continued improvement. (4.7.2)
- The Board feels that focus groups have not been sustained. (5.1.1)
- The Board notes that following a prisoner survey many prisoners feel that the key worker scheme is beneficial; however, the Board is concerned that the level of delivery has fallen. (11.5.1)

To the provider

- There are ongoing concerns that healthcare representatives do not attend all segregation reviews, which needs to be addressed. (6.2.4)
- The Board feels that the healthcare provider needs to make improvements in secondary screening and dealing with missed medication. (8.1.2)
- The waiting times to see a GP (8.1.2) have increased this monitoring year. This is unacceptable for a reception prison with such a high churn.
- When prisoners enter HMP Durham they experience unacceptable levels of delay in obtaining their prescribed medications. (8.1.7)
- Funding arrangements for education have changed. There are concerns that after seven months, they are not fully up and running. (9.1.2)
Improvements

The prison has worked hard over the year to improve areas throughout the establishment and these improvements are reflected in individual sections, e.g. activity attendance rates are excellent, eclipsing many training establishments, which is a remarkable achievement, given that remand prisoners cannot be forced to attend.

The following, however, are of particular note:

- The governance of use of force incidents has further improved. (4.3.4)

- The formation of dedicated search teams is a major contributing factor to improvement of mandatory drug testing (MDT) against targets. (4.5.2)

- There are exemplary management plans for, and levels of care shown to transgender prisoners. (5.3.4)
3. Description of the prison

3.1 HMP Durham is a Georgian reception prison for adult prisoners and young offenders. In May 2017, the prison changed its function to that of a reception prison and primarily serves the courts. The change to and the ongoing management of such a prison, with its rapid churn, has presented many challenges especially in the area of safety. The prison has continuously reviewed its working practices in order to address these issues.

The Governor and staff are to be commended for the positive way in which they have approached this.

The alignment of Durham court’s catchment area (Carlisle to North Yorkshire) means the prison is holding most prisoners close to their homes; 65% of prisoners come from the area.

3.2 Prison capacity is measured by two figures, namely the certified normal accommodation (CNA) and the operational capacity (OPCAP). The CNA figure records the ideal maximum population of the prison without overcrowding. The CNA for HMP Durham is 596 and the OPCAP 995. However, for most of the year a flexible OPCAP of 960 has been used to allow for the fact that, due to the high churn, cell sharing is not safe for some prisoners. In the last two months of the year, the prison has operated with a higher OPCAP of 980. The Board has regularly commented on overcrowding of this prison, where cells designed for one are routinely occupied by two.

3.3 At the end of the year, 65% of prisoners were on remand. This number has fluctuated throughout the year, reaching up to 75%. Others include sentenced prisoners and those on license recall, including 46 category B prisoners. The prison is unable to move on category B prisoners for a variety of reasons including:

   a. other prisons unable/unwilling to accept them i.e. cherry picking – a major issue, reflected in prisons declining to take prisoners with medical conditions requiring additional follow up at external hospital appointments
   b. an inadequate number of high security placements
   c. waiting lists for NHS mental health unit beds
   d. immigration detainees awaiting deportation

This issue, whilst mainly relating to category B prisoners, applies to all convicted prisoners, including those who are category C.

The Board has previously commented on this issue and has written to the minister about our concerns.

3.4 There is a very high churn of 6.5 times per year with an average stay of 7.9 weeks and 1696 prisoner movements per month. The prison has adapted well in ensuring its working practices can deal with this heavy workload. (4)

3.5 This year the prison celebrated its 200th anniversary. A local publicity campaign was held to highlight the different types of prison over its history and links to the local community.

A celebratory service was held in Durham Cathedral in October.
3.6 Services are provided by a number of commercial agencies, public services and charities. It is noteworthy that healthcare is provided by seven different organisations. At the time of this report, a new contract has been awarded to a single lead provider to commence in April 2020.

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Outline of services provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airedale NHS Foundation Trust</td>
<td>Telemedicine</td>
</tr>
<tr>
<td>Amey</td>
<td>Maintenance of facilities</td>
</tr>
<tr>
<td>Burgess and Hyder</td>
<td>Dental services</td>
</tr>
<tr>
<td>County Durham and Darlington NHS Foundation Trust</td>
<td>Visiting specialist services covering general, orthopaedic, vascular and ENT surgery, chest medicine, an epilepsy nurse specialist</td>
</tr>
<tr>
<td>Durham Tees Valley Community Rehabilitation Company with ARCC and several charities</td>
<td>Resettlement</td>
</tr>
<tr>
<td>Ethnic Minorities Training and Education Project</td>
<td>Providing similar support to that given by the Islamic Diversity Centre (see below)</td>
</tr>
<tr>
<td>G4S</td>
<td>Nursing, administration in the healthcare centre, the nursing aspect of the drug and alcohol recovery team (DART) service</td>
</tr>
<tr>
<td>GeoAmey</td>
<td>Court escort, transfer vehicles</td>
</tr>
<tr>
<td>Her Majesty's Courts &amp; Tribunal Service</td>
<td>Court listings, warrants</td>
</tr>
<tr>
<td>In-Health</td>
<td>Visiting x-ray and ultrasound services</td>
</tr>
<tr>
<td>Islamic Diversity Centre</td>
<td>Diversity race equality action team – advice on matters involving Muslim prisoners – also providing training</td>
</tr>
<tr>
<td>Change Grow Live</td>
<td>Health and wellbeing, substance use, mental health and domestic abuse services</td>
</tr>
<tr>
<td>North East Prison After Care Society (NEPACS)</td>
<td>Visits, education, training and family ties – attendance at resettlement meetings, involvement in the planning process</td>
</tr>
<tr>
<td>Organisation</td>
<td>Description</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Newcastle Futures</td>
<td>Employment, training and partner events designed to support the re-employment of ex-offenders</td>
</tr>
<tr>
<td>Novus, First Point Training and Changing Lives</td>
<td>Provision of teaching services in education – including the workshops</td>
</tr>
<tr>
<td>Parentline Plus</td>
<td>Providing a family learning course</td>
</tr>
<tr>
<td>Premier</td>
<td>Physiotherapy and chiropody</td>
</tr>
<tr>
<td>Samaritans</td>
<td>Attending suicide prevention meetings and offering regular training to Listeners</td>
</tr>
<tr>
<td>Sodexo with NACRO</td>
<td>Resettlement</td>
</tr>
<tr>
<td>Spectrum</td>
<td>GP and pharmacy services</td>
</tr>
<tr>
<td>Sunderland MIND</td>
<td>Bereavement counselling</td>
</tr>
<tr>
<td>Tees Esk and Wear Valleys NHS Foundation Trust</td>
<td>Community psychiatric nursing, general and forensic psychiatry and psychology</td>
</tr>
<tr>
<td>Time for Families</td>
<td>Relationship skills, financial management and parenting</td>
</tr>
<tr>
<td>Walkers Opticians</td>
<td>Optician services</td>
</tr>
</tbody>
</table>
4. Safety

4.1 Reception

4.1.1 Since its transition to a reception prison in May 2017, the footfall through reception continues at a significantly higher level. The population dipped in June/July to 870; for the rest of the year it has remained fairly steady at around 965 i.e. similar to previous years.

