



REPORT ON AN UNANNOUNCED INSPECTION OF
**HYDEBANK
WOOD WOMEN'S
PRISON**

21 MAY - 6 JUNE 2024

NOVEMBER 2024



Education and
Training Inspectorate
Empowering Improvement



The Regulation and
Quality Improvement
Authority

REPORT ON AN UNANNOUNCED INSPECTION OF
**HYDEBANK WOOD
WOMEN'S PRISON**

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

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

November 2024



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LIST OF ABBREVIATIONS

AAB	Activity Allocation Board
AD:EPT	Alcohol and Drugs: Empowering People through Therapy
Belfast Met	Belfast Metropolitan College
CCTV	Closed Circuit Television
CJI	Criminal Justice Inspection Northern Ireland
CNA	Certified Normal Accommodation
CSU	Care and Supervision Unit
DfC	Department for Communities
DoJ	Department of Justice
EMIS	Egton Medical Information System
ETI	Education and Training Inspectorate
GP	General Practitioner
HMI Prisons	His Majesty's Inspectorate of Prisons in England and Wales
Hydebank Wood	Hydebank Wood Secure College and Women's Prison
ICT	Information and Communications Technology
ILPs	Individual Learning Plans
IMB	Independent Monitoring Board
LAPPP	Local Area Public Protection Panel meetings
MDT	Mandatory Drug Testing
MHT	Mental Health Team
NHS	National Health Service
NIPS	Northern Ireland Prison Service

NPM	National Preventive Mechanism
Officer	Prison Officer
OPCAT	Optional Protocol to the United Nations Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
OST	Opiate Substitution Therapy
PAF	Prison Arts Foundation
PBNI	Probation Board for Northern Ireland
PDU	Prisoner Development Unit
PDP	Personal Development Plan
PE	Physical Education
PECCS	Prisoner Escort and Court Custody Service
PPANI	Public Protection Arrangements Northern Ireland
PREPS	Progressive Regimes and Earned Privileges Scheme
PSST	Prisoner Safety and Support Team
P&T	Professional and Technical
RQIA	Regulation and Quality Improvement Authority
SEHSCT	South Eastern Health and Social Care Trust
SEN	Special Educational Needs
SPAR Evo	Supporting People at Risk Evolution
UK	United Kingdom
WSO	Women's Support Officer

Note: Electronic links to documents and information sources referenced within this report are correct at time of publication but may be subject to change where the information is outside CJl's control.

CHIEF INSPECTORS' FOREWORD

Hydebank Wood Women's Prison and Secure College is a mixed prison that held 95 women and 51 young men from across Northern Ireland at the time of this joint inspection by Criminal Justice Inspection Northern Ireland, His Majesty's Inspectorate of Prisons, the Regulation and Quality Improvement Authority and the Education and Training Inspectorate. Under the leadership of a highly effective Governor and his excellent senior team, Hydebank Wood is an impressive institution that scored the top rating of 'good' in each of the four healthy prison tests of Safety, Respect, Purposeful activity and Preparation for release. There was also a high-quality middle leadership team with many excellent Senior Officers across many functions of the prison.

At the heart of the success of this prison is the quality of relationships between prisoners and staff which were excellent in both parts of Hydebank Wood. Well trained, authoritative Officers knew the women and young men in their care very well and in conjunction with other services, made sure that each got support that was tailored to their individual needs.

The prison had developed strong links with the voluntary and community sector and charity organisations and benefitted from a supportive Chaplaincy team.

Standards of behaviour were good across the prison and for those who did the right thing, there were excellent opportunities to progress into residential units that had more freedom, self-catering facilities and more time out of cell.

With different ways of collecting data, it was not possible to compare violence levels directly between Hydebank Wood and similar prisons in England and Wales, but it was clearly much safer than its comparators. There had only been one serious assault in the last year, use of force tended to consist of minimal 'guiding holds' and most violent incidents were low level.

Women and young men were out of their cells for at least eight hours a day with more for the best behaved. Walking round the prison, there were very few prisoners locked up and most were out in education, training or at work. Prison staff collaborated well with the team from Belfast Metropolitan College to arrange classes and activities for the range of needs of the women and young men.

As well as formal education, there were opportunities for prisoners to work in the 'Cabin' café, the prison tuck shop, the Bank Barber, the recycling workshop and the gardens. There were also some excellent enrichment activities for prisoners, such as the choir and fundraising for local charities. Recruitment was ongoing to fill some tutor vacancies in vocational courses.

While some parts of the prison were showing their age, there was a refurbishment programme in place to improve flooring and showers, and the extensive grounds were very well maintained by the prisoners.

Families were kept informed about what was going on and, as well as visits, there were lots of themed family days coinciding with religious and other events. Prisoners who were fathers or mothers were also able to attend parenting courses. The Prisoner Development Unit undertook lots of offence-focused work, but at the time of the inspection there was not a trained psychologist to run any accredited programmes. Hydebank Wood had responded well to the increases in the remand population, making sure that these prisoners received their entitlements and had the same opportunities as their sentenced peers to become involved in education, training and work. Those approaching release received good support, but although staff worked hard with partners to find suitable accommodation, there was no information on where ex-prisoners were being housed on their release or the quality of their accommodation.

Leaders would benefit from making better use of data – especially in education, while a lot was collected, it was not used effectively to co-ordinate and plan future provision. More widely, leaders did not have systems in place for monitoring and measuring the effectiveness of their plans. In the prison's self-assessment, while the priorities were clear, there were no measures in place to set targets and monitor progress. Some light-touch changes could easily rectify this situation.

Greater scrutiny of incidents involving the use of force was required. While there had been improvements to the approach to adult safeguarding, processes and procedures were still not fully effective. The investigation of safeguarding incidents and serious complaints was not sufficiently robust. This has been raised in other prison inspections and the Northern Ireland Prison Service and South Eastern Health and Social Care Trust need to put in place a workable Adult Safeguarding Policy at pace that clarifies information sharing and referral decision-making.

The number of patients who failed to attend external hospital appointments was too high and social care commissioning arrangements were inadequate.

It was a pleasure to be part of this inspection and report on a prison that despite an increased population with some complex needs, was operating far more successfully than most similar prisons inspected in England and Wales.

With the outstanding staff team currently in post addressing the concerns in this report, we are in no doubt that Hydebank Wood will continue to improve in the future.



Jacqui Durkin

Chief Inspector of Criminal Justice
in Northern Ireland

November 2024

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



Charlie Taylor

HM Chief Inspector of Prisons
in England and Wales

November 2024



WHAT NEEDS TO IMPROVE AT HYDEBANK WOOD WOMEN'S PRISON

During this inspection we identified six key concerns. Key concerns are those that require leaders¹ and managers to change a practice and/or identify new or redirected resources to address the concern.

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 Criminal Justice Inspection Northern Ireland (CJI).

KEY CONCERNS

- 1. Adult safeguarding arrangements were not fully effective. The investigation of safeguarding incidents and serious complaints was not sufficiently robust.** It was not always clear if action had been taken to progress referrals or if the outcomes of safeguarding investigations had been communicated effectively. There was insufficient evidence of safeguarding measures for complainants and whether external scrutiny of serious complaints had been considered.
- 2. The number of patients who failed to attend planned external hospital appointments was too high.** Attendance depended on a transport service that was not readily available. Patients were not informed of appointments that could not be facilitated, thereby preventing them from exercising their right to complain.
- 3. The wide range of available data was not used sufficiently well to inform self-evaluation and quality improvement processes across some functions of the prison.** Improvement objectives in action plans were not always specific, measurable or time bounded.
- 4. The scrutiny of incidents involving the use of force (including the use of anti-tear clothing) was not robust and could not assure leaders that force was always necessary, proportionate and only used as a last resort.**
- 5. Social care commissioning arrangements were inadequate.** Provision for women did not align with that available in the community.
- 6. The delivery of education, skills and work activities and other rehabilitative interventions was not always sufficiently well co-ordinated and sequenced to ensure appropriate prioritisation of activities.**

¹ In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. Our narrative is directed at the level of leadership which has the most capacity to influence a particular outcome.

ABOUT HYDEBANK WOOD WOMEN'S PRISON

TASK OF THE PRISON

The prison accommodated all Northern Ireland's female prisoners.

CERTIFIED NORMAL ACCOMMODATION AND OPERATIONAL CAPACITY²

Prisoners held at the time of inspection:	Baseline certified normal capacity:	In-use certified normal capacity:	Operational capacity:
95	129	93	149

POPULATION OF THE PRISON

- 421 new prisoners were received in the last year;
- 48% of the population were on remand (committals);
- less than five prisoners were separated from the general population;
- 13% of prisoners were foreign nationals and a further 27% were from the Republic of Ireland;
- 90% of prisoners were from a white background;
- 16 prisoners were released into the community each month;
- 71% of committals disclosed drugs use;
- 42% of committals disclosed mental health issues;
- 64% of committals disclosed a history of self-harm; and
- over 90% of prisoners were involved in education, skills and work.

² Baseline Certified Normal Accommodation (CNA) is the sum total of all certified accommodation in an establishment except cells in the Care and Supervision Unit, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

PRISON STATUS (PUBLIC OR PRIVATE) AND KEY SERVICE PROVIDERS

Public: Northern Ireland Prison Service (NIPS).



Physical and mental health provider



which is commissioned by
the South Eastern Health
and Social Care Trust

Substance use treatment providers



Learning and skills provider

NORTHERN IRELAND



Prisoner Escort and Court Custody Service

Escort contractor

DEPARTMENT



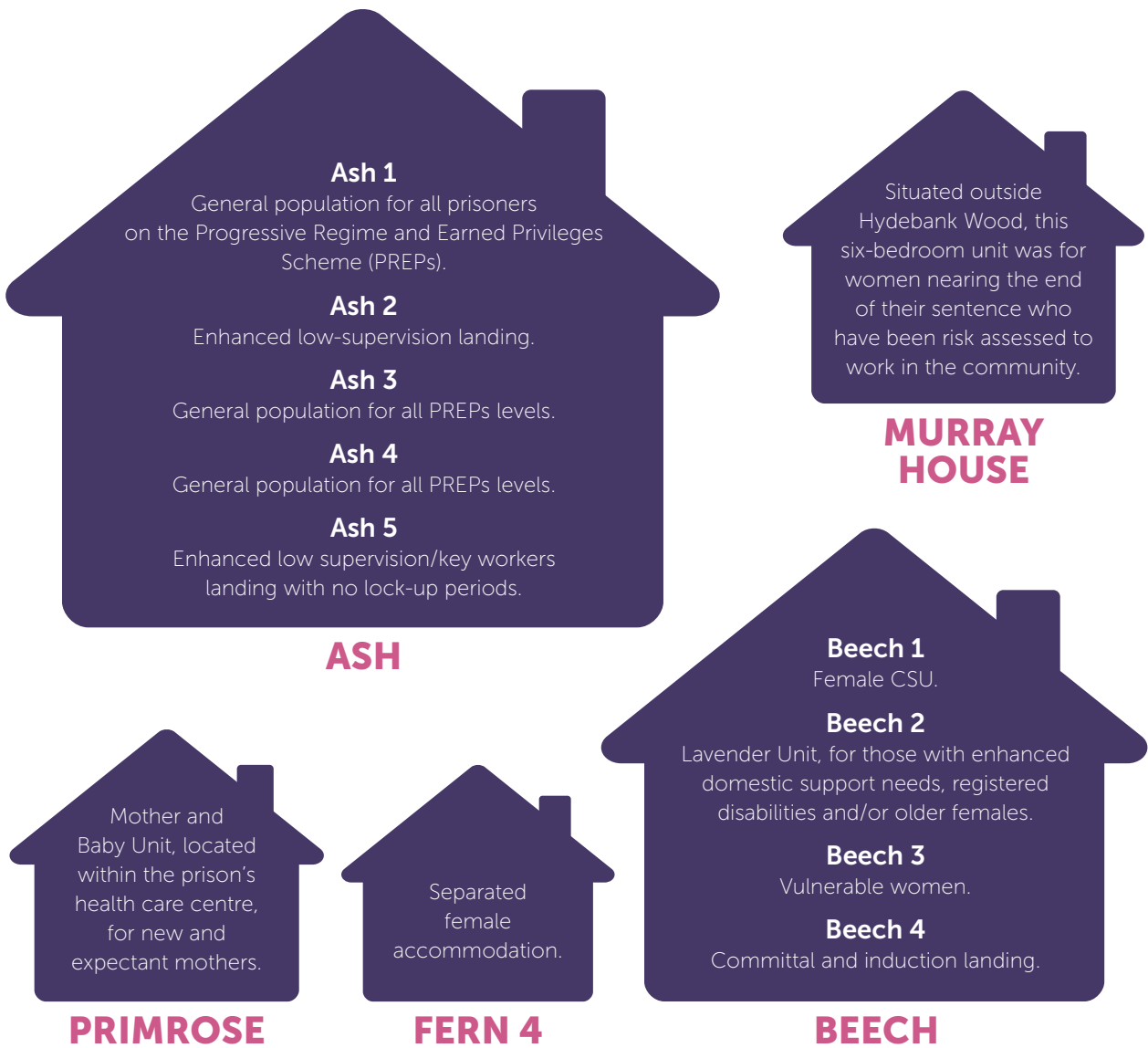
DIRECTOR OF PRISONS

David Kennedy.

BRIEF HISTORY

Ash House is a stand-alone residential unit for women within Hydebank Wood Secure College and Women's Prison (Hydebank Wood) campus. It opened on 21 June 2004. The Fern landing opened in August 2020 to provide accommodation for separated women. Beech House came into operation in May 2022 to accommodate a growing population of female prisoners. This included a major refurbishment programme incorporating a dedicated women's Care and Supervision Unit (CSU) and the Lavender Unit for women with registered disabilities and social care needs. Primrose Mother and Baby Unit re-opened following refurbishment in April 2024 for new and expectant mothers coming into custody. Hydebank Wood also accommodated around 50 young adult male prisoners in separate residential units.

SHORT DESCRIPTION OF RESIDENTIAL UNITS



Name of Governor and date in post

Richard Taylor, April 2021 – present.

Leadership changes since the last inspection

Gary Milling 2018 – April 2021.

Independent Monitoring Board (IMB) chair

Pip Jaffa OBE.

Date of last inspection

November 2019.

ABOUT THIS INSPECTION

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

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

The Regulation and Quality Improvement Authority (RQIA) is a NDPB responsible for monitoring and inspecting the quality, safety and availability of health and social care services across Northern Ireland. It also has the responsibility of encouraging improvements in those services. The functions of the RQIA are derived from the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. In addition to this inspection report, as a regulatory body, the RQIA provide an additional report to the South Eastern Health and Social Care Trust (SEHSCT).

All inspections carried out by HMI Prisons and those prison inspections jointly carried out with CJI in Northern Ireland with support from the RQIA, contribute to the United Kingdom's (UK's) response to its international obligations under the Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies - known as the National Preventive Mechanism (NPM) - which monitor the treatment of and conditions for detainees. CJI, HMI Prisons and RQIA are three of over 20 NPM member bodies in the UK.

The Education and Training Inspectorate (ETI) is a unitary Inspectorate and provides independent inspection services and information about the quality of education, youth provision and training in Northern Ireland. It also provides inspection services of the learning and skills provision within prisons, in line with an agreed annual Memorandum of Understanding and an associated Service Level Agreement with CJI. Since the last prison inspection in Northern Ireland the ETI had developed and tested a new inspection framework and this framework was adopted for this inspection.

All CJI and HMI Prisons reports carry a summary of the conditions and treatment of prisoners, based on HMI Prison's four tests of a healthy prison that is Safety, Respect, Purposeful activity and Preparation for release. Hydebank Wood Women's Prison was assessed against the criteria for assessing the treatment of and conditions for women in prison (the *Expectations*) as updated in March 2024.³

The detail of how the outcomes for prisoners were assessed against the healthy prisons tests, how findings are reported and who carried out this inspection is set out in Appendices 1 and 2. The methodology used to conduct the prisoner and staff surveys and the results are contained in Appendices 4 and 5.

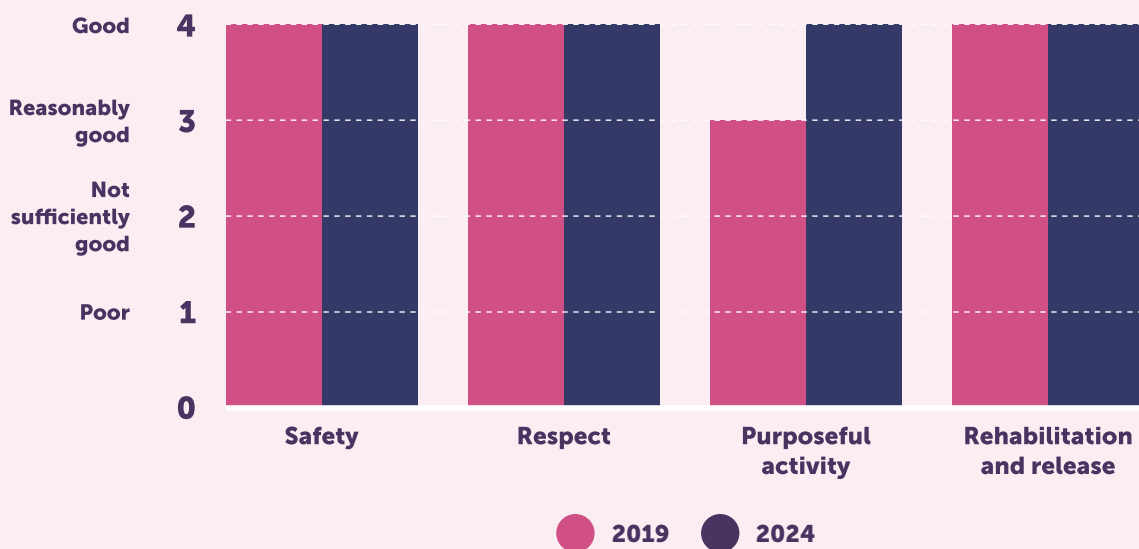
³ HMI Prisons, *Expectations, Criteria for assessing the treatment of and conditions of women in prison Version 2, 2021* (updated March 2024) available at <https://cloud-platform-e218f50a4812967ba1215eaeccede923f.s3.amazonaws.com/uploads/sites/19/2024/03/Womens-Expectations-FINAL-March-2024.docx>

CHAPTER 1 SUMMARY OF KEY FINDINGS

OUTCOMES FOR WOMEN IN PRISON

- 1.1 We assess outcomes for women in prison against four healthy prison tests: Safety, Respect, Purposeful activity, and Preparation for release (see Appendix 1 for more information about the tests). We also include a commentary on leadership in the prison (see Chapter 2).
- 1.2 At this inspection of Hydebank Wood Women's Prison (Hydebank Wood), we found that outcomes for women were:
- good for Safety;
 - good for Respect;
 - good for Purposeful activity; and
 - good for Preparation for release.
- 1.3 We last inspected Hydebank Wood in 2019. Figure 1 shows how outcomes for women have changed since the last inspection.

Figure 1: Hydebank Wood Women's Prison healthy prison outcomes 2019 and 2024



PROGRESS ON RECOMMENDATIONS FROM THE LAST INSPECTION

- 1.4 At our last inspection in 2019, we made 31 recommendations, three of which were about areas of key concern.
- 1.5 At this inspection we found that two of our recommendations about areas of key concern had not been achieved and one had been partially achieved. For a full list of progress against all of the recommendations, see Chapter 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 nine 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

The Prisoner Safety and Support Team (PSST) facilitated a range of interventions and engagement opportunities including impressive animal therapy and regular one-to-one check-ins or group work activities such as arts and crafts. A thoughtfully decorated space known as the 'cosy corner' had been created to provide a safe space for this support to be delivered.	See paragraph 3.15
Bread, cereal and milk were available all day on residential wings. This ensured that prisoners had a substantial breakfast and could prepare their own sandwiches at mealtimes.	See paragraph 4.30
A prison-wide approach to mental health awareness and neurodiversity awareness had been adopted which included lunchtime learning events available to all staff.	See paragraph 4.62
The provision of tablets with translation software for foreign nationals remained an excellent and effective initiative that helped prevent isolation.	See paragraph 4.106
The Women's Support Officer (WSO) was an excellent resource that provided valuable individual support for women who had been victims of abuse.	See paragraph 4.107

Examples of notable positive practice

Video call facilities were used creatively to enable prisoners to attend religious events such as funerals and important ceremonies involving their children.

See paragraph 4.116

Time out of cell remained very good. Prisoners were encouraged to use their time constructively and had access to a wide range of interventions, events and recreational activities.

See paragraph 5.2

The choir provided a great opportunity for the women to practise together and perform in external competitions.

See paragraph 5.36

The partnership between Belfast Metropolitan College (Belfast Met) and the Lyric Theatre, Belfast had enabled women to participate in workshops which had helped to develop their creativity.

See paragraph 5.46

CHAPTER 2 LEADERSHIP

Leaders provide the direction, encouragement and resources to enable good outcomes for women in prison.

- 2.1 Good leadership helps to drive improvement and should result in better outcomes for women in prison. 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 Strong and effective leadership from the Governor and senior team had generated pride, energy and commitment at every level of management and among most of the staff working at Hydebank Wood. Some of the Senior Officers and Unit Managers were among the best we have seen.
- 2.3 Leaders had promoted an atmosphere of respect, care and optimism, and the positive culture they had cultivated was enabling many prisoners to flourish. They had trusted and enabled their teams to use initiative and make decisions which was helping them to realise their stated vision of 'Changing minds, Changing lives'. We saw countless good examples of work to rehabilitate prisoners.
- 2.4 Impressive multidisciplinary teamwork between partners and the Northern Ireland Prison Service (NIPS), across every function, contributed to good outcomes for women. Essential to the success of many projects and initiatives was a willingness by leaders and staff to get behind new ideas to shape the lives of the women in their care. Direct engagement between senior Governors and the Independent Monitoring Board (IMB) was important to improve outcomes.
- 2.5 Senior leaders clearly valued their staff and actively supported their wellbeing and development. Many staff and frontline managers spoke positively about the opportunities they had been given and the support they received from leaders and colleagues.
- 2.6 The breadth and quality of the opportunities available for prisoners at Hydebank Wood were impressive, although leaders had not yet developed a firm enough grip on the sequencing and promotion of initiatives, programmes and interventions to make sure all prisoners could benefit.

