Criminal Justice Inspection Northern Ireland
a better justice system for all

REPORT OF AN INDEPENDENT REVIEW OF PROGRESS AT MAGHABERRY PRISON

31 OCTOBER – 2 NOVEMBER 2023

FEBRUARY 2024

eti
The Education and Training Inspectorate
Promoting Improvement

The **Regulation** and **Quality Improvement** Authority

CONTENTS

LIST OF ABBREVIATIONS

AD:EPT	Alcohol and Drugs: Empowering People through Therapy
Belfast Met	Belfast Metropolitan College
CJI	Criminal Justice Inspection Northern Ireland
ETI	Education and Training Inspectorate
GOALS	Gaining Opportunities and Living Skills
HMI Prisons	His Majesty's Inspectorate of Prisons
IRP	Independent Review of Progress
ICT	Information and Communications Technology
ILP	Individual Learning Plan
MDT	Mandatory Drug Test
NIPS	Northern Ireland Prison Service
OBP	Offending behaviour programmes
PDM	Prisoner Development Model
PDP	Personal Development Plan
PDU	Prisoner Development Unit
PECCS	Prisoner Escort and Court Custody Service
PRISM	Prison Record Information System Management (computer system used by the NIPS)
QTL	Quick Time Learning
RQIA	Regulation and Quality Improvement Authority
SEHSCT	South Eastern Health and Social Care Trust
SPAR Evo	Supporting People at Risk Evolution

CHIEF INSPECTORS' FOREWORD

When we inspected Maghaberry Prison in October 2022, we found a prison where standards and outcomes were reasonably good in the healthy prison test of respect, not sufficiently good in safety and rehabilitation and release planning, and poor in purposeful activity. We identified 12 key concerns, five of which were deemed to be priority concerns that required immediate attention by leaders. We found weaknesses in adult safeguarding and the prison's procedures for supporting people at risk of self-harm and suicide, and no effective or co-ordinated plan to reduce the demand for and supply of drugs. Prisoners did not have regular and consistent access to high-quality education, skills and work activities, and not all were provided with effective support to guide them through their sentence or prevent future offending.

During this independent review of progress visit, all four inspection bodies: Criminal Justice Inspection Northern Ireland; His Majesty's Inspectorate of Prisons; the Regulation and Quality Improvement Authority; and the Education and Training Inspectorate worked together to measure the progress being made against the 12 key concerns that we had identified at the full inspection a year before. There had been reasonable progress against nine, insufficient progress against two, and no meaningful progress against one.

Steps had been taken to improve the approach to adult safeguarding. Leaders, however, had not effectively collaborated with partner agencies and key stakeholders to make sure their policy and strategy was effective in protecting adults at risk in custody, and we found cases where it was not effective. Leaders had introduced a robust early learning process to investigate and learn from serious incidents such as a death in custody. The installation of body scanners and the reintroduction of mandatory drug testing had helped to reduce the level of drugs being smuggled into Maghaberry Prison from the community. However, data indicated that there remained a significant problem with the trade of medication. Prison and health care leaders did not yet have a co-ordinated plan to tackle this issue, although the newly formed Drug Strategy Committee involved a wide range of relevant stakeholders, who we were assured would drive this agenda to make the prison safer.

Prisoners now had more regular and consistent access to education, skills and work activities to meet their rehabilitation and resettlement needs. The assessment of education needs had improved and a new employability hub supported prisoners in their efforts to seek work or training on release. There were still some gaps in the provision, including insufficient accredited qualifications in work, and prisoners needed more robust plans to help them progress and realise their potential.

Shortly after the full inspection in 2022, leaders had increased the number of staff in the Prisoner Development Unit and reduced the backlog of Personal Development Plans. However, the potential for further improvement was undermined by the redeployment of these operational staff to work on residential units that had been reopened to facilitate a significant increase in the population. Staff shortages in psychological services also affected the delivery of offending behaviour work and the rehabilitative needs of some prisoners were still not being met.

Overall, leaders had made reasonable progress in many important areas over the last year, but there was still much to do. While progress was reasonably good across most of the concerns, it was insufficient or poor against three of the five priority concerns, and we would urge leaders to refocus on these areas with some urgency. Their efforts were being thwarted by staff shortfalls and, although there was a strategy to recruit new staff, the increase in the population continued to stretch resources. Progress was slowed by an impasse on effective joint working between key partners at the most senior level within the Northern Ireland Prison Service and the South Eastern Health and Social Care Trust. This failure to engage constructively, sharing appropriate data and learning from each other, will be an obstacle to the delivery of important shared objectives if leaders do not take immediate steps to improve relationships.

