



Report on an unannounced inspection of

## **HMP Berwyn**

by HM Chief Inspector of Prisons

27 January – 7 February 2025



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## Introduction

This inspection found a disappointing drop in our healthy prison test score for safety, from reasonably good to not sufficiently good, which reflected the many challenges faced by this complex category C prison in North Wales. Drugs were more available, and levels of violence and self-harm were much higher than at our 2022 inspection, with the rates among the highest compared to similar jails.

Berwyn is the largest public sector run prison in the estate and housed 1,937 men at the time of the inspection. Since our last visit, the population of the jail has grown in complexity. Although originally designed with a small reception function to service the courts of North Wales, population pressures in the North West of England and West Midlands have been so acute that this has now been expanded. On this inspection, around 200 prisoners were remanded or unsentenced prisoners, many of whom were coming from courts in Merseyside, Greater Manchester and Lancashire, with some prisoners coming from as far as Preston. The prison also received prisoners on short sentences who would, in the past, have been held in local reception prisons. This meant that longer term category C prisoners, for which the jail had been designed, now made up a much smaller proportion of the population than in the past.

Under the capable leadership of the relatively new governor, there was, despite many challenges, an energy amongst senior leadership and no sense of complacency or helplessness. In the self-assessment report, the governor demonstrated the work that she and her team were doing to improve the capability of staff and leaders. There was a welcome focus on the support and training of middle managers who varied in terms of their experience and their visibility around the jail. Successful recruitment rounds had led to an improved staffing picture – an issue that had persisted in this prison since it opened in 2017. Leaders had set up mentoring and support schemes for new officers, which was leading to improved staff retention. There was also some good coordination with resettlement services in both Wales and the North West of England to improve the offer for prisoners wherever they came from.

There were too many prisoners who did not have enough to occupy their time, with 25% unemployed and 27% in part-time work or education. Attendance in education and training was low at 70% despite the teaching being generally of a reasonable standard. Those in full-time work could expect to be out of their cells for up to nine hours a day, but the many unemployed prisoners got as little as two hours unlocked. The weaknesses in purposeful activity were no doubt a cause of boredom and subsequent drug taking, which random tests showed were being used by 33% of the population. Purposeful activity was particularly limited for men on the vulnerable prisoner wings.

The variety of incentives to motivate prisoners and reward those who behaved was disappointing. The regime on the enhanced wing was limited and the range of prisoner-led initiatives was nowhere near as broad as we have seen in other jails. This was a missed opportunity to give prisoners a greater sense of progression and prepare them for moves to lower category jails or for release.

It was pleasing to see an improvement in some of the public protection arrangements and the offender management unit was functioning more effectively than at our last inspection. This led to an improvement in our score for preparation for release to reasonably good. Key work, another way to support prisoner progression and help to sort out problems, was poor, with few sessions of any quality on offer. The lack of key work may also have explained the huge number of electronic requests prisoners were submitting.

Conditions across the jail remained good and the building had generally been well looked after. Prisoners appreciated the in-cell showers and laptops, but they often complained that inexperienced officers did not give them the help they needed.

Inspectors left Berwyn with the sense that if the regime could be improved, drug ingress reduced and more creative ways could be found to motivate prisoners, then there was a good possibility that the prison could continue to improve. In recent months levels of violence had begun to fall. Time will tell if this is a trend or a blip.

**Charlie Taylor**

HM Chief Inspector of Prisons

March 2025

# What needs to improve at HMP Berwyn

During this inspection we identified 13 key concerns, of which six 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.

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 plan should be provided to HMI Prisons.

## Priority concerns

1. **The prison was not safe enough.** Rates of prisoner violence, including against staff and other prisoners, had increased since the last inspection and were high.
2. **Prisoners were not sufficiently motivated to behave well and engage in the prison regime.** Leaders had not capitalised on opportunities to incentivise good behaviour, particularly for enhanced prisoners, and the opportunities available were not well promoted.
3. **High levels of substance misuse compromised safety, well-being and the rehabilitation of prisoners.**
4. **Too few prisoners benefited from good quality interaction with staff.** Key work was ineffective and did not support sentence progression.
5. **Too few prisoners were in full-time education or training, and around a quarter were unemployed.**
6. **Prisoner attendance at activities was too low.**

## Key concerns

7. **Rates of self-harm remained high.** The prison had no long-term action plan to reduce self-harm.
8. **The complaint and application processes were not effective.** There was little quality assurance by leaders, and data were not analysed to inform improvement plans.
9. **Time out of cell was inadequate for a predominantly category C prison.** One in four prisoners were unemployed and locked up for 22 hours each day. Time out of cell was particularly poor for all prisoners on Fridays and at the weekend.
10. **Arrangements for induction and allocation to activities did not always meet prisoner needs well enough.** Some prisoners struggled to engage when they did not fully understand why they had been allocated to a course.

11. **Teaching strategies were not consistently strong.** Some teaching was not sufficiently engaging or challenging.
12. **Many aspects of the reading strategy were still in the earliest stages of development, and there was insufficient provision for emergent readers.**
13. **Prisoners were given too few opportunities to demonstrate a reduction in risk, which affected their ability to progress in their sentence.** The offending behaviour programme offer was too limited, and prison offender managers (POMs) did not complete enough risk-focused work with prisoners.

# About HMP Berwyn

## Task of the prison

Category C adult male reception, training and resettlement prison.

## Certified normal accommodation and operational capacity (see Glossary) as reported by the prison during the inspection

Prisoners held at the time of inspection: 1,937

Baseline certified normal capacity: 2,000

In-use certified normal capacity: 2,000

Operational capacity: 2,000

## Population of the prison

- 3,627 new prisoners received in the previous year.
- 500 prisoners (26%) were held on recall from the community for breaching licence conditions.
- An average of 250 prisoners released into the community each month.
- 52 foreign national prisoners.
- Less than 10% of prisoners from black and minority ethnic backgrounds.
- 251 prisoners receiving support for substance misuse.
- 86 prisoners referred for mental health assessment each month.

## Prison status (public or private) and key providers

Public

Physical health provider: Betsi Cadwaladr University Health Board

Mental health provider: Betsi Cadwaladr University Health Board

Substance misuse treatment provider: Betsi Cadwaladr University Health Board

Dental health provider: North Wales community dental services

Prison education framework provider: Novus Cambria

Escort contractor: GEOAmev

## Prison group

Wales

## Prison Group Director

Giles Mason

## Brief history

HMP Berwyn opened in February 2017 and is the largest public sector prison in England and Wales. It provides a reception, training and resettlement function for prisoners from North Wales (excluding juveniles and high security prisoners) and the North West of England.

## Short description of residential units

Three large house blocks, each separated into eight smaller wings with two landings.

Alwen – general population, life-sentenced and enhanced prisoners

Bala – general population, enhanced, veterans, mental health support (Menai)

Ceiriog – induction, foreign national and short sentences prisoners, general population, vulnerable prisoners, enhanced, incentivised substance free living.

**Name of governor and date in post**

Rebecca Hayward, 31 October 2023

**Changes of governor since the last inspection**

Nick Leader OBE April 2019 – 31 August 2023

Rachel James, acting governor 1 September – 30 October 2023

**Independent Monitoring Board chair**

John Atherton

**Date of last inspection**

16–27 May 2022



# Section 1 Summary of key findings

## Outcomes for prisoners

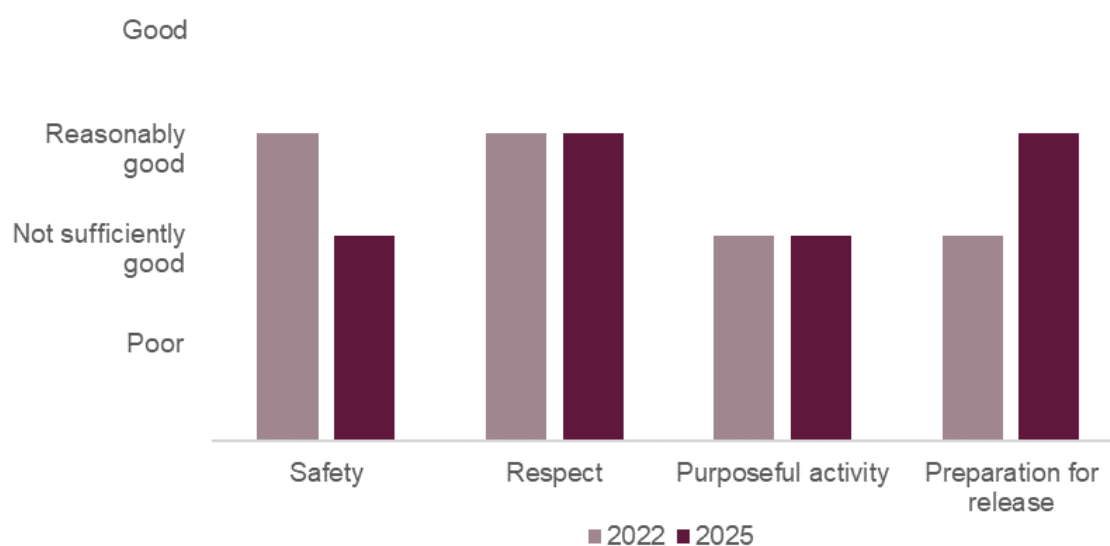
1.1 We assess outcomes for prisoners against four healthy prison tests: safety, respect, purposeful activity, and preparation for release (see Appendix I for more information about the tests). We also include a commentary on leadership in the prison (see Section 2).

1.2 At this inspection of HMP Berwyn, we found that outcomes for prisoners were:

- not sufficiently good for safety
- reasonably good for respect
- not sufficiently good for purposeful activity
- reasonably good for preparation for release.

1.3 We last inspected HMP Berwyn in 2022. Figure 1 shows how outcomes for prisoners have changed since the last inspection.

**Figure 1: HMP Berwyn healthy prison outcomes 2022 and 2025**



## Progress on priority and key concerns from the last inspection

1.4 At our last inspection in 2022, we raised 11 concerns, four of which were priority concerns.

1.5 At this inspection we found that two of our priority concerns had been addressed and two had been partially addressed. The concerns addressed were in the areas of leadership and respect, and those partially addressed were in purposeful activity. For a full list of progress against the concerns, please see Section 7.

## Notable positive practice

1.6 We define notable positive practice as:

Evidence of our expectations being met to deliver particularly good outcomes for prisoners, and/or particularly original or creative approaches to problem solving.

1.7 Inspectors found seven examples of notable positive practice during this inspection, which other prisons may be able to learn from or replicate. Unless otherwise specified, these examples are not formally evaluated, are a snapshot in time and may not be suitable for other establishments. They show some of the ways our expectations might be met, but are by no means the only way.

### Examples of notable positive practice

a)	Staff from the safety and PE teams worked with peer workers to deliver a targeted PE programme for prisoners who had been involved in violence. The initiative used sport to engage these hard-to-reach prisoners to improve their communication and interpersonal skills.	See paragraph 3.19
b)	A health care mental health and substance misuse lead had been appointed to ensure good care and treatment for patients with a mental health problem who also had substance misuse needs. Such patients were managed through the most effective pathway, and mirrored local community provision, which meant arrangements for these prisoners once discharged into the community were more seamless.	See paragraph 4.69
c)	Vocational learning workshops were of exceptional quality. Spacious and well equipped, they provided industry-standard environments for learners to develop valuable skills and accreditations, for example in construction workshops, a training kitchen, barber shop, warehousing and logistics. The gym, sports hall and all-weather pitch were also well equipped and used effectively to support prisoner learning and attainment.	See paragraph 5.33
d)	A wide range of organisations were located together in an impressive resettlement hub, which enabled effective communication and joint working. Prisoners could attend the hub to discuss their resettlement plans as they prepared to return to the community.	See paragraphs 6.8 and 6.42
e)	Staff working in the visit hall maintained an occurrence book to record child protection issues or concerns about controlling and coercive behaviour by prisoners. Entries were added by prison staff as well	See paragraph 6.26

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as those from the family service provider, and then shared as appropriate.

