



REPORT ON AN UNANNOUNCED INSPECTION OF  
**MAGHABERRY  
PRISON**

20 SEPTEMBER - 6 OCTOBER 2022

**JUNE 2023**





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by the Chief Inspector of Criminal Justice in Northern Ireland; His Majesty's Chief Inspector of Prisons; the Regulation and Quality Improvement Authority; and the Education and Training Inspectorate.

Laid before the Northern Ireland Assembly under Section 49(2) of the Justice (Northern Ireland) Act 2002, as amended by paragraph 7(2) of Schedule 13 to The Northern Ireland Act 1998 (Devolution of Policing and Justice Functions) Order 2010 by the Department of Justice.

**JUNE 2023**



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# LIST OF ABBREVIATIONS

<b>AD:EPT</b>	Alcohol and Drugs: Empowering People through Therapy
<b>Belfast Met</b>	Belfast Metropolitan College
<b>BIR</b>	Bullying Incident Report
<b>CJI</b>	Criminal Justice Inspection Northern Ireland
<b>CNA</b>	Certified Normal Accommodation
<b>CSU</b>	Care and Supervision Unit
<b>DoJ</b>	Department of Justice
<b>ETI</b>	Education and Training Inspectorate
<b>GCSE</b>	General Certificate of Secondary Education
<b>HMI Prisons</b>	His Majesty's Inspectorate of Prisons in England and Wales
<b>ICT</b>	Information and Communications Technology
<b>LAPPP</b>	Local Area Public Protection Panel meetings
<b>NIPS</b>	Northern Ireland Prison Service
<b>NPM</b>	National Preventive Mechanism
<b>OPCAT</b>	Optional Protocol to the United Nations Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
<b>OST</b>	Opiate Substitution Therapy
<b>PBNI</b>	Probation Board for Northern Ireland
<b>PDU</b>	Prisoner Development Unit
<b>PDP</b>	Prisoner Development Plan
<b>PE</b>	Physical Education
<b>PPANI</b>	Public Protection Arrangements Northern Ireland
<b>PREPS</b>	Progressive Regimes and Earned Privileges Scheme
<b>PSST</b>	Prison Safety and Support Team
<b>RQIA</b>	Regulation and Quality Improvement Authority
<b>SEHSCT</b>	South Eastern Health and Social Care Trust
<b>SEN</b>	Special Educational Needs
<b>SLA</b>	Service Level Agreement
<b>SPAR Evo</b>	Supporting People at Risk Evolution
<b>UK</b>	United Kingdom

# CHIEF INSPECTORS' FOREWORD

This inspection was conducted by Inspectors from Criminal Justice Inspection Northern Ireland, His Majesty's Inspectorate of Prisons in England and Wales, the Regulation and Quality Improvement Authority and the Education and Training Inspectorate.

Maghaberry is a complex men's prison near Lisburn that accommodated 1,050 prisoners at the time of this inspection. This included those on remand and those serving sentences from a few weeks to life. It also had two small wings which held Loyalist and Republican separated prisoners apart from the main population. There is also the Mourne Complex which largely accommodates category 'C' prisoners and in Belfast, Burren House provides a small category 'D' provision.

Maghaberry is sustained by generally good relations between staff and the largely compliant prisoner population. However, there was evidence from a number of sources that some Catholic prisoners had experienced prejudice from some staff members and there was also a disappointing reluctance among officers to report poor behaviour by their colleagues.

Since our last inspection in 2018, the new Davis House had opened, providing much improved accommodation with in-cell toilets, showers and telephones, although we saw some early signs of wear that could be avoided with better oversight of maintenance.

On Bann House, the induction unit, the accommodation was unsuitable for new arrivals – cells were small and dilapidated, with aging graffiti-covered furniture and often housed two men despite being built for one. The effects on prisoners of these poor living standards in the induction unit was compounded by the fact that they spent up to 22.5 hours a day locked up.

It was good that most prisoners on other units spent longer out of their cells than we see in other prisons, but many were frustrated and bored. There had been a considerable reduction in the education, skills and work activities and in our checks, we found that only 15.5% of prisoners were off the wing. This is disappointing given that at our last inspection a far greater proportion were working or in education in a prison that has some very good facilities. There were long waiting lists for important courses such as essential skills in Information and Communications Technology and literacy, while the underused teaching staff were often working with small groups or individual prisoners.

Staffing difficulties within the prison meant that the delivery of education and training was inconsistent.

Planned sessions were often cancelled because Prison Officers had been deployed to other work, which also accounted for the lack of gym provision at the weekends and poor access to the library.

Maghaberry has a serious drug problem and there was no effective strategy to address it. Too many prisoners said it was easy to get drugs and had developed a problem with them in Maghaberry. There were long delays to access the clinical substance misuse treatment service. The decisions to reduce drug testing and stop adjudications at a time when supply and demand were known issues is at best puzzling and needed to be reviewed.

There were also lengthy delays to access primary care services but health care delivery was good. While there were now some psychologically informed treatment services for prisoners, these did not meet the demands of the prison's population. We are concerned about the absence of personality disorder service provision and the impact this has on both patients and staff caring for them. There was a need for this provision particularly for those prisoners with extreme behaviours who could spend lengthy periods segregated from the general prison population or be frequently admitted to the Care and Supervision Unit.

The investigation of safeguarding incidents and compliance with the Northern Ireland Prison Service's policy on safeguarding was also an area of concern.

The absence of an internal investigation to identify immediate learning following deaths in custody, pending the conduct of other formal investigations, was worrying and should be addressed urgently.

We were also disappointed by a fall in standards in rehabilitation and release planning, where a lack of staffing in the Prisoner Development Unit meant that many prisoners did not have sentence plans. Arrangements for release had deteriorated, leaving many prisoners to be released without adequate plans. While there were some positive, therapeutic interventions in the Donard Centre for more vulnerable prisoners, the number of men completing accredited programmes had reduced since our last inspection. The accumulation of these problems meant that Maghaberry received an unusual two-point deduction in our healthy prison test score – this area was judged "good" at the last inspection but was now deemed "not sufficiently good". One positive, however, was the good work being done with indeterminate and life sentenced prisoners who were supported both during their sentence and as they prepared for release.

This was a disappointing inspection compared to our visit in 2018 and staff shortages across the prison and a rising prisoner population will continue to hamper progress.

While the COVID-19 pandemic was a challenge for Maghaberry, it has been for all prisons in the United Kingdom, and leaders must now put that difficult time behind them and focus on getting prisoners off the wing and back into the sort of meaningful work, training, education, and rehabilitative support that will make them less likely to reoffend when they come out.

This inspection raised some serious issues that need urgent action and we intend to monitor the steps taken to address the priority and key concerns.



**Jacquie Durkin**

Chief Inspector of Criminal Justice  
in Northern Ireland

**June 2023**

**Criminal Justice Inspection  
Northern Ireland**  
*a better justice system for all*



**Charlie Taylor**

HM Chief Inspector of Prisons  
in England and Wales

**June 2023**



# WHAT NEEDS TO IMPROVE AT MAGHABERRY PRISON

During this inspection we identified 12 key concerns, of which five should be treated as priorities. Priority concerns are those that are most important to improving outcomes for prisoners. They require immediate attention by leaders and managers. In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. The narrative is directed at the level of leadership which has the most capacity to influence a particular outcome.

Leaders should make sure that all concerns identified here are addressed and that progress is tracked through a plan which sets out how and when the concerns will be resolved. The action plan should be provided to Criminal Justice Inspection Northern Ireland and His Majesty's Inspectorate of Prisons.

## PRIORITY CONCERNS

1. When prisoners had died at Maghaberry, leaders waited for the Prisoner Ombudsman's and Coroner's report to be delivered before they took action rather than conducting their own immediate investigation and putting mitigating measures in place.
2. There was no effective or co-ordinated plan to reduce the demand for and supply of drugs, and no means of assessing the effectiveness of actions taken.
3. Prisoners did not have regular and consistent access to high-quality education, skills and work activities to meet their rehabilitation and resettlement needs. Education induction and assessment were not effective in improving the educational and training experiences and outcomes for prisoners.
4. Not all serious safeguarding incidents investigated by leaders had been managed in accordance with Northern Ireland Prison Service policy.
5. Not all prisoners were provided with effective support to guide them through their sentence or prevent future offending.

## KEY CONCERNS

- 6.** Time out of cell for prisoners in Bann House was very poor at an average of just 90 minutes a day.
- 7.** Oversight and management of prisoners on Supporting Prisoners At Risk plans were weak. Use of anti-ligature clothing was not always proportionate nor was its use appropriately authorised or recorded.
- 8.** Access to psychologically informed treatments was insufficient to meet the needs of the prison population. There was no specialist personality disorder provision.
- 9.** Prisoners failed to attend all of their prison health care and hospital appointments.
- 10.** There was a lack of clear commissioning arrangements to address the social care needs of the prison population. Provision for prisoners did not align with that available in the community.
- 11.** There were gaps in the curriculum offered to prisoners, such as Information and Communications Technology and music, and not enough collaborative work with external partners.
- 12.** There were insufficient accredited qualifications available in work activities.

# ABOUT MAGHABERRY PRISON

## TASK OF THE PRISON

Maghaberry Prison/Maghaberry is a modern high-security prison that held adult male long-term sentenced and remand prisoners, in both separated and integrated conditions.

It had two principal objectives: to service the courts, and to provide programmes and opportunities that allow prisoners to develop skills and assist in their preparation for release into the community.

## CERTIFIED NORMAL ACCOMMODATION AND OPERATIONAL CAPACITY<sup>1</sup>

Prisoners held at the time of inspection:	Baseline certified normal capacity:	In-use certified normal capacity:	Operational capacity:
1,050	1,012	933	1,415

## POPULATION OF THE PRISON

3,097	132	219	61
new prisoners received each year (around 260 per month).	foreign national prisoners.	prisoners released into the community each month.	prisoners referred for mental health assessment each month.

<sup>1</sup> Baseline Certified Normal Accommodation (CNA) is the sum total of all certified accommodation in an establishment except cells in the Care and Supervision Unit, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

## PRISON STATUS (PUBLIC OR PRIVATE) AND KEY SERVICE PROVIDERS

Public: Northern Ireland Prison Service.



- Physical and mental health provider
- Substance use treatment provider



Learning and skills provider



Substance use treatment providers



## DEPARTMENT



## BRIEF HISTORY

Maghaberry Prison is the largest and most complex of the three prisons operated by the Northern Ireland Prison Service. It is the only category 'A' prison in Northern Ireland and also operates as the remand prison for all adult male prisoners in the country. It accommodates a range of sentenced prisoners, such as life sentence, indeterminate and extended custody prisoners, separated prisoners, fine defaulters and civil prisoners.

Maghaberry was built on the site of a World War II airfield that was used as a transit base for the United States Army Air Forces. At the end of the war, the base was run down and various government agencies used parts of the old airfield until the Northern Ireland Office began work on the prison in 1976.

The Maghaberry site originally included two separate prisons for men and women with the female prison, Mourne House, adjacent to the main male prison. Mourne House, which held all female prisoners, young offenders and remands, was the first part of the new prison to be opened in March 1986. This followed the closure of the existing female establishment at Armagh Prison.

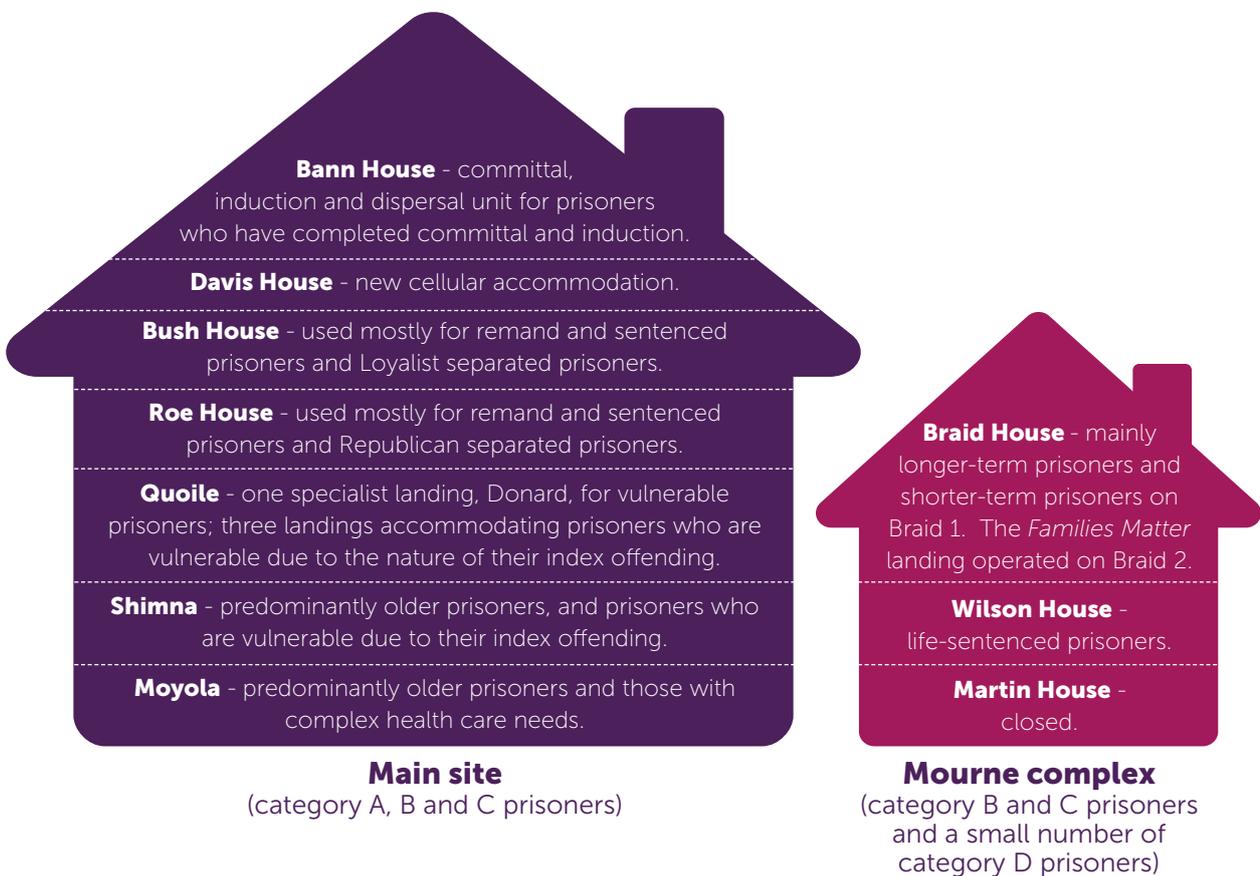
However, in 2004 women were transferred to Ash House at Hydebank Wood Young Offenders Centre. Since then, the Mourne House complex has been developed primarily into a life sentence prisoner centre for those moving into pre-tariff expiry range. Braid House within the Mourne complex opened in 2008 and provides additional 130-room capacity.

The male prison became operational on 2 November 1987. Following the closure of Belfast (Crumlin Road) Prison on 31 March 1996, Maghaberry became the adult committal prison in Northern Ireland, and non-paramilitary remand prisoners and short-term sentenced prisoners began to be held there. Since 2003, it has held separated paramilitary prisoners from Loyalist and Republican backgrounds.

In 2020, a new purpose-built residential complex, Davis House, a 372-cell unit, was opened.

Burren House, in the centre of Belfast, offers working-out opportunities to up to 22 men coming towards the end of long prison sentences. It was reopened in May 2014 after being refurbished. The Unit is staffed by Prison Officers and probation staff acting as case managers.

## SHORT DESCRIPTION OF RESIDENTIAL UNITS



## **Burren House**

Located in Belfast city centre and accommodated category D prisoners; used for testing life-sentenced prisoners in the community pre- and post-tariff.

## **Name of governor/director and date in post**

David Savage, May 2021.

## **Leadership changes since the last inspection**

David Kennedy (April 2017 to April 2021).

## **Director of Prisons**

David Kennedy.

## **Independent Monitoring Board chair**

John Denvir.

## **Date of last inspection**

May 2018.

# ABOUT THIS INSPECTION

Criminal Justice Inspection Northern Ireland (CJI) is an independent statutory Inspectorate, established under the Justice (Northern Ireland) Act 2002, constituted as a Non-Departmental Public Body, a corporation sole, in the person of the Chief Inspector. CJI was established in accordance with Recommendation 263 of the Review of the Criminal Justice System in Northern Ireland of March 2000.

His Majesty's Inspectorate of Prisons in England and Wales (HMI Prisons) is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.

The Regulation and Quality Improvement Authority (RQIA) is a Non-Departmental Public Body responsible for monitoring and inspecting the quality, safety and availability of health and social care services across Northern Ireland. It also has the responsibility of encouraging improvements in those services. The functions of the RQIA are derived from the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

All inspections carried out by HMI Prisons and those prison inspections jointly carried out with CJI in Northern Ireland with support from the RQIA, contribute to the United Kingdom's (UK's) response to its international obligations under the Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies - known as the National Preventive Mechanism (NPM) - which monitor the treatment of and conditions for detainees. CJI, HMI Prisons and RQIA are three of several bodies making up the NPM in the UK.

The Education and Training Inspectorate (ETI) is a unitary Inspectorate and provides independent inspection services and information about the quality of education, youth provision and training in Northern Ireland. It also provides inspection services of the learning and skills provision within prisons, in line with an agreed annual Memorandum of Understanding and an associated Service Level Agreement with CJI.

The Inspectorates who participated in this inspection are all independent, statutory organisations which report on the treatment and conditions of those detained in prisons, young offender institutions, court and police custody.

All HMI Prisons and CJI reports carry a summary of the conditions and treatment of prisoners, based on HMI Prison's four tests of a healthy prison that is Safety, Respect, Purposeful activity and Rehabilitation and release planning.

There have been a number of changes to how prison inspections are conducted and reported in the period since the last prison inspection in Northern Ireland. New Leadership Expectations were assessed and reported on during this inspection and a staff survey was conducted. From May 2022 HMI Prisons changed how it reported on inspection findings. The change aimed to encourage leaders to act on inspection reports in a way which generates real improvements in outcomes for those detained in custody. The Governors of Northern Ireland's prisons were consulted about the proposed change. Rather than report 30-35 recommendations HMI Prisons and CJI now report up to 15 concerns, three to six of which will be identified as priority meaning they require urgent attention.

The detail of how we assessed the outcomes for prisoners against the healthy prisons tests, how we report our findings and who carried out this inspection is set out in Appendices I and II. The methodology used to conduct the staff survey and the summary findings are contained in Appendix V.

# EXECUTIVE SUMMARY

We last inspected Maghaberry Prison (Maghaberry) in 2018 and made 14 recommendations. The prison fully accepted all the recommendations.

Chapter 6 contains a full list of recommendations made at the last full inspection and the progress made against them.

## PROGRESS ON KEY CONCERNS AND RECOMMENDATIONS

Our last inspection of Maghaberry took place before the COVID-19 pandemic and the recommendations in that report focused on areas of concern affecting outcomes for prisoners at the time. Although we recognise that the challenges of keeping prisoners safe during the COVID-19 pandemic will have changed the focus for many prison leaders, we believe that it is important to report on progress in areas of key concern to help leaders to continue to drive improvement.

At our last full inspection, we made 14 recommendations about key concerns. At this inspection we found that seven of those recommendations had been achieved and seven had not been achieved. None of the three recommendations in the area of safety had been achieved. Of the nine recommendations in the area of respect, seven had been achieved and two had not been achieved. Neither recommendation made in the areas of purposeful activity and rehabilitation and release planning had been achieved.

## OUTCOMES FOR PRISONERS

We assess outcomes for prisoners against four healthy prison tests (see Appendix I for more information about the tests). We also include a commentary on leadership in the prison (see Chapter 1).

At this inspection of Maghaberry, we found that outcomes for prisoners had stayed the same in two healthy prison areas and declined in two.

**Figure 1: Maghaberry Prison healthy prison outcomes 2018 and 2022**



## SAFETY

*At the last inspection of Maghaberry in 2018 we found that outcomes for prisoners were not sufficiently good against this healthy prison test.*

*At this inspection we found that **outcomes for prisoners remained not sufficiently good.***

The committals unit (reception) at Maghaberry was very busy with around 70 new arrivals a week. First night safety interviews were still not sufficiently private, despite some effort to address this, and prisoners could spend up to four hours waiting to be moved to their cell. The cells on the first night centre (Bann House) were the worst of the accommodation at Maghaberry. To compound this, most prisoners on Bann were locked behind their doors with little to do for over 22 hours a day. The induction programme provided prisoners with necessary information, with some useful input from other departments.

Most prisoners felt safe; the number of recorded violent incidents had reduced since the last inspection and was lower than in similar prisons. The Donard Centre was one of several initiatives to support some of the most vulnerable prisoners. The opportunity to progress to the Mourne site and Burren open site provided a good incentive for prisoners to behave.

The reward and sanctions scheme was used to good effect, including a compassionate suspension of certain sanctions for some prisoners who had learning and behavioural difficulties. However, the formal process to address violent behaviour and support victims was not operating effectively. Leaders had also taken the decision to pause adjudications, which had previously been a deterrent to, and consequence of, poor behaviour.

Most use of force was low level, and its governance was good. Leaders took appropriate action when staff were found to have used excessive force. The use of segregation had reduced since the last inspection and there had been some improvement to the facilities. A broader range of agencies and specialists were now engaging with segregated prisoners and contributing to their management plans. The use of technology to monitor their access to a basic regime was evolving, but we could not be assured that all prisoners could shower and telephone home every day.

Most security arrangements were proportionate to the different risks presented by the complex population. The use of technology to enable free movement around the site by the majority of prisoners was impressive.

Despite being an identified risk, the prison's response to the supply and demand for drugs was not robust. In our survey, 41% of prisoners indicated that it was easy to get illicit drugs at the prison and 28% said they had developed a drug problem while there. The prison did not have a sufficient strategy to address this.

There had been an estimated seven self-inflicted deaths since the last inspection in 2018, but there was little evidence of institutional learning following these tragic incidents. Rates of self-harm were similar to comparable prisons but were rising. Leaders had not done enough to understand this rise and there was no clear plan to address it. Oversight of the management of prisoners in crisis or presenting with complex challenging behaviours was very poor, including those located in the Care and Supervision Unit and those who were only allowed to wear anti-ligature clothing. Safeguarding processes were also inadequate and did not comply with the Northern Ireland Prison Service policy.

## RESPECT

*At the last inspection of Maghaberry in 2018 we found that outcomes for prisoners were reasonably good against this healthy prison test.*

*At this inspection we found that **outcomes for prisoners remained reasonably good.***

Relationships between staff and most prisoners were good. Most staff were friendly and approachable, demonstrating good knowledge of the prisoners in their care and an understanding of their individual needs.

Living conditions were generally good. Since the last inspection most of the previous unsuitable accommodation had been closed and replaced by a new purpose-built unit. There was a range of house blocks to meet specific needs, for example vulnerable prisoners or lower risk prisoners. It was evident that remedial works to improve conditions across residential units had been very recent and there was a need for improved quality assurance to maintain standards.

The well-equipped kitchen employed up to 30 prisoners and provided a good quantity of and reasonable quality food for prisoners each day.

Consultation with prisoners had only recently recommenced. The process needed to be embedded and better communicated to make sure it was effective in engaging the population. Complaints and requests from prisoners were reasonably well-managed. Responses were prompt and generally addressed the issues raised.

Work to promote equality and fairness had only recently restarted after being suspended during the COVID-19 pandemic. Initial work was promising but it was not given enough priority and was insufficiently resourced. While some complaints about discrimination were investigated well, other responses did not adequately address the issues raised. Support for foreign national prisoners was reasonably good. There were notable gaps in the provision for smaller minority groups, gay, bisexual and transgender prisoners.

The majority of prisoners could access weekly religious services. The chaplaincy saw all new arrivals, and provided pastoral care when prisoners requested it. However, the chaplaincy was not as well integrated into the management structures as we find in other prisons, and there was a missed opportunity to use its skills and experience.

Governance and oversight of prison health care was now effective in driving improvement. Prison health care leadership was strong, and the team was innovative and motivated. However, waiting times for primary care services were too long and too many patients did not attend their primary health care appointments. The number of patients who did not attend external hospital appointments was also too high, primarily due to the inability of escort staff to facilitate the transport arrangements.

Urgent mental health referrals were addressed, but patients experienced lengthy delays for routine mental health assessments. While it was positive that patients now had access to psychologically informed treatments, the service was insufficient to meet need. Patients requiring transfer to an inpatient mental health facility continued to wait too long for a bed.

Clinical substance misuse treatment was under-resourced and prisoners waited for long periods for assessment. Clinical reviews did not take place in line with national guidance. Psychosocial support was good, but, again, there were lengthy delays for appointments. There was no specialist provision for patients diagnosed with a personality disorder. Medicines management had improved, and social care arrangements were managed well. The dentistry resource was limited and waiting times were too long.

## PURPOSEFUL ACTIVITY

*At the last inspection of Maghaberry in 2018 we found that outcomes for prisoners were not sufficiently good against this healthy prison test.*

*At this inspection we found that **outcomes for prisoners were poor.***

Time out of cell<sup>2</sup> was reasonably good for most prisoners, but only a minority went to education, skills or work. For those not in education or work there was a reasonable range of recreational activities. The main facilities for physical education were good, but the redeployment of physical education staff meant that there was still no access at weekends. Access to the library was also poor.

Delivery of education, skills and work in the main prison had not been a sufficiently high priority. Over half of eligible prisoners were not participating in education, skills or work or attending the gym, which affected their learning, development, rehabilitation and resettlement outcomes. Weekly attendance data was tracked centrally and demonstrated that too few prisoners attended education and skills courses.

Due largely to the Northern Ireland Prison Service staffing constraints, the very good resources available in the learning and skills centre were largely underused and stop-start delivery over an extended period had affected planning, delivery and progression, particularly for practical activities.

There were insufficient work opportunities for the current population. Individual prisoner learning, progression and resettlement planning was not sufficiently well interconnected, and prisoners were not informed well enough about their learning plans, if they were in place.

There was good provision of speech and language therapy, occupational therapy and physiotherapy, and the recent recruitment of a special educational needs specialist by Belfast Metropolitan College was positive. Therapeutic areas were operating in the Donard Centre to support prisoner mental health and wellbeing. The introduction of the new learning and skills facility for prisoners on the separated regime was very positive, although access to this facility had also been affected by staffing issues.

The curriculum offer was narrow with very restricted prisoner access to provision, particularly practical skills development opportunities. The teaching and training staff were underused, with most sessions delivered one to one or in small groups, and the redeployment of the Northern Ireland Prison Service staff forced the cancellation of many scheduled sessions.

There were substantial waiting lists, including for Information and Communications Technology, literacy and numeracy courses. There had been no Information and Communications Technology provision over an extended period and prisoners were unable to develop skills or gain qualifications in this important area. Opportunities were missed to gain accredited qualifications in several areas, such as recycling and the laundry. Achievement rates across education, skills and work were too low which resulted in very poor progression.

<sup>2</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities, to take showers or make telephone calls.

Inspectors observed good to very good provision in several curricula areas and opportunities for a minority of prisoners (22%) to develop purposeful work skills in a range of work activities, including in the canteen, horticulture, industrial cleaning, laundry and recycling.

## REHABILITATION AND RELEASE PLANNING

*At the last inspection of Maghaberry in 2018, we found that outcomes for prisoners were good against the healthy prison test of resettlement.*

*At this inspection, we found that **outcomes for prisoners were now not sufficiently good.***

Family support services, such as parenting courses for prisoners, had recently resumed, and Barnardo's and NIACRO provided good support to prisoners' families. There were weaknesses in the systems to book and access visits, which disadvantaged visitors and prisoners. The visits hall was a welcoming environment with a professionally staffed crèche. An impressive number of domestic video visits were facilitated.

Oversight of rehabilitation at Maghaberry had deteriorated greatly since our last inspection. Persistent staffing shortages and absence, and regular cross-deployment of Prisoner Development Unit staff, had considerably undermined core work. Many prisoners had no plan to reduce risk and develop skills and were not given the support necessary to make progress through their sentences.