4.1.2 There continues to be a lack of diversionary material in the holding cells. This was highlighted in last year’s report.

4.1.3 The location of vulnerable prisoners (VPs) in reception continues to give cause for concern. In the main, they are located in what is in effect a windowless cell at the furthest point away from reception staff. On a number of occasions, we have found the cell bell to be inoperative. This had not been identified by staff.

4.1.4 In April, a body scanner was introduced into the area. The introduction of body scanning was supported by the introduction of a secreted items policy and protocol.

4.1.5 All admissions and those returning from temporary absence, e.g. courts, hospital, are routinely scanned.

<table>
<thead>
<tr>
<th>April 2019</th>
<th>May 2019</th>
<th>June 2019</th>
<th>July 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. scans</td>
<td>168</td>
<td>818</td>
<td>896</td>
</tr>
<tr>
<td>Positive</td>
<td>16</td>
<td>39</td>
<td>36</td>
</tr>
<tr>
<td>% positive</td>
<td>9.5%</td>
<td>4.8%</td>
<td>4.0%</td>
</tr>
</tbody>
</table>

We have reviewed the scan results and it is clear from the decrease in positive scans that another gateway for illicit items is being closed down.

4.1.6 Where men have been identified as having secreted items and subsequently refuse to hand the item over, they are automatically transferred to the separation and care unit (SACU). This has led to instances where they have not had their first night screening; however, this has now been addressed.
4.1.7 Signage within the search area informing prisoners of the process and consequences of non-compliance is considered to be poor and should be improved.

**The Board will continue to monitor.**

4.2 **Deaths in custody**

<table>
<thead>
<tr>
<th>Apparent cause of death</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural causes</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Self-inflicted</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Homicide</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12</strong></td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

4.2.1 Over the last year, deaths in custody have decreased from 12 (2018) to six (2019).

4.2.2 The Board has been informed promptly of these deaths and, where possible, has observed the initial actions and subsequent investigation.

4.2.3 All Prisons and Probation Ombudsman (PPO) reports have been scrutinised by the Board and discussed with the Governor.

4.2.4 The prison action plans have been monitored accordingly. Appropriate changes have been made following PPO recommendations.

**The Board will continue to monitor.**

4.2.4 The timescale between the incident and the coroner’s report remains lengthy. As of the end of October, the earliest outstanding inquest is 16 February 2018 i.e. 20 months. This must be most frustrating for the surviving family. This was highlighted in last year’s report.

4.3 **Use of force**

4.3.1 The Board is pleased to see that the use of force committee set up in April 2018 has continued to operate. The committee continues to audit all incidents and provide governance of force used. This committee meets monthly and incidents are reviewed, including all incidents where an injury to a prisoner has been reported, where a complaint has been received from a prisoner or any other concern raised.
The committee assesses whether all necessary steps were taken to de-escalate the situation, whether body-worn cameras were used appropriately and whether force was necessary and proportionate.

4.3.2 Incidents involving use of force have decreased year on year from 612 in 2018 to 469 in 2019.

4.3.3 The Board has attended 90% of the committee meetings and has on occasion reviewed specific incidents that have been reported to the Board. Where relevant, areas of improvement are forwarded to the control and restraint teams eg wearing of Body Worn cameras (early activation)

4.3.4 The Board feels the governance of such incidents has greatly improved, which should give reassurance to both prisoners and staff alike.

4.4 Reportable incidents and the safer prisons team

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Assaults</td>
<td>258</td>
<td>257</td>
<td>542</td>
<td>476</td>
</tr>
<tr>
<td>Death of Prisoner</td>
<td>3</td>
<td>7</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Deliberate self harm</td>
<td>233</td>
<td>259</td>
<td>672</td>
<td>728</td>
</tr>
<tr>
<td>Disorder</td>
<td>82</td>
<td>78</td>
<td>209</td>
<td>188</td>
</tr>
<tr>
<td>Finds</td>
<td>93</td>
<td>395</td>
<td>1198</td>
<td>1062</td>
</tr>
</tbody>
</table>

4.4.1 Whilst safety within the prison remains a focus for all staff, there is no doubt that the safer prisons team (SPT) works extremely hard to minimise risk to prisoners and staff alike.

4.4.2 An SPT meeting is held monthly and is normally well attended by a good cross-section of stakeholders. Reportable incident statistics are reviewed in detail and, where appropriate, action plans and strategies implemented. Findings are as follows:

- **Assaults**
  - Overall down from the 2018 figure of 542 to 476; however, assaults on staff remain consistent with an average of seven per month throughout the year.
  - Everyone involved in incident violence is automatically referred for a challenge, support and intervention plan (CSIP).
  - In May, a ‘Think Twice’ policy was introduced. Analysis of assault statistics on staff and prisoners reveals patterns in terms of time of day, location or day of the week and has resulted in the introduction of violence hotspots. These hot spots are signposted. Any prisoner found guilty of assault in one of these identified areas will receive twice the recommended tariff for the offence.
  - Under the quarterly prisons performance tool for the end of October, it is pleasing to see that the prison’s efforts in regard to safety have elevated it to level 3 ‘green status’ based upon several areas of improvement including in audit scores, MDT rates, violence and a living conditions audit.
The Board will continue to monitor.

- **Self-harm**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Total incidents</td>
<td>672</td>
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</table>

- It is disappointing to see an increase in the number of incidents of self-harm from the previous year’s figure of 672 to the current level of 728. The trend continues to increase. However, it should be noted that the figures for 2019 include instances where the same prisoner may self-harm several times throughout the day.

- There were several individuals who were prolific self-harmers (accounting for multiple incidents of self-injury). If they were removed from the statistics it would show a flat, if not slightly declining, trend.

- Cutting by razor is consistently the most common method, accounting for 70%-75% of instances. The prison has introduced a policy of one-for-one razor exchange, but whilst this is still in place it does not appear to have the positive effect expected.

The Board will continue to monitor.