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|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| f) | The prison provided a bright and welcoming well-being hub for learners, including a coffee shop, restaurant and barber. Prisoners benefited from and valued these facilities for education and work, demonstrating high levels of positive behaviour and engagement when in these areas.     | See paragraph 6.35 |
| g) | Representatives from most of the local authority housing teams in North Wales attended the prison monthly to complete a housing assessment with prisoners at risk of being homeless on release. This gave prison staff more time to support other prisoners without local authority housing. | See paragraph 6.43 |
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## Section 2 Leadership

**Leaders provide the direction, encouragement and resources to enable good outcomes for prisoners.** (For definition of leaders, see Glossary.)

- 2.1 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.
- 2.2 The governor and deputy governor provided energetic and thoughtful leadership, encouraging, and enabling a competent team of senior managers to develop their areas. Leaders recognised the critical role of first-line managers and were investing in their development. They had also created new senior manager roles in safety, staff development and public protection, which demonstrated a commitment to improving areas presenting significant risk.
- 2.3 Berwyn had continued to experience challenges with staffing the jail since the last inspection, which had affected the delivery of outcomes in important areas, but leaders had taken steps to improve retention and the prison was now almost fully staffed. Around two-thirds of operational staff had less than two years' experience, but they were well supported by their managers, a team of new colleague mentors, and the new capability and development manager.
- 2.4 Leaders at Berwyn faced additional complexity because of the need to develop effective partnership arrangements with stakeholders in both Wales and England, with different models of commissioning and delivery. They navigated these challenges well and relationships with key partners were effective. For example, the governor worked with employment brokers in Wales and England to develop the employment strategy, improving the support available to both Welsh and English prisoners.
- 2.5 Progress at Berwyn was marred by high levels of violence and the prevalence of drugs, although leaders in safety and security were working hard to address this. However, leaders had not capitalised on opportunities to incentivise good behaviour; the offer for enhanced prisoners was not sufficiently motivating.
- 2.6 Although the quality and breadth of the education, training and work available to prisoners were generally good, leaders had not made sure that all prisoners attended their placements or had sufficient time out of cell to complete other domestic tasks. A new regime that was more adequate for category C prisoners was being introduced to address this issue.
- 2.7 Despite the many challenges facing leaders and staff, they had introduced or maintained some outstanding initiatives that

demonstrated an ambition to rehabilitate prisoners. The new well-being hub was well designed and provided an inviting and positive environment for prisoners and staff (see paragraph 6.35), and the resettlement hub continued to bring a variety of partners together to support prisoners nearing release (see paragraphs 6.8 and 6.42).

- 2.8 While the complexity of Berwyn undoubtedly presented some significant leadership challenges, leaders had not fully addressed too many of our concerns from the last inspection. However, the senior team understood the challenges, and were resilient and determined to drive improvement, making better use of data to develop their strategies; this provided us with some confidence in their direction of travel.

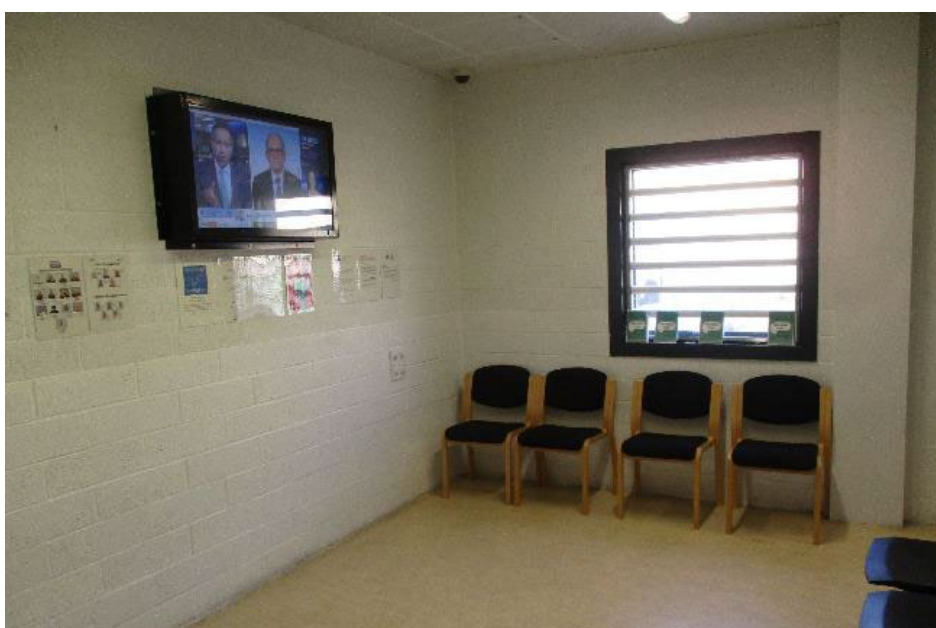
## Section 3 Safety

**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.

- 3.1 The number of prisoners arriving at Berwyn had increased since the last inspection, with an average of 320 new arrivals a month in the previous three months. One-third were transfers from other prisons, and two-thirds were new arrivals from courts and police stations. Vans usually arrived later in the day, including into the evening, so reception was often busy and some prisoners did not get taken to their cells until 11pm. Despite this, reception staff were welcoming, explained the processes and helped put new arrivals at ease.
- 3.2 Most prisoners spent at least two hours in reception, but there was little to occupy them. Some holding rooms had a television, but there was very little information about the prison or other reading material. Prisoners working as orderlies were often based in reception until new arrivals were taken to their wing, performing cleaning and administrative duties. However, there was a missed opportunity to use them to be supportive or inform new arrivals about the services or activities available at Berwyn. It was, however, positive that all new arrivals could get a hot meal in reception.



**Holding room in reception**

- 3.3 First night safety interviews were not always held in sufficient privacy, which may have discouraged prisoners from disclosing sensitive information. In our survey, only 29% said they were able to speak to a staff member in private on their first night. However, welfare checks were conducted hourly on the first night of custody, and induction officers held a private interview with new arrivals the following day.
- 3.4 First night cells were generally clean, and prisoners appreciated having in-cell showers, but they were not always properly equipped and often short of basic items, like bedding, curtains and kettles. We spoke to some prisoners who had not been given a breakfast pack when they arrived and had not been able to eat or make a hot drink until lunchtime the following day.



**First night cell**

- 3.5 Induction began the next morning with a presentation by a peer supporter, which covered many immediate issues. Over the next two days, new arrivals also met staff from other departments, like the chaplaincy, safer custody, substance misuse service, mental health and resettlement.
- 3.6 Once they had completed induction, the regime for new arrivals on the induction unit was poor; they could spend only 1.5 hours a day out of their cells, plus time to collect their meals or medication. They had very little time to interact with staff or their peers, or to use the electronic

kiosk for essential tasks, such as adding phone numbers to their account, choosing meals or ordering items from the prison shop, while waiting up to a week to receive their personal laptops.

- 3.7 New arrivals could buy a small basic grocery pack or vapes, and it was positive that the prison provided an advance to those who arrived without cash, which could be paid back in instalments. However, it took too long (up to 11 days) for many prisoners to receive a full shop order, which increased their likelihood of getting into debt with other prisoners.
- 3.8 Vulnerable prisoners were kept separate and safe throughout the reception process. However, a lack of space on the vulnerable prisoner wing meant they were accommodated on the main induction wing, often for several weeks if they had to wait for a single cell. Vulnerable prisoners had a separate regime to mainstream prisoners, which was equally poor but not worse, and those we spoke to said they felt safe on the induction unit.

## Promoting positive 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

- 3.9 Rates of prisoner violence, including against staff and other prisoners, had increased since the last inspection and were higher than most category C prisons. However, Berwyn held a more complex mix of prisoners than standard category C prisons, including 500 prisoners recalled from the community for breaching licence conditions. When comparing the violence rates to other reception prisons, the number of incidents was broadly similar.
- 3.10 Overall rates of violence had continued to rise over the past year, though there had been an encouraging decrease in prisoner-on-prisoner violence since September 2024.
- 3.11 Leaders had identified the need to improve safety as a priority. There had been a significant investment in additional managers in the safety function to focus on the prison's strategy to improve outcomes in this critical area.
- 3.12 The safer custody team had led several initiatives over the previous six months to raise awareness and increase ownership of safety matters among staff and prisoners. This included a safety promotion week, with a daily focus on different aspects of work, such as the management of perpetrators and support for victims.
- 3.13 A successful weapons amnesty had led to the collection of over 120 items with the potential to harm prisoners or staff. The amnesty was



conducted discreetly during lunchtime by staff volunteers. The safer custody team had also surveyed prisoners to understand their concerns on safety, although the data was yet to be analysed to address the issues raised.

- 3.14 Leaders had introduced an effective cross-department meeting, engaging staff from safety, security, residence and the drug strategy team, to further understand the causes of violence. There were also credible action plans to support this work, including a dedicated violence reduction plan and an impressive safer custody action tracker (SCAT) developed by the regional safer custody analyst. The SCAT enabled leaders to easily review trends over time, including type of violence, location and demographics of those involved.
- 3.15 The safety meeting structure had been revised in late 2024 to improve its effectiveness. Alongside the cross-department meeting, a daily assurance meeting tracked incidents, a weekly intervention meeting supported the management of prisoners with complex cases, and a monthly strategy meeting reviewed data. Although this structure helped leaders to better understand the drivers of violence, the data they used were not as helpful as they could have been. Around 20% of incidents recorded last year were too broadly categorised and lacked sufficient detail to be useful to leaders.
- 3.16 The prison used challenge, support and intervention plans (CSIPs, see Glossary) to manage prisoners involved in violence. The safety team demonstrated that referrals for CSIP intervention were appropriate and prompt. However, many plans lacked depth and the quality was inconsistent. For instance, targets were not always tailored to the individual prisoner or linked to the reasons for the initial referral. The recent introduction of quality assurance to address these issues provided some evidence that the process was improving.
- 3.17 The drug strategy team also used CSIPs to support prisoners involved in substance misuse. Although limited in number, these plans were of higher quality and demonstrated good support to help prisoners to progress. A proactive drug strategy custodial manager with oversight of these plans provided evidence of improved behaviour and a reduction in the use of illicit substances among those engaged in the process.
- 3.18 An on-site psychology team provided professional advice to leaders on the most appropriate interventions to support prisoners with complex cases. The valuable work was not widely promoted by managers, and some staff were unaware of the value it could add.
- 3.19 Staff from the safety and gym teams worked with peer workers to develop and deliver a targeted PE programme for prisoners who had been involved in violence. The initiative used sport to engage these hard-to-reach prisoners to improve their communication and interpersonal skills. While still in its early stages, the project showed great potential.

- 3.20 The safety team maintained appropriate oversight of prisoners choosing to self-isolate in their cells. Prisoners who were vulnerable due to their offence were located on separate vulnerable prisoner (VP) units which kept them safe from other prisoners. However, neither group had equitable access to the prison regime
- 3.21 In our survey, only 16% of respondents said there were opportunities and rewards to motivate good behaviour. Enhanced landings on each house block included a small kitchenette and prisoner lounge with exercise equipment. However, the rewards for prisoners on the highest level of the incentive scheme lacked imagination, and there was not enough distinction between being a standard prisoner or one on an enhanced status.



**Enhanced prisoner lounge**

- 3.22 There were a range of opportunities available to prisoners, including some education and work, peer mentoring and an increasing variety of enrichment activities. However, too many prisoners were unaware of what was on offer and staff were not proactive in encouraging participation.
- 3.23 A lack of key work (see Glossary) and regular contact from prison offender managers (POMs, see Glossary), and too little time out of cell to form effective relationships, meant that staff were not proactively encouraging prisoners to behave, engage and progress (see paragraphs 4.2 and 5.1). Staff entries in prisoner case notes were much more likely to record negative than positive behaviour.

