

Prison Visit – HMYOI Aylesbury

Summary of Harris Review Visit

This summary reflects the experience and observation of the members of the Harris Review that visited the establishment on 15th of September 2014. They do not reflect changes that have happened since that date.

Background

Type of prison	HM YOI Aylesbury is a Young Offenders Institution for 18-21 year olds. Aylesbury holds the longest sentenced young adult males in the prison system.
Operational Capacity	444
Details of relevant self-inflicted deaths	Three deaths in scope
	26th December 2008
	16th March 2011
	5th November 2011
Governor	Kevin Leggett
Harris Review on Visit	Lord Toby Harris, Dr Meng Aw-Yong, Prof Philip Leach, Laura McCaughan
Date of Visit	15 th September 2014

Meeting with Governor

- Population of Aylesbury is drawn mainly from London and the South East although many come from across England and Wales. Sometimes young adult are held back from going to adult prisons if it is in their best interests.
- Aylesbury’s reputation of being a violent prison can cause barriers to transferring prisoners elsewhere despite the requirement to undertake specific offending behaviour work.
- There is currently a shortfall in staff, with a profile of 100 officers (not including OSGs) and 20 vacancies, 16 of which are being filled by detached duty officers.
- This has repercussions in terms of continuity and staff being completely functional in their role, as they usually only worked at Aylesbury for two weeks. There had been three separate recruitment drives for Aylesbury and it was hoped vacancies will be filled shortly. He did not think there would be a significant problem when benchmarking was implemented because he had made efficiency savings at management grades. 40

officers are on duty each day. They were waiting for recruitment to complete before it would be safe to implement benchmarking.

- Kevin acknowledged the criticisms of Aylesbury in terms of lack of regime and he had been working on that for 18 months. He had developed a predictable regime so prisoners knew what to expect (even if time out of cell was reduced they were more content if this was predictable). He said he would deploy management grades on the wings to deliver this top priority.
- Approximately 10% of prisoners presented significant risks in terms of violence and time required to manage them; another 10% were 'vulnerable'. These groups are not mutually exclusive.
- The prison runs a separate wing for 'poor copers'. This is instead of a vulnerable prisoner unit due to lack of resources. The panel members expressed concern about the possible discriminatory terminology.
- Gangs that tolerate each other are located on the same wing, but it is not clear whether a more strategic risk management process¹ was being followed.
- Assaults had reduced overall in the last five years but serious assaults remained high (borne out by the number of prisoners in segregation for violent offences).
- About 15% of prisoners were on basic IEP level and they had adjusted to the new IEP scheme. Some officers thought the stricter boundaries had been helpful in getting prisoners to improve their behaviour although not much evidence of supporting those who have insufficient life skills to make that happen.
- Target of 30% prisoners in education but there were still spaces. The education provider had undertaken a recruitment exercise for teachers which they hoped would improve the service. The Prison is working towards improving access to education, training and employment.
- Family contact was not viewed by the Governor as something staff could be involved in proactively due to current efficiencies.

C wing

- The Review saw a cell used for buddy system if Listeners were needed overnight on the wing. It hadn't been used for some time although there was a prisoner in a safer cell on an open ACCT. Also observed empty safer cell.
- Small number of vocal prisoners had impromptu discussion with Review team. They thought "people who want to kill themselves will do it" and those on ACCT were seeking attention. Some criticisms were made, at the time of the visit, of detached duty officers being unfamiliar with regime and prisoners.

¹ The Review was subsequently informed by the Prison that the Security Office continually manages the information and intelligence to ensure that this situation is effectively managed. The Prison works closely with Police colleagues to ensure that they also take into account what is happening in the communities as this can have a direct effect on what gangs will then do with each other

Reception

- Reception has a relatively low turnover because prisoners are transferring in from other establishments rather than the courts. Healthcare assessments happening in good time. Reception officer thought the information he received on PERs was of sufficient quality. He thought a member of the Insiders scheme would be more helpful at Reception rather than Listeners because prisoners tended to want to know what to expect at Aylesbury (given its reputation).
- The impact of the ITV series about Aylesbury had been upsetting for prisoners arriving at Aylesbury as it exacerbated concerns about safety and violence. Some staff thought the effects of the programme had lessened given the time elapsed.

Group discussion with Head of Safer Custody; Chair IMB; Governor & Deputy Governor; psychologists dealing with interventions and programmes and Head of Offender Management

- Concerns that ACCT processes are too onerous and distract from the job of actually keeping prisoner safe. Confusion about whether to open ACCT due to concerns about self-harm that prisoner does in order to manage feelings (and has no suicidal or serious self-harm intentions).
- ACCT risk management plans were well put together and thoughtful but not always realistic or implemented in practice.
- Staff made a number of complete ACCT documents available to the Review although there was insufficient time to digest these and to draw any conclusions.

Care UK – primary care provider and Oxford Health – secondary Mental Health in reach team

- Met the Lead Nurse. Aylesbury has three GP sessions per week, totalling 9 hours. They saw 6-12 patients per week but there were problems with low up take from prisoners. All new receptions were referred to GP, particularly if the nurse was concerned that the prisoner's view of their health needs was different to that recorded on the clinical record.
- There was very little provision of primary care mental health treatment, although they did screen for "low level mental health problems like depression that is not clinical or anxiety". The Lead Nurse did not know what IAPT was – the Improving Access to Psychological Therapies initiative.
- Mental health in-reach team provided the secondary care for prisoners' mental health needs. This was provided by Oxford Care. They thought co-working with Care UK was operating well. They also thought they had sufficient resources to do all assessment and interventions on site and had made successful transfers to hospital when required.
- Care UK support prisoners to register with GP on release if possible. Mental Health in reach team make sure all prisoners due for discharge have an initial appointment to see GP on release. Mental health in reach

also invite family, probation and relevant community based services into the prison to take part in any Care Programme Approach reviews.

Listeners

- Staff had made arrangements for a group of Listeners and a group of prisoners who had previously been on an ACCT to attend a group session with the Review team. The Review team were concerned that the young men who had previously been on ACCT were not initially approached to ask them if it was ok for them to take part with the Listeners. It was felt this may have been why these young men were reticent about opening up in the group discussion.
- There are a number of Listeners at Aylesbury. Many present had been trained but not had a call yet. They spoke positively about training and ongoing support from Samaritans.
- A Samaritan volunteer raised concerns about the low take up of Listener scheme (and calls to the main branch) which he thought was due to staff not covering this option during Induction with prisoners. They thought the Safer Custody Coordinator would help them to improve awareness amongst staff and hoped up take would improve. There had been no calls in the previous month. The Chair of the IMB reported very low up take of their services too.
- Prisoners in the group said the DECT phones provided by BT were not operating properly and that the line was cracking. This put off those who did choose to use them to contact Samaritans direct. One prisoners said staff actively stop prisoners accessing Listeners and hold off calling them to the wing.

Segregation

- There were 21 cells in the segregation unit and it was often full. The whiteboard showed the majority were being held in segregation to implement punishments following adjudications.
- Majority of offences that led to such punishment were violent or failed MDT.
- Staff disagreed about what it was like to work in segregation. Some thought it was a nice place to be where you could work effectively with prisoners away from the fray of the main wing. Others thought it was too difficult to deliver the regime on segregation and there was insufficient time to engage with the prisoners.

Potential Observations

- A high staff: prisoner ratio was not visible on the wings.
- Staff expressed concern about delivering the regime with a number of recent changes made on the day of the visit, and high rates of staff sickness.
- Prisoners on the wing commented during informal chats that they thought some people self-harmed for attention.