Jacqui Durkin
Chief Inspector of Criminal Justice in Northern Ireland

February 2024

Charlie Taylor
HM Chief Inspector of Prisons in England and Wales

February 2024

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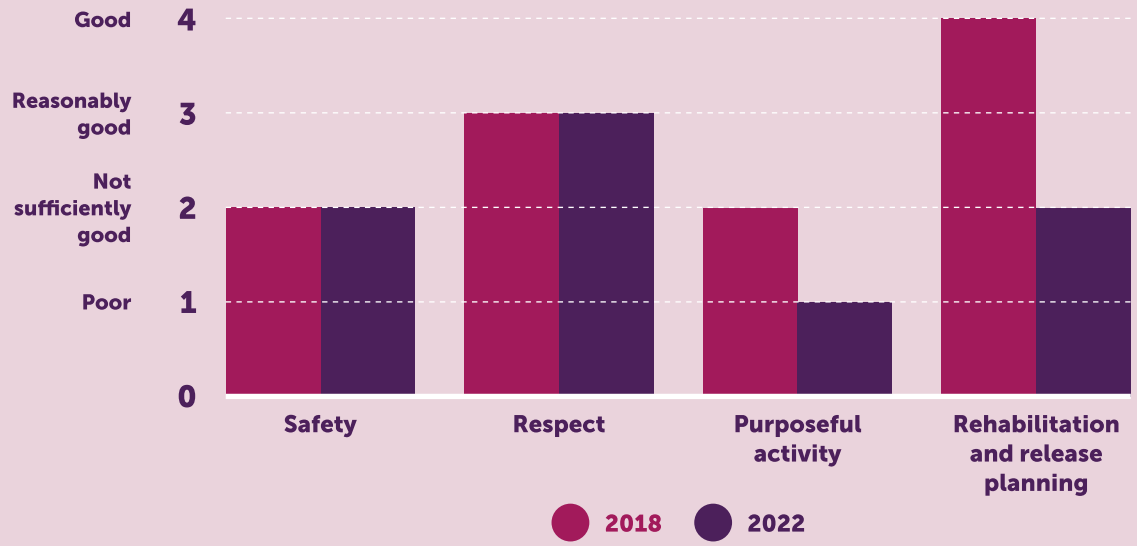
CHAPTER 1: INTRODUCTION

BACKGROUND

Criminal Justice Inspection Northern Ireland (CJI) published its report[1] of a full unannounced inspection of Maghaberry Prison in June 2023. The inspection, conducted from 20 September – 6 October 2022, found that outcomes had declined in two healthy prison tests[2] – Purposeful Activity and Rehabilitation and Release Planning. The assessment of Safety and Respect had remained unchanged from the previous inspection in 2018.

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



At the 2022 inspection, five priority concerns[3] and seven key concerns requiring improvement were identified to the Northern Ireland Prison Service (NIPS), the South Eastern Health and Social Care Trust (SEHSCT) which provides prison health care services

1 *CJI, Report of an Unannounced Inspection of Maghaberry Prison, 20 September-6 October 2022, published 16 June 2023* available at ***http://cjini.org/getattachment/0a5f532a-bac4-4c6b-9243-e74e0fe46d03/report.aspx***

2 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 His Majesty's Inspectorate of Prison's thematic review Suicide is Everyone's Concern, published in 1999. The tests are: safety, respect, purposeful activity and rehabilitation and release planning. Expectations set out the criteria for assessing the treatment and conditions in prisons and are available at https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/prison-expectations

3 *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 generated real improvements in outcomes for those detained in custody. 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. Further information explaining the change to how inspection findings are reported is* available at ***https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2022/05/From-recommendations-to-concerns-consultation-text-2.pdf***

and Belfast Metropolitan College (Belfast Met), the lead service provider of learning and skills delivery across the Northern Ireland prison estate.

The NIPS accepted the concerns identified in the report and provided an action plan to CJI detailing how the concerns would be addressed.

Independent Reviews of Progress (IRPs) were designed by His Majesty's Inspectorate of Prisons (HMI Prisons) to improve accountability to Ministers in England and Wales about the progress prisons make in addressing concerns in between inspections.

IRPs were adopted by CJI during 2023 to offer swifter assurance of progress made by Northern Ireland prisons against inspection concerns and to provide a more adaptable approach to prison assessment. IRPs focus on assessing activities that lead to improved outcomes for prisoners, identifying areas of progress, emerging challenges, and evaluating leadership and management responses.

As with full prison inspections, CJI worked in partnership with HMI Prisons, the Regulation and Quality Improvement Authority (RQIA) and the Education and Training Inspectorate (ETI) to conduct IRPs in Northern Ireland. HMI Prisons IRP methodology was adopted and customised for use in Northern Ireland (see Appendix 1).

IRPs contribute to monitoring places of detention as part of the UK National Preventive Mechanism, established in response to the United Kingdom's commitment to the Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment.

The progress made against each of the 12 concerns identified during the 2022 inspection was examined during this IRP.

Changes since the 2022 inspection

At the time of the IRP Maghaberry Prison held 200 more prisoners (1,254 compared with 1,050) than at the full inspection with 50% of men held on remand. As the male adult committal prison for Northern Ireland, there had been a significant operational impact because of the increased population. Just under 400 men continued to share cells and the prison had reopened older accommodation, previously criticised by Inspectors, to accommodate the increased number of committals.

The target staffing level had been increased since the last inspection but there remained a deficit between this and the actual number of staff in post (40) and just over 100 staff were not available for duty.

The Governor and Deputy Governor had remained unchanged but in recognition of the demands of the increased population, an additional Deputy Governor had been appointed on a temporary basis.

