



**ANNUAL REPORT
FOR
HMP CARDIFF**

REPORTING PERIOD

1ST SEPTEMBER 2015 – 31ST AUGUST 2016

Statutory Role of the Independent Monitoring Board

The Prison Act 1952 and the Immigration and Asylum Act 1999 require every prison and IRC to be monitored by an independent board appointed by the Secretary of State from members of the community in which the prison or centre is situated.

The Board is specifically charged to:

- (1) Satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release.
- (2) Inform promptly the Secretary of State, or any official to whom he/she has delegated authority as it judges appropriate, any concern it has.
- (3) Report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively its members have right of access to every prisoner and every part of the prison and also to the prison's records.

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Description of HMP Cardiff

HMP Cardiff is situated in the heart of the City. It is a men's Category B local/training prison and largely serves South East Wales and the South Wales Valleys. Although the prison continues to accommodate a small number of prisoners serving life or IPP sentences, it predominantly provides for prisoners serving short term sentences, remand prisoners and prisoners awaiting sentence. The prison has a Certified Normal Accommodation of 532 and an operating capacity of 820, with prisoners overwhelmingly accommodated two within each cell. The prison opened in 1832 and a large part of the accommodation continues to comprise of three Victorian wings. A major programme of refurbishment in 1996 resulted in the opening of three new accommodation wings. The prison also now includes a range of other facilities, including a gym, a series of workshops, classrooms and a healthcare unit.

Cardiff's regime includes full time education, employment in the prison workshops and training courses. There is a resettlement unit that offers prisoners various offending behaviour programmes and work based courses. A detoxification unit also holds short term prisoners in preparation for release.

A range of public and commercial providers are responsible for delivering services within the prison. Health services are provided by Cardiff and Vale NHS Trust, learning and skills are provided by National Offender Management Service (NOMS) in Wales and site maintenance by GeoAmey. Other services relying on such providers from outside the prison include escort services and community rehabilitation. A number of voluntary organisations, such as The St Giles Trust and PACT, also provide services.

Executive Summary

Undoubtedly the main strength of HMP Cardiff is the dedication of many of its staff and the positive relationships maintained between the staff and prisoners. In addition, there are other strengths, which are described in this report, such as educational provision, the range of purposeful activities available, aspects of health care and aspects of safer custody.

There are, however, a number of serious concerns, the most prominent of which is the shortage of staff within the prison. This shortage has a pervading effect as many prison staff believe that they cannot perform their duties to the standard which they believe is proper, the result of which is a deep crisis of morale. Staff shortages have resulted in a severely restricted regime in which prisoners are locked in cells for unacceptable periods of time, with limited opportunities for education and purposeful activity. Staff shortages have also had a marked detrimental effect on other aspects of the prison's work, such as sentence planning, rehabilitation and measures to reduce the availability of drugs. Unforeseen events, such as escorts and hospital bed watches, can have a sudden and major impact on the planned regime, resulting in strained relations and potential disorder.

There is a serious concern in relation to Reception and the arrival of groups of prisoners late into the evening. There are issues of decency, with prisoners waiting for excessive periods in vans. There is also a concern relating to safety. Reception staff are required to work excessive hours and there have been occasions where important screening processes have been conducted in inappropriate spaces or hurriedly.

One issue raised in last year's report relating to decency and the prison premises has not been resolved as many cells still do not have screening around toilets. There are other issues relating to the prison premises which have a detrimental effect on decency within the prison, such as dampness in cells and the non-functioning of showers and toilets on wings. There is a major issue with rising damp in the Healthcare Centre. Arrangements for maintenance appear to be excessively slow and bureaucratic.

The provision of kit, such as towels, bedding and underwear is a significant issue within the prison affecting decency. The amount of kit supplied to wings is often not adequate for the number of men accommodated. Some wings overcome the problem through the use of wing based washing machines, but the provision of these is erratic and installation is protracted.

The management of diversity is not well developed. Structures to manage diversity are in existence, but the practical operation of processes is extremely limited and there is no consistent leadership; staff shortages are one significant factor in this situation.

Equality and Inclusion

It was agreed that members of the Senior Management Team should take the lead on Protected Characteristics but, since the change of personnel at this level, this agreement does not appear to have been reinstated. The Go audit report also noted that equality training, especially for new members of staff needed to be improved and incorporated into the induction training. Existing staff need to complete the mandatory online training. This training is still not being taken up, despite reminders each month.