More than a quarter of sentenced prisoners were serving life or other indeterminate sentences. These prisoners enjoyed clear progression opportunities and were supported by very good multidisciplinary case conference reviews. By contrast, the support for short-term prisoners which impressed us four years ago had been absent for some time. Support from Prisoner Development Unit co-ordinators had been affected by cross-deployment, and service delivery by NIACRO had only recently resumed.

Prisoner Development Unit staff identified new arrivals subject to the Public Protection Arrangements Northern Ireland and contributed to managing them thereafter.

The processes to support community public protection arrangements were effective; high-risk prisoners were identified and there was communication with community agencies. However, there was little offending behaviour work and so violent and sexual offenders were released into the community without having reduced their risks sufficiently.

Categorisation reviews had been paused since April 2020 and only recently reinstated. Reviews were not timely and only a small number of prisoners had been re-categorised in the past 12 months.

In our survey, only 29% of prisoners reported completing offending behaviour programmes at Maghaberry. The range of both accredited and non-accredited programmes completed had decreased since our last inspection and some courses had only recently recommenced. Some good therapeutic interventions were provided in the Donard Centre, and there was some help to meet finance, benefit and debt needs.

Maghaberry released an average of 219 prisoners a month. Due to the staffing shortages, many sentenced prisoners did not have release plans before their discharge. However, pre-release case conferences for long-serving, high-risk prisoners were well attended, thorough and had clearly identified objectives. Housing support for prisoners due for release was generally good, but the prison did not maintain data on housing outcomes, so the scale of homelessness was not known.

## NOTABLE POSITIVE PRACTICE

We define notable positive practice as innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for prisoners; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.

Inspectors found four examples of notable positive practice during this inspection.

- *Leaders had introduced an impressive range of technological solutions to streamline processes, including the use of computer tablets and a biometric system that enabled prisoners to move securely and freely around the site without an officer escort (see paragraphs 1.8, 2.29 and 3.1).*
- *The Donard Centre supported some of the most vulnerable prisoners through therapeutic activities. The Centre was one of several specialised units that enabled prisoners to engage and flourish. Without these facilities, such prisoners would have been very isolated (see paragraphs 1.7, 2.9, 3.30, 4.3, 4.18 and 5.27).*
- *Leaders demonstrated good understanding and compassion in the adaption of the rewards and sanctions scheme for prisoners who required additional support due to learning and behavioural difficulties. Leaders had suspended standard sanctions in the scheme in favour of tailored management plans to make sure there was appropriate support and guidance for those who struggled to comply (see paragraph 2.11).*
- *Prisoners who did not speak English as a first language were encouraged to submit complaints and received responses in their primary language (see paragraph 3.20).*

# CHAPTER 1 LEADERSHIP

## Leaders<sup>3</sup> provide the direction, encouragement and resources to enable good outcomes for prisoners.

- 1.1 Good leadership helps to drive improvement and should result in better outcomes for prisoners. This narrative is based on our assessment of the quality of leadership with evidence drawn from sources including the self-assessment report, discussions with stakeholders and observations made during the inspection. It does not result in a score.
- 1.2 Leaders in the Northern Ireland Prison Service (NIPS) had made a major investment in Maghaberry's infrastructure since the last inspection, most notably the opening of Davis House to replace unsuitable residential accommodation. The Governor had prioritised safety among staff and prisoners during the COVID-19 pandemic, but the pace of recovery following the lifting of COVID-19 restrictions in the community was too slow; leaders were not doing enough to fulfil the prison's role in rehabilitating its population.
- 1.3 The majority of prisoners were not participating in education and skills training, and achievement rates were too low. Although the prison's self-assessment recognised a failure to deliver adequate education, skills and work, and weaknesses in work to rehabilitate prisoners, leaders had not prioritised these areas for improvement.
- 1.4 The self-assessment did highlight the reduction of drugs as a priority, but our findings did not demonstrate sufficient focus on this work; leaders had suspended drug testing and adjudications and there were major weaknesses in the substance misuse services.
- 1.5 A large shortfall in frontline officers had affected the delivery of an effective regime, although leaders had recruitment processes to address this. There were also many staff not available for deployment to operational duties and high, but reducing, levels of sickness absence. Our staff survey highlighted some concerning negative perceptions that leaders needed to explore and address, particularly inappropriate staff behaviour towards their colleagues and prisoners.

<sup>3</sup> In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. We will direct our narrative at the level of leadership which has the most capacity to influence a particular outcome.

- 1.6 Despite the staffing issues, the prison was relatively calm and prisoners were given a good level of trust. Many leaders, staff and partners remained positive, energetic and caring.
- 1.7 Specialised units, such as Quoile House, the Moyola Unit and the Donard Centre, demonstrated that leaders had an understanding of individual need, which enabled some very vulnerable prisoners to engage and flourish. Without these facilities, such prisoners would have been very isolated.
- 1.8 Leaders had introduced an impressive range of technological solutions to streamline processes, including the use of computer tablets and a biometric system that enabled prisoners to move securely and freely around the site without an officer escort.
- 1.9 Leaders had made some progress against the main recommendations from the last inspection, including the establishment of a dedicated learning and skills facility for separated prisoners. There was also good learning from the joint review by Criminal Justice Inspection Northern Ireland (CJI), the Regulation and Quality Improvement Authority (RQIA) and the Education and Training Inspectorate (ETI) of Care and Supervision Units (CSUs).<sup>4</sup> However, oversight in some important areas, including safety, was not sufficiently robust. Some leaders, particularly within the safety function, did not use data effectively to understand their strengths and weaknesses to inform more effective action plans and make sure that there was continuous improvement.

4 CJI, *A Review into the operation of Care and Supervision Units in the Northern Ireland Prison Service, February 2022* available at <http://www.cjini.org/TheInspections/Inspection-Reports/2022/Jan-Mar/A-Review-of-into-the-operation-of-Care-and-Supervi>.

## CHAPTER 2 SAFETY

**Prisoners, particularly the most vulnerable, are held safely.**

### EARLY DAYS IN CUSTODY

**Expected outcomes:** Prisoners transferring to and from the prison are safe and treated decently. On arrival, prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.

- 2.1 Around 70 new prisoners arrived at Maghaberry each week. They were offered a meal and hot drink after arrival. Reception holding rooms were mostly clean and bright. Helpful reading materials were provided, and a peer mentor spoke with all new arrivals to provide practical information and support.
- 2.2 Most new prisoners arrived on either Monday or Friday, which made reception exceptionally busy on these days. This placed more pressure on staff to progress new arrivals through reception and into their cells in a reasonable time. In our survey, only 35% of prisoners said they spent less than two hours in reception. In reality, most prisoners were held in reception for four hours, which was too long and frustrated both them and staff.
- 2.3 There were three booths designed to hold initial safety interviews. Although there had been steps to improve the privacy of these, conversations could still be overheard, which made prisoners less likely to disclose safety concerns and vulnerabilities. More positively, a nurse saw all new arrivals in a separate room. Translation services were used appropriately when required.
- 2.4 Reception had an ample stock of clean clothing and footwear if required. All new arrivals were given a personal identification number to make a free telephone call on the first night, but this was frequently delayed until the following morning during the busiest evenings. In our survey, only 44% of prisoners said they made a free telephone call on the first night, compared with 59% at the last inspection.
- 2.5 All new arrivals were given a reception grocery or smoker's pack to help them through the first few days until they received their weekly shop order, which could take up to 10 days. Those with sufficient funds could make an additional shop

purchase while in the first night centre, but there was no support for prisoners arriving without money, which put them at risk of getting into debt with other prisoners.

- 2.6 All new arrivals went to Bann House, the first night centre. This had the worst accommodation in the prison. Most cells had been freshly painted but were grubby, sparse and unwelcoming. In our survey, only 17% of prisoners said their cell was adequately clean on the first night. Many toilets were filthy, toilet screens provided inadequate privacy, and furniture in too many cells was heavily graffitied and required replacing. Curtains had only been provided the week before our arrival. Orderlies worked hard to clean cells as they were vacated, but they often did not have sufficient time to do this properly. The regime on Bann House was also the worst in the prison as most prisoners were locked behind their doors for over 22 hours a day (see paragraph 4.1).



- 2.7 The two-day induction programme provided prisoners with necessary information, and there was some useful input from other departments. However, the timetable was poorly adhered to and many prisoners were confused about when sessions would take place. We met several prisoners who had been stuck on Bann House for four weeks because elements of their induction were incomplete. This meant they were unable to gain employment or receive a better regime on the other units. In our prisoner survey, only 38% of those who had received an induction said it had covered everything they needed to know about the prison.

## MANAGING BEHAVIOUR

**Expected outcomes:** Prisoners live in a safe, well ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.

### Encouraging positive behaviour

- 2.8 Rates of violence had continued to reduce since the last inspection and were lower than similar prisons in England and Wales. This was reflected in our survey, where most prisoners said they felt safe and more than in 2018 (64% against 48%) said they had not experienced victimisation from their peers.
- 2.9 The opportunity to progress to the Mourne site and Burren open site offered a pathway for progression and an incentive to behave. The Donard Centre was one of several facilities to support some of the most vulnerable prisoners. Supported by dedicated Prisoner Safety and Support Team (PSST) staff, the Centre provided a regular programme of activities for prisoners with identified vulnerabilities. This positive environment enabled prisoners who may have otherwise been isolated or engaged in disruptive behaviour to participate, progress and thrive.

Photograph 3



Donard Day Centre

- 2.10 Oversight of the rewards and sanction scheme, the 'Progressive Regimes and Earned Privileges Scheme', was improving and in several cases it was used to good effect to encourage positive behaviour. Leaders held a monthly oversight meeting to ensure fair application of the scheme. Prisoners on the basic level could still access a regime that included off-wing activity and they were reviewed weekly to make sure that they were treated fairly.
- 2.11 Leaders had also demonstrated good understanding and compassion in the adaption of the scheme for prisoners who required additional support due to learning and behavioural difficulties. Health care staff provided input to the scheme to help identify and support those prisoners with additional needs. At the time of inspection, they had suspended standard sanctions available on the scheme for 10 prisoners, and had instead tailored management plans for them to make sure they had appropriate support and guidance.
- 2.12 Some aspects of work to encourage positive behaviour and deal with negative behaviour, such as the use of adjudications, were no longer managed effectively (see paragraph 2.18) and the use of illicit drugs was a major concern (see paragraph 2.33).
- 2.13 The PSST continued to operate an anti-bullying scheme. This incorporated initial investigation, a formal warning or monitoring using Bullying Incident Reports (BIRs). BIR monitoring included formal reviews to provide support and prevent further incidents. The system had not been reviewed since 2017 and at the time of our visit it was not operating effectively to support victims or challenge perpetrators of violence. Only 29 officers had received any formal training in the previous year and too many staff lacked an understanding of the process or confidence in its application.
- 2.14 During the previous 12 months, 172 incidents had been investigated, of which 57 resulted in BIR monitoring. Investigations did not always consider all aspects of risk to the prisoners involved. Too many BIR documents were poorly completed and often closed without appropriate consideration and discussion. Staff who conducted investigations into violence did not routinely inform other key areas, such as security, to make sure perpetrators and victims of violence were identified and managed appropriately.
- 2.15 The strategy for managing violence was not well informed by analysed data. A reasonable range of data was presented at the monthly safety meeting, but this did not correlate with that held by other departments, such as security. The data were not always clear and there was no detailed analysis of trends over time. This limited understanding of the drivers of violence to improve safety outcomes further at Maghaberry.

## Adjudications

- 2.16 In July 2022, senior leaders had taken the decision to stop holding adjudication hearings, due to a lack of staff. There was no record of any formal discussion in any senior management team meetings before taking this decision and no assessment of the risks this might present. Leaders aimed to recommence hearings in mid-October 2022.
- 2.17 Despite the suspension of adjudications, staff were still required to place prisoners on report, only for the hearing to be adjourned and then withdrawn after nine weeks.
- 2.18 These decisions had inevitably led to a considerable backlog of outstanding adjudications, many for serious breaches, such as use of illicit items. It also reduced the number of referrals to drug services to help prisoners address their addictions, which would have been made by the adjudicating governor when drug charges were heard. It was difficult to understand why such a decision had been taken, particularly as it meant there was no deterrent for bad behaviour and some serious offences inevitably went unpunished.

## Use of force

- 2.19 The use of force was slightly higher than in similar prisons in England and Wales, but had reduced since our previous inspection. As we reported in 2018, records indicated that few incidents required full restraint, and most involved guiding holds to return prisoners to their cells or calm situations. In addition, separated Republican prisoners refused to be searched and had to be restrained every time a Prison Officer carried out a search for security reasons. Although the evidence we reviewed satisfied us that most force was low level, leaders did not routinely separate the data to demonstrate this. Data on low-level force were recorded together with full restraint, including by the dedicated search team, which created an unnecessarily negative picture.
- 2.20 Governance arrangements had remained in place since the previous inspection. All incidents were reviewed monthly, but the records did not always demonstrate in-depth analysis or sufficiently critical review to identify patterns and improve practice. There was no independent scrutiny to support governance, for example from members of the health team or Independent Monitoring Board.
- 2.21 Leaders had taken appropriate action where excessive force was identified; in the previous 12 months, nine incidents had been investigated, resulting in four staff suspensions. It was positive that special accommodation cells were no longer used routinely.

## Segregation

- 2.22 Fewer prisoners had been segregated in the previous 12 months compared with our previous inspection, and the average time they had spent in the CSU had decreased. The unit had 30 cells, including several that were monitored by cameras.

- 2.23 At the time of this inspection, the Unit accommodated 14 prisoners, of whom five had spent over 30 days in the CSU and one person had been held in a CSU for over three years; the remainder had been there for between three and 11 days.
- 2.24 In the absence of other suitable accommodation at Maghaberry or specialist provision in the community, the CSU continued to hold some individuals with complex and challenging behaviours. The Unit was not equipped to meet their therapeutic needs, although senior prison and health care staff were working collaboratively with others to support and monitor their progress. The care plans for these prisoners were good.
- 2.25 In February 2022, CJI had published a report of a review of the operation of CSUs conducted in partnership with the RQIA and the ETI. Since its publication, there were now better individual management plans for long-term prisoners. A CSU timetable was in place during the inspection with allocated slots for a range of agencies to visit prisoners, and a broader range of people were engaging with prisoners and contributing to their management plans. The contribution of the South Eastern Health and Social Care Trust (SEHSCT) Speech and Language Therapist and patient engagement lead was very good. There was a weekly action plan review in all cases, which informed the next steps through up-to-date information. The meeting we observed was person-centred with good contributions from attendees, but it was not always evident how the outcomes were reflected in the reviews.
- 2.26 There had been some improvements to the CSU's living conditions and facilities, with further work planned to improve the environment and provide more therapeutic spaces. The condition of some cells was poor and several toilets were blocked.
- 2.27 An innovative technological solution had been introduced to monitor access to a basic daily regime. Although the system recorded access to showers, exercise and telephones, some prisoners continued to spend very little time out of their cells. We could not be assured that all prisoners were offered a shower or telephone call every day or what encouragement they were given to engage in the regime. More positively, some prisoners could now associate with peers to exercise and, subject to risk assessment, could access the main prison gym and library.
- 2.28 CSU staff and managers were very knowledgeable about the risks and needs of prisoners in the Unit and were alert to behaviour and personality traits. However, prisoners in our survey and those we spoke to said that they had not been treated well by CSU staff.

## SECURITY

**Expected outcomes:** Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance use and effective drug supply reduction measures are in place.

- 2.29 Security procedures, including the movement and accounting of prisoners, were reasonable and proportionate to the risks presented by the complex population. The use of biometric technology to enable most prisoners to have free movement around the site was impressive. Not only did it give prisoners some personal responsibility, it also freed up valuable staff resource for other work. The prison was relatively calm and well-ordered at the time of our inspection, although there had been a serious incident in July 2022 when prisoners had gained access to the roof in the Mourne complex in protest about the limited regime.



- 2.30 The security department dealt with a high volume of intelligence reports that were processed promptly, with no backlog at the time of inspection, although the security reports were still paper-based and resource intensive.

- 2.31 Prison leaders had taken the decision to replace a useful monthly 'local tactical assessment', which had been used to good effect to review intelligence and identify preventative measures and disruption tactics. The new monthly report was brief and contained very limited data. It was not clear how leaders were assessing security threats to provide an appropriate response. When concerns were identified, they lacked subsequent actions to mitigate the risk. Likewise, the monthly security meeting was poorly attended by other departments and provided no evidence of action to drive improvement and maintain safety.
- 2.32 In our survey, 41% of prisoners on the main site indicated that it was easy to get illicit drugs at the prison. This was very high, particularly compared with 28% recorded in similar local prisons in England and Wales. In addition, 28% of prisoners, against the comparator of 8%, said they had developed a drug problem while at Maghaberry.
- 2.33 There had been 617 drug tests during the previous 12 months, over half of which were for risk assessment purposes to support progression and meet the conditions of being in open conditions at Burren House. There had been no mandatory drug testing since July 2021, which leaders attributed to staff shortages. Notwithstanding frequent redeployment, mandatory drug testing and security staff used their initiative to conduct suspicion-led tests when possible. Of the 300 suspicion tests in the previous year, 52% were positive, confirming that the intelligence was good and the prison had a serious drug problem.
- 2.34 Even though drugs and illicit items had been identified as risks in the previous threat analysis, the most recent monthly data brief did not provide a good level of analysis to highlight the current risks to senior leaders. Subsequently, the prison's response to the supply and demand for drugs was not robust. There had been no formal drug strategy or substance misuse meeting during the previous 12 months, data on the use and supply of illicit substances had not been analysed, and there was no supply reduction action plan. This was despite drug and supply reduction being identified as a priority in the prison's self-assessment report.

## SAFEGUARDING

**Expected outcomes:** The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.

### Suicide and self-harm prevention

- 2.35 There had been 11 deaths at the prison since our last inspection in 2018. One of these had been confirmed by a Coroner as being self-inflicted. Evidence suggested that a further six of the 10 awaiting a Coroner's inquest were also likely to have

been self-inflicted. Despite this, there had been no quick application of learning to limit the chances of other prisoners taking their own lives. Instead, the prison was waiting for the outcome from each Prisoner Ombudsman investigation and the Coroner's inquest before updating the death-in-custody action plan and acting on what could be learned to keep prisoners safe.

2.36 There had been 451 self-harm incidents in the last 12 months and over 500 Supporting Prisoners At Risk Evolution (SPAR Evo) electronic monitoring documents had been opened. Most prisoners at risk of self-harm or suicide were monitored on a SPAR Evo for an average of three days. We were concerned that some of the SPAR EVOs we looked at had been closed without medical input, others had been opened and closed without actions to keep prisoners safe, and others contained many days of observation without any record of meaningful contact with staff. In our prisoner survey, only 37% of those who had been on a SPAR Evo said they had felt cared for by staff. Several prisoners we spoke to said they were monitored at frequent intervals by staff, but this was transactional and lacking in genuine care. Quality assurance of SPAR EVOs was very weak.

2.37 Rates of self-harm were similar to comparable prisons but were rising. Leaders had not done enough to understand this rise and there was no clear plan to address it. Oversight of the management of prisoners in crisis or presenting with complex challenging behaviours was very poor, including for those located in the CSU and those placed into anti-ligature clothing. The rationale for the authorisation of anti-ligature clothing was not always clear, proportionate or appropriately authorised. Leaders did not always follow processes to support prisoners in crisis, such as to visit and assess them daily. Decisions to segregate or continue to segregate prisoners considered at risk of self-harm or suicide were not routinely documented.

**Protection of adults at risk<sup>5</sup>**

2.38 The safeguarding policy was up to date and aligned to the regional Adult Safeguarding Prevention and Protection in Partnership policy. The policy did not provide a named safeguarding lead at the prison or give guidance to staff about how to make a safeguarding referral. Many NIPS staff across all levels we spoke to were confused about what constituted an adult safeguarding issue and had not received adult safeguarding training.

2.39 We found several examples of serious safeguarding incidents that had been investigated by leaders but had not been managed in accordance with the NIPS policy. Although we found examples where referrals had been made to the Police Service of Northern Ireland, there was limited liaison by the NIPS to the SEHSCT Adult Safeguarding team for advice on referral and management.

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5 *Adult safeguarding is based on fundamental human rights and on respecting the rights of adults as individuals, treating all adults with dignity and respecting their right to choose. It involves empowering and enabling all adults, including those at risk of harm, to manage their own health and wellbeing and to keep themselves safe. It extends to intervening to protect where harm has occurred or is likely to occur and promoting access to justice. All adults at risk should be central to any actions and decisions affecting their lives. Adult Safeguarding: Prevention and Protection in Partnership, June 2015, page 5, available at Adult Safeguarding: Prevention and Protection in Partnership key documents (health-ni.gov.uk).*

## CHAPTER 3 RESPECT

**Prisoners are treated with respect for their human dignity.**

### STAFF-PRISONER RELATIONSHIPS

**Expected outcomes:** Prisoners are treated with respect by staff throughout their time in custody and are encouraged to take responsibility for their own actions and decisions.

- 3.1 The staff-prisoner interactions we observed were friendly, relaxed and non-judgemental; most staff demonstrated a good level of care and understanding of the individual needs of prisoners. The time that prisoners spent out of their cells, along with approachable staff who worked to resolve their day-to-day issues, helped to foster good relations on the wings. The biometric system that allowed most prisoners to walk around the site unescorted also demonstrated a level of trust in the population that helped to support respectful relationships. That said, there were many reports that some staff had used offensive language, including derogatory sectarian comments, towards Catholic prisoners (see paragraph 3.33). Leaders need to explore this further and deal with it robustly.
- 3.2 While day-to-day relationships were broadly good, there was a barrier to providing more in-depth support to prisoners. The prison did not operate a personal officer scheme and Prisoner Development Unit (PDU) co-ordinators were frequently cross-deployed (see paragraph 5.9), which meant that most prisoners were unable to receive targeted or regular support from a named officer. In our survey, only 55% of prisoners on the main site said there were staff they could turn to if they had a problem, against the comparator of 70%.
- 3.3 Peer work was not used extensively; for example, one mentor engaged with new prisoners on arrival (see paragraph 2.1), a small number were appointed to promote equality work (see paragraph 3.24) and, more recently, health care had introduced health representatives (see paragraph 3.47). However, the concept and value of peer work was not yet embedded in the ethos and culture of the prison. Too few roles were available, some of the initiatives had only recently started and prisoners did not yet know about them, and many prisoner representatives we spoke to had not received training.

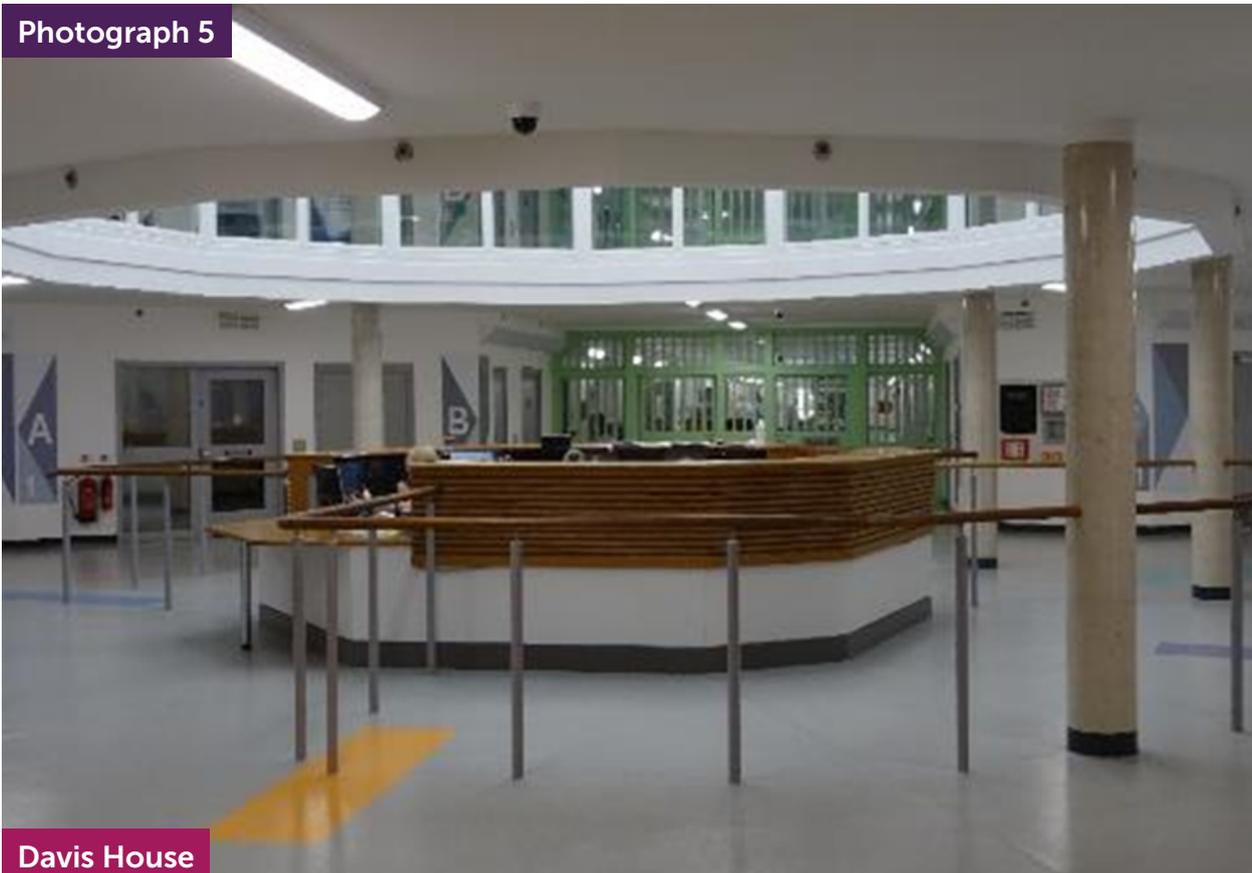
## DAILY LIFE

**Expected outcomes:** Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

### Living conditions

- 3.4 Living conditions across most of the residential units were good. Since the last inspection, Davis House, a new 360-bed unit, had opened, and its facilities were the most modern in the Northern Ireland prison estate. It had replaced three former houses that we had previously judged to be claustrophobic, unhygienic and extremely uncomfortable.

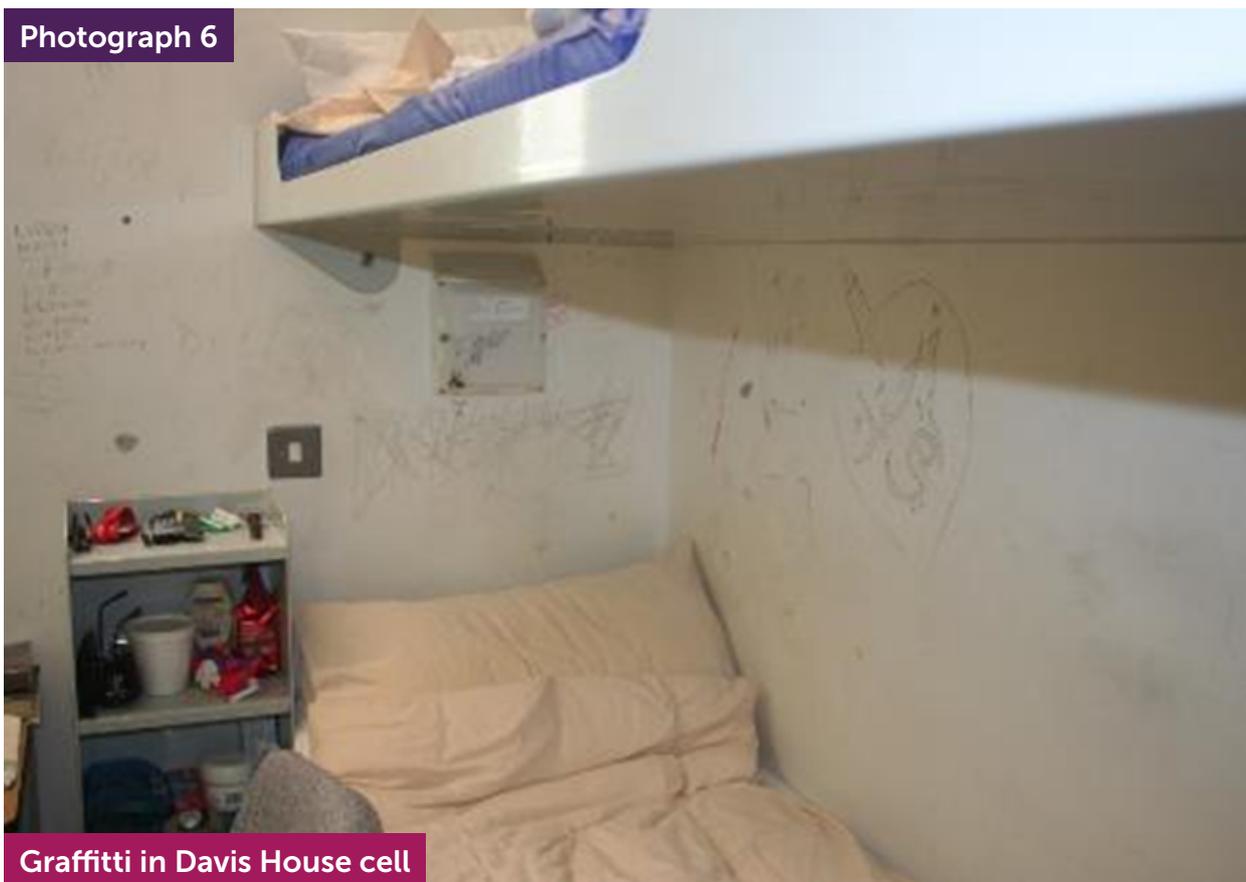
Photograph 5



Davis House

- 3.5 Accommodation across Maghaberry had been reconfigured and was well thought out with a range of residential units to meet the specific needs of different groups of prisoners. Shimna House, Quoile House and the Moyola Unit provided good accommodation for older and vulnerable prisoners. Long-term prisoners and those with lower risk could progress from the main site to Braid and Wilson Houses on the Mourne site and Burren House in Belfast city centre. Key workers were accommodated in some of the better accommodation in Davis House and Quoile House.