## Adjudications

- 3.24 There had been over 6,000 adjudications in the previous 12 months, most of which were for violence, possession of illicit items or damage to prison property (mostly cells).
- 3.25 At the time of the inspection, there were over 400 outstanding charges, approximately 320 of which were referrals to the police. Many of these were for serious offences relating to drugs and violence. Leaders had devised a strategy to address the backlog, but too many adjudications were still either dismissed or not proceeded with due to time constraints, which undermined the system's effectiveness as a deterrent to poor behaviour.
- 3.26 The hearings we observed took place in a relaxed environment and prisoners were encouraged to engage. In one case, the adjudication liaison officer helped a prisoner facing multiple charges to understand the process. In our review of concluded adjudications, too many lacked sufficient exploration of the evidence before charges were proved.
- 3.27 A quarterly adjudication standardisation meeting, attended by the deputy governor, reviewed useful data and identified actions to improve the effectiveness of adjudications. However, the impact of the work was limited as actions often took too long to implement and the review of data focused only on the previous quarter, reducing the opportunity to assess trends over time.

## Use of force

- 3.28 The use of force had increased by 7% since the last inspection, although only 40% of incidents involved full control and restraint techniques. The incapacitant spray PAVA had been used three times in the last year, and batons once. The video footage of incidents we reviewed indicated that not all uses were appropriate, but effective scrutiny by leaders had made sure that lessons had been learned.
- 3.29 Governance of the use of force remained multidisciplinary and reasonably effective. Leaders reviewed a wide range of data to identify and, where appropriate, investigate disproportionate outcomes against groups of prisoners, for example younger prisoners.
- 3.30 As a result of ongoing issues identified in governance meetings, leaders had recently invested in a full-time use of force coordinator to increase the scrutiny of footage, provide more prompt feedback to staff involved in incidents, and continue to promote the use of body-worn cameras.
- 3.31 Staff use of body-worn video cameras had improved since the last inspection, and leaders were active in driving up use and awareness among staff. However, in the footage we reviewed, cameras were often turned on too late once a situation had escalated or once force had already been initiated, so we could not be assured that staff were actively de-escalating incidents.

3.32 Unfurnished accommodation had been used twice, for two prisoners, in the last year. Each use was justified, appropriately authorised and for a short time (45 minutes in one case and just over an hour in the other).

### **Segregation**

3.33 The use of segregation had increased since the last inspection. Most prisoners were segregated for acts of violence, or significant disruptive behaviour that could not be safely managed on mainstream wings. This reflected the increased levels of violent behaviour and greater access to illicit substances (see paragraphs 3.9 and 3.38).

3.34 The average length of stay in segregation was 11 days, compared to seven days in 2022. At the time of this visit, only one prisoner had been segregated for over 42 days and he was transferred to another suitable prison during the inspection.

3.35 Living conditions were generally good and it was positive that cells had internal showers, but some showed evidence of wear and tear with heavily stained toilets and damage to windows. We also identified a case where a prisoner had not been provided with basic items such as a pillow, even though there were sufficient stocks on the unit.



**Segregation unit toilet (left) and repaired window in segregation unit**

3.36 Prisoners received their basic entitlements daily, but the regime remained poor and they were locked up for most of the day, with little to occupy their time. They had access to fresh air and the yards contained exercise equipment for those who chose to use it. Prisoners could leave their cells to collect their own meals, which also helped staff to test compliance.



**Segregation unit exercise yard**

- 3.37 Prisoners on the unit were able to attend multidisciplinary boards to review their stay there. Targets set by the board were often superficial and did not always address the issues that had led to segregation. A review board was held before a prisoner's return to mainstream accommodation, but the formal reintegration process that had previously begun on initial segregation had lapsed since the last inspection.

## **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.

- 3.38 The entry and conveyance of illicit items into the prison was a major threat to its stability. In the previous 12 months, there had been over 1,000 reported finds, including 500 relating to drugs. The positive mandatory drug test rate for the previous year was high at 33.5%, and suspicion-led testing had yielded positive results of 77% over the same period. It was not surprising, therefore, that in our survey, 60% of prisoners said it was easy to get illicit drugs at Berwyn.
- 3.39 The governor had appointed a dedicated drug strategy lead and custodial manager to head work to address the drug problem. They had forged a strong partnership with the safety and security teams to identify emerging risks effectively. This collaboration had led to several

positive strands of work to mitigate the high level of illicit drug use. The governor regularly chaired meetings with the local police and regional intelligence teams to tackle the entry of drugs, and actions from this meeting had successfully disrupted many attempts to smuggle illicit items into the prison.

- 3.40 Weaknesses in physical security had also been addressed. This included the replacement of recently damaged security netting and prompt replacement of windows that had been intentionally damaged, which reduced the risk of drone ingress.
- 3.41 Despite good multidisciplinary teamwork and positive initiatives to disrupt supply, leaders had not yet devised a detailed supply and demand reduction action plan to progress this work more strategically and at a faster pace. This meant they had not clearly identified actions to address other factors increasing the demand for drugs, including poor time out of cell, a lack of effective key work and POM contact, and a missed opportunity to encourage and promote more positive behaviour (see paragraphs 3.23, 4.3 and 6.14).
- 3.42 The intelligence hub was well led and the team was well sighted on other risks affecting the stability of the prison. Despite a very high volume of intelligence reports (over 20,000 in the previous year), they were all sifted and dealt with promptly. The prison's monthly tactical assessment of risks was used effectively to identify security objectives and direct resources.
- 3.43 Some aspects of procedural security were not always effective or proportionate to the risk presented by category C prisoners. For example, although large groups of prisoners were unlocked together during association periods, staff unlocked small cohorts of only five or six at a time to collect their meals. This was risk averse, time consuming and left no time for prisoners to dine communally. Conversely, where there was increased risk during the issue of prescribed medication, staff supervision was poor (see paragraph 4.82).

## 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

- 3.44 There had been no self-inflicted prisoner deaths since the last inspection. Leaders did not routinely monitor recommendations from previous Prisons and Probation Ombudsman (PPO) reports following deaths in custody to assure themselves that they were still being followed after implementation, but they had credible plans to do so.

- 3.45 Investigations into serious acts of self-harm were completed promptly, but did not routinely identify wider lessons to be learned or make recommendations to improve practice and prevent future incidents. Again, leaders had plans to address this with additional training and by reviewing lessons learned in the monthly safety meeting.
- 3.46 The rate of self-harm remained high and had been increasing for much of the last year, although this increase had showed signs of slowing in recent months. Levels of need among the population were high. In our survey, 50% said they felt depressed and 22% suicidal when they arrived at the prison. Far more prisoners than at the previous inspection, 36% against 17%, said they had been supported by assessment, care in custody and teamwork (ACCT) case management for risk of suicide or self-harm.
- 3.47 Leaders used data well to understand the drivers of self-harm among the complex population, and had identified a lack of purposeful activity, substance misuse and frustrations in prisoners' early days in custody as key factors. They were taking action in response to this; this had included some sensible measures over the Christmas period targeted at those thought to be at higher risk of self-harming then.
- 3.48 However, across the prison, too little purposeful or recreational activity for those in crisis, poor time out of cell, and ineffective key work meant that the prison did not always provide an environment that was conducive to improving prisoners' well-being (see paragraphs 5.1 and 4.3). There was no documented long-term prison action plan to reduce self-harm that would bring departments across the prison together to focus on this issue.
- 3.49 As well as reviewing a wide range of data, monthly safety meetings also included thoughtful and meaningful input from both the Samaritans and Listeners (prisoners trained by the Samaritans to provide confidential emotional support to their peers). This provided valuable insight from prisoners and, as a result, the Listener scheme was working well, with callouts facilitated overnight where necessary.
- 3.50 The weekly safety interventions meeting (SIM) was an effective forum for discussing the care provided to prisoners with particularly complex cases. Minutes indicated good multidisciplinary discussions about how best to understand and meet individual needs, and that different approaches were trialled when one was not successful.
- 3.51 However, for most prisoners supported by ACCT case management, day-to-day support was lacking. Prisoners we spoke to said that while they appreciated staff checking in on them, they were not always effective in resolving the underlying problems leading to self-harm, such as issues with medication, mental health concerns or feeling under threat on the wing. Key work was not used effectively to support prisoners at risk of self-harm.
- 3.52 Prisoners in crisis and under constant supervision were not actively encouraged to participate in any regime activities and were instead

kept locked up. Staff allocated to the role did not always engage constructively and positively with these prisoners, viewing this task as purely supervisory.

- 3.53 ACCT documents we reviewed showed that care plans did not always reflect a prisoner's identified risks and triggers. Wing staff made detailed records of conversations they had had with prisoners throughout the week, but this information was not used in future ACCT reviews to prompt conversations with prisoners or to amend or update care plans to better support them.

**Protection of adults at risk (see Glossary)**

- 3.54 The local adult safeguarding strategy was out of date, and the prison safeguarding lead did not attend regular meetings with the local authority safeguarding adults board. However, senior leaders had been working actively to rebuild contact, and understood when to seek advice and guidance from external partners; there had been two referrals to the local safeguarding adults board in the previous 12 months.
- 3.55 Wing officers we spoke to demonstrated a reasonable awareness of indicators of vulnerability, and said they would refer any prisoners they had concerns about to their manager or to the weekly SIM, which was appropriate.



## Section 4 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.

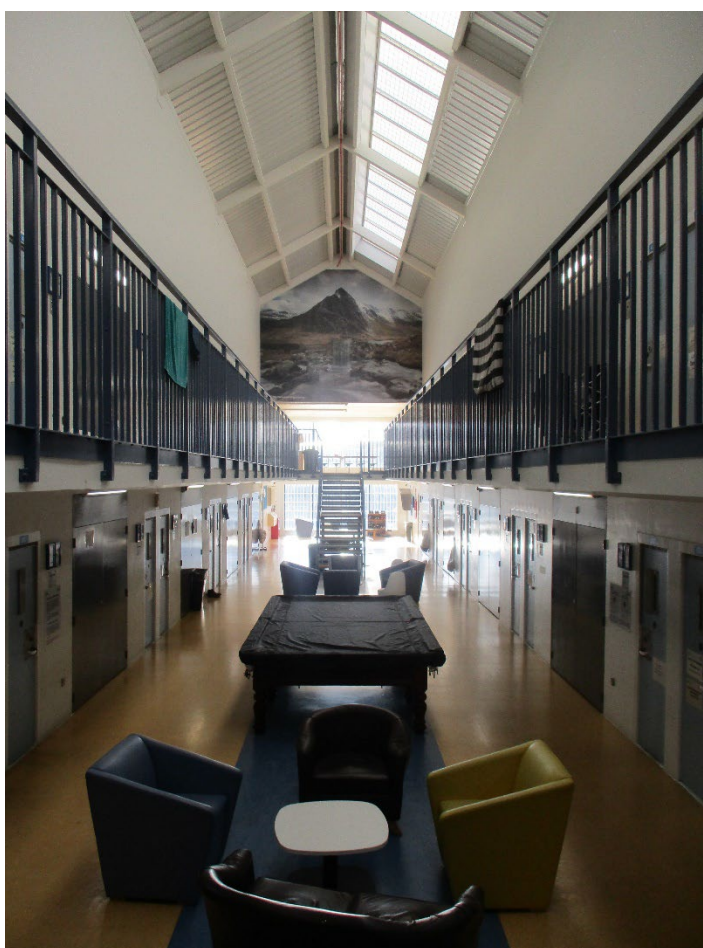
- 4.1 In our survey, only 51% of prisoners said that they felt staff treated them with respect, against the comparator of 72%. Around 100 new officers had started work at Berwyn in the last year and were still learning the job. Wings were often staffed with predominantly new officers, leading to frustration among some prisoners who struggled to get assistance with queries and problems. Leaders had invested in support and development for staff, with credible plans to improve their competence and confidence.
- 4.2 We observed generally positive interactions between most staff and prisoners, with first names used and staff knowing the men on their units. Most prisoners could identify members of staff they could talk to if they had a problem. However, because they spent so much time locked up, this hindered the development of more effective relationships, and staff were not always active in encouraging prisoners to engage in the regime and progress in their sentence.
- 4.3 The key worker scheme (see Glossary) was still not working effectively, there was no consistency in the allocation of key workers, too few sessions took place, and the quality was often poor. Leaders had plans to introduce a new scheme that would improve consistency for a significant minority of prisoners with the greatest needs. However, the majority of prisoners would have less-structured sessions that were more akin to welfare checks, and they would still not have an allocated officer.
- 4.4 There was a range of peer work roles, and some were particularly effective, notably violence reduction representatives and health care mentors who staffed a health promotion hotline for their peers. At our previous visit we had acknowledged the good work of 'chain breakers', peer representatives who helped other prisoners on the wings with everyday problems. At this inspection, we found this service had been reduced and the role was less effective; this was a missed opportunity for these prisoners to support staff in answering routine queries.