In October 2023, the NIPS initiated a review of the Prisoner Development Model (PDM). Among the drivers for the review were the lack of delivery of rehabilitative services as a result of the pandemic, the redeployment of Prisoner Development Unit (PDU) staff to other roles as the prisoner population continued to increase and the current financial climate and deliverability of the existing model. A review team was to be appointed in early 2024.

The IRP

The IRP was announced in August 2023 and a progress update was provided by the NIPS, the SEHSCT and Belfast Met to the joint inspection team during October 2023.

During a two-day visit, a range of evidence about the progress in implementing each concern was collected. Sources of evidence included observation, discussions with prisoners, staff and relevant third parties, documentation and data.

The information provided in the self-assessment and during on-site visits was reviewed and analysed and judgements were reached of the progress made against each recommendation.

CHAPTER 2: KEY FINDINGS

At this IRP visit, we followed up on the five priority concerns and seven key concerns from our most recent inspection in October 2022.

We judged that there was reasonable progress in nine concerns, insufficient progress in two concerns and no meaningful progress in one concern.

Figure 2: Progress on concerns from 2022 inspection (n=12)

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 IRP.

Improved outcomes were being achieved with patients through a tradeable medicines quality improvement project. This innovative and patient-centred approach aimed to reduce the number of medicine related incidents with patients who were actively engaged in achieving improved health and wellbeing outcomes (see response to priority concern 2).

Twenty prisoners took part in the Belfast Marathon relay in April 2023 at a specially designed course organised in Maghaberry Prison. The prisoners trained for a number of months, reflecting the focus of staff on the promotion of wellbeing, positive choices and rehabilitation (see response to priority concern 3).

Prisoners were given the opportunity to visit the library to record readings of books to celebrate Christmas and Fathers' Day which were sent to their children and grandchildren with a gift bag (see response to key concern 11).

Prisoners were able to explore addiction and mental health issues through a production by the Spanner in the Works theatre company, facilitated by the SEHSCT and funded by the Public Health Agency. They were given help to write their own play on the effect of custody and the impact on their families and to develop their literacy skills and self-confidence (see response to key concern 11).

CHAPTER 3: PROGRESS AGAINST CONCERNS

The following provides a brief description of our findings in relation to each concern identified in the full inspection in 2022.

PRIORITY CONCERNS

Suicide and self-harm prevention

PRIORITY CONCERN 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.

Status: Reasonable progress.

Leaders no longer waited for the Prisoner Ombudsman's or Coroners' reports to take action following a death in custody. A corporate Quick Time Learning (QTL) process had been introduced in mid-2023 and had since been used to investigate two deaths in custody and other serious incidents.

The new process was good and it enabled robust monitoring of the implementation of recommendations arising from investigations.

However, the fundamental principles of QTL were not yet fully embedded. It had taken two months to publish the QTL report into one suspected self-inflicted death and it did not draw out learning points that could be implemented quickly to prevent future similar incidents.

The SEHSCT had clear arrangements for reviewing incidents. When a death in custody occurred that involved health care staff, the records for the patient were promptly reviewed to determine any early learning. Where learning points were identified, they were recorded and disseminated electronically to all prison health care staff. Learning generally related to clinical practice and was not therefore shared with the NIPS.

Reports of a serious incident, known as serious adverse incident notifications, had been appropriately completed and escalated in a timely way. This was in accordance with the regional procedure for the reporting and follow up of serious adverse incidents established by the then Health and Social Care Board in November 2016.

Effective governance arrangements for incident management confirmed that the SEHSCT were not waiting for the Prisoner Ombudsman's or the Coroners' reports before identifying and disseminating immediate learning.

We considered that Maghaberry Prison had made reasonable progress in this area.

SECURITY

PRIORITY CONCERN 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.

Status: Reasonable progress.

The installation of two body scanners in mid-2023 had enabled the detection of and prevented the ingress of illicit substances. Random drug testing had resumed, and leaders analysed this data to identify trends and hotspots. However, the threat posed by illicit substances and prescription medication remained and substance misuse was commonplace: over the past six months 26% of random tests had been positive.

Medications were the most commonly found substances, indicating a level of success in preventing the ingress of illicit substances from the community, but highlighting an internal problem with the trade and theft of medication. Improved outcomes were being achieved with patients through a tradeable medicines quality improvement project led by the SEHSCT. From a review of incident data, the SEHSCT had engaged patients and partner organisations to review and reduce the availability of medicines at high risk of abuse or trading within the prison population. Early results had showed the project to be highly successful, with a 41% overall reduction in pregabalin prescribing from April 2023 to October 2023, and a significant number of patients on a reduced dose. This innovative and patient-centred approach aimed to reduce the number of medicine related incidents with patients who were actively engaged in achieving improved health and wellbeing outcomes.

Although the SEHSCT was taking important steps to reduce the availability of medication at risk of abuse or tradability, leaders had not yet devised a co-ordinated plan involving key departments, such as health care, security and residential staff, to manage the effects on the population of withdrawal. This was necessary to counteract the inevitable risks of increased violence, bullying and debt.