Photograph 6



Graffiti in Davis House cell

- 3.6 During the COVID-19 pandemic, prisoners had been allocated their own cells but a recent significant increase in the prisoner population had resulted in 376 prisoners sharing cells at the time of this inspection. Bann House, the first-night centre, frequently operated at close to its overcrowding capacity.
- 3.7 Most prisoners kept their cells reasonably clean and tidy but toilets across the site, including in Davis House, were badly stained despite prisoner efforts to clean them. The relatively new Davis House also had some heavily marked and dirty cell walls.
- 3.8 While most living conditions were reasonably good, there were notable exceptions. Cells in Bann House were poor including adapted cells for disabled prisoners (see paragraph 2.6), and the standard of cleanliness in Bush and Roe Houses integrated landings was not sufficiently good. There was evidence of graffiti in these units and others across the prison, but it was not widespread, and a rolling programme of painting sought to address the problem.
- 3.9 Communal areas in most residential units were generally clean, bright and well maintained. External areas were also reasonably well maintained, particularly on the Mourne site.

Photograph 7



External areas, Mourne site

- 3.10 Most prisoners surveyed said that they were able to keep themselves and their clothes clean. Each unit had laundry facilities, and a central laundry did specialist washes and laundered bedding. A consistent process was required for cleaning soiled items.
- 3.11 Most prisoners could now shower every day. In Davis and Shimna, where there were in-cell shower rooms, there were several problems with shower units, with delays in addressing this due to contractual arrangements and accommodation pressures.
- 3.12 It was evident that there had been remedial works to improve living conditions just before the inspection, including painting, the issue of shower and cell mats, mirrors and curtains, and the re-covering of pool tables. There was a need for regular quality assurance and action plans to establish and maintain decent living standards in all areas.
- 3.13 Less than a quarter of prisoners surveyed said that they could get stored property promptly if they needed it. Staff shortages had affected the time taken to process property effectively. There was also inadequate storage space in most shared cells.
- 3.14 In our survey, only 41% of prisoners said that cell call bells were normally answered within five minutes, and this dropped to 25% in Bann House, which was concerning. Reports generated on cell call bell response times were difficult to navigate and there were no effective means for senior managers to monitor response times.

**Residential services**

- 3.15 The well-equipped kitchen provided a good amount of and reasonable quality food for prisoners each day. Prisoners received a choice of hot or cold options for lunch and a hot meal in the evening, which they were able to eat communally on most units. The kitchen catered for several special diets, and published menus were made more accessible by including photographs of the meals.

- 3.16 Some very limited consultation with prisoners had resulted in the increase of daily menu choices from three to five, but it lacked variety and some prisoners were bored of the cycle of menu choices.
- 3.17 Up to 30 prisoners worked in the kitchens, of whom six were working towards a qualification. Wing serveries were clean, although leaders needed a more robust assurance process to ensure all serveries workers completed food hygiene courses and wore appropriate personal protective equipment at all times.
- 3.18 The prison shop sold a reasonable variety of goods for most prisoners. Following consultation in recent equality and diversity forums, more vegan and gluten-free products had been added, as well as specific items requested by Chinese and Eastern European prisoners. All new prisoners who arrived at the prison with funds could access the shop straight away (see paragraph 2.5).

### **Prisoner consultation, requests and redress**

- 3.19 In our survey, only 46% of prisoners said they were consulted about things like food, the shop, health care or wing issues. The prison-wide forum that we saw at the last inspection had stopped during the pandemic and had not yet resumed. Unit forums had started a couple of months previously, giving prisoners the chance to discuss and resolve issues with wing managers. However, the processes were not yet embedded, most prisoners we spoke to were not aware of the forums, and the arrangements were too new to judge their effectiveness.
- 3.20 In our survey, prisoners were more positive about the complaints and requests processes than at the last inspection and compared with similar prisons in England and Wales. Complaints and requests were reasonably well-managed, and responses were timely and generally addressed the issues raised. It was positive that prisoners who did not speak English as a first language were encouraged to submit complaints - and could receive responses - in their primary language.
- 3.21 There was good support for prisoners who needed help with legal matters, and access to legal visits and video-calling facilities remained good for almost all prisoners. In our survey, 75% of prisoners in the Mourne House complex said it was easy to communicate with their legal representative, compared with 45% in similar prisons, and 63%, against 37%, said it was easy to attend legal visits.

## **EQUALITY, DIVERSITY AND FAITH**

**Expected outcomes:** There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

### Strategic management

- 3.22 Work to promote equality and diversity had only recently restarted after being suspended during the pandemic. Initial work was promising, but it was underdeveloped compared with our previous inspection. Although the Deputy Governor had overall responsibility for equality work, it was insufficiently prioritised and resourced, and there were notable gaps in the provision for smaller minority groups.
- 3.23 The equality policy and subsidiary policies relating to disability and foreign national prisoners predated the pandemic and had not been updated. They did not cover all equality groups or how the prison would meet the needs of these groups. Equality and diversity were a standing agenda item for the monthly senior management team meeting. In reality, this was just an opportunity to provide operational updates, such as forthcoming planned events, rather than a forum to consider the wider strategic direction or plans to improve work in this area.
- 3.24 The Deputy Governor chaired a monthly equality and diversity meeting. Attendance had been poor but was improving, with more heads of function, newly appointed prisoner representatives and external agencies attending the most recent meeting. The meeting was used to discuss a relevant range of equality issues, and resulting actions were identified appropriately and tracked from one meeting to the next.
- 3.25 The Equality and Diversity Co-ordinator had held ad-hoc focus groups, including with Lithuanian, Chinese, older and disabled prisoners. It was positive that interpreters had been used in the groups for foreign nationals. All the groups followed the same format and asked prisoners about day-to-day issues, like whether they knew how to complain, had access to the gym and library, and if they had suitable employment. Some useful actions were identified as a result of these groups and added to the equality action plan. There had been efforts to hold a few cultural events and mark religious occasions, and these were popular with prisoners and staff we spoke to.
- 3.26 There was no separate process or form for complaints about discrimination to make sure that they were given appropriate attention and dealt with confidentiality. The category of each complaint was assigned by officers, before being scanned and processed by administrative staff. Complaints deemed 'serious' were only kept confidential from the point of categorisation, when they would be allocated to a Governor, but this did not automatically include discrimination complaints, as we would expect to see. While some responses to discrimination complaints we reviewed investigated the allegations well, others did not address the issues raised in sufficient depth.

### Equality groups

- 3.27 Our survey did not show any widespread differences in the perceptions of prisoners in the equality groups we looked at. However, there were notable gaps in the provision for smaller minority groups, where low numbers made statistical analysis difficult.

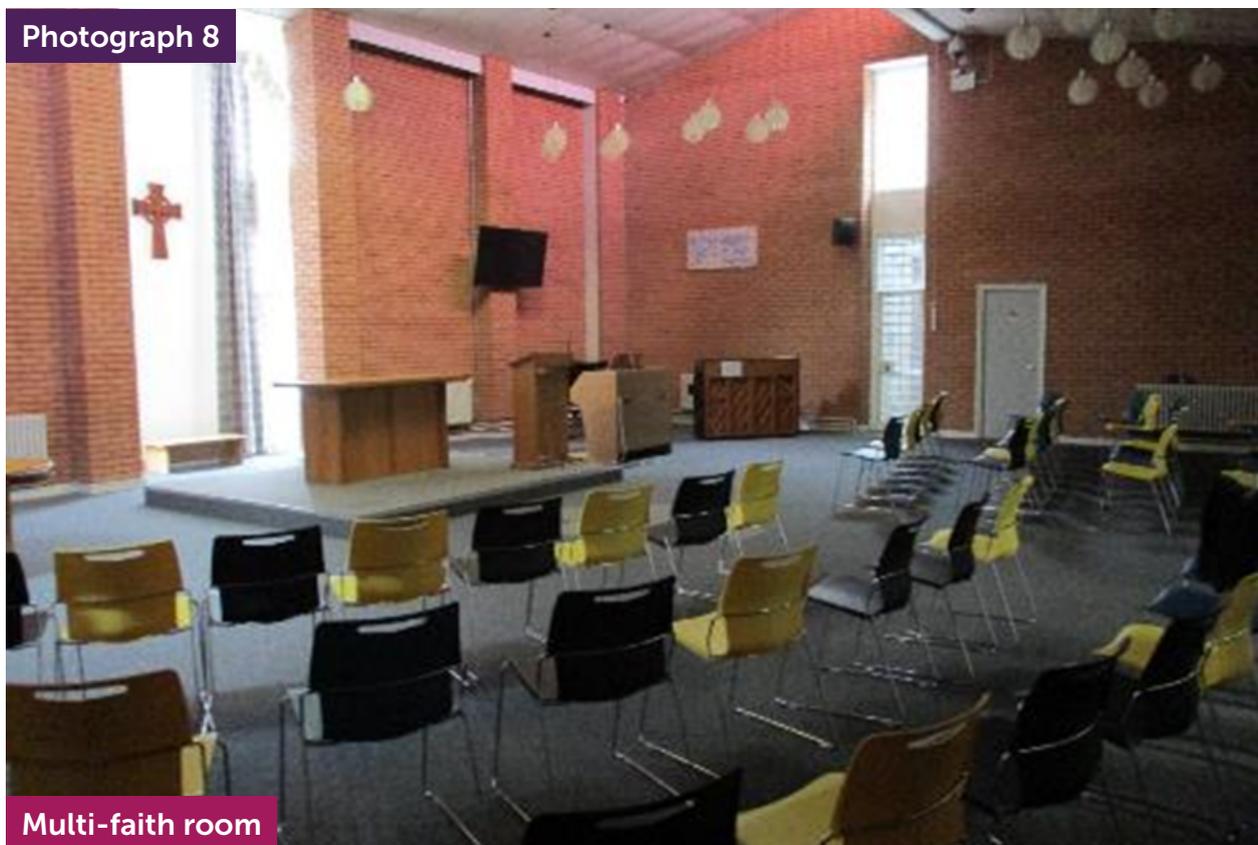
- 3.28 There was reasonably good support for the 132 foreign national prisoners (12% of the population) and those for whom English was not a first language. Forums had been held with prisoners from Lithuania and China, the countries with the largest populations in the prison after the UK and the Republic of Ireland. Two Home Office immigration officials visited the prison at least weekly and provided valued support, and we saw evidence of good use of telephone and in-person interpreters throughout the prison.
- 3.29 There had been no consultation with the relatively small number of black prisoners or those of mixed heritage. Prisoners from these groups told us that they had experienced racist abuse from both staff and prisoners, and some said that they had had to shave their head because the shop did not sell suitable hair care products. There had also been no consultation with the 35 Gypsy, Roma and Traveller prisoners (3% of the population), although leaders were engaging with a representative from an external agency to improve provision for this group.
- 3.30 Support and care for older and disabled prisoners were reasonable. There were accessible and adapted cells for all prisoners who required them, separate consultation events had been held with the two groups, and almost all areas of the prison were wheelchair accessible, which meant that most prisoners who used wheelchairs were able to work. The Donard Centre and the Moyola Unit provided good facilities and support for prisoners with mental health issues, physical disabilities or requiring greater social support.
- 3.31 The prison did not collect data on the number of gay or bisexual prisoners, and had not consulted with this group, which meant they did not understand the size or needs of this population. There were no known transgender prisoners in the prison at the time of the inspection. However, it was clear from reviewing discrimination complaints submitted by two transgender prisoners who had since left the establishment, and from discussions with senior leaders, that the needs of transgender prisoners were not being met. Despite a policy being in place there was a lack of knowledge and understanding of their needs.

### **Faith and religion**

- 3.32 In our survey, 90% of prisoners on the main site said they had a religion, which was more than in similar local prisons. This was in line with the prison's own data, which showed that 86% of prisoners said they followed a denomination of Christianity, of whom more than half (51%) were Catholic.
- 3.33 There was evidence of disproportionate outcomes for Catholic prisoners. Leaders examined data each month on outcomes for Catholic and Protestant prisoners, but the process to understand and address disproportionality was not sufficiently robust. For example, leaders focused on rationalising individual cases but had lost sight of the bigger picture that showed consistently poorer outcomes for Catholic prisoners in areas such as adjudications and being placed on the basic regime.

Both prisoners and staff told us that they had witnessed staff using offensive sectarian language towards Catholic prisoners, but did not submit complaints due to fears of victimisation. This was borne out in our survey, in which Catholic prisoners were less likely than non-Catholics to say they would complain if they were victimised by staff.

- 3.34 Almost all prisoners in the largest faith groups were able to access weekly religious services. In our survey, prisoners on the main site were much more positive than at similar local prisons about access to services and the ability to speak to a chaplain in private. Muslim prisoners we spoke to were satisfied with the support of their chaplain, but their communal prayers were only held once a fortnight, which was not enough. The chaplaincy could arrange one-off ecumenical visits by faith leaders for the few prisoners who were members of smaller faith populations.
- 3.35 The small chaplaincy was well-respected by prisoners. Chaplains saw all new arrivals and provided pastoral care when requested. However, the chaplaincy was not as well integrated into the management structures as we find in other prisons. The chaplaincy did not routinely attend senior management or safety meetings to contribute to discussions about prisoners of concern; this was a missed opportunity to use their skills and experience.



Photograph 8

Multi-faith room

## HEALTH, WELLBEING AND SOCIAL CARE

**Expected outcomes:** Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.

3.36 The inspection of health services was jointly undertaken by the RQIA and HMI Prisons. The RQIA found some areas that did not fully meet The Quality Standards for Health and Social Care, Supporting Good Governance and Best Practice in the HPSS, March 2006.<sup>6</sup>

### Strategy, clinical governance and partnerships

3.37 Governance oversight of health care by the SEHSCT was effective in driving improvement and supported the delivery of safe and effective care.

3.38 Prison health care leadership was good. Health care staff were innovative and motivated, and told us that they were well supported and felt valued. Some recent changes to middle management had had a positive effect on the morale of the multidisciplinary team. Prisoners we spoke to were mostly positive about relationships with health care staff.

3.39 There was good joint working across the disciplines. Nursing staff vacancies were well managed and agency and bank staff were block booked, which supported the delivery of consistent care to patients.

3.40 Prison health care had established good links with the wider SEHSCT, which enabled good sharing of information and further strengthened SEHSCT governance. There was good liaison with other Health and Social Care Trusts which led to safer outcomes for prisoners on release.

3.41 Incidents were managed well and reviewed promptly. There was a system to review incident data, and themes and trends were identified to improve patient outcomes. Learning from incidents was shared at forums through learning lines and used to enhance staff skills and knowledge. There was a governance system to review and monitor progress against recommendations from independent reviews and serious adverse incidents.

3.42 The multidisciplinary team has been enhanced with the recruitment of a speech and language therapist and an increase in the psychology service. Both health care and the NIPS staff spoke positively about the impact of the speech and language therapist in supporting the communication needs of patients.

<sup>6</sup> HSSPS, *The Quality Standards for Health and Social Care, Supporting Good Governance and Best Practice in the HPSS, March 2006* available at <https://www.rqia.org.uk/getattachment/10f14623-22c0-46bb-b1db-90d48cec53a7/the-quality-standards-for-health-and-social-care.pdf.aspx>

3.43 The fabric of the treatment rooms was good and well maintained. Medical equipment was checked and maintained in accordance with SEHSCT policy, but emergency equipment in the Moyola Unit could not be easily accessed outside the hours of 9am to 5pm.

3.44 Health complaints were well managed, and there was a good patient engagement service. Data from complaints were used to initiate quality improvement projects, such as the freephone telephone service for patients to make a health care appointment, strengthening the assessment on arrival and making health care arrangements before a patient left the prison.

### **Promoting health and wellbeing**

3.45 Health promotion was good. Campaigns were evident, and public health care screening was in line with that in the community. Prisoners had good access to immunisation.

3.46 The previous sexual health screening service was no longer available and this area was now managed by the General Practitioner (GP). All prisoners were offered blood-borne virus screening. A new in-reach hepatology (liver) assessment pathway has been introduced with a view to a reduction in the time patients had to wait for treatment.

3.47 Peer mentor support was available to assist prisoners with access to health care and could make direct referrals on their behalf. Data showed this was having a positive impact.

### **Primary care and inpatient services**

3.48 In our survey, 33% of prisoners said that the overall quality of health services was good. Urgent referrals to primary care were seen promptly, but the waiting time for routine doctor appointments was too long.

3.49 The skill mix of the primary health care team addressed the physical health care needs of the population. However, waiting times for primary care services were too long and many patients did not attend their primary health care appointments.

3.50 Care documentation audits had been completed and care plans were now in place for most patients.

3.51 There was a good system to manage external hospital appointments but the number of patients who did not attend was high, primarily due to the inability of the escort service to facilitate transport arrangements. Funding has been secured for an ultrasound machine and sonographer, which will have a positive impact on patients who are delayed or miss their external appointments.

### Social care<sup>7</sup>

- 3.52 Several prisoners required assistance with their social care needs, such as personal care, eating and drinking, and skin care. Their social care needs were met in partnership with the NIPS and, where required, delivered by domiciliary care agencies.
- 3.53 The SEHSCT was not commissioned to provide social care in the prison and, as a result, governance arrangements, including the responsibility for monitoring the social care provision, was unclear. There was no social work service or care management system in the prison to assess, plan and co-ordinate social care delivery. We are aware of ongoing regional work led by the Department of Health and commissioners to address the provision of social care to the prison population.

### Mental health care

- 3.54 In our survey, 77% of prisoners said they had a mental health problem but only 23% said they had been helped with their mental health problem. Twelve percent of prisoners felt that their mental health had improved since arriving at the prison.
- 3.55 Mental health triage had improved and urgent mental health referrals were addressed promptly. Patients continued to experience lengthy delays for routine mental health assessments and subsequent interventions.
- 3.56 There was an informal mental health stepped care pathway in place. Patients not known to the Mental Health Team had their medication reviewed by the GP.
- 3.57 The number of prisoners requiring transfer to an inpatient mental health facility was comparably low against previous inspections but some continued to wait too long for an admission.
- 3.58 The mental health team comprised psychiatry, psychology, nursing, occupational therapists and cognitive behavioural therapists and was supported by speech and language therapy. It continued to offer mental health awareness sessions to the NIPS staff, although these were not well attended.
- 3.59 There was good partnership working between the mental health team and the NIPS, including attendance at multidisciplinary reviews, such as SPAR Evo meetings and case reviews.
- 3.60 An increase in the psychology service meant prisoners had more access to psychologically informed treatments, but this service was insufficient to meet the needs of the prison population. This was highlighted by both primary care staff and the psychiatrist, and was in keeping with the findings of the RQIA *Review of Services for Vulnerable People in Northern Ireland prisons*.<sup>8</sup>

7 A package of assistance with personal care to address the needs of individual prisoners at risk (that is assistance with activities of daily living such as washing, bathing, toileting but not amounting to medical care) and to enable the individual to return to self-caring where possible.

8 RQIA, *Review of Services for Vulnerable Persons Detained in Northern Ireland Prisons, October 2021* available at [https://www.rqia.org.uk/getattachment/955cfa4a-5199-4be7-9f1a-801e1369ce84/VPReview\\_Final-Report\\_Updated-Oct-Cover\\_01102021.pdf.aspx](https://www.rqia.org.uk/getattachment/955cfa4a-5199-4be7-9f1a-801e1369ce84/VPReview_Final-Report_Updated-Oct-Cover_01102021.pdf.aspx)

3.61 At the time of this inspection, comparatively few prisoners were accessing this service, and the waiting list was long. The Clinical Psychologist attended weekly multidisciplinary meetings and critical incident debriefs.

3.62 There was no specialist service for prisoners who might have required an assessment for personality disorder or who had a diagnosed one. These patients were managed on a day to day basis by the mental health and primary care teams. There were a small number of patients who presented with the most significant levels of dysfunction and who demonstrated severe and complex behaviours. These patients could not be supported safely in the general population, resulting in their admission to the CSU and often for lengthy periods. The CSU environment was not conducive to the psychological and therapeutic needs of these patients, and staff had limited knowledge to deliver evidenced-based care and support (see paragraph 2.24). Clinical psychology support was limited and there was no in-reach from community personality disorder services.

3.63 Health needs assessment work had advanced and was due to be shared with the SEHSCT by the Public Health Agency once finalised.

### **Substance misuse treatment**

3.64 The SEHSCT delivered clinical substance use treatment and subcontracted Alcohol and Drugs: Empowering People through Therapy (AD:EPT) to provide psychosocial support. Despite a joint strategy for the management of substance misuse, there were no drug strategy meetings or local action plan. Overall, services were severely under-resourced.

3.65 All new arrivals were screened for alcohol and/or drug withdrawals and appropriate onward referrals were made where available.

3.66 Clinical prescribing arrangements did not meet the needs of the population, and we were concerned that providers had capped the number of patients who could receive Opiate Substitution Therapy (OST) due to workforce and workload constraints and to ensure patient safety. This had resulted in 128 patients who were waiting for an assessment of their needs, 87 for longer than nine weeks. Clinical reviews of patients on OST were not taking place in line with best practice and oversight of reviews was weak. Prisoners we spoke to expressed frustration at not being able to access the service.

3.67 At the time of the inspection, 96 patients were prescribed OST. We observed dispensing of OST at Davis House and in the health care centre, which was confidential and professional, but the manual measuring of each dose was an ineffective use of clinical time.

- 3.68 The psychosocial team (AD:EPT) saw all new arrivals, told them about the service and offered harm minimisation advice. AD:EPT staff also saw prisoners in the CSU every week, which was good. Alcoholics Anonymous provided mutual aid and there were plans to reintroduce self-management and recovery training groups. All the psychosocial team were trained in the use of auricular acupuncture and this was due to be offered. No peer mentors worked with the service.
- 3.69 There were 69 patients engaged with the psychosocial service and those we spoke to were happy with their support. However, there were 248 prisoners on the waiting list, and we were told that new referrals were waiting four months to be seen by the team.
- 3.70 Pre-release planning was well co-ordinated and there were good community links to make sure support was maintained post-release. Prisoners were offered naloxone treatment and training (to prevent opiate overdose) on release.

### **Medicines optimisation and pharmacy services**

- 3.71 The in-house pharmacy service was effective and responsive, and medicines were supplied promptly. The recent introduction of six medicines management technicians in Davis House had had a positive effect in releasing nurses to carry out their clinical roles. The SEHSCT planned to recruit additional medicines management technicians to provide a presence in all houses.
- 3.72 Initial reception screening identified prisoners' medicine needs. Patients could self-administer their medication, subject to a regularly reviewed risk assessment. The self-administration risk assessment forms were generally well maintained. Patients received support to self-administer and adhere to their medicines.
- 3.73 Medicines were prescribed safely in line with evidence-based practice. Any disruption in prescribing regimens was minimised and urgent medicines could be accessed promptly. Patients' adherence to medication was monitored, and they were reviewed when adherence was poor and/or diversion was suspected. The medicine administration process had improved to reflect professional standards.
- 3.74 Records of controlled drugs were maintained appropriately and stock balances were accurate. Controlled drug audits were completed in accordance with the SEHSCT policy. The standard operating procedure for the disposal of controlled drugs had been reviewed; records of the disposal of Schedule 3 and 4 (Part 1)<sup>9</sup> controlled drugs were maintained. Not all staff were adhering to the procedure and removing these controlled drugs from the house locations promptly; management needed to embed the disposal policy.

9 See *The Controlled Drugs (Supervision of management and use) Regulations (Northern Ireland) 2009 and Schedules 3 and 4 of The Misuse of Drugs Regulations 2001*

- 3.75 There were governance processes to ensure safe and effective medicines management, including monitoring of medication incidents, prescribing trends and adherence checks. There had been a reduction in the prescribing of some medicines that were potentially tradable by prisoners but also an increase in a further one. Staff had recently started to review prescribing trends to identify any major changes in practice and to take any appropriate action, and this should continue.
- 3.76 Meetings of the medicines management committee had recently recommenced following the COVID-19 pandemic; they had not been held regularly during that period and needed to take place to be effective.

### **Dental services and oral health**

- 3.77 Prisoners requiring urgent dental treatment were seen promptly, but those requiring non-urgent appointments were waiting too long. There was no routine dental screening programme.

## CHAPTER 4 PURPOSEFUL ACTIVITY

**Prisoners are able and expected to engage in activity that is likely to benefit them.**

### TIME OUT OF CELL

**Expected outcomes:** All prisoners have sufficient time out of cell and are encouraged to engage in activities which support their rehabilitation.

- 4.1 Half of the prisoners who responded to our survey said they spent less than two hours out of their cell on a typical weekday, although this was better than in similar prisons in England and Wales. Time out of cell had improved in recent weeks, and during our roll checks only 18% of prisoners were locked up, which was also better than in comparable prisons. At the time of our inspection, prisoners spent on average 8.5 hours a day unlocked, ranging from 15 hours on Wilson House to a meagre 1.5 hours on Bann House.
- 4.2 Although the time prisoners spent unlocked was reasonable, it was not purposeful and only a minority went to education, skills or work. In our spot roll checks, only 15.5% of prisoners had left the wing to attend work or education. At the time of the inspection, the Learning and Skills Centre had been closed since July 2022.
- 4.3 Prisoners who were not allocated to or required for education or work could access a range of landing activities, including pool, table tennis, fitness rooms and board games in many locations. Some prisoners who might struggle in education or work could attend therapeutic recreational activities in the Donard Centre, such as art and cooking, designed to encourage their engagement. Prisoners we spoke to said they appreciated the facility and felt supported by the staff who supervised it. Exercise yards were generally a good size but those on Shimna House, Bush and Roe Houses were small and enclosed.
- 4.4 The library was well stocked, including texts that reflected the languages of the current prison population. However, access was very restricted and the mobile library was no longer available on the residential landings. Staff had made efforts to facilitate individual requests for the loan of books.

- 4.5 There were excellent outdoor and well-equipped indoor physical education facilities. Until late spring 2022, prisoners had not been able to fully access these facilities for nearly two years. Initially, this was due to COVID-19 restrictions, but more recently it had been due to staffing shortfalls. Access to Physical Education (PE) had recommenced during spring 2022, but the frequent redeployment of PE staff meant that prisoners could still not use the main sports facilities at weekends.
- 4.6 More positively, most prisoners benefited from well-equipped wing fitness rooms, which somewhat mitigated the poor access to the main facilities. Separated prisoners could use PE facilities off wing on a comparable basis to those elsewhere within the prison. Leaders had only recently started to collate useful data to identify any emerging issues and ensure equitable access to PE for all prisoners.