## 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

- 4.5 Prisoner living conditions were good overall. The prison was generally clean and outside areas were well maintained.
- 4.6 The three house blocks were separated into eight smaller wings, which all provided a decent standard of accommodation. The wings consisted of two landings, which were bright, and many had artwork on the walls.



### Wing conditions

- 4.7 Each cell had a shower, which prisoners greatly appreciated. Double cells were spacious and most men had the furniture they needed. In-cell technology consisted of an individual laptop for each prisoner. This was an excellent resource that allowed prisoners to submit applications, complete menus and shop orders, and access information about the prison at any hour.

- 4.8 Many prisoners complained about poor access to basic items like toilet rolls and cleaning products, and officers told us they spent a lot of time searching for these items. Leaders had introduced new control methods for issuing cleaning materials, but there was a lack of oversight by wing managers and these were not yet working effectively.
- 4.9 Each wing had a laundry supervised by a wing worker. The washing and drying machines were in constant operation and frequently broke down. The delays in fixing them meant that not all prisoners could have their clothes and bedding washed weekly. In our survey, only 39% of prisoners said that they could get clean bedding every week, compared with 58% at the last inspection.
- 4.10 Leaders were introducing the CRED (clean, rehabilitative, enabling, decent) programme, with prisoners working alongside maintenance staff to carry out repairs and refurbishment. They were confident that this would help to maintain good levels of cleanliness and appropriate conditions in cells.
- 4.11 In our survey, only 12% of prisoners said that their cell call bell was normally answered within five minutes, against the comparator of 29%. Leaders had recently introduced a new process to improve responsiveness and provide greater scrutiny. We did not observe delays during the inspection.

### **Residential services**

- 4.12 In our survey, only 32% of prisoners said the quality of food was good and only 25% that they had enough to eat at mealtimes, compared with 58% and 41% respectively at our last visit. We were told that budget restrictions and an increase in food costs had affected the quality and quantity of food served.
- 4.13 Prisoners could have two hot meals a day and there were sufficient menu choices to cover most diets. The quality of the food served during the inspection was adequate, but portion sizes, particularly breakfast packs, were small for adult men. Some food was substituted with less preferable options, and there were some differences between wings in what was served, which led to frustration among prisoners.
- 4.14 During our visit, the supervision of the serveries by staff was inadequate and led to some prisoners not getting enough to eat. There was insufficient portion control and arrangements for the serving of halal food were not always observed. Prisoners working on the serveries did not always wear the appropriate clothing.
- 4.15 The residential units had foldaway dining tables to enable communal dining. However, staff unlocked only six prisoners at a time to collect their meal, which was a disproportionate security measure and left no time for prisoners to eat their meals together (see paragraph 3.43).
- 4.16 Prisoners on all the enhanced units had some self-catering facilities and could cook their own food, although the limited choice of fresh food

available to buy restricted what they could make. Prisoners on mainstream units had no access to cooking facilities.

- 4.17 The prison shop provided a good range of products, other than the restricted variety of fresh food for enhanced prisoners. Local prison wages were comparatively low, and prisoners who did not have money sent in struggled to afford the shop prices.

### **Prisoner consultation, applications and redress**

- 4.18 Leaders had improved consultation arrangements since our last visit. The prisoner council was democratically elected and had been running regularly, alongside wing forums. It was positive to see that wing forums were made up of a cross-section of prisoners from different demographics. Leaders were actively trying to implement agreed actions more quickly to make sure that consultation was effective, but there was little promotion of areas that had improved, other than through the sharing of meeting minutes on in-cell laptops.
- 4.19 Due to the size of the population, a large number of both applications and complaints were submitted. In our survey, only 37% of respondents, against the comparator of 50%, said that applications were dealt with fairly, and only 50%, against 61%, said that it was easy to make a complaint; during the inspection many prisoners said they lacked confidence in the procedures.
- 4.20 Complaint forms were not always available on the wings, and we did not find any in Welsh. There was no evidence that managers answering complaints had spoken to the prisoner involved, many of the responses were inadequate and late. There was no quality assurance or analysis of complaints to identify themes to help leaders address the issues raised. Leaders had taken recent steps to improve the complaints process, but it was too early to see the impact of this.
- 4.21 Prisoners could submit applications electronically through their in-cell laptops, which made it easy for them to contact each department. Prisoners said that wing staff advised them to submit applications for most issues rather than trying to help them in person, which led to a large volume of applications that departments struggled to manage. We found weaknesses in the quality and promptness of responses to applications. Again, there was no quality assurance or strategic analysis of the issues raised.
- 4.22 Prisoners were able to communicate with their official and legal representatives through a range of official visits, phone or video calls. There was good access to videolink, with booths available for the local courts and a designated space for the police.

## Fair treatment and inclusion

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 (see Glossary), or those who may be at risk of discrimination or unequal treatment, 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.

- 4.23 The equality team was well resourced with a senior manager, full-time officer and analyst. Each protected group also had a dedicated lead officer responsible for driving work to meet the needs of prisoners in that group. There were several examples of innovative work to ensure fair treatment, including a Gypsy, Roma, Traveller (GRT) cooking masterclass with chefs from local restaurants and a world events day for foreign national prisoners. There had been many events to raise awareness, with prisoners in some groups well supported.
- 4.24 A well-attended monthly diversity and inclusion meeting included prisoner representatives. Discussions were purposeful and a range of data was reviewed. Efforts had been made to understand and address some disproportionate outcomes. For example, leaders had taken action to improve fairness in the allocation of work to minority ethnic prisoners.
- 4.25 Despite these structural safeguards, we still found evidence of unmet need across the prison. While some protected group leads were very proactive, particularly those with responsibility for foreign national, LGBT and GRT prisoners, others were not sufficiently focused on improving outcomes for the prisoners they represented.
- 4.26 In our survey, disabled prisoners were more negative about their experiences at Berwyn, although those with the most obvious and serious disabilities were reasonably well supported. Six cells had been adapted for prisoners with low mobility and around 40 prisoners had been given personal alarms for emergencies. A carers scheme paid prisoners to assist disabled prisoners with basic daily tasks, but they had not received formal training to make sure they understood boundaries and the expectations of the role. Around 65 prisoners had personal emergency evacuation plans (PEEPs), although some lacked sufficient detail and needed review.
- 4.27 Leaders had less grip on meeting the needs of prisoners with less obvious disabilities, including autism, ADHD and learning disabilities, and we found too many such prisoners confined to their cells with little to do. While some were under the care of the health team or received assistance from the education department, officers often lacked sufficient understanding of how to support their needs on the wings.

- 4.28 Leaders had recently reinstated forums to discuss race, and the equality manager was visible around site, listening to prisoners who had experienced discriminatory attitudes.
- 4.29 There were 50 foreign national prisoners, mostly located on the same wing to enable more targeted support. The lead officer for this group was active and supported by two foreign national peer supporters, who between them spoke multiple languages. The English for speakers of other languages (ESOL) tutor also worked closely with this cohort. Prison staff used telephone interpreting services when necessary (42 occasions in the previous 12 months).
- 4.30 Over 200 staff had received training to help them understand the behaviour of younger prisoners, including awareness of maturation and the long-term effects of adverse childhood experiences. Despite these efforts to increase awareness of their needs, leaders did not provide adequate interventions or support systems specifically targeted at young men, consultative forums were not held consistently, and there were limited activities to engage them.
- 4.31 More positively, older prisoners could access weekly age-appropriate gym sessions and group activities, and a social group called 'Cameo' (come and meet each other).
- 4.32 Discrimination incident reporting forms (DIRFs) had raised issues around race and homophobia. Leaders acknowledged the need to go further to develop a more robust strategy to address racist and homophobic attitudes and behaviours.
- 4.33 There was insufficient attention to the needs of prisoners with Welsh as their first language. Some important information was not translated, and prisoners could not easily identify staff who could speak Welsh.

### **Faith and religion**

- 4.34 The chaplaincy was staffed by a managing chaplain, four full-time chaplains and three visiting chaplains, which covered most major faith groups and enabled them to fulfil their statutory responsibilities. Until recently, there had been vacancies for the Sikh and Muslim posts, which had temporarily affected the experience of some prisoners of these faiths. The chaplaincy also provided good pastoral care for prisoners and were regular visitors to residential wings.
- 4.35 The chaplaincy facilities were very good, with a range of rooms for worship. The main chapel was well decorated and used for Anglican, Roman Catholic and Buddhist services, and a second space of similar size was furnished for Muslim, Sikh and Hindu worship. The managing chaplain aimed to create shared spaces for different religions to use.



**Chapel**

- 4.36 A meeting room offered regular religious studies classes and interventions such as the six-week Sycamore Tree programme provided by the Prison Fellowship Trust, teaching prisoners about victim awareness and restorative justice. This course was run frequently throughout the year with good completion rates. The Prison Fellowship Trust also provided a letter writing scheme after every Sunday service supported by volunteers from the community. An additional well-presented room was used for more sensitive matters, such as dealing with bereavement or attending community funerals virtually.

## **Health, well-being 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.

### **Strategy, clinical governance and partnerships**

- 4.37 Betsi Cadwaladr University Health Board (BCUH) was the lead provider of health and social care, and The Gables provided GP delivery.
- 4.38 Health and social care services were well led and responsive to patient need. Partnership working between the provider and the prison was a clear strength, with both working collaboratively to meet the needs of patients. Regular, well-attended partnership board meetings were held, and actions tracked and monitored.
- 4.39 A new health needs analysis had recently been published and leaders were working through its recommendations. Health and social care

delivery was agile in its response to changes in the demographics of prisoners received into Berwyn.

- 4.40 There was very good oversight of clinical services. An extensive suite of local and regional clinical governance meetings made sure that leaders had accurate performance data, and governance structures were used effectively to ensure continuous service improvement.
- 4.41 The local risk register identified active risks, which were reviewed regularly. Clinical incidents were promptly reviewed, and lessons learned were shared effectively with staff. BCUH senior leaders monitored clinical incidents classified as moderate harm or above, which was good practice. The head of health care was consistent in monitoring death in custody action plans, and clinical audits were used effectively to make sure actions were followed up. All services had an up-to-date service improvement plan that informed delivery.
- 4.42 Health care staffing was generally good and better than at the last inspection, apart from mental health services. Compliance with mandatory staff training, supervision and appraisals was consistently above 90%, which was very good. Staff we spoke to felt supported in their roles and valued by local leaders and the organisation. Safeguarding processes were well understood by staff and leaders. We observed a skilled and conscientious workforce working diligently to make sure patients' needs were met. Many patients and prison staff we spoke to were complimentary about the health services.
- 4.43 A confidential health complaints system was in place, and they were managed very well. The service focused on swift face-to-face resolution where possible. In the complaints that went through the formal system, the responses that we sampled demonstrated thorough investigation, an apology if required, and escalation route if the complainant remained dissatisfied.
- 4.44 Health services continued to support the valuable telephone helpline, which was staffed under supervision by enthusiastic peer health and well-being mentors. The helpline received between 2,000 and 2,500 calls a month from prisoners.
- 4.45 Clinical areas were clean, free from clutter and generally met infection-prevention standards. Health staff were easily identifiable, wore uniforms and adhered to bare-below-the elbows standards when in contact with patients.

### **Promoting health and well-being**

- 4.46 A prison-wide approach to promoting health included an annual joint health promotion day in the gym. There was an up-to-date disease outbreak plan with clear guidance, templates and contact details. 'Keeping well' was a thread visible throughout the prison, including promotion of eating well and keeping active supported by the dietician and the gym. A staff member with a specific public health role within



the health team had oversight of promoting health and drove annual plans.