It is proposed that quarterly or bi-monthly meetings should be held with Diversity Managers from Welsh prisons to discuss Discrimination Incident Reporting Forms and share lessons learnt. It is also proposed that a copy of the DIRFs should be produced in the Welsh language.

The Immigration Enforcement leaflet issued by the Home Office is to be translated into different languages which will be determined by the prison population at the time. Some work has been done in regard to staff training in connection with foreign national prisoners.

At the main meeting of the Equality and Diversity Group it was felt that better communication was required to raise the profile of diversity and equality. Not enough information was available within the prison, resulting in a lack of confidence and little understanding of the issues involved. Due to current staff shortages and restricted regime it is impossible to hold regular meetings for prisoner representative focus meetings. The prison as a whole has a commitment to diversity and equality but there is difficulty in recruiting prisoner representatives and organising staff training due to staff shortages. Staff are assigned to more urgent duties, hence a lack of continuity in diversity and equality meetings and training sessions.

Education, Learning and Skills

Overall provision for learning and skills within the prison is good. It is well organised and the teaching is good. The physical environment of the workshops and classrooms is of a good standard and they are generally well-equipped. Invariably, there is a calm and purposeful

atmosphere within teaching areas and workshops when visited by IMB members; visits are usually a positive experience. Retention rates and success rates on courses are significantly above SLA targets. The outcomes for learners are also satisfactory.

The “churn” of men passing through the prison poses major challenges in the organisation and delivery of courses but this is managed well through the provision of short, accredited units. There are numerous opportunities to attain certification in areas of employment. The move to full- time provision greatly enhanced the extent and the quality of activities and it is regrettable that staffing shortages have resulted in a return to part- time provision. Although managers have been flexible in responding to the change in regime, it is important that a return to full time provision occurs as quickly as possible.

There are 750 places in activities available and participation rates are monitored carefully. An average of 88% of prisoners attend activities (August 2016).

A wide range of opportunities is available to men in the prison. There is extensive provision of essential skills, while literacy, numeracy and digital awareness are integrated into class sessions. There is a range of vocational opportunities and an ongoing effort to enhance these, such as the introduction of motor engine and vehicle maintenance and the extension of cycle maintenance into hi-tech cycles.

Training for cleaners has also been extended to include bio-hazard cleaning. The well established partnership with Railtrack has continued and other partnerships have been explored, such as the production of hedgehog houses in conjunction with the Wildlife Trust. Vulnerable prisoners now have greatly improved provision through the new life skills and horticultural courses.

The provision of music has been successful and there is some very good creative work taking place within Multi Media, but creative studies play a limited part within the provision. In the past, there has been some very good work achieved in areas such as painting, drawing and poetry but these opportunities are no longer available. There is no doubt that such provision would receive a positive response from many prisoners and would also have a therapeutic value.

Healthcare and Mental Health

Monitoring of the department is maintained on a regular basis by Health Care professionals within the Department and managers from Cardiff and the Vale University Health Board. Quarterly meetings are attended regularly by appropriate managers from the Health Board who provide support in some areas and oversight of the work of the Healthcare Department in the Prison.

Healthcare meetings are chaired jointly by a manager from the Health Board and the Deputy Prison Governor, which underlines the joint responsibility for the Department, although recent moves in Governors’ posts has interrupted this pattern. There are regular reviews of the Risk Register, Serious Incidents and other incidents as well as complaints about the Healthcare Department. The regular monitoring of Dental Services and Mental Health Services provides a review of the quality and safety of services provided. A designated action log is maintained and reviewed at each meeting.

Improvement in communication between the Inreach Team and general Healthcare within the Department has continued and this has been facilitated by the weekly Mental Health Referral

meeting. The meeting involves discussions between Healthcare, Inreach and Custodial managers to consider the needs of the more challenging prisoners and encourages a better understanding of the different roles. The high “churn” in number of prisoners in HMP Cardiff results in a large number of referrals for men with mental Health problems.

The general number of new receptions to the Prison each month is about 400. All of these prisoners are seen at Reception by prison officers and a nurse and any risks noted at this stage are acted upon appropriately. Because Reception is so busy with numbers of prisoners to be seen within a short space of time, this procedure is often rushed. There is a warning form for the possibility of self harm, but it is felt that there is too much paperwork and relevant information may not be sufficiently emphasised.