- 2.7 The person-centred approach to caring for and developing prisoners was effective but leaders were not using available data well enough to inform their strategies, improve understanding and demonstrate the effectiveness of what they delivered. Improvement plans sometimes lacked sufficiently measurable targets to help leaders monitor progress and drive the improvements they were keen to make.
- 2.8 There were many strengths in the prison, but leaders also understood the weaknesses and were keen to learn from the findings of the inspection. We were left in no doubt that their committed and hardworking teams would continue to support them in their drive to address the key concerns and other opportunities for learning identified during the inspection to improve the lives of the women living at Hydebank Wood.

CHAPTER 3 SAFETY

Women, particularly the most vulnerable, are held safely.

EARLY DAYS IN CUSTODY

Expected outcomes: Women are safe at all times throughout their transfer and early days in prison. They are treated with respect and well cared for. Individual risks and needs are identified and addressed, including care of any dependants. Women are given additional support on their first night and induction is comprehensive.

- 3.1 Reception staff managed around 35 new female prisoners a week. Women continued to be transported in vehicles shared with male prisoners, which was not appropriate. Prisoners arrived at a reasonable hour with a good handover from the Prisoner Escort and Court Custody Service (PECCS) staff to communicate any identified risks, such as violence or self-harm. Female prisoners were not routinely handcuffed into the prison and the decision to do so was appropriately based on a risk assessment.
- 3.2 Reception was a bright, clean and welcoming environment. It was well ordered and the processes we observed were carried out efficiently by friendly and helpful staff. All new arrivals to the prison were now processed through the same reception area, but women and young adult men were processed and held separately so there was no compromise to the security of either.

Photograph 1



Reception interview desk with holding rooms to the side

- 3.3 An initial safety assessment took place but was conducted at the front reception desk within earshot and sight of other prisoners in holding rooms. Well developed plans were in place to renovate the reception area to address the privacy issue and make sure that prisoners felt comfortable enough to disclose important safety information without being overheard.
- 3.4 A female member of staff conducted the reception process and women were supported to contact their dependents. During the inspection, reception staff dealt professionally and compassionately with a new prisoner who reported an alleged incident of sexual abuse before she was escorted to the residential units.
- 3.5 All women received a rub-down search by a female Prison Officer and had to walk past the drug dog. Strip searches were only conducted if there was intelligence or reasonable suspicion that they were concealing an illicit item. Only four women had been strip-searched during the previous 12 months.
- 3.6 Prisoners were offered a shower and clean clothes, but many chose to wait until they arrived on their residential units. Reception processes were swift and new arrivals were able to move to the committal landing quickly.
- 3.7 Cells on the committals landing were clean and well equipped. Prisoners were provided with bedding, toiletries, a communal hairdryer and a detailed information booklet on what to expect at Hydebank Wood. A basic grocery pack was provided on the first night and prisoners were given full access to the tuck shop the next working day. Prisoners who did not have funds to purchase items were given modest financial help by the Chaplain which prevented any potential debt arising within their first few days.



- 3.8 Enhanced checks were conducted every hour for the first 24 hours. Subject to agreement, returning prisoners had previous telephone numbers automatically added without the need for a formal application. This enabled immediate contact with their family. 'Insiders' (prisoner peer supporters) saw all new arrivals within their first 48 hours.
- 3.9 A comprehensive five-day induction programme involving all key departments began the next working day after arrival. New arrivals spent most of their time out of their cell involved in wing activities, which was better than Inspectors usually see, and they could start work or education once they had completed their induction.

PROMOTING POSITIVE RELATIONSHIPS AND SUPPORT WITHIN THE PRISON

Expected outcomes: Safe and healthy working relationships within the prison community foster positive behaviour and women are free from violence, bullying and victimisation. Women are safeguarded, are treated with care and respect and are encouraged to develop skills and strengths which aim to enhance their self-belief and wellbeing.

Safe and healthy relationships

- 3.10 Staff-prisoner relationships remained a strength. Staff did not wear uniforms and staff and women addressed each other using first names, which broke down barriers and contributed to a supportive environment. Staff knew the women in their care and understood and sought to meet their individual needs. Officers were visible and approachable as they supervised the residential units, and we observed respectful, thoughtful and supportive interactions.
- 3.11 There was no formal key worker scheme⁴, but good relationships with Unit Officers, Prisoner Development Unit (PDU) staff and others (such as education staff and family engagement workers) mitigated this. Women were able to access support and were encouraged to develop skills and progress through their sentence by staff who knew them well.
- 3.12 Women acted as a valuable source of informal support for one another. In our survey, 88% compared with 74% at similar prisons said that the support provided by other prisoners was good. In this context, it was disappointing that peer work was underused, with only a small number of formal roles that would empower women to contribute positively to the community.

4 A key worker scheme was rolled out across the closed male estate in England and Wales from 2019. It forms an element of the 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 and involves each residential Officer being assigned five to six prisoners for whom they provide one to one support.

Reducing self-harm and preventing suicide

- 3.13 Recorded rates of self-harm for women were low and remained at similar levels to the last inspection. During the previous 12 months, four of the incidents had been classed as serious and had required external medical treatment.
- 3.14 Most women were very positive about their time at Hydebank Wood and many spoke highly about the care and support they received. We observed frequent examples of this during the inspection.
- 3.15 The PSST were visible and effective. They provided good support and guidance to staff and had helped to improve the experiences of prisoners who needed extra support. The PSST facilitated a range of interventions and engagement opportunities including impressive animal therapy and regular one-to-one check-ins or group work activities such as arts and crafts. At the time of our inspection 24 prisoners were receiving this one-to-one care and, in the last six months, 400 appointments had been attended by 93 individuals across both sites. A thoughtfully decorated space known as the 'cosy corner' had been created to provide a safe space for this support to be delivered.



Photograph 7



The 'cosy corner' with therapy dog Milo

- 3.16 A weekly case conference was held to review all complex cases. This was well attended and demonstrated that there was a good focus on women of concern (see paragraph 3.35).
- 3.17 Women who were particularly vulnerable and likely to self-harm were monitored using a Supporting People At Risk Evolution (SPAR Evo) care plan. In the last 12 months 124 SPAR Evo care plans had been opened for 71 women. One care plan was open at the time of the inspection. A review of recent cases demonstrated good care and staff were now proficient at navigating the digital system. The care plans we reviewed were not always sufficiently individualised but we found good evidence that appropriate and personalised care had been provided.
- 3.18 The use of observation cells (cells monitored by Closed Circuit Television (CCTV)) and anti-tear clothing for women had increased and was high compared to similar prisons. Such measures risked adding to women's paranoia when they were in a vulnerable state, as well as causing humiliation and compromising dignity. We came across several examples where there was insufficient evidence to justify their use. This remained a risk-averse response and was not in keeping with the prison's otherwise trusting and positive culture.
- 3.19 It was disappointing that there was still no formal Listener scheme (prisoners trained by the Samaritans to provide emotional support to fellow prisoners) which had seen positive and widespread use in prisons across England and Wales. Women were able to contact the Samaritans by telephone and were encouraged to access the Insider scheme.

- 3.20 A detailed annual report assessed the self-harming behaviours of the population to identify themes or patterns, such as whether historical self-harm increased an individual's propensity to harm themselves in custody. Leaders also conducted a review of self-harm every two months to give more regular oversight of self-harm figures. Unfortunately, it was not clear how any of these data fitted into the safety strategy or were used to improve outcomes.

Learning from self-inflicted deaths and attempts by women to take their own lives

- 3.21 There had been no self-inflicted deaths since our previous inspection and no recorded attempts by women to take their own life in the past 12 months.

Protecting women, including those at risk of abuse or neglect

- 3.22 Women deemed to be particularly vulnerable were located on a separate vulnerable prisoner landing. In addition, the Lavender Unit was dedicated to women with enhanced domestic support needs, older women and those with registered disabilities. Serious case reviews were held for those with complex and long-term needs.
- 3.23 From January 2024 adult protection concerns were being managed in accordance with an interim procedure developed by the SEHSCT in consultation with the NIPS.
- 3.24 While steps had been taken to improve the approach to adult safeguarding since the last inspection of Hydebank Wood (and at Maghaberry Prison),⁵ procedures and records were still not good enough. We were not confident that there was an effective system to make adult safeguarding⁶ referrals when needed. Investigations into serious allegations against NIPS staff were not sufficiently robust and it was not always clear what action, if any, had been taken by the NIPS. Outcomes following investigation were not well recorded and appropriately communicated from the NIPS to the SEHSCT. The NIPS Adult Safeguarding Prevention and Protection Policy and Guidance needed to clearly direct staff in relation to the information that can be shared with the SEHSCT both to maintain confidentiality and to provide assurances on prisoner safety.

5 At the 2022 full unannounced inspection of Maghaberry Prison Inspectors found that not all serious safeguarding incidents investigated by leaders had been managed in accordance with the NIPS policy and that this required the immediate attention by leaders and managers (see CJI, Report of an Unannounced Inspection of Maghaberry Prison, June 2023 available at <https://cjini.org/getattachment/0a5f532a-bac4-4c6b-9243-e74e0fe46d03/report.aspx>). At an Independent Review of Progress (IRP) during 2023, Inspectors assessed that despite some steps being taken to improve the approach to adult safeguarding by the NIPS and Department of Health, no meaningful progress had been made against this priority concern (see CJI, Report of an Independent Review of Progress at Maghaberry Prison, February 2024 available at <https://cjini.org/getattachment/b8aa1700-386e-44ac-a59f-520332eeb40e/report.aspx>).

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

- 3.25 The Department of Health/Strategic Planning and Performance Group was progressing a review of adult safeguarding arrangements in prison at the time of this inspection (see further comment on adult safeguarding at paragraph 4.46). This work needed to be expedited.

PROMOTING POSITIVE BEHAVIOUR

Expected outcomes: Women live in a safe, well ordered and supportive community where their positive behaviour is promoted and rewarded. Anti-social behaviour is dealt with fairly.

Supporting women's positive behaviour

- 3.26 Incidents of violence between women had increased since the last full inspection and the rates over the previous 12 months were now similar to comparable prisons. However, nearly all violence was low level and no incidents had been classed as serious in the previous year.
- 3.27 Most women behaved well because they were treated with respect and care, lived in a positive environment and had access to a full and rich regime. In our survey, 65% of women said that the opportunities and rewards available to them encouraged them to behave well, compared with 46% in similar prisons.
- 3.28 Most staff acted as positive role models, supporting and encouraging the women they looked after. We observed several instances where staff demonstrated great skill in dealing with prisoners with wide-ranging behavioural issues, often de-escalating challenging situations without the need to use more formal disciplinary procedures.
- 3.29 Formal systems were in place to manage women who had been involved in violence. Staff could initiate the challenging antisocial behaviour process by raising a concern form. This led to an investigation into the incident to determine the actions needed, which often included a period of monitoring or an adjudication award.
- 3.30 The PREPS continued to be used effectively to encourage positive behaviour. Very few women were on the restrictive basic level of the scheme with just two at the time of the inspection. Both were safeguarded by regular behaviour reviews and target setting to encourage progression back to a full regime.
- 3.31 Women could progress from normal accommodation to an enhanced landing on Ash 2, a low supervision unit on Ash 5 and, subject to assessment, to the bespoke Murray House pre-release testing unit (see paragraph 6.10).

Facilities on the Ash House enhanced landings were very good and women could enjoy greater autonomy as they progressed. Both landings offered excellent time out of cell, better access to gym facilities and opportunities to live independently through communal living, which included preparing their own food in fully equipped kitchens. Women on these landings also had regular access to external grounds that were well maintained by their peers (see paragraph 4.25).

3.32 Beech House, which formerly accommodated young adult men, had been refurbished and was now used to house women. Beech 3 landing delivered a good regime to vulnerable women and the new Lavender Unit in Beech House was a bright welcoming environment for women with a range of complex needs that made them potentially more vulnerable. Staff on the Unit facilitated a range of activities to enable the women to engage and develop their confidence.

3.33 The well resourced PSST worked across Hydebank Wood. They engaged proactively with women and had good knowledge and understanding of the underlying issues that might lead to violence or make them more vulnerable.

3.34 The team were encouraged by leaders to be creative in finding ways to provide a safe environment for women, for example they had introduced animal therapy as a means of reaching and supporting women (see paragraph 3.15).

3.35 Weekly operational safety meetings focused on women with the most complex needs, while oversight of the prison's safety strategy was provided at a monthly 'safety and support strategic meeting'. A range of data were considered at these meetings, which helped leaders to review aspects of safety retrospectively. However, it was not always clear how this was used to drive future improvement.

Adjudications

3.36 Despite the population increasing since the last inspection, the rate of disciplinary hearings for women had reduced. However, local data also indicated that there had been fluctuations between inspections when the number of charges had risen from 145 in 2022 to 254 in 2023.

3.37 All adjudication hearings were recorded and were conducted in a relaxed environment which encouraged women to engage in the process. Hearings took place late in the afternoon to maximise attendance at activities and minimise disruptions to the women's regime. However, the adjudication documentation we reviewed often lacked sufficient enquiry and we could not be confident that all the facts had been fully explored in all cases.

3.38 Nearly half of all laid charges had been withdrawn or not proceeded with during the previous 12 months. This was sometimes because the prisoner involved had been released but we also identified serious charges, such as failing or refusing a drug test, that had also been withdrawn, often due to administrative errors during the adjudication process. This undermined the impact of adjudications as a deterrent to bad behaviour (see paragraph 3.56).

3.39 A new electronic system for managing the adjudication process was being developed across the NIPS, which was designed to reduce the number of charges that were withdrawn and make sure that appropriate actions were taken following an incident.

Segregation

3.40 Women were no longer segregated in their own cell or on Ash 1 landing. This meant that other prisoners on general wings no longer suffered regime curtailments because staff had to deliver the statutory entitlements of segregated women. Segregated women were now housed in a purpose-built area in Beech House, known as the CSU.

3.41 In the previous 12 months, segregation had been used 83 times under Prison Rule 32 (restriction of association), involving 46 women. Most lengths of stay were very short, including some for less than a day.

3.42 Decisions to use Rule 32 were recorded appropriately and were subject to scrutiny. Authorisations for extended segregation were conducted by NIPS senior leaders and there had been examples of shortened periods of segregation where restrictions were no longer considered necessary. Where women were segregated for longer periods under Rule 32, they were subject to a regular review by a multidisciplinary team. Review panels assessed the underlying reasons for segregation to produce a tailored plan for reintegration.

3.43 Despite these safeguards and additional health care interventions, we were concerned about the wellbeing of and pathways for two women who had been segregated for several months and were displaying disturbing and erratic behaviour during the time of the inspection.

3.44 Staff managed the CSU with a good balance of discipline and compassion which contributed to the relaxed and therapeutic environment.

3.45 The CSU was bright and welcoming, with communal spaces and designated areas to provide one-to-one support for segregated women. A sensible risk-based approach allowed segregated women to access a better regime than Inspectors see in prisons in England and Wales. This included good input from key departments such as learning and skills and the safety team.

3.46 The NIPS had implemented an innovative use of information technology to record Rule 32 decision-making, evidence of daily contact and participation in the regime.

Use of force

3.47 Use of force techniques had been used 114 times in the last 12 months which was considerably more than at the last inspection. However, about three-quarters of these incidents had involved the use of low-level techniques, for example guiding women away from an incident, rather than full restraint.

- 3.48 The documentation completed by staff to justify the use of force generally gave a good account of why incidents had occurred. In some cases, however, reports did not adequately describe efforts to de-escalate or provide sufficient detail to demonstrate that force was only used as a last resort.
- 3.49 With a few exceptions, which included offensive language or a lack of de-escalation, most of the footage we reviewed demonstrated respectful actions by staff and a proportionate use of force.
- 3.50 Oversight of the use of force was carried out by a multidisciplinary committee that met monthly. Leaders reviewed data on the number and location of incidents to identify emerging themes or patterns. The data were limited and there was no evidence of how these findings were used to inform learning, for example oversight of force had still not addressed a poor use of body-worn video cameras. Too few incidents, and occasionally only one, were reviewed by the committee which meant that leaders were likely to miss unprofessional conduct or learning opportunities.
- 3.51 When leaders were made aware of poor conduct by Prison Officers, they took prompt action to address it.

SECURITY

Expected outcomes: Security measures are proportionate to risk and are underpinned by positive relationships between staff and women. Effective measures are in place to reduce drug supply and demand.

- 3.52 Physical and procedural security was proportionate, enabling the prison to function as a college campus and contributing to a relaxed atmosphere. As at the last inspection, Prison Officers did not wear a uniform, carry batons or incapacitant spray, and this did not compromise their authority or diminish safety outcomes.
- 3.53 Women now followed a separate regime to that of young adult men. Both genders still passed each other as they went about their day, but staff ensured this was done safely.
- 3.54 The Security Department operated across Hydebank Wood. The management of intelligence had improved and leaders were now sufficiently focused on identified risks. There was no backlog of intelligence reports at the time of inspection and those we reviewed were dealt with appropriately.
- 3.55 Leaders had recently implemented a new tool to develop security objectives. Use of the Local Tactical Assessment was in its infancy but offered leaders the opportunity to develop a greater understanding of emerging and developing threats and intelligence gaps.

- 3.56 Positive mandatory drug testing (MDT) results for women were comparable to similar prisons in England and Wales. The MDT rate for the previous 12 months was 15% and a further 4% of women had refused to participate in testing.
- 3.57 Most positive tests were for the misuse of prescribed medication but good partnership working with health care staff had ensured the risks of this were minimised (see paragraph 4.91). At the time of inspection, building work was in progress to improve the treatment areas where medication was issued, which would increase privacy for the patient and reduce the risk of prescribed drugs being diverted. Prison drug detection dogs were deployed when needed. The NIPS had also installed a body scanner to detect drugs, which was only used for male prisoners but was helping to reduce the flow of illicit items across both sites.
- 3.58 A corporate NIPS drug policy was supplemented by a local strategy for the prison, although neither was informed by recent data or supported by a measurable action plan. The Substance Misuse Committee had recently been introduced to provide oversight of the strategy, but was not yet embedded. This was mitigated to an extent by a separate supply reduction meeting led by the Security Governor. The meeting was attended by key stakeholders including health partners and the PSST, to identify and address immediate concerns to reduce both demand and supply.
- 3.59 We had concerns about the use of medication at risk of abuse or tradeability among a small number of prisoners, but intelligence and test results suggested that there was minimal demand for other illicit drugs. Although we could not evidence direct cause and effect, we were confident that the prison's positive culture, pleasant living conditions and good availability of purposeful activity played a significant role in motivating prisoners to desist from drug use.

CHAPTER 4: **RESPECT**

Women's relationships with children, family and support networks are central to their care in custody. A positive community ethos is evident, and all needs are met.

RELATIONSHIPS WITH CHILDREN, FAMILIES AND OTHER PEOPLE SIGNIFICANT TO WOMEN

Expected outcomes: Women are able to develop and maintain relationships with people significant to them, including children and other family members. The prison has a well developed strategy to promote relationships and make sure women can fulfil any caring responsibilities.

- 4.1 Work to support contact between women and their families remained very good. Family work was embedded within the culture at Hydebank Wood and was key to promoting rehabilitation.
- 4.2 The visits hall provided a warm, relaxed space for social visits and both prisoners and visitors spoke positively about their experiences. There was a large play area for children and visitors could buy sandwiches, snacks and drinks. Some women could also have visits in private rooms monitored by CCTV and could apply for longer visits of up to three hours.



Visits hall

Photograph 9



Children's play area in the visits hall

Photograph 10



Private family visit room

- 4.3 A number of themed family days⁷ were held, for example at Easter, Hallowe'en and the end of the school year, and these were popular with prisoners and their families.
- 4.4 Women had access to excellent support to maintain family ties and develop parenting skills. Workers from Barnardo's and the NIACRO Family Links programme met all women during their induction and could offer practical support such as contacting community agencies and helping women understand the role of social services. They delivered a six-week group course which aimed to increase self-esteem and confidence in parenting skills, and one-to-one support for those who needed it or who were not comfortable in a group setting.
- 4.5 Support for prisoners' families was outstanding. At monthly family forums and quarterly information days families could meet members of staff, visit the Learning and Skills Centre (Centre) and have lunch in the 'Cabin' cafe. NIACRO, the family support provider, also ran a support group for families to meet and share experiences.
- 4.6 There were video call facilities on each landing which were popular and well used. With the exception of women living on the Ash 5 landing, prisoners did not have telephones in their cells but could use telephones on landings, with good time out of cell reducing queues to a minimum.

LIVING IN THE PRISON COMMUNITY

Expected outcomes: Women live in a prison which promotes a community ethos. They can access all the necessary support to address day-to-day needs and understand their legal rights. Consultation with women is paramount to the prison community and a good range of peer support is used effectively.

Consultation and support within the prison community

- 4.7 Women were consulted about daily life through regular surveys and forums which had resulted in adjustments to menus and additional activities such as baking at the weekend. In our survey, 76% of women said they were consulted about life in the prison compared with 55% in comparator prisons. Leaders were considering ways to improve monitoring of outcomes and feedback to women as a result of the forums.
- 4.8 Women were a valuable source of informal support for one another (see paragraph 3.12). Formal peer work roles were limited, which was a missed opportunity.

⁷ Many prisons, in addition to normal visits, arrange 'family days' throughout the year. These are usually open to all prisoners who have small children, grandchildren, or other young relatives.

Prisoner requests

- 4.9 Most requests were dealt with informally by staff but the formal request system also worked reasonably well. In our survey, 91% of women said it was easy to make a request, compared with 75% in similar prisons and 71% at the previous inspection. Three-quarters of those who made a request said it was dealt with fairly.