- 4.47 Prisoners' laptops gave them access to a range of health information from individual specialities. For example, the physiotherapist had provided some impressive material to optimise recovery from injuries or underlying musculoskeletal ailments.
- 4.48 A range of screening and vaccinations included hepatitis micro elimination. Dry blood spot testing was well embedded with follow-up at three months. The community sexual health services provided a weekly session. A well-being unit in the main prison provided a safe place for prisoners who required additional support.

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

- 4.49 A well-led primary care team provided a responsive and wide range of services, including a comprehensive and extended allied health professional therapies team. Waiting times had improved since our last inspection.
- 4.50 A qualified nurse carried out initial reception screening of new arrivals. A pharmacy technician was present in reception to undertake a medicines reconciliation until 6pm, and a GP worked remotely to review the notes and take on any overnight prescribing. Pressures in reception had meant that an additional primary care nurse and pharmacy technician had to be redeployed to this area, which affected health services delivery elsewhere.
- 4.51 The three practice nurses now carried out secondary screening for new arrivals; they were in active training to take on the management of patients with complex and long-term conditions, which was part of the primary care improvement plan. Although not all patients with complex care needs had received a full assessment or a personalised care plan, this work was part of the primary care improvement plan.
- 4.52 Prisoners could request health appointments through their laptops or the electronic kiosk on their wing. They could adjust and cancel appointments by calling supervised peer workers on the helpline (see paragraph 4.44), which could also be used for queries and to request further information.
- 4.53 The 22 GP sessions held each week prioritised new arrivals, which meant that some routine appointments had to be rescheduled when admissions were high. In our sample, we found that most routine appointments were seen within two weeks and urgent cases within a few days. There were, however, some inequitable waits for those scheduled to see a specific GP; they could wait for up to six weeks and not all were given the option to change doctor.
- 4.54 Not all clinical records were at the standard we would expect. Entries did not describe the interventions and assessment in adequate detail.

This was exacerbated by the lack of training of health staff and the inefficient set-up of the clinical templates.

- 4.55 Emergency response equipment was available across the prison, and all health clinicians were trained in life support and on the site 24 hours every day. Health staff told us there were no delays in ambulance calls, and resuscitation equipment was checked regularly. Some of the prison-owned defibrillators dispersed in wing offices were particularly dirty, which carried risks. Not all officers were up to date with their basic life support training.
- 4.56 There was good oversight of hospital escorts, which health services managed well. The eight commissioned escorts per day were adequate to meet the needs of the population. Several failed appointments were created by an unreliable taxi provision, which the prison had not resolved.
- 4.57 Palliative care was rarely needed. Those requiring palliative and end-of-life care were managed by a named nurse within the community and through prison complex case management.

### **Social care**

- 4.58 Social care delivery was led by Wrexham County Borough Council. There was a comprehensive information-sharing agreement between the council and the prison, and the memorandum of understanding was awaiting final sign off.
- 4.59 The health care team and the prison had well-established and clearly understood referral pathways into social care support. A team of social workers and assessors made sure there was strong oversight of the referral process and that assessments were completed promptly. Office space for social workers was inadequate and did not allow them to access electronic prison records.
- 4.60 Two prisoners were in receipt of a formal care package. Records showed that their care plans were comprehensive and care delivery was of a good standard. We spoke to one prisoner who told us social care staff were excellent.
- 4.61 Therapies team staff told us that any aids or adaptations required for prisoners were provided promptly.
- 4.62 The house blocks continued to have informal arrangements with prisoner carers who assisted with non-personal care (see paragraph 4.26). As at the last inspection, the carers still received no training or supervision, which meant that oversight of their work remained poor and created unnecessary risks.

### **Mental health**

- 4.63 Chronic recruitment issues with registered mental health nurses meant there were some gaps in service delivery. This was somewhat offset

through the use of regular agency nurses, and knowledgeable and skilled staff were working hard to make sure patients received care.

- 4.64 The busy service was delivering a stepped care model in line with best practice. The team received over 200 referrals a month and carried out assessments within expected timescales. Multidisciplinary working was evident and underpinned by weekly multidisciplinary review meetings to make sure patients received the most appropriate care and treatment. The team was well led with leaders making good use of data and patient feedback to drive improvement. The team provided valuable input to prison safety meetings.
- 4.65 Psychological staff delivered a range of individual therapies, and the recent appointment of a senior psychologist meant further therapies would also become available. The team delivered a valuable suite of staff- and peer-led groups, although patients waited too long to access them - around 150 patients were waiting during our visit. The waits were further affected because the mental health team could use only one group room in the prison.
- 4.66 Mental health staff attended all initial ACCT reviews and maintained a good presence in the segregation unit. Many prison staff we spoke to valued their input, but some - particularly in the Menai unit where there was a greater level of mental health need - felt they would benefit from training, which the team did not provide.
- 4.67 Psychiatry provision had improved since the last inspection. Patients who needed a psychiatric review were seen promptly. There was good oversight of physical health monitoring for mental health patients. The learning disability nurse was working through a small backlog of physical health assessments and screenings for learning disability patients.
- 4.68 Electronic record keeping was of a good standard, and the patient notes we looked at had care plans and risk assessments. Leaders audited documentation monthly to provide assurances.
- 4.69 A lead member of staff was delivering good care and treatment for patients with mental health problems who also had substance misuse need. This made sure that patients with both needs were managed through the most effective pathway, and mirrored local community provision, which meant discharge arrangements were more seamless.
- 4.70 Patients continued to wait far too long for transfer to a secure mental health bed under the Mental Health Act. Only two of the 14 transfers in the last 12 months had taken place within the 28-day timescale, and the longest took 176 days, which was unacceptable. A further eight patients had been detained under the Mental Health Act on release at the gate.

## **Support and treatment for prisoners with addictions and those who misuse substances**

- 4.71 An up-to-date drug strategy document set out joint working arrangements and the recovery pathway, although it did not include a sufficiently detailed supply-and-demand reduction action plan. All prisoners found under the influence of illicit substances were invited to attend a harm minimisation group in the same week.
- 4.72 Oversight and quality assurance from service and middle managers required strengthening, as the outcomes of those referred into the service were not always clear from the clinical records or management reports.
- 4.73 There was clinical prescribing from experienced GPs for the 250+ patients on opiate substitution therapy. A group of substance misuse nurses had oversight of the clinical caseload. Prescribing was in line with national standards, and prisoners arriving on injectable buprenorphine (a synthetic opioid) had this maintained. New arrivals had urine testing for drugs, but follow-up urine testing had the potential to be bypassed, which meant that urine could be tampered with. All patients had five-day and joint 13-week reviews in line with expected standards. The prescribers documented decisions on the main health records, and the nurse merged these with clinical care plans.
- 4.74 New arrivals who were clinically unstable were monitored effectively on the induction wing. Clinical records demonstrated regular observations, withdrawal assessments and urine testing.
- 4.75 The psychosocial service prioritised initial assessment of those arriving under clinical prescribing regimes, which included harm minimisation education. Recent staff vacancies meant that there had been less group work and caseloads were managed down, creating higher numbers of patients per worker. A duty worker was allocated each day to pick up new referrals. Any immediate care interventions, such as connection with peer support workbooks and placing people on waiting lists, was done immediately.
- 4.76 When fully staffed, the team struggled to work at capacity due to the lack of appropriate rooms. Six 'recovery champions' were a key part of the service, providing peer support for all new arrivals and many on and off the caseloads.
- 4.77 Caseworkers supported approximately 15% of the population, through assessment, one-to-one work, guided self-help, brief interventions and groupwork. Each caseworker had caseloads of 60+, but not all patients had a comprehensive care plan, and not all plans set out a follow-up narrative to document that they had been actioned.
- 4.78 Ceiriog A Uppers was identified as the substance-free living wing. There were no incentives for prisoners to be on the wing, and it was still accepting those on opiate and sedating medication. Voluntary drugs testing was in place.

- 4.79 Community referrals were made for prisoners before their release, and they were given harm minimisation advice and training and supply of naloxone (a nasal spray to prevent overdose) where appropriate. Access to injectable buprenorphine was well developed in the Welsh community drug teams, but the number of prisoners released on this remained low.

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

- 4.80 Medicines were supplied by an onsite pharmacy. Pharmacists clinically screened all prescriptions and could intervene if necessary. Pharmacy staff told us they felt unable to influence prescribing policy and behaviour in the prison, which needed to be addressed. Pharmacists ran clinics to help patients with long-term conditions to manage their medicines, and patients could request an appointment by using an app.
- 4.81 Approximately 60% of medicines were given in possession, which was low compared with similar prisons. Risk assessments were completed for all patients, but the policy did not define how often in-possession risk assessments should be routinely reviewed. In the records we sampled, GPs reviewed risk assessments approximately every six months. Staff administering medicines did not know how to access a patient's latest risk assessment during administration. In-possession medicines were supplied as patient-named items with appropriate labelling and a dispensing audit trail. Patients had facilities in their cells to store medicines securely.
- 4.82 Medicines not issued in possession were administered by pharmacy technicians and nurses twice a day at approximately 7.30am and 4.30pm. Arrangements could be made to administer medicines more often if necessary. We observed poor management by prison officers of prisoners waiting at the administration hatch, which increased the risk of bullying and diversion of medicines.
- 4.83 Medicines were administered from packs labelled with the patient's name but that did not include dosage information. Staff used the information on SystmOne (clinical IT system) to determine what dose to give. This meant these medicines, including controlled drugs, were administered from stock, which was not in accordance with current guidance.
- 4.84 Medicines were stored securely in treatment rooms, but there were no robust systems to reconcile those held there. There was evidence that medicines had accumulated for some patients who had not collected them, but further medicines had been ordered and provided automatically. There was also no system for staff to report if someone repeatedly failed to collect their medicines, which was poor.
- 4.85 Staff had access to emergency medicines and over-the-counter remedies in automated biometric-access medicines lockers in nurses' treatment rooms on each wing and in the health care department. Pharmacy staff were alerted when an item was removed from the lockers for restocking purposes, but there was no process for auditing

who medicines had been provided to. The policies to administer paracetamol and ibuprofen to patients without prescriptions stated that only nurses could do this, restricting their use in some circumstances.

- 4.86 Errors, near-misses and drug alerts were dealt with appropriately. Fridges holding medicines had their temperatures monitored electronically across the whole prison, and pharmacy staff were alerted if they were out of range. There was a full range of standard operating procedures and policies, and a system to record that pharmacy team members had read and understood them.
- 4.87 The pharmacy managed the continuity of care for patients leaving prison well, including communicating information to their GP to help prevent delays to their treatment. The pharmacy also ran a pilot scheme to pre-register prisoners with a community GP if they were being released into a managed care environment to help their access to prescribed medicines. These approaches were sometime more difficult to manage for prisoners released to England, where NHS systems were different to those in Wales.

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

- 4.88 North Wales community dental services provided a well-led dental service to local community standards with 16 sessions a week, soon to be 17. Three-quarters of contact was urgent care and emergencies were often seen the next day. We also saw very clear examples of routine checkups, charting, denture provision and restorative dental care. Waits for routine care were long, at just over six months, but had improved since our last inspection, and treatments once started were carried out promptly. Oral health advice and interventions were offered in the dental surgery and leaflets were available on request.
- 4.89 The two surgeries had a decontamination suite between them. Both dental suites were clean and well maintained, and service logs were in place, as were staff training and registration details. The surgery was in dire need of a cooling system to prevent the previous shutdown of service in the summer heat. We were assured this was planned before the expected warmer weather.

## Section 5 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 (see Glossary) and are encouraged to engage in recreational and social activities which support their well-being and promote effective rehabilitation.