A new corporate drug strategy had been launched by the NIPS in September 2023. A local plan for Maghaberry Prison had been introduced at the same time but was underdeveloped and lacked detail. The prison's new Drug Strategy Committee had held its first monthly meeting in October 2023. A wide range of stakeholders from different areas of the prison were involved and leaders were clear that the first task was to develop the local strategy to identify and address issues specific to Maghaberry Prison. This work could be further strengthened by closer working with the SEHSCT.

The new Corporate Strategy placed appropriate focus on reducing demand as well as supply, which was positive. It appropriately highlighted the need to engage prisoners in purposeful activity, help them to maintain contact with their families, and make sure that prisoners could easily be referred to the substance misuse service.

We considered that Maghaberry Prison had made reasonable progress in this area.

EDUCATION, SKILLS AND WORK ACTIVITIES

PRIORITY CONCERN 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.

Status: Reasonable progress.

Education, skills and work activities were now given high priority and the NIPS, in partnership with Belfast Met as the lead provider, had ensured that prisoners now had regular and consistent access to education, skills and work activities. For example, the learning and skills centre (the centre) had been closed on only two occasions in the previous five months due to NIPS staffing levels, in comparison to the previous inspection in October 2022 when it had been closed since July 2022. At the time of the IRP, a minority of eligible prisoners (202, 19%) were not scheduled to participate in education, skills or work or attend the gym, which was an improvement from the previous inspection when a majority (495, 54%) were not participating in these activities.

The staff described to Inspectors the benefits for prisoners' rehabilitation, resettlement and wellbeing. The very good specialist accommodation and resources available in the centre were being used more. Use of the centre and the workshops was monitored and recorded on a daily basis, with disruption kept to a minimum. During a learning walk and also through observation, Inspectors engaged with prisoners and staff across bricklaying, cookery, horticulture, numeracy, painting and decorating, and tiling.

The Belfast Marathon had taken place on 30 April 2023. Careful planning by the NIPS and Belfast Met staff with Belfast Marathon organisers resulted in 20 prisoners successfully taking part in the Belfast Marathon relay on the same day at a specially designed course organised in Maghaberry Prison. The prisoners trained for a number of months in preparation, reflecting the focus of staff on the promotion of healthy minds and bodies leading to positive choices and a key to rehabilitation.

Prioritisation and allocation of places in learning and skills had appropriately been given to those prisoners with an established release date to give them the opportunity to leave the prison system better prepared for resettlement and employment. The key performance indicators needed to capture progress with accredited outcomes, the distance travelled by prisoners and the development of wider skills, dispositions and wellbeing. It was important to make sure that resources were used efficiently and effectively in future to achieve maximum benefit for as many prisoners as possible.

Priority was appropriately given to effecting improvement in education induction and assessment. A new process had been introduced in recent months which linked to the new committal process in Bann House. This involved a tour of the centre, including the library, an education assessment and a one-to-one conversation focused on employability.

A classroom in the centre had been repurposed as an employability hub. A number of prisoners had the opportunity to complete job searches, job applications, writing Curriculum Vitaes, interview practice and video calls with careers services of the further education colleges which would be closest to them on release. In addition to the links established with employers through Belfast Met, the NIPS was also at an early stage of establishing links with other employers.

The special educational needs specialist from Belfast Met was working to progress appropriate provision and/or support for prisoners who had particular barriers to learning and work. There was more use of mentors in the prison population to provide peer support and encouragement to engage in purposeful activity.

While processes had been developed, individual prisoner learning and progression planning were still not co-ordinated well enough across the prison functions. Collective planning and monitoring needed to be progressed further. A consistent template for Individual Learning Plans (ILPs) had now been agreed across the prison. There was insufficient evidence that the information recorded at committal by the PDU on the Prison Record Information System Management (PRISM) for the Personal Development Plan (PDP) was shared and used effectively. Salient information, including qualifications and employment history, was not shared or used effectively when prisoners applied for courses and work or when they transitioned between prison sites. In addition, it was not used to pre-populate baseline information in the ILPs.

We considered that Maghaberry Prison had made reasonable progress in this area.

PROTECTION OF ADULTS AT RISK[4]

PRIORITY CONCERN 4

Not all serious safeguarding incidents investigated by leaders had been managed in accordance with Northern Ireland Prison Service policy.

Status: No meaningful progress.

An adult safeguarding champion had been appointed who had initiated monthly adult safeguarding meetings. Reports of safeguarding concerns were recorded and copied to the NIPS Head of Prisoner Wellbeing, and all reported safeguarding incidents were now tracked. Quality assurance procedures were not sufficiently robust or independent and trends were not always analysed.

Notices for staff and prisoners described how to raise a concern, but understanding about adult safeguarding was limited among staff. The NIPS adult safeguarding policy had been revised, but partners were not consulted to make sure that it was effective. The NIPS policy did not clearly identify or give examples of what might prompt a referral. Governors had received safeguarding training and all NIPS recruits had received safeguarding training delivered by accredited Prison Service College trainers. A plan to deliver safeguarding training in conjunction with partner agencies and extend training to all staff was needed.

Leaders at Maghaberry Prison had not sought advice or consulted the SEHSCT Adult Protection Gateway Team with any of the safeguarding incidents that we reviewed. The NIPS policy guided prison staff to refer certain incidents to the SEHSCT Adult Protection Gateway Team, but we were told that the SEHSCT Adult Protection Gateway Team would not accept safeguarding referrals from the prison setting. The NIPS and the Department of Health had liaised about gaps in adult safeguarding approaches in the prison, but resolution was urgently required.