Complaints

- 4.10 In our survey 78% of women said it was easy to make a complaint. Of those who had complained 54% said that complaints were dealt with fairly and in 88% of cases, women said an initial interview about their complaint was conducted within 24 hours. We saw examples of apologies given when responses were late. Responses were respectful and included an outline of actions taken, although more detail and follow-up were required at times.
- 4.11 In the context of the increased population, the proportion of complaints from women during 2023-2024 had increased by 27% compared to the previous year. While the categories of complaint were monitored, data were not used well to interpret and respond to trends. Some categories had increased in number, for example in relation to another prisoner or staff, but there was limited understanding of the reason for this.
- 4.12 The Deputy Governor completed monthly audits and we saw examples of further actions being recommended, including a more thorough investigation and reminder emails to staff about time limits. A recent change to sampling had made sure that a more representative proportion of complaints were scrutinised.
- 4.13 A small number of serious complaints about staff had been referred to the NIPS Professional Standards Unit. However, investigation of serious allegations against staff had been completed internally and were not sufficiently robust. There was no assurance of whether independent scrutiny, including referral to the Police Service of Northern Ireland, had been considered. It could not be clearly demonstrated that women who reported allegations of abuse had been safeguarded and received appropriate support, which was a weakness.

Legal rights

- 4.14 Women had easy access to their legal representatives. Private and confidential face-to-face and virtual legal visits were accommodated effectively and appointments could be booked well in advance. There were facilities to attend virtual Court hearings. Although there was no internal legal advice service, staff could access a Law Society list of solicitors on request. There was no information about access to specialist immigration legal advice, which was a gap.

LIVING CONDITIONS

Expected outcomes: Women live in a clean, decent and comfortable community environment. They are provided with all the essential basic items.

- 4.15 Additional residential accommodation for women had opened since the last inspection and most women now lived in two adjacent residential units, Ash House and Beech House.
- 4.16 Safeguards were in place to enhance the safety and wellbeing of women on this shared site, including the timing and supervision of movements, separate scheduling of most activities and access to shared facilities, including the Learning and Skills Centre. Women we spoke to had no concerns about their safety as a result of living on a shared campus.
- 4.17 Living conditions for women were excellent. All women had a cell of their own and they were positive about many aspects of daily life at Hydebank Wood.

Photograph 11



Grounds looking out to Ash House

- 4.18 There had been a rolling programme of refurbishment since the last inspection and the quality of the upgraded shower facilities was notable. Further improvement work had been identified and was in progress at the time of the inspection.

Both residential units were bright and welcoming with evident steps to soften the environment, including the décor, furnishings and flooring and the display of prisoners' art. The kitchens on Ash 1, 3 and 4 landings were dated and some of the equipment needed to be replaced.

- 4.19 Beech House, the safety hub, had four distinct landings including the Lavender Unit (see paragraph 3.32). This Unit had been thoughtfully designed and fitted to a high standard to meet the more complex needs of the women living there. Three cells were fitted with noise dampening panels for those with sensory needs.
- 4.20 Women could progress from normal accommodation to an enhanced landing on Ash 2, a low supervision unit on Ash 5 and, subject to assessment, to the bespoke Murray House pre-release testing unit. Facilities on these landings were very good and women could enjoy greater autonomy as they progressed.
- 4.21 Landing timetables, rotas and routines were on display and were well understood. Noticeboards contained relevant and up-to-date information. All women could make telephone calls in private.
- 4.22 Cells were generally well presented, free of graffiti and personalised. Toilets were screened but they did not have lids and some were stained. The cells and living area in Fern 4, the separated accommodation, were decent.
- 4.23 In our survey, 48% of women said that their cell bells were normally answered within five minutes, but there was no system to monitor this. Inspectors are aware of an incident now under investigation regarding an alarm not being responded to during the night.
- 4.24 Most women took a real pride in their surroundings. Cleaning rotas were in place and standards were effectively underpinned by monthly audits which were overseen by managers and leaders. The monitoring of actions arising from servery audits was not adequate. A small female painting party did a very good job of maintaining cells and communal areas in female residential units.
- 4.25 The outdoor spaces and grounds, particularly the gardens at Ash House which were tended by women, were particularly impressive. The yard at Fern 4 was small and less well equipped than other outdoor spaces.

Photograph 12



Gardens

- 4.26 In our survey, 81% of women said they normally had enough clean, suitable clothes for the week, which was similar to other prisons. The 'chic clothing' service offered women clothes that had been donated by other women on release. Prison issue clothing was available but was not designed for women. Laundry facilities were available on each landing.
- 4.27 In our survey, 36% of respondents said they could access their stored property promptly, which was considerably higher than in similar prisons. However, while local systems provided adequate opportunity for women to access their property, a sample of complaints indicated an issue with the time taken for requests to be processed and poor communication about how to use the procedure.
- 4.28 Meals were served at reasonable times and most meals were eaten together in bright, spacious dining areas. Leaders regularly sought feedback about the food. Menus varied on a three-week cycle. The kitchen catered for dietary and religious requirements and sought advice from a dietitian when required. In our survey, half the women said the quality of food was good and 64% said they had enough to eat at mealtimes compared with the comparator of 47%.



- 4.29 There was one menu for both establishments and it was difficult to be flexible in accommodating the different meal preferences of women and young adult men. However, there were examples of options tailored to the women, for example porridge instead of a hot breakfast at the weekend. Fruit and vegetable choices were limited but it was hoped that a recent budget increase would improve this and introduce other menu options.
- 4.30 Two residential areas were fully self-catering with food orders from a local supermarket placed through the tuck shop. All landings had a microwave, toaster and grill, some also had an air fryer. Bread, cereal and milk were supplied each morning from the kitchen and available throughout the day, which was substantially better than Inspectors find in prisons in England and Wales. The supervision of meals was good overall, although more challenging during evening meals when staff were not available to assist.
- 4.31 Six women employed in the kitchen were undertaking relevant qualifications, and several were working in the Cabin café. A kitchen staff member was delivering a 'Cook it' programme focusing on cooking skills and healthy eating. Since the last inspection, the kitchen and Cabin café had maintained 5* food and hygiene ratings from the local council.

4.32 The tuck shop provided a wide range of reasonably priced items and weekly shop orders were well managed. In our survey, 70% said the shop sold the things they needed. Some women relying solely on prison earnings struggled to buy the things they wanted from the shop. Leaders were making efforts to supplement funds, for example through additional work duties, and the Chaplaincy could offer financial assistance in cases of extreme hardship.

Photograph 14



The Tuck Shop

4.33 Online shopping for clothes and other approved purchases was available. The outside purchase allowance was markedly less than the permitted tuckshop spend. This limited options to buy products that were important for women's self-esteem, such as cosmetics which were not sold in the tuck shop.

HEALTH AND SOCIAL CARE

Expected outcomes: Women are cared for by services that assess and meet their health, social care and substance misuse needs and promote continuity of health and social care on release. The standard of health service provided is equivalent to that which women could expect to receive elsewhere in the community.

4.34 The inspection of health services was jointly undertaken by the RQIA and HMI Prisons. The RQIA also assessed the delivery of health care against The Quality Standards for Health and Social Care, Supporting Good Governance and Best Practice in Health and Personal Social Services (HPSS), March 2006.⁸

Strategy, clinical governance and partnerships

4.35 Health care in prison was led by a dedicated multidisciplinary team who demonstrated understanding and value for respective roles and disciplines within and external to the SEHSCT.

4.36 There was a noticeable improvement in partnership working between the SEHSCT and the NIPS since the previous inspection. Regular, joint governance meetings took place at senior management and operational management levels between health care, the NIPS and education.

4.37 Governance of health care was effective in establishing improved processes to support the delivery of safe and effective care. A multidisciplinary approach was adopted for sharing essential information through a daily safety briefing across health care teams.

4.38 Staff were well supported by managers and morale was good. The employment of 'off-contract' agency staff had stopped and overall agency staff usage had significantly reduced following improved recruitment and retention initiatives and the reconfiguration of existing resources. A small pool of familiar bank staff provided consistent care to patients while offering flexibility and the opportunity to meet increased demand for services.

4.39 A comprehensive range of services were delivered and primary care nurses were on site 24 hours a day. Records of mandatory training showed that not all staff had received this and steps had been taken by managers to address gaps in staff training.

4.40 Appointments had been made to new health care posts since the last inspection, including a Clinical Nurse Educator appointed from March 2024. The staff we spoke to placed value on this role to support new staff on induction, mandatory training compliance and staff development initiatives.

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

An appointment had also been made for a senior management post for mental health, addictions and engagement. Both positions held a Northern Ireland-wide prison health care remit.

- 4.41 Patients approaching release from prison were achieving improved health and social care outcomes. Strengthened relationships between lead/senior nurses and inclusion nurses across Health and Social Care Trusts were among the initiatives to promote inclusion and improve understanding of the need for continuity of care and support.
- 4.42 The changing demographics in the prison population since the last inspection had prompted leaders to start a pilot project for more complex case work, to improve support for women during transition and release from prison. Non-recurrent funding had been secured for a social worker to work with the NIPS staff in the PDU to prepare and support prisoners through the challenges of resettlement.
- 4.43 The development of a learning disability pathway had been commissioned, and recruitment of registered nurses for learning disability was in progress.
- 4.44 Incidents were managed within an effective clinical governance framework which included a system focused on delivering and improving patient care. Learning following incidents was captured and disseminated appropriately.
- 4.45 Health care practitioners were appropriately trained to provide a rapid response up to Intermediate Life Support in the event of a health emergency. Resuscitation equipment was appropriately placed around the site.
- 4.46 Health care staff we spoke to understood the reporting process for safeguarding concerns, although greater attention was needed to ensure that all staff had received the appropriate level of safeguarding training. Concerns escalated to the NIPS by the SEHSCT were appropriately recorded and there was a process in place to record and share the decisions made and outcomes following investigation (see paragraphs 3.23-3.25).
- 4.47 The process for making a complaint to health care had been refreshed since the last inspection with a focus on resolving complaints promptly.
- 4.48 Patients were seen face-to-face to discuss their concerns and very few submitted a formal complaint. The replies that we viewed had addressed the issues raised. During the six months to March 2024, there had been one formal health care complaint and 28 informal complaints. Complaints were investigated appropriately under the SEHSCT's complaints procedure, but information on health care complaints was not sufficiently accessible across the prison site.

Promoting health and wellbeing

- 4.49 There was an appropriate range of primary care and gender specific services, most of which had reasonable waiting times. A whole prison approach to health and wellbeing was evident with robust screening mechanisms in place from the point of arrival at Hydebank Wood.
- 4.50 All new arrivals received an initial health screen by nurses, followed by a comprehensive health and social care assessment within five days. Any underlying physical health care concerns were identified and triaged for appointments to be arranged as needed.
- 4.51 Patient appointment waiting times to see a General Practitioner (GP) were reasonable. At the point of release, the handover by the prison GP to the community GP of information such as the results of patient investigations was very good.
- 4.52 A wide range of health promotion information was available in health care areas and in the residential units.

Sexual and reproductive health (including the Mother and Baby Unit)

- 4.53 During the committals health screening, women's immediate health needs and risks were identified and a comprehensive health screening was carried out within five days.
- 4.54 Pregnancy testing and emergency contraception were available in a timely manner if required. Screening for sexual health and blood-borne viruses was offered and there was good access to cervical screening on site and mammogram services in the community. Any abnormalities detected were referred for further examination and treatment.
- 4.55 At the time of the inspection, there were no identified pregnant women at the prison but good links with community and hospital midwifery services had been established to provide antenatal care. A midwife attended the prison and offered individualised care when required.
- 4.56 Women who experienced loss through miscarriage, separation or termination received appropriate support through a multi-agency approach, including practical, physical and emotional care.
- 4.57 Women could access support for the menopause through the primary care team. Contraception, barrier protection and related health advice were discussed in preparation for release.

4.58 The small, recently refurbished Primrose Mother and Baby Unit was bright and welcoming and was a more appropriate environment than it had been at the last inspection. It was not in use at the time of the inspection. The NIPS mother and baby policy and admissions procedure described the multi-agency admissions board, including health care representation, which met to agree admission and appropriate antenatal and postnatal services. The policy was being updated at the time of the inspection.

Primary care and enhanced units

4.59 Patients we spoke to were positive about their relationship with health care staff and this was further supported by our observations during the inspection. All new arrivals received an initial health screen by nurses, followed by a comprehensive health and social care assessment within 72 hours. The initial health screen had been improved since the last inspection and health assessment information recorded by reception health care staff covered all the required areas.

4.60 The increase in the female population since the last inspection had brought increased demand for access to health care. Barriers to accessing appointments had been identified and some improvement work had been introduced. The number of non-attendances had reduced, but too many health care appointments were still not attended.

4.61 Patients with long-term health conditions were suitably provided for, for example with appropriate equipment, but too many external health appointments were missed by patients because no transport escort arrangements had been made. This required urgent attention. Patients were not informed when their appointment could not be facilitated and were therefore unable to complain.

Mental health

4.62 In our survey, 54% of women said they felt depressed on arrival at the prison and 22% said they felt suicidal. Mental health triage assessments were completed face-to-face within seven days of committal and mental health referrals were promptly responded to. A prison-wide approach to improving mental health awareness had been adopted and lunchtime learning events had been made available for all staff.

4.63 The SEHSCT delivered mental health services. The Mental Health Team (MHT) consisted of nursing staff, occupational therapy, psychiatry and psychology. Speech and language therapy had proved a valuable addition to the team since first commissioned five years previously and the increased psychology resource had improved access to psychological therapies.

4.64 There were plans to launch a learning disability pathway in autumn 2024 as part of a prison-wide approach to improving outcomes for patients with a learning disability and those experiencing neurodiversity.

- 4.65 Mental health services were available from Monday to Friday, 9am to 5pm, with adequate arrangements for out-of-hours services when required. These were rarely requested but, if needed, access to the crisis response team was available.
- 4.66 The SEHSCT operational policy for mental health service provision had not yet been developed to formalise the stepped care pathway in place.
- 4.67 In our survey, 77% of women surveyed said they had mental health problems, 39% of whom told us they had received help in Hydebank Wood with these problems. Patients referred to the MHT were seen within timeframes agreed for Northern Ireland as a region, and their needs were met. Compassionate care was provided by the MHT and there was good collaboration between the team and the NIPS. For example, when a patient needed extra support, a SPAR Evo care plan was opened and used to help manage the identified risk.
- 4.68 Patient transfers to acute psychiatric hospitals, albeit few in number, were often delayed. Weekly regional bed management meetings now included patients in prison who needed an acute bed in a psychiatric hospital. This was an improvement since the last inspection.
- 4.69 There was evidence that, when required, the patient's mental capacity was considered and assessed to support their ability to make decisions about their care. Our observations indicated that health care practitioners clearly knew their patients and treated them with dignity and respect.
- 4.70 Mental health assessments requested by the Judiciary had increased and this was having an impact on resources. These assessments were requested under the provisions of Article 51 of the Magistrates' Courts (Northern Ireland) Order 1981.
- 4.71 Patient clinical records, which were held electronically, described the assessed needs of individual patients well, although the template for care planning did not capture the actual mental health intervention and care given. Plans were in place to review this documentation.

Social care⁹

- 4.72 The need for social care was low and no prisoner was in receipt of a care package at the time of this inspection. Some women had been provided with aids such as mobility aids and adaptations had been made to support continued independence for as long as possible. Where social care need was identified, the nursing team, occupational therapist and speech and language therapist provided appropriate support.

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

4.73 The lack of a commissioned social care arrangement had the potential to affect the return of patients from acute care to the prison in a timely way. Social care provision did not align with that available in the community.

4.74 An interim policy had been developed by the SEHSCT to outline the responsibilities of Health and Social Care Trusts when a woman was identified with a social care need, but commissioners were not progressing this work.

Substance misuse and dependency

4.75 The NIPS Substance Misuse Strategy had recently been published and the priorities were being implemented at a local level. The strategy outlined the three important strands to restrict supply, reduce demand and support recovery by working closely with health and justice partners. Drug strategy meetings and an action plan with measurable outcomes were being developed but were not yet embedded.

4.76 The SEHSCT provided clinical treatments for substance use and commissioned *Start 360* (a non-profit support service) to deliver AD:EPT services. *Start 360* were separately commissioned by the SEHSCT to deliver an emotional support service to women struggling with being in custody.

4.77 On arrival women were screened promptly for alcohol and drug dependency. During the early days in custody, they received appropriate observation and clinical treatment from the primary care team for managing withdrawal symptoms. Opioid Substitution Therapy (OST) was prescribed subject to satisfactory checks on existing prescriptions. Women were referred to the Addictions Team for specialist assessment.

4.78 The SEHSCT had recently revised the operational policy for the Addictions Team and some new processes were being implemented to enhance the service. A new post of part-time addictions nurse had recently been filled and was a welcome addition to a stretched service. The nurse had started to formalise personalised care plans on the Egton Medical Information System (EMIS), the electronic care record used by the SEHSCT at the time of the inspection.

4.79 An addictions consultant psychiatrist attended the prison each week to provide flexible and safe prescribing for 10 women on OST and clinical support and alcohol treatment to three women. Prescribing reviews were conducted regularly, often with the AD:EPT Team Manager, and work was in progress to make sure that reviews were consistent. The administration of OST was undertaken competently by nurses in the Health Care Centre.

4.80 A multidisciplinary complex care approach was taken for any pregnant woman with an addiction to access specialist services.

4.81 All women were seen by AD:EPT on induction and advised of available services, including harm minimisation support which was accessible throughout the women's stay.

- 4.82 AD:EPT were supporting 18 women at the time of the inspection and 26 women were on the waiting list. The waiting time for an assessment was between eight and 10 weeks which was too long, but women were supported by the *Start 360* staff during this period.
- 4.83 A wide range of recovery-based group and individual interventions were delivered, including counselling and auricular acupuncture. *Start 360* staff had encountered some difficulties in delivering 'Self-Management And Recovery Training' groups to give more intensive support but they had made sure of attendance by working with education to incorporate the sessions in their timetable. A new four-week group programme was due to start. All women completed an action and support plan in collaboration with the service. Women we spoke to valued the support they received.
- 4.84 Alcoholics Anonymous attended each week and plans were in place for Narcotics Anonymous to provide mutual aid support. There were no peer support workers in this area, which was an omission.
- 4.85 AD:EPT delivered pre-release sessions and contributed effectively to sentence and release planning with the PDU. Liaison with community drug and alcohol services facilitated the continuation of treatment when needed. Harm minimisation advice and naloxone (a drug to reverse the effects of opioid overdose) training and supplies were available on release.

Medicines and pharmacy services

- 4.86 The management of medicines was in accordance with professional standards and medicines management practice was good. Initial health screening interviews on arrival at the prison identified individual patients' need for medicine.
- 4.87 The actions and improvement work completed by the SEHSCT following serious concerns raised previously by the RQIA in relation to the management of self-administered and tradeable medicines had been shared, implemented and sustained within Hydebank Wood.
- 4.88 Environmental improvements had had a positive impact on the administration of medication, privacy and dignity for patients had improved and the risk of diversion minimised.
- 4.89 A policy and procedure for the safe self-administration of medicines by patients had been developed since the last inspection. The policy had been agreed across all prisons in Northern Ireland in consultation with the NIPS. An appropriate risk assessment was completed and a clear rationale recorded for those who held a Schedule 3¹⁰ controlled drug in their possession.

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

- 4.90 The disposal of medicines at high risk of misuse or diversion was recorded and audited. Medicines for reuse were returned to the pharmacy securely and a record was maintained. A protocol for the disposal of controlled drugs required witnesses, including the pharmacist and one other staff member from health care.
- 4.91 The management of queues during the administration of medication had improved. The addition of a pod type structure at the medicine hatch afforded privacy and dignity for patients and increased patient confidentiality. The potential for trading or bullying behaviours in queues that we previously observed had been considerably reduced. The pod had been completed and fully implemented in Ash House and was under construction in Beech House. Arrangements were in place to build pods in all residential units in Hydebank Wood.
- 4.92 The Pharmacy Team worked well together and the multidisciplinary team valued the support that they provided.
- 4.93 Medicine records were well maintained. Medicine storage and controlled drug management were satisfactory.
- 4.94 Patient information recorded on EMIS, the SEHSCT information management system, was well used and prescribing trends were monitored.
- 4.95 Patient group directions enabled identified medicines to be held in residential unit treatment rooms, reducing the time taken in the event of an emergency or the absence of a prescriber.
- Dental and oral health**
- 4.96 The SEHSCT delivered an appropriate range of National Health Service (NHS) dental treatment including six-monthly check-ups and oral health advice such as information on effective brushing techniques and diet. Patients who needed urgent care were seen promptly. The longest wait for a routine dental appointment was five weeks and on-going treatment between two and eight weeks depending on the treatment, which was good.
- 4.97 The dentist and dental nurse delivered two sessions a week and the dental nurse was on site for a further three sessions to triage patient applications based on clinical need and provide education on oral hygiene and disease prevention.
- 4.98 The team were up-to-date with their professional development requirements. The care records we reviewed were detailed and described the treatments offered and provided.
- 4.99 The dentist prescribed pain relief and antibiotics as necessary and, if required, the GP could prescribe medication for dental concerns.

- 4.100 The dental suite was cleaned to NHS standards and dental equipment, including the dental chair, was well maintained. Routine servicing was monitored and scheduled. However, the fabric of the room was in poor condition and needed refurbishment. The floor was worn and stained despite regular cleaning and the sinks did not comply with infection prevention and control standards and needed to be replaced. This had been escalated to the NIPS and was awaiting resolution.
- 4.101 Reusable dental instruments were sent to the SEHSCT's central decontamination service for processing and dental waste was managed appropriately.

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 protected characteristics, or those who may be at risk of discrimination or unequal treatment, are recognised and addressed. Women are able to practise their religion and the Chaplaincy plays a full part in prison life, contributing to women's overall care, support and rehabilitation.