- 5.1 Time out of cell for prisoners was similar to our last inspection and still not good enough for a predominantly category C prison. Around 678 of the population of 1,937 prisoners (35%) were in full-time education, skills and work and they were out of cell for approximately nine hours a day. The 525 prisoners (27%) in part-time roles spent between six and seven hours unlocked. A very high 25% of prisoners were unemployed and were locked in their cells with little to do for 22 hours a day.
- 5.2 In our random roll checks we found around a quarter of prisoners locked up during the core working day. Time out of cell was particularly poor for all prisoners on Fridays and at the weekend.
- 5.3 Prisoners had good access to outdoor exercise, with some equipment and benches on yards making the environment more pleasant. However, association equipment on the wings was limited with most only having a pool table.
- 5.4 Prisoners could participate in a range of enrichment activities outside of formal education, skills and work, and leaders planned to extend this offer further.
- 5.5 In our survey, only 20% of prisoners said they were able to visit the library or borrow materials at least once a week, which was very low. Only the minority of prisoners in education could visit the library to browse for books; the rest had to order reading material to be delivered to their cells. Some reading material and podcasts were available through prisoners' in-cell laptops.
- 5.6 For those who could attend, the library offered a pleasant, welcoming and organised environment, run by two librarians who were supported by two prisoner peer workers. A varied selection of books were available, including easy-read texts and a range of fiction, but there were too few books in foreign languages.
- 5.7 The library held three reading clubs and a drama group each week, attended by between two and eight prisoners at a time. Two or three prisoners a week also went to the library to take part in Storybook Dads (enabling them to record a story for their children).

- 5.8 Facilities for physical education were very good. There was an impressive range of equipment across three different areas, a well-maintained outdoor all-weather pitch and large indoor sports hall. The gym was staffed by an enthusiastic team who delivered a range of appropriate activities.



**Weights room (top left), indoor sports facility (top right) and team sports**

- 5.9 The timetable was well planned. Prisoners could access a minimum of two sessions a week, and there were specialist classes for specific groups. Enhanced prisoners could attend up to six different fitness activities a week, which was impressive.
- 5.10 The PE department offered employment-related qualifications alongside a range of fitness activities, such as cross-fit and Park Run. Sports offered included rugby, cricket, badminton and pickleball, encouraging participation from a wide range of prisoners.



## Education, skills and work activities



Arolygiaeth Ei Fawrhydi dros Addysg a Hyfforddiant yng Nghymru  
His Majesty's Inspectorate for Education and Training in Wales

This part of the inspection is conducted by Estyn inspectors using Estyn's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

Expected outcomes: All prisoners are expected and enabled to engage in education, skills or work activities that increase their employability on release. There are sufficient, suitable education, skills and work places to meet the needs of the population and provision is of a good standards.

5.11 Estyn made the following assessment about the learning and skills and work provision:

Outcomes for prisoners were not sufficiently good.

### Teaching and learning

5.12 Most teaching staff and practitioners were appropriately qualified. They had robust subject, technical and vocational knowledge, and the skills and experience relevant to their roles. Most teachers and practitioners used beneficial schemes of work to plan learning, using individual learning plans to personalise the provision. Most teachers and practitioners gave clear instructions and explanations, and used a range of approaches to engage and motivate learners. As a result, when learners attended sessions, many made at least suitable progress in their subject, learning or developing valuable employability skills.

5.13 Most staff demonstrated strong working relationships with learners, understood their needs and created purposeful working environments. They communicated clear expectations of learning, work and behaviour, for example, reminding learners about rules regarding appropriate use of language. As a result, nearly all learners in sessions were respectful to their peers and staff. Most participated well and engaged positively in education, training or work sessions. Although teachers used peer mentors effectively where they were available, there were too few appointed to support learning in education and training.

5.14 Many learners in sessions valued the opportunity for the learning or work provided. Many teachers offered helpful support to learners to recall and build on prior learning. Staff assessed and tracked learners'

progress carefully and used this information suitably to plan the next steps. Similarly, many learners took good account of the feedback they received to improve the quality of their work. In the most successful examples, staff used information from learning plans to adapt teaching, for example, removing barriers for learners with dyslexia or other neurodivergent conditions.

- 5.15 Overall, many learners who attended education or training sessions achieved valuable accreditations. Around a quarter made insufficient progress, largely due to poor attendance. Learners from ethnic minority backgrounds achieved as well as their white peers. However, those with identified additional learning needs did not achieve as well. Around a third of learners were not positive about their learning experiences. This was because they had been allocated to courses that they had not expressed an interest in or did not build on their prior learning. Sometimes, they felt they were repeating courses for which they already had accreditations. For a few learners, this led to disinterest in their education.
- 5.16 Many learners made strong progress in developing their vocational skills in workshops and training sessions. For example, in construction, they developed their brickwork, plastering and carpentry skills well. A few learners produced work of a very high standard, such as building a wooden portcullis and drawbridge for a Welsh castles competition. In the training kitchen, they developed valuable work-related skills in preparing, cooking and serving high-quality meals. Many achieved valuable accreditations in vocational areas, and the pace and progress towards their qualifications was strong. At the time of the visit, around a quarter of prisoners released on licence had secured employment on release.
- 5.17 In numeracy lessons, a majority of learners developed their numeracy skills well. For example, they divided hundreds, tens and units by single-digit numbers, converted division remainders to decimals, and competently calculated equivalent fractions. Many recalled previous learning well and acquired new knowledge and skills during the sessions. In literacy lessons, a majority of learners made suitable progress, though they did not develop their independent writing skills well enough. In some sessions, teachers focused too narrowly on supporting learners to complete repetitive tasks, such as in booklets with a limited range of teaching activities. In these cases, teaching was not sufficiently engaging or challenging, it did not link learning well enough to meaningful contexts, and it did not deepen or broaden learners' understanding of the real-life or vocational uses of their learning. While learners achieved useful accreditations in literacy and numeracy, the pace of progress towards these accreditations was too slow.
- 5.18 Though many learners valued the learning opportunities, a majority of learners engaging in education or training only did so part-time, reporting frustration that the offer was not available on a full-time basis. Around a quarter of prisoners were unemployed and, therefore, did not

benefit from education, skills and work. Overall, too many prisoners had limited opportunities to learn valuable skills.

### **Well-being, care, support and guidance**

- 5.19 Nearly all staff developed positive relationships with learners, based on respect and a sound understanding of their individual needs. Overall, most learners reported feeling safe in education and that it had a beneficial impact on their well-being. During the inspection, behaviour in classes and workshops was good. Learners moved between lessons calmly and arrived ready to learn, following well-established rules and routines to promote a safe environment. Most conducted themselves responsibly and respectfully in education. However, a few struggled to engage when they did not fully understand their allocation to their course.
- 5.20 The provider had implemented secure processes around induction, including baseline assessments and profiling for vulnerabilities and additional learning needs. No learners had undertaken a Welsh language induction at the time of the inspection and arrangements for this lacked clarity. During induction, prisoners benefited from one-to-one information, advice and guidance relating to the education and work offered in prison and their long-term aspirations for release. However, this advice and guidance did not consistently prepare prisoners to make independent and well-informed decisions. Too often, individual learning and work plans did not meet learners' needs and interests or link meaningfully to their sentence plans. As a result, a minority of learners were not enrolled on their chosen courses.
- 5.21 Overall, attendance had improved considerably since the last inspection. Despite this improving picture, learners did not attend education, training or work well enough. Generally, attendance was best in vocational and education activities and lower in work. A minority of the prisoners reported that wing staff did not encourage them to attend education, training and work.
- 5.22 Those learners who attended education or work valued the opportunity to develop skills and have structure and routine. They reported that this benefited their well-being. However, the provider did not offer full-time education or training for a majority of learners. In addition, too many prisoners were unemployed. This did not adequately prepare them for the realities of work, training or education on release.
- 5.23 A small number of prisoners took on leadership roles and responsibilities through the peer mentor programme. Learners valued the support provided by these mentors in education, reintegration and resettlement. There were good opportunities for prisoners to develop their physical health and well-being, with a good quality gym, sports hall and astroturf facilities, that were used well, including for evening football matches. A few learners completed qualifications in this area, such as towards becoming a gym instructor, personal trainer and in first aid.

- 5.24 In a few courses, learners were supported to recognise and respond appropriately to damaging or unhealthy behaviours and apply this learning to their own lives, for example, in areas such as communication, relationships and healthy living. This provision was strengthened through partnerships with external organisations. The provider had very recently implemented a new independent living skills course. However, they did not consistently plan for or track independent living skills or social and employability skills.
- 5.25 The college additional learning needs coordinator worked with the neurodiversity support manager to assist prisoners during reception and induction. Information gathered was then shared systematically with the wider prison staff team, alongside basic strategies for supporting prisoners with these specific needs. Further, these staff provided the education and wider prison team with professional learning on important aspects of additional learning needs. As a result, in lessons staff were sensitive to the needs of learners which was helping to remove barriers to learning. However, prisoners reported that not all staff across the prison consistently demonstrated an in-depth understanding of how to meet prisoners' wide range of complex needs.
- 5.26 The provider used a helpful range of interventions and support for learners to overcome barriers to learning. For example, the prison had recently reintroduced on-wing reading support. Learners of English as a second language had helpful opportunities to develop language skills to support them on release with finding work or helping families. However, the education and training offered for vulnerable prisoners was too narrow.
- 5.27 The prison provided a beneficial range of resettlement advice, guidance and support through the resettlement hub. This welcoming, and well-considered forum brought together important partners to support prisoners in preparation for release. For example, learners benefited from practical support with opening bank accounts and opportunities to develop skills for employment, such as interview preparation. Staff offered support to prisoners after release, with opportunities to contact job coaches for ongoing employment support. At the time of the inspection, prisoners with addresses in England did not benefit from support from Careers Wales. Despite this, the prison ensured these prisoners received appropriate support through other channels.
- 5.28 During their last 12 weeks before release, the prison provided enhanced education opportunities with links to employment, for example, in the fields of scaffolding, or welding and civil engineering as part of the manufacturing offer. Where this was most effective, prisoners were released with secure employment offers. This was enhanced by effective partnerships working together to support prisoners to be successful on release, such as securing funding to provide tools for future employment. However, prisoners' understanding of this provision across the prison was too variable. This was exacerbated for those prisoners with uncertain release dates, or part of

early release schemes. Over the last six months, the prison had not used release on temporary licence (ROTL) to prepare learners for their next steps.

### **Leading and improving**

- 5.29 Senior education staff had a sound understanding of their provision, and were active in sustaining and aiming to improve provision and outcomes for learners. Education managers and staff at all levels shared a common goal of preparing prisoners for productive lives while in prison and on their release.
- 5.30 The senior education managers employed by the Prison Service and the main contracted education provider, Novus Cambria, worked well together to provide a cohesive education and work offer. The head of learning and skills and the head of education, skills and work had effective working relationships with the wider prison's senior managers.
- 5.31 Learning environments were of good quality. There was a purpose-built education block with well-resourced classrooms and library. Vocational learning workshops were of exceptional quality, and were spacious and well equipped. The gym, sports hall and astroturf pitch were also well-equipped and used effectively to support learning.
- 5.32 There was a strong and well-considered provision offer with a useful range and balance of learning programmes. However, the largely part-time regime for education and training limited the overall potential impact of the education and training provision.
- 5.33 There was a good range of literacy and numeracy provision for learners to develop their basic skills, and a small but suitable programme for speakers of languages other than English. A sound range of general education classes in art, graphics, music technology and business studies offered accredited and non-accredited provision. There was worthwhile personal and social development in some subjects, for example, graphics, art and music, allowing learners to use those subjects to reflect on their behaviour, mental health and well-being.
- 5.34 The vocational training offer was strong, with good opportunities to prepare learners for work in prison or on release. These included construction trades, such as brickwork, plastering, site and bench joinery, as well as a training kitchen, barber shop, warehousing and logistics. These programmes offered non-accredited and accredited provision at levels 1 and 2. Learners who completed accredited programmes had preferential opportunities to progress to work in the prison. There were examples of valuable accredited courses available to prisoners working in the prison industries, offered in collaboration with external work-based training providers, which provided them with industry-standard qualifications. For example, a few learners in the metal fabrication facility completed their welding coding qualifications, and some gained gym and fitness coaching or manufacturing qualifications. Learners also had valuable opportunities to gain qualifications to support them in gaining work on release, including the

construction skills certification scheme (CSCS) card, forklift driver qualifications or scaffolding courses.

