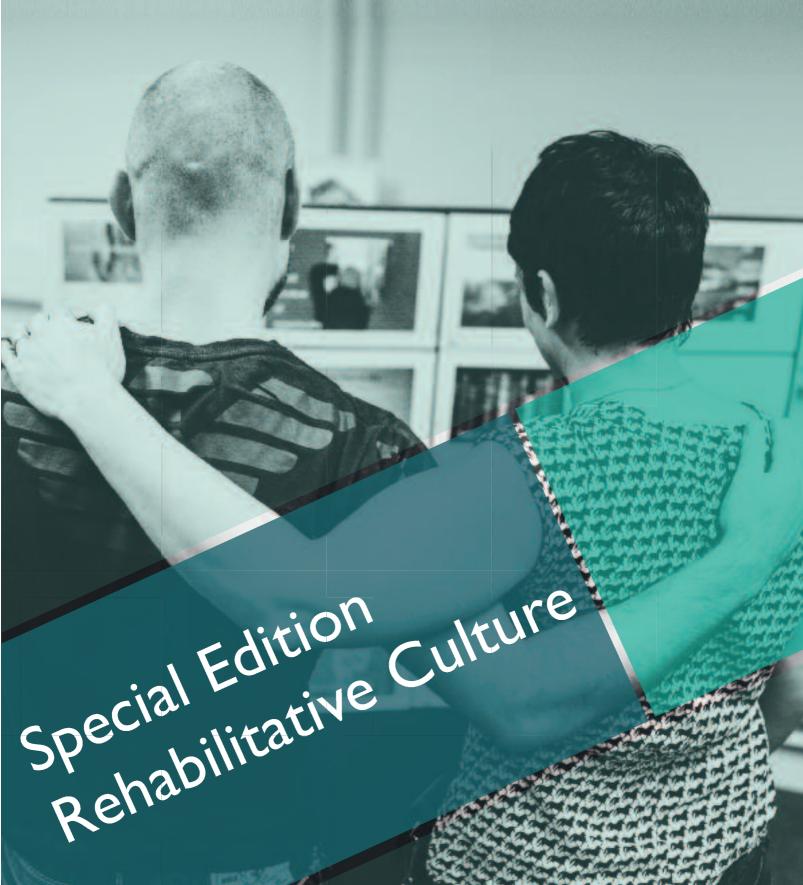
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Rehabilitative Culture in a progressive closed prison

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The following two interviews are with Ryan Smith, a resident and Matt Green¹, a prison officer and key worker, at HMP Warren Hill, a Category C prison in Suffolk. Warren Hill is home to 258 men and contains both a Psychologically Informed Planned Environment (PIPE) and Therapeutic Community (TC). Warren Hill offers a Progressive Regime for male adults who are not eligible to move to open conditions, such as those serving life sentences, or indeterminate sentences for public protection, who are excluded from open conditions, considerably over tariff or have been recalled. In July 2017, the prison decided to discontinue the use of the prison's segregation unit. Last year, Warren Hill was rated the top performing prison in the country according to the Prison Service's own monitoring measures, although the challenges in translating high performing prison outcomes into positive outcomes for people leaving the establishment have been acknowledged.2 The authors of this piece are Co-Directors of Learning Together and Senior Research Associates at the University of Cambridge. Together with their team, they coordinate an 'access to justice' legal research course at HMP Warren Hill. The 'rehab culture' agenda has become more prominent over the same period as prisons across the country have begun to engage more systematically in partnership working with outside institutions and agencies to enrich the culture and opportunities for people resident in prisons, and also to provide the kinds of connections that can help people to achieve their rehabilitative goals post-release. We got to know both Matt and Ryan in the context of this work within Warren Hill, and in these interviews, we ask them about their own thoughts on rehab culture through their experiences in HMP Warren Hill and beyond.

A resident's perspective

AL: What do you think are the key features of rehab culture and why is rehab culture important?

When I think of a rehab culture, I think mostly about relationships between staff and residents — relationships that are quite different from what you find in ordinary category B/C prisons. In rehab cultures residents need to be able to feel comfortable working alongside their key workers and offender supervisors. Residents need to have platforms where they can raise issues, and difficulties, and feel confident and comfortable working through risk factors. At the same time, a rehab culture means that residents should also be able to hear difficult things from their key workers and when key workers highlight issues, they are respected. Any instances of 'them and us' should be left at the prison gate.