Photograph 9



Outside sports area

Photograph 10



Fitness room

- 4.7 Since reopening, PE staff had started to reintroduce a variety of sporting initiatives. These included links with the Gaelic Athletic Association and the Irish Football Association Foundation 'Stay Onside'; this incorporated a series of programmes aimed to divert and deter young adults away from offending. Yoga had also been introduced to help the PSST (see paragraph 2.9) support both older prisoners and those identified with vulnerabilities.

## EDUCATION, SKILLS AND WORK ACTIVITIES

**Expected outcomes:** All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The education, skills and work provision is of a good standard and is effective in meeting the needs of prisoners.

- 4.8 ETI Inspectors made the following assessments about the education, skills and work provision.

<b>Overall effectiveness of learning and skills and work:</b>	<i>The prison needs to address urgently the significant areas for improvement identified in the interest of the prisoners.</i>
<b>Outcomes and achievements of prisoners engaged in learning and skills and work:</b>	<i>Requires significant improvement.</i>
<b>Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:</b>	<i>Requires significant improvement.</i>
<b>Leadership and management of learning and skills and work:</b>	<i>Requires significant improvement.</i>
<b>Impact of care and welfare on learning, teaching and outcomes:</b>	<i>Not impacting positively on learning and outcomes for prisoners.</i>

- 4.9 Overall, prisoners needed regular and consistent access to education, skills and work. Education, skills and work activities had not been a sufficiently high priority and staff at all levels across the prison needed to value more their benefit for prisoners' rehabilitation, resettlement and wellbeing.

- 4.10 A majority<sup>10</sup> of eligible prisoners (495, 54%) were not participating in education, skills or work or attending the gym, which was having a negative impact on their learning, development, rehabilitation and resettlement needs. Weekly attendance data was tracked centrally and demonstrated that too few prisoners accessed education and training.

<sup>10</sup> Noting the data made available did not discount Higher Prior Appointments, in establishing the number of prisoners who were involved in purposeful activities, those prisoners on short-term remand (104) of up to two weeks and those retired/unfit for work (47) were not included in the count.

- 4.11 Despite a live Service Level Agreement (SLA) action plan with priority areas reflecting the existing governance arrangements in place between the NIPS and Belfast Metropolitan College (Belfast Met), progress made since the last inspection until March 2020 had been adversely impacted by the COVID-19 pandemic. In the period from March 2020, it was necessary to undertake and comply with the differing COVID-19 health and safety and risk assessments of the NIPS and the Department for the Economy in making provision for education, skills and work activities. These differing requirements constrained how the NIPS and Belfast Met could deploy their respective staffing resources. The Governor's self-assessment review stated: *'No function was affected as much as learning and skills'*.
- 4.12 Staff had recently been appointed to key leadership posts for the NIPS and Belfast Met; the NIPS postholder's responsibilities included education, skills and work and the PDU. These leaders expressed a clear pride in how staff had responded to the challenging circumstances since March 2020. Management and staff spoke consistently to ETI about the necessity of now rebuilding the provision of education, skills and work across the prison.
- 4.13 Significant NIPS staff shortages had resulted in unpredictability and often curtailment of the core day and a regular regime. Consequently, the very good specialist accommodation and resources available in the learning and skills centre were significantly underutilised, with very restricted prisoner access to provision, particularly opportunities for practical skills development.
- 4.14 Stop-start delivery over an extended period was having a negative impact on planning, delivery and progression. The lack of regular and consistent access to education and skills courses was affecting the engagement and motivation of prisoners. They reported that the ongoing disruption was frustrating and that they lacked confidence in signing up to education and skills.
- 4.15 The curriculum offer was narrow at the time of the inspection. While it had been expanded since the previous inspection in 2018, with additional unit awards and qualifications to now include Level 1 to Level 3 in some subjects, learner registrations and subsequent achievements had been very significantly impacted by the extended disruption. There were a small number of prisoners benefiting from a range of non-accredited/short courses provided by external partners, such as NIACRO, Start 360 and the Prison Arts Foundation.
- 4.16 In response to identified gaps in provision at the Mourne complex, Belfast Met was recruiting additional staff to deliver across several curricula areas. In barbering, the teaching accommodation was being extended, with a repurposed area adjoining the barber shop under development and to be operational in the next few months.

- 4.17 The opportunities for prisoners to attend classes had been reduced significantly. Despite examples of session delivery through Zoom, in the residential areas and in the evenings, there were substantial waiting lists across the curriculum, including for English for speakers of other languages (23), essential skills in ICT (47), essential skills in literacy (45), essential skills in numeracy (53), and GCSE mathematics (19). There had been no provision for essential skills in ICT over an extended period. Despite a waiting list being created, prisoners were unable to develop skills or gain qualifications in this important area.
- 4.18 There had been difficulties in providing internal quality assurance and administration for essential skills in literacy and numeracy. Short-term mitigations had been very recently agreed, as an interim measure, until identified staff from learning and skills across the Northern Ireland prisons had been trained to carry out this function.
- 4.19 The SLA indicated a comprehensive review of the curriculum at the end of year two, to be led by Belfast Met staff. Inspectors were told Belfast Met would formally deliver their findings to the NIPS through the SLA Strategic Management Board by 31 December 2022.
- 4.20 Learning took place largely in the residential areas, mainly on landings, typically in ratios of one-to-one, two or three. The underutilisation of the specialist accommodation in the learning and skills centre was having a negative impact on delivery for staff and the learning experiences and progression of prisoners. For example, there was a lack of access to materials during one-to-one art sessions on landings. The staff were proactive in seeking to extend opportunities for those engaged in art, with 12 pieces of prisoners' art to be exhibited at London's Southbank Centre as part of the annual Koestler Awards, 2022. Additionally, 12 works were going to form part of a Samaritans and Translink partnership campaign for mental health and wellbeing.
- 4.21 While learning and skills staff had been flexible in the circumstances arising since March 2020, with examples of session delivery through Zoom, in the residential areas and in the evenings, they had not been used well enough. Inspectors observed variable prisoner attendance rates in the directed training sessions and workshops, with a majority being very low. When the NIPS staff were redeployed away from learning and skills, scheduled sessions were cancelled.
- 4.22 Inspectors observed good to very good provision in a number of curricula areas, including art, barbering, business administration, catering, cleaning, essential skills in literacy and numeracy, Irish (GCSE) and mathematics (GCSE).
- 4.23 Work activities available for canteen, horticulture, industrial cleaning, laundry, and recycling were good opportunities for a minority of prisoners (199, 22%) to develop purposeful skills and provide necessary services for the prison. Prisoners working in these areas reported that they had developed new skills beneficial for their resettlement. Opportunities were missed to gain accredited qualifications in a number of areas, such as the laundry and recycling.

LIST OF ABBREVIATIONS

CHIEF INSPECTORS' FOREWORD

WHAT NEEDS TO IMPROVE AT MAGHABERRY PRISON

ABOUT MAGHABERRY PRISON

ABOUT THIS INSPECTION

EXECUTIVE SUMMARY

CHAPTER 1

CHAPTER 2

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CHAPTER 6

APPENDICES

- 4.24 Overall there were insufficient work opportunities for the current population, in part due to limited rotation of work roles and the continued disruption to delivery.
- 4.25 The achievement rates across education, skills and work were too low, which resulted in very poor progression. For example, just 13 prisoners had gained an essential skills literacy qualification and 14, an essential skills numeracy qualification in the previous year.
- 4.26 A small number of prisoners (15, 2%) were completing Open University courses. They were progressing well and achieving high standards; some, however, had indicated challenges in accessing permitted information technology resources.
- 4.27 Individual prisoner learning and progression planning was not sufficiently well interconnected across the prison functions to address rehabilitation and resettlement needs effectively. This included the use of prisoners' learning plans, personal development plans and sentence plans. Development of the education induction and assessment processes, with collective planning and monitoring across the prison functions, was required. Prisoners were not informed well enough about plans that were in place.
- 4.28 The provision of speech, language and communication therapy, occupational therapy and physiotherapy through allied health professionals and, recently, the recruitment of a special educational needs specialist by Belfast Met were positives. Continued holistic strategic planning was required across the prison to maximise the impact of the work of these professionals and Belfast Met staff to further progress appropriate provision and/or support for prisoners with particular barriers to learning and work.
- 4.29 A positive development was the new learning and skills facility for the separated regime, although access to the facility had also been affected by staffing constraints. Therapeutic areas were operating in the Donard Centre that supported prisoners' mental health and wellbeing.
- 4.30 The lack of opportunity to attend purposeful activity was having a negative impact on the wider skills, dispositions, and wellbeing of prisoners. They were missing important aspects of social development and opportunities to improve their communication and personal skills, and to work with a diverse range of people to support their rehabilitation.

## CHAPTER 5 REHABILITATION AND RELEASE PLANNING

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

### CHILDREN AND FAMILIES AND CONTACT WITH THE OUTSIDE WORLD

**Expected outcomes:** The prison supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 5.1 Support to help prisoners maintain contact with their children and families remained very good. The 'strengthening family relations' strategy was now embedded and there were monthly meetings between the prison and key partners.
- 5.2 NIACRO provided a wide range of welfare support for families as well as running the visitors' centre. Barnardo's Northern Ireland delivered an impressive range of one-to-one support and group sessions for prisoners with parenting responsibilities and their families; these included staying in touch workshops, supportive sessions on being a better parent and a weekly information session for new prisoners. Maghaberry had recently recommenced a Families Matters course that Barnardo's ran from Braid House on the Mourne site. This promising 13-week course was delivered to 23 prisoners with the aim of supporting them to understand the importance and impact of family and instil a 'families first' motto.
- 5.3 The prison also had a dedicated family officer, although this provision had been adversely affected by staffing and sickness absence. However, an experienced Prison officer had recently returned to the role and was providing valuable support and guidance to prisoners and their families.
- 5.4 Many prisoners and families we spoke to expressed continued frustration at the difficulties they faced when trying to book visits, as there were weaknesses in the system that disadvantaged them. A digital solution was being considered but this was some way off. Only 20% of respondents to our survey said it was easy for their family to visit. The prison had tried to mitigate this and facilitated a free taxi service from the local train station.

- 5.5 When families did arrive at the prison, they faced a lengthy process to reach the visits hall. There were several areas where they had to book-in, including at the entrance gate and then the visits hall, which also involved a bus transfer. The whole process needed to be streamlined.
- 5.6 Once in the visits hall, the experience was more positive. The hall was bright and welcoming, and benefited from sound-dampening. There was a professionally staffed crèche and NIACRO managed a well-stocked tea bar. Visitors could also bring in authorised property for the prisoner they were visiting, which was positive.
- 5.7 Domestic secure video call visits continued to be well-used and well-managed by the prison. In the previous three months, over 500 video calls a month were facilitated. Prisoners had good access to telephones; in our survey, 82% said they could use the telephone every day if they had credit.

## REDUCING RISK, REHABILITATION AND PROGRESSION

**Expected outcomes:** Planning for a prisoner's release starts on their arrival at the prison. Each prisoner has an allocated case manager and a custody plan designed to address their specific needs, manage risk of harm and reduce the risk of reoffending.

- 5.8 All three prison sites in Northern Ireland worked to the same NIPS policies for reducing reoffending, and the strategic work outlined in these was led through monthly meetings, chaired by the Director of Rehabilitation. Maghaberry had a range of policies that outlined the approach of the PDU and practice guides to support staff, such as managing life-sentenced prisoners.
- 5.9 Work to support rehabilitation at Maghaberry had deteriorated since our last inspection. Four management changes in the PDU since then had affected the stability of the department, there were high sickness absence levels and staff vacancies; morale among the team was low. To compound this, the persistent staff shortages in the wider prison had meant that officers were regularly deployed away from their duties as PDU co-ordinators, which considerably undermined core work.
- 5.10 As a result, too many prisoners had no plan in place to reduce their risk and develop skills through their time at the prison, and they were not given the support necessary to make progress through their sentences. In our survey, the proportion who said they had a sentence plan had fallen to just 18% from 37% at our last inspection.
- 5.11 Outcomes for prisoners varied widely, depending on their type of sentence. Nearly a quarter of sentenced prisoners were serving life or other indeterminate sentences. They benefited from clear progression opportunities and the prospect of moving from the main site to the Mourne site, followed by the working-out unit Burren,

where they could live more independently and gain employment in the community. Both Wilson House on the Mourne complex and Burren House in Belfast were very impressive facilities and provided excellent support to long-sentenced prisoners towards the end of their sentences.

Photograph 11



Kitchen on Wilson House

Photograph 12



External grounds on Mourne

- 5.12 As at our last inspection, we were impressed by the multidisciplinary case reviews supporting long-term prisoners. Probation Officers based in the PDU maintained good contact with this cohort and, once they had progressed to Burren, contact was weekly. A senior probation staff member had oversight of these prisoners as they left custody and for their first months in the community, which provided consistency and good outcomes in ongoing supervision.
- 5.13 By contrast, the support for short-term prisoners which had impressed us four years ago had been absent for a long period. During the inspection, prisoners serving sentences of less than one year accounted for almost a quarter of all sentenced prisoners. Their support from PDU co-ordinators had been seriously impacted by cross-deployment (see paragraph 5.9), and NIACRO had only recently resumed delivery of interventions to support these prisoners.
- 5.14 Prisoners who were in between these two groups had been equally affected by the lack of PDU co-ordinators. They did not always have a needs profile or a follow-up development profile generated for them, and they had very limited, if any, contact from the PDU from the point of their arrival to their release. However, if their time in custody was long enough, these prisoners could progress to the Mourne site.
- 5.15 The use of release on temporary licence to support rehabilitation was not as high as at our last inspection, but it had recommenced and was being used well. In the past 12 months, 146 prisoners had taken 456 accompanied or unaccompanied temporary release visits. These worked well and aided prisoner progression to Wilson and Burren Houses.
- 5.16 A home leave scheme previously available to help prisoners maintain and rebuild family links during their time in custody had been stalled during the COVID-19 pandemic. Prisoners could apply for all the days they would have been granted to be taken as a block period immediately before their custody expiry date. While this was positive, too few prisoners were approved for this early release.

### **Public protection**

- 5.17 PDU staff identified new arrivals subject to Public Protection Arrangements Northern Ireland (PPANI) and contributed to managing them thereafter. The processes to support public protection arrangements were effective.
- 5.18 Prisoners nearing release were routinely referred to the Local Area Public Protection Panel (LAPPP). Officers based in the PDU were responsible for writing the reports for pre-release LAPPP meetings. The reports we reviewed were good and provided promptly. The officers we met were passionate about their work but frustrated at being able to do little more than service the requests for these reports. Other routine tasks in their caseloads of around 60 each were not done on time or at all. Like other uniformed officers in the PDU, they were routinely cross-deployed to other duties.

- 5.19 Although high-risk prisoners were identified and there was communication with community agencies, little offending behaviour work was done with the many violent and sexual offenders who were released into the community without reducing their risks sufficiently.
- 5.20 There was no formal process to identify prisoners who required telephone and mail monitoring. Very few prisoners had been subject to offence-related telephone monitoring in the previous 12 months, with only one monitored at the time of the inspection.

### **Categorisation and transfers**

- 5.21 Of the sentenced population, 74 were category A, 70 category B, 366 category C and 17 category D. The security category of each prisoner was reviewed annually and, while review arrangements were generally appropriate, only 26% of the 49 re-categorisation reviews in the last 12 months were approved. At the time of the inspection there was a backlog of 52 reviews.
- 5.22 There were limited options for prisoners to progress between prisons in Northern Ireland. Some were moved from Maghaberry to Magilligan, which offered lower security conditions and additional rehabilitation opportunities. In the last 12 months, 507 prisoners had been transferred to Magilligan, although we were informed that these were mostly for population management rather than progression reasons.

## **INTERVENTIONS**

**Expected outcomes:** Prisoners are able to access interventions designed to promote successful rehabilitation.

- 5.23 In our survey, only 29% of prisoners said they had completed offending behaviour programmes at Maghaberry. The range of both accredited and non-accredited programmes completed had decreased considerably since our last inspection and some courses had only recently recommenced. At the time of our inspection, the accredited programmes delivered were Life Minus Violence and the Prison Fellowship Sycamore Tree victim awareness course, which had been reinstated in recent months. Other accredited programmes that had been cut or not yet recommenced included Resolve (addressing violence), Thinking Skills (cognitive behavioural programme), Building Better Relationships (addressing domestic violence) and an alcohol relationship programme.
- 5.24 The reduction in accredited programmes had greatly affected prisoners' ability to progress through their sentences. For example, of the 174 Parole Commissioner hearings heard in the last 12 months, only 22 were directed for release and 114 were rejected.

- 5.25 The psychology team continued to offer a good range of one-to-one interventions. In the previous 12 months, 31 individual interventions had been completed with prisoners, with a further 23 ongoing during our visit. Support was also offered to prisoners moving to the working-out unit at Burren House. As part of the pre-release testing scheme they were required to maintain an electronic diary, including daily entries and weekly check-ins. Psychology staff provided diary introduction sessions for prisoners needing this support.
- 5.26 Alongside the Families Matters course (see paragraph 5.2), NIACRO had recommenced its 'life story' programme with short-term prisoners. This provided a good foundation to an employability course (Working Well) run by through-the-gate services, which aimed to improve employability skills. In the last quarter, approximately 20 prisoners from the whole Northern Ireland prison estate had received employment through this scheme, with a further 62 completing skills-based training.
- 5.27 The Donard Centre provided some good therapeutic interventions. This was an impressive facility to help prisoners requiring additional support with a range of activities (see paragraphs 1.7, 2.9, 3.30, 4.3 and 4.18).
- 5.28 Other support for finance, benefit and debt matters was provided by Department for Communities staff who attended the prison weekly.

## RELEASE PLANNING

**Expected outcomes:** The specific reintegration needs of individual prisoners are met through an individual multi-agency plan to maximise the likelihood of successful reintegration into the community.

- 5.29 In our survey, only 22% of prisoners who expected to be released in the next three months said that someone was helping them to prepare for this. Maghaberry released an average of 219 prisoners a month and many were not subject to supervision in the community (approximately half the population were remanded and about 140 were serving a sentence of less than 12 months, where community supervision was not provided).
- 5.30 PDU staff were expected to prepare release plans 30 working days beforehand but, as with other elements of casework, these were not routinely completed due to the staffing shortages (see paragraph 5.9). However, pre-release case conferences for long-serving, high-risk prisoners, usually prepared by the Probation Board for Northern Ireland staff, were well attended, thorough and generally had clearly identified objectives.

5.31 Housing support for prisoners due for release was generally good. Housing Rights, a Northern Ireland registered charity, continued to offer advice and support on accommodation, tackling issues such as sustaining social tenancies and securing accommodation for release. We were told by leaders that most prisoners left the prison with a confirmed address or, at the very least, an appointment in the community to access emergency housing support. However, they did not maintain data of how many prisoners were released without confirmed accommodation, so the scale of homelessness was unknown.

# CHAPTER 6 PROGRESS ON RECOMMENDATIONS FROM THE LAST FULL INSPECTION REPORT

The following is a summary of the main findings from the last full inspection report and a list of all the recommendations made, organised under the four tests of a healthy prison.

## SAFETY

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2018, prisoners received good support on arrival and the prison seemed safer. Levels of violence had reduced and were now relatively low but, in our survey, many men still said they felt unsafe. Adjudications were well managed. Use of full control and restraint was low and de-escalation was the norm. Security arrangements were appropriate. Robust and effective action had been taken to reduce the supply of illegal drugs. Segregation had improved. Some men spent long periods in the Care and Supervision Unit, but more was being done to reintegrate them. Levels of self-harm had fallen but management arrangements were too risk averse and the underlying issues were not addressed adequately. The response to recommendations following enquiry into deaths in custody was insufficient. Outcomes for prisoners were not sufficiently good against this healthy prison test.

### Main recommendations

Men who are vulnerable to self-harm should be kept safe but should also receive individual recorded care which involves peer and family support as appropriate and seeks to address the underlying causes of the vulnerability.

✘ Not achieved

The monitoring of the death in custody action plan should be more robust to ensure that recommendations are embedded in operational practice.

✘ Not achieved

The poorer outcomes experienced by Catholic prisoners in key areas should be investigated thoroughly, prisoner groups should be consulted about the findings and, where necessary, remedial actions should be taken.

✘ Not achieved

## RESPECT

Prisoners are treated with respect for their human dignity.

At the last inspection, in in 2018, staff-prisoner relationships had improved and were now good. Living conditions were reasonable although the square houses offered poor cellular accommodation. The impending replacement of these houses was welcome. Consultation arrangements were developing and the management of complaints was good. Food and tuck shop provision were reasonably good. Equality and diversity had been re-focused and good support was given to the section 75 groups, particularly the most vulnerable men. Health care provision was reasonably good. Outcomes for prisoners were reasonably good against this healthy prison test.

### Main recommendations

The poor perceptions of men with disabilities, mental health conditions and those aged under 25 should be investigated and, where necessary, remedial action taken.

✔ **Achieved**

The prison should explore the continuing negative perceptions of Maghaberry held by many prisoners and groups there, and in particular, work to increase prisoner confidence in staff and important process like the complaints system.

✔ **Achieved**

Prisoners should receive timely and focused response to their health complaints.

✔ **Achieved**

Adverse incidents should be investigated and reviewed at an appropriate level and within agreed time scales to ensure that timely learning drives service development.

✔ **Achieved**

Prisoners should receive access to all health services in a timely fashion.

✘ **Not achieved**

The skills mix and roles of the primary health and mental health care multi-disciplinary teams should be improved and governance of the mental health function should be more rigorous.

✔ **Achieved**

Patients with mental health needs should receive stepped care within agreed pathways, and care plans should be regularly reviewed and overseen at effective multi-disciplinary team meetings.

✔ **Achieved**

The practice of supplying medicines which have been prescribed for direct administration in-possession should be reviewed to reduce the opportunity for bullying and diversion.

✔ **Achieved**

Prisoners should have timely access to opioid substitution treatment and a full range of clinical and psychosocial support which meets National Institute for Health and Care Excellence guidance and the needs of the population.

✘ **Not achieved**

## PURPOSEFUL ACTIVITY

Prisoners are able, and expected, to engage in activity that is likely to benefit them.

At the last inspection, in 2018, the regime was far more predictable than previously, and allowed a decent period out of cell for most men. The library was good but underused. Gym provision was very good. Learning, skills and work had improved since the last inspection. There remained important areas for further improvement. The revised core day had created a more conducive environment for training and learning, and leadership and management of the provision was good. However, there were not enough activity places and the curriculum was too narrow. Not all available places were being used and attendance needed improvement. There were very long waiting lists for the more popular courses. Most teaching was good and outcomes were reasonable for prisoners who attended. Outcomes for prisoners were not sufficiently good against this healthy prison test.

### Main recommendation

The quantity, level and range of activities should be developed so that all prisoners can be offered purposeful activity which meets their needs, enhances their prospects and prepares them for work in the community.

✘ **Not achieved**

## REHABILITATION AND RELEASE PLANNING

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

At the last inspection, in 2018, children and families work was strong. There was a clear understanding of the population and the very complex rehabilitation needs. Work with men with short sentences had improved and a very good range of support was offered.

Case management work and support for longer-term men was also very good, as were public protection arrangements. A comprehensive range of offending behaviour and other interventions were offered. Release planning was good and some excellent through-the-gate support was offered. Outcomes for prisoners were good against this healthy prison test.

### **Main recommendation**

The prison and NIPS should work with partners to evaluate outcomes for prisoners on release and the effectiveness of the pre-release support provided at Maghaberry.

**✘ Not achieved**

# APPENDIX 1 ABOUT OUR INSPECTIONS AND REPORTS

All prison inspection reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in HMI Prison's thematic review *Suicide is everyone's concern*, published in 1999. For men's prisons the tests are:

- **Safety:** Prisoners, particularly the most vulnerable, are held safely.
- **Respect:** Prisoners are treated with respect for their human dignity.
- **Purposeful activity:** Prisoners are able, and expected, to engage in activity that is likely to benefit them.
- **Rehabilitation and release planning:** Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgments: in some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the NIPS. They are:

- **Outcomes for prisoners are good:** There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- **Outcomes for prisoners are reasonably good:** There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **Outcomes for prisoners are not sufficiently good:** There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the wellbeing of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **Outcomes for prisoners are poor:** There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

Our assessments might result in identification of **areas of concern**. **Key concerns** identify the areas where there are significant weaknesses in the treatment of and conditions for prisoners. To be addressed they will require a change in practice and/or new or redirected resources. **Priority concerns** are those that Inspectors believe are the most urgent and important and which should be attended to immediately.

Key concerns and priority concerns are summarised at the beginning of inspection reports and the body of the report sets out the issues in more detail.

We also provide examples of **notable positive practice** in our reports. These list innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for prisoners; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.

Five key sources of evidence are used by Inspectors: observation; prisoner and staff surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Other than in exceptional circumstances, all prison inspections in Northern Ireland are unannounced and include a follow-up of recommendations from the previous inspection.

## This report

This report provides a summary of our inspection findings against Leadership and the four healthy prison tests. Each Chapter contains a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons* (Version 5, 2017) (available on the HMI Prisons website at <https://www.justiceinspectrates.gov.uk/hmiprisons/our-expectations/prison-expectations/>). The priority and key concerns identified during the inspection are listed under 'What needs to improve at Maghaberry Prison' on pages 6-7. Chapter 6 lists the recommendations from the previous full inspection and our assessment of whether they have been achieved.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found at Appendix IV. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

## APPENDIX II

# INSPECTION TEAM

This inspection was carried out by:

<b>Jacqui Durkin</b>	Chief Inspector, CJI
<b>Charlie Taylor</b>	Chief Inspector, HMIP
<b>Deborah Butler</b>	Team leader, HMIP
<b>Roisin Devlin</b>	Inspector, CJI
<b>Maureen Erne</b>	Inspector, CJI
<b>Ian Dickens</b>	Inspector, HMIP
<b>Martyn Griffiths</b>	Inspector, HMIP
<b>Lindsay Jones</b>	Inspector, HMIP
<b>Esra Sari</b>	Inspector HMIP
<b>Nadia Syed</b>	Inspector, HMIP
<b>Shaun Thomson</b>	Inspector, HMIP
<b>Rachel Duncan</b>	Researcher, HMIP
<b>Grace Edwards</b>	Researcher, HMIP
<b>Emma King</b>	Researcher, HMIP
<b>Sophie Riley</b>	Researcher, HMIP
<b>Joe Simmonds</b>	Researcher, HMIP
<b>Lynn Long</b>	Director, RQIA
<b>Wendy McGregor</b>	Assistant Director, RQIA
<b>Rhona Brennan</b>	Inspector, RQIA
<b>Helen Daly</b>	Inspector RQIA
<b>Naomi Kelly</b>	Inspector RQIA

<b>Dr Leanne Morgan</b>	Inspector, RQIA
<b>Kieran Murray</b>	Inspector, RQIA
<b>Nicola McCann</b>	Inspector, RQIA
<b>Kenny McKie</b>	Inspector, RQIA
<b>Paul Nixon</b>	Inspector, RQIA
<b>Lorraine O'Donnell</b>	Inspector, RQIA
<b>Katy Miskimmin</b>	Administrative support RQIA

A team of ETI Inspectors inspected and reported on education, skills and work provision.

# APPENDIX III PRISON POPULATION PROFILE AT 30 SEPTEMBER 2022

A population profile was requested from the prison as part of the information gathered during the inspection.

