

Dóchas Visiting Committee  
Dóchas Centre  
North Circular Rd  
Dublin 7

17 February 2021

Ms Helen McEntee, TD  
The Minister for Justice  
Department of Justice  
51 St Stephens Green  
Dublin 2  
D02HK52

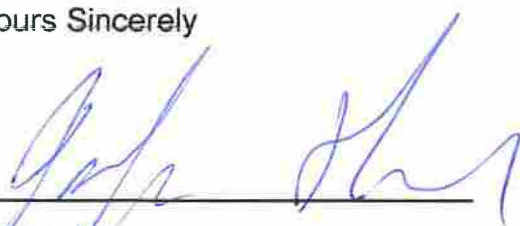
Dear Minister

On behalf of the Dóchas Visiting Committee, I have the pleasure of submitting for your consideration our Annual Report for 2020. In carrying out our duties it has been our privilege to work with the women in the Dóchas Centre.

There are currently four members on the Visiting Committee (one who joined during 2020) and it is my first duty to thank my colleagues for their work during the past year.

We also thank Governor Ray Murtagh and Assistant Governor Eileen Horgan for their leadership of the Dóchas Centre during a challenging year and for their courtesy and co-operation with the Visiting Committee throughout.

Yours Sincerely



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Imelda Henry

**Chairperson**

**Dóchas Visiting Committee**

# Report of the Dóchas Visiting Committee 2020

## Introduction

The Dóchas Centre is a closed, medium security prison for females aged 18 years and over. It is the committal prison for females committed on remand or sentenced from all Courts outside the Munster area. It is located on the campus of Mountjoy Prison in Dublin and has a capacity of 105.

Our reporting year closed in a period of emerging and deep uncertainty as Irish society and the Irish Prison Service (IPS) continue to grapple with the effects of Covid 19. Our ability and capacity to undertake key objectives during the year could not be realistically achieved as a result.

Pursuant to the Prisons (Visiting Committees) Act 1925, arranged and unannounced visits occurred on a regular basis until 12 March when, due to the coronavirus pandemic, all visits were suspended. At the end of each visit our concerns were raised and discussed with management who were always available to us and the issues raised addressed. Visits were restored in July and Covid PPE training was delivered via Zoom.

## Physical areas

### *Reception*

Reception continues to be clean, well organised, and well run. The staff provide comprehensive information for women on intake and deal with their committal as sensitively as possible.

### *Kitchen & Canteen*

A new structured regime was introduced in late 2019 and worked well into early 2020. Within this regime, women were locked back in their rooms after breakfast and lunch. However, since Covid restrictions all communal dining has been suspended and food is served in appropriate boxes and consumed in rooms.

The provision of food in thermal boxes proved problematic in terms of temperature and quality with women complaining that the food was not always hot on arrival and others finding that having everything in one box made it more difficult to exclude elements they may not have selected when dining happened in the dining area. The prison staff responded to these concerns with on-going efforts to improve the process for as long as the restrictions remain in place.

### *Healthcare*

The Dóchas Centre provides a Primary Care service 24/7 comprising a medical team of a GP and nurses together with psychiatric and psychological experts who are hardworking,

dedicated and committed. It is efficient and well run with robust systems in place to monitor and administer drugs on a daily basis and as required. Dental, Optical and Chiropody services are also available. The Dóchas Centre provides referrals to hospitals and other services including mental health. Mental health issues are a growing concern, which is addressed further down in this report.

### *Tuck shop*

A 'bag and tag' system was introduced towards the end of 2019 with an improvement in the range and extent of products including toiletries and make-up which was welcomed.

### *Gym*

The aim is to encourage increased use of the gym which is kept clean and tidy with a varied range of equipment. Again activities were curtailed somewhat by Covid but some exercise and aerobic classes continued under the direction of a gym instructor and a newly appointed gym teacher from the Department of Education.

### *Library*

The library is a small facility and so has not been open during Covid restrictions. One of the women distributed library books on request as part of her Red Cross duties during lockdown.