RS: Another feature I think is really important and can be powerful in a rehab culture is openness. Allowing organisations and initiatives into the prison from the outside can create an energy — an energy many residents have not experienced in the more closed prisons that builds hope and skills for the future. Interactions with the local community can show residents that they are able to converse and socialise with individuals from different backgrounds. I mention that point because we are based in Suffolk, which is quite an affluent area and the visitors are often more, let's say, stable in life. Many residents on the other hand, and I will use myself as an example, come from underprivileged working class areas and because of this we often don't get to mix paths. When I had the chance of meeting the local community members, I was totally shocked at the non-judgemental and very caring side to these individuals. This made me feel valued and added to my motivation to do well.

AL: What are the kinds of values you associate with a rehab culture?

^{1.} Interviewees were allocated pseudonyms to remain anonymous.

^{2.} Liebling, A., Laws, B., Lieber, E., Auty, K., Schmidt, B., Crewe, B., Gardom, J., Kant, D., and Morey, M. (2019) 'Are hope and possibility achievable in prison?' *The Howard Journal of Crime and Justice*, 58(1) 104-126.

RS: Empowerment! What I mean by empowerment is putting residents in positions of trust and giving them responsibilities. I will use my current role as a Distance Learning Coordinator as an example. I am in charge of advising and encouraging residents to engage in higher education. This role allows me to organise open days, collect data, correspond with colleges and administer paperwork. These are the sorts of things that would normally be done by a member of staff in another establishment. The transferable skills learnt from this will be useful to me once I am released.

RS: Encouraging change is another value I would associate with a rehab culture. Warren Hill's population is normally indeterminate sentenced prisoners who are post-tariff and excluded from open conditions. I think it

is safe to say that some of these individuals will not be able to change overnight and a rehab culture needs to understand that. But a rehab culture should provide the opportunities to allow for change. Change can come in the form of empowering residents, equipping them with real life skills and more importantly helping them to realise that they have potential.

AL: How do you think the physical environment here at Warren Hill contributes to the sense of rehab culture?

RS: The facilities here help to

form a sense of community. All of the units have kitchens fitted with really good equipment. This means that we cook and socialise in a safe and clean environment that feels as much as possible like an ordinary house.

RS: The units are also encouraging a self-clean policy. Residents take turns to sweep and mop landings, and this has brought the residents together to discuss the weekly rotas. So yes, the physical environmental has a massive part to play in a rehab culture.

AL: How have you been involved in the rehab culture at HMP Warren Hill?

RS: Well, where do I start? I have been here for 18 months now so I have had my fair share of projects and events. But, as I was saying earlier about openness, I have had the opportunity to complete the Butler Law Course with the University of Cambridge's Learning Together programme. This project was amazing and continues to be amazing and I'm really enjoying my current role as a mentor.

RS: I have also been carrying out HMIP expectations dip tests.³ Only in a rehab culture could you envisage this. A few residents and I have been given the expectations of HMIP and told to collect evidence about whether or not the expectations are being met. Once we found our evidence, we presented this back to the management team. The highlight of this was having the full attention of the managers, listening as equals.

AL: That links to some of the things you already said about the role of residents in shaping the community. Are there other ways in which other people who live here are involved in shaping decisions?

RS: Yes, residents are always involved in decision-

making processes. The Prison Council is organised and run by a number of residents. They chair the meetings and construct the agenda. The Council can be very influential in decision-making. also Residents run drama productions in conjunction with local theatre company Red Rose The residents influential in the directing and running of the productions. Residents are also involved in the interviewing process for some staffing positions. In fact, three residents were given opportunity to interview

candidates for a band 7 governor's position. They were given 15 minutes to ask questions to the candidates.

AL: What do the best staff do to make a difference?

RS: The best staff act like role-models for residents. This often gets filtered down from the management positions. As a resident, you want to see staff energised and eager to help. You want them to be out and about on the units, having conversations, getting involved in the activities and taking an interest in you as an individual. Key workers are given time to sit down and have a one to one meeting. You want your key worker to say 'let's go to the Barista for a coffee' or 'let's have a chat over a game of pool'. Breaking the cycle of sitting in rooms discussing issues can be powerful.

AL: I am interested to hear that there is a Barista here. What sort of difference does that make to a rehab culture?