## MAGHABERRY PRISON PROFILE REPORT ON 30/09/2022

(1) Status	Male 21 and over		
Sentenced	418	39.18%	418
Recall	122	11.43%	122
Unsentenced	519	48.64%	519
Fines	4	0.37%	4
Detainees	4	0.37%	4
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(2a) Sentenced Group	Male 21 and over		
Adult Appellant	30	5.60%	30
Adult Determinate Cust Sent	215	40.11%	215
Adult Extended Cust Sent	54	10.07%	54
Adult Fine Defaulter	4	0.75%	4
Adult Indeterminate Cust Sent	18	3.36%	18
Adult Lifer	119	22.20%	119
Adult Sentenced	92	17.16%	92
Adult Secretary of State's Pleasure	3	0.56%	3
Young Offender Lifer	1	0.19%	1
<b>Total:</b>	<b>536</b>	<b>100%</b>	<b>536</b>

(2b) Sentenced Length	Male 21 and over		
Less than 6 months	64	11.94%	64
6 months to less than 12 months	60	11.19%	60
12 months to 2 years	64	11.94%	64
2 years to less than 4 years	84	15.67%	84
4 years to less than 10 years	71	13.25%	71
10 years and over (not Life)	63	11.75%	63
Life/Indeterminate	123	22.95%	123
Sentence not calculated	7	1.31%	7
<b>Total:</b>	<b>536</b>	<b>100%</b>	<b>536</b>

(3a) Length of Stay (Unsentenced)	Male 21 and over		
Less than 1 month	141	26.55%	141
1 month to 3 months	136	25.61%	136
3 months to 6 months	100	18.83%	100
6 months to 1 year	88	16.57%	88
1 year to 2 years	39	7.34%	39
2 years to 4 years	25	4.71%	25
4 years and over	2	0.38%	2
<b>Total:</b>	<b>531</b>	<b>100%</b>	<b>531</b>

(3b) Sex	Age	No of Inmates	%
Male	21 years to 29 years	288	26.99%
	30 years to 39 years	396	37.11%
	40 years to 49 years	205	19.21%
	50 years to 59 years	111	10.40%
	60 years to 69 years	47	4.40%
	70 plus years	20	1.87%
<b>Total:</b>		<b>1067</b>	<b>100%</b>

Youngest Prisoner:

21

Oldest Prisoner:

94

Average Age:

50

(4) Nationality			Male 21 and over
British	101	9.47%	101
British - England	27	2.53%	27
British - Scotland	7	0.66%	7
British - Wales	1	0.09%	1
Foreign National	132	12.37%	132
Irish	218	20.43%	218
Northern Irish	581	54.45%	581
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(5) Security Category			Male 21 and over
Cat A	74	6.94%	74
Cat B	69	6.47%	69
Cat C	354	33.18%	354
Cat D	48	4.50%	48
Cat U	521	48.83%	521
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(6) Ethnicity			Male 21 and over	
White	White	976	91.47%	976
Asian or Asian British	Pakistani	1	0.09%	1
Asian or Asian British	Bangladeshi	1	0.09%	1
Asian or Asian British	Chinese	8	0.75%	8
Black/African/ Caribbean/Black British	Black African	9	0.84%	9
Black/African/ Caribbean/Black British	Black Caribbean	2	0.19%	2
Black/African/ Caribbean/Black British	Black Other	8	0.75%	8
Mixed/Multiple Ethnic Groups	Mixed Ethnic Group	18	1.69%	18
Mixed/Multiple Ethnic Groups	Other Ethnic Group	9	0.84%	9
	Irish Traveller /Traveller	35	3.28%	35
<b>Total:</b>		<b>1067</b>	<b>100%</b>	<b>1067</b>

(7) Religion			Male 21 and over
Agnostic	5	0.47%	5
Atheist	9	0.84%	9
Baptist	7	0.66%	7
Brethren	2	0.19%	2
Buddhist	3	0.28%	3
Christian	48	4.50%	48
Christian (Presbyterian)	2	0.19%	2
Church of England	6	0.56%	6
Church of Ireland	71	6.65%	71
Church of Wales	1	0.09%	1
Druidism	1	0.09%	1
Elim	1	0.09%	1
Evangelical	1	0.09%	1
Free Presbyterian	45	4.22%	45
Jew	3	0.28%	3
Methodist	13	1.22%	13
Muslim	25	2.34%	25
Nil	93	8.72%	93
Orthodox	11	1.03%	11
Other	10	0.94%	10
Pentecostal	3	0.28%	3
Presbyterian	157	14.71%	157
Reformed Presbyterian	1	0.09%	1
Roman Catholic	549	51.45%	549
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(8) Length of Time in Custody (Sentenced Only)			Male 21 and over
Less than 1 month	53	9.89%	53
1 month to 3 months	83	15.49%	83
3 months to 6 months	83	15.49%	83
6 months to 1 year	73	13.62%	73
1 year to 2 years	65	12.13%	65
2 years to 4 years	57	10.63%	57
4 years and over	122	22.76%	122
<b>Total:</b>	<b>536</b>	<b>100%</b>	<b>536</b>

(9) Main Alleged Offence			Male 21 and over
Burglary/Robbery/Theft	133	12.46%	133
Criminal Damage	17	1.59%	17
Drug Offences	76	7.12%	76
Fraud & Forgery	4	0.37%	4
Motoring Offences	14	1.31%	14
Murder	156	14.62%	156
Non-Police Offences	4	0.37%	4
Not recorded on PRISM	1	0.09%	1
Offences Against the State	31	2.91%	31
Other Offences	85	7.97%	85
Other Offences Against the Person	372	34.86%	372
Sex Offences	174	16.31%	174
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(10) Home Address			Male 21 and over
0-20 Miles	201	18.84%	201
21-50 Miles	432	40.49%	432
Address Not Known	33	3.09%	33
Maghaberry Address	2	0.19%	2
Hydebank Wood Address	2	0.19%	2
No Fixed Abode	116	10.87%	116
Over 50 Miles	153	14.34%	153
Post Codes not in N. Ireland	128	12.00%	128
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

(11) Regime Breakdown			Male 21 and over
Basic	2	0.19%	2
Standard	565	52.95%	565
Enhanced	456	42.74%	456
Tier 2	33	3.09%	33
Enhanced YP	1	0.09%	1
Suspended Standard	10	0.94%	10
<b>Total:</b>	<b>1067</b>	<b>100%</b>	<b>1067</b>

## APPENDIX IV

# PRISONER SURVEY METHODOLOGY AND RESULTS

A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HMI Prisons researchers developed a self-completion questionnaire in September 2017 (revised in May 2021) to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release together with demographic and background questions which enables comparison of responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire, which allow prisoners to express in their own words what they find most positive and negative about the prison. Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by Inspectors.

### Sampling

On the day of the survey a random sample is drawn by HMI Prisons researchers from a prisoner population list ordered by cell location. Using a power calculation, HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment. The formula used in the calculation assumes a 75% response rate (65% in open establishments) and a 95% confidence interval with a 7% margin of error.

### Distributing and collecting questionnaires

HMI Prisons researchers distributed and collected the questionnaires in person. A cover sheet was included with the questionnaire which explained the purpose of the survey and that participation was voluntary. Assurances were given about confidentiality, anonymity and the storage and retention of the data. Prisoners were provided with a sealable envelope for their completed questionnaire and told when researchers would return to collect it. Due to social distancing measures researchers were not able to obtain verbal consent from prisoners and therefore returned and completed questionnaires were deemed as providing consent. The questionnaire was available in 14 languages.

### Survey responses

At the time of the survey on 20 September 2022 the prisoner population at Maghaberry Prison was 1,084. This comprised:

- 897 prisoners on the main site;
- 140 in the Mourne complex;

- 14 in Bush House (Landings 1 & 2);
- 18 in Roe House (Landings 3 & 4); and
- 15 in Burren House.

Using the sampling method described above, questionnaires were distributed to 398 prisoners. This comprised:

- 213 prisoners on the main site;
- 140 in the Mourne complex;
- 14 in Bush House (Landings 1 & 2);
- 18 in Roe House (Landings 3 & 4); and
- 13 in Burren House – questionnaires could not be distributed to two prisoners who were on home leave at the time of the survey.

We received a total of 334 completed questionnaires. This comprised:

- 176 prisoners on the main site, response rate of 83%;
- 112 in the Mourne complex, response rate of 80%;
- 11 in Bush House (Landings 1 & 2), response rate of 79%;
- no questionnaires were returned from Roe House (Landings 3 & 4); and
- seven in Burren House, response rate of 54%.

## PRISONER SURVEY RESULTS AND ANALYSES

Over the following pages we present the full survey results followed by numerous comparative analyses for Maghaberry Prison. For the comparator analyses, where relevant, each question was reformulated using the Chi-square test (or Fisher's exact test if there are fewer than five expected counts in a cell) into a binary 'yes/no' format and affirmative responses compared. Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

### Full survey results

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%. Full survey results were provided to Inspectors for:

- The main site;
- The Mourne complex;
- Bush House (Landings 1 & 2); and
- Burren House.

### Responses from Maghaberry Prison (main site) compared with those from other HMI Prisons surveys

- Survey responses from the main site at Maghaberry Prison in 2022 compared with survey responses from other local prisons in England and Wales inspected since May 2021; and
- survey responses from the main site at Maghaberry Prison in 2022 compared with survey responses from the main site in 2018.

### Comparisons between different residential locations within Maghaberry Prison (main site) 2022

- Responses of prisoners in Bann House (committal unit) compared with those from the rest of the establishment (excluding those in Burren House and Bush 1 & 2 and Roe 3 & 4 landings);
- responses of prisoners in Quoile and Shimna Houses (vulnerable due to the nature of their index offending) compared with those from the rest of the establishment (excluding those in Burren House and Bush 1 & 2 and Roe 3 & 4 landings); and
- responses of prisoners on the main prison site compared with those in the Mourne complex (excluding those in Burren House and Bush 1 & 2 and Roe 3 & 4 landings).

### Comparisons between self-reported sub-populations of prisoners within Maghaberry Prison 2022

These analyses are carried out on summary data from selected survey questions only.

- Responses of Protestant prisoners are compared with those of Catholic prisoners;
- responses of prisoners aged 25 and under compared with those aged over 25;
- responses of prisoners aged 50 and over compared with those aged under 50;
- responses of foreign national prisoners compared with those of UK/British nationals;
- responses of prisoners who reported that they had a disability compared to those who did not;
- responses of prisoners who reported that they had mental health problems compared with those who did not; and
- responses of prisoners who reported that they had been in social services authority care compared with those who did not.

### Responses from Maghaberry Prison (Mourne) compared with those from other HMI Prisons surveys

- Survey responses from the Mourne complex at Maghaberry Prison in 2022 compared with survey responses from other category C trainer prisons in England and Wales inspected since May 2021; and
- survey responses from the Mourne complex at Maghaberry Prison in 2022 compared with survey responses from the Mourne complex in 2018.

## Comparisons between self-reported sub-populations of prisoners within Maghaberry Prison (Mourne)

These analyses are carried out on summary data from selected survey questions only.

- Responses of Protestant prisoners are compared with those of Catholic prisoners;
- responses of prisoners aged 25 and under compared with those aged over 25;
- responses of prisoners aged 50 and over compared with those aged under 50;
- responses of foreign national prisoners compared with those of UK/British nationals;
- responses of prisoners who reported that they had a disability compared to those who did not;
- responses of prisoners who reported that they had mental health problems compared with those who did not; and
- responses of prisoners who reported that they had been in social services authority care compared with those who did not.

Please note that we only carry out within-prison comparator analysis where there is a minimum of 10 responses in each comparison group.

In the comparator analyses, statistically significant differences are indicated by shading. The probability threshold (i.e. p-value) is set at 0.01 which means that there is a 1% likelihood the statistically significant difference between the two groups is due to chance. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

## MAGHABERRY MAIN FULL SURVEY RESULTS

### Background information

#### 1.1 What wing or houseblock are you currently living on?

Bann house	25 (14%)
Bush house (3 & 4)	15 (9%)
Roe house (1 & 2)	16 (9%)
Davis house	81 (46%)
Quoile house	25 (14%)
Shimna house	8 (5%)
Segregation unit	3 (2%)
Health care unit	3 (2%)

#### 1.2 How old are you?

Under 21	0 (0%)
21 - 25	31 (18%)
26 - 29	23 (13%)
30 - 39	69 (39%)
40 - 49	27 (15%)
50 - 59	15 (9%)
60 - 69	6 (3%)
70 or over	5 (3%)

#### 1.3 What is your ethnic group?

White - English/Welsh/Scottish/Northern Irish/British	75 (43%)
White - Irish	73 (42%)
White - Gypsy or Irish Traveller	5 (3%)
White - Roma	0 (0%)
White - any other White background	11 (6%)
Mixed - White and Black Caribbean	0 (0%)
Mixed - White and Black African	0 (0%)
Mixed - White and Asian	0 (0%)
Mixed - any other Mixed ethnic background	0 (0%)
Asian/Asian British - Indian	0 (0%)
Asian/Asian British - Pakistani	0 (0%)
Asian/Asian British - Bangladeshi	0 (0%)
Asian/Asian British - Chinese	1 (1%)
Asian - any other Asian background	1 (1%)
Black/Black British - Caribbean	0 (0%)
Black/Black British - African	2 (1%)
Black - any other Black background	0 (0%)
Arab	1 (1%)
Any other ethnic group	4 (2%)

#### 1.4 How long have you been in this prison?

Less than 6 months	90 (53%)
6 months or more	80 (47%)

#### 1.5 Are you currently serving a sentence?

Yes	59 (35%)
Yes - on recall	9 (5%)
No - on remand or awaiting sentence	100 (59%)
No - immigration detainee	1 (1%)

#### 1.6 How long is your sentence?

Less than 6 months	9 (5%)
6 months to less than 1 year	10 (6%)
1 year to less than 4 years	15 (9%)
4 years to less than 10 years	19 (12%)
10 years or more	3 (2%)
ICS (indeterminate custodial sentence for public protection)	1 (1%)
Life	7 (4%)
Not currently serving a sentence	101 (61%)

### Arrival and reception

#### 2.1 Were you given helpful information about this prison before you came here?

Yes	27 (16%)
No	127 (75%)
Don't remember	16 (9%)

#### 2.2 When you arrived at this prison, how long did you spend in reception?

Less than 2 hours	59 (35%)
2 hours or more	91 (54%)
Don't remember	19 (11%)

#### 2.3 When you were searched in reception, was this done in a respectful way?

Yes	118 (70%)
No	41 (24%)
Don't remember	10 (6%)

#### 2.4 Overall, how were you treated in reception?

Very well	43 (26%)
Quite well	72 (43%)
Quite badly	25 (15%)
Very badly	12 (7%)
Don't remember	14 (8%)

## 2.5 When you first arrived here, did you have any of the following problems?

Problems getting phone numbers	78 (46%)
Contacting family	86 (51%)
Arranging care for children or other dependants	12 (7%)
Contacting employers	10 (6%)
Money worries	68 (40%)
Housing worries	54 (32%)
Feeling depressed	100 (60%)
Feeling suicidal	47 (28%)
Other mental health problems	76 (45%)
Physical health problems	44 (26%)
Drug or alcohol problems (e.g. withdrawal)	69 (41%)
Problems getting medication	64 (38%)
Needing protection from other prisoners	16 (10%)
Lost or delayed property	29 (17%)
Other problems	22 (13%)
Didn't have any problems	15 (9%)

## 2.6 Did staff help you to deal with these problems when you first arrived?

Yes	39 (24%)
No	110 (67%)
Didn't have any problems when I first arrived	15 (9%)

## First night and induction

### 3.1 Before you were locked up on your first night here, were you offered any of the following things?

Nicotine replacement	51 (31%)
Toiletries/other basic items	81 (49%)
A shower	58 (35%)
A free phone call	72 (44%)
Something to eat	118 (72%)
The chance to see someone from health care	69 (42%)
The chance to talk to a Listener or Samaritans	18 (11%)
Support from another prisoner (e.g. peer mentor)	12 (7%)
Wasn't offered any of these things	17 (10%)

### 3.2 On your first night in this prison, how clean or dirty was your cell?

Very clean	4 (2%)
Quite clean	25 (15%)
Quite dirty	41 (24%)
Very dirty	97 (56%)
Don't remember	5 (3%)

### 3.3 Did you feel safe on your first night here?

Yes	95 (58%)
No	57 (35%)
Don't remember	13 (8%)

### 3.4 In your first few days here, did you get:

	Yes	No	Don't remember
Access to the prison tuck shop?	125 (73%)	42 (24%)	5 (3%)
Free PIN phone credit?	102 (62%)	58 (35%)	4 (2%)
Numbers put on your PIN phone within 24 hours?	38 (24%)	110 (68%)	13 (8%)

### 3.5 Did your induction cover everything you needed to know about this prison?

Yes	51 (30%)
No	84 (49%)
Haven't had an induction	35 (21%)

## On the wing

### 4.1 Are you in a cell on your own?

Yes	97 (56%)
No, I'm in a shared cell or dormitory	76 (44%)

### 4.2 Is your cell call bell normally answered within 5 minutes?

Yes	69 (41%)
No	71 (42%)
Don't know	27 (16%)
Don't have a cell call bell	3 (2%)

### 4.3 Please answer the following questions about the wing or houseblock you are currently living on:

	Yes	No	Don't know
Do you have enough soap or sanitiser to keep your hands clean?	117 (67%)	54 (31%)	3 (2%)
Do you normally have enough clean, suitable clothes for the week?	129 (76%)	40 (24%)	1 (1%)
Can you shower every day?	120 (70%)	50 (29%)	2 (1%)
Do you have clean sheets every week?	116 (69%)	44 (26%)	7 (4%)
Do you get cell cleaning materials every week?	95 (58%)	64 (39%)	5 (3%)
Is it normally quiet enough for you to relax or sleep at night?	94 (55%)	73 (42%)	5 (3%)
Can you get your stored property promptly, if you need it?	40 (24%)	83 (50%)	43 (26%)

#### 4.4 Normally, how clean or dirty are the communal/shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?

Very clean	46 (28%)
Quite clean	78 (47%)
Quite dirty	25 (15%)
Very dirty	18 (11%)

### Food and tuck shop

#### 5.1 What is the quality of food like in this prison?

Very good	15 (9%)
Quite good	58 (35%)
Quite bad	51 (31%)
Very bad	43 (26%)

#### 5.2 Do you get enough to eat at mealtimes?

Always	32 (18%)
Most of the time	48 (28%)
Some of the time	66 (38%)
Never	27 (16%)

#### 5.3 Does the tuck shop sell the things that you need?

Yes	113 (66%)
No	54 (32%)
Don't know	4 (2%)

### Relationships with staff

#### 6.1 Do most staff here treat you with respect?

Yes	109 (64%)
No	60 (36%)

#### 6.2 Are there any staff here you could turn to if you had a problem?

Yes	91 (54%)
No	76 (46%)

#### 6.3 In the last week, has any member of staff talked to you about how you are getting on?

Yes	42 (25%)
No	124 (75%)

#### 6.4 How helpful is your personal or named officer?

Very helpful	22 (13%)
Quite helpful	22 (13%)
Not very helpful	20 (12%)
Not at all helpful	16 (10%)
Don't have a personal or named officer	87 (52%)

#### 6.5 Do you feel that you are treated as an individual in this prison?

Yes	74 (47%)
No	85 (53%)

#### 6.6 Are prisoners here consulted about things like food, tuck shop, health care or wing issues?

Yes, and things sometimes change	31 (19%)
Yes, but things don't change	44 (27%)
No	63 (39%)
Don't know	25 (15%)

#### 6.7 If you wanted to, can you talk to managers, governors or directors in this prison?

Yes	60 (36%)
No	66 (40%)
Don't know	41 (25%)

#### 6.8 If you have shared a problem with a manager, governor or director, did they try to help you?

Yes	41 (25%)
No	47 (29%)
Haven't shared a problem	76 (46%)

## Faith

#### 7.1 What is your religion?

No religion	17 (10%)
Catholic	92 (53%)
Protestant	52 (30%)
Other Christian denomination	10 (6%)
Buddhism	0 (0%)
Hinduism	0 (0%)
Judaism	0 (0%)
Islam	1 (1%)
Sikhism	0 (0%)
Other	0 (0%)

## 7.2 Are your religious beliefs respected here?

Yes	72 (44%)
No	37 (22%)
Don't know	39 (24%)
Not applicable (no religion)	17 (10%)

## 7.3 Are you able to speak to a chaplain of your faith in private, if you want to?

Yes	111 (65%)
No	17 (10%)
Don't know	26 (15%)
Not applicable (no religion)	17 (10%)

## 7.4 Are you able to attend religious services, if you want to?

Yes	114 (68%)
No	15 (9%)
Don't know	22 (13%)
Not applicable (no religion)	17 (10%)

## Contact with family and friends

### 8.1 How often have you been able to see your family and friends in the last month:

	Every week	Two or three times	Once	Not at all
In person (prison visit)?	18 (11%)	13 (8%)	60 (38%)	67 (42%)
Using video calling?	42 (34%)	16 (13%)	9 (7%)	57 (46%)

### 8.2 Do visits usually start and finish on time?

Yes	48 (29%)
No	79 (47%)
Don't know	41 (24%)

### 8.3 Are your visitors usually treated respectfully by staff?

Yes	71 (43%)
No	31 (19%)
Don't know	63 (38%)

### 8.4 How easy or difficult is it for your family and friends to get here?

Very easy	12 (7%)
Quite easy	21 (13%)
Quite difficult	50 (31%)
Very difficult	58 (36%)
Don't know	22 (13%)

### 8.5 Have staff here encouraged you to keep in touch with your family/friends?

Yes	36 (22%)
No	128 (78%)

### 8.6 Have you had any problems with sending or receiving:

	Yes	No
Emails?	46 (41%)	66 (59%)
Letters?	90 (63%)	54 (38%)
Parcels?	45 (43%)	59 (57%)

### 8.7 Are you able to use a phone every day (if you have credit)?

Yes	134 (82%)
No	30 (18%)

## Time out of cell

### 9.1 Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?

Yes, and these times are usually kept to	60 (36%)
Yes, but these times are not usually kept to	87 (52%)
No	19 (11%)

### 9.2 How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?

Less than 2 hours	85 (50%)
2 to 6 hours	40 (24%)
6 to 10 hours	22 (13%)
10 hours or more	7 (4%)
Don't know	15 (9%)

### 9.3 How long do you usually spend out of your cell on a typical Saturday or Sunday?

Less than 2 hours	108 (63%)
2 to 6 hours	40 (23%)
6 to 10 hours	8 (5%)
10 hours or more	4 (2%)
Don't know	11 (6%)

### 9.4 How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?

None	5 (3%)
1 or 2	24 (14%)
3 to 5	50 (30%)
More than 5	77 (46%)
Don't know	12 (7%)

### 9.5 How many days in a typical week do you get association, if you want it?

None	14 (8%)
1 or 2	25 (15%)
3 to 5	40 (24%)
More than 5	65 (39%)
Don't know	23 (14%)

### 9.6 How many days in a typical week could you go outside for exercise, if you wanted to?

None	11 (7%)
1 or 2	18 (11%)
3 to 5	31 (18%)
More than 5	97 (57%)
Don't know	12 (7%)

### 9.7 Typically, how often do you go to the gym or play sports?

Twice a week or more	50 (30%)
About once a week	49 (29%)
Less than once a week	25 (15%)
Never	45 (27%)

### 9.8 Typically, how often are you able to:

	Twice a week or more	About once a week	Less than once a week	Never
Visit the library	3 (2%)	32 (20%)	29 (18%)	98 (60%)
Have library materials delivered to you	2 (1%)	14 (10%)	17 (12%)	113 (77%)

### 9.9 Does the library have a wide enough range of materials to meet your needs?

Yes	35 (22%)
No	34 (22%)
Don't use the library	88 (56%)

## Requests, complaints and legal rights

### 10.1 Is it easy for you to make a request?

Yes	122 (73%)
No	33 (20%)
Don't know	11 (7%)

### 10.2 If you have made any requests here, please answer the questions below:

	Yes	No	Not made any requests
Are requests usually dealt with fairly?	89 (57%)	55 (35%)	12 (8%)
Are requests usually dealt with within 7 days?	91 (65%)	37 (26%)	12 (9%)

### 10.3 Is it easy for you to make a complaint?

Yes	117 (71%)
No	21 (13%)
Don't know	27 (16%)

### 10.4 If you have made any complaints here, please answer the questions below:

	Yes	No	Not made any complaints
Are complaints usually dealt with fairly?	37 (24%)	58 (37%)	60 (39%)
Are complaints usually dealt with within 7 days?	62 (42%)	26 (18%)	60 (41%)

### 10.5 Have you ever been prevented from making a complaint here when you wanted to?

Yes	42 (26%)
No	74 (47%)
Not wanted to make a complaint	43 (27%)

### 10.6 In this prison, is it easy or difficult for you to...

	Easy	Difficult	Don't know	Don't need this
Communicate with your solicitor or legal representative?	90 (56%)	56 (35%)	12 (7%)	4 (2%)
Attend legal visits?	84 (56%)	43 (29%)	15 (10%)	7 (5%)

### 10.7 Have staff here ever opened letters from your solicitor or legal representative when you were not present?

Yes	60 (36%)
No	57 (34%)
Not had any legal letters	51 (30%)

## Health care

### 11.1 If there are currently restrictions in place due to the COVID-19 pandemic:

	Yes	No	Not applicable
Do you know what the restrictions are here?	56 (36%)	62 (40%)	38 (24%)
Have the reasons for the restrictions been explained to you?	40 (26%)	13 (8%)	100 (65%)
Do you agree the restrictions are necessary?	36 (24%)	16 (11%)	100 (66%)
Do you feel you have been kept safe from the virus?	54 (36%)	66 (43%)	32 (21%)

### 11.2 How easy or difficult is it to see the following people?

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	8 (5%)	10 (6%)	40 (24%)	98 (58%)	12 (7%)
Nurse	22 (13%)	54 (33%)	47 (28%)	30 (18%)	12 (7%)
Dentist	5 (3%)	9 (6%)	39 (25%)	82 (52%)	24 (15%)
Pharmacist	22 (14%)	36 (24%)	31 (20%)	33 (22%)	30 (20%)
Mental health worker	9 (6%)	18 (11%)	28 (18%)	72 (45%)	32 (20%)
Substance misuse worker	6 (4%)	17 (11%)	25 (16%)	57 (37%)	51 (33%)

### 11.3 What do you think of the quality of the health service from the following people?

	Very good	Quite good	Quite bad	Very bad	Don't know
Doctor	17 (10%)	20 (12%)	37 (22%)	55 (33%)	36 (22%)
Nurse	32 (19%)	63 (38%)	7 (16%)	25 (15%)	18 (11%)
Dentist	18 (12%)	30 (19%)	21 (14%)	36 (23%)	50 (32%)
Pharmacist	32 (21%)	40 (26%)	23 (15%)	14 (9%)	43 (28%)
Mental health worker	18 (12%)	20 (13%)	26 (17%)	40 (26%)	51 (33%)
Substance misuse worker	10 (7%)	21 (14%)	14 (9%)	37 (25%)	68 (45%)

### 11.4 What do you think of the overall quality of the health services here?

Very good	16 (10%)
Quite good	39 (24%)
Quite bad	43 (26%)
Very bad	55 (33%)
Don't know	12 (7%)

### 11.5 Do you have any mental health problems?

Yes	126 (77%)
No	38 (23%)

### 11.6 Has your mental health got better or worse since arriving at this prison?

Better	19 (12%)
Worse	102 (63%)
No difference	41 (25%)

### 11.7 Have you been helped with your mental health in this prison?

Yes	32 (20%)
No	105 (66%)
Haven't needed any help with mental health	23 (14%)

## Other support needs

<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>	
	Yes	98 (60%)
	No	64 (40%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes	22 (14%)
	No	71 (45%)
	Don't have a disability	64 (41%)
<b>12.3</b>	<b>Have you been on a SPAR (Supporting Prisoners at Risk) in this prison?</b>	
	Yes	50 (31%)
	No	111 (69%)
<b>12.4</b>	<b>If you have been on a SPAR (Supporting Prisoners at Risk) in this prison, did you feel cared for by staff?</b>	
	Yes	18 (11%)
	No	31 (19%)
	Haven't been on an SPAR in this prison	111 (69%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>	
	Very easy	21 (13%)
	Quite easy	28 (17%)
	Quite difficult	10 (6%)
	Very difficult	21 (13%)
	Don't know	76 (46%)
	No Listeners at this prison	8 (5%)

## Alcohol and drugs

<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes	48 (29%)
	No	120 (71%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes	11 (7%)
	No	36 (22%)
	Didn't/don't have an alcohol problem	120 (72%)
<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes	87 (52%)
	No	81 (48%)

<b>13.4 Have you developed a problem with illicit drugs since you have been in this prison?</b>	
Yes	46 (28%)
No	118 (72%)

<b>13.5 Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
Yes	44 (27%)
No	118 (73%)

<b>13.6 Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
Yes	18 (11%)
No	69 (42%)
Didn't/don't have a drug problem	76 (47%)