- 4.102 The culture of the prison was respectful and inclusive, and women supported each other well in an environment that encouraged a community ethos, personal development and respectful communal living.
- 4.103 As at the last inspection, there were few diverse groups in the population. In our survey, prisoners from minority groups did not respond more negatively than other groups and this was confirmed in our discussions with them.
- 4.104 Leaders instilled a person-centred approach to ensuring fair treatment and inclusion, focusing on identifying and meeting the needs of women as individuals. Suitable arrangements were made to allow those from a range of backgrounds and with a variety of needs to participate in the regime. For example, they could undertake education at all levels from entry level to Open University qualifications, and the workspaces available allowed women of all levels of ability to learn new skills, with the same courses available to the women and men living on the site.
- 4.105 Leaders had thought creatively and sensitively about supporting the most vulnerable women to socialise and participate in activities safely, including those with learning disability and difficulty needs or mental health issues who could struggle in larger groups or busy environments. Most of these women were located on Lavender Unit (see paragraphs 3.32 and 4.19) where different small, wing-based activities were available each day, for example crafts, baking or art. They were also supported to spend time off the wing, for example spending short periods working alongside others in the gardens.

- 4.106 The provision of tablets with translation software for foreign nationals who did not speak much English remained an excellent and effective initiative that helped prevent isolation. A Home Office Immigration Officer held monthly surgeries with foreign nationals, although some we spoke to were confused about their status and struggled to access free, independent legal advice (see paragraph 4.14).
- 4.107 Leaders had attempted to tailor provision for the population, for example they had recently introduced a training plan for residential staff working on the women's units. This included courses delivered by a range of community organisations, focused on working with women who had experienced sexual assault, Attention Deficit Hyperactivity Disorder, autism awareness and supporting mothers in custody. A dedicated WSO also provided one-to-one support and ran programmes on themes such as building self-esteem and understanding relationships (see paragraph 6.15).
- 4.108 Since the last inspection, the Primrose Mother and Baby Unit had opened in the health care building (see paragraph 4.58) which was not occupied at the time of our inspection. It was a pleasant environment, with six ensuite bedrooms, a living room and a large kitchen. Staff had attended training on child safeguarding and paediatric first aid, which remedied a notable gap that we identified at our last inspection.
- 4.109 The very few formal complaints about discrimination were handled reasonably well, as part of the wider complaints system. Unit staff challenged inappropriate language and behaviour where incidents were reported informally.
- 4.110 Monthly equality and diversity meetings were chaired by the Deputy Governor and were well attended, including by two prisoner representatives and a representative from the Equality Commission. Meetings focused on providing information about future events, a summary of relevant data and some relatively small-scale actions and updates, for example noting that some Polish books had been added to the library.
- 4.111 While the person-centred approach enabled women's needs to be met, it was not underpinned by an appropriate strategic focus which would give leaders a better understanding of how to meet the needs of groups in the population. For example, despite very good work with individuals with neurodivergent conditions (see paragraph 4.107), leaders had not systematically identified how many women this represented or what their needs were (see paragraph 5.29). Furthermore, the prison equality and diversity strategy was generic and not tailored to the population. It made few references to some of the innovative interventions and initiatives at Hydebank Wood.

FAITH AND RELIGION

- 4.112 The delivery of pastoral support and care remained a strength and continued to be led by the same dedicated Chaplain. The small Chaplaincy reflected the main denominations of women and arrangements were promptly made to cater for other faith groups. A Muslim Chaplain visited as required for the small number of Muslim women.
- 4.113 Chaplains were very visible in many aspects of life at Hydebank Wood. They saw new committals within 24 hours of their arrival, regularly visited the CSU and responded to requests to visit individual prisoners. They also provided financial support for those with very limited resources (see paragraph 4.32). The Catholic Sister, in particular, was very actively involved in supporting women and their families and was very highly regarded by the women we spoke to. Both Catholic Chaplains regularly visited Fern 4.
- 4.114 The Lead Chaplain attended key management meetings when possible. He had good access to senior leaders and collaboration with other agencies co-located in the PDU was excellent.
- 4.115 A high proportion of women (90%) said that they could attend religious services. Two services a week took place in the prison chapel. This was a good facility and plans had been approved to refresh the entrance area and interior subject to available funds. One multi-faith room was located in Ash House but this facility was rarely used. Religious texts and artefacts were provided by the Chaplaincy.
- 4.116 The use of video calls had been very effective in providing access to religious events such as funerals and for women to be involved in important ceremonies involving their children.

CHAPTER 5 PURPOSEFUL ACTIVITY

Women are able and expected to engage in activity that is likely to benefit them, including a positive range of recreational and social activities.

TIME OUT OF CELL¹¹, RECREATIONAL AND SOCIAL ACTIVITIES

Expected outcomes: All women have sufficient time out of cell and are encouraged to engage in recreational and social activities which support their wellbeing and promote effective rehabilitation.

- 5.1 Time out of cell remained very good and was much better than in many prisons in England and Wales. In our daily roll checks, only 8% of prisoners across both sites were locked behind their cell door and some of these were at the prisoner's request to support their wellbeing.
- 5.2 Women were encouraged to use their time constructively and around 90% were engaged in purposeful activity, again something Inspectors rarely see in other prisons. On weekdays, those in work or education could spend nine hours out of their cell and the rest around eight hours, which was similar at weekends. When on the wings, women were kept meaningfully occupied with activities such as baking or crafts, and they could book their own appointments, for example to get a haircut or attend a yoga session.
- 5.3 The library was a purpose-built environment in the Learning and Skills Centre (the Centre). It was bright, spacious and modern and well resourced. The benefits of the library being led by a highly-experienced, committed and professionally qualified librarian were evident. An impressive range of activities were facilitated, including literacy related challenges such as the 'Six Book' challenge, where readers were encouraged to read a wide range of materials. There were also cultural awareness events for women to access through the library.
- 5.4 The library stock comprised a wide selection of materials, including books that promoted inclusion and wellbeing, supporting a diverse range of reading abilities and meeting the needs of foreign national women. A range of digital versatile and compact discs were available for women as a further incentive under the PREPS (see paragraph 3.30).

¹¹ Time out of cell, in addition to formal 'purposeful activity', includes any time women are out of their cells to associate or use communal facilities to take showers or make telephone calls.

- 5.5 Women could also access books to read to their children during video visits as well as using 'tales for tots', a scheme to record stories that could be sent to children. There was further access to reading materials on all Units and a library service and book club were provided for women in other areas, such as those who were in the CSU.
- 5.6 The provision for women engaging in physical education (PE) was excellent following investment in internal and external facilities. Women were able to use the same facilities as male prisoners during their gender-specific timeslots, but also benefited from a separate area designed to encourage greater participation in sport. Women who resided on the Ash 2 and Ash 5 enhanced landings in Ash House (see paragraph 3.31) could use the gym on a flexible basis during periods of unlock to encourage positive behaviour and healthy living.
- 5.7 A range of upskilling and professional learning was undertaken by the PE instructors which supported them in the delivery of PE. The staff also facilitated several events such as sports days and Duke of Edinburgh Awards. The prison had good links with community organisations such as the Irish Football Association, who were actively involved in providing support to all prisoners at Hydebank Wood.
- 5.8 PE staff focused on individuals who lacked confidence or did not usually engage in sport by offering walks around the grounds and access to less physical sports such as carpet bowls to encourage participation. There was also a 'Couch to 5k' running or walking scheme, to encourage women to build up confidence and fitness levels and cover a distance of 5km at the end of the programme.
- 5.9 Vocational training courses had been reinstated, which was positive, and women could achieve qualifications in Active IQ Level 1 and Gym Instructing Level 2, as well as a broad range of Open College Network qualifications.

EDUCATION, SKILLS AND WORK ACTIVITIES

Expected outcomes: All women are expected and enabled to engage in education, skills or work activities that promote personal development and employability. There are sufficient, suitable education, skills and work places to meet the needs of the population and provision is of a good standard.

- 5.10 ETI Inspectors made the following evaluations about the education, skills and work provision using ETI's new inspection framework.¹²

¹² ETI, *Empowering Improvement - New Framework for Inspection (May 2024- updated September 2024)* available at <https://www.eti.gov.uk/publications/empowering-improvement-new-framework-inspection>

IN SUMMARY

- 5.11 Underpinned by a shared vision, 'Changing Minds, Changing Lives', an ethos of active participation in education, skills and work activities was fostered. The NIPS and Belfast Met staff, along with external agencies and providers, focused on addressing the needs of the women and supporting well their holistic development.
- 5.12 Further improvement was required in the continuing co-ordination of delivery across education, skills and work activities and the delivery of rehabilitation programmes and interventions. Self-evaluation and quality improvement planning processes were not effective enough.
- 5.13 Almost all of the women were participating in education, skills or work or attending the gym. It was notable that they were often involved in a range of activities across the week.

SETTING THE VISION

- 5.14 High priority was given to the provision of education, skills and work activities at Hydebank Wood to meet all the women's rehabilitation, resettlement and wellbeing needs.
- 5.15 A shared vision 'Changing minds, Changing lives' was clearly articulated by the leaders of the NIPS and Belfast Met. Good channels of communication were evident, with the confidence to provide well considered mutual support and challenge in the interests of realising continuing improvements for the benefit of the women. There were also productive working relationships between the leaders of the NIPS and Belfast Met responsible for operational delivery.
- 5.16 The Activity Allocation Board (AAB) was used well to inform women about the vision and how the available educational offering and prison job opportunities would benefit them. Importantly, the AAB was co-chaired effectively by the NIPS Senior Officer in learning and skills and the Belfast Met Head of Learning and Skills, with a representative from the PDU also in attendance.
- 5.17 The self-evaluation and quality improvement planning processes were not sufficiently informed by the wide range of quantitative and qualitative information available, such as to demonstrate clearly the rationale for cessation and/or development of particular curricular areas and the deployment and/or redeployment of staff resources.
- 5.18 A shared format was used in the action plans provided to Inspectors, which included action plans for learning and skills and the PDU. Objectives identified across these action plans were appropriate overall, but they were not always time bound, nor sufficiently specific or measurable to demonstrate fully the impact of actions taken.

5.19 Further improvement in the co-ordination of the allocations to education, skills and work activities, and the delivery of rehabilitation programmes and interventions by the PDU and voluntary and community sector partners, had appropriately been identified as an ongoing priority.

IMPLEMENTING AND IMPROVING TO ACHIEVE THE VISION

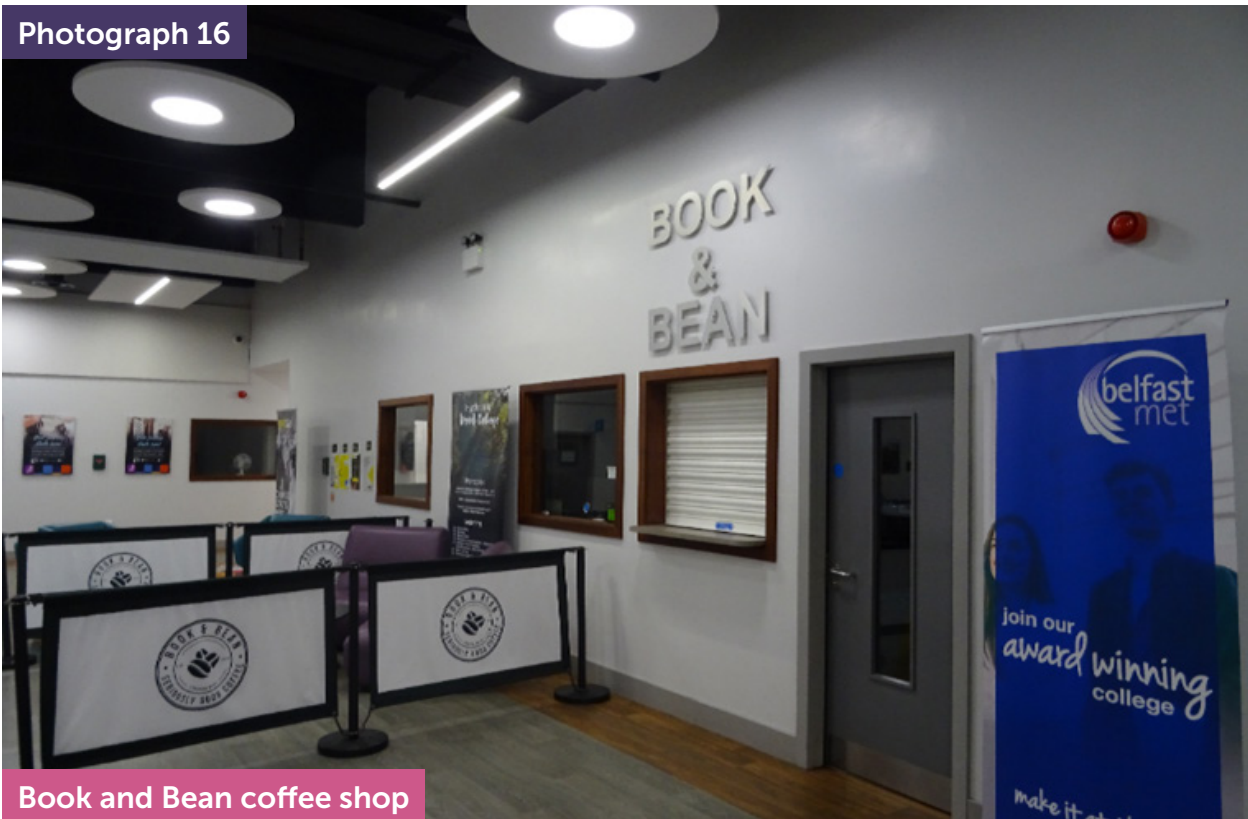
5.20 The Centre afforded a positive learning environment. Investment since the last inspection had included the establishment of a light vehicle maintenance workshop and static classrooms in the CSU.

5.21 It was positive that, overall, women had a consistently regular regime and predictable core day which allowed them to attend their activities, including learning and skills. Necessary changes to the delivery model from March 2024 had been well managed, resulting in continuing provision with minimal interruption. Appropriately, ongoing monitoring of the revised delivery model was being undertaken.



- 5.22 There was a clear focus on engaging all women to address their learning, development, rehabilitation and resettlement needs, including the high remand population. At the time of the inspection, half the women (48) were on remand. Adaptations had been made to the core curriculum to meet their needs more effectively. As well as the introduction of progression to Level 3 in the professional and technical (P&T) area of hairdressing, discrete make-up artistry provision had been introduced recently, along with painting and decorating one day a week.
- 5.23 The NIPS and the Belfast Met recognised that the arrangements for painting and decorating needed further development to sustain and extend the provision to Level 2 and above and to facilitate greater access to vocational training. Business cases were in progress for a dedicated practical training space for this P&T area. The newly introduced make-up artistry provision was being delivered in the hairdressing salon. There were plans to move this to a new location with enhanced resources to extend the curriculum and ensure delivery of a full Level 2 qualification in beauty therapy.
- 5.24 Other curricula and P&T areas being delivered included art, barista, customer service, English for speakers of other languages, enterprise and employability, the essential skills in Information and Communication Technology (ICT), literacy and numeracy, health and safety, hospitality and catering, horticulture, manual handling, and waste and recycling. These courses supported the development of the women's skills well, providing opportunities to achieve accredited qualifications. A small number of women were undertaking Open University programmes. They said they were well guided and supported by staff, although access to digital resources was a challenge. A small number of women had benefited from a six-week script to screen course.
- 5.25 A wide range of purposeful work activities were available for the women, including roles in the Book and Bean coffee dock, the Cabin café, the library, the prison kitchen, reception and the tuck shop, as well as animal husbandry, the gardens, the paint party, and waste and recycling. They demonstrated good standards of work in these roles and said that they had developed new skills and had had good opportunities to gain useful accredited qualifications. An appropriate range and number of orderly roles were available for women across the College.

Photograph 16



Book and Bean coffee shop

- 5.26 All the sessions that we observed were effective, with good levels of engagement by the women overall. Positive and respectful working relationships were fostered by the tutors who were empathetic, non-judgemental and understanding. Tutors demonstrated skilful, positive behaviour management with potentially volatile prisoners and, where required, de-escalation strategies which included appropriate support from other agencies. The Individual Learning Plans (ILPs) for the women used a consistent template. The appropriateness of the information captured was being considered to make sure the ILPs demonstrated well enough the identification and use of appropriate learning and teaching approaches and strategies.
- 5.27 The accredited provision was complemented by a wide range of non-accredited programmes, recreational activities and workshops, all of which supported the development of the women's wider skills and dispositions, including their confidence and self-esteem. Craft activities to match the interests of the prisoners included book folding, knitting and quilling, and art programmes delivered by the Prison Arts Foundation (PAF). There was also a range of beneficial informal peer mentoring opportunities.

BUILDING EQUITY

- 5.28 All of the women had been encouraged to participate in courses and work activities that supported their progression and rehabilitation. Within the first two weeks of committal, they took part in initial assessments in ICT, literacy and numeracy and, at the AAB, they were asked about previous learning, any special educational needs (SEN), previous employment and aspirations for work.
- 5.29 The benefits to the women of the automatic referral process for a SEN assessment, when SEN were disclosed, were not fully demonstrated. It was not clear, for example, how well the SEN assessment was used by all interested parties to inform the type and prioritisation of courses and activities to which the women were allocated.
- 5.30 A number of the women told Inspectors that their lives had been changed for the better through the care, support and opportunities provided by the NIPS and learning and skills staff.
- 5.31 The delivery of the P&T areas of light vehicle maintenance and painting and decorating were giving women the opportunity to develop skills in traditionally male dominated industries. Accredited qualifications were being undertaken in light vehicle maintenance.
- 5.32 Continued engagement in education was facilitated for women in the CSU with the delivery of art and horticulture classes. A small number of women in the CSU had completed examinations. Women on the vulnerable landings had historically been kept separate, but this had been reviewed and they were now able to access education in classrooms within their house and in the Centre. Separated women were also afforded the opportunity to engage in education but had chosen not to do so.
- 5.33 Better inter-agency and cross-departmental working was required to make sure that women were provided with the necessary support to secure sustained housing, employment and other services on release.

EMBEDDING SUCCESS

- 5.34 Almost all of the women were participating in education, skills or work or attending the gym. It was notable that they were often involved in more than one activity on any one day and a range of activities across the week (see paragraph 5.13). On the second day of the inspection, 43% of women (34 of 79¹³) were involved in more than one education, skills or work activity.

13 In establishing the number of prisoners who were involved in more than one education, skills or work activity, those prisoners on short-term remand of up to two weeks (13) and those over-65 (3) were not included in the count.

- 5.35 From 2021 to 2023 there had been a notable increase in the number of accredited qualifications achieved, a majority of which were short qualifications related to industry. A small number of women completed the essential skills and achieved at the levels for which they had been enrolled. The progress they had made, including the development of their wider skills, dispositions and wellbeing, was not being captured well enough.
- 5.36 The choir fostered a sense of community for the women who took part and an opportunity to demonstrate their talents and abilities. They were able to practise together, perform solos and enter community competitions. Notably, the choir had won the Holywood Music Festival Choir of the Year 2023.
- 5.37 Artwork created by the women through Belfast Met and the PAF had been displayed at the Libraries NI Art Exhibition.
- 5.38 Importantly, family event days and annual graduations celebrated the achievements and successes of the women and employers were invited to attend the graduations. In 2023 one of the women completing the qualification in recycling and waste was nominated by her tutor and selected by the Worshipful Company of Environmental Cleaners to receive their City & Guilds Livery Company prize. This award recognised and rewarded exceptional learners who had achieved excellence in their field. Staff from the NIPS and Belfast Met supported the winner at the prize ceremony.

GROWING A COMMUNITY OF LEARNING

- 5.39 The NIPS vocational tutors were working collaboratively with Belfast Met tutors to enable on-the-job assessment for the women working in realistic working environments, including the Cabin café, painting and decorating, the prison kitchen, recycling and the tuck shop. These vocational tutors were being upskilled to Level 2 in order to mentor the women and support them to undertake qualifications which were assessed by Belfast Met staff.
- 5.40 A number of the Belfast Met tutors worked between Hydebank Wood and the other prisons. Recruitment was in progress for a number of tutor vacancies at the time of the Inspection, for example in joinery and warehousing/forklift.
- 5.41 There were increasing levels of collaboration and co-ordination between Belfast Met staff and the PDU, which was positive. There was a renewed focus on developing productive links and partnerships with external agencies and employers to increase the number of women securing employment on release.

- 5.42 The JobStart Scheme and other work experience programmes provided the women with a stepping stone to employment. The number of women who secured employment before release was not being collated. The small number of women residing in Murray House had good opportunities to access work experience and paid employment.
- 5.43 An employability tutor had been appointed in April 2024 and the PDU was now working at full complement. There were plans to introduce work coaches from the Department for Communities (DfC) and leaders were considering how best to work collaboratively to make sure this resource had optimum benefit for the women.
- 5.44 A range of volunteers from the community were involved in supporting the provision of education, skills and work through working directly with the women. A coding software pilot had been delivered in 2023 by a volunteer student from a local university.
- 5.45 Women had the opportunity to undertake a Learning Together criminology module with students from a local university. A working relationship had also been developed with the Ulster Folk and Transport Museum to restore old classic cars in light vehicle maintenance.
- 5.46 Belfast Met was affiliated with the Lyric Theatre, Belfast. This partnership had provided beneficial opportunities for the women to participate in workshops which had helped to develop their creativity. The women had previously worked with the Department of Justice (DoJ) and the theatre on the Blackout project, aimed at reducing crime and antisocial behaviour.

CHAPTER 6

PREPARATION FOR RELEASE

Preparation for release is understood as a core function of the prison. Women are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Women are prepared for their release back into the community.

REDUCING REOFFENDING

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

- 6.1 The DoJ's Reducing Offending Directorate continued to provide strategic guidance and oversight of rehabilitation work across all the prisons in Northern Ireland through a monthly meeting that was attended by the senior manager from each prison's PDU. This meeting helped to co-ordinate action affecting all three prisons, such as the roll-out of the new prison work coaches funded by the DfC (see paragraph 5.43), the movement of psychology resources between establishments to meet identified demand for support (see paragraph 6.17) and approval of applications from voluntary and community sector partners to deliver rehabilitative services across all three prisons.
- 6.2 Since the previous inspection, the population at Hydebank Wood had changed. The number of women held had increased from 70 to 98 (at the time of the survey), while the proportion on remand had increased from 40% to 47%. During the previous 12 months, more than half of those convicted had received a sentence of less than two months, which restricted the time available for rehabilitative work to be provided. Some action had been taken to mitigate this in part, such as increasing opportunities for short-term work and education courses.
- 6.3 A simple analysis of women's resettlement needs had recently been completed and this had been used to develop an action plan for this area of work. A two-monthly meeting had recently been introduced to co-ordinate the delivery of reducing reoffending work. The minutes of the meeting suggested that this was not attended by representatives from all the voluntary and community sector partners nor did the meeting consider long-term data about prisoner outcomes, such as accommodation on release, to identify possible actions for improvement.