Whether prisoners were considered to be 'adults at risk of harm' and/or 'in need of protection' due to their personal characteristics and living circumstances was not evident either in the NIPS policy or any of the safeguarding reports that we reviewed. Serious safeguarding concerns that had been investigated by leaders contained inadequate rationale, or no explicit consideration of adult safeguarding criteria or whether the threshold for referral had been met. Safety needs, interim protection measures and how these protected individuals from risk of harm lacked sufficient detail.

4 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).

Some adult safeguarding concerns had been referred to the Police Service of Northern Ireland Liaison Officer at the prison, but expectations about when to contact the police were unclear.

We considered that Maghaberry Prison had made no meaningful progress in this area.

REDUCING RISK, REHABILITATION AND PROGRESSION

PRIORITY CONCERN 5

Not all prisoners were provided with effective support to guide them through their sentence or prevent future offending.

Status: Insufficient progress.

Leaders had responded to this concern reasonably promptly. They had embarked on a recruitment process to increase the number of co-ordinators in the PDU and by March 2023, 10 new staff had been recruited, bringing the Unit up to strength.

Arrangements had also been made for the prisoner needs profiles, that were prepared when a prisoner was first committed to Maghaberry, to be completed by staff from a voluntary sector provider. This released capacity among PDP co-ordinators.

PDU managers had directed co-ordinators to focus on addressing the backlog of prisoners who did not have an up-to-date PDP and at the time of the visit most prisoners had one.

However, much of the potential to improve the support provided to guide prisoners through their sentence was undermined by the continuing and regular cross-deployment of co-ordinators to operational duty elsewhere in the prison. Population pressures had forced leaders to reopen old accommodation which had to be staffed. During September 2023, an average of 10 co-ordinators were cross deployed each day, which represented more than 30% of the PDU capacity.

Co-ordinators told us that they were often only notified of a cross- deployment on the day, which sometimes meant they had to cancel planned contact with prisoners. This was a source of frustration for the co-ordinator and the prisoner. In addition, the reduced time available for PDU duties meant that planned contacts that did go ahead were often brief and did not afford enough time to get to know the prisoner. This compromised their ability to prepare summary reports, for example for prisoners on the lowest level of the incentives scheme who needed help to progress.

Most prisoners now had an up-to-date PDP, but the detail was often extremely brief with generic targets to comply with prison rules and engage with the incentives scheme. Very few plans included targets relevant to the risks posed by the individual prisoner or to addressing their offending behaviour. Most of the plans that we reviewed were not clearly informed by, nor linked to, the learning goals that had been identified during induction. Managers had not yet implemented an effective process to ensure that PDPs met an appropriate level of quality.

It was positive that co-ordinators had been trained to deliver useful short interventions such as a victim impact course and GOALS (Gaining Opportunities and Living Skills - focussed on improving self-esteem and personal responsibility), both of which were appropriate for most prisoners. However, delivery of GOALS required two co-ordinators, and the regular cross-deployment from the PDU meant that only 20 prisoners had benefited from the intervention during the previous six months.

We saw a few examples of meaningful, structured offence-related work facilitated by Probation Board for Northern Ireland PDP co-ordinators and, during the previous 12 months, 18 prisoners had completed structured offence-related work with psychology staff.

There were few offence-related interventions for most of the population. Staff shortages in psychology services meant that some accredited offending behaviour programmes (OBPs) had not been delivered for several years. There was no evidence that leaders had considered alternative delivery models. During the previous 12 months, only five prisoners had completed an accredited OBP aimed at reducing aggressive behaviour.

Despite the very small number of prisoners who had completed OBPs, waiting lists were small. From a population of about 600 sentenced prisoners, only 28 had been referred for the thinking skills programme during the previous 12 months. There was no systematic process to assess the programme needs of prisoners.

The security department was responsible for reviewing a prisoner's security category, but a recommendation was required from the prisoner's PDP co-ordinator in the form of a report supporting their recommendation for progression from category C to D. Only 15 prisoners had been re-categorised to category D during the previous 10 months.

During the previous 12 months, 127 prisoners had been referred to the Parole Commissioners for Northern Ireland, but only 13 had been directed for release. The reason for rejections had not been analysed to identify further work that was needed to improve opportunities to progress.

There were credible plans to improve resettlement support for prisoners in 2024, such as arranging for Northern Ireland Housing Executive staff to work in the prison alongside an Extern project which offered through-the-gate support for those with mental health or substance use needs.

The proposal by the Director General of the NIPS to review and improve the PDM across all prisons in Northern Ireland was supported by leaders at Maghaberry Prison. Work was due to start later in 2023.

We considered that Maghaberry Prison had made insufficient progress in this area.

KEY CONCERNS

Time out of cell[5]

KEY CONCERN 6

Time out of cell for prisoners in Bann House was very poor at an average of just 90 minutes a day.

Status: Reasonable progress.