There has been an increase in the number of prisoners diagnosed with ADHD within the prison population and an extra clinic has been set up to deal with the increase. There has also been an increase in the number of Mental Health referrals generally and there is a potential for patients with mental health problems not being seen and assessed. To deal with this potential risk, Mental Health Nurses are used to do these assessments wherever possible. Communications with prisoners’ General Practitioners in the community via a new electronic system allows information to be accessed quickly by prison Healthcare staff.

There are occasions when men have been psychiatrically assessed and it is confirmed that prison is not the appropriate place for them. They continue to display highly disruptive, violent and disturbed behaviour. It appears to prison officers, particularly those who have to deal with the difficulties on a frequent basis, that no efforts are being made to secure a move to a more appropriate mental health facility. There are problems in moving prisoners to Medium Secure or Secure facilities or even ordinary psychiatric units as places are limited and expensive. Securing funding and identifying which health board is responsible for the patient is a serious problem. The situation can be exacerbated on release from prison when men with psychiatric problems sometimes have to wait up to three months before they have an appointment to see a psychiatrist.

The Healthcare Department is still concerned that some of the beds in their department are being used to house prisoners who need protection for various reasons and in the view of Healthcare staff are not appropriately placed there. This sometimes leads to there being no bed available for a prisoner who needs Healthcare services.

There are still a number of prisoners who do not attend appointments they have been given, especially for GP clinics and dental appointments. The recent acute staff shortages have not helped this situation, as there are times when no staff are available to escort the prisoners to the clinic.

HMP Cardiff has the highest immunisation rate of all the Welsh prisons, even though the general level of take up by the prisoners is low. Prisoners often have to wait for sexual health screening and possible treatment. There are sometimes as many as 70 patients waiting to be seen, despite a weekly clinic having been set up.

The largest number of complaints from prisoners continues to relate to medication. The GPs in Healthcare adhere to the policy of the local Health Board in refusing to prescribe drugs that, in

their view, are not appropriate. As these are often of lesser strength than the drugs the prisoner has had prescribed in the community, the men believe they are being deprived of what they see as appropriate medication.

Purposeful Activity

There are a wide range of opportunities available to men within the prison and rates of involvement are monitored on a regular basis by The Activities Hub. Many activities, such as cleaning and work in the kitchen, also offer an opportunity to obtain vocational accreditation. Other employment opportunities are provided by breakfast packing, the laundry, recycling, painting teams and gardening. In addition there are a whole range of opportunities offered by giving men responsibilities such as, education orderlies, library orderlies, peer advisors, listeners and gym orderlies. Relationships between the men and prison staff supervising activities are invariably good.

Outside opportunities for employment, men in the prison are offered regular opportunities to visit the gym, which is managed by a group of committed prison staff. Physical activity is key to good health and there is a concern that few prisoners take up the opportunity for daily exercise. The library is well managed and a regular service is offered to the men. The Chaplaincy is very active and also offers a broad service to men in the prison. In addition, the men have the opportunity to join consultative groups, though such opportunities are vary greatly between prison wings.

It is the case, however, that the ability of the prison to offer all of the above activities has been greatly compromised by staffing shortages. A restricted regime has resulted in the men spending large parts of the day locked in cells, even though activities are available to accommodate them.

Resettlement

Resettlement within HMP Cardiff continues to be managed via St Giles Trust. Contact with the Community Rehabilitation Company (CRC) is through an assessment which should be completed within five working days. However, the CRC report that initial assessments conducted by prison staff have been delayed due to staff shortages. This in turn affects the timeline of assessments conducted by the CRC, although there has been some improvement in this.

Once the Basic Custody Screening Tool (BCST) is completed the CRC offer an assessment for the BCSC2 to all who are admitted to HMP Cardiff. An initial refusal is not taken at face value and further attempts are made to involve the individual in the assessment of his needs. Between May 2015 and July 2016 St Giles trust saw 5,000 people. Assessments and specific courses are provided by a Team Leader and four Case Workers supported by an administrator and a maximum of ten Peer Advisors who are supported by an NVQ Assessor.

The Team offers three specific courses a week on Finance and Debt, Employability and Accommodation. The current split regime and prison staff shortages are having an impact on the number of courses run and the ability of partner agencies to see individuals. Accommodation continues to be a major problem for men leaving custody. Partner accommodation agencies report that the ability to obtain accommodation is often dependent on which local authority an

individual is requiring accommodation from. Previously prison staff had been able to offer support in trying to find accommodation whilst on bail. Since CRCs were contracted to manage resettlement services, such support from prison staff has not been available.