- 6.4 Managers had a good understanding of activities carried out by PDU staff as most actions that related to supporting individual women were recorded as tasks on the Prison Record Information System Management. Tasks had a target date, which gave a visible reminder to managers and staff of whether deadlines had been met, such as the scheduled monthly contact with each woman.
- 6.5 Despite the limited use of data on prisoner outcomes by leaders, outcomes for women remained good, largely because of the person-centred approach to prisoner development espoused by leaders and delivered by PDU staff and partners. The PDU was now fully staffed with a team of enthusiastic and capable Personal Development Plan (PDP) Co-ordinators (Co-ordinators), comprising six Prison Officers and two experienced staff from the Probation Board for Northern Ireland (PBNI). Most Co-ordinators had a caseload of fewer than 20 prisoners and a good understanding of the rehabilitation needs of each of them. Co-ordinators used hand-held devices to record activity with women, which enabled them to complete an individual resettlement needs profile with the woman at a suitable opportunity.
- 6.6 Information from the needs profiles was used to create a PDP setting out targets to progress. All women who had been at Hydebank Wood for more than 40 days had a PDP, impressively including those on remand, which Inspectors do not find in England and Wales. Quality assurance by managers was limited, but most of the plans we reviewed were reasonably good, although some lacked timescales and details of how to achieve the targets to help women plan their progress.
- 6.7 Most women had monthly contact with their Co-ordinator, which was better than Inspectors usually see. In our case file review, we saw several examples of very good one-to-one offence-focused work with sentenced women facilitated by their PBNI Co-ordinator.
- 6.8 In our survey, 34% of women said they had a sentence plan, more than 80% of whom said they understood what they needed to do to meet their objectives and that staff were supporting them to achieve this. Far more women than at similar prisons said that opportunities to progress at the prison were good (80% compared with 54%).
- 6.9 Communication between the PDU and learning and skills had also improved. A member of the PDU sat on the weekly AAB (see paragraph 5.16) and the learning and skills team shared monthly updates with the PDU on the achievements and conduct of women while at work and education. This enabled Co-ordinators to assimilate this into work with women to progress their sentence plan.
- 6.10 Nine women were serving life sentences at the time of the inspection. Co-ordinators completed an annual review of their progress against their sentence and several had progressed to the low supervision unit on Ash 5, which offered the opportunity to practise skills for independent living.

The excellent facility at Murray House located outside the prison walls was designed to help long-sentenced women prepare for release by working in the community on temporary release. At the time of the inspection, only two women were living in the Unit.

Photograph 17



Murray House

6.11 It was disappointing that fewer women had accessed pre-release home and resettlement leave during the previous year compared to the same period before the last inspection. Leaders said that the policy had changed and the increased number of women with short sentences meant that fewer met the criteria for pre-release leave.

PUBLIC PROTECTION

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

6.12 The arrangements for identification and management of prisoners who posed a public protection risk were effective. Those whose offending made them eligible for management on release under the Public Protection Arrangements Northern Ireland (PPANI) were identified at the point of sentence and details shared with the national PPANI links team. This Team contacted the prison before the release date to arrange a Local Area Public Protection Panel (LAPPP) to determine the appropriate level of management in the community. At the time of the inspection, 24 women were eligible for management under PPANI. The quality of the reports produced by Co-ordinators for LAPPPs was good.

- 6.13 Women with public protection risks were also identified by Co-ordinators as part of the committal process and they considered whether it was necessary and appropriate to monitor the women's communications. Phone monitoring was carried out promptly by Co-ordinators who knew the women making the calls and the potential risks to be identified.

INTERVENTIONS AND SUPPORT

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

- 6.14 Work to meet the rehabilitative needs of women was enhanced by an impressive range of community and voluntary sector partners with specialist skills and knowledge, such as NIACRO and Barnardo's (see paragraph 4.4). Most partners, as well as NIPS psychology staff, worked from the PDU office which enabled prompt information sharing. We saw several examples of this in practice, such as checking the potential accommodation options for a woman nearing release.
- 6.15 The WSO gave excellent and critical support to women who had experienced trauma (see paragraph 4.107). The WSO had supported women who reported to police that they had been victims of human trafficking. She had also developed and delivered a healthy relationships programme for women and advised colleagues about trauma-informed work. The WSO had good links with support services in the community such as Women's Aid.
- 6.16 Nexus NI provided one-to-one counselling for women who had been subjected to domestic or sexual abuse. Twenty-five women had been referred to this service in the previous six months.
- 6.17 No accredited offending behaviour programmes had been offered for several years because of a lack of psychology facilitators. However, the psychology team had continued to deliver bespoke one-to-one risk reduction work with the highest risk prisoners, facilitating such work with 12 individuals across the site in the previous year. The NIPS psychology services had recently carried out a programme needs assessment which had identified that demand for programmes at Hydebank Wood was low and some psychology resources had been moved to other prisons.
- 6.18 During the previous year, some women had completed a 12-week victim impact course delivered by Co-ordinators. There were well developed plans for co-ordinators to start delivering the Gaining Opportunities and Life Skills course (focused on improving self-esteem and personal responsibility).
- 6.19 Many community and voluntary sector partners also offered interventions, covering areas such as restorative justice, parenting (see paragraph 4.4) and substance use (see paragraph 4.83).

- 6.20 Animal husbandry and pet therapy were used very well to support the emotional wellbeing of women.
- 6.21 NIACRO offered debt and budgeting advice, but this was not systematically made available to women and only a small number had benefited. Co-ordinators helped women to obtain identity documents and open bank accounts, although data on this were not collated to assess who had received such support before release.
- 6.22 A case worker from Housing Rights charity based in the PDU worked hard to secure accommodation for women on release. Data were not routinely collated on where women were housed on release if they had served less than 14 days or been released directly from the Court. During the previous year, 151 women had been released after serving 14 days or longer, one of whom had been classified as street homeless.
- 6.23 Prison records showed that about half the women released after serving 14 days or longer did not have accommodation confirmed on the day of release and had been directed to attend the Northern Ireland Housing Executive, that had a duty to offer somewhere to stay. The prison did not have any data on where women were initially housed or if they were subsequently offered more suitable long-term accommodation. PDU staff told us that women were initially often located in hotels and hostels which, in some cases, were a long way from their support networks, such as family, doctors and Probation Officers.

RETURNING TO THE COMMUNITY

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

- 6.24 Co-ordinators referred women to a range of partner organisations well in advance of the release date to help meet their resettlement needs, although some women had too little time to serve after sentencing for all their resettlement needs to be met.
- 6.25 In our survey, 34% of women expected to be released in the next three months, 54% of whom said that someone was helping them to prepare for this.
- 6.26 Many voluntary and community sector partners offered through-the-gate support and mentoring. The Beyond the Gate service from Housing Rights provided housing advice and advocacy. Connections, part of the NIACRO charity, supported women who had experienced the criminal justice system, isolation or stigma.

Their intervention helped women to build their confidence, rebuild connections in the community and embrace new opportunities. The 'Throughcare Health and Recovery Interventions Valuing Emotional wellbeing' project offered one-to-one support for six weeks before release and six months after release for those with a history of self-harm. *Start 360* offered continuity of support through the gate for women with substance use issues. The prison did not collate data on how many had been referred to, and received, such support.

6.27 In our survey, 59% of women said that their experience in the prison had made them less likely to offend in the future.

CHAPTER 7 PROGRESS ON RECOMMENDATIONS FROM THE LAST FULL INSPECTION REPORT

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

SAFETY

Prisoners, particularly the most vulnerable, are held safely.

Work to support women in their early days was good. Levels of violence had reduced and were lower than in similar prisons. The earned privileges scheme successfully motivated good behaviour. Levels of self-harm were much lower than in similar prisons and care for women in crisis was good. Physical and procedural security was proportionate and supported the positive environment. Drug supply reduction measures were not sufficiently robust. There were some weaknesses in the management of intelligence. Weaknesses in the adjudication system left some rule breaking unpunished. The use of force was lower than at the previous inspection but governance arrangements were not sufficiently robust. Segregation was managed reasonably well. Psychosocial and clinical substance treatment was reasonably good. Outcomes for women were good against this healthy prison test.

Key recommendations

An effective strategy should be implemented to reduce the supply of drugs.

✔ **Partially achieved**

The scrutiny of incidents involving the use of force (including the use of anti-tear clothing) should ensure that it is only used as a last resort, and is legitimate, necessary and proportionate.

✘ **Not achieved**

Recommendations

First night interviews in reception should be conducted in private.

✘ **Not achieved**

All staff should have good knowledge of the Supporting People at Risk (SPAR) process and how to access information about women on care plans.

✔ **Achieved**

Care plans should reflect the individual needs of the prisoner and be updated when there is a change in circumstances.

✔ **Achieved**

The prison should ensure that it makes adult safeguarding referrals to the local authority where appropriate.

✘ **Not achieved**

Security intelligence should be analysed promptly by trained staff.

✔ **Achieved**

Intelligence objectives should be reviewed at regular security meetings, shared across the prison and monitored for their effectiveness.

✔ **Achieved**

Mandatory drug testing should be sufficiently staffed to ensure all testing is carried out within identified timescales and without gaps in provision.

✔ **Achieved**

Records of adjudications should be detailed enough to provide assurance that the outcome is fair and proportionate.

✘ **Not achieved**

Decisions to retain women in segregation following passive drug dog indications should be fully recorded and justified.

✔ **Achieved**

RESPECT

Prisoners are treated with respect for their human dignity.

Prisoners' living conditions were excellent. Good staff and prisoner relationships were a real strength. The management of equality work had improved significantly and was good. The Chaplaincy was active in providing valuable spiritual and pastoral support. Prisoner requests and complaints were managed well, and consultation was effective. The management and provision of health services had improved and were appropriately patient-centred. Catering arrangements and access to an on-site shop were good. Outcomes for women were good against this healthy prison test.

Recommendations

An intensive programme of psychosocial support for patients with substance misuse needs should be available to women at Ash House.

✔ **Achieved**

A local protocol for prescribing for substance misuse withdrawal should be agreed and implemented.

✔ **Achieved**

The showers on Fern Unit should be suitably private.

✔ **Achieved**

Staff working with mothers and babies should have the appropriate child protection and infant resuscitation training.

✔ **Achieved**

There should be a systematic approach to identification of those women eligible for public health screening programmes while in prison, with effective oversight and assurance of delivery.

✔ **Achieved**

The Northern Ireland Prison Service should work with the South Eastern Health and Social Care Trust to agree and implement a robust policy and procedure for the safe management of medicines held in possession by patients.

✔ **Achieved**

The disposal of medicines at high risk of misuse or diversion should be recorded and audited.

✔ **Achieved**

Discipline staff should routinely supervise medication administration to maintain patient confidentiality and reduce the potential for bullying and diversion.

✔ **Achieved**

Arrangements for accessing out-of-hours advice and support from South Eastern Health and Social Care Trust senior managers and crisis response team should be specified and communicated to mental health staff.

✔ **Achieved**

Mental health care documentation should record the assessed need of the patient and meet professional standards.

✔ **Partially achieved**

The serving of meals should be supervised consistently to ensure that hygiene arrangements and portion control are observed.

✔ **Achieved**

PURPOSEFUL ACTIVITY

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

Time out of cell was better than in many similar establishments. The leadership and management of education, skills and work was collaborative and there was a positive learning culture. The range of activities had improved although vocational workshops were underused. The provision from Belfast Met was good, as was the quality of learning, teaching and training. Attendance and behaviour were excellent. The number of registrations and accreditations had increased but there was a lack of access and progress in essential skills. Too few work activities provided accreditation and progression into employment on release. The library and PE provision were very good. Outcomes for women were reasonably good against this healthy prison test.

Key recommendation

The learning and skills self-evaluation and quality improvement planning process should have a stronger impact, including more incisive use of data and first-hand evidence, and better involvement of all the various providers and agencies to inform a more coherent strategic plan for the further development of the provision.

✘ **Not achieved**

Recommendations

The prison should improve the uptake and impact of the provision for essential skills.

✔ **Partially achieved**

The workshop-based curriculum and resources should be improved, as well as prisoner access to appropriate progressive accreditation.

✔ **Partially achieved**

REHABILITATION AND RELEASE PLANNING

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

An impressive range of voluntary organisations and the work of PDP Co-ordinators ensured that most prisoner needs were met. Co-ordinators were well trained and had good contact with women on their caseload. Development plans were good quality and reviewed regularly. Public protection arrangements were sound. There was a broad range of personal development programmes and extensive one-to-one work.

Children and families work was excellent. Pre-release work was managed effectively. Outcomes for women were good against this healthy prison test.

Recommendations

The prison should conduct a local needs analysis to ensure it can meet the rehabilitation needs of all women.

✔ **Achieved**

The resettlement needs assessment should be completed as soon as possible after arrival to ensure that prisoners have the maximum benefit from resettlement services.

✔ **Achieved**

The prison should develop better systems to identify, monitor and support the victims of abuse.

✔ **Achieved**

The prison should monitor the number of women in sustainable accommodation 12 weeks after their release to determine longer term outcomes.

✘ **Not achieved**

There should be more coherent planning of support for women beyond their release that can sustain and build on the progress made through their engagement in purposeful activity.

✘ **Not achieved**

All women should have prompt access to advice on finance, benefit and debt.

✔ **Achieved**

APPENDIX 1

ABOUT OUR INSPECTIONS AND REPORTS

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

- **Safety:** Women, particularly the most vulnerable, are held safely;
- **Respect:** Women's relationships with children, family and their support networks are central to their care in custody. A positive community ethos is evident, and all needs are met;
- **Purposeful activity:** Women are able and expected to engage in activity that is likely to benefit them, including a positive range of recreational and social activities; and
- **Preparation for release:** Preparation for release is understood as a core function of the prison. Women are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Women are prepared for their release back into the community.

We have also included expectations for judging the effectiveness of leadership in the establishment.

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

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

Our assessments might result in identification of areas of concern. Key concerns identify the areas where there are significant weaknesses in the treatment of and conditions for prisoners. To be addressed they will require a change in practice and/or new or redirected resources. Priority concerns are those that Inspectors believe are the most urgent and important and which should be attended to immediately. Key concerns and priority concerns are summarised at the beginning of inspection reports and the body of the report sets out the issues in more detail.

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

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

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

THIS REPORT

This report provides a summary of our inspection findings against Leadership and the four healthy prison tests. Each Chapter contains a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for women in prisons* (Version 2, 2021, updated March 2024) (available on the HMI Prisons website at: <https://hmiprisons.justiceinspectorates.gov.uk/expectations/>). The key concerns identified during the inspection are listed under 'What needs to improve at Hydebank Wood Women's prison' on page 7. Chapter 7 lists the recommendations from the previous full inspection and our assessment of whether they have been achieved.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found at Appendix 4. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

APPENDIX 2

INSPECTION TEAM

This inspection was carried out by:

Jacqui Durkin	Chief Inspector, CJI
Charlie Taylor	Chief Inspector, HMI Prisons
Deborah Butler	Team leader, HMI Prisons
Roisin Devlin	Inspector, CJI
Maureen Erne	Inspector, CJI
Ian Dickens	Inspector, HMI Prisons
Maureen Jamieson	Inspector, HMI Prisons
Lindsay Jones	Inspector, HMI Prisons
David Owens	Inspector, HMI Prisons
Nadia Syed	Inspector, HMI Prisons
Alicia Grassom	Researcher, HMI Prisons
Helen Ranns	Researcher, HMI Prisons
Sam Rasor	Researcher, HMI Prisons
Joe Simmonds	Researcher, HMI Prisons
Wendy McGregor	Assistant Director, RQIA
Catherine Doherty	Inspector RQIA
Philip Lowry	Inspector, RQIA
Rachel Lloyd	Inspector, RQIA
Nicola McCann	Inspector, RQIA
Patrick McMahon	Inspector, RQIA
Rebecca Stewart	Inspector RQIA

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

APPENDIX 3 PRISON POPULATION PROFILE AT 23 MAY 2024

A population profile was requested from the prison as part of the information gathered during the inspection. Please note: the following figures were supplied by the establishment and any errors or omissions are the establishment's own.

Population breakdown by:

Status	18-20 year olds	21 years and over
Un-Sentenced	2	44
Sentenced	0	47
Recall	0	4
Detainees	0	1
TOTAL	2	96

Sentence	18-20 year olds	21 years and over
Un-Sentenced	2	44
Less than 6 months	0	5
6 months to less than 12 months	0	5
12 months to less than 2 years	0	8
2 years to less than 4 years	0	12
4 years to less than 10 years	0	6
10 years and over (not life)	0	6
Life	0	9
TOTAL	2	96

Age	Number of prisoners	%
Under 21 years	3	3
21 years to 29 years	25	25
30 years to 39 years	36	36
40 years to 49 years	22	22
50 years to 59 years	9	9
60 years to 69 years	4	4
Over 70 years	1	1
TOTAL	100¹⁴	100%

Nationality	18-20 year olds	21 years and over
British	1	8
British – England	0	3
British – Wales	0	0
Foreign Nationals	0	12
Irish	0	24
Northern Irish	1	49
TOTAL	2	96

Security category	18-20 year olds	21 years and over
High Supervision	0	4
Medium Supervision	2	87
Low Supervision	0	5
TOTAL	2	96

14 This data relates to a report provided on 31 May 2024 and accounts for the small difference in the total number of women in custody.

Ethnicity	18-20 year olds	21 years and over
White	2	86
Mixed (other)	0	9
African	0	1
TOTAL	2	96

Religion	18-20 year olds	21 years and over
Christian	0	4
Church of Ireland	0	1
Roman Catholic	1	48
Methodist	0	1
Muslim	0	1
Pentecostal/ Elim	0	0
Presbyterian	0	14
Other	0	5
No religion	1	22
TOTAL	2	96

Unsentenced prisoners only

Length of stay	18-20 year olds	21 years and over
Less than 1 month	0	9
1 month to 3 months	0	6
3 months to 6 months	0	11
6 months to 1 year	0	8
1 year to 2 years	0	4
2 years to 4 years	0	6
4 years +	0	8
TOTAL	0	52

UNSENTENCED PRISONERS ONLY

Length of stay	18-20 year olds	21 years and over
Less than 1 month	2	21
1 month to 3 months	0	15
3 months to 6 months	0	4
6 months to 1 year	0	1
1 year to 2 years	0	3
2 years +	0	0
TOTAL	2	44

Main offence	18-20 year olds	21 years and over
Burglary/Robbery/Theft	0	11
Criminal Damage	0	3
Drug Offences	0	3
Fraud	0	2
Motoring Offences	0	1
Murder	0	12
Offences against the state	0	3
Other offences against the person	2	47
Sex Offences	0	6
Other Offences	0	8
TOTAL	2	96

APPENDIX 4

PRISONER SURVEY METHODOLOGY AND RESULTS

PRISONER SURVEY METHODOLOGY

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

HMI Prisons researchers developed a self-completion questionnaire in November 2023 to support HMI Prisons' Expectations. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release together with demographic and background questions which enables comparison of responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express in their own words what they find most positive and negative about the prison. Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by Inspectors.

Sampling

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

Distributing and collecting questionnaires

HMI Prisons researchers distributed and collected the questionnaires in person. A cover sheet was included with the questionnaire which explained the purpose of the survey and that participation was voluntary. Assurances were given about confidentiality, anonymity and the storage and retention of the data. Prisoners were provided with a sealable envelope for their completed questionnaire and told when researchers would return to collect it. The questionnaire was available in 14 languages.

Survey responses

At the time of the survey on 21 May 2024 the prisoner population at Hydebank Wood Women's Prison was 98. There was no sampling conducted due to the small population size, and instead questionnaires were distributed to all 97 prisoners who were present at the time of the survey. We received a total of 84 completed questionnaires, a response rate of 87%.

PRISONER SURVEY RESULTS AND ANALYSES

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

Full survey results were provided to Inspectors for:

Responses from Hydebank Wood Women's Prison 2024 compared with those from other HMI Prisons surveys and responses in 2019

- Survey responses from Hydebank Wood Women's Prison 2024 compared with survey responses from other women's prisons inspected since May 2021.
- Survey responses from Hydebank Wood - Women's Prison in 2024 compared with survey responses from Hydebank Wood - Women's Prison in 2019.

Comparisons between different residential locations within Hydebank Wood Women's Prison 2024

- Responses of prisoners on Ash House compared with those from Beech House.

Comparisons between self-reported sub-populations of prisoners within Hydebank Wood Women's Prison 2024

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

- Responses of prisoners who reported that they were on remand or awaiting sentence compared to those who were sentenced.
- Responses of Protestant prisoners compared with those of Catholic prisoners.
- Responses of prisoners aged 25 and under compared with those aged over 25.
- Responses of foreign national prisoners compared with those of UK/British nationals.
- Responses of prisoners who reported that they had a disability compared to those who did not.
- Responses of prisoners who reported that they had mental health problems compared with those who did not.
- Responses of prisoners who reported that they had been in local authority care compared with those who did not.
- Responses of non-heterosexual prisoners compared with heterosexual prisoners.

Please note that we only carry out within-prison comparator analysis where there is a minimum of 10 responses which must also represent at least 10% of the total response.

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

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

A summary of the 2024 survey findings, comparison data for last time and with other women's prisons inspected since May 2021 is provided on the following pages.