<b>13.7 Is it easy or difficult to get illicit drugs in this prison?</b>	
Very easy	39 (24%)
Quite easy	27 (17%)
Quite difficult	9 (6%)
Very difficult	10 (6%)
Don't know	77 (48%)

<b>13.8 Is it easy or difficult to get alcohol in this prison?</b>	
Very easy	5 (3%)
Quite easy	9 (6%)
Quite difficult	15 (9%)
Very difficult	40 (25%)
Don't know	92 (57%)

<b>13.9 Is it easy or difficult to get tobacco in this prison?</b>	
Very easy	93 (57%)
Quite easy	35 (22%)
Quite difficult	10 (6%)
Very difficult	4 (2%)
Don't know	20 (12%)

## Safety

<b>14.1 Have you ever felt unsafe here?</b>	
Yes	81 (49%)
No	83 (51%)

#### 14.2 Do you feel unsafe now?

Yes	35 (21%)
No	128 (79%)

#### 14.3 Have you experienced any of the following types of bullying/victimisation from other prisoners here?

Verbal abuse	48 (31%)
Threats or intimidation	44 (29%)
Physical assault	26 (17%)
Sexual assault	7 (5%)
Theft of tuck or property	26 (17%)
Other bullying/victimisation	28 (18%)
Not experienced any of these from prisoners here	98 (64%)

#### 14.4 If you were being bullied/victimised by other prisoners here, would you report it?

Yes	42 (27%)
No	113 (73%)

#### 14.5 Have you experienced any of the following types of bullying/victimisation from staff here?

Verbal abuse	58 (38%)
Threats or intimidation	44 (29%)
Physical assault	29 (19%)
Sexual assault	7 (5%)
Theft of tuck or property	19 (12%)
Other bullying/victimisation	38 (25%)
Not experienced any of these from staff here	85 (55%)

#### 14.6 If you were being bullied/victimised by staff here, would you report it?

Yes	63 (42%)
No	87 (58%)

### Behaviour management (Progressive Regimes and Earned Privileges Scheme or PREPS)

#### 15.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?

Yes	73 (45%)
No	50 (31%)
Don't know what the incentives/rewards are	39 (24%)

**15.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. PREPS) in this prison?**

Yes	58 (36%)
No	50 (31%)
Don't know	23 (14%)
Don't know what this is	29 (18%)

**15.3 Have you been physically restrained by staff in this prison in the last 6 months?**

Yes	27 (16%)
No	139 (84%)

**15.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**

Yes	4 (2%)
No	20 (12%)
Don't remember	2 (1%)
Not been restrained here in last 6 months	139 (84%)

**15.5 Have you spent one or more nights in the care and supervision unit in this prison in the last 6 months?**

Yes	28 (17%)
No	133 (83%)

**15.6 If you have spent one or more nights in the care and supervision unit in this prison in the last 6 months please answer the questions below:**

	Yes	No
Were you treated well by segregation staff?	9 (33%)	18 (67%)
Could you shower every day?	11 (39%)	17 (61%)
Could you go outside for exercise every day?	15 (54%)	13 (46%)
Could you use the phone every day (if you had credit)?	12 (44%)	15 (56%)

**Education, skills and work**

**16.1 Is it easy or difficult to get into the following activities in this prison?**

	Easy	Difficult	Don't know	Not available here
Education	47 (31%)	68 (45%)	31 (21%)	5 (3%)
Vocational or skills training	28 (20%)	64 (45%)	45 (32%)	5 (4%)
Prison job	29 (20%)	89 (61%)	26 (18%)	3 (2%)
Voluntary work outside of the prison	7 (5%)	47 (33%)	52 (37%)	36 (25%)
Paid work outside of the prison	4 (3%)	47 (33%)	52 (37%)	39 (27%)

**16.2 If you have done any of these activities while in this prison, do you think they will help you on release?**

	Yes, will help	No, won't help	Not done this
Education	64 (44%)	28 (19%)	52 (36%)
Vocational or skills training	46 (34%)	20 (15%)	69 (51%)
Prison job	50 (35%)	37 (26%)	54 (38%)
Voluntary work outside of the prison	35 (26%)	18 (13%)	83 (61%)
Paid work outside of the prison	33 (24%)	18 (13%)	84 (62%)

**16.3 Do staff encourage you to attend education, training or work?**

Yes	48 (30%)
No	93 (58%)
Not applicable (e.g. if you are retired, sick or on remand)	18 (11%)

**Planning and progression**

**17.1 Do you have a custody plan? (This may be called a prisoner development plan or PDP)**

Yes	28 (18%)
No	132 (83%)

**17.2 Do you understand what you need to do to achieve the objectives or targets in your prisoner development plan?**

Yes	21 (75%)
No	2 (7%)
Don't know what my objectives or targets are	5 (18%)

**17.3 Are staff here supporting you to achieve your objectives or targets?**

Yes	14 (52%)
No	8 (30%)
Don't know what my objectives or targets are	5 (19%)

**17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?**

	Yes, this helped	No, this didn't help	Not done/ don't know
Offending behaviour programmes	7 (29%)	0 (0%)	17 (71%)
Other programmes	12 (50%)	0 (0%)	12 (50%)
One-to-one work (e.g. with a personal development coordinator or psychologist)	4 (17%)	0 (0%)	19 (83%)
Been on a specialist unit	1 (5%)	0 (0%)	20 (95%)
Temporary release (day or overnight release)	4 (18%)	0 (0%)	18 (82%)

## Preparation for release

### 18.1 Do you expect to be released in the next 3 months?

Yes	47 (28%)
No	72 (44%)
Don't know	46 (28%)

### 18.2 How close is this prison to your home area or intended release address?

Very near	2 (4%)
Quite near	8 (17%)
Quite far	25 (54%)
Very far	11 (24%)

### 18.3 Is anybody helping you to prepare for your release (e.g. a home probation officer, PDU Officer/staff member, PDP Coordinator)?

Yes	10 (22%)
No	36 (78%)

### 18.4 Are you getting help to sort out the following things for when you are released?

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	2 (5%)	23 (56%)	16 (39%)
Getting employment	1 (3%)	18 (46%)	20 (51%)
Setting up education or training	2 (5%)	18 (45%)	20 (50%)
Arranging benefits	1 (2%)	26 (63%)	14 (34%)
Sorting out finances	1 (3%)	17 (47%)	18 (50%)
Support for drug or alcohol problems	2 (5%)	22 (55%)	16 (40%)
Physical/mental health support	2 (5%)	26 (67%)	11 (28%)
Social care support	0 (0%)	20 (57%)	15 (43%)
Getting back in touch with family or friends	1 (3%)	14 (36%)	24 (62%)

## More about you

### 19.1 Do you have children under the age of 18?

Yes	87 (52%)
No	79 (48%)

### 19.2 Are you a UK/British citizen? (i.e. eligible to hold a British passport)

Yes	120 (74%)
No	42 (26%)

### 19.3 Have you ever been in Social Services care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?

Yes	45 (27%)
No	121 (73%)

**19.4 Have you ever been in the armed services (e.g. army, navy, air force)?**

Yes	14 (8%)
No	151 (92%)

**19.5 What is your gender?**

Male	165 (99%)
Female	0 (0%)
Non-binary	0 (0%)
Other	1 (1%)

**19.6 How would you describe your sexual orientation?**

Straight/heterosexual	154 (96%)
Gay/lesbian/homosexual	2 (1%)
Bisexual	4 (2%)
Other	1 (1%)

**19.7 Do you identify as transgender or transsexual?**

Yes	2 (1%)
No	158 (99%)

**Final questions about this prison**

**20.1 Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing)?**

All the time	23 (14%)
Most of the time	43 (27%)
Some of the time	63 (40%)
Never	30 (19%)

**20.2 Do you think your experiences in this prison have made you more or less likely to offend in the future?**

More likely to offend	23 (14%)
Less likely to offend	87 (55%)
Made no difference	49 (31%)

## SURVEY RESPONSES COMPARED WITH THOSE FROM THE PREVIOUS SURVEY

In this table summary statistics from Maghaberry Prison (main site) are compared with the following HMIP survey data:

- Summary statistics from Maghaberry Prison (main site) in 2018.

Please note that we do not have comparable data for the new questions introduced in May 2021.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION				
1.2	Are you under 21 years of age?	n=176	0%	1%
	Are you 25 years of age or younger?	n=176	18%	22%
	Are you 50 years of age or older?	n=176	15%	8%
	Are you 70 years of age or older?	n=176	3%	2%
1.3	Are you from an ethnic group other than white?	n=173	5%	7%
	Are you from a white Gypsy or Irish Traveller or Roma ethnic group?	n=173	3%	
1.4	Have you been in this prison for less than 6 months?	n=170	53%	53%
1.5	Are you currently serving a sentence?	n=169	40%	55%
	Are you on recall?	n=169	5%	7%
1.6	Is your sentence less than 12 months?	n=165	12%	18%
	Are you here under an indeterminate custodial sentence for public protection (ICS prisoner)?	n=165	1%	1%
7.1	Are you a Catholic?	n=172	54%	50%
7.1	Are you a Protestant?	n=172	30%	31%
11.5	Do you have any mental health problems?	n=164	77%	66%
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=162	61%	58%
19.1	Do you have children under the age of 18?	n=166	52%	61%
19.2	Are you a foreign national?	n=162	26%	23%
19.3	Have you ever been in Local Authority Care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?	n=166	27%	
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	n=165	9%	4%
19.5	Is your gender male/female [delete as appropriate], non-binary or other?	n=166	1%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	n=161	4%	4%
19.7	Do you identify as transgender or transsexual?	n=160	1%	4%

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ARRIVAL AND RECEPTION				
2.1	Were you given helpful information about this prison before you came here?	n=170	16%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	n=169	35%	33%
2.3	When you were searched in reception, was this done in a respectful way?	n=169	70%	59%
2.4	Overall, were you treated very/quite well in reception?	n=166	69%	62%
2.5	When you first arrived, did you have any problems?	n=168	91%	83%
	Did you have problems with:			
	Getting phone numbers?	n=168	46%	39%
	Contacting family?	n=168	51%	35%
	Arranging care for children or other dependents?	n=168	7%	5%
	Contacting employers?	n=168	6%	7%
	Money worries?	n=168	41%	35%
	Housing worries?	n=168	32%	25%
	Feeling depressed?	n=168	60%	52%
	Feeling suicidal?	n=168	28%	19%
	Other mental health problems?	n=168	45%	39%
	Physical health problems?	n=168	26%	26%
	Drug or alcohol problems (e.g. withdrawal)?	n=168	41%	40%
	Getting medication?	n=168	38%	46%
	Needing protection from other prisoners?	n=168	10%	8%
	Lost or delayed property?	n=168	17%	26%
	Other problems?	n=168	13%	19%
	<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	n=149	26%	25%

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<b>FIRST NIGHT AND INDUCTION</b>				
3.1	Before you were locked up on your first night here, were you offered:			
	Nicotine replacement?	n=165	<b>31%</b>	<b>63%</b>
	Toiletries/other basic items?	n=165	<b>49%</b>	<b>46%</b>
	A shower?	n=165	<b>35%</b>	<b>54%</b>
	A free phone call?	n=165	<b>44%</b>	<b>59%</b>
	Something to eat?	n=165	<b>72%</b>	<b>68%</b>
	The chance to see someone from health care?	n=165	<b>42%</b>	<b>45%</b>
	The chance to talk to a Listener or Samaritans?	n=165	<b>11%</b>	<b>13%</b>
	Support from another prisoner (e.g. peer mentor)?	n=165	<b>7%</b>	<b>15%</b>
	None of these?	n=165	<b>10%</b>	<b>7%</b>
3.2	On your first night in this prison, was your cell very/quite clean?	n=172	<b>17%</b>	<b>17%</b>
3.3	Did you feel safe on your first night here?	n=165	<b>58%</b>	<b>52%</b>
3.4	In your first few days here, did you get:			
	Access to the prison tuck shop?	n=172	<b>73%</b>	<b>62%</b>
	Free PIN phone credit?	n=164	<b>62%</b>	<b>67%</b>
	Numbers put on your PIN phone within 24 hours?	n=161	<b>24%</b>	
3.5	Have you had an induction at this prison?	n=170	<b>79%</b>	<b>86%</b>
	<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	n=135	<b>38%</b>	<b>41%</b>
<b>ON THE WING</b>				
4.1	Are you in a cell on your own?	n=173	<b>56%</b>	<b>44%</b>
4.2	Is your cell call bell normally answered within 5 minutes?	n=170	<b>41%</b>	<b>31%</b>
4.3	On the wing or houseblock you are currently living on:			
	Do you have enough soap or sanitiser to keep your hands clean?	n=174	<b>67%</b>	
	Do you normally have enough clean, suitable clothes for the week?	n=170	<b>76%</b>	<b>73%</b>
	Can you shower every day?	n=172	<b>70%</b>	<b>52%</b>
	Do you have clean sheets every week?	n=167	<b>70%</b>	<b>78%</b>
	Do you get cell cleaning materials every week?	n=164	<b>58%</b>	<b>49%</b>
	Is it normally quiet enough for you to relax or sleep at night?	n=172	<b>55%</b>	<b>50%</b>
	Can you get your stored property promptly, if you need it?	n=166	<b>24%</b>	
4.4	Are the communal/shared areas of your wing or houseblock (landings, stairs, wing showers etc.) normally very/quite clean?	n=167	<b>74%</b>	<b>61%</b>
<b>FOOD AND TUCK SHOP</b>				
5.1	Is the quality of the food in this prison very/quite good?	n=167	<b>44%</b>	<b>34%</b>
5.2	Do you get enough to eat at mealtimes always/most of the time?	n=173	<b>46%</b>	<b>34%</b>
5.3	Does the tuck shop sell the things that you need?	n=171	<b>66%</b>	<b>62%</b>

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<b>RELATIONSHIPS WITH STAFF</b>				
6.1	Do most staff here treat you with respect?	n=169	<b>65%</b>	<b>61%</b>
6.2	Are there any staff here you could turn to if you had a problem?	n=167	<b>55%</b>	<b>55%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=166	<b>25%</b>	<b>23%</b>
6.4	Do you have a named officer (key worker)?	n=167	<b>48%</b>	<b>61%</b>
	<i>For those who have a named officer:</i>			
	Is your named personal or named officer very/quite helpful?	n=80	<b>55%</b>	
6.5	Do you feel that you are treated as an individual in this prison?	n=159	<b>47%</b>	<b>32%</b>
6.6	Are prisoners here consulted about things like food, tuck shop, health care or wing issues?	n=163	<b>46%</b>	<b>42%</b>
	If so, do things sometimes change?	n=75	<b>41%</b>	<b>33%</b>
6.7	If you wanted to, can you talk to managers, governors or directors in this prison?	n=167	<b>36%</b>	
6.8	Have you shared a problem with a manager, governor or director?	n=164	<b>54%</b>	
	<i>For those who have shared a problem with a manager, governor or director:</i>			
	Did they try to help you?	n=88	<b>47%</b>	
<b>FAITH</b>				
7.1	Do you have a religion?	n=172	<b>90%</b>	<b>86%</b>
	<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	n=148	<b>49%</b>	<b>50%</b>
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	n=154	<b>72%</b>	<b>73%</b>
7.4	Are you able to attend religious services, if you want to?	n=151	<b>76%</b>	<b>79%</b>
<b>CONTACT WITH FAMILY AND FRIENDS</b>				
8.1	Have you been able to see your family/friends more than once in the last month:			
	In person (prison visit)?	n=158	<b>20%</b>	
	Using video calling?	n=124	<b>47%</b>	
8.2	Do visits usually start and finish on time?	n=168	<b>29%</b>	
8.3	Are your visitors usually treated respectfully by staff?	n=165	<b>43%</b>	
8.4	Is it very/quite easy for your family and friends to get here?	n=163	<b>20%</b>	<b>43%</b>
8.5	Have staff here encouraged you to keep in touch with your family/friends?	n=164	<b>22%</b>	<b>26%</b>
8.6	Have you had any problems with sending or receiving:			
	Emails?	n=112	<b>41%</b>	
	Letters?	n=144	<b>63%</b>	
	Parcels?	n=104	<b>43%</b>	
8.7	Are you able to use a phone every day (if you have credit)?	n=164	<b>82%</b>	<b>73%</b>

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<b>REQUESTS, COMPLAINTS AND LEGAL RIGHTS</b>				
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=166	<b>89%</b>	<b>89%</b>
	<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
	Are these times usually kept to?	n=147	<b>41%</b>	<b>49%</b>
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday (including time spent at education, work etc.)?	n=169	<b>50%</b>	<b>43%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday (including time spent at education, work etc.)?	n=169	<b>4%</b>	<b>7%</b>
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=171	<b>63%</b>	<b>59%</b>
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=171	<b>2%</b>	<b>1%</b>
9.4	Do you have time to do domestics more than 5 days in a typical week (shower, clean cell, use the wing phones etc.)?	n=168	<b>46%</b>	<b>39%</b>
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=167	<b>39%</b>	<b>55%</b>
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=169	<b>57%</b>	<b>65%</b>
9.7	Do you typically go to the gym or play sports twice a week or more?	n=169	<b>30%</b>	
9.8	Are you able to visit the library once a week or more?	n=162	<b>22%</b>	<b>27%</b>
	Are you able to have library materials delivered to you once a week or more?	n=146	<b>11%</b>	
9.9	<i>For those who use the library:</i>			
	Does the library have a wide enough range of materials to meet your needs?	n=69	<b>51%</b>	<b>59%</b>
<b>TIME OUT OF CELL</b>				
10.1	Is it easy for you to make a request?	n=166	<b>74%</b>	<b>45%</b>
	<i>For those who have made a request:</i>			
10.2	Are requests usually dealt with fairly?	n=144	<b>62%</b>	<b>38%</b>
	Are requests usually dealt with within 7 days?	n=128	<b>71%</b>	<b>35%</b>
10.3	Is it easy for you to make a complaint?	n=165	<b>71%</b>	<b>68%</b>
	<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=95	<b>39%</b>	<b>17%</b>
	Are complaints usually dealt with within 7 days?	n=88	<b>71%</b>	<b>44%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=116	<b>36%</b>	<b>45%</b>
	<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	n=158	<b>57%</b>	<b>59%</b>
	Attend legal visits?	n=142	<b>59%</b>	<b>64%</b>
	<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=117	<b>51%</b>	<b>67%</b>

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<b>HEALTH CARE</b>			
<b>11.1</b>	If there are currently COVID-19 restrictions in place here:		
	Do you know what the restrictions are here? <span style="float: right;">n=118</span>	<b>48%</b>	
	Have the reasons for the restrictions been explained to you? <span style="float: right;">n=53</span>	<b>76%</b>	
	Do you agree the restrictions are necessary? <span style="float: right;">n=52</span>	<b>69%</b>	
	Do you feel you have been kept safe from the virus? <span style="float: right;">n=120</span>	<b>45%</b>	
<b>11.2</b>	Is it very/quite easy to see:		
	Doctor? <span style="float: right;">n=168</span>	<b>11%</b>	<b>12%</b>
	Nurse? <span style="float: right;">n=165</span>	<b>46%</b>	<b>55%</b>
	Dentist? <span style="float: right;">n=159</span>	<b>9%</b>	<b>9%</b>
	Pharmacist? <span style="float: right;">n=152</span>	<b>38%</b>	
	Mental health worker? <span style="float: right;">n=159</span>	<b>17%</b>	<b>11%</b>
	Substance misuse worker? <span style="float: right;">n=156</span>	<b>15%</b>	
<b>11.3</b>	Do you think the quality of the health service is very/quite good from:		
	Doctor? <span style="float: right;">n=165</span>	<b>22%</b>	<b>16%</b>
	Nurse? <span style="float: right;">n=165</span>	<b>58%</b>	<b>48%</b>
	Dentist? <span style="float: right;">n=155</span>	<b>31%</b>	<b>29%</b>
	Pharmacist? <span style="float: right;">n=152</span>	<b>47%</b>	
	Mental health worker? <span style="float: right;">n=155</span>	<b>25%</b>	<b>21%</b>
	Substance misuse worker? <span style="float: right;">n=150</span>	<b>21%</b>	
<b>11.4</b>	Do you think the overall quality of the health services here is very/quite good? <span style="float: right;">n=165</span>	<b>33%</b>	<b>25%</b>
<b>11.5</b>	Do you have any mental health problems? <span style="float: right;">n=164</span>	<b>77%</b>	<b>66%</b>
<b>11.6</b>	Has your mental health got better since arriving at this prison? <span style="float: right;">n=162</span>	<b>12%</b>	
<b>11.7</b>	Have you needed help with your mental health in this prison? <span style="float: right;">n=160</span>	<b>86%</b>	
	<i>For those who have needed help with their mental health:</i>		
	Have you been helped with your mental health in this prison? <span style="float: right;">n=137</span>	<b>23%</b>	
<b>OTHER SUPPORT NEEDS</b>			
<b>12.1</b>	Do you consider yourself to have a disability (long-term physical, mental or learning needs)? <span style="float: right;">n=162</span>	<b>61%</b>	<b>58%</b>
	<i>For those who have a disability:</i>		
<b>12.2</b>	Are you getting the support you need? <span style="float: right;">n=93</span>	<b>24%</b>	<b>17%</b>
<b>12.3</b>	Have you been on a SPAR (Supporting Prisoners at Risk) in this prison? <span style="float: right;">n=161</span>	<b>31%</b>	<b>39%</b>
	<i>For those who have been on a SPAR:</i>		
<b>12.4</b>	Did you feel cared for by staff? <span style="float: right;">n=49</span>	<b>37%</b>	<b>29%</b>
<b>12.5</b>	Is it very/quite easy for you to speak to a Listener if you need to? <span style="float: right;">n=164</span>	<b>30%</b>	<b>29%</b>

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<b>ALCOHOL AND DRUGS</b>				
13.1	Did you have an alcohol problem when you came into this prison?	n=168	<b>29%</b>	<b>31%</b>
	<i>For those who had/have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	n=47	<b>23%</b>	<b>26%</b>
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=168	<b>52%</b>	<b>56%</b>
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=164	<b>28%</b>	<b>30%</b>
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=162	<b>27%</b>	<b>27%</b>
	<i>For those who had/have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	n=87	<b>21%</b>	<b>24%</b>
13.7	Is it very/quite easy to get illicit drugs in this prison?	n=162	<b>41%</b>	<b>46%</b>
13.8	Is it very/quite easy to get alcohol in this prison?	n=161	<b>9%</b>	<b>13%</b>
13.9	Is it very/quite easy to get tobacco in this prison?	n=162	<b>79%</b>	
<b>SAFETY</b>				
14.1	Have you ever felt unsafe here?	n=164	<b>49%</b>	<b>63%</b>
14.2	Do you feel unsafe now?	n=163	<b>22%</b>	<b>29%</b>
14.3	Have you experienced any of the following from other prisoners here:			
	Verbal abuse?	n=153	<b>31%</b>	<b>40%</b>
	Threats or intimidation?	n=153	<b>29%</b>	<b>31%</b>
	Physical assault?	n=153	<b>17%</b>	<b>24%</b>
	Sexual assault?	n=153	<b>5%</b>	<b>5%</b>
	Theft of tuck shop or property?	n=153	<b>17%</b>	<b>25%</b>
	Other bullying/victimisation?	n=153	<b>18%</b>	<b>18%</b>
	Not experienced any of these from prisoners here	n=153	<b>64%</b>	<b>48%</b>
14.4	If you were being bullied/victimised by other prisoners here, would you report it?	n=155	<b>27%</b>	<b>30%</b>
14.5	Have you experienced any of the following from staff here:			
	Verbal abuse?	n=154	<b>38%</b>	<b>48%</b>
	Threats or intimidation?	n=154	<b>29%</b>	<b>35%</b>
	Physical assault?	n=154	<b>19%</b>	<b>30%</b>
	Sexual assault?	n=154	<b>5%</b>	<b>7%</b>
	Theft of tuck shop or property?	n=154	<b>12%</b>	<b>16%</b>
	Other bullying/victimisation?	n=154	<b>25%</b>	<b>25%</b>
	Not experienced any of these from staff here	n=154	<b>55%</b>	<b>42%</b>
14.6	If you were being bullied/victimised by staff here, would you report it?	n=150	<b>42%</b>	<b>41%</b>

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			Maghaberry Prison (main site) 2022	Maghaberry Prison (main site) 2018
<b>Number of completed questionnaires returned</b>			<b>176</b>	<b>172</b>
<i>n=number of valid responses to question (Maghaberry Prison (main site) 2022)</i>				
<b>BEHAVIOUR MANAGEMENT (PREPS)</b>				
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=162	<b>45%</b>	<b>44%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. PREPS) in this prison?	n=160	<b>36%</b>	<b>35%</b>
15.3	Have you been physically restrained by staff in this prison in the last 6 months?	n=166	<b>16%</b>	<b>24%</b>
	<i>For those who have been restrained in the last 6 months:</i>			
15.4	Did anyone come and talk to you about it afterwards?	n=26	<b>15%</b>	<b>13%</b>
15.5	Have you spent one or more nights in the care and supervision unit in this prison in the last 6 months?	n=161	<b>17%</b>	<b>27%</b>
	<i>For those who have spent one or more nights in the segregation unit in this prison in the last 6 months:</i>			
15.6	Were you treated well by care and supervision unit staff?	n=27	<b>33%</b>	<b>21%</b>
	Could you shower every day?	n=28	<b>39%</b>	<b>39%</b>
	Could you go outside for exercise every day?	n=28	<b>54%</b>	<b>70%</b>
	Could you use the phone every day (if you had credit)?	n=27	<b>44%</b>	<b>55%</b>
<b>EDUCATION, SKILLS AND WORK</b>				
16.1	In this prison, is it easy to get into the following activities:			
	Education?	n=151	<b>31%</b>	<b>43%</b>
	Vocational or skills training?	n=142	<b>20%</b>	<b>27%</b>
	Prison job?	n=147	<b>20%</b>	<b>29%</b>
	Voluntary work outside of the prison?	n=142	<b>5%</b>	<b>1%</b>
	Paid work outside of the prison?	n=142	<b>3%</b>	<b>1%</b>
16.2	In this prison, have you done the following activities:			
	Education?	n=144	<b>64%</b>	<b>75%</b>
	Vocational or skills training?	n=135	<b>49%</b>	<b>59%</b>
	Prison job?	n=141	<b>62%</b>	<b>67%</b>
	Voluntary work outside of the prison?	n=136	<b>39%</b>	<b>33%</b>
	Paid work outside of the prison?	n=135	<b>38%</b>	<b>32%</b>
	<i>For those who have done the following activities while in this prison, do you think they will help you on release:</i>			
	Education?	n=92	<b>70%</b>	<b>60%</b>
	Vocational or skills training?	n=66	<b>70%</b>	<b>64%</b>
	Prison job?	n=87	<b>58%</b>	<b>44%</b>
	Voluntary work outside of the prison?	n=53	<b>66%</b>	<b>52%</b>
	Paid work outside of the prison?	n=51	<b>65%</b>	<b>59%</b>
16.3	Do staff encourage you to attend education, training or work?	n=141	<b>34%</b>	<b>40%</b>

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<b>PLANNING AND PROGRESSION</b>				
17.1	Do you have a custody plan? (This may be called a prisoner development plan or PDP)	n=160	<b>18%</b>	<b>37%</b>
	<i>For those who have a prisoner development plan:</i>			
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=28	<b>75%</b>	<b>80%</b>
17.3	Are staff helping you to achieve your objectives or targets?	n=27	<b>52%</b>	<b>54%</b>
17.4	In this prison, have you done:			
	Offending behaviour programmes?	n=24	<b>29%</b>	<b>53%</b>
	Other programmes?	n=24	<b>50%</b>	<b>54%</b>
	One-to-one work (e.g. with a personal development coordinator)?	n=23	<b>17%</b>	
	A programme on a specialist unit?	n=21	<b>5%</b>	<b>23%</b>
	Temporary release - day or overnight release?	n=22	<b>18%</b>	<b>42%</b>
	For those who have done the following, did they help you to achieve your objectives or targets:			
	Offending behaviour programmes?	n=7	<b>100%</b>	<b>72%</b>
	Other programmes?	n=12	<b>100%</b>	<b>73%</b>
	One to one work (e.g. with an Offender Manager or psychologist)?	n=4	<b>100%</b>	
	Being on a specialist unit?	n=1	<b>100%</b>	<b>40%</b>
	Temporary release - day or overnight release?	n=4	<b>100%</b>	<b>75%</b>