- 5.35 A few learners benefited from participation in higher-level qualifications through the Prisoners' Education Trust and the Open University, although these prisoners did not get paid equitably for their participation in these programmes compared with other courses. Learners could access a range of electronic learning resources from their cells through the Berwyn content hub on prisoners' laptops. A small but useful range of in-cell provision was provided for learners who were unwilling or unable to leave their cells.
- 5.36 Vulnerable prisoners had a narrower offer of education and vocational training in comparison to prisoners in the general population. For example, there was no provision for essential skills numeracy for them, and they could only access the education facilities one day per week. They did, however, have classroom space in the workshop areas and a range of vocational training and work provision. Leaders had identified this as an issue and had been working to improve the equity of provision for these learners.
- 5.37 There was a suitable reading strategy, which included helpful initiatives to encourage prisoners to read for enjoyment and to support well-being, such as a drama group which facilitated group reading of plays. However, several of the actions in the strategy and plan had not been implemented and the main library could largely only be accessed during the working day if learners attended education courses. At the time of the inspection, there was limited provision for emergent readers, particularly as the Shannon Trust literacy programme activities had been temporarily suspended. Overall, there was not enough emphasis on promoting the use of Welsh and supporting Welsh first-language speakers or learners, including during education induction.
- 5.38 Leaders had a strong focus on improving the quality of teaching and learning. In most cases, hub managers had beneficial opportunities to contribute effectively to self-evaluation through their annual area self-assessment report. Leaders had established beneficial self-evaluation systems and reports that were honest and accurate and used to inform priorities for improvement. This has led to improvements in important areas, such as tracking learners' learning progress, including those at greater risk of adverse outcomes.
- 5.39 Leaders had recently established regular performance management for staff. This was in the very early stages of development. In staff appraisals, targets and objectives were not focused well enough on improving the practice of teachers and practitioners. Self-evaluation outcomes were not used well enough to inform performance management targets, which impacted on the consistency and pace of progress towards a few improvement priorities.
- 5.40 Most staff reported good communication and relationships with their managers and felt supported by their line manager in their career development. Leaders supported staff to work with other organisations

to improve their practice, skills and technical knowledge. They provided beneficial opportunities for staff to progress with valuable teaching qualifications. They established suitable professional learning for all staff, including training for enhancing vocational skills and strengthening the provision for learners with additional learning needs. However, leaders had not systematically evaluated the impact of professional learning on the well-being and progress of learners.

## Section 6 Preparation for release

**Preparation for release is understood as a core function of the prison. 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 understands the importance of family ties to resettlement and reducing the risk of reoffending. The prison promotes and 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.

- 6.1 The availability of social visits had improved since the last inspection, with sessions offered six days a week. Visits were available three times a week for remand prisoners, enhanced prisoners could access a two-hour session twice a week, and all other prisoners had a weekly one-hour session. No evening visits were available.
- 6.2 The visits hall provided a pleasant environment. It was spacious and well decorated, with a range of food and drink in the prisoner-run bistro. Leaders had also created a quiet and private sensory room for visits with neurodivergent children who struggled to cope in the busy visits hall.



**Visits hall**



- 6.3 Social visits did not always start on time and subsequently prisoners did not receive their full entitlement. Leaders were in discussions to resolve this issue. At the start of sessions, visitors had to wait in a small side room before they were let into the visits hall, sometimes for lengthy periods, which was uncomfortable for many. Prisoners also complained about disproportionate supervision from some visits staff which encroached on their visit, with some standing over their visitors, challenging any small movement. Only 49% of prisoners in our survey said that staff treated their visitors with respect during visits, compared with 68% in similar prisons.
- 6.4 In-cell telephones enabled most prisoners to keep in contact with family and friends. While it was positive that secure video-calling facilities (see Glossary) were available on each house block, only 15 prisoners a day could access this, which did not meet demand.
- 6.5 The families service provider had changed since our last inspection and was now Barnardo's (national children's charity) who provided a very good family service. The team consisted of a senior lead, two family engagement workers who helped prisoners to establish contact with their children, and two family support workers who staffed the welcoming and child-friendly visitors' centre.
- 6.6 Barnardo's also delivered an impressive 16 family days a year, and had hosted three sports days involving staff, prisoners and their families. These events were well received and had helped to build positive relationships.

## Reducing reoffending

Expected outcomes: Prisoners are helped to change behaviours that contribute to offending. Staff help prisoners to demonstrate their progress.

- 6.7 Work to reduce reoffending continued to be reasonably good. The experienced head of reducing reoffending chaired a well-attended monthly meeting that brought together leads for each of the rehabilitation pathways.
- 6.8 A wide range of experienced partners were located together in an impressive resettlement hub, which enabled effective communication and joint working. Prisoners could also attend the hub to discuss their resettlement plans as they prepared to return to the community (see paragraph 6.42).
- 6.9 Berwyn held a complex population of prisoners, and there were now far more remand prisoners and those serving short sentences than at the last inspection. This inevitably placed a burden on the staff trying to prepare them for release. To address some of these pressures, leaders in the offender management unit (OMU) had assigned three prison offender managers (POMs) to work with specific groups, including remanded prisoners. This had led to improved levels of contact for

these groups, and enabled early and consistent work to plan for their release.

- 6.10 Staffing in the OMU had improved since the previous inspection, although there were still five vacancies for probation POMs. Three new staff, however, were due to start the following week. Most of the prison officer POMs were in post, although they were regularly cross-deployed to other operational tasks, which limited their time to work with prisoners on their caseload. POMs told us that these duty changes often happened with very little notice, which meant they had to cancel appointments with prisoners. This inevitably contributed to prisoner frustration about the support they received to manage their sentence.
- 6.11 Four senior probation officers provided regular support and guidance to POMs to help improve their work with prisoners. A monthly OMU team meeting included updates on policy as well as guest speakers to raise awareness of current issues, which supported an ethos of continuous improvement across the team.
- 6.12 It was positive that most prisoners (80%) had had an assessment (OASys) of their risk and an associated sentence plan completed in the previous 12 months. The quality of those we reviewed was generally good, especially those produced by POMs at Berwyn. However, at the time of the inspection 93 prisoners still did not have an initial sentence plan more than three months after they had been sentenced, which delayed their ability to progress. In most of these cases, the responsibility to complete this lay with the community offender manager (COM). Prison managers did not routinely track whether COMs had completed them so that they could escalate any delays to senior probation colleagues in the community.
- 6.13 While most prisoners had a sentence plan, many of those we spoke to were not aware of the details. This was reflected in our survey where only 37% of respondents said they had one, against the comparator of 62%, and of these only 25%, against 47%, said staff were helping them to achieve their targets.
- 6.14 In our reviews of plans, we found that contact between POMs and prisoners largely focused on time-bound tasks, including preparing parole dossiers, OASys reports and categorisation reviews. We saw very few examples of POMs facilitating structured one-to-one offence-focused work to enable prisoners to demonstrate they had reduced their risk. Many prisoners went for long periods without contact with their POM. To compound this, few prisoners also received support from a key worker (see paragraph 4.3), and records of the sessions we reviewed were not focused on sentence progression.
- 6.15 This lack of face-to-face contact was mitigated to some extent because prisoners could use their in-cell laptops to send and receive short messages to their POM, although even here we found evidence that they sometimes waited more than a month for a reply. Managers did not routinely monitor this data for quality or timeliness. Currently none

of the POMs were able to work with Welsh-speakers (see paragraphs 4.33 and 5.36).

- 6.16 Despite the lack of proactive support from POMs and key workers, some prisoners had been able to make reasonable progress against their sentence plan targets, particularly those related to drug and alcohol use. We also saw evidence of progress against targets to attend education or work, although the number of full-time posts were limited (see paragraphs 5.1 and 5.21).
- 6.17 Prisoners made the least progress against targets linked to offending behaviour. This was often due to a lack of risk-focused intervention from their POM or because they were waiting for a specific accredited programme that had a long waiting list or that the prison did not offer (see paragraph 6.29).
- 6.18 Vulnerable prisoners were particularly disadvantaged in making progress in their sentence, due to the lack of suitable offending behaviour courses for them at Berwyn (see paragraph 6.30) and inequitable access to work and education (see paragraph 5.35). The governor had commissioned the psychology team to review the offer for prisoners convicted of sexual offences in late 2024, and the resulting action plan looked promising.
- 6.19 Security classification reviews were mostly completed on time, and the decisions in the cases we examined seemed justified. However, prisoners were not always given a copy of the decision with suggested areas to focus on to make progress next time they were considered for recategorisation.
- 6.20 In the previous 12 months, 385 prisoners had been assessed as suitable for open conditions, many of whom were eligible under the temporary presumptive recategorisation scheme (see Glossary). Prisoners were generally moved promptly to a category D establishment to complete their sentence.
- 6.21 Prisoners could also request an individual transfer to another prison, for example to enable them to complete an offending behaviour programme not available at Berwyn, or to be closer to their home address as they neared release. However, most applications were rejected by the prisons requested, often without explanation.
- 6.22 The prison no longer used release on temporary licence to help prisoners maintain family ties or secure employment in the community before release.

## Public protection

Expected outcomes: Prisoners' risk of serious harm to others is managed effectively. Prisoners are helped to reduce high risk of harm behaviours.

- 6.23 The prison had appointed a senior manager to lead work to protect the public from prisoners presenting the highest risks. There was now also a monthly steering group to provide high-level oversight and guidance to improve public protection measures. This group had already made a change to the monthly operational risk management meeting so that it had a more appropriate focus on prisoners who presented the highest risk.
- 6.24 The prison benefited from having a public protection hub manager in the OMU and a dedicated team of knowledgeable case administrators. This team screened all new arrivals and promptly shared identified risks with the relevant POM to implement appropriate measures, such as child contact restrictions or phone monitoring. There was a large team of staff to carry out phone monitoring, which was up to date for the 29 prisoners subject to this measure. These staff had received guidance about what to listen out for and how to respond. We saw examples where concerns identified were shared through the intelligence process, and where prisoners had been placed on report for breaching restraining orders.
- 6.25 There were currently no arrangements to monitor systematically the video calls made by prisoners subject to phone monitoring. Although this gap was not unique to Berwyn, it presented a potential risk.
- 6.26 An occurrence book was used to record child protection issues, and concerns about controlling and coercive behaviour exhibited by prisoners in the visits hall. Entries were added by prison staff as well as those from the family service provider, and then shared as appropriate, for example with POMs so they could be included in risk management plans.
- 6.27 POMs handed over responsibility for cases to COMs at the appropriate point in a prisoner's sentence to plan for their residual risks before release. We saw effective information sharing by POMs during this phase, including attending community meetings for prisoners who were to be managed under Multi-Agency Public Protection Arrangements (MAPPA).
- 6.28 In the cases we reviewed, risk management plans for prisoners were mostly reasonably good, with appropriate conditions applied for those eligible for supervision on licence after release.

## Interventions and support

Expected outcomes: Prisoners are able to access support and interventions designed to reduce reoffending and promote effective resettlement.