SURVEY SUMMARY

Background information

1.1 Which house or landing are you currently living on?

Ash 1 unit	13 (15%)
Ash 2 unit	14 (17%)
Ash 4 unit	12 (14%)
Ash 5 unit	9 (11%)
Beech 2 unit	8 (10%)
Beech 3 unit	16 (19%)
Beech 4 unit	8 (10%)
Fern House	2 (2%)
Murray House	2 (2%)

1.2 How old are you?

Under 21	2 (2%)
21 - 24	12 (15%)
25 - 29	8 (10%)
30 - 39	31 (38%)
40 - 49	20 (24%)
50 - 59	7 (9%)
60 - 69	1 (1%)
70 or over	1 (1%)

1.3 What is your ethnic group?

White - English/Welsh/Scottish/Northern Irish/British	42 (51%)
White - Irish	23 (28%)
White - Gypsy or Irish Traveller	2 (2%)
White - Roma	2 (2%)
White - any other White background	7 (9%)

1.3 What is your ethnic group?

Mixed - White and Black Caribbean	0 (0%)
Mixed - White and Black African	0 (0%)
Mixed - White and Asian	0 (0%)
Mixed - any other Mixed ethnic background	0 (0%)
Asian/Asian British - Indian	1 (1%)
Asian/Asian British - Pakistani	1 (1%)
Asian/Asian British - Bangladeshi	0 (0%)
Asian/Asian British - Chinese	0 (0%)
Asian - any other Asian background	0 (0%)
Black/Black British - Caribbean	0 (0%)
Black/Black British - African	0 (0%)
Black - any other Black/African/Caribbean background	0 (0%)
Arab	0 (0%)
Any other ethnic group	4 (5%)

1.4 How long have you been in this prison?

Less than 6 months	50 (63%)
6 months or more	30 (38%)

1.5 Are you currently serving a sentence?

Yes	42 (52%)
Yes - on recall	5 (6%)
No - on remand or awaiting sentence	34 (42%)
No - immigration detainee	0 (0%)

1.6 How long is your sentence?

Less than 6 months	7 (9%)
6 months to less than 1 year	9 (11%)
1 year to less than 4 years	12 (15%)
4 years to less than 10 years	8 (10%)
10 years or more	3 (4%)
ICS (indeterminate custodial sentence for public protection)	1 (1%)
Life	7 (9%)
Not currently serving a sentence	34 (42%)

Arrival and reception

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

Less than 2 hours	35 (43%)
2 hours or more	36 (44%)
Don't remember	10 (12%)

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

Yes	71 (89%)
No	4 (5%)
Don't remember	5 (6%)

2.3 Overall, how were you treated in reception?

Very well	39 (48%)
Quite well	33 (41%)
Quite badly	2 (2%)
Very badly	2 (2%)
Don't remember	5 (6%)

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

Problems getting phone numbers	16 (20%)
Contacting family	17 (21%)
Arranging care for children or other dependants	2 (2%)
Contacting employers	1 (1%)
Money worries	35 (43%)
Housing worries	27 (33%)
Feeling depressed	44 (54%)
Feeling suicidal	18 (22%)
Other mental health problems	29 (36%)
Physical health problems	15 (19%)
Drug or alcohol problems (e.g. withdrawal)	32 (40%)
Problems getting medication	25 (31%)
Needing protection from other prisoners	3 (4%)
Lost or delayed property	10 (12%)
Other problems	7 (9%)
Didn't have any problems	15 (19%)

2.5 When you first arrived here, were you able to talk to a member of staff in private about any problems you had?

Yes	32 (42%)
No	30 (39%)
Didn't have any problems when I first arrived	15 (19%)

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

Yes	30 (38%)
No	33 (42%)
Don't remember	15 (19%)

First night and induction

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

Nicotine replacement	30 (38%)
Toiletries/other basic items	47 (59%)
A shower	39 (49%)
A free phone call	46 (58%)
Something to eat	58 (73%)
The chance to see someone from health care	42 (53%)
The chance to talk to a Listener or Samaritans	18 (23%)
Support from another prisoner (e.g. peer mentor)	22 (28%)
I wasn't offered any of these things	8 (10%)

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

Very clean	14 (17%)
Quite clean	34 (41%)
Quite dirty	13 (16%)
Very dirty	17 (21%)
Don't remember	4 (5%)

3.3 Did you feel safe on your first night here?

Yes	54 (66%)
No	19 (23%)
Don't remember	9 (11%)

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

	Yes	No	Don't remember
Access to the prison shop/canteen?	52 (72%)	15 (21%)	5 (7%)
Free PIN phone credit?	65 (87%)	7 (9%)	3 (4%)
Numbers put on your PIN phone (within 24 hours)?	36 (51%)	27 (38%)	8 (11%)

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

Yes	47 (57%)
No	24 (29%)
Haven't had an induction	11 (13%)

On the landing

4.1 Are you in a cell on your own?

Yes	82 (100%)
No, I'm in a shared room or dormitory	0 (0%)

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

Yes	38 (48%)
No	29 (36%)
Don't know	11 (14%)
Don't have a room call bell	2 (3%)

4.3 Please answer the following questions about the house or landing you are currently living on:

	Yes	No	Don't know
Do you have enough soap or sanitiser to keep your hands clean?	67 (85%)	10 (13%)	2 (3%)
Do you normally have enough clean, suitable clothes for the week?	63 (81%)	14 (18%)	1 (1%)
Can you shower every day?	71 (91%)	7 (9%)	0 (0%)
Do you have clean sheets every week?	68 (88%)	9 (12%)	0 (0%)
Do you get cell cleaning materials every week?	63 (83%)	10 (13%)	3 (4%)
Can you get your stored property promptly if you need it?	26 (36%)	34 (47%)	13 (18%)

4.4 Is it normally quiet on the landing:

	Yes	No	Don't know
During the day?	27 (64%)	15 (36%)	1 (1%)
At night?	27 (64%)	15 (36%)	1 (1%)

4.5 Normally, how clean or dirty are the communal/shared areas of your house or landing (stairs, landing showers etc.)?

Very clean	30 (38%)
Quite clean	41 (51%)
Quite dirty	7 (9%)
Very dirty	2 (3%)

Food and canteen

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

Very good	13 (18%)
Quite good	24 (32%)
Quite bad	24 (32%)
Very bad	13 (18%)

5.2 Do you get enough to eat at mealtimes?

Always	34 (45%)
Most of the time	14 (19%)
Some of the time	19 (25%)
Never	8 (11%)

5.3 Does the shop/canteen sell the things that you need?

Yes	57 (70%)
No	19 (23%)
Don't know	5 (6%)

Safe and healthy relationships

6.1 Are prisoners encouraged to support each other here?

Yes	59 (77%)
No	18 (23%)

6.2 How would you rate the support provided to you by other prisoners (e.g. peer mentors)?

Very good	28 (37%)
Quite good	38 (51%)
Quite bad	5 (7%)
Very bad	4 (5%)

6.3 Do most staff here treat you with respect?

Yes	58 (78%)
No	16 (22%)

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

Yes	61 (80%)
No	15 (20%)

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

Yes	48 (61%)
No	31 (39%)

6.6 How helpful is your named officer (e.g. key worker or personal officer)?

Very helpful	34 (44%)
Quite helpful	19 (25%)
Not very helpful	2 (3%)
Not at all helpful	3 (4%)
Don't have a named officer	19 (25%)

6.7 Do you feel that most staff are interested in your personal welfare?

Yes	36 (49%)
No	38 (51%)

6.8 Do you feel that most staff understand your personal circumstances?

Yes	38 (49%)
No	39 (51%)

6.9 If you have thought about harming yourself while in this prison, did you feel cared for by staff?

Yes	26 (34%)
No	18 (24%)
Haven't thought about harming myself in this prison	32 (42%)

6.10 How easy or difficult is it for you to speak to a Listener, if you need to?

Very easy	17 (21%)
Quite easy	17 (21%)
Quite difficult	11 (14%)
Very difficult	10 (13%)
Don't know	19 (24%)
There are no Listeners at this prison	6 (8%)

6.11 Has your wellbeing got better or worse since you have been at this prison?

Better	35 (45%)
Worse	27 (35%)
No difference	16 (21%)

6.12 Is positive wellbeing promoted in this prison?

Yes	54 (73%)
No	20 (27%)

6.13 If you are pregnant or have given birth in the last six months, have you been offered any additional support?

Yes	1 (1%)
No	5 (6%)
Not pregnant or have not given birth in the last six months	71 (92%)

6.14 Are prisoners here consulted about things like food, canteen, health care or landing issues?

Yes, and things sometimes change	26 (33%)
Yes, but things don't change	34 (43%)
No	10 (13%)
Don't know	9 (11%)

6.15 If you want to, can you talk to managers, governors or directors in this prison?

Yes	31 (41%)
No	20 (26%)
Don't know	25 (33%)

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

Yes	30 (41%)
No	14 (19%)
Don't know	30 (41%)

Faith

7.1 What is your religion?

No religion	7 (9%)	Judaism	0 (0%)
Catholic	41 (53%)	Islam	1 (1%)
Protestant	23 (30%)	Sikhism	0 (0%)
Other Christian denomination	2 (3%)	Paganism	0 (0%)
Buddhism	1 (1%)	Rastafarianism	0 (0%)
Hinduism	1 (1%)	Other	1 (1%)

7.2 Are your religious beliefs respected here?

Yes	45 (61%)
No	7 (9%)
Don't know	15 (20%)
Not applicable (no religion)	7 (9%)

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

Yes	58 (76%)
No	2 (3%)
Don't know	9 (12%)
Not applicable (no religion)	7 (9%)

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

Yes	63 (82%)
No	4 (5%)
Don't know	3 (4%)
Not applicable (no religion)	7 (9%)

Relationships with children, family members and significant others

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

Yes	47 (60%)
No	31 (40%)

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

	Every week	Two or three times	Once	Not at all
In person visit?	26 (35%)	14 (19%)	13 (18%)	21 (28%)
Using video calling?	13 (24%)	13 (24%)	3 (6%)	25 (46%)

8.3 Do visits usually start and finish on time?

Yes	44 (57%)
No	19 (25%)
Don't know	14 (18%)

8.4 Are your visitors usually treated respectfully by staff?

Yes	47 (59%)
No	12 (15%)
Don't know	20 (25%)

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

Very easy	7 (9%)
Quite easy	25 (34%)
Quite difficult	16 (22%)
Very difficult	18 (24%)
Don't know	8 (11%)

8.6 Have you had any problems with sending or receiving:

	Yes	No
Emails?	13 (28%)	34 (72%)
Letters?	30 (43%)	40 (57%)
Parcels?	13 (25%)	40 (75%)

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

Yes	76 (97%)
No	2 (3%)

Time out of room

9.1 Do you know what the unlock and lock-up times are supposed to be here?

Yes, and these times are usually kept to	51 (68%)
Yes, but these times are not usually kept to	23 (31%)
No	1 (1%)

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

Less than 2 hours	3 (4%)
2 to 6 hours	23 (30%)
6 to 10 hours	30 (39%)
10 hours or more	15 (20%)
Don't know	5 (7%)

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

Less than 2 hours	4 (5%)
2 to 6 hours	43 (57%)
6 to 10 hours	16 (21%)
10 hours or more	6 (8%)
Don't know	6 (8%)

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

None	0 (0%)
1 or 2	7 (9%)
3 to 5	16 (21%)
More than 5	49 (64%)
Don't know	4 (5%)

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

None	1 (1%)
1 or 2	4 (5%)
3 to 5	12 (16%)
More than 5	46 (61%)
Don't know	12 (16%)

9.6 How many days in a typical week can you go outside for exercise, if you want to?

None	2 (3%)
1 or 2	21 (27%)
3 to 5	16 (21%)
More than 5	32 (42%)
Don't know	6 (8%)

9.7 Typically, how often can you participate in physical activity outside of your cell (for example go to the gym, play sports, exercise classes)?

Twice a week or more	56 (76%)
About once a week	6 (8%)
Less than once a week	3 (4%)
Never	9 (12%)

9.8 Typically, how often are you able to:

	Twice a week or more	About once a week	Less than once a week	Never
Visit the library?	12 (16%)	38 (50%)	14 (18%)	12 (16%)
Have library materials delivered to you?	5 (8%)	11 (19%)	6 (10%)	37 (63%)

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

Yes	48 (69%)
No	13 (19%)
Don't use the library	9 (13%)

Requests, complaints and legal rights

10.1 Is it easy for you to make a request?

Yes	72 (91%)
No	5 (6%)
Don't know	2 (3%)

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

	Yes	No	Not made any requests
Are requests usually dealt with fairly?	51 (70%)	17 (23%)	5 (7%)
Are requests usually dealt with within 7 days?	48 (79%)	8 (13%)	5 (8%)

10.3 Is it easy for you to make a complaint?

Yes	58 (78%)
No	3 (4%)
Don't know	13 (18%)

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

	Yes	No	Not made any complaints
Are complaints usually dealt with fairly?	20 (29%)	17 (24%)	33 (47%)
Are complaints usually dealt with within 7 days?	28 (43%)	4 (6%)	33 (51%)

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

Yes	16 (22%)
No	32 (44%)
Not wanted or needed to make a complaint	25 (34%)

10.6 Do you know how to contact these organisations?

	Yes	No	Don't know who they are
Independent Monitoring Board (IMB)	34 (46%)	22 (30%)	18 (24%)
Prisoner Ombudsman for Northern Ireland	31 (44%)	21 (30%)	19 (27%)

10.7 In this prison, is it easy or difficult for you to do these things?

	Easy	Difficult	Don't know	Don't need this
Communicate with your solicitor or legal representative	53 (73%)	11 (15%)	4 (5%)	5 (7%)
Attend legal visits	46 (68%)	7 (10%)	5 (7%)	10 (15%)
Communicate with social services	24 (36%)	14 (21%)	7 (11%)	21 (32%)

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

Yes	24 (33%)
No	26 (36%)
Not had any legal letters opened	23 (32%)

Health care

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

	Very easy	Quite easy	Quite difficult	Very difficult	Don't know
Doctor	7 (9%)	24 (30%)	23 (29%)	23 (29%)	2 (3%)
Nurse	18 (24%)	38 (51%)	10 (14%)	6 (8%)	2 (3%)
Dentist	6 (8%)	24 (32%)	15 (20%)	19 (26%)	10 (14%)
Pharmacist	9 (13%)	22 (31%)	10 (14%)	10 (14%)	19 (27%)
Mental health worker	6 (8%)	19 (26%)	13 (18%)	24 (33%)	11 (15%)
Substance misuse worker	5 (7%)	7 (10%)	11 (16%)	17 (24%)	30 (43%)

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

	Very good	Quite good	Quite bad	Very bad	Don't know
Doctor	14 (18%)	20 (26%)	12 (16%)	23 (30%)	7 (9%)
Nurse	24 (33%)	33 (45%)	10 (14%)	4 (5%)	2 (3%)
Dentist	15 (21%)	21 (30%)	8 (11%)	10 (14%)	16 (23%)
Pharmacist	15 (23%)	16 (25%)	5 (8%)	6 (9%)	23 (35%)
Mental health worker	14 (20%)	19 (27%)	7 (10%)	12 (17%)	19 (27%)
Substance misuse worker	6 (9%)	7 (11%)	6 (9%)	8 (13%)	37 (58%)

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

Very good	11 (14%)
Quite good	28 (36%)
Quite bad	19 (25%)
Very bad	15 (19%)
Don't know	4 (5%)

Other support needs

12.1 Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?

Yes	44 (57%)
No	33 (43%)

12.2 If you have a disability, are you getting the support you need?

Yes	17 (24%)
No	20 (29%)
Don't have a disability	33 (47%)

12.3 Do you have any mental health problems?

Yes	60 (77%)
No	18 (23%)

12.4 Have you been helped with your mental health problems in this prison?

Yes	30 (39%)
No	29 (38%)
Don't have a mental health problem	18 (23%)

Alcohol and drugs

13.1 Did you have an alcohol problem when you came into this prison?

Yes	31 (39%)
No	48 (61%)

13.2 Have you been helped with your alcohol problem in this prison?

Yes	14 (18%)
No	15 (19%)
Didn't/don't have an alcohol problem	48 (62%)

13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	42 (53%)
	No	37 (47%)
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	
	Yes	5 (6%)
	No	73 (94%)
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	
	Yes	7 (9%)
	No	69 (91%)
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	
	Yes	16 (21%)
	No	25 (33%)
	Didn't/don't have a drug problem	34 (45%)
13.7	Is it easy or difficult to get illicit drugs in this prison?	
	Very easy	3 (4%)
	Quite easy	6 (8%)
	Quite difficult	11 (14%)
	Very difficult	7 (9%)
	Don't know	49 (64%)

13.8 Is it easy or difficult to get alcohol in this prison?

Very easy	1 (1%)
Quite easy	2 (3%)
Quite difficult	5 (6%)
Very difficult	22 (29%)
Don't know	47 (61%)

13.9 Is it easy or difficult to get tobacco in this prison?

Very easy	35 (47%)
Quite easy	16 (21%)
Quite difficult	10 (13%)
Very difficult	1 (1%)
Don't know	13 (17%)

Safety

14.1 Have you ever felt unsafe here?

Yes	38 (49%)
No	39 (51%)

14.2 Do you feel unsafe now?

Yes	17 (23%)
No	57 (77%)

Promoting positive behaviour

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

Verbal abuse	34 (44%)
Threats or intimidation	23 (30%)
Physical assault	9 (12%)
Sexual harassment	6 (8%)
Sexual assault	3 (4%)
Theft of canteen or property	15 (19%)
Other bullying/victimisation	23 (30%)
Not experienced any of these from prisoners here	33 (43%)

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

Yes	55 (74%)
No	19 (26%)

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

Verbal abuse	27 (36%)
Threats or intimidation	17 (22%)
Physical assault	4 (5%)
Sexual harassment	3 (4%)
Sexual assault	1 (1%)
Theft of canteen or property	3 (4%)
Other bullying/victimisation	16 (21%)
Not experienced any of these from staff here	41 (54%)

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

Yes	52 (71%)
No	21 (29%)

15.5 If you have reported victimisation by prisoners or staff here, did you feel supported?

Yes	18 (35%)
No	34 (65%)

Supporting women to promote positive behaviour

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

Yes	48 (65%)
No	12 (16%)
Don't know what the incentives/rewards are	14 (19%)

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

Yes	33 (45%)
No	21 (29%)
Don't know	7 (10%)
Don't know what this is	12 (16%)

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

Yes	8 (11%)
No	68 (89%)

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

Yes	4 (5%)
No	3 (4%)
Don't remember	1 (1%)
Not been restrained here in last 6 months	68 (89%)

16.5 Have you spent one or more nights segregated or in the Care and Supervision Unit (CSU) in this prison in the last 6 months?

Yes	11 (15%)
No	62 (85%)

16.6 If you have spent one or more nights in the CSU unit in this prison in the last 6 months, please answer the questions below:

	Yes	No
Were you treated well by the CSU staff?	7 (88%)	1 (13%)
Could you shower every day?	7 (70%)	3 (30%)
Could you go outside for exercise every day?	5 (50%)	5 (50%)
Could you use the phone every day (if you had credit)?	8 (80%)	2 (20%)

Sentence plan (PDP)

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

	Easy	Difficult	Don't know	Not available here
Education	61 (80%)	14 (18%)	1 (1%)	0 (0%)
Vocational or skills training	42 (64%)	14 (21%)	10 (15%)	0 (0%)
Prison job	51 (74%)	13 (19%)	4 (6%)	1 (1%)
Voluntary work outside of the prison	15 (22%)	12 (17%)	28 (41%)	14 (20%)
Paid work outside of the prison	10 (15%)	12 (18%)	28 (42%)	16 (24%)

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

	Yes, will help	No, won't help	Not done this
Education	51 (72%)	14 (20%)	6 (8%)
Vocational or skills training	31 (52%)	15 (25%)	14 (23%)
Prison job	35 (56%)	17 (27%)	11 (17%)
Voluntary work outside of the prison	15 (26%)	9 (16%)	33 (58%)
Paid work outside of the prison	14 (26%)	8 (15%)	32 (59%)

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

Yes	59 (84%)
No	9 (13%)
Not applicable (e.g. if you are retired, sick or on remand)	2 (3%)

Planning and progression

18.1 How would you describe your opportunities to progress in this prison?

Very good	27 (38%)
Quite good	30 (42%)
Quite bad	11 (15%)
Very bad	3 (4%)

18.2 Do you have a sentence plan? (This may be called a Personal Development Plan or PDP)

Yes	24 (34%)
No	47 (66%)

18.3 Do you understand what you need to do to achieve the objectives or targets in your sentence plan/PDP?

Yes	20 (83%)
No	3 (13%)
Don't know what my objectives or targets are	1 (4%)

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

Yes	20 (87%)
No	2 (9%)
Don't know what my objectives or targets are	1 (4%)

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

	Yes, this helped	No, this didn't help	Not done / don't know
Offending behaviour programmes	5 (23%)	1 (5%)	16 (73%)
Other programmes	6 (29%)	1 (5%)	14 (67%)
One-to-one work (e.g. with a PDP co-ordinator, probation officer or psychologist)	7 (32%)	2 (9%)	13 (59%)
Being on a specialist unit	1 (5%)	1 (5%)	18 (90%)
Temporary release - day or overnight release	2 (9%)	1 (5%)	19 (86%)

Preparation for release

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

Yes	25 (34%)
No	32 (43%)
Don't know	17 (23%)

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

Very near	3 (13%)
Quite near	7 (29%)
Quite far	5 (21%)
Very far	9 (38%)

19.3 Is anybody helping you to prepare for your release (e.g. PDP Co-ordinator, other PDU staff or your Probation Officer)?