### 4.5 Drugs and substance abuse

4.5.1 The target for positive MDTs is 23%. At the start of the year, the actual figure was 35%. However, we are pleased to report that there has been a consistent decrease month on month. The results for the last four months of July to October were 17.4%, 19.6%, 15.5% and 12.5% respectively.

4.5.2 MDT is now the responsibility of a dedicated search team. There is no doubt that its high profile and unpredictable presence in the prison has been a major contributing factor. **The prison is to be commended for this achievement.**
4.6  Assessment, care in custody and teamwork (ACCT) cases

<table>
<thead>
<tr>
<th>ACCTS</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Accts opened</td>
<td>934</td>
<td>1372</td>
<td>1441</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Average number of</td>
<td>98</td>
<td>106</td>
<td>136</td>
<td>117</td>
<td>102</td>
<td>119</td>
<td>141</td>
<td>119</td>
</tr>
<tr>
<td>ACCTS opened per month</td>
<td>1.0%</td>
<td>8.1%</td>
<td>27.9%</td>
<td>-14.2%</td>
<td>-12.9%</td>
<td>16.7%</td>
<td>18.8%</td>
<td>-15.6%</td>
</tr>
<tr>
<td>Qtr on Qtr</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%age incr. / decr.</td>
<td></td>
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</table>

4.6.1  Since its transition from a local to a reception prison in May 2017, the number of ACCT documents (for prisoners at risk of suicide or self-harm) opened in a year has continued to increase.

4.6.2  As can be seen from the figures above, there continue to be significant quarterly variations.

4.6.3  Given the high churn and therefore relatively short length of stay, the Board feels that the prison is increasingly vigilant in relation to men who present with vulnerabilities.

4.7  Induction

4.7.1  With admissions averaging 519 per month, it has not been possible for an induction to be delivered to all. Priority is given to men new to Durham and those who have been away for more than three months.

4.7.2  Since the end of last year and throughout 2019, the Board has seen a significant deterioration in the delivery of the induction. At times, we have seen induction sessions delivered in as little as 15 minutes. We are pleased that since September 2019, a new system of delivery that we have observed has been introduced, which has significantly improved the situation. We understand that early next year, further improvements are planned that include the use of audio-visual aids.

The Board will continue to monitor.
5. **Equality and fairness**

5.1 **Focus groups**

5.1.1 Last year the Board expressed concern that the focus groups (intended to address diversity issues) were often difficult to observe due to last minute changes, which still happen, and some focus groups have not been delivered.

5.1.2 This difficulty continued throughout the year. The equality action team meetings carried out by the prison now show the extent to which certain focus groups are failing, and plans are in place to resolve this.

5.1.3 There are no prisoner equality representatives within the prison, although plans are in place for this to be addressed with prisoners.

**The Board will continue to monitor.**

5.2 **Incentives and earned privileges (IEP)**

5.2.1 As referred to in last year’s report, a further review was carried out by the Prison Service of this scheme and a new scheme was introduced in July 2019. At the time of the report, a national review is taking place of the IEP scheme.

5.2.2 The prison is creating a prisoner IEP forum group, which is a positive step.

**The Board will continue to monitor.**

5.3 **Vulnerable prisoners (VPs)**

5.3.1 VPs are housed in a separate wing, which helps keep them safely away from the general population. The prison manages this wing well.

5.3.2 The Board has some areas of concern:

- Visits hall – VPs have been subject to verbal abuse as they are identified in the visits hall when they arrive separately from the rest of the prisoners. At the time of the report, the prison is to introduce separate VP visiting periods, enabling VPs and their visitors to access all services, including NEPACS and the visitors’ centre at a separate session.

- Reception – the locations used to house VPs are at the farthest reaches of the department.

5.3.3 The prison is aware of these issues and proposes to address them.

**The Board will continue to monitor.**

5.3.4 During the year the prison continued to receive transgender prisoners who had identified themselves as female. Exemplary management plans were put in place and followed. The level of care and empathy demonstrated by safer custody teams and staff on the VP wing remains exemplary.

5.4 **Foreign national prisoners and immigration detainees**
5.4.1 At the end of October 2019, there were 73 foreign national prisoners from 28 different countries in HMP Durham, of whom 12 were immigration detainees. These figures are representative of the numbers throughout the year.

5.4.2 As with category B sentenced prisoners, the Board remains concerned about the length of time the immigration detainees are left to languish in an environment that is not set up nor has the infrastructure to cater for their needs. The plan to move detainees to the nearest designated prisons or an immigration removal centre does not happen due to constraints on the Prison Service as a whole.

<table>
<thead>
<tr>
<th>Immigration detainees in HMP Durham as of 31 October 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of days in HMP Durham</td>
</tr>
<tr>
<td>Number of detainees</td>
</tr>
<tr>
<td>---------------------</td>
</tr>
<tr>
<td>12</td>
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</tbody>
</table>

5.4.3 There is a concern that foreign national prisoners are left on their own with little contact with the Home Office other than the initial visit.

The Board will continue to monitor this.
6. Segregation/care and separation unit

6.1 Separation and care unit (SACU)

6.1.1. The Board is generally satisfied with the management of prisoners in the SACU and is continually impressed by the level of professionalism demonstrated by staff in what can be a very challenging environment. The SACU exercise yard is very unpleasant; although there may be little that can be done about the location of the yard and the lack of sunlight in the area, there must be more that could be done to make the space more welcoming.

6.1.2. The Board has noted the prison’s commitment to introduce an induction process for prisoners in the SACU, including opportunities to access purposeful activity and to undertake a review of current activity options and identify any further opportunities that could be introduced. At the time of the report, proposals for a revised regime and improved activity access are planned to support prisoners whilst in segregation, improve behaviour whilst in the unit, prevent psychological deterioration and assist reintegration to the main prison.

6.2 Good order or discipline (GOOD) Boards

6.2.1 Three hundred and sixteen GOOD boards were held in the year. The Board attended 231 (73%) GOOD reviews and is content with the procedure and fairness of the decisions made in relation to the segregation of prisoners. The Board is concerned, however, about the general management of GOOD boards and has observed problems with the maintenance of the necessary documentation required as part of that process. The Board believes that GOOD reviews and the associated paperwork are an important element of prisoner management and considers that more attention should be given to the recording of the same.

6.2.2 The prison makes good efforts to reintegrate prisoners back to normal location as soon as it is appropriate to do so. Four prisoners have been held in the SACU for more than 42 days; Secretary of State authorisation for these ongoing segregations was sought from the Prison Service area level head.