- 6.29 The prison was one of the first to offer a new suite of accredited programmes suitable for a range of offending behaviours. The programme team had a good understanding of the needs of the population, but had plans to deliver a course to only about 100 prisoners in the next 12 months. This was a low target for a population of nearly 2,000 men, most of whom were category C. Prison data indicated that about 175 prisoners identified as suitable for one of the new courses were due to be released in that time.
- 6.30 Berwyn held over 100 prisoners convicted of sexual offences (PCOSOs), 23 of whom had been at the prison for longer than a year. Although the new programmes were suitable for these prisoners, leaders claimed they would not be able to participate because it was not possible to move them from the vulnerable prisoner wing to the programme building; this was an inadequate reason.
- 6.31 Programmes for PCOSOs were available at other establishments, but the prison was unable to provide evidence that any prisoners had been transferred to complete one of these courses in the previous 12 months or were scheduled to do so in the future.
- 6.32 In the previous 12 months, many prisoners had benefited from one of a range of non-accredited interventions available at Berwyn. Over 200 prisoners had completed the Timewise in-cell workbook. This included exercises to help prisoners think about the consequences of their actions, especially impulsive behaviour, and support better decision-making. It was positive that some remand prisoners had also completed these workbooks. However, there was no process for POMs or key workers to routinely meet prisoners who had completed a workbook to discuss what they had learned and how they might use this to progress in their sentence.
- 6.33 About 80 prisoners had completed the Sycamore Tree victim awareness course, facilitated by the chaplaincy (see paragraph 4.36). The chapel also hosted regular well-attended groups to support prisoners who had issues with gambling.
- 6.34 Many prisoners had benefited from structured interventions to support drug and alcohol use (see paragraph 4.77). The health care team offered several interventions to support mental well-being, such as Coping with Anxiety and Low Mood (CALM). The impressive well-being hub enabled prisoners to attend appointments and learn new skills in a calm and supportive environment (see paragraph 2.7).
- 6.35 Leaders had opened an impressive, bright and welcoming well-being hub for learners, which enabled prisoners to attend appointments and learn new skills in a calm and supportive environment. The hub

included a prisoner-staffed coffee shop and restaurant for staff, and a barbers. Prisoners benefited from and valued these facilities for education and work, demonstrating high levels of positive behaviour and engagement when in these areas.

- 6.36 About 40 prisoners had completed elements of the independent living skills course, which covered personal care and healthy lifestyles. There were well-developed plans to expand the course to include budgeting and cooking, which would be particularly beneficial to prisoners who had spent long periods in custody or never previously lived on their own.
- 6.37 Staff from the Department for Work and Pensions (DWP) prepared benefit claims for prisoners as they neared the end of their sentence and activated them on the day of release. This meant that initial payment could be made immediately into their bank account on discharge (see paragraph 6.48).
- 6.38 There was good support for prisoners to gain employment on release. Prisoners were helped to open bank accounts and complete CVs so they could apply for jobs. The prison had arranged monthly job fairs attended by local employers, some of whom had carried out interviews on site and made firm offers of employment on release.
- 6.39 Leaders had taken action to make sure that the increasing number of prisoners from outside Wales held at Berwyn were not disadvantaged in finding employment on release. A representative from the Greater Manchester and Merseyside New Futures Network (see Glossary) had been invited to the establishment's employment advisory board to develop and maintain links with prospective employers in those regions.
- 6.40 The prison had also secured funding from DWP to deliver engineering and welding qualifications that benefited both English and Welsh prison leavers.
- 6.41 In the previous 12 months, just over a quarter (26.12%) of prisoners on licence six weeks after release were in employment. This had increased year-on-year since the previous inspection.
- 6.42 Prisoners approaching release were invited to the resettlement hub to meet staff supporting their return to the community face to face. Prisoners being released to Wales had good support from Nacro, the accommodation support service. Those being released to other areas relied on telephone or video calls arranged by resettlement staff with the relevant accommodation service. It was positive that Nacro now also offered helpful advice to all remand prisoners to minimise the potential for them to lose accommodation while in custody.



#### **The resettlement hub**

- 6.43 The strategic housing specialist had provided crucial support to several prisoners to make sure they did not lose their tenancies while in custody, including challenging possession orders in court. The specialist had also arranged for representatives from most of the local authority housing teams in North Wales to attend the prison monthly to meet prisoners at risk of being homeless on release and complete a housing assessment. This gave the prison more time to support those who would not be provided with local authority housing, such as exploring the private rented sector or enacting emergency accommodation arrangements.
- 6.44 We saw several examples of diligent work by resettlement staff and partners to secure accommodation for prisoners on release, but there remained a shortage of housing, especially in Wrexham to where most leavers from North Wales returned. Joint working with Wrexham Council was not fully effective as the council refused to attend the prison due to its risk assessment of the prison as a place of work.
- 6.45 A fifth of those released initially went to probation approved premises (AP) for a period of supervision on licence, but there was no data on whether they had sustainable accommodation to move on to afterwards. It was positive that the prison had recently began facilitating meetings between AP managers and prisoners due to go there, to minimise the chances they would breach any of the conditions at the AP and be recalled to custody.
- 6.46 Only 41% of prisoners released went to their own property, a rented property or to live long-term with family and friends. In the previous 12 months, over 250 prisoners were homeless on the day of release (10% of all releases).

## Returning to the community

Expected outcomes: Prisoners' specific reintegration needs are met through good multi-agency working to maximise the likelihood of successful resettlement on release.

- 6.47 The number of releases to the community had increased from 140 a month at the previous inspection to about 230. Discharge arrangements were well managed, including ensuring continuity of health care. The prison had a supply of clothing for those who needed it.
- 6.48 After release, prisoners could wait for transport in the departure lounge in the visitors' centre. Staff from DWP were also available here to activate benefit claims previously started so that prisoners had funds to meet any necessary expenditure not covered by their travel warrant (see paragraph 6.37).
- 6.49 In the previous 12 months, many prisoners had benefited from helpful through-the-gate support. This included support from Nacro, St Giles, the commissioned rehabilitative service provider for social inclusion, and Street Soccer Academy, a charity offering a personal development programme and training participants to gain a football coaching qualification.



## Section 7 Progress on concerns from the last inspection

### Concerns raised at the last inspection

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

#### Leadership

##### Priority concern

**A staff shortage was affecting leaders' ability to deliver a fully functioning rehabilitative regime.** In particular, a severe shortage of band 3 officers, probation and health care staff affected the delivery of some services.

**Addressed**

#### Safety

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

At the last inspection, in 2022, we found that outcomes for prisoners were reasonably good against this healthy prison test.

#### Key concerns

**Levels of violence remained too high.** Data were not used well to monitor and identify trends over time, or to inform an effective action plan.

**Partially addressed**

**Rates of self-harm remained too high.** Key work was not used to support prisoners at risk of self-harm and debriefs following acts of self-harm were not always carried out. Analysis of self-harm data was too limited to measure progress and inform improved practice.

**Not addressed**

## Respect

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

At the last inspection, in 2022, we found that outcomes for prisoners were reasonably good against this healthy prison test.

### Priority concern

**Patients waited too long to access routine primary care clinics.** Primary care staffing and inconsistent prison officer escort arrangements led to long waits of up to 12 months for many routine clinics.

**Addressed**

### Key concerns

**The applications and complaints systems were not fully effective.** Many prisoners waited too long for a response to their applications and complaints. Data were not analysed to understand and address common themes and there was a lack of effective quality assurance to drive improvement.

**Not addressed**

**Several patients had been taken off antipsychotic and other psychiatric medicines which had led to a deterioration in their condition.** This created potential difficulties when psychiatric treatment had to be reconstituted.

**Addressed**

### Purposeful activity

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

At the last inspection, in 2022, we found that outcomes for prisoners were not sufficiently good against this healthy prison test.

### Priority concerns

**Too many prisoners did not have enough activity or time unlocked, especially unemployed prisoners.** There were insufficient education and work places for the population.

**Partially addressed**

**Prisoners' attendance in education, training and employment was not good enough.** Not enough was done to encourage prisoners to attend activities and often only about 60% of prisoners allocated to an activity turned up.

**Partially addressed**

## Key concerns

**Not enough prisoners understood the purpose of their allocation to education, training and employment.** Some felt they were allocated to activities that were not aligned to their interests and often disrupted classes.  
**Partially addressed**

## 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 2022, we found that outcomes for prisoners were not sufficiently good against this healthy prison test.

## Key concerns

**Telephone and mail monitoring arrangements were in disarray.** Phone monitoring was not always carried out when required to reduce the risks of harassment and further criminal activity.

**Addressed**

**The frequency and quality of offender manager sessions with prisoners was not good enough to drive sentence plans.** Work had become focused on timebound objectives such as parole reports, categorisation and OASys reports.

**Not addressed**

## Appendix I About our inspections and reports

HM Inspectorate of 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, court custody and military detention.

All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN 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. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

All Inspectorate of Prisons 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 this Inspectorate'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.

### **Preparation for release**

Preparation for release is understood as a core function of the prison. 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.

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 judgements: in some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by HM Prison and Probation Service (HMPPS).

### **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 well-being 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 our inspections are unannounced and include a follow up of concerns from the previous inspection.

Inspections of prisons in Wales are conducted jointly with Estyn and Healthcare Inspectorate Wales. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## **This report**

This report outlines the priority and key concerns from the inspection and our judgements against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations*. *Criteria for assessing the treatment of and conditions for men in prisons* (Version 6, 2023) (available on our website at [Expectations – HM Inspectorate of Prisons \(justiceinspectorates.gov.uk\)](https://www.justiceinspectorates.gov.uk/expectations)). Section 7 lists the concerns raised at

the previous inspection and our assessment of whether they have been addressed.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found on our website (see Further resources). 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.

### **Inspection team**

This inspection was carried out by:

Charlie Taylor	Chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Martyn Griffiths	Inspector
Lindsay Jones	Inspector
Harriet Leaver	Inspector
David Owens	Inspector
Nadia Syed	Inspector
Jasmin Clarke	Researcher
Samantha Moses	Researcher
Helen Ranns	Researcher
Samantha Rasor	Researcher
Shaun Thomson	Lead health and social care inspector
Tania Osborne	Health and social care inspector
Chris Barnes	General Pharmaceutical Council inspector
Mamta Arnott	Lead Estyn inspector
Steve Bell	Estyn inspector
Rachel Hackling	Estyn inspector
Hayley Smith	Estyn inspector

## Appendix II Glossary

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find.

### **Certified normal accommodation (CNA) and operational capacity**

Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, 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.

### **Challenge, support and intervention plan (CSIP)**

Used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Not everyone who is violent is case managed on CSIP. Some prisons also use the CSIP framework to support victims of violence.

### **Family days**

Many prisons, in addition to social visits, arrange 'family days' throughout the year. These are usually open to all prisoners who have small children, grandchildren, or other young relatives.

### **Key worker scheme**

The key worker scheme operates across the closed male estate and is one element of the Offender Management in Custody (OMiC) model. All prison officers have a caseload of around six prisoners. The aim is to enable staff to develop constructive, motivational relationships with prisoners, which can support and encourage them to work towards positive rehabilitative goals.

### **Leader**

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.

### **MAPPA**

Multi-Agency Public Protection Arrangements: the set of arrangements through which the police, probation and prison services work together with other agencies to manage the risks posed by violent, sexual and terrorism offenders living in the community, to protect the public.

### **New Futures Network**

A specialist part of HM Prison and Probation Service (HMPPS) which attracts and supports employers to work with prisons in England and Wales.

### **Offender management in custody (OMiC)**

The Offender Management in Custody (OMiC) model, which has been rolled out in all adult prisons, entails prison officers undertaking key work sessions with prisoners (implemented during 2018–19) and case management, which established the role of the prison offender manager (POM) from 1 October 2019. On 31 March 2021, a specific OMiC model for male open prisons, which does not include key work, was rolled out.

### **Protected characteristics**

The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

### **Protection of adults at risk**

Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

### **Secure video calls**

A system commissioned by HM Prison and Probation Service (HMPPS) that requires users to download an app to their phone or computer. Before a call can be booked, users must upload valid ID.

### **Social care package**

A level of personal care to address needs identified following a social needs assessment undertaken by the local authority (i.e. assistance with washing, bathing, toileting, activities of daily living etc, but not medical care).

### **Temporary presumptive recategorisation scheme (TPRS)**

A scheme intended to tackle overcrowding, which requires governors to fast-track prisoners to open establishments without the usual restrictions.

Restrictions apply for certain categories of offences. TPRS was introduced in March 2023.

### **Time out of cell**

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.



## **Appendix III Further resources**

Some further resources that should be read alongside this report are published on the HMI Prisons website (they also appear in the printed reports distributed to the prison). For this report, these are:

### **Prison population profile**

We request a population profile from each prison as part of the information we gather during our inspection. We have published this breakdown on our website.

### **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. A document with information about the methodology and the survey, and comparator documents showing the results of the survey, are published alongside the report on our website.

### **Prison staff survey**

Prison staff are invited to complete a staff survey. The results are published alongside the report on our website.

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