A new provider, BASS, is currently in the process of setting up a scheme offering accommodation to those on bail and those who are eligible for Home Detention Curfew (HDC) but have no accommodation. Support will be offered both in and outside custody and, if required, move on accommodation will be identified following the end of the bail or HDC period. The shortage of accommodation, although not a specifically a prison or CRC issue, is a major contributor to re-offending rates. A number of accommodation partner agencies offer to support the resettlement partnership and individual men, but the lack of accommodation is likely to continue.

In relation to employment, Job Centre staff continue to come into the prison offering support to complete applications for benefits. In the near future it is hoped more staff will be deployed to work within the prison to assist men to undertake job searches before leaving. The aim is also to try to identify employers who will offer jobs to ex-offenders. Careers Wales sees all 18 and 19 year olds held within HMP Cardiff to offer support to that age group.

PACT continues to have an important role within Resettlement in re-establishing, developing and maintaining family ties. They have recently made contact with a local solicitor and hope to start surgeries for men to receive legal advice on family issues. As with CRCs, the current split regime has affected their ability to run programmes such as the father and baby groups. The plan is to restart them when the prison has sufficient staff to return to a normal regime.

A concern noted in last year's report in relation to support for veterans appears to be dealt with by various charities such as Care for Combat and the British Legion. The CRC is not contracted to support to this group but the charities concerned are active partners within the wider resettlement support network. On the whole the changes are viewed as positive. The aim is to meet prisoners' needs in a more structured manner and to aid the prison in persuading prisoners to invest in their community both inside and outside prison. An armed forces veterans' group is held within the prison on a monthly basis. This is attended by a psychotherapist and good connections have been established with outside groups who are committed to rehabilitation of ex-military personnel.

Safer Custody

Identifying vulnerable and suicidal prisoners remains a priority. The IMB have sat in on first night inductions and followed prisoners' journeys from arrival into the prison through to the process of being settled into the wing for the night. The induction process includes registration into the prison, custodial and healthcare screening, a shower, a meal, the registration of property and the issue of prison kit. On the wing the prisoner is seen by "listeners" and wing staff. On the second day the prisoner is required to participate in an induction session administered by a prison officer which aims to cover the essential information required by prisoners. IMB members have followed these processes and identified a number of concerns, including the manner in which questions regarding possible self harm are posed in a situation which is always busy and sometimes rushed.

Safer Custody meetings are held regularly and include reports from the Safer Custody Manager, the Samaritans, Safer Custody Wales and Violence Reduction. Figures relating to ACCTs are

reported and incidents of self harm recorded and discussed. IMB members have undergone a similar training to prison officers in relation to the opening and maintenance of ACCT documents. During the reporting period there has been one death in custody.

There has been an increase in levels of violence in the prison. Though levels are not as high as in many other prisons, this is of concern. There is anecdotal evidence that the smoking ban and an increase in the use of illicit substances is a contributory factor in the increase of violent and disruptive behaviour.

Care and Separation Unit (CSU)

The core functions and activities are met at HMP Cardiff. Staffing and security in the unit are appropriate. The physical conditions are limited by the fact that this is a Victorian prison and the environment is less than ideal. The staff make an effort to overcome these limitations and have to be congratulated on their efforts.

The Board is always promptly advised of new arrivals and prisoners are seen by an IMB Board member as soon after their arrival as possible. Each prisoner is spoken to personally each time a Board member is in the establishment. Paperwork, including daily log segregation history sheets, is examined for each prisoner in order to ensure that they are accurately updated.

Cellular confinement, special accommodation and physical restraints have been used appropriately and have been witnessed being used by Board members when a prisoner has been removed under restraint to the CSU. Dirty protests have been handled safely and Biological Hazard Requirement procedures were complied with.

The problem of "long stayers" at the unit is regularly reviewed with a representative of the Board. It is ensured that the Governor undertaking this review is not the same Governor who ordered the initial detention in the unit. The Board is advised when reviews are scheduled, so that arrangements can be made for a member to attend whenever possible. However operational demands result in the times of the review being altered at short notice, so that Board members are unable to attend as frequently as is desirable. Review meetings are attended by the Governor, a Healthcare staff member, the IMB and staff from the CSU. The paperwork is completed as appropriate.

The Board is represented on the Segregation and Monitoring Review Group (SMARG) which is chaired by a senior Governor and consists of representatives from Reducing Offending, Mental Health, a senior staff member from Healthcare, Wing Senior officers and the Chaplaincy. There is also regular communication with the Counselling, Assessment, Referral, Advice and Throughcare Service (CARATS).