6.2.4 The Board is concerned that healthcare staff have often been absent from GOOD reviews, despite a requirement for them to be present, only attending 46%. At the time of writing, a proposed new system for GOOD boards means they will be held twice a week, at the same time, which hopefully will improve the attendance of healthcare staff. However, there is nothing to say that the non-attendance of the healthcare staff has had a detrimental impact on prisoners involved; there have been no complaints to the Board where prisoners have been discontented when healthcare staff have not attended GOOD reviews.

The Board will continue to monitor.
6.3 Dirty protests

6.3.1 There have been 29 dirty protests in the SACU during this reporting period. The Board is content with the way the prison has managed these situations.

6.4 Adjudications

6.4.1 The number of adjudications during the reporting period was 3667. The number of cases referred to the independent adjudicator was 382. The Board has observed that adjudications are sometimes used for dealing with very minor issues that could possibly be resolved through the IEP process (See 5.2). The standard of adjudication paperwork is also a concern for the Board, mainly around the level of detail provided and the quality of the reports used to determine the adjudication outcome. That said, there is nothing to indicate that prisoners have been unfairly treated in any way as a consequence. During the period, there were only seven appeals against adjudication outcomes, which may suggest that prisoners are not aggrieved with adjudicating governors’ decisions. Out of these appeals, one was granted and the adjudication quashed.

6.4.2 A new system has recently been introduced where adjudications can be adjourned for prisoners to obtain immediate legal advice by telephone, allowing the adjudication process to be completed in a more timely manner. This has been the cause of some concern amongst prisoners who wished only to consult with their own solicitor. However, there is no requirement for advice to be provided by a legal representative specified by the prisoner. The Board has noted that it can be difficult for prisoners to make immediate contact with a legal representative under the new arrangements, which results in longer than hoped for adjournments. Generally, the IMB is content with the principle of this initiative and will continue to monitor its effectiveness.

The Board will continue to monitor.

6.5 Special accommodation

6.5.1 Special accommodation should only be used when there is no other alternative and prisoners should only be detained in these for as long as it is absolutely necessary to do so. During the reporting period, special accommodation has been used 20 times. Where the Board has observed the use of special accommodation, it is content that its use was fair and appropriate, and prisoners were relocated to normal accommodation as soon as it was safe to do so.
7. Accommodation (including communication)

7.1 Accommodation

7.1.1 Prisoners are accommodated in one of a number of wings as follows:

- A, B or C wing
- D wing – for those on methadone
- E wing – first night centre
- F wing – VPs
- SACU
- integrated support unit (ISU) – for 11 prisoners with significant mental health issues (this is a regional resource)
- healthcare centre – six inpatient beds including a negative pressure room cell for high risk infectious prisoners (e.g. with tuberculosis)

7.1.2 The population of the establishment remains fairly consistent, averaging at around 965. However, at a point during July 2019, the prison had one of its lowest populations for quite some time with 870 prisoners in residence.

7.1.3 Whilst all cells are ventilated to the correct standards, and the prison has replaced many windows in the establishment, it is felt that in many cells, ventilation is still considered poor, with some too hot and some too cold, as well as cells intended for single occupancy being inhabited by two men. During the summer of 2019, attention has been focused on issues around the availability of basic cell contents for new prisoners. Following discussions with the governor of residence and also workers on the wings’ prisoner information desk (PID) and wing cleaners, it was identified that issues around the lack of availability of basic cell contents was a persistent problem. Pillows were an identified issue, as prisoners regard their pillows as their own and when they move off E wing to other locations, they take their pillows, and sometimes other cell contents, with them. This results in a lack of bedding for incoming prisoners. The Board accepts that the Governor has taken action in this area, constantly resulting in an overspend. Focus is to be directed towards this particular issue and officers will be made more aware of the fact that prisoners cannot take any prison property with them between cells.

Currently in the SACU and E wing new check-sheets have been posted outside cells. These pre-occupancy checklists are to identify clearly and quickly a cell that is meeting the basic requirements and is therefore available for immediate occupancy.

Cell E1.1 is established as an example of a correctly fitted out cell with the basic requirements for a new occupant. Due to its location, it is known to be a particularly cold cell and is therefore rarely used, but its current set-up acts as a visual example of best practice.

Funding is being sought to implement improvements as part of the enabling environments initiative. Further updates on this will be available during 2020.

The Board will continue to monitor.

Digitalisation
7.1.4 In-cell telephones and IT kiosks on the wings through which prisoners can access information, menus, appointment systems etc. continue to be well used and allow prisoner autonomy.

7.1.5 On a national level, phase two, which implements the use of individual tablets for prisoners, has been cancelled.

**Video-link unit**

7.1.6 The video-link unit (which enables prisoners to give evidence in court without leaving the prison) continues to be an asset to the establishment. The unit is well organised and is seen as a benefit to the prisoners. It appears to be one of the best in the prison estate.

7.1.7 Healthcare assessments are required whenever a change of status occurs (for example if someone on remand is then convicted of an offence as a result of the court hearing) and should be carried out when prisoners’ status changes on return from video court. This is not occurring on every occasion.

**Time out of cells**

7.1.8 Prisoners are given association and exercise, if possible, every day.

7.1.9 At the end of the Board’s previous reporting year (September 2018), the establishment went from full association to split association. The wing regime is that half of the wing is at work and the other half on association. This reduced the number of persons in the communal areas and has led to a calmer atmosphere and improved contact between staff and prisoners and the positive impact has been evident to the IMB during visits. This was noted during an HMIP inspection. In May 2019, there was a temporary change of a further split in the sessions to support the key worker initiative. In late July 2019, the regime reverted to the single regime split.

**Decency walks**

7.1.10 Decency walks have recently been restarted with an initial focus on the SACU. The process involves several strata of staff starting with the governor of residence and custodial manager. As yet there is no schedule for when the other wings will have their decency walks. The Board has agreed to accompany the governor on his initial review. The Board welcomes this initiative and encourages the speedy roll out to other wings.

**The Board will continue to monitor.**

7.2 **Property**

7.2.1 The number of prisoner complaints regarding property has increased by 14% over the reporting year.

7.2.2 There were 239 property-related complaints between November 2018 and October 2019 as compared to 171 for the same monitoring period 2017 – 2018. A significant number of complaints, however, relate to mislaid property during the cell movement/clearance process.

**The Board will continue to monitor.**

7.2.3 The Board has monitored the prison’s property department and can report that there are audit trails and property assurance systems in place in relation to prisoners’ property. The Board was impressed with the commitment to improvement shown by the relevant staff member.
7.2.4 There are initiatives within the property department to handle prisoners’ property in a more streamlined manner and work is progressing well in this regard.

An area of concern is the amount of time spent in processing items through security when there is a scanner in the property department. However, no member of staff is trained to use it; resource and time efficiency would be improved if this item was in use.