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<b>PREPARATION FOR RELEASE</b>				
18.1	Do you expect to be released in the next 3 months?	n=165	<b>29%</b>	<b>33%</b>
	<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very/quite near to your home area or intended release address?	n=46	<b>22%</b>	<b>46%</b>
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, PDU officer, staff member, PDP coordinator)?	n=46	<b>22%</b>	<b>41%</b>
18.4	Do you need help to sort out the following for when you are released:			
	Finding accommodation?	n=41	<b>61%</b>	<b>74%</b>
	Getting employment?	n=39	<b>49%</b>	<b>56%</b>
	Setting up education or training?	n=40	<b>50%</b>	<b>56%</b>
	Arranging benefits?	n=41	<b>66%</b>	<b>70%</b>
	Sorting out finances?	n=36	<b>50%</b>	<b>64%</b>
	Support for drug or alcohol problems?	n=40	<b>60%</b>	<b>57%</b>
	Physical/mental health support?	n=39	<b>72%</b>	<b>63%</b>
	Social care support?	n=35	<b>57%</b>	<b>45%</b>
	Getting back in touch with family or friends?	n=39	<b>39%</b>	<b>39%</b>
18.4	Are you getting help to sort out the following for when you are released, if you need it:			
	Finding accommodation?	n=25	<b>8%</b>	<b>26%</b>
	Getting employment?	n=19	<b>5%</b>	<b>11%</b>
	Setting up education or training?	n=20	<b>10%</b>	<b>18%</b>
	Arranging benefits?	n=27	<b>4%</b>	<b>23%</b>
	Sorting out finances?	n=18	<b>6%</b>	<b>17%</b>
	Support for drug or alcohol problems?	n=24	<b>8%</b>	<b>18%</b>
	Physical/mental health support?	n=28	<b>7%</b>	<b>19%</b>
	Social care support?	n=20	<b>0%</b>	<b>14%</b>
	Getting back in touch with family or friends?	n=15	<b>7%</b>	<b>26%</b>
<b>FINAL QUESTION ABOUT THIS PRISON</b>				
20.1	Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing) always/most of the time?	n=159	<b>42%</b>	
20.2	Do you think your experiences in this prison have made you less likely to offend in the future?	n=159	<b>55%</b>	<b>48%</b>

## MAGHABERRY (MOURNE) FULL SURVEY RESULTS

### Background information

#### 1.2 How old are you?

Under 21	0 (0%)
21 - 25	15 (13%)
26 - 29	13 (12%)
30 - 39	35 (31%)
40 - 49	31 (28%)
50 - 59	13 (12%)
60 - 69	4 (4%)
70 or over	1 (1%)

#### 1.3 What is your ethnic group?

White - English/Welsh/Scottish/Northern Irish/British	63 (59%)
White - Irish	24 (23%)
White - Gypsy or Irish Traveller	5 (5%)
White - Roma	1 (1%)
White - any other White background	6 (6%)
Mixed - White and Black Caribbean	0 (0%)
Mixed - White and Black African	0 (0%)
Mixed - White and Asian	0 (0%)
Mixed - any other Mixed ethnic background	1 (1%)
Asian/Asian British - Indian	0 (0%)
Asian/Asian British - Pakistani	0 (0%)
Asian/Asian British - Bangladeshi	0 (0%)
Asian/Asian British - Chinese	1 (1%)
Asian - any other Asian background	1 (1%)
Black/Black British - Caribbean	0 (0%)
Black/Black British - African	2 (2%)
Black - any other Black background	0 (0%)
Arab	2 (2%)
Any other ethnic group	0 (0%)

#### 1.4 How long have you been in this prison?

Less than 6 months	35 (33%)
6 months or more	72 (67%)

#### 1.5 Are you currently serving a sentence?

Yes	62 (57%)
Yes - on recall	23 (21%)
No - on remand or awaiting sentence	23 (21%)
No - immigration detainee	1 (1%)

**1.6 How long is your sentence?**

Less than 6 months	8 (8%)
6 months to less than 1 year	9 (8%)
1 year to less than 4 years	9 (8%)
4 years to less than 10 years	10 (9%)
10 years or more	9 (8%)
ICS (indeterminate custodial sentence for public protection)	5 (5%)
Life	32 (30%)
Not currently serving a sentence	24 (23%)

**Arrival and reception**

**2.1 Were you given helpful information about this prison before you came here?**

Yes	21 (19%)
No	72 (65%)
Don't remember	18 (16%)

**2.2 When you arrived at this prison, how long did you spend in reception?**

Less than 2 hours	42 (38%)
2 hours or more	50 (45%)
Don't remember	19 (17%)

**2.3 When you arrived at this prison, how long did you spend in reception?**

Yes	67 (61%)
No	28 (26%)
Don't remember	14 (13%)

**2.4 Overall, how were you treated in reception?**

Very well	18 (17%)
Quite well	65 (60%)
Quite badly	15 (14%)
Very badly	1 (1%)
Don't remember	10 (9%)

## 2.5 When you first arrived here, did you have any of the following problems?

Problems getting phone numbers	45 (41%)
Contacting family	42 (38%)
Arranging care for children or other dependants	4 (4%)
Contacting employers	1 (1%)
Money worries	33 (30%)
Housing worries	23 (21%)
Feeling depressed	56 (50%)
Feeling suicidal	16 (14%)
Other mental health problems	36 (32%)
Physical health problems	24 (22%)
Drug or alcohol problems (e.g. withdrawal)	34 (31%)
Problems getting medication	36 (32%)
Needing protection from other prisoners	6 (5%)
Lost or delayed property	18 (16%)
Other problems	13 (12%)
Didn't have any problems	21 (19%)

## 2.6 Did staff help you to deal with these problems when you first arrived?

Yes	26 (24%)
No	62 (57%)
Didn't have any problems when I first arrived	21 (19%)

## First night and induction

### 3.1 Before you were locked up on your first night here, were you offered any of the following things?

Nicotine replacement	25 (24%)
Toiletries/other basic items	52 (50%)
A shower	25 (24%)
A free phone call	41 (39%)
Something to eat	68 (65%)
The chance to see someone from health care	39 (38%)
The chance to talk to a Listener or Samaritans	9 (9%)
Support from another prisoner (e.g. peer mentor)	4 (4%)
Wasn't offered any of these things	18 (17%)

### 3.2 On your first night in this prison, how clean or dirty was your cell?

Very clean	2 (2%)
Quite clean	12 (11%)
Quite dirty	35 (32%)
Very dirty	55 (50%)
Don't remember	5 (5%)

### 3.3 Did you feel safe on your first night here?

Yes	65 (59%)
No	34 (31%)
Don't remember	11 (10%)

### 3.4 In your first few days here, did you get:

	Yes	No	Don't remember
Access to the prison tuck shop?	66 (62%)	33 (31%)	8 (7%)
Free PIN phone credit?	51 (49%)	42 (40%)	11 (11%)
Numbers put on your PIN phone within 24 hours?	20 (20%)	71 (70%)	11 (11%)

### 3.5 Did your induction cover everything you needed to know about this prison?

Yes	32 (30%)
No	55 (51%)
Haven't had an induction	20 (19%)

## On the wing

### 4.1 Are you in a cell on your own?

Yes	88 (84%)
No, I'm in a shared cell or dormitory	17 (16%)

### 4.2 Is your cell call bell normally answered within 5 minutes?

Yes	46 (44%)
No	31 (30%)
Don't know	28 (27%)
Don't have a cell call bell	0 (0%)

### 4.3 Please answer the following questions about the wing or houseblock you are currently living on:

	Yes	No	Don't know
Do you have enough soap or sanitiser to keep your hands clean?	85 (78%)	22 (20%)	2 (2%)
Do you normally have enough clean, suitable clothes for the week?	91 (83%)	17 (16%)	1 (1%)
Can you shower every day?	105 (95%)	5 (5%)	0 (0%)
Do you have clean sheets every week?	88 (81%)	19 (17%)	2 (2%)
Do you get cell cleaning materials every week?	89 (81%)	19 (17%)	2 (2%)
Is it normally quiet enough for you to relax or sleep at night?	89 (83%)	18 (17%)	0 (0%)
Can you get your stored property promptly, if you need it?	34 (31%)	44 (41%)	30 (28%)

#### 4.4 Normally, how clean or dirty are the communal/shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?

Very clean	15 (14%)
Quite clean	66 (62%)
Quite dirty	20 (19%)
Very dirty	5 (5%)

### Food and tuck shop

#### 5.1 What is the quality of food like in this prison?

Very good	7 (7%)
Quite good	32 (30%)
Quite bad	47 (44%)
Very bad	21 (20%)

#### 5.2 Do you get enough to eat at mealtimes?

Always	15 (14%)
Most of the time	43 (39%)
Some of the time	42 (38%)
Never	10 (9%)

#### 5.3 Does the tuck shop sell the things that you need?

Yes	71 (65%)
No	35 (32%)
Don't know	4 (4%)

### Relationships with staff

#### 6.1 Do most staff here treat you with respect?

Yes	84 (80%)
No	21 (20%)

#### 6.2 Are there any staff here you could turn to if you had a problem?

Yes	66 (61%)
No	43 (39%)

#### 6.3 In the last week, has any member of staff talked to you about how you are getting on?

Yes	31 (28%)
No	79 (72%)

#### 6.4 How helpful is your personal or named officer?

Very helpful	12 (11%)
Quite helpful	22 (20%)
Not very helpful	15 (14%)
Not at all helpful	11 (10%)
Don't have a personal or named officer	48 (44%)

#### 6.5 Do you feel that you are treated as an individual in this prison?

Yes	50 (47%)
No	56 (53%)

#### 6.6 Are prisoners here consulted about things like food, tuck shop, health care or wing issues?

Yes, and things sometimes change	20 (18%)
Yes, but things don't change	37 (34%)
No	36 (33%)
Don't know	16 (15%)

#### 6.7 If you wanted to, can you talk to managers, governors or directors in this prison?

Yes	30 (27%)
No	44 (40%)
Don't know	37 (33%)

#### 6.8 If you have shared a problem with a manager, governor or director, did they try to help you?

Yes	23 (21%)
No	36 (33%)
Haven't shared a problem	49 (45%)

## Faith

#### 7.1 What is your religion?

No religion	8 (7%)
Catholic	41 (38%)
Protestant	45 (41%)
Other Christian denomination	8 (7%)
Buddhism	0 (0%)
Hinduism	0 (0%)
Judaism	0 (0%)
Islam	4 (4%)
Sikhism	0 (0%)
Other	3 (3%)

## 7.2 Are your religious beliefs respected here?

Yes	56 (54%)
No	20 (19%)
Don't know	20 (19%)
Not applicable (no religion)	8 (8%)

## 7.3 Are you able to speak to a chaplain of your faith in private, if you want to?

Yes	78 (72%)
No	5 (5%)
Don't know	18 (17%)
Not applicable (no religion)	8 (7%)

## 7.4 Are you able to attend religious services, if you want to?

Yes	81 (74%)
No	7 (6%)
Don't know	13 (12%)
Not applicable (no religion)	8 (7%)

## Contact with family and friends

### 8.1 How often have you been able to see your family and friends in the last month:

	Every week	Two or three times	Once	Not at all
In person (prison visit)?	7 (8%)	15 (16%)	39 (43%)	30 (33%)
Using video calling?	29 (33%)	19 (21%)	6 (7%)	35 (39%)

### 8.2 Do visits usually start and finish on time?

Yes	37 (35%)
No	46 (43%)
Don't know	23 (22%)

### 8.3 Are your visitors usually treated respectfully by staff?

Yes	50 (48%)
No	24 (23%)
Don't know	30 (29%)

### 8.4 How easy or difficult is it for your family and friends to get here?

Very easy	5 (5%)
Quite easy	38 (36%)
Quite difficult	32 (30%)
Very difficult	25 (23%)
Don't know	7 (7%)

<b>8.5 Have staff here encouraged you to keep in touch with your family/friends?</b>	
Yes	21 (20%)
No	83 (80%)

<b>8.6 Have you had any problems with sending or receiving:</b>		
	<b>Yes</b>	<b>No</b>
Emails?	31 (41%)	45 (59%)
Letters?	58 (62%)	35 (38%)
Parcels?	40 (54%)	34 (46%)

<b>8.7 Are you able to use a phone every day (if you have credit)?</b>	
Yes	101 (96%)
No	4 (4%)

## Time out of cell

<b>9.1 Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?</b>	
Yes, and these times are usually kept to	33 (32%)
Yes, but these times are not usually kept to	62 (60%)
No	9 (9%)

<b>9.2 How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
Less than 2 hours	9 (9%)
2 to 6 hours	58 (55%)
6 to 10 hours	15 (14%)
10 hours or more	14 (13%)
Don't know	9 (9%)

<b>9.3 How long do you usually spend out of your cell on a typical Saturday or Sunday?</b>	
Less than 2 hours	24 (22%)
2 to 6 hours	56 (52%)
6 to 10 hours	4 (4%)
10 hours or more	13 (12%)
Don't know	10 (9%)

<b>9.4 How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?</b>	
None	1 (1%)
1 or 2	6 (6%)
3 to 5	18 (17%)
More than 5	80 (74%)
Don't know	3 (3%)

## 9.5 How many days in a typical week do you get association, if you want it?

None	1 (1%)
1 or 2	11 (10%)
3 to 5	32 (30%)
More than 5	50 (47%)
Don't know	12 (11%)

## 9.6 How many days in a typical week could you go outside for exercise, if you wanted to?

None	3 (3%)
1 or 2	7 (7%)
3 to 5	32 (30%)
More than 5	58 (55%)
Don't know	6 (6%)

## 9.7 Typically, how often do you go to the gym or play sports?

Twice a week or more	41 (39%)
About once a week	18 (17%)
Less than once a week	24 (23%)
Never	21 (20%)

## 9.8 Typically, how often are you able to:

	Twice a week or more	About once a week	Less than once a week	Never
Visit the library	2 (2%)	6 (6%)	25 (23%)	74 (69%)
Have library materials delivered to you	1 (1%)	5 (5%)	15 (16%)	75 (78%)

## 9.9 Does the library have a wide enough range of materials to meet your needs?

Yes	18 (18%)
No	27 (27%)
Don't use the library	54 (55%)

## Requests, complaints and legal rights

### 10.1 Is it easy for you to make a request?

Yes	88 (81%)
No	11 (10%)
Don't know	9 (8%)

### 10.2 If you have made any requests here, please answer the questions below:

	Yes	No	Not made any requests
Are requests usually dealt with fairly?	56 (55%)	35 (34%)	11 (11%)
Are requests usually dealt with within 7 days?	62 (63%)	25 (26%)	11 (11%)

### 10.3 Is it easy for you to make a complaint?

Yes	81 (78%)
No	7 (7%)
Don't know	16 (15%)

### 10.4 If you have made any complaints here, please answer the questions below:

	Yes	No	Not made any complaints
Are complaints usually dealt with fairly?	20 (20%)	48 (47%)	34 (33%)
Are complaints usually dealt with within 7 days?	38 (39%)	26 (27%)	34 (35%)

### 10.5 Have you ever been prevented from making a complaint here when you wanted to?

Yes	29 (28%)
No	47 (45%)
Not wanted to make a complaint	29 (28%)

### 10.6 In this prison, is it easy or difficult for you to...

	Easy	Difficult	Don't know	Don't need this
Communicate with your solicitor or legal representative?	77 (72%)	21 (20%)	5 (5%)	4 (4%)
Attend legal visits?	56 (59%)	26 (27%)	7 (7%)	6 (6%)

### 10.7 Have staff here ever opened letters from your solicitor or legal representative when you were not present?

Yes	62 (61%)
No	17 (17%)
Not had any legal letters	22 (22%)

## Health care

### 11.1 If there are currently restrictions in place due to the COVID-19 pandemic:

	Yes	No	Not applicable
Do you know what the restrictions are here?	45 (45%)	32 (32%)	23 (23%)
Have the reasons for the restrictions been explained to you?	29 (29%)	15 (15%)	55 (56%)
Do you agree the restrictions are necessary?	19 (19%)	24 (24%)	55 (56%)
Do you feel you have been kept safe from the virus?	41 (42%)	34 (35%)	23 (23%)

## 11.2 How easy or difficult is it to see the following people?

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	4 (4%)	13 (12%)	27 (25%)	53 (50%)	9 (8%)
Nurse	15 (14%)	39 (37%)	27 (25%)	19 (18%)	6 (6%)
Dentist	5 (5%)	10 (10%)	24 (23%)	45 (44%)	19 (18%)
Pharmacist	17 (17%)	30 (29%)	21 (21%)	18 (18%)	16 (16%)
Mental health worker	4 (4%)	15 (14%)	19 (18%)	37 (36%)	29 (28%)
Substance misuse worker	6 (6%)	13 (13%)	15 (14%)	25 (24%)	45 (43%)

## 11.3 What do you think of the quality of the health service from the following people?

	Very good	Quite good	Quite bad	Very bad	Don't know
Doctor	6 (6%)	20 (19%)	20 (19%)	41 (39%)	18 (17%)
Nurse	11 (10%)	51 (48%)	16 (15%)	15 (14%)	13 (12%)
Dentist	14 (14%)	30 (29%)	13 (13%)	18 (18%)	27 (26%)
Pharmacist	20 (20%)	40 (40%)	12 (12%)	8 (8%)	21 (21%)
Mental health worker	7 (7%)	24 (23%)	13 (13%)	24 (23%)	35 (34%)
Substance misuse worker	7 (7%)	13 (13%)	13 (13%)	22 (21%)	48 (47%)

## 11.4 What do you think of the overall quality of the health services here?

Very good	4 (4%)
Quite good	40 (39%)
Quite bad	20 (19%)
Very bad	33 (32%)
Don't know	6 (6%)

## 11.5 Do you have any mental health problems?

Yes	66 (63%)
No	39 (37%)

## 11.6 Has your mental health got better or worse since arriving at this prison?

Better	11 (11%)
Worse	56 (57%)
No difference	32 (32%)

## 11.7 Have you been helped with your mental health in this prison?

Yes	17 (17%)
No	62 (60%)
Haven't needed any help with mental health	24 (23%)

## Other support needs

<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>	
	Yes	46 (43%)
	No	60 (57%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes	5 (5%)
	No	40 (38%)
	Don't have a disability	60 (57%)
<b>12.3</b>	<b>Have you been on a SPAR (Supporting Prisoners at Risk) in this prison?</b>	
	Yes	26 (25%)
	No	76 (75%)
<b>12.4</b>	<b>If you have been on a SPAR (Supporting Prisoners at Risk) in this prison, did you feel cared for by staff?</b>	
	Yes	9 (9%)
	No	16 (16%)
	Haven't been on an SPAR in this prison	76 (75%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>	
	Very easy	8 (7%)
	Quite easy	16 (15%)
	Quite difficult	9 (8%)
	Very difficult	7 (7%)
	Don't know	58 (54%)
	No Listeners at this prison	9 (8%)
<b>Alcohol and drugs</b>		
<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes	28 (26%)
	No	80 (74%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes	8 (8%)
	No	17 (16%)
	Didn't/don't have an alcohol problem	80 (76%)
<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes	45 (42%)

<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	No	61 (58%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes	27 (25%)
	No	79 (75%)
<b>13.5</b>	<b>Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
	Yes	28 (27%)
	No	76 (73%)
<b>13.6</b>	<b>Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes	11 (11%)
	No	39 (39%)
	Didn't/don't have a drug problem	50 (50%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy	20 (19%)
	Quite easy	22 (21%)
	Quite difficult	11 (10%)
	Very difficult	3 (3%)
	Don't know	49 (47%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	4 (4%)
	Quite easy	12 (11%)
	Quite difficult	13 (12%)
	Very difficult	14 (13%)
	Don't know	62 (59%)
<b>13.9</b>	<b>Is it easy or difficult to get tobacco in this prison?</b>	
	Very easy	61 (59%)
	Quite easy	19 (18%)
	Quite difficult	4 (4%)
	Very difficult	4 (4%)
	Don't know	16 (15%)

## Safety

### 14.1 Have you ever felt unsafe here?

Yes	63 (61%)
No	40 (39%)

### 14.2 Do you feel unsafe now?

Yes	19 (18%)
No	84 (82%)

### 14.3 Have you experienced any of the following types of bullying/victimisation from other prisoners here? (Please tick all that apply.)

Verbal abuse	44 (44%)
Threats or intimidation	32 (32%)
Physical assault	26 (26%)
Sexual assault	7 (7%)
Theft of tuck or property	29 (29%)
Other bullying/victimisation	19 (19%)
Not experienced any of these from prisoners here	48 (48%)

### 14.4 If you were being bullied/victimised by other prisoners here, would you report it?

Yes	28 (27%)
No	75 (73%)

### 14.5 Have you experienced any of the following types of bullying/victimisation from staff here? (Please tick all that apply.)

Verbal abuse	34 (34%)
Threats or intimidation	24 (24%)
Physical assault	17 (17%)
Sexual assault	5 (5%)
Theft of tuck or property	10 (10%)
Other bullying/victimisation	24 (24%)
Not experienced any of these from staff here	50 (51%)

### 14.6 If you were being bullied/victimised by staff here, would you report it?

Yes	47 (46%)
No	55 (54%)

## Behaviour management (Progressive Regimes and Earned Privileges Scheme or PREPS)

### 15.1 Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?

Yes	43 (42%)
No	33 (32%)
Don't know what the incentives/rewards are	27 (26%)

**15.2 Do you feel you have been treated fairly in the behaviour management scheme (e.g. PREPS) in this prison?**

Yes	38 (36%)
No	35 (33%)
Don't know	13 (12%)
Don't know what this is	19 (18%)

**15.3 Have you been physically restrained by staff in this prison in the last 6 months?**

Yes	7 (7%)
No	100 (93%)

**15.4 If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?**

Yes	1 (1%)
No	5 (5%)
Don't remember	0 (0%)
Not been restrained here in last 6 months	100 (94%)

**15.5 Have you spent one or more nights in the care and supervision unit in this prison in the last 6 months?**

Yes	16 (15%)
No	89 (85%)

**15.6 If you have spent one or more nights in the care and supervision unit in this prison in the last 6 months please answer the questions below:**

	Yes	No
Were you treated well by segregation staff?	5 (36%)	9 (64%)
Could you shower every day?	5 (36%)	9 (64%)
Could you go outside for exercise every day?	9 (60%)	6 (40%)
Could you use the phone every day (if you had credit)?	6 (43%)	8 (57%)

**Education, skills and work**

**16.1 Is it easy or difficult to get into the following activities in this prison?**

	Easy	Difficult	Don't know	Not available here
Education	33 (32%)	47 (45%)	21 (20%)	3 (3%)
Vocational or skills training	24 (24%)	46 (46%)	28 (28%)	3 (3%)
Prison job	25 (25%)	57 (57%)	17 (17%)	1 (1%)
Voluntary work outside of the prison	5 (5%)	39 (38%)	37 (36%)	21 (21%)
Paid work outside of the prison	5 (5%)	34 (33%)	39 (38%)	24 (24%)

**16.2 If you have done any of these activities while in this prison, do you think they will help you on release?**

	Yes, will help	No, won't help	Not done this
Education	48 (48%)	21 (21%)	30 (30%)
Vocational or skills training	42 (43%)	19 (20%)	36 (37%)
Prison job	31 (33%)	38 (40%)	25 (27%)
Voluntary work outside of the prison	28 (30%)	14 (15%)	50 (54%)
Paid work outside of the prison	28 (30%)	13 (14%)	53 (56%)

**16.3 Do staff encourage you to attend education, training or work?**

Yes	39 (38%)
No	53 (52%)
Not applicable (e.g. if you are retired, sick or on remand)	10 (10%)

**Planning and progression**

**17.1 Do you have a custody plan? (This may be called a prisoner development plan or PDP.)**

Yes	36 (35%)
No	68 (65%)

**17.2 Do you understand what you need to do to achieve the objectives or targets in your prisoner development plan?**

Yes	26 (74%)
No	4 (11%)
Don't know what my objectives or targets are	5 (14%)

**17.3 Are staff here supporting you to achieve your objectives or targets?**

Yes	10 (31%)
No	17 (53%)
Don't know what my objectives or targets are	5 (16%)

**17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?**

	Yes, this helped	No, this didn't help	Not done/ don't know
Offending behaviour programmes	15 (44%)	4 (12%)	15 (44%)
Other programmes	16 (48%)	6 (18%)	11 (33%)
One-to-one work (e.g. with a personal development coordinator or psychologist)	13 (39%)	6 (18%)	14 (42%)
Been on a specialist unit	5 (17%)	2 (7%)	23 (77%)
Temporary release (day or overnight release)	12 (34%)	5 (14%)	18 (51%)

## Preparation for release

### 18.1 Do you expect to be released in the next 3 months?

Yes	26 (25%)
No	55 (52%)
Don't know	25 (24%)

### 18.2 How close is this prison to your home area or intended release address?

Very near	0 (0%)
Quite near	13 (50%)
Quite far	9 (35%)
Very far	4 (15%)

### 18.3 Is anybody helping you to prepare for your release (e.g. a home probation officer, PDU Officer/staff member, PDP Coordinator)?

Yes	4 (17%)
No	19 (83%)

### 18.4 Are you getting help to sort out the following things for when you are released?

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	3 (13%)	9 (38%)	12 (50%)
Getting employment	3 (13%)	8 (33%)	13 (54%)
Setting up education or training	2 (9%)	8 (35%)	13 (57%)
Arranging benefits	3 (13%)	13 (54%)	8 (33%)
Sorting out finances	1 (5%)	12 (57%)	8 (38%)
Support for drug or alcohol problems	5 (22%)	11 (48%)	7 (30%)
Physical/mental health support	4 (17%)	13 (54%)	7 (29%)
Social care support	2 (9%)	10 (43%)	11 (48%)
Getting back in touch with family or friends	4 (18%)	6 (27%)	12 (55%)

## More about you

### 19.1 Do you have children under the age of 18?

Yes	56 (53%)
No	50 (47%)

### 19.2 Are you a UK/British citizen? (i.e. eligible to hold a British passport)

Yes	81 (81%)
No	19 (19%)

### 19.3 Have you ever been in Social Services care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?

Yes	29 (28%)
No	76 (72%)

#### 19.4 Have you ever been in the armed services (e.g. army, navy, air force)?

Yes	7 (7%)
No	99 (93%)

#### 19.5 What is your gender?

Male	104 (96%)
Female	3 (3%)
Non-binary	0 (0%)
Other	1 (1%)

#### 19.6 How would you describe your sexual orientation?

Straight/heterosexual	103 (97%)
Gay/lesbian/homosexual	0 (0%)
Bisexual	0 (0%)
Other	3 (3%)

#### 19.7 Do you identify as transgender or transsexual?

Yes	1 (1%)
No	102 (99%)

### Final questions about this prison

#### 20.1 Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing)?

All the time	14 (13%)
Most of the time	42 (40%)
Some of the time	37 (35%)
Never	12 (11%)

#### 20.2 Do you think your experiences in this prison have made you more or less likely to offend in the future?

More likely to offend	9 (9%)
Less likely to offend	61 (58%)
Made no difference	35 (33%)

## SURVEY RESPONSES COMPARED WITH THOSE FROM THE PREVIOUS SURVEY

In this table summary statistics from Maghaberry Prison (Mourne) 2022 are compared with the following HMIP survey data:

- Summary statistics from Maghaberry Prison (Mourne) 2018

Please note that we do not have comparable data for the new questions introduced in May 2021.