RS: The Barista is a great facility. Once you have been here for a stable period of time and complied with

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^{3.} Her Majesty's Inspectorate of Prisons for England and Wales (HMIP) is an independent inspectorate which reports on conditions for and treatment of those in prison and young offender institutions. Expectations are the documents which set out the criteria HMIP use to inspect prisons and other forms of detention. They are based on international human rights standards and are used to examine all aspects of life in detention.

the EBM4 (Enhanced Behavioural Monitoring) process you can apply for a WHAL card (Warren Hill Activity Licence Card). This allows you to use the Barista. I use the facilities on offer — I often meet a few friends down there and have a general catch up. It acts as a motivating factor for residents who are not yet on Stage 2 of their EBM. It also gives us a sense of normality. Eating amongst civilians and ordinary individuals in a relaxed environment is what we have been missing out on so it is a good experience. It also breaks down the barriers of 'us and them' when staff and residents are able to eat together.

AL: Are there any difficult aspects to that sort of trust giving and community building?

RS: I could see how there could be difficulties in giving residents this much power. Other residents could

become envious or start to ask questions of why they hold so much power. But, because it is so normal at Warren Hill for residents to hold these positions, no one bothers with rumours or jealous rants.

AL: When you first came here, were there any things that were difficult for you to adapt to?

RS: The main thing that took some getting used to was being unlocked until 8:30pm. I am used to a 5:30 lockdown as are many other residents so this takes some getting used to. I found myself

wondering what to do and to make it worse we haven't got courtesy locks for our rooms, so I was always thinking about my room. Once you have been here for a while, you realise that no one bothers your room and you get used to being out later. In fact, once you start working you actually cherish this time.

RS: It also took a bit of time to get used to governors out and about socialising. I have been in prison for 11 years now and never had a full conversation with a governor. Here they socialise and take the time to get to know you. I will never forget when Sonia Walsh, who was the Governor, came in to motor mechanics. I was sat in one of the cars reading, and she jumped in and had a half hour conversation with me on the causes of my crime. She finished the conversation with some motivating words. This took some getting used to but should be everyday practice for a rehab culture.

AL: What role do families play in a rehab culture and here at Warren Hill?

RS: Warren Hill has no formal catchment area residents are from all over the country so visits can be tricky. Those who do have visits are able to access family days, which are put on a monthly basis with lots of activities. However, the stand out facility here for visits has to be the Stage 3 room. Once a resident has achieved Stage 3 on the EBM process (usually 9 months) he can invite his visitors into a room equipped with a TV, DVD player and comfy sofas. This allows residents and their loved ones to spend quality time together in a normal relaxed environment, with the aim of increasing family ties. The staff also make a habit of interacting with visitors when they book in, again, breaking down those 'us and them' barriers.

RS: Families are also encouraged to join celebrations at end of course conferences as well as

> music and drama productions. growing as a person.

This allows residents to showcase to their loved ones that they are being productive whilst inside. At last year's Learning Together conference I was able to show my family all of the work I have been involved in and how I'm

AL: What do you think is the best way for people in prison to be prepared for a successful life after prison?

RS: That's an Interesting question. attended motivational talk recently and the person said how important

having a plan is, whether this is work or lifestyle. I agree with this. If you have a clear idea of what you would like to do when you are released, then your time in prison can be spent preparing for this. Achieving this plan will involve gaining qualifications and experience needed to execute it. Preparation and vision are key to a successful future on release. However if you still hold ideas that you will return to old negative behaviours then this plan will never be utilised. A positive mind frame towards leading a pro-social life is essential.

AL: What about the barriers to achieving success? What gets in the way of a prison being more rehabilitative and how can challenges be overcome?

RS: As I am getting more and more involved in different projects, I am noticing the fear around getting the good work that is done publicised. I believe that if the prison is doing something that is unorthodox but is achieving incredible outcomes then this should be noticed as good practice and adopted elsewhere.

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Enhanced Behavioural Monitoring process is used to monitor whether offenders are behaving in ways that show they still have offence related risks that they need support or help with. It also allows offenders to show when they are no longer behaving in ways that would be considered risky (in terms of their risk of future offending or risk of abscond).

Recently Warren Hill put on a production — The Citizen. 15 residents produced and directed the piece of art. This footage should be used to inspire other residents around the prison estate and maybe the community, but the fear factor of this achieving bad press seems to stifle creativity.

AL: How would you know that a more rehabilitative culture is being successfully developed? What is a good measure of a rehab culture?

RS: If I came into a prison and wanted to know what's going on, in terms of rehab culture, I would be looking at staff and residents relationships around the establishment. The way they interact with each other. I would like to see if these relationships are positive, meaningful and most of all reciprocal. I would be looking at how well the grounds are being looked after, how clean the units are, and who's doing the cleaning and whose voices are being heard in terms of all decisions that are being made. I'd be interested in how many people are using evening activities, what types of activities are being put on, and overall, what evidence there is that the prison is building people's hope and sense of empowerment.