Following the full inspection, leaders had revised the induction process to make it more informative and to maximise the time that prisoners were engaged in purposeful activity. The process had been improved by using the Donard Centre for several induction sessions, which offered a more comfortable environment and more opportunity to associate with peers. The induction programme now incorporated an improved session with the learning and skills team, which included an assessment and tour of the learning facility (see response to priority concern 3).

Updated induction timetables, drafted in discussion with various departments, set out sessions for prisoners at three distinct stages of their induction. This provided almost five hours out of cell each day for many prisoners, although this was not the case for all. The timetable for prisoners on Bann 5 and 6, the third tier of the induction programme, included very little structured activity in the afternoon. A few of these prisoners were invited to attend ad hoc assessments or appointments, but at the time of our visit about a third were locked up during the afternoon.

Mainstream and vulnerable prisoners were located in Bann House, which led to some vulnerable prisoners staying in their cells during association rather than mixing with others. This was concerning because these prisoners often had to stay in Bann House longer waiting for a space on a vulnerable prisoner wing.

The association period for all prisoners had been increased from one hour at the time of the inspection to two hours. This could be spent on the yard, in the recreation room containing exercise equipment and games, or unlocked in their cell. Most prisoners could now eat out for one of their main meals which increased time out of cell and encouraged socialising.

5 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.

The prison had no accurate method of recording time out of cell for each prisoner in Bann House but had credible plans to introduce hand-held technology that would make this easier.

We considered that Maghaberry Prison had made reasonable progress in this area.

SUICIDE AND SELF-HARM PREVENTION

KEY CONCERN 7

Oversight and management of prisoners on Supporting People At Risk plans were weak. Use of anti-ligature clothing was not always proportionate nor was its use appropriately authorised or recorded.

Status: Reasonable progress.

The oversight and management of prisoners on Supporting People at Risk evolution plans (SPAR Evo) had improved and were now reasonably good.

The safety team prepared good briefings before each case review to make sure that staff conducting the reviews had quick and easy access to relevant information on individual prisoners' histories and risks, to assist their decision making.

Quality assurance of SPAR Evo plans had improved. Both good and poor practice was identified and had resulted in refresher training for Senior Officers and Governors. Plans that we reviewed were reasonable, but some lacked an appropriate health care contribution or only contained generic actions that were not tailored to individuals' needs. Most prisoners we spoke to who were currently or formerly managed under SPAR Evo plans said they felt cared for by their landing officers, but that they struggled to access mental health or substance misuse support.

Inspectors were told that the NIPS and the SEHSCT had commissioned an independent review of the SPAR EVO arrangements and its associated mechanisms, incorporating consultation with staff and patients. A report was expected in early 2024.

Special accommodation and anti-ligature clothing were still used far more frequently than we usually see, and too many instances remained where the rationale for their use was not clear or proportionate. However, quality assurance was now robust and these issues were identified and addressed with the Governors responsible.

We considered that Maghaberry Prison had made reasonable progress in this area.

MENTAL HEALTH CARE

KEY CONCERN 8

Access to psychologically informed treatments was insufficient to meet the needs of the prison population. There was no specialist personality disorder provision.

Status: Reasonable progress.

During 2023, the SEHSCT and the Strategic Planning and Performance Group (formerly the Health and Social Care Board) had determined the future provision for psychological and personality disorder therapies and had made eight recommendations for delivery. This work was completed through an associated Task and Finish Group, that the NIPS contributed to, and was informed by the RQIA's Review of Vulnerable Persons detained in Northern Ireland Prisons report, published in 2021[6].

The recommendations included the submission of two business cases, one to expand the psychological service over the next three years, the other proposing the development of a personality disorder service across prisons in Northern Ireland. Since the last inspection, both business cases had been prepared and submitted to the co-chairs of the Task and Finish Group for consideration, but funding decisions had not yet been made to deliver these priorities.

Despite funding constraints and limited resources in the health care team, the SEHSCT had taken steps to address some of the unmet needs of patients who could benefit from psychologically informed treatments and/or a specialist personality disorder service. Efforts were being made to continue the provision of one-to-one psychological therapy treatments, but lengthy waiting times remained with 40 individuals waiting for treatment at the time of this review. A number of prisoners who were being managed in the prison's Care and Supervision Unit also needed access to psychological therapies.

As an interim measure, the SEHSCT had redirected existing resources to provide an additional psychology resource and clinical psychology interventions. Advice on individual treatment plans and pathways was now available in addition to the one-to-one and group therapy treatments. A serious case review process had been implemented which included a care pathway for patients presenting with a personality disorder. A culture of positive role modelling had been adopted to encourage other staff to respond in more therapeutic ways to prisoners who presented with complex behaviours and needs. Despite this investment from the SEHSCT, the service remained significantly under-resourced and did not adequately address the complex needs of the increased prison population.

We considered that Maghaberry Prison had made reasonable progress in this area.

6 *RQIA, Review of Services for Vulnerable Persons Detained in Northern Ireland Prisons, October 2021* available at ***https://www.rqia.org.uk/RQIA/files/95/955cfa4a-5199-4be7-9f1a-801e1369ce84.pdf***

PRIMARY CARE AND INPATIENT SERVICES

KEY CONCERN 9

Prisoners failed to attend all of their prison health care and hospital appointments.