Shading is used to indicate statistical significance\*, as follows:

- Green shading shows results that are significantly more positive than the comparator
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- \* less than 1% probability that the difference is due to chance

			Maghaberry Prison (Mourne) 2022	Maghaberry Prison (Mourne) 2018
<b>Number of completed questionnaires returned</b>			<b>112</b>	<b>111</b>
<i>n=number of valid responses to question (Maghaberry Prison (Mourne) 2022)</i>				
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION				
1.2	Are you under 21 years of age?	n=112	0%	0%
	Are you 25 years of age or younger?	n=112	13%	7%
	Are you 50 years of age or older?	n=112	16%	19%
	Are you 70 years of age or older?	n=112	1%	0%
1.3	Are you from an ethnic group other than white?	n=106	7%	6%
	Are you from a white Gypsy or Irish Traveller or Roma ethnic group?	n=106	6%	
1.4	Have you been in this prison for less than 6 months?	n=107	33%	18%
1.5	Are you currently serving a sentence?	n=109	78%	87%
	Are you on recall?	n=109	21%	7%
1.6	Is your sentence less than 12 months?	n=106	16%	8%
	Are you here under an indeterminate custodial sentence for public protection (ICS prisoner)?	n=106	5%	2%
7.1	Are you a Catholic?	n=109	38%	37%
7.1	Are you a Protestant?	n=109	41%	43%
11.5	Do you have any mental health problems?	n=105	63%	58%
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=106	43%	49%
19.1	Do you have children under the age of 18?	n=106	53%	63%
19.2	Are you a foreign national?	n=100	19%	22%
19.3	Have you ever been in Local Authority Care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?	n=105	28%	
19.4	Have you ever been in the armed services (e.g. army, navy, air force)?	n=106	7%	8%
19.5	Is your gender female, non-binary or other?	n=108	4%	0%
19.6	Are you homosexual, bisexual or other sexual orientation?	n=106	3%	1%
19.7	Do you identify as transgender or transsexual?	n=103	1%	1%

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<i>n=number of valid responses to question (Maghaberry Prison (Mourne) 2022)</i>				
<b>ARRIVAL AND RECEPTION</b>				
2.1	Were you given helpful information about this prison before you came here?	n=111	<b>19%</b>	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	n=111	<b>38%</b>	<b>32%</b>
2.3	When you were searched in reception, was this done in a respectful way?	n=109	<b>62%</b>	<b>47%</b>
2.4	Overall, were you treated very/quite well in reception?	n=109	<b>76%</b>	<b>71%</b>
2.5	When you first arrived, did you have any problems?	n=111	<b>81%</b>	<b>79%</b>
	Did you have problems with:			
	Getting phone numbers?	n=111	<b>41%</b>	<b>32%</b>
	Contacting family?	n=111	<b>38%</b>	<b>39%</b>
	Arranging care for children or other dependents?	n=111	<b>4%</b>	<b>4%</b>
	Contacting employers?	n=111	<b>1%</b>	<b>3%</b>
	Money worries?	n=111	<b>30%</b>	<b>36%</b>
	Housing worries?	n=111	<b>21%</b>	<b>21%</b>
	Feeling depressed?	n=111	<b>51%</b>	<b>49%</b>
	Feeling suicidal?	n=111	<b>14%</b>	<b>18%</b>
	Other mental health problems?	n=111	<b>32%</b>	<b>31%</b>
	Physical health problems?	n=111	<b>22%</b>	<b>17%</b>
	Drug or alcohol problems (e.g. withdrawal)?	n=111	<b>31%</b>	<b>23%</b>
	Getting medication?	n=111	<b>32%</b>	<b>31%</b>
	Needing protection from other prisoners?	n=111	<b>5%</b>	<b>7%</b>
	Lost or delayed property?	n=111	<b>16%</b>	<b>19%</b>
	Other problems?	n=111	<b>12%</b>	<b>14%</b>
	<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	n=88	<b>30%</b>	<b>27%</b>

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<i>n=number of valid responses to question (Maghaberry Prison (Mourne) 2022)</i>			
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night here, were you offered:		
	Nicotine replacement?	n=104 <b>24%</b>	<b>53%</b>
	Toiletries/other basic items?	n=104 <b>50%</b>	<b>48%</b>
	A shower?	n=104 <b>24%</b>	<b>41%</b>
	A free phone call?	n=104 <b>39%</b>	<b>56%</b>
	Something to eat?	n=104 <b>65%</b>	<b>70%</b>
	The chance to see someone from health care?	n=104 <b>38%</b>	<b>44%</b>
	The chance to talk to a Listener or Samaritans?	n=104 <b>9%</b>	<b>13%</b>
	Support from another prisoner (e.g. peer mentor)?	n=104 <b>4%</b>	<b>14%</b>
	None of these?	n=104 <b>17%</b>	<b>9%</b>
3.2	On your first night in this prison, was your cell very/quite clean?	n=109 <b>13%</b>	<b>24%</b>
3.3	Did you feel safe on your first night here?	n=110 <b>59%</b>	<b>48%</b>
3.4	In your first few days here, did you get:		
	Access to the prison tuck shop?	n=107 <b>62%</b>	<b>54%</b>
	Free PIN phone credit?	n=104 <b>49%</b>	<b>50%</b>
	Numbers put on your PIN phone within 24 hours?	n=102 <b>20%</b>	
3.5	Have you had an induction at this prison?	n=107 <b>81%</b>	<b>91%</b>
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	n=87 <b>37%</b>	<b>39%</b>
<b>ON THE WING</b>			
4.1	Are you in a cell on your own?	n=105 <b>84%</b>	<b>95%</b>
4.2	Is your cell call bell normally answered within 5 minutes?	n=105 <b>44%</b>	<b>38%</b>
4.3	On the wing or houseblock you are currently living on:		
	Do you have enough soap or sanitiser to keep your hands clean?	n=109 <b>78%</b>	
	Do you normally have enough clean, suitable clothes for the week?	n=109 <b>84%</b>	<b>94%</b>
	Can you shower every day?	n=110 <b>96%</b>	<b>95%</b>
	Do you have clean sheets every week?	n=109 <b>81%</b>	<b>94%</b>
	Do you get cell cleaning materials every week?	n=110 <b>81%</b>	<b>82%</b>
	Is it normally quiet enough for you to relax or sleep at night?	n=107 <b>83%</b>	<b>87%</b>
	Can you get your stored property promptly, if you need it?	n=108 <b>32%</b>	
4.4	Are the communal/shared areas of your wing or houseblock (landings, stairs, wing showers etc.) normally very/quite clean?	n=106 <b>76%</b>	<b>84%</b>

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<b>FOOD AND TUCK SHOP</b>				
5.1	Is the quality of the food in this prison very/quite good?	n=107	<b>36%</b>	<b>37%</b>
5.2	Do you get enough to eat at mealtimes always/most of the time?	n=110	<b>53%</b>	<b>48%</b>
5.3	Does the tuck shop sell the things that you need?	n=110	<b>65%</b>	<b>59%</b>
<b>RELATIONSHIPS WITH STAFF</b>				
6.1	Do most staff here treat you with respect?	n=105	<b>80%</b>	<b>76%</b>
6.2	Are there any staff here you could turn to if you had a problem?	n=109	<b>61%</b>	<b>69%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	n=110	<b>28%</b>	<b>42%</b>
6.4	Do you have a named officer (key worker)?	n=108	<b>56%</b>	<b>70%</b>
	<i>For those who have a named officer:</i>			
	Is your named personal or named officer very/quite helpful?	n=60	<b>57%</b>	
6.5	Do you feel that you are treated as an individual in this prison?	n=106	<b>47%</b>	<b>44%</b>
6.6	Are prisoners here consulted about things like food, tuck shop, health care or wing issues?	n=109	<b>52%</b>	<b>55%</b>
	If so, do things sometimes change?	n=57	<b>35%</b>	<b>34%</b>
6.7	If you wanted to, can you talk to managers, governors or directors in this prison?	n=111	<b>27%</b>	
6.8	Have you shared a problem with a manager, governor or director?	n=108	<b>55%</b>	
	<i>For those who have shared a problem with a manager, governor or director:</i>			
	Did they try to help you?	n=59	<b>39%</b>	
<b>FAITH</b>				
7.1	Do you have a religion?	n=109	<b>93%</b>	<b>87%</b>
	<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	n=96	<b>58%</b>	<b>72%</b>
7.3	Are you able to speak to a chaplain of your faith in private, if you want to?	n=101	<b>77%</b>	<b>85%</b>
7.4	Are you able to attend religious services, if you want to?	n=101	<b>80%</b>	<b>96%</b>
<b>CONTACT WITH FAMILY AND FRIENDS</b>				
8.1	Have you been able to see your family/friends more than once in the last month:			
	In person (prison visit)?	n=91	<b>24%</b>	
	Using video calling?	n=89	<b>54%</b>	
8.2	Do visits usually start and finish on time?	n=106	<b>35%</b>	
8.3	Are your visitors usually treated respectfully by staff?	n=104	<b>48%</b>	
8.4	Is it very/quite easy for your family and friends to get here?	n=107	<b>40%</b>	<b>47%</b>
8.5	Have staff here encouraged you to keep in touch with your family/friends?	n=104	<b>20%</b>	<b>51%</b>
8.6	Have you had any problems with sending or receiving:			
	Emails?	n=76	<b>41%</b>	
	Letters?	n= 93	<b>62%</b>	
	Parcels?	n=74	<b>54%</b>	
8.7	Are you able to use a phone every day (if you have credit)?	n=105	<b>96%</b>	<b>96%</b>

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<b>TIME OUT OF CELL</b>				
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=104	<b>91%</b>	<b>97%</b>
	<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
	Are these times usually kept to?	n=95	<b>35%</b>	<b>61%</b>
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday (including time spent at education, work etc.)?	n=105	<b>9%</b>	<b>4%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday (including time spent at education, work etc.)?	n=105	<b>13%</b>	<b>21%</b>
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=107	<b>22%</b>	<b>8%</b>
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=107	<b>12%</b>	<b>15%</b>
9.4	Do you have time to do domestics more than 5 days in a typical week (shower, clean cell, use the wing phones etc.)?	n=108	<b>74%</b>	<b>83%</b>
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=106	<b>47%</b>	<b>82%</b>
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=106	<b>55%</b>	<b>77%</b>
9.7	Do you typically go to the gym or play sports twice a week or more?	n=104	<b>39%</b>	
9.8	Are you able to visit the library once a week or more?	n=107	<b>8%</b>	<b>50%</b>
	Are you able to have library materials delivered to you once a week or more?	n=96	<b>6%</b>	
9.9	<i>For those who use the library:</i>			
	Does the library have a wide enough range of materials to meet your needs?	n=45	<b>40%</b>	<b>54%</b>
<b>REQUESTS, COMPLAINTS AND LEGAL RIGHTS</b>				
10.1	Is it easy for you to make a request?	n=108	<b>82%</b>	<b>66%</b>
	<i>For those who have made a request:</i>			
10.2	Are requests usually dealt with fairly?	n=91	<b>62%</b>	<b>46%</b>
	Are requests usually dealt with within 7 days?	n=87	<b>71%</b>	<b>58%</b>
10.3	Is it easy for you to make a complaint?	n=104	<b>78%</b>	<b>84%</b>
	<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=68	<b>29%</b>	<b>36%</b>
	Are complaints usually dealt with within 7 days?	n=64	<b>59%</b>	<b>47%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=76	<b>38%</b>	<b>25%</b>
	<i>For those who need it, is it easy to:</i>			
10.6	Communicate with your solicitor or legal representative?	n=103	<b>75%</b>	<b>77%</b>
	Attend legal visits?	n=89	<b>63%</b>	<b>84%</b>
	<i>For those who have had legal letters:</i>			
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=79	<b>79%</b>	<b>66%</b>

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<b>HEALTH CARE</b>			
11.1	If there are currently COVID-19 restrictions in place here:		
	Do you know what the restrictions are here?	n=77 <b>58%</b>	
	Have the reasons for the restrictions been explained to you?	n=44 <b>66%</b>	
	Do you agree the restrictions are necessary?	n=43 <b>44%</b>	
	Do you feel you have been kept safe from the virus?	n=75 <b>55%</b>	
11.2	Is it very/quite easy to see:		
	Doctor?	n=106 <b>16%</b>	<b>21%</b>
	Nurse?	n=106 <b>51%</b>	<b>72%</b>
	Dentist?	n=103 <b>15%</b>	<b>26%</b>
	Pharmacist?	n=102 <b>46%</b>	
	Mental health worker?	n=104 <b>18%</b>	<b>17%</b>
	Substance misuse worker?	n=104 <b>18%</b>	
11.3	Do you think the quality of the health service is very/quite good from:		
	Doctor?	n=105 <b>25%</b>	<b>34%</b>
	Nurse?	n=106 <b>59%</b>	<b>55%</b>
	Dentist?	n=102 <b>43%</b>	<b>52%</b>
	Pharmacist?	n=101 <b>59%</b>	
	Mental health worker?	n=103 <b>30%</b>	<b>24%</b>
	Substance misuse worker?	n=103 <b>19%</b>	
11.4	Do you think the overall quality of the health services here is very/quite good?	n=103 <b>43%</b>	<b>38%</b>
11.5	Do you have any mental health problems?	n=105 <b>63%</b>	<b>58%</b>
11.6	Has your mental health got better since arriving at this prison?	n=99 <b>11%</b>	
11.7	Have you needed help with your mental health in this prison?	n=103 <b>77%</b>	
	<i>For those who have needed help with their mental health:</i>		
	Have you been helped with your mental health in this prison?	n=79 <b>22%</b>	
<b>OTHER SUPPORT NEEDS</b>			
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=106 <b>43%</b>	<b>49%</b>
	<i>For those who have a disability:</i>		
12.2	Are you getting the support you need?	n=45 <b>11%</b>	<b>19%</b>
12.3	Have you been on a SPAR (Supporting Prisoners at Risk) in this prison?	n=102 <b>26%</b>	<b>28%</b>
	<i>For those who have been on a SPAR:</i>		
12.4	Did you feel cared for by staff?	n=25 <b>36%</b>	<b>40%</b>
12.5	Is it very/quite easy for you to speak to a Listener if you need to?	n=107 <b>22%</b>	<b>34%</b>

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<b>ALCOHOL AND DRUGS</b>				
13.1	Did you have an alcohol problem when you came into this prison?	n=108	<b>26%</b>	<b>28%</b>
	<i>For those who had/have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	n=25	<b>32%</b>	<b>53%</b>
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=106	<b>43%</b>	<b>35%</b>
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=106	<b>26%</b>	<b>22%</b>
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=104	<b>27%</b>	<b>17%</b>
	<i>For those who had/have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	n=50	<b>22%</b>	<b>40%</b>
13.7	Is it very/quite easy to get illicit drugs in this prison?	n=105	<b>40%</b>	<b>58%</b>
13.8	Is it very/quite easy to get alcohol in this prison?	n=105	<b>15%</b>	<b>24%</b>
13.9	Is it very/quite easy to get tobacco in this prison?	n=104	<b>77%</b>	
<b>SAFETY</b>				
14.1	Have you ever felt unsafe here?	n=103	<b>61%</b>	<b>62%</b>
14.2	Do you feel unsafe now?	n=103	<b>18%</b>	<b>16%</b>
14.3	Have you experienced any of the following from other prisoners here:			
	Verbal abuse?	n=99	<b>44%</b>	<b>43%</b>
	Threats or intimidation?	n=99	<b>32%</b>	<b>36%</b>
	Physical assault?	n=99	<b>26%</b>	<b>18%</b>
	Sexual assault?	n=99	<b>7%</b>	<b>5%</b>
	Theft of tuck shop or property?	n=99	<b>29%</b>	<b>22%</b>
	Other bullying/victimisation?	n=99	<b>19%</b>	<b>21%</b>
	Not experienced any of these from prisoners here	n=99	<b>49%</b>	<b>47%</b>
14.4	If you were being bullied/victimised by other prisoners here, would you report it?	n=103	<b>27%</b>	<b>29%</b>
14.5	Have you experienced any of the following from staff here:			
	Verbal abuse?	n=99	<b>34%</b>	<b>46%</b>
	Threats or intimidation?	n=99	<b>24%</b>	<b>32%</b>
	Physical assault?	n=99	<b>17%</b>	<b>22%</b>
	Sexual assault?	n=99	<b>5%</b>	<b>4%</b>
	Theft of tuck shop or property?	n=99	<b>10%</b>	<b>12%</b>
	Other bullying/victimisation?	n=99	<b>24%</b>	<b>25%</b>
	Not experienced any of these from staff here	n=99	<b>51%</b>	<b>41%</b>
14.6	If you were being bullied/victimised by staff here, would you report it?	n=102	<b>46%</b>	<b>38%</b>

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<b>BEHAVIOUR MANAGEMENT (PREPS)</b>				
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=103	<b>42%</b>	<b>53%</b>
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. PREPS) in this prison?	n=105	<b>36%</b>	<b>51%</b>
15.3	Have you been physically restrained by staff in this prison in the last 6 months?	n=107	<b>7%</b>	<b>9%</b>
	<i>For those who have been restrained in the last 6 months:</i>			
15.4	Did anyone come and talk to you about it afterwards?	n=6	<b>17%</b>	<b>25%</b>
15.5	Have you spent one or more nights in the care and supervision unit in this prison in the last 6 months?	n=105	<b>15%</b>	<b>15%</b>
	<i>For those who have spent one or more nights in the segregation unit in this prison in the last 6 months:</i>			
15.6	Were you treated well by care and supervision unit staff?	n=14	<b>36%</b>	<b>50%</b>
	Could you shower every day?	n=14	<b>36%</b>	<b>31%</b>
	Could you go outside for exercise every day?	n=15	<b>60%</b>	<b>44%</b>
	Could you use the phone every day (if you had credit)?	n=14	<b>43%</b>	<b>44%</b>
<b>EDUCATION, SKILLS AND WORK</b>				
16.1	In this prison, is it easy to get into the following activities:			
	Education?	n=104	<b>32%</b>	<b>61%</b>
	Vocational or skills training?	n=101	<b>24%</b>	<b>50%</b>
	Prison job?	n=100	<b>25%</b>	<b>63%</b>
	Voluntary work outside of the prison?	n=102	<b>5%</b>	<b>9%</b>
	Paid work outside of the prison?	n=102	<b>5%</b>	<b>4%</b>
16.2	In this prison, have you done the following activities:			
	Education?	n=99	<b>70%</b>	<b>92%</b>
	Vocational or skills training?	n=97	<b>63%</b>	<b>78%</b>
	Prison job?	n=94	<b>73%</b>	<b>90%</b>
	Voluntary work outside of the prison?	n=92	<b>46%</b>	<b>39%</b>
	Paid work outside of the prison?	n= 94	<b>44%</b>	<b>32%</b>
	<i>For those who have done the following activities while in this prison, do you think they will help you on release:</i>			
	Education?	n=69	<b>70%</b>	<b>72%</b>
	Vocational or skills training?	n=61	<b>69%</b>	<b>74%</b>
	Prison job?	n=69	<b>45%</b>	<b>60%</b>
	Voluntary work outside of the prison?	n=42	<b>67%</b>	<b>67%</b>
	Paid work outside of the prison?	n=41	<b>68%</b>	<b>58%</b>
16.3	Do staff encourage you to attend education, training or work?	n=92	<b>42%</b>	<b>71%</b>

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<b>PLANNING AND PROGRESSION</b>				
17.1	Do you have a custody plan? (This may be called a prisoner development plan or PDP)	n=104	35%	66%
	<i>For those who have a prisoner development plan:</i>			
17.2	Do you understand what you need to do to achieve your objectives or targets?	n=35	74%	91%
17.3	Are staff helping you to achieve your objectives or targets?	n=32	31%	66%
17.4	In this prison, have you done:			
	Offending behaviour programmes?	n=34	56%	60%
	Other programmes?	n=33	67%	72%
	One-to-one work (e.g. with a personal development coordinator)?	n=33	58%	58%
	A programme on a specialist unit?	n=30	23%	21%
	Temporary release - day or overnight release?	n=35	49%	55%
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	Offending behaviour programmes?	n=19	79%	75%
	Other programmes?	n=22	73%	78%
	One to one work (e.g. with an Offender Manager or psychologist)?	n=19	68%	68%
	Being on a specialist unit?	n=7	71%	64%
	Temporary release - day or overnight release?	n=17	71%	85%

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<b>PREPARATION FOR RELEASE</b>				
18.1	Do you expect to be released in the next 3 months?	n=106	<b>25%</b>	<b>16%</b>
	<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very/quite near to your home area or intended release address?	n=26	<b>50%</b>	<b>35%</b>
18.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, PDU officer, staff member, PDP coordinator)?	n=23	<b>17%</b>	<b>53%</b>
18.4	Do you need help to sort out the following for when you are released:			
	Finding accommodation?	n=24	<b>50%</b>	<b>63%</b>
	Getting employment?	n=24	<b>46%</b>	<b>59%</b>
	Setting up education or training?	n=23	<b>44%</b>	<b>63%</b>
	Arranging benefits?	n=24	<b>67%</b>	<b>71%</b>
	Sorting out finances?	n=21	<b>62%</b>	<b>53%</b>
	Support for drug or alcohol problems?	n=23	<b>70%</b>	<b>59%</b>
	Physical/mental health support?	n=24	<b>71%</b>	<b>71%</b>
	Social care support?	n=23	<b>52%</b>	<b>47%</b>
	Getting back in touch with family or friends?	n=22	<b>46%</b>	<b>35%</b>
18.4	Are you getting help to sort out the following for when you are released, if you need it:			
	Finding accommodation?	n=12	<b>25%</b>	<b>20%</b>
	Getting employment?	n=11	<b>27%</b>	<b>10%</b>
	Setting up education or training?	n=10	<b>20%</b>	<b>20%</b>
	Arranging benefits?	n=16	<b>19%</b>	<b>17%</b>
	Sorting out finances?	n=13	<b>8%</b>	<b>22%</b>
	Support for drug or alcohol problems?	n=16	<b>31%</b>	<b>20%</b>
	Physical/mental health support?	n=17	<b>24%</b>	<b>8%</b>
	Social care support?	n=12	<b>17%</b>	<b>13%</b>
	Getting back in touch with family or friends?	n=10	<b>40%</b>	<b>17%</b>
<b>FINAL QUESTION ABOUT THIS PRISON</b>				
20.1	Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing) always/most of the time?	n=105	<b>53%</b>	
20.2	Do you think your experiences in this prison have made you less likely to offend in the future?	n=105	<b>58%</b>	<b>64%</b>

# APPENDIX V STAFF SURVEY METHODOLOGY AND RESULTS

A survey of staff is now carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HMI Prisons researchers developed an online questionnaire consisting of structured questions exploring the experience of staff in the establishment. There are also four open questions which allow staff to describe their experiences and tell Inspectors anything else they think is important. These comments are not published or shared with the establishment.

## Distribution

HMI Prisons researchers provide a link to the survey embedded in a covering email. The covering email explains the purpose of the survey, that participation is voluntary and gives assurances about confidentiality and anonymity, enabling staff to give their informed consent to participate. This email is sent to the establishment with a request that it is forwarded to all staff working at the establishment; an HMI Prisons researcher is copied into this email to provide assurance. Additionally, researchers distribute postcards to wing offices for the attention of staff about details of the online survey which included the link.

## Survey response

The survey was sent to 590 email addresses at Maghaberry Prison. Staff were given seven days to complete the survey. We received a total of 322 completed questionnaires.

We cannot be sure that every member of staff working at the establishment received the email. Furthermore, because the online survey is set up to enable multiple responses from a single device (to facilitate participation by those who share computers), it is possible that individuals may have completed the questionnaire more than once. It is therefore not possible to provide an accurate response rate.

## Full survey results

The full survey results for staff at Maghaberry Prison provide a breakdown of responses for only the structured questions. Percentages have been rounded and therefore may not add up to 100%.

## STAFF SURVEY RESPONSES

### Q1 Please tick the option which most closely matches your role:

Frontline operational staff	263 (82%)
Operational manager	28 (9%)
Health care staff	3 (1%)
Education, skills and work staff	7 (2%)
Administrative staff	14 (4%)
Other staff	7 (2%)

### Staff wellbeing

#### Q2 How well is the establishment supporting staff wellbeing?

Very well	7 (2%)
Quite well	22 (7%)
Neither well nor poorly	37 (12%)
Quite poorly	72 (22%)
Very poorly	183 (57%)

#### Q3 How would you describe your morale at work:

Very high	5 (2%)
High	19 (6%)
Neither high nor low	20 (6%)
Low	70 (22%)
Very low	207 (64%)

### Prisoner wellbeing

#### Q4 Please indicate to what extent you agree or disagree with the following statements:

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Don't know
Reasonable steps are being taken to keep prisoners safe	81 (25%)	129 (40%)	58 (18%)	43 (13%)	9 (3%)
Prisoners are having enough time out of their cells	128 (40%)	91 (29%)	41 (13%)	34 (11%)	24 (8%)
Regime restrictions are proportionate for the current circumstances	71 (23%)	69 (22%)	41 (13%)	111 (35%)	23 (7%)

## Leadership in this establishment

<b>Q5</b>	<b>How clearly are the top priorities of this establishment communicated to you?</b>	
	Very clearly	18 (6%)
	Quite clearly	41 (13%)
	Not very clearly	84 (26%)
	Not at all clearly	111 (35%)
	I don't know the top priorities	66 (21%)
<b>Q5a</b>	<b>To what extent do you agree or disagree with this establishment's priorities?</b>	
	Strongly agree	10 (4%)
	Somewhat agree	49 (19%)
	Somewhat disagree	75 (30%)
	Strongly disagree	98 (39%)
	Don't know	21 (8%)
<b>Q6</b>	<b>Please indicate to what extent you agree or disagree that your knowledge and skills are sufficient to do your job well (e.g. training and development opportunities):</b>	
	Strongly agree	63 (20%)
	Somewhat agree	132 (41%)
	Somewhat disagree	68 (21%)
	Strongly disagree	57 (18%)
<b>Q7</b>	<b>How often do you meet with someone (a manager or mentor) to discuss how you are progressing in your role?</b>	
	More than once a month	9 (3%)
	Approximately once every three months	11 (3%)
	Approximately twice a year	31 (10%)
	Once a year or less	168 (53%)
	I have not had the opportunity to meet with someone	99 (31%)
<b>Q8</b>	<b>Please rate the quality of support you receive from your line manager:</b>	
	Very good	47 (15%)
	Good	64 (20%)
	Neither good nor poor	76 (24%)
	Poor	50 (16%)
	Very poor	82 (26%)

**Q9 Please use the scale to rate the following statements:**

	Always	Often	Occasionally	Never	Don't know
Governors/directors and senior managers in this establishment are approachable (e.g. they take time to listen)	17 (5%)	34 (11%)	124 (39%)	143 (45%)	3 (1%)
Governors/directors and senior managers in this establishment acknowledge and celebrate good work	7 (2%)	17 (5%)	104 (32%)	185 (58%)	8 (2%)
Governors/directors and senior managers set high standards of behaviour for staff	30 (9%)	56 (18%)	99 (31%)	119 (37%)	15 (5%)
Governors/directors and senior managers challenge poor behaviour by staff	32 (10%)	59 (18%)	144 (45%)	67 (21%)	17 (5%)

**Q10 Do you know what the formal procedure is to raise concerns (whistleblowing) in this establishment?**

Yes	138 (43%)
No	184 (57%)

**Q11 Have you formally raised concerns about this establishment?**

Yes	60 (19%)
No	262 (81%)

**Q12 Would you formally raise concerns if you had any?**

Yes	109 (42%)
No	70 (27%)
Don't know	83 (32%)

**Q14 Who or what organisation did you raise your concern to?**

*(Please select more than one if relevant)*

A colleague	25
A manager	52
Criminal Justice Inspection Northern Ireland	7
Independent Monitoring Board	3
Human resources	14
Education & Training Inspectorate	0
Regulation and Quality Improvement Authority	0
HM Inspectorate of Prisons	2
Trade union	27
Professional organisation	3
Police	3

**Q14 Who or what organisation did you raise your concern to?**

*(Please select more than one if relevant)*

Other	10
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**Q15 Were your concerns taken seriously?**

Yes	4 (7%)
No	39 (65%)
Don't know	17 (28%)

**Q16 Was any effective action taken in response to the concerns you had raised?**

Yes	4 (7%)
No	46 (78%)
Don't know	9 (15%)

**Q18 Have you ever witnessed staff behaving inappropriately towards prisoners at this establishment?**

Yes	114 (36%)
No	192 (60%)
Don't know	15 (5%)

**Q19 Have you ever witnessed staff behaving inappropriately towards each other at this establishment?**

Yes	185 (58%)
No	122 (38%)
Don't know	13 (4%)

Responses to Questions 13 and 17 have not been published. These asked for individual views.

**Criminal Justice Inspection  
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