**The Board will continue to monitor**

### 7.3 Catering

7.3.1 This remains consistently good despite continued staffing difficulties, which remain a major challenge. Recently, prisoners have expressed concern and dissatisfaction about the amount of food per prisoner, which they consider insufficient. The kitchen staff have confirmed that they continue to meet the guidelines around rations. Nevertheless, the quality of food remains good.

During 2019, there was a prolonged equipment issue, resulting in the purchase of certain food items as opposed to making them inside the establishment. This had a negative impact on the performance of the kitchens i.e. unnecessary pressure on kitchen workers.

### 7.4 Communication and consultation

#### COMP 1s (Complaints)

**The Board will continue to monitor.**

### 7.5 Visiting arrangements

7.5.1 Last year the Board commented on the difficulty for families and friends in booking a prison visit. This problem still exists. The issue relates to the volume of enquiries and resource funding.

**The Board will continue to monitor.**
8. Healthcare (including mental health and social care)

8.1 Primary care

8.1.1 The Board has observed healthcare regularly throughout the monitoring year. The Board is impressed by the care and dedication of the staff.

8.1.2 The profile of the workload has changed considerably as a result of Durham’s status as a reception prison. This is reflected in the constant high churn of prisoners entering and leaving the prison. In these circumstances, some provision has improved, some has deteriorated:

- Initial health screening of new arrivals is carried out promptly in 100% of cases.
- Over the last six months the percentage of secondary screening carried out inside seven days has significantly improved. In April 2019, it was 8.6%. In October, 50.2%.
- In October 2018, 51.2% of patients on prescribed medication missed three consecutive days of doses for a range of reasons, including non-attendance. In October 2019 this was also reduced to 30%.
- GP appointment waiting times have gone up from 12 days in October 2018 to 16 days in October 2019.
- Advanced nurse practitioner waiting times have also gone up from 12 days in October 2018 to 16 days in 2019.

The Board will continue to monitor.

8.1.3 Staffing of the primary healthcare service has been affected by negotiations of new contracts to start in 2020. The contract was awarded to Spectrum on 5 September 2019 (with Spectrum taking overall responsibility from 1 April 2020) – it is currently in the mobilisation stage.

8.1.4 Immunisation targets and outcomes do not reflect the work in healthcare due to the high churn rate before immunisation can be completed.

8.1.5 The allocation of prison staff is not consistent in healthcare: the regime is not always complete. Prisoners are not always able to be escorted outside the healthcare building to enjoy time in the fresh air. This remains an issue, particularly at weekends.

The Board will continue to monitor.

8.1.6 Chronic conditions may be under-recorded. It is noted that specialist nurses and spirometry for chronic obstructive pulmonary disease (COPD) and diabetes specialist nurses are not available.

8.1.7 Three surveys were carried out by the Board in this monitoring year using the tools of prisoner interview and questionnaire.
Findings:
(1) • 7% of prisoners surveyed had not seen a nurse for a medical assessment in reception.
• 23% did not know how to order a repeat prescription.
• 19% of prisoners were unaware of how to make a healthcare complaint.
• The prison has put in place a nurse in reception in the morning since June 2019 to try to achieve 100% screening. Part of the role also includes prisoners leaving Durham to ensure they have relevant appointments in the community.

(2) • 42% of patients experienced a delay in receiving medication on entry to HMP Durham.
• 38% have experienced more than two weeks’ delay.

(3) • 16% of prisoners surveyed did not have a GP in the community and 15% were not supported in registering with a GP before release.
• 39% did not know where to collect a repeat prescription on release.
• 16% did not know how to collect their methadone prescription on release.

The Board will continue to monitor.

8.2 Healthcare complaints

8.2.1 Medication and prescriptions continue to be the largest source of healthcare complaints and complaints to the Board about healthcare from prisoners. From April 2019 to October 2019, there were 219 complaints to Healthcare. This has increased from the same period in 2018, which evidenced 166 complaints.

8.2.2 In both 2018 and 2019, the healthcare service has acknowledged 100% of prisoner complaints within three days – 100% were responded to in 2018 within 20 days, 98% in 2019. In both monitoring periods, one complaint per year was sent to the Prisons and Probation Ombudsman.

8.3 Beds in inpatient unit

8.3.1 Concern has been expressed this year in the local health board meetings by the head of healthcare about the impact of long-term aged and chronic patients in healthcare, which has the impact of bed blocking, exacerbated by the refusal of other prisons to take prisoners because of their health issues and their lack of facilities.

The Board will continue to monitor.

8.4 Care of the dying

8.4.1 Healthcare have dealt with three palliative care patients in 2018: two died in the prison healthcare facility. In 2019, one patient was on palliative care. No prisoner died in the prison healthcare facility.
8.5 Drug and alcohol recovery team (DART)

8.5.1 In October 2018, the non-clinical DART team had a caseload of 454. In October 2019, the caseload was 437. The team normally sees on average 25 prisoners weekly. Its commitment continues to be impressive and effective and is appreciated by the prisoners themselves. This was very much in evidence when prisoners spoke to the Board at an organised DART recovery event (24 September 2019), introducing prisoners to different agencies to support them on release.

8.5.2 Between October 2018 to October 2019, the non-clinical DART team assessed the substance misuse needs of, and worked with, 9685 prisoners, following either a referral or their induction into the prison. From this cohort, there have been 63 alcohol-free and 294 drug-free treatments complete (successful completions), which is really positive for a remand prison.

8.6 Mental health

8.6.1 The Board is satisfied with the professional care and support provided to prisoners.

8.6.2 The workload of mental health staff has increased significantly, primarily stemming from the increase in referrals, which averages about 350 per month (prior to Durham becoming a reception prison this was around 140 per month). In addition, the fast pace of the transfer process means workloads are constantly in a transient phase with a lot more follow-up care/handover required.

8.6.3 The increase in numbers of referrals to the mental health service of prisoners on ACCTs has increased significantly this year. In October 2018, there were 342 referrals, in October 2017, 289 and in October 2016, 143.