Adjudications are held daily and an IMB member is in attendance whenever possible. There has been a marked increase in the number of adjudications since April 2016, which coincided with the no smoking ban. Whilst there is no proof of a direct link with the ban, the indirect consequences of the increase in offences such as damage to property, assaults, possession of unauthorised

articles and disobeying lawful orders could be due to the stress factors resulting from tobacco withdrawal. Some prisoners have a long history of smoking and their attempts to continue in the face of the ban have led to further numbers of disciplinary offences being committed.

More serious breaches of discipline are appropriately referred to the Independent Adjudicator, an outside Judge, who visits the prison on a monthly basis. A Board member attends whenever possible.

Residential Services

Most of the cells in the prison are designed for single occupancy. However, most cells accommodate two men apart from when it would be pose a risk to place a prisoner in a cell with someone else. Repeated attempts have been made by the IMB over three years to draw attention to the lack of privacy in cells. Lavatory basins open to the rest of the cell in dual occupied cells results in lack of privacy and dignity. Showers on the wings are regularly inspected by IMB members and are generally found to be satisfactory.

The general condition of some cells is less than satisfactory, due to damp and a heating system which is not always reliable. A number of cells are frequently out of commission because they have been damaged by violent prisoners and this adds further to the general overcrowded conditions in the prison. There are frequent issues relating to heating, the provision of hot water and the functioning of showers. Lack of cleanliness and hygienic conditions in the MDT continue to be an ongoing issue. Managers, officers and prisoners frequently complain about the undue length of time taken to resolve maintenance issues.

The kitchen is undergoing total refurbishment, so that for the last three months the functions of the kitchen have been moved to a temporary site and buildings within the prison. This caused major disruption to catering services whilst the move took place, but to the credit of the catering manager and his staff, normal service was resumed within a short period of time and few complaints about the food have been received.

Drugs

The availability of drugs within the prison is a concern. A particular problem which has increased in seriousness during the last year has been the availability of synthetic substances, often described as "legal highs". Such substances appear to have been the cause of a number of serious incidents in the prison involving violence and disorder. Staff shortages have undoubtedly been a factor in the availability of drugs, with fewer staff available to carry out searches and MDT procedures. The prison implemented a non smoking policy in April this year. The smoking ban was well managed, but it does appear to also have contributed to an increase in the use of other substances; these include substances smuggled into the prison and improvised substances, such as tea mixed with shredded nicotine patches. Electrical appliances, such as kettles are being dismantled to create flames to light improvised cigarettes, presenting a fire hazard and occasionally tripping electric supplies. The resultant fumes are also unpleasant and possibly more toxic than the original cigarette smoke. A number of prisoners transferred to HMP Cardiff from prisons in England that do not operate a non smoking policy have been voluble in complaining about the policy, but there is no firm data as to whether or not it has contributed to subsequent disruptive behaviour.

The Work of the Independent Monitoring Board

Recommended Complement of Board Members	17
Number of Board members at the start of the reporting period	9
Total number of segregation reviews held	1665
Total number of segregation reviews attended	25
Date of Annual Team Performance Review	April 2016

Total number of Board meetings during reporting period	12
Total number of visits to the Establishment	404

Prisoner Applications Received by the Board

Code	Subject	Year 2012/2013	Year 2013/2014	Year 2014/2015	Year 2015/2016
A	Accommodation	NoReport submitted	8	11	10
B	Adjudications	0	0	0	14
C	Equality & Diversity (including religion)	0	16	7	9
D	Education/employment/ training inc.IEP	0	24	38	37
E 1	Family/visits inc mail & phone	0	25	66	39

E 2	Finance/pay	0	36	14	11
F	Food/kitchen related	0	15	4	14
G	Health related	0	159	56	56
H 1	Property (within current establishment)	0	33	19	17
H 2	Property (during transfer/in another establishment)	0	52	50	25
H 3	Canteen, facilities, Catalogue shopping	0	9	7	8
I	Sentence related (inc. HDC, ROTL, parole, release dates, re-cat etc)	0	89	56	23
J	Staff/prisoner/detainee concerns inc bullying	0	17	13	18
K	Transfers	0	46	27	26
L	Miscellaneous	0	141	65	87
	Total number of IMB applications	0	770	426	384

Total: number of complaints to the IMB on Confidential Access	Year	Year	Year	Year
	2012/2013	2013/2014	2014/2015	2015/2016
	0	24	36	55