Status: Reasonable progress.

Although data had not changed significantly, action had been taken since the full inspection to improve attendance at internal health care and external hospital appointments.

The NIPS and the SEHSCT had agreed a joint procedure for the management of external appointments, which was a welcome step. Missed health care appointments were being rescheduled as far as possible to avoid patient discharges due to non-attendance.

Extensive scrutiny of data had been undertaken by the NIPS and health care leaders to determine the reasons for non-attendance and work to progress this was continuing. The accuracy of data capture and the recording of reasons for non-attendance had been recognised as areas for improvement. Refusal to attend on the day had been identified as the reason for 30 to 40% of non-attendances.

In September 2023, a standard operating procedure had been approved which contained expectations for residential and reception staff if a prisoner refused to attend an external appointment at short notice. This included encouraging attendance, recording requirements and arrangements for health care staff to speak to the prisoner.

An additional temporary Deputy Governor at Maghaberry had been appointed with responsibility for the Prisoner Escort and Court Custody Service (PECCS). This had enhanced the co-ordination and monitoring of the capacity to meet requirements. Court business influenced PECCS capacity to escort prisoners to external appointments and measures had been introduced to monitor the impact of this. Staff shortages had been a key pressure and additional PECCS staff had been recruited recently, with a further recruitment scheme in progress.

We considered that Maghaberry Prison had made reasonable progress in this area.

SOCIAL CARE

KEY CONCERN 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.

Status: Reasonable progress.

A scoping exercise had been completed in relation to commissioning for social care needs in the prison population. It had identified that significant investment was required to expand the remit of the SEHSCT to include personal and social care. An interim solutions proposal covering personal care had been submitted to the Department of Health and the Department of Justice for consideration and a funding decision.

A changing demographic in the population had increased the need for individual care packages and it was recognised that the complexity of cases and the demand for 24-hour support would continue to increase with the growing prison population. The SEHSCT had made arrangements to identify those prisoners who might need assessments of personal and social care needs. Nursing, occupational therapy, physiotherapy and speech and language therapy assessments were carried out where indicated and care plans had been put in place as an interim measure. The SEHSCT were responsible for making contact with the Health and Social Care Trust in the area where the prisoner originated to co-ordinate and progress the provision of a care package under care management arrangements.

Independent domiciliary care agency staff were visiting on a contractual basis to deliver personal care commensurate with service provision in a community setting. Monitoring and governance oversight arrangements were not sufficiently robust.

We considered that Maghaberry Prison had made reasonable progress in this area.

EDUCATION, SKILLS AND WORK ACTIVITIES

KEY CONCERN 11

There were gaps in the curriculum offer to prisoners, such as Information and Communications Technology and music, and not enough collaborative work with external partners.

Status: Insufficient progress.

The service level agreement between the NIPS and Belfast Met remained in place. There were too few places for prisoners in practical workshops and the pace of delivery both in classes and workshops was too slow. This needed to be investigated and addressed to ensure better outcomes and maximise opportunities for prisoners.

A strategic prisoner activity forum (the forum) had been established very recently, with key stakeholders involved in co-ordinating the delivery of the core and enriched curriculum delivered by Belfast Met and the activities delivered by a diverse range of partners and voluntary groups. The group had not yet, however, articulated a coherent and shared strategy necessary for the planning, delivery and progression of services and activities.

An interim review of the curriculum led by Belfast Met had been carried out in December 2022, and a further substantive review was due for completion by December 2023. This further review would need to take account of a strategy for services and activities when developed by the forum, as well as addressing the too few places for prisoners in practical workshops and the pace of delivery in classes and workshops.

Information and Communications Technology (ICT) essential skills remained a gap in the curriculum. Recruitment of tutors to ICT had proved very challenging. The waiting list for ICT had increased from 47 to 71 prisoners since the inspection, which was concerning given the impact on life chances of the development of ICT skills.

Music was now provided by the Prison Fellowship and the identified gaps in provision at the Mourne complex were being addressed. There was also additional capacity in barbering. Therapeutic interventions continued to operate in the Donard Centre, supporting prisoners' mental health and wellbeing.

There were a number of good examples of partnership working which provided prisoners with beneficial activities, experiences and opportunities to develop a range of skills. For example, in partnership with NIACRO and the Mothers' Union, the NIPS gave prisoners the opportunity to come to the library to record their reading of 'The Night Before Christmas' for their children or grandchildren. The recording, a copy of the book and a gift bag for Christmas had been provided to each child in December 2022. In June 2023, prisoners were able to record their reading of 'Jack and the Beanstalk' for Father's Day which was included in a similar gift bag. These opportunities helped prisoners to maintain positive relationships with their children or grandchildren.

Prisoners were able to explore difficult issues with the help of the Spanner in the Works theatre company. The company had performed its play 'Yellow Pack' to an audience of staff, partner agencies and prisoners in February 2023. The play had highlighted addiction and mental health issues and the cost-of-living crisis. In June 2023, the theatre company in partnership with the SEHSCT had worked with a number of prisoners to write their own play focused on coming into custody and the impact on their families. The prisoners had staged the play in the centre auditorium, to an audience of staff and prisoners. This encouraged the prisoners to reflect on the impact of their actions and supported the development of their literacy skills and self-confidence.