AL: Is there anything done at your establishment that is particularly powerful, as a way to foster a more rehab culture?

RS: I have mentioned empowering residents a lot. I believe that the way residents are given trust and responsibilities marks this prison out as being different to the other ones I have experienced.

AL: And finally, what sort of words would you be looking for to describe a good rehab culture?

RS: I would expect residents to be saying things like they feel motivated to change and listened to. That they feel empowered. All of these words should be at the heart of a rehab culture.

An officer's perspective

AL: What do you think are the key features of rehab culture and why is rehab culture important?

MG: The key feature is to make the prison a safe environment, but within that, it's the relationship between the residents and officers that's absolutely massive. I think it's definitely the biggest thing, and because we are here and we invest in those relationships I think that just shows that this prison seems to be working, pretty much. I have been to some other prisons, but just seeing like the TV programme the other night about Durham prison, you saw the

power of relationships and their can change his ways.

importance to safety as well as progress. As soon as people build relationships and realise that staff are not out to get them all the time, then they realise that they

AL: How would you describe relationships between staff and residents when they're at their best?

MG: Well, it's involving residents in things. So getting them on councils, making decisions for the prison, also to the point of involving residents in interview processes for new staff. It's always important to make sure that your relationship is professional and residents know their boundaries, but building that relationship via key work is essential, as is giving residents freedom to help them take responsibility for their own decision making.

MG: You can tell a resident the same thing in two different ways, you can stick it on them or force it on them, or you can

discuss it with them, give them the options, like 'this is what could happen and this is what could happen, and you make the decision'. Discussion puts the situation back in their hands and makes them responsible for thinking through what the better choice is. Developing those skills means that next time something similar crops up they might think back and come to the right conclusion themselves.

MG: Also, there have been situations where I have key worked with someone for 1 or 2 years and they have messed up a little, in regards to mixing with spice. Having that relationship, means they have felt like they have let me down as well as themselves, but also that they've had the space to make those decisions and then own them and the consequences. You wouldn't get the opportunity to work like that with residents in many places, and I understand that we have time to do that

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here because that's what gets prioritised so we have the time and staff to do it. In the end, I think it's these relationships that bring a safer environment. Residents would think twice if they wanted to get violent — the fact that they have built these relationships with us means that I think they would question themselves. And relationships mean that we can talk through the difficult things and relate things to going in the community and coming across someone in the same situation on the streets.

AL: So is that the end game of rehab culture — getting people back in the community?

MG: Yeah definitely, yeah. I think everything is geared up here to getting residents back on the street and back into the community. Also to stay in the community, and not get recalled. Just giving them the

best chance. A lot of key work I do, I always relate it back to the community and 'this is what will happen', and again reiterate what could happen, like a recall or more charges. Even simple as saving face. I know a lot of guys here and elsewhere do things just to save face, but actually when you walk away you might not even see that fella again. Exactly the same in the community. That's just a simple example.

AL: You have talked about how the key worker scheme is really helpful for giving you a focused opportunity for conversation. Are there other

things that are really important, in your experience, to building a strong rehabilitative culture?

MG: Almost taking the aspect of a prison out of it, making it a calmer environment seems really important. I know that our number one has put up a lot of pictures, like on the exercise yard that bring the outside in. Instead of looking at the fencing and a wing, residents can see pictures that help to normalise the environment and make things feel calmer and less institutional or oppressive. Our ethos here at Warren Hill is a Category D wing with fences round it, but breaking that down a little bit, and giving residents that little bit more freedom and trust. They know that if they break our trust they could lose that freedom so our approach gives them a chance to prove themselves.

AL: What are the sort of challenges you think are faced in putting all of these ideals into practice on a day to day basis?

MG: One of the obvious challenges is that the trust we give can get abused. That's just the way it is, and we have to think carefully about how we keep giving out that trust, but also making sure that if people are up to no good, we respond to that. One of the challenges in that is physically having enough staff to keep on top of things and enable residents to have that freedom of walking around and making their own decisions within the boundaries. When boundaries are overstepped it's important that we take that away from the units. Like stage 2 residents meeting up in the library and up to no good there, or coming over here and doing it in the coffee shop, that sort of thing. If we do find something, and they mess up, then we take privileges away from them but also work with them, and again come back to talking about the community, so they understand that if

> they do breach licenses and mess up like they've done in here, they could come back inside. The stakes are high but we need to give them enough freedom to experience that and understand it in here to avoid them messing up and not having those skills in the community.