Yes	13 (54%)
No	11 (46%)

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

	Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
Finding accommodation	5 (24%)	10 (48%)	6 (29%)
Getting employment	3 (14%)	9 (43%)	9 (43%)
Setting up education or training	2 (11%)	9 (47%)	8 (42%)
Arranging benefits	5 (23%)	13 (59%)	4 (18%)
Sorting out finances	5 (24%)	11 (52%)	5 (24%)
Support for drug or alcohol problems	8 (38%)	7 (33%)	6 (29%)
Physical/mental health support	6 (27%)	12 (55%)	4 (18%)
Previous or ongoing trauma (e.g. domestic violence)	3 (14%)	11 (52%)	7 (33%)
Social care support	7 (30%)	7 (30%)	9 (39%)
Getting back in touch with family or friends	7 (32%)	9 (41%)	6 (27%)
Child custody arrangements	2 (10%)	6 (29%)	13 (62%)

More about you

20.1 Do you have children under the age of 18?

Yes	43 (58%)
No	31 (42%)

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

Yes	53 (72%)
No	21 (28%)

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

Yes	22 (30%)
No	52 (70%)

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

Yes	1 (1%)
No	73 (99%)

20.5 What is your gender?

Female	76 (100%)
Male	0 (0%)
Non-binary	0 (0%)
Other	0 (0%)

20.6 How would you describe your sexual orientation?

Straight/heterosexual	62 (83%)
Gay/lesbian/homosexual	5 (7%)
Bisexual	6 (8%)
Other	2 (3%)

20.7 Do you identify as transgender or transsexual?

Yes	2 (3%)
No	70 (97%)

Final questions about this establishment

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

All the time	14 (18%)
Most of the time	27 (36%)
Some of the time	25 (33%)
Never	10 (13%)

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






More likely to offend	13 (18%)
Less likely to offend	42 (59%)
Made no difference	16 (23%)

HYDEBANK WOOD - WOMEN'S PRISON 2024 SURVEY RESPONSES COMPARED WITH THOSE FROM OTHER HMI PRISONS SURVEYS OF WOMEN'S PRISONS

In this table summary statistics from Hydebank Wood - Women's Prison 2024 are compared with the following HMI Prisons survey data:

- Summary statistics from from surveys of women's prisons conducted since the introduction of the new questionnaire in May 2021 (12 prisons).

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

-  Green shading shows results that are significantly more positive than the comparator
 -  Blue shading shows results that are significantly more negative than the comparator
 -  Orange shading shows significant differences in demographics and background information
 -  No shading means that differences are not significant and may have occurred by chance
 -  Grey shading indicates that we have no valid data for this question
- * less than 1% probability that the difference is due to chance

			Hydebank Wood - Women's Prison 2024	Women's prisons surveyed since May 2021
Number of completed questionnaires returned <i>n=number of valid responses to question (Hydebank Wood - Women's Prison 2024)</i>			84	1,460
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION				
1.2	Are you under 21 years of age?	n=82	2%	2%
	Are you 25 years of age or younger?	n=82	17%	13%
	Are you 50 years of age or older?	n=82	11%	16%
	Are you 70 years of age or older?	n=82	1%	1%
1.3	Are you from an ethnic group other than white?	n=82	7%	18%
	Are you from a white Gypsy or Irish Traveller or Roma ethnic group?	n=82	5%	3%
1.4	Have you been in this prison for less than 6 months?	n=80	63%	43%
1.5	Are you currently serving a sentence?	n=81	58%	82%
	Are you on recall?	n=81	6%	10%
1.6	Is your sentence less than 12 months?	n=81	20%	16%
	Are you here under an indeterminate custodial sentence (ICS)?	n=81	1%	1%
7.1	Are you Muslim?	n=76	1%	7%
7.1	Are you Catholic?	n=77	53%	
7.1	Are you Protestant?	n=77	30%	
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=77	57%	50%
12.3	Do you have any mental health problems?	n=78	77%	75%
20.1	Do you have children under the age of 18?	n=74	58%	51%
20.2	Are you a foreign national?	n=74	28%	7%
20.3	Have you ever been in Social Services care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?	n=74	30%	30%
20.4	Have you ever been in the armed services (e.g. army, navy, air force)?	n=74	1%	2%
20.5	Is your gender male, non-binary or other?	n=76	0%	2%
20.6	Are you homosexual, bisexual or other sexual orientation?	n=75	17%	26%
20.7	Do you identify as transgender or transsexual?	n=72	3%	2%

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

- Green shading shows results that are significantly more positive than the comparator
 - Blue shading shows results that are significantly more negative than the comparator
 - Orange shading shows significant differences in demographics and background information
 - No shading means that differences are not significant and may have occurred by chance
 - Grey shading indicates that we have no valid data for this question
- * less than 1% probability that the difference is due to chance

			Hydebank Wood - Women's Prison 2024	Women's prisons surveyed since May 2021
Number of completed questionnaires returned			84	1,460
<i>n=number of valid responses to question (Hydebank Wood - Women's Prison 2024)</i>				
ARRIVAL AND RECEPTION				
2.1	Were you given helpful information about this prison before you came here?	n=81	43%	24%
2.2	When you were searched in reception, was this done in a respectful way?	n=80	89%	84%
2.3	Overall, were you treated very/quite well in reception?	n=81	89%	86%
2.4	When you first arrived, did you have any problems?	n=81	81%	83%
	Did you have problems with:			
	Getting phone numbers?	n=81	20%	30%
	Contacting family?	n=81	21%	30%
	Arranging care for children or other dependents?	n=81	2%	3%
	Contacting employers?	n=81	1%	4%
	Money worries?	n=81	43%	31%
	Housing worries?	n=81	33%	29%
	Feeling depressed?	n=81	54%	56%
	Feeling suicidal?	n=81	22%	26%
	Other mental health problems?	n=81	36%	42%
	Physical health problems?	n=81	19%	25%
	Drug or alcohol problems (e.g. withdrawal)?	n=81	40%	28%
	Getting medication?	n=81	31%	34%
	Needing protection from other prisoners?	n=81	4%	7%
	Lost or delayed property?	n=81	12%	18%
Other problems?	n=81	9%	15%	
	<i>For those who had any problems when they first arrived:</i>			
2.5	Were you able to talk with somebody in private about these problems?	n=62	52%	41%
2.6	Did staff help you to deal with these problems?	n=63	48%	39%

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Number of completed questionnaires returned		84	1,460
<i>n=number of valid responses to question (Hydebank Wood - Women's Prison 2024)</i>			
FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night here, were you offered:		
	Nicotine replacement?	n=79 38%	60%
	Toiletries/other basic items?	n=79 59%	64%
	A shower?	n=79 49%	52%
	A free phone call?	n=79 58%	62%
	Something to eat?	n=79 73%	80%
	The chance to see someone from health care?	n=79 53%	62%
	The chance to talk to a Listener or Samaritans?	n=79 23%	26%
	Support from another prisoner (e.g. peer mentor)?	n=79 28%	28%
	None of these?	n=79 10%	5%
3.2	On your first night in this prison, was your cell very/quite clean?	n=82 59%	62%
3.3	Did you feel safe on your first night here?	n=82 66%	70%
3.4	In your first few days here, did you get:		
	Access to the prison shop/canteen?	n=72 72%	47%
	Free PIN phone credit?	n=75 87%	54%
	Numbers put on your PIN phone within 24 hours?	n=71 51%	35%
3.5	Have you had an induction at this prison?	n=82 87%	81%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	n=71 66%	53%

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ON THE LANDING				
4.1	Are you in a cell on your own?	n=82	100%	72%
4.2	Is your cell call bell normally answered within 5 minutes?	n=80	48%	38%
4.3	On the house or landing you are currently living on:			
	Do you have enough soap or sanitiser to keep your hands clean?	n=79	85%	67%
	Do you normally have enough clean, suitable clothes for the week?	n=78	81%	75%
	Can you shower every day?	n=78	91%	84%
	Do you have clean sheets every week?	n=77	88%	86%
	Do you get cell cleaning materials every week?	n=76	83%	71%
	Can you get your stored property promptly, if you need it?	n=73	36%	20%
4.4	Is it normally quiet on the landing:			
	During the day?	n=76	78%	49%
	At night?	n=74	64%	64%
4.5	Are the communal/shared areas of your landing or house (landings, stairs, showers etc.) normally very/quite clean?	n=80	89%	79%
FOOD AND CANTEEN				
5.1	Is the quality of the food in this prison very/quite good?	n=74	50%	48%
5.2	Do you get enough to eat at mealtimes always/most of the time?	n=75	64%	47%
5.3	Does the shop/canteen sell the things that you need?	n=81	70%	58%

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SAFE AND HEALTHY RELATIONSHIPS				
6.1	Are prisoners encouraged to support each other here?	n=77	77%	62%
6.2	Is the support provided to you by other prisoners (e.g. peer workers) very/quite good?	n=75	88%	74%
6.3	Do most staff here treat you with respect?	n=74	78%	73%
6.4	Are there any staff here you could turn to if you had a problem?	n=76	80%	82%
6.5	In the last week, has any member of staff talked to you about how you are getting on?	n=79	61%	51%
6.6	Do you have a named officer (key worker)?	n=77	75%	78%
	<i>For those who have a named officer:</i>			
	Is your named officer (key worker) very/quite helpful?	n=58	91%	76%
6.7	Do you feel that most staff are interested in your personal welfare?	n=74	49%	40%
6.8	Do you feel that most staff understand your personal circumstances?	n=77	49%	32%
6.9	Have you thought about harming yourself while in this prison?	n=76	58%	52%
	<i>For those who have thought about harming themselves in this prison:</i>			
	Did you feel cared for by staff?	n=44	59%	37%
6.10	Is it very/quite easy for you to speak to a Listener if you need to?	n=80	43%	40%
6.11	Has your wellbeing got better since you have been at this prison?	n=78	45%	32%
6.12	Is positive wellbeing promoted in this prison?	n=74	73%	48%
6.13	Are you pregnant or have you given birth in the last six months?	n=77	8%	11%
	<i>For those who are pregnant or have given birth in the last six months:</i>			
	Have you been offered any additional support?	n=6	17%	35%
6.14	Are prisoners here consulted about things like food, canteen, health care or landing issues?	n=79	76%	55%
	If so, do things sometimes change?	n=60	43%	35%
6.15	If you wanted to, can you talk to managers, governors or directors in this prison?	n=76	41%	35%
6.16	Have you shared a problem with a manager, governor or director?	n=74	59%	53%
	<i>For those who have shared a problem with a manager, governor or director:</i>			
	Did they try to help you?	n=44	68%	52%
FAITH				
7.1	Do you have a religion?	n=76	91%	72%
	<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	n=67	67%	73%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=69	84%	79%
7.4	Are you able to attend religious services, if you want to?	n=70	90%	76%

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RELATIONSHIPS WITH CHILDREN, FAMILY MEMBERS AND SIGNIFICANT OTHERS				
8.1	Have staff here encouraged you to keep in touch with your family/friends?	n=78	60%	55%
8.2	Have you been able to see your family/friends more than once in the last month:			
	In person (prison visit)?	n=74	54%	19%
	Using video calling?	n=54	48%	19%
8.3	Do visits usually start and finish on time?	n=77	57%	36%
8.4	Are your visitors usually treated respectfully by staff?	n=79	59%	45%
8.5	Is it very/quite easy for your family and friends to get here?	n=74	43%	33%
8.6	Have you had any problems with sending or receiving:			
	Emails?	n=47	28%	39%
	Letters?	n=70	43%	50%
	Parcels?	n=53	25%	51%
8.7	Are you able to use a phone every day (if you have credit)?	n=78	97%	94%
TIME OUT OF CELL				
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=75	99%	87%
	For those who know what the unlock and lock-up times are supposed to be:			
	Are these times usually kept to?	n=74	69%	58%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday (including time spent at education, work etc.)?	n=76	4%	30%
	Do you usually spend 10 hours or more out of your cell on a typical weekday (including time spent at education, work etc.)?	n=76	20%	13%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=75	5%	51%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=75	8%	9%
9.4	Do you have time to do domestics more than 5 days in a typical week (shower, clean cell, use the landing phones etc.)?	n=76	64%	55%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=75	61%	48%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=77	42%	66%
9.7	Do you typically go to the gym or play sports twice a week or more?	n=74	76%	51%
9.8	Are you able to visit the library once a week or more?	n=76	66%	46%
	Are you able to have library materials delivered to you once a week or more?	n=59	27%	35%
9.9	For those who use the library:			
	Does the library have a wide enough range of materials to meet your needs?	n=61	79%	63%

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APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS				
10.1	Is it easy for you to make a request?	n=79	91%	75%
	<i>For those who have made a request:</i>			
10.2	Are requests usually dealt with fairly?	n=68	75%	59%
	Are requests usually dealt with within 7 days?	n=56	86%	43%
10.3	Is it easy for you to make a complaint?	n=74	78%	65%
	<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=37	54%	41%
	Are complaints usually dealt with within 7 days?	n=32	88%	33%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=48	33%	31%
10.6	Do you know how to contact the following organisations?			
	The Independent Monitoring Board	n=74	46%	
	Prisoner Ombudsman for Northern Ireland	n=71	44%	
	<i>For those who need it, is it easy to:</i>			
10.7	Communicate with your solicitor or legal representative?	n=68	78%	54%
	Attend legal visits?	n=58	79%	52%
	Communicate with social services?	n=45	53%	26%
	<i>For those who have had legal letters:</i>			
10.8	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=50	48%	43%
HEALTH CARE				
11.1	Is it very/quite easy to see:			
	Doctor?	n=79	39%	28%
	Nurse?	n=74	76%	48%
	Dentist?	n=74	41%	18%
	Pharmacist?	n=70	44%	39%
	Mental health worker?	n=73	34%	35%
	Substance misuse worker?	n=70	17%	36%
11.2	Do you think the quality of the health service is very/quite good from:			
	Doctor?	n=76	45%	49%
	Nurse?	n=73	78%	61%
	Dentist?	n=70	51%	38%
	Pharmacist?	n=65	48%	46%
	Mental health worker?	n=71	46%	45%
	Substance misuse worker?	n=64	20%	40%
11.3	Do you think the overall quality of the health services here is very/quite good?	n=77	51%	44%

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OTHER SUPPORT NEEDS				
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=77	57%	50%
	<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	n=37	46%	35%
12.3	Do you have any mental health problems?	n=78	77%	75%
	<i>For those who have mental health problems:</i>			
12.4	Have you been helped with your mental health problems in this prison?	n=59	51%	51%
ALCOHOL AND DRUGS				
13.1	Did you have an alcohol problem when you came into this prison?	n=79	39%	23%
	<i>For those who had/have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	n=29	48%	67%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=79	53%	39%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=78	6%	9%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=76	9%	9%
	<i>For those who had/have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	n=41	39%	70%
13.7	Is it very/quite easy to get illicit drugs in this prison?	n=76	12%	30%
13.8	Is it very/quite easy to get alcohol in this prison?	n=77	4%	8%
13.9	Is it very/quite easy to get tobacco in this prison?	n=75	68%	16%
SAFETY				
14.1	Have you ever felt unsafe here?	n=77	49%	51%
14.2	Do you feel unsafe now?	n=74	23%	19%

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PROMOTING POSITIVE BEHAVIOUR			
15.1	Have you experienced any of the following from other prisoners here:		
	Verbal abuse? n=77	44%	45%
	Threats or intimidation? n=77	30%	36%
	Physical assault? n=77	12%	14%
	Sexual harassment? n=77	8%	5%
	Sexual assault? n=77	4%	2%
	Theft of canteen or property? n=77	19%	23%
	Other bullying/victimisation? n=77	30%	27%
	Not experienced any of these from prisoners here n=77	43%	44%
15.2	If you were being bullied/victimised by other prisoners here, would you report it? n=74	74%	52%
15.3	Have you experienced any of the following from staff here:		
	Verbal abuse? n=76	36%	28%
	Threats or intimidation? n=76	22%	20%
	Physical assault? n=76	5%	5%
	Sexual harassment? n=76	4%	3%
	Sexual assault? n=76	1%	1%
	Theft of canteen or property? n=76	4%	5%
	Other bullying/victimisation? n=76	21%	19%
	Not experienced any of these from staff here n=76	54%	61%
15.4	If you were being bullied/victimised by staff here, would you report it? n=73	71%	61%
15.5	If you have reported victimisation by prisoners or staff here, did you feel supported? n=52	35%	28%
SUPPORTING WOMEN TO PROMOTE POSITIVE BEHAVIOUR			
16.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? n=74	65%	46%
16.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. Incentives) in this prison? n=73	45%	37%
16.3	Have you been physically restrained by staff in this prison in the last 6 months? n=76	11%	7%
	<i>For those who have been restrained in the last 6 months:</i>		
16.4	Did anyone come and talk to you about it afterwards? n=8	50%	28%
16.5	Have you spent one or more nights in the Care and Supervision Unit in this prison in the last 6 months? n=73	15%	7%
	<i>For those who have spent one or more nights in the Care and Supervision Unit in this prison in the last 6 months:</i>		
16.6	Were you treated well by Care and Supervision staff? n=8	88%	69%
	Could you shower every day? n=10	70%	67%
	Could you go outside for exercise every day? n=10	50%	71%
	Could you use the phone every day (if you had credit)? n=10	80%	81%

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EDUCATION, SKILLS AND WORK			
17.1	In this prison, is it easy to get into the following activities:		
	Education?	n=76 80%	57%
	Vocational or skills training?	n=66 64%	30%
	Prison job?	n=69 74%	47%
	Voluntary work outside of the prison?	n=69 22%	7%
17.2	Paid work outside of the prison?	n=66 15%	6%
	In this prison, have you done the following activities:		
	Education?	n=71 92%	78%
	Vocational or skills training?	n=60 77%	53%
	Prison job?	n=63 83%	80%
	Voluntary work outside of the prison?	n=57 42%	31%
	Paid work outside of the prison?	n=54 41%	32%
	<i>For those who have done the following activities while in this prison, do you think they will help you on release:</i>		
	Education?	n=65 78%	75%
	Vocational or skills training?	n=46 67%	74%
17.3	Prison job?	n=52 67%	62%
	Voluntary work outside of the prison?	n=24 63%	70%
	Paid work outside of the prison?	n=22 64%	75%
17.3	Do staff encourage you to attend education, training or work?	n=68 87%	67%

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PLANNING AND PROGRESSION				
18.1	Are your opportunities to progress in this prison very/quite good?	n=71	80%	54%
18.2	Do you have a sentence plan? (This may be called a prisoner development plan or PDP)	n=71	34%	52%
	For those who have a sentence plan:			
18.3	Do you understand what you need to do to achieve your objectives or targets?	n=24	83%	84%
18.4	Are staff helping you to achieve your objectives or targets? (e.g. a PDP Co-ordinator, other PDU staff or your Probation Officer)?	n=23	87%	64%
18.5	In this prison, have you done:			
	Offending behaviour programmes?	n=22	27%	47%
	Other programmes?	n=21	33%	52%
	One-to-one work (e.g. with an Offender Manager or psychologist)?	n=22	41%	59%
	A programme on a specialist unit?	n=20	10%	19%
	ROTL* - day or overnight release?	n=22	14%	27%
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	Offending behaviour programmes?	n=6	83%	84%
	Other programmes?	n=7	86%	85%
	One-to-one work (e.g. with an Offender Manager or psychologist)?	n=9	78%	83%
	Being on a specialist unit?	n=2	50%	67%
	ROTL - day or overnight release?	n=3	67%	87%

* ROTL - Release on Temporary Licence

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PREPARATION FOR RELEASE				
19.1	Do you expect to be released in the next 3 months?	n=74	34%	30%
	<i>For those who expect to be released in the next 3 months:</i>			
19.2	Is this prison very/quite near to your home area or intended release address?	n=24	42%	41%
19.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?	n=24	54%	69%
19.4	Do you need help to sort out the following for when you are released:			
	Finding accommodation?	n=21	71%	67%
	Getting employment?	n=21	57%	57%
	Setting up education or training?	n=19	58%	50%
	Arranging benefits?	n=22	82%	78%
	Sorting out finances?	n=21	76%	63%
	Support for drug or alcohol problems?	n=21	71%	58%
	Physical/mental health support?	n=22	82%	74%
	Previous or ongoing trauma (e.g. domestic violence)?	n=21	67%	55%
	Social care support?	n=23	61%	43%
	Getting back in touch with family or friends?	n=22	73%	38%
	Child custody arrangements?	n=21	38%	24%
19.4	Are you getting help to sort out the following for when you are released, if you need it:			
	Finding accommodation?	n=15	33%	54%
	Getting employment?	n=12	25%	29%
	Setting up education or training?	n=11	18%	22%
	Arranging benefits?	n=18	28%	38%
	Sorting out finances?	n=16	31%	30%
	Support for drug or alcohol problems?	n=15	53%	63%
	Physical/mental health support?	n=18	33%	44%
	Previous or ongoing trauma (e.g. domestic violence)?	n=14	21%	26%
	Social care support?	n=14	50%	32%
	Getting back in touch with family or friends?	n=16	44%	46%
	Child custody arrangements?	n=8	25%	29%
FINAL QUESTIONS ABOUT THIS PRISON				
21.1	Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing) always/most of the time?	n=76	54%	47%
21.2	Do you think your experiences in this prison have made you less likely to offend in the future?	n=71	59%	67%

HYDEBANK WOOD - WOMEN'S PRISON 2024 SURVEY RESPONSES COMPARED WITH THOSE FROM THE PREVIOUS SURVEY

In this table summary statistics from Hydebank Wood - Women's Prison 2024 are compared with the following HMI Prisons survey data:

- Summary statistics from Hydebank Wood - Women's Prison in 2019. Please note that we do not have comparable data for the new questions introduced in May 2024.