8.6.4 Prior to HMP Durham becoming a reception prison for the north of England (June 2017), many prisoners would remain at Durham to serve their sentence, affording some prisoners some stability. As a reception prison, the population changes frequently, impacting upon the mental health team, which services the prison daily throughout the year. Whilst the Board has not monitored these figures, a report made available to the Board evidences that referrals to the mental health team have increased significantly. Comparative figures for referrals show a significant increase:

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<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
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<tbody>
<tr>
<td>January</td>
<td>124</td>
<td>143</td>
<td>329</td>
<td>356</td>
</tr>
<tr>
<td>February</td>
<td>122</td>
<td>150</td>
<td>289</td>
<td>338</td>
</tr>
<tr>
<td>March</td>
<td>113</td>
<td>171</td>
<td>337</td>
<td>351</td>
</tr>
</tbody>
</table>

Similarly, the number of ACCT reviews attended for individuals has risen overall:

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
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<tbody>
<tr>
<td>January</td>
<td>69</td>
<td>80</td>
<td>93</td>
<td>103</td>
</tr>
<tr>
<td>February</td>
<td>56</td>
<td>68</td>
<td>75</td>
<td>89</td>
</tr>
<tr>
<td>March</td>
<td>59</td>
<td>92</td>
<td>103</td>
<td>124</td>
</tr>
</tbody>
</table>

Increase of ACCT Reviews because of the high churn makes current staffing levels inadequate as this obviously increases the pressure on staff and the time they can allocate to each review. In addition adding delays to the time a vulnerable prisoner is
seen for a review.

The Board will continue to monitor.

8.7 Integrated support unit (ISU)

8.7.1 The ISU serves the region and has taken receipt of 10 prisoners from prisons in the region (four from Northumberland and six from Holme House). It has also referred 11 prisoners to other mental health institutions. Originally, this figure was 13, but the impact of its work is evidenced by the fact its intervention led to two prisoners returning to the wings. The longest waiting time from the initial point of referral to the transfer is 190 days; the shortest 14 days. In October 2018, it was 67 days; in October 2019 it was reduced to 61 days.

8.9 Dentistry

8.9.1 The dental waiting time for October 2019 was 61 days, compared to 67 days in 2018.

8.9.2 The excessive waiting time for non-urgent prisoners coupled with the high churn rate means prisoners can wait a long time before treatment in this prison and face another waiting list on transfer.

8.10 Other services

8.10.1 The waiting time to see an optician in October 2019 was 11 weeks and six days. It was 47 days to see a physiotherapist and 20 days to see a podiatrist. There are no comparative figures for the reporting time last year.

8.11 Physical and mental health of prisoners

8.11.1 Through monitoring and observation throughout the prison, the Board is satisfied overall that prison staff care for the prisoners with respect and dignity and are mindful of their physical and mental health.

8.12 Friends and family test

8.12.1 In October 2019, there were 97 respondents to the test carried out by Healthcare; 80.4% responded that they would recommend the healthcare services; 8.25% responded they would not.
9. Education and other activities

9.1 Learning, skills and employability – context

9.1.1 Transformation to a reception prison has had an ongoing significant impact on the delivery of learning, skills and employability. During this year Reconfiguration 2 was announced. A national decision has been made that Durham become a part-resettlement prison for men serving under 16 months from 1 January 2020. This has further implications for education. There is no increased funding for this further change.

9.1.2 Several changes over the monitoring year have increased the challenge for learning, skills and employability:

- New arrangements for the commissioning of prison education and libraries were introduced from 1 April 2019. Offender Learning and Skills Service (OLASS) contracts expired on 31 March 2019 and were replaced by new commissioning routes for governors. This has resulted in some significant changes in the provision of learning and skills at HMP Durham.

- Funding arrangements have also changed: 80% of funding comes through the Prison Education Framework and the remainder through direct purchasing (DPS). Though good in principle, in that the governor can decide what the needs are in his establishment, the two funding streams have not been set up in tandem. It is now over seven months and at the end of October 2019, the DPS is not fully up and running.

- Changes in education contracts based on learner hours rather than qualifications have led to a budget reduction of £900,000 for HMP Durham. Services have had to be reduced accordingly.

The Board will continue to monitor.

9.2 Learning, skills and employability

9.2.1 New arrangements for three providers (Novus, First Point Training and Changing Lives) began with the new contract in April. In reality, First Point Training was not in place until October and Changing Lives is expected to be up and running in early November. Consequently, there have been reduced learning opportunities for prisoners. Some men have commented on this deficit. By the end of October, a new careers centre was established.
9.2.2 The learning skills team has developed an academy model based on employment sectors, focusing on motivation and engagement whilst addressing behaviour. Numeracy and literacy are integrated within all activities.

9.2.3 Training starts after induction when prisoners are assessed. Personal development portfolios (employment and training) are introduced at this stage to provide evidence of the learner’s development. This is transferrable when relocated and beneficial when seeking employment; useful evidence at court hearings of behavioural change have informed reduced sentences. The key worker initiative, now implemented, should support the individual’s portfolio development. However, the use and availability of portfolios has been highly variable. The situation has been monitored by managers and actions taken to improve the situation.

9.2.4 Prisoners no longer work towards qualifications. They have tutors’ comments within the portfolio but seek further recognition through certification. There has also been a problem recording achievement data as the CURIOUS system has not been fully functional.

9.2.5 The transitional period to the new contract has resulted in the loss of nine staff, 80 prisoner places and the loss of CV training, interview skills development, certificated short courses, social enterprise and research zone. Spaces in education have been reduced from 333 (prior to the new contract) to 226. The online virtual campus (VC) system, which gives prisoners access to online learning, is currently being improved. Its introduction was not straightforward. In addition, there is the new careers centre (October 2019).

9.2.6 In October 2019, 85 of 962 prisoners had a stay of six to 12 months. Thirty prisoners had a stay of one to two years and four prisoners had a stay of two to four years. It is not clear that the current system meets the needs of these longer-stay men. Young prisoners also experience a gap in relevant provision as do older prisoners; this has been flagged nationally. The VP wing does provide for the older prisoner group, but delivery of promised services does not always take place.

9.2.7 The provider Novus holds monthly focus groups – Learners’ Voice. This provides a prisoner forum to express individual and group views. Follow-up action may take place if indicated and this is carried out in a systematic way.

9.2.8 Monthly performance monitoring continues to be robust through the managers’ learning, skills and employment meeting. Key stakeholders also meet to look at outcomes. Prison management and the providers are to be congratulated on their performance in such a challenging environment.

9.2.9 Attendance and punctuality are improving. Education staff attribute this to support from wing officers. This averages about 80% attendance. In the event that a prisoner refuses to work, the IEP protocol is followed. Even though the number of missed education sessions has been halved in the last six months of the reporting year, about 1000 hours are still lost. Whilst there are many identified reasons, the improvement in the period seems to have been affected by reduced refusals. Clearly refusal management is an important area.

The Board will continue to monitor.
9.2.10 Staff shortages resulting from changes in contracts impacted notably during June, July and August, with up to 57 hours cancelled during June (hitherto minimal), affecting up to 182 learners. September had no reported cancellations.