AL: What about families? To what extent are families involved in building rehab culture here?

MG: Because of our location here in Suffolk, and the fact we're a national resource, there are some challenges for us in supporting residents with their

family contact. I'm doing a piece of work at the moment that looks at whether residents have contact with the family, or not, even if it's just on the phone. We have the provision here of Ormiston families⁵ get involved with that and also Phoenix⁶ have a family service that they help. It seems to me, especially when I am doing a resettlement plan with someone, that if they have contact with their family they have such a better chance, so we definitely promote that. We have family days, where people can travel from long distances. The last family day we had was at Christmas where a family travelled from Liverpool, but instead of coming on a Friday, Saturday, Sunday for 2 hours they come on a Thursday for 10 o'clock, and they stay until 3pm. They have dinner together. It's worthwhile, they get so much more time with their families in prison.

AL: What about opportunities to address health and substance misuse. What is that like here and what role does it play in a rehabilitative culture?

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^{5.} Ormiston Families is a charity, supporting children, young people and families affected by imprisonment of a close family member.

^{6.} Phoenix Futures is a charity that helps people overcome drug and alcohol problems.

Again our provision here is very good and I think we all understand the need for collaboration as part of a rehabilitative culture. In terms of substance misuse we have Phoenix who are very hands on with that. They also help when they are getting time for recess, or getting time outside, a particular rehab. Phoenix gets involved with getting someone registered to a certain rehab, or see if they will be accepted to a rehab. So you just don't go to an approved premises, where it can be difficult for some of them. They can go into the correct type of care, that they need or the correct type of rehab that they need, to give them a better chance. Again, I will use an example I had recently where via Phoenix, a resident applied to a particular rehab that would not only help them with abstaining from drugs, but there was also funding to look at how we can look for employment. So they did their rehab side of things and then they looked at employment, setting them up for life. Phoenix were completely involved in that, setting up, identifying who they were, and identify it could help that resident. Then sorting out the interviews and the process of getting them in there.

AL: Are there other players around the table that are important in sustaining a rehabilitative culture?

MG: Yes, I think giving them the chance to have something like the shop, and the cafe that we have here are really important. They don't have these facilities in a lot of places, like in the normal IPP system. We take IPP a bit further by having a stage 2 and stage 3 on the EBM (Enhanced Behavioural Monitoring) process. Linking back to what I said earlier, these sorts of places give us the chance to give residents trust and space to test themselves and make choices.

MG: Beyond this, I think another key player is offender supervisors who are really involved in EBM boards alongside key workers, but from a more psychological point of view. Key workers look at a resident's day to day care, how they are getting on and then the offender supervisor will look at what are their needs, what are their issues, what are their risk factors.

I think an offender manager can be a massive part but I know that they don't seem to have a lot of contact at the moment. It's certainly got worse, over the last couple of years that I have noticed and that's not all of them. I have got a real mix at the moment of the guys that I key work for. Some have very hands on offender managers and some we haven't really heard a lot of.

AL: So Warren Hill has got quite a lot of positive press recently for being a high performing prison with a progressive culture. What do you think is key to its success?

MG: Quite a few things. Again, the staff aspect of it and having enough experienced staff that have done the key work. When we introduced key work a few years ago, it took us a while to get on board. But when we did, it was just having the staff to be able to do that. That is such a massive part of Warren Hill being successful — having the time for the staff to do that and getting the support from offender supervisors, and the case file reviews and the psychologists. And also, just the environment. Just having simple things like the fish tanks on the wing, and a more homely feel. Key to that is getting the residents to make big decisions, being part of the councils and having big sort of orderlies, like assessment orderlies. I work with a couple of fellas that help write resettlement plans. I am not sure how much that would happen — some guy will say to another fella on his wing 'would you help me write a resettlement plan' — in most places. But here, our orderlies are more than happy to do it and enjoy doing it and take their role seriously. The other big thing is that the residents understand the potential repercussions of their actions. We sort of force that down guite early on often reiterating what they already know, but it needs to be done. They need to understand the stakes and take responsibility for living up to what is expected of them. They are back in closed and its cost them 2 or 3 years, but just reiterate that, if you failed an MDT [Mandatory Drugs Test] here this is what it will cost you on your parole board.