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			Hydebank Wood - Women's Prison 2024	Hydebank Wood - Women's Prison 2019
Number of completed questionnaires returned			84	52
n=number of valid responses to question (Hydebank Wood - Women's Prison 2024)				
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION				
1.2	Are you under 21 years of age?	n=82	2%	0%
	Are you 25 years of age or younger?	n=82	17%	6%
	Are you 50 years of age or older?	n=82	11%	24%
	Are you 70 years of age or older?	n=82	1%	0%
1.3	Are you from an ethnic group other than white?	n=82	7%	8%
	Are you from a white Gypsy or Irish Traveller or Roma ethnic group?	n=82	5%	
1.4	Have you been in this prison for less than 6 months?	n=80	63%	53%
1.5	Are you currently serving a sentence?	n=81	58%	64%
	Are you on recall?	n=81	6%	2%
1.6	Is your sentence less than 12 months?	n=81	20%	27%
	Are you here under an indeterminate custodial sentence (ICS)?	n=81	1%	0%
7.1	Are you Muslim?	n=77	1%	0%
7.1	Are you Catholic?	n=77	53%	45%
7.1	Are you Protestant?	n=77	30%	32%
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=77	57%	60%
12.3	Do you have any mental health problems?	n=78	77%	77%
20.1	Do you have children under the age of 18?	n=74	58%	42%
20.2	Are you a foreign national?	n=74	28%	18%
20.3	Have you ever been in Social Services care (e.g. lived with foster parents or in a children's home, or had a social worker, while you were under 18 years old)?	n=74	30%	
20.4	Have you ever been in the armed services (e.g. army, navy, air force)?	n=74	1%	2%
20.5	Is your gender male, non-binary or other?	n=76	0%	4%
20.6	Are you homosexual, bisexual or other sexual orientation?	n=75	17%	22%
20.7	Do you identify as transgender or transsexual?	n=72	3%	2%

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ARRIVAL AND RECEPTION				
2.1	Were you given helpful information about this prison before you came here?	n=81	43%	
2.2	When you were searched in reception, was this done in a respectful way?	n=80	89%	65%
2.3	Overall, were you treated very/quite well in reception?	n=81	89%	79%
2.4	When you first arrived, did you have any problems?	n=81	81%	88%
	Did you have problems with:			
	Getting phone numbers?	n=81	20%	24%
	Contacting family?	n=81	21%	24%
	Arranging care for children or other dependents?	n=81	2%	4%
	Contacting employers?	n=81	1%	6%
	Money worries?	n=81	43%	32%
	Housing worries?	n=81	33%	38%
	Feeling depressed?	n=81	54%	74%
	Feeling suicidal?	n=81	22%	38%
	Other mental health problems?	n=81	36%	44%
	Physical health problems?	n=81	19%	28%
	Drug or alcohol problems (e.g. withdrawal)?	n=81	40%	38%
	Getting medication?	n=81	31%	34%
	Needing protection from other prisoners?	n=81	4%	26%
	Lost or delayed property?	n=81	12%	26%
	Other problems?	n=81	9%	16%
	<i>For those who had any problems when they first arrived:</i>			
2.5	Were you able to talk with somebody in private about these problems?	n=62	52%	
2.6	Did staff help you to deal with these problems?	n=63	48%	56%

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FIRST NIGHT AND INDUCTION			
3.1	Before you were locked up on your first night here, were you offered:		
	Nicotine replacement? n=79	38%	76%
	Toiletries/other basic items? n=79	59%	69%
	A shower? n=79	49%	41%
	A free phone call? n=79	58%	63%
	Something to eat? n=79	73%	80%
	The chance to see someone from health care? n=79	53%	63%
	The chance to talk to a Listener or Samaritans? n=79	23%	22%
	Support from another prisoner (e.g. peer mentor)? n=79	28%	18%
	None of these? n=79	10%	8%
3.2	On your first night in this prison, was your cell very/quite clean? n=82	59%	48%
3.3	Did you feel safe on your first night here? n=82	66%	57%
3.4	In your first few days here, did you get:		
	Access to the prison shop/canteen? n=72	72%	70%
	Free PIN phone credit? n=75	87%	69%
	Numbers put on your PIN phone within 24 hours? n=71	51%	
3.5	Have you had an induction at this prison? n=82	87%	92%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison? n=71	66%	61%

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ON THE LANDING				
4.1	Are you in a cell on your own?	n=82	100%	100%
4.2	Is your cell call bell normally answered within 5 minutes?	n=80	48%	34%
4.3	On the house or landing you are currently living on:			
	Do you have enough soap or sanitiser to keep your hands clean?	n=79	85%	
	Do you normally have enough clean, suitable clothes for the week?	n=78	81%	90%
	Can you shower every day?	n=78	91%	87%
	Do you have clean sheets every week?	n=77	88%	83%
	Do you get cell cleaning materials every week?	n=76	83%	78%
	Can you get your stored property promptly, if you need it?	n=73	36%	
4.4	Is it normally quiet on the landing:			
	During the day?	n=76	78%	
	At night?	n=74	64%	
4.5	Are the communal/shared areas of your landing or house (landings, stairs, showers etc.) normally very/quite clean?	n=80	89%	83%
FOOD AND CANTEEN				
5.1	Is the quality of the food in this prison very/quite good?	n=74	50%	59%
5.2	Do you get enough to eat at mealtimes always/most of the time?	n=75	64%	73%
5.3	Does the shop/canteen sell the things that you need?	n=81	70%	75%

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SAFE AND HEALTHY RELATIONSHIPS				
6.1	Are prisoners encouraged to support each other here?	n=77	77%	
6.2	Is the support provided to you by other prisoners (e.g. peer workers) very/quite good?	n=75	88%	
6.3	Do most staff here treat you with respect?	n=74	78%	83%
6.4	Are there any staff here you could turn to if you had a problem?	n=76	80%	91%
6.5	In the last week, has any member of staff talked to you about how you are getting on?	n=79	61%	60%
6.6	Do you have a named officer (key worker)?	n=77	75%	72%
	<i>For those who have a named officer:</i>			
	Is your named officer (key worker) very/quite helpful?	n=58	91%	
6.7	Do you feel that most staff are interested in your personal welfare?	n=74	49%	
6.8	Do you feel that most staff understand your personal circumstances?	n=77	49%	
6.9	Have you thought about harming yourself while in this prison?	n=76	58%	
	<i>For those who have thought about harming themselves in this prison:</i>			
	Did you feel cared for by staff?	n=44	59%	
6.10	Is it very/quite easy for you to speak to a Listener if you need to?	n=80	43%	41%
6.11	Has your wellbeing got better since you have been at this prison?	n=78	45%	
6.12	Is positive wellbeing promoted in this prison?	n=74	73%	
6.13	Are you pregnant or have you given birth in the last six months?	n=77	8%	
	<i>For those who are pregnant or have given birth in the last six months:</i>			
	Have you been offered any additional support?	n=6	17%	
6.14	Are prisoners here consulted about things like food, canteen, health care or landing issues?	n=79	76%	65%
	If so, do things sometimes change?	n=60	43%	58%
6.15	If you wanted to, can you talk to managers, governors or directors in this prison?	n=76	41%	
6.16	Have you shared a problem with a manager, governor or director?	n=74	59%	
	<i>For those who have shared a problem with a manager, governor or director:</i>			
	Did they try to help you?	n=44	68%	

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FAITH				
7.1	Do you have a religion?	n=77	91%	91%
	For those who have a religion:			
7.2	Are your religious beliefs respected here?	n=67	67%	76%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=69	84%	86%
7.4	Are you able to attend religious services, if you want to?	n=70	90%	84%
RELATIONSHIPS WITH CHILDREN, FAMILY MEMBERS AND SIGNIFICANT OTHERS				
8.1	Have staff here encouraged you to keep in touch with your family/friends?	n=78	60%	71%
8.2	Have you been able to see your family/friends more than once in the last month:			
	In person (prison visit)?	n=74	54%	
	Using video calling?	n=54	48%	
8.3	Do visits usually start and finish on time?	n=77	57%	73%
8.4	Are your visitors usually treated respectfully by staff?	n=79	59%	100%
8.5	Is it very/quite easy for your family and friends to get here?	n=74	43%	40%
8.6	Have you had any problems with sending or receiving:			
	Emails?	n=47	28%	
	Letters?	n=70	43%	
	Parcels?	n=53	25%	
8.7	Are you able to use a phone every day (if you have credit)?	n=78	97%	100%

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TIME OUT OF CELL				
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=75	99%	94%
	<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
	Are these times usually kept to?	n=74	69%	61%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday (including time spent at education, work etc.)?	n=76	4%	2%
	Do you usually spend 10 hours or more out of your cell on a typical weekday (including time spent at education, work etc.)?	n=76	20%	28%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=75	5%	24%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=75	8%	15%
9.4	Do you have time to do domestics more than 5 days in a typical week (shower, clean cell, use the landing phones etc.)?	n=76	64%	66%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=75	61%	51%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=77	42%	34%
9.7	Do you typically go to the gym or play sports twice a week or more?	n=74	76%	
9.8	Are you able to visit the library once a week or more?	n=76	66%	61%
	Are you able to have library materials delivered to you once a week or more?	n=59	27%	
9.9	<i>For those who use the library:</i>			
	Does the library have a wide enough range of materials to meet your needs?	n=61	79%	94%

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APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS				
10.1	Is it easy for you to make a request?	n=79	91%	71%
	For those who have made a request:			
10.2	Are requests usually dealt with fairly?	n=68	75%	52%
	Are requests usually dealt with within 7 days?	n=56	86%	56%
10.3	Is it easy for you to make a complaint?	n=74	78%	83%
	For those who have made a complaint:			
10.4	Are complaints usually dealt with fairly?	n=37	54%	69%
	Are complaints usually dealt with within 7 days?	n=32	88%	69%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=48	33%	20%
10.6	Do you know how to contact the following organisations?			
	The Independent Monitoring Board	n=74	46%	
	Prisoner Ombudsman for Northern Ireland	n=71	44%	
	For those who need it, is it easy to:			
10.7	Communicate with your solicitor or legal representative?	n=68	78%	70%
	Attend legal visits?	n=58	79%	77%
	Communicate with social services?	n=45	53%	
	For those who have had legal letters:			
10.8	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=50	48%	55%
HEALTH CARE				
11.1	Is it very/quite easy to see:			
	Doctor?	n=79	39%	19%
	Nurse?	n=74	76%	63%
	Dentist?	n=74	41%	24%
	Pharmacist?	n=70	44%	
	Mental health worker?	n=73	34%	35%
	Substance misuse worker?	n=70	17%	
11.2	Do you think the quality of the health service is very/quite good from:			
	Doctor?	n=76	45%	42%
	Nurse?	n=73	78%	77%
	Dentist?	n=70	51%	44%
	Pharmacist?	n=65	48%	
	Mental health worker?	n=71	46%	40%
	Substance misuse worker?	n=64	20%	
11.3	Do you think the overall quality of the health services here is very/quite good?	n=77	51%	54%

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OTHER SUPPORT NEEDS				
12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs)?	n=77	57%	60%
	<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	n=37	46%	52%
12.3	Do you have any mental health problems?	n=78	77%	77%
	<i>For those who have mental health problems:</i>			
12.4	Have you been helped with your mental health problems in this prison?	n=59	51%	
ALCOHOL AND DRUGS				
13.1	Did you have an alcohol problem when you came into this prison?	n=79	39%	35%
	<i>For those who had/have an alcohol problem:</i>			
13.2	Have you been helped with your alcohol problem in this prison?	n=29	48%	60%
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=79	53%	35%
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=78	6%	9%
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=76	9%	9%
	<i>For those who had/have a drug problem:</i>			
13.6	Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?	n=41	39%	43%
13.7	Is it very/quite easy to get illicit drugs in this prison?	n=76	12%	47%
13.8	Is it very/quite easy to get alcohol in this prison?	n=77	4%	4%
13.9	Is it very/quite easy to get tobacco in this prison?	n=75	68%	
SAFETY				
14.1	Have you ever felt unsafe here?	n=77	49%	61%
14.2	Do you feel unsafe now?	n=74	23%	22%

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PROMOTING POSITIVE BEHAVIOUR			
15.1	Have you experienced any of the following from other prisoners here:		
	Verbal abuse?	n=77 44%	59%
	Threats or intimidation?	n=77 30%	52%
	Physical assault?	n=77 12%	30%
	Sexual harassment?	n=77 8%	
	Sexual assault?	n=77 4%	9%
	Theft of canteen or property?	n=77 19%	48%
	Other bullying/victimisation?	n=77 30%	46%
	Not experienced any of these from prisoners here	n=77 43%	20%
15.2	If you were being bullied/victimised by other prisoners here, would you report it?	n=74 74%	70%
15.3	Have you experienced any of the following from staff here:		
	Verbal abuse?	n=76 36%	15%
	Threats or intimidation?	n=76 22%	15%
	Physical assault?	n=76 5%	9%
	Sexual harassment?	n=76 4%	
	Sexual assault?	n=76 1%	2%
	Theft of canteen or property?	n=76 4%	9%
	Other bullying/victimisation?	n=76 21%	13%
	Not experienced any of these from staff here	n=76 54%	74%
15.4	If you were being bullied/victimised by staff here, would you report it?	n=73 71%	70%
15.5	If you have reported victimisation by prisoners or staff here, did you feel supported?	n=52 35%	

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SUPPORTING WOMEN TO PROMOTE POSITIVE BEHAVIOUR				
16.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=74	65%	71%
16.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. Incentives) in this prison?	n=73	45%	57%
16.3	Have you been physically restrained by staff in this prison in the last 6 months?	n=76	11%	2%
	<i>For those who have been restrained in the last 6 months:</i>			
16.4	Did anyone come and talk to you about it afterwards?	n=8	50%	50%
16.5	Have you spent one or more nights in the Care and Supervision Unit in this prison in the last 6 months?	n=73	15%	2%
	<i>For those who have spent one or more nights in the Care and Supervision Unit in this prison in the last 6 months:</i>			
16.6	Were you treated well by Care and Supervision staff?	n=8	88%	
	Could you shower every day?	n=10	70%	100%
	Could you go outside for exercise every day?	n=10	50%	100%
	Could you use the phone every day (if you had credit)?	n=10	80%	100%
EDUCATION, SKILLS AND WORK				
17.1	In this prison, is it easy to get into the following activities:			
	Education?	n=76	80%	78%
	Vocational or skills training?	n=66	64%	62%
	Prison job?	n=69	74%	75%
	Voluntary work outside of the prison?	n=69	22%	15%
	Paid work outside of the prison?	n=66	15%	8%
17.2	In this prison, have you done the following activities:			
	Education?	n=71	92%	92%
	Vocational or skills training?	n=60	77%	82%
	Prison job?	n=63	83%	89%
	Voluntary work outside of the prison?	n=57	42%	53%
	Paid work outside of the prison?	n=54	41%	44%
	<i>For those who have done the following activities while in this prison, do you think they will help you on release:</i>			
	Education?	n=65	78%	71%
	Vocational or skills training?	n=46	67%	68%
	Prison job?	n=52	67%	71%
	Voluntary work outside of the prison?	n=24	63%	80%
	Paid work outside of the prison?	n=22	64%	81%
17.3	Do staff encourage you to attend education, training or work?	n=68	87%	74%

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PLANNING AND PROGRESSION				
18.1	Are your opportunities to progress in this prison very/quite good?	n=71	80%	
18.2	Do you have a sentence plan? (This may be called a prisoner development plan or PDP)	n=71	34%	51%
	<i>For those who have a sentence plan:</i>			
18.3	Do you understand what you need to do to achieve your objectives or targets?	n=24	83%	81%
18.4	Are staff helping you to achieve your objectives or targets? (e.g. a PDP Co-ordinator, other PDU staff or your Probation Officer)?	n=23	87%	67%
18.5	In this prison, have you done:			
	Offending behaviour programmes?	n=22	27%	45%
	Other programmes?	n=21	33%	47%
	One-to-one work (e.g. with an Offender Manager or psychologist)?	n=22	41%	
	A programme on a specialist unit?	n=20	10%	6%
	ROTL* - day or overnight release?	n=22	14%	13%
	<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	Offending behaviour programmes?	n=6	83%	80%
	Other programmes?	n=7	86%	78%
	One-to-one work (e.g. with an Offender Manager or psychologist)?	n=9	78%	
	Being on a specialist unit?	n=2	50%	0%
	ROTL - day or overnight release?	n=3	67%	50%

* ROTL - Release on Temporary Licence

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

- Green shading shows results that are significantly more positive than the comparator
 - Blue shading shows results that are significantly more negative than the comparator
 - Orange shading shows significant differences in demographics and background information
 - No shading means that differences are not significant and may have occurred by chance
 - Grey shading indicates that we have no valid data for this question
- * less than 1% probability that the difference is due to chance

			Hydebank Wood - Women's Prison 2024	Hydebank Wood - Women's Prison 2019
Number of completed questionnaires returned			84	52
<i>n=number of valid responses to question (Hydebank Wood - Women's Prison 2024)</i>				
PREPARATION FOR RELEASE				
19.1	Do you expect to be released in the next 3 months?	n=74	34%	42%
	<i>For those who expect to be released in the next 3 months:</i>			
19.2	Is this prison very/quite near to your home area or intended release address?	n=24	42%	35%
19.3	Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?	n=24	54%	68%
19.4	Do you need help to sort out the following for when you are released:			
	Finding accommodation?	n=21	71%	67%
	Getting employment?	n=21	57%	65%
	Setting up education or training?	n=19	58%	53%
	Arranging benefits?	n=22	82%	89%
	Sorting out finances?	n=21	76%	80%
	Support for drug or alcohol problems?	n=21	71%	94%
	Physical/mental health support?	n=22	82%	94%
	Previous or ongoing trauma (e.g. domestic violence)?	n=21	67%	
	Social care support?	n=23	61%	59%
	Getting back in touch with family or friends?	n=22	73%	59%
	Child custody arrangements?	n=21	38%	
19.4	Are you getting help to sort out the following for when you are released, if you need it:			
	Finding accommodation?	n=15	33%	50%
	Getting employment?	n=12	25%	18%
	Setting up education or training?	n=11	18%	25%
	Arranging benefits?	n=18	28%	31%
	Sorting out finances?	n=16	31%	42%
	Support for drug or alcohol problems?	n=15	53%	60%
	Physical/mental health support?	n=18	33%	33%
	Previous or ongoing trauma (e.g. domestic violence)?	n=14	21%	
	Social care support?	n=14	50%	40%
	Getting back in touch with family or friends?	n=16	44%	50%
	Child custody arrangements?	n=8	25%	
FINAL QUESTIONS ABOUT THIS PRISON				
21.1	Are you able to lead a healthy lifestyle here (in relation to your physical, mental, emotional and social wellbeing) always/most of the time?	n=76	54%	
21.2	Do you think your experiences in this prison have made you less likely to offend in the future?	n=71	59%	79%

APPENDIX 5

STAFF SURVEY METHODOLOGY AND RESULTS

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

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

Distribution

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

Survey response

The survey was sent to 297 email addresses at Hydebank Wood. Staff were given seven days to complete the survey. We received a total of 94 completed questionnaires.

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

Full survey results

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

STAFF SURVEY RESPONSES

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

Frontline operational staff	48 (51%)
Operational manager	19 (20%)
Health care staff	3 (3%)
Education, skills and work staff	8 (9%)
Administrative staff	9 (10%)
Other staff	7 (7%)

Staff wellbeing

Q2 How well is the establishment supporting staff wellbeing?

Very well	10 (11%)
Quite well	24 (26%)
Neither well nor poorly	20 (21%)
Quite poorly	24 (26%)
Very poorly	16 (17%)

Q3 How would you describe your morale at work:

Very high	3 (3%)
High	36 (38%)
Neither high nor low	26 (28%)
Low	15 (16%)
Very low	14 (15%)

Prisoner wellbeing

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

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Don't know
Reasonable steps are being taken to keep prisoners safe	54 (57%)	29 (31%)	7 (7%)	2 (2%)	2 (2%)
Prisoners are having enough time out of their cells	62 (66%)	23 (24%)	2 (2%)	4 (4%)	3 (3%)

Leadership in this establishment

Q5 How clearly are the top priorities of this establishment communicated to you?

Very clearly	19 (20%)
Quite clearly	34 (36%)
Not very clearly	19 (20%)
Not at all clearly	16 (17%)
I don't know the top priorities	6 (6%)

Q5a To what extent do you agree or disagree with this establishment's priorities?

Strongly agree	20 (23%)
Somewhat agree	35 (40%)
Somewhat disagree	16 (18%)
Strongly disagree	8 (9%)
Don't know	9 (10%)

Q6 Please indicate to what extent you agree or disagree that your knowledge and skills are sufficient to do your job well (e.g. training and development opportunities):

Strongly agree	52 (56%)
Somewhat agree	34 (37%)
Somewhat disagree	4 (4%)
Strongly disagree	3 (3%)

Q7 How often do you meet with someone (a manager or mentor) to discuss how you are progressing in your role?

More than once a month	20 (21%)
Approximately once every three months	13 (14%)
Approximately twice a year	15 (16%)
Once a year or less	30 (32%)
I have not had the opportunity to meet with someone	16 (17%)

Q8 Please rate the quality of support you receive from your line manager:

Very good	39 (41%)
Good	24 (26%)
Neither good nor poor	16 (17%)
Poor	7 (7%)
Very poor	8 (9%)

Q9 Please use the scale to rate the following statements:

	Always	Often	Occasionally	Never	Don't know
Governors/directors and senior managers in this establishment are approachable (e.g. they take time to listen)	25 (27%)	18 (19%)	42 (45%)	9 (10%)	0 (0%)
Governors/directors and senior managers in this establishment acknowledge and celebrate good work	20 (21%)	14 (15%)	42 (45%)	16 (17%)	2 (2%)
Governors/directors and senior managers set high standards of behaviour for staff	27 (29%)	23 (24%)	29 (31%)	11 (12%)	4 (4%)
Governors/directors and senior managers challenge poor behaviour by staff	21 (22%)	16 (17%)	38 (40%)	13 (14%)	6 (6%)

Raising concerns

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

Yes	54 (57%)
No	40 (43%)

Q11 Have you formally raised concerns about this establishment?

Yes	4 (4%)
No	90 (96%)

Q12 Would you formally raise concerns if you had any?

Yes	49 (54%)
No	14 (16%)
Don't know	27 (30%)

Q14 Who or what organisation did you raise your concern to? (Please select more than one if relevant)

A colleague	0
A manager	3
Criminal Justice Inspection Northern Ireland	0
Independent Monitoring Board	1
Human resources	1
Education and Training Inspectorate	1
Regulation and Quality Improvement Authority	0
HM Inspectorate of Prisons	0
Trade union	1
Professional organisation	1
Police	1
Other	0

Q15 Were your concerns taken seriously?

Yes	0 (0%)
No	2 (50%)
Don't know	2 (50%)

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

Yes	0 (0%)
No	3 (75%)
Don't know	1 (25%)

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

Yes	29 (31%)
No	62 (67%)
Don't know	2 (2%)

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

Yes	39 (41%)
No	48 (51%)
Don't know	7 (7%)



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