While there had been developments in collaborative work with external partners, there was insufficient progress in addressing the ICT gap in the curriculum, the number of places available for prisoners in practical workshops remained too low, the pace of delivery in classes and workshops was too slow and there was a lack of a coherent and shared strategy necessary for the planning, delivery and progression of services and activities.

We considered that Maghaberry Prison had made insufficient progress in this area.

KEY CONCERN 12

There were insufficient accredited qualifications available in work activities.

Status: Reasonable progress.

A mapping exercise had been completed to identify qualifications linked to areas of work. The curriculum offer had been enhanced in the areas of health and safety, manual handling and basic hygiene. A range of suitable short, accredited courses at levels 1 and 2 were now completed by prisoners working as house orderlies, in the laundry and recycling. These were valuable qualifications for achieving employment on release.

Active recruitment of tutors to recycling, stores and warehousing was in progress and would broaden the opportunity to gain qualifications in these work areas. The accreditation of qualifications in work activity roles was being developed in line with the provision and kept under review.

More prisoners were in employment than at the last inspection. There were 25% more house orderlies, and more prisoners were involved in a project to take apart old lateral flow test kits, the extension of recycling across the prison and a barber mentor programme. Regular rotation of job roles was necessary to ensure that more prisoners could access roles that were meaningful and matched to individual needs and interests.

We considered that Maghaberry Prison had made reasonable progress in this area.

CHAPTER 4: SUMMARY OF JUDGEMENTS

A list of the concerns followed up at this visit and the judgements made.

PRIORITY CONCERNS

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.

Reasonable progress.

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.

Reasonable progress.

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.

Reasonable progress.

Not all serious safeguarding incidents investigated by leaders had been managed in accordance with Northern Ireland Prison Service policy.

No meaningful progress.

Not all prisoners were provided with effective support to guide them through their sentence or prevent future offending.

Insufficient progress.

KEY CONCERNS

Time out of cell for prisoners in Bann House was very poor at an average of just 90 minutes a day.

Reasonable progress.

Oversight and management of prisoners on Supporting People At Risk plans were weak. Use of anti-ligature clothing was not always proportionate nor was its use appropriately authorised or recorded.

Reasonable progress.

Access to psychologically informed treatments was insufficient to meet the needs of the prison population. There was no specialist personality disorder provision.

Reasonable progress.

Prisoners failed to attend all of their prison health care and hospital appointments.

Reasonable progress.

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.

Reasonable progress.

There were gaps in the curriculum offer to prisoners, such as Information and Communications Technology and music, and not enough collaborative work with external partners.

Insufficient progress.

There were insufficient accredited qualifications available in work activities.

Reasonable progress.

APPENDIX 1
IRP METHODOLOGY

IRPs take place at the discretion of the Chief Inspectors when a full inspection suggests the prison would benefit from additional scrutiny and focus on a limited number of the concerns raised at the inspection.

IRPs do not result in assessments against the healthy prison tests. The healthy prison tests are safety, respect, purposeful activity and rehabilitation and release planning. For more information see HMI Prisons website: **https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations.**

The aims of IRPs are to:

- provide an independent evidence-based assessment of how the prison is progressing against the priority and key concerns or recommendations (prior to May 2022) identified at the previous inspection;
- assess progress in terms of outcomes for prisoners in the areas of main concern;
- support improvement;
- identify any emerging difficulties or slippage in progress at an early stage; and
- assess the sufficiency of the leadership and management response to our main concerns at the previous inspection.

This report contains a summary from the Chief Inspectors and a brief record of the findings in relation to each concern/recommendation which was followed up. The reader may find it helpful to refer to the report of the full inspection, carried out from 20 September - 6 October 2022 available on the CJI website at: **https://cjini.org/getattachment/0a5f532a-bac4-4c6b-9243-e74e0fe46d03/report.aspx**

IRPs are announced at least three months in advance and usually take place eight to 12 months after a full inspection. When IRPs are announced, a number of concerns Inspectors intend to follow up (usually no more than 15) are identified. Depending on the concerns to be followed up, IRP visits may be conducted jointly with the RQIA and ETI. This joint work ensures expert knowledge is deployed and avoids multiple inspection visits.

Each concern followed up during an IRP is given one of four progress judgements:

No meaningful progress
Managers had not yet formulated, resourced or begun to implement a realistic improvement plan to address this concern.

Insufficient progress

Managers had begun to implement a realistic improvement strategy to address this concern but the actions taken since our inspection had not yet resulted in sufficient evidence of progress (for example, better and embedded systems and processes).

Reasonable progress

Managers were implementing a realistic improvement strategy to address this concern and there was evidence of progress (for example, better and embedded systems and processes) and/or early evidence of some improving outcomes for prisoners.

Good progress

Managers had implemented a realistic improvement strategy to address this concern and had delivered a clear improvement in outcomes for prisoners.

The assessments made by the RQIA and ETI under their respective frameworks contribute to the Inspection Team's judgements of progress made during IRPs.

APPENDIX 2
INSPECTION TEAM

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A team of ETI Inspectors inspected and reported on progress against education, skills and work recommendations.

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