9.2.11 Ofsted visited in July 2019, reporting good progress in two out of three areas. The third area was not assessed as certain data could not be provided as a result of a national problem with the CURIOS data system.

9.2.12 During the first six months of the year, there were 750 visitors to the library in July and 1743 books borrowed. The library provides various activities to successfully promote use. Prisoners are supported by the Shannon Trust to engage in reading. Prisoners on English for speakers of other languages courses interact well with library staff. Wider prison outreach work is limited because of staffing reduction. Reception prison status does impact upon stock: books are frequently not returned and can be lost as a result of prisoner transfer.

9.2.13 VPs held on F wing are often older and more educated than prisoners elsewhere. One such prisoner in a Board survey said their educational experience was “mind-numbing”. A PID worker commented upon the limited choices. In theory Open University and the virtual campus (VC) can be accessed, but it usually does not happen because of expected transfer and ignorance of its existence (as revealed in a Board survey). Prisoners also expressed the desire for more options and jobs on the wing.

9.2.14 There is evidence that the learning, skills and employability team continues to demonstrate drive, enthusiasm and commitment to deliver activities to meet prisoner needs in the face of considerable challenges this year. It is clear that there are some inspirational tutors and instructors in HMP Durham. Prisoners praise, for example, social enterprise on F wing and waste management. In general, however, staff and prisoners acknowledge limited choices since the move to reception status and following the introduction of the new contract.
10. Work, vocational training and employment

10.1 Employment (kitchens, cleaners, Listeners, PIDS etc)

10.1.1 The small size of the stabilising cohort (prisoners staying longer in the prison to ensure provision of vital services) retained by the Governor appears to be satisfactory for the delivery of services.

10.1.2 Prisoners generally work half days; the other half being spent on other necessary activities and on association. If not engaged in work etc prisoners will remain in their cells. Most report that they would prefer to work for full days. Opportunities include woodwork, printing, warehousing, horticulture etc.

10.1.3 The prison provides 132 part-time places for prisoners from the main wings in work industries and these, whilst no longer leading to qualifications, provide meaningful activity for those taking part. Every effort is made to link work with education so that, for example, literacy and numeracy are seen to be relevant and a necessary part of the job.

10.1.4 Industry attendance is excellent, with a monthly average up to September 2019 of 89.67% (with some months as high as 95%). Unemployment for those that can work was about 18% in August. Total activity spaces are for 772 prisoners. One hundred and fifty-five prisoners are not in employment for reasons such as retirement, sickness and refusal to work.

10.1.5 VPs are not afforded as many industry places. They have 20 part-time places per day with two new workshops opened this year for them. A small (20%) qualitative survey of VPs by the Board revealed a discontent with available employment choices. There was, however, an appreciation of the difficulty of providing activity for VPs in a reception prison. There was also some praise for instructors from these prisoners.

10.1.6 There needs to be some further thought given to the occupation and education of prisoners past retirement age, currently 17% of the total UK prison population. It is known to be the fastest growing section of the prison population in England. In Durham at the end of October 2019, there were 22 prisoners over the age of 60 and nine prisoners over the age of 65. About half of the over-60s are on the VP wing.
11. Resettlement preparation

11.1 Prison population

11.1.1 Population breakdown at the end of October 2019:

<table>
<thead>
<tr>
<th>Prison Roll</th>
<th>Unsentenced</th>
<th>Sentenced</th>
<th>+YOI + U/C</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>End October 2018</td>
<td>518</td>
<td>422</td>
<td>44.9%</td>
<td>940</td>
</tr>
<tr>
<td>End January 2019</td>
<td>564</td>
<td>369</td>
<td>39.5%</td>
<td>933</td>
</tr>
<tr>
<td>End April 2019</td>
<td>574</td>
<td>379</td>
<td>39.8%</td>
<td>953</td>
</tr>
<tr>
<td>End July 2019</td>
<td>588</td>
<td>283</td>
<td>32.5%</td>
<td>871</td>
</tr>
<tr>
<td>End October 2019</td>
<td>626</td>
<td>333</td>
<td>34.7%</td>
<td>959</td>
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</table>

Other than a significant reduction in numbers in June/July the population has stayed steady at circa 950. The split between remand and sentenced is in line with the recently announced model under Reconfiguration 2.

11.2 Through the gate

Through the gate introduced an enhanced service from April 2019, and additional staff were recruited. A tiered model offered a more personalised tailor-made plan. This comprised three levels and six resettlement pathways to accommodate individual needs.

11.3 Offender management (OMU)

11.3.1 The prison has recently received confirmation that Reconfiguration 2 has now taken place and HMP Durham will now hold 35% prisoners who are sentenced and will have an element of resettlement.

The Board will continue to monitor.

<table>
<thead>
<tr>
<th>Category B prisoners – statistics</th>
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<tbody>
<tr>
<td>No. Cat B prisoners</td>
</tr>
<tr>
<td>Minimum</td>
</tr>
<tr>
<td>End October 2018</td>
</tr>
<tr>
<td>End January 2019</td>
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<tr>
<td>End April 2019</td>
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<td>End July 2019</td>
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<td>End October 2019</td>
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</table>

The OMU department has had numerous staff shortages. Staff, to their credit, prioritised and managed the caseload. The OMU has a five-day turnover in which to calculate sentences and provide prisoners with their release dates. This, at times, is challenging, again due to resource pressures.
11.3.2 The new digital home detention curfew (HDC) tool has proven to be successful in completing paper applications, despite teething issues.

11.4 Offender management in custody

11.4.1 Case management went live on 1 October 2019, which brought change in case responsibility. Prisoners sentenced to serve over 10 months on 1 October 2019 were allocated a prison offender manager (POM), prison officer or probation grade with responsibility for case management until 7.5 months prior to release. A community offender manager manages after this period. This has resulted in the recruitment of dedicated POMs. From 14 October 2019, an additional probation officer has been operational.

11.4.2 The POMs have been involved in a significant training schedule and are currently completing workbooks to assist with the changes, with the aid of a dedicated mentor. Regular supervision sessions are in place. Changes have informed the induction of new prisoners. Work has taken place to ensure HDC is completed in a timely manner to meet the commitment to provide information for multi-agency public protection arrangements. These changes in all areas will take some time to embed. Despite staffing issues, this team has implemented case management in a most effective manner.

11.5 Key worker monitoring survey 2019

11.5.1 A monitoring survey was carried out by the Board in October 2019 to establish key worker effectiveness, involving 96 prisoners. The primary objectives were to:

- ascertain prisoners' views on how they are finding the key worker scheme
- individually interview prisoners in work/activity-based areas and cell doorstep environments, achieving a balance of locations
- achieve the number of interviews held, which represents a credible sample size equivalent to 10% of the prison population – 96 interviewees.

Key findings:

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</tr>
</thead>
<tbody>
<tr>
<td>Prisoners have a key worker</td>
<td>73%</td>
</tr>
<tr>
<td>Prisoners in prison more than a month without a key worker</td>
<td>27%</td>
</tr>
<tr>
<td>Prisoners have seen their key worker in the last week</td>
<td>40%</td>
</tr>
<tr>
<td>Prisoners have seen their key worker within the last two weeks</td>
<td>13%</td>
</tr>
<tr>
<td>Prisoners have seen their key worker within the last three weeks</td>
<td>7%</td>
</tr>
<tr>
<td>Prisoners have not seen their key worker for over three weeks</td>
<td>40%</td>
</tr>
</tbody>
</table>
Summary

The key worker survey reveals clear evidence of areas of success in terms of prisoner engagement/relationships (satisfactory to good relationships 86%) and benefits derived (over 50%).

Being able to contact key workers via the kiosk was the most requested aspect of the scheme.

However, it is of concern that a) 27% of prisoners surveyed claim not to have a key worker and have been in the prison for at least a month and b) 40% of prisoners have not seen their key worker for over three weeks.

The Board will continue to monitor.

11.5.2 The activities hub manager noted that key workers have impacted positively on allocations for prisoners agreeing to take up meaningful activities. Key workers are being incorporated into the process of assessing candidates for red band positions.

11.5.3 The prison received accreditation for achieving the key worker consistency target of 60% delivery in June 2019. The success level has since fallen to 23% on average over the period August to October 2019. These reductions in delivery are affected by operational priorities, which in turn impact upon individual key worker availability, and thus the effectiveness of the scheme.

11.6 Transfer of prisoners

11.6.1 It is pleasing to see from the table (11.3.1) that the number of category B prisoners has decreased throughout the year. The OMU has informed the Board that this is partially due to improved lines of communication with category B prisons. However, the time taken to transfer category B prisoners remains a major concern to the Board. The reception model calls for prisoners to be transferred, once sentenced, within 10 days. The table above shows that this is not happening.

11.6.2 At the end of the year, 65% of prisoners were on remand. This number has fluctuated throughout the year, reaching up to 75%. Others include sentenced prisoners and those on license recall, including 46 category B prisoners. The prison is unable to move on category B prisoners for a variety of reasons including:

   a. other prisons unable/unwilling to accept them i.e. cherry picking – a major issue, reflected in prisons declining to take prisoners with medical conditions requiring additional follow up at external hospital appointments
   b. an inadequate number of high security placements
   c. waiting list for NHS mental health unit beds
   d. immigration detainees awaiting deportation

This issue, whilst mainly relating to category B prisoners, applies to all convicted prisoners, including those who are category C. The Board has previously commented on this issue and has written to the minister about our concerns.

11.6.3. There continue to be no category B prisons within HMP Durham’s catchment area. The nearest is HMP Garth, which, from Durham is a 265-mile round trip, and from the northernmost part of our area a 370-mile round trip.
11.7 Supporting work with families

11.7.1 NEPACS continues to work well with prisoners and their families. The addition of a member of staff to assist with visiting arrangements has significantly improved this service. This has been evidenced through two Board surveys (35 respondents) conducted in the visitors’ centre.

11.7.2 A new initiative – Visitors Voice – was launched at the end of September, which is giving visitors an opportunity to express views.
C The work of the Independent Monitoring Board

At the beginning of the year, the Board had 13 members.

Over the next four months, two members resigned.

The Board then carried out a further two recruitment exercises and appointed one new member in July.

The Board, at the time of this report, comprised 11 members of which four are female and there is one ethnic minority representative.

At the time of the report, a further recruitment campaign (third) is ongoing.

With the exception of one member, all members have less than five years’ tenure on the Board, with five members having less than two years.

The Board is very active and has carried out 673 visits over the year, with an additional eight visits for serious incidents. The Board has continued to be very assiduous in its monitoring role and in actual fact has visited the prison for monitoring on 244 out of 365 days in the year – 66.84%. This includes 33 visits on a weekend.

Great efforts have been made to continue to develop the relationship with prison staff at all grades and it is fair to say that the Board’s independent monitoring role is valued within the prison and its monitoring findings are seen as, whilst challenging at times, constructive towards improving all areas of the prison.

There is an active training programme for the Board, including visits to other IMBs and prisons and talks to the Board by those working in particular fields, e.g. safer custody, OMU.

During the year, the Board visited two prisons of different types.

<table>
<thead>
<tr>
<th>Board statistics</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommended complement of Board members</td>
<td>20</td>
</tr>
<tr>
<td>Number of Board members at the start of the reporting period</td>
<td>13</td>
</tr>
<tr>
<td>Number of Board members at the end of the reporting period</td>
<td>11</td>
</tr>
<tr>
<td>Total number of visits to the establishment (excluding for serious incidents)</td>
<td>673</td>
</tr>
<tr>
<td>Visits for serious incidents</td>
<td>8</td>
</tr>
<tr>
<td>Total number of segregation reviews attended</td>
<td>231</td>
</tr>
</tbody>
</table>
D Applications

The following table describes applications dealt within the reporting year by the Board.

<table>
<thead>
<tr>
<th>Code</th>
<th>Subject</th>
<th>Written Applications</th>
<th>On the Hoof Applications</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Accommodation including laundry, clothing, ablutions</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>B</td>
<td>Discipline including adjudications, IEP, sanctions</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>C</td>
<td>Equality</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>D</td>
<td>Purposeful activity including education, work, training, library, regime, time out of cell</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>E 1</td>
<td>Letters, visits, phones, public protection restrictions</td>
<td>28</td>
<td>14</td>
</tr>
<tr>
<td>E 2</td>
<td>Finance including pay, private monies, spends</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>F</td>
<td>Food and kitchens</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>G</td>
<td>Health including physical, mental, social care</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>H 1</td>
<td>Property within this establishment</td>
<td>20</td>
<td>14</td>
</tr>
<tr>
<td>H 2</td>
<td>Property during transfer or in another establishment or location</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>H 3</td>
<td>Canteen, facility list, catalogue(s)</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>I</td>
<td>Sentence management including HDC, release on temporary licence, parole, release dates, re-categorisation</td>
<td>25</td>
<td>11</td>
</tr>
<tr>
<td>J</td>
<td>Staff/prisoner concerns including bullying</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>K</td>
<td>Transfers</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td><strong>TOTALS</strong></td>
<td><strong>162</strong></td>
<td><strong>113</strong></td>
</tr>
</tbody>
</table>