### *Grounds*

We noticed an improvement in the grounds with additional flower planting. During lockdown and the extended good weather, there was considerable use of the grounds, sunscreen was provided in dispensers along with additional tables and benches in both yards.

### *General improvements*

We welcome the replacement of all white goods (washing machines & dryers) during the year.

## **Education**

A wide and varied range of subjects are available including computing, hairdressing, make-up, art, literacy, cookery, food safety and life skills together with FETAC programmes and Junior and Leaving Certificate courses while three women were embarking on Open University courses. Some engage in a Red Cross programme of instruction.

During Lockdown resource packs including crafts were made available. Classes ceased during Level 5 restrictions and subsequently resumed on a very limited scale.

A book club and film club were well received. The author Sebastian Barry introduced virtually his book Sacred Scripture which was read by some while others studied a synopsis. Indeed some would resonate with the theme.

A consistent and recurring problem in the Education Centre is the cessation of classes due to the redeployment of Prison Officers to other tasks particularly escorts.

Additionally, the prison population in Ireland is unfortunately growing with an increase in foreign national clientele resulting in knock-on issues including a lack of provision of interpretation services.

## **Drugs**

Through the course of 2020, the consumption of illegal drugs was reduced considerably. This is likely in part because of the Covid restrictions and also as a consequence of the more structured regime. Overall there has been a noticeable decrease in the presence of drugs and the problems associated, which is a positive development.

## **Mental health issues**

As a Visiting Committee we have a concern around the significant amount of women with mental health needs coming into custody, with limited appropriate facilities in healthcare to meet their needs. At the same time we want to acknowledge the tremendous work being done daily by the healthcare team, the psychiatric inreach service and the prison officers themselves in dealing with this crisis.

There is a systemic failing which results in women being committed to custody (and receiving a criminal record) who need other care. While dealing with that level of need, it takes resources from other aspects of the service and also has a mental health and wellbeing impact on the staff who are going above and beyond their job descriptions to provide quality care.

There has been a big jump in numbers over recent years. In 2018 six females required in-patient treatment and were referred to the CMH. Alarmingly this number increased to twenty-nine in 2019. In general, 25-30 prisoners are on-going psychiatric patients at any one time.

Based on its size the Dóchas Centre has a high number of cases presenting with psychosis, schizophrenia and addiction; prison is not the best place therapeutically for these women and is a wholly inappropriate environment for those in psychiatric distress and prison officers are neither trained nor should they be required to provide the levels of care needed. During 2020 there were nine assaults on a prison officer by one mental health prisoner alone, requiring medical attention and absence from work.

The prison service is being used as a dumping ground for other agencies' problems. The Visiting Committee has experience of meeting with women in the Centre who are in urgent need of assessment and treatment for mental health issues and addiction. These women are directed to the Dóchas Centre from the courts when non-custodial, medical or therapeutic intervention could meet their needs more appropriately. In some instances inappropriate custodial sentences are handed down for non-violent (non statutory) offences.

We note that this concern is not new - the Mental Health 2006 policy document 'A Vision for Change' stated that a fundamental principle is that mentally ill prisoners should not be held in prison but transferred to the CMH.

More recently, the 'Sharing the Vision 2020' report aspired to a community based "recovery" model. In this model there are clearly defined "stepped care" pathways for social and family supports, to primary care, to specialist mental health services in the community to specialised residential services.

The primary issue is that neither the beds nor the resources to treat people in the community adequately, and with the level of support that they require, are available. We appreciate that budget constraints are significant. Indeed only 6% of the overall health budget is allocated to mental health; the lowest in Western Europe.

This issue was also raised in the Prison Mental Health Services Dail Eireann Debate (10/10/20) based on the Committee on the Prevention of Torture (CPT) report. The debate highlighted the complex needs of people with mental health issues who come into contact with the criminal justice system and the interaction of criminal justice and public health (mental health) issues.

We welcome the establishment of a task force - cross department and cross agency - to consider the mental health and addiction challenges to those imprisoned and the provision of primary care support upon release led by the Ministers for Justice and Health. The priority must be that every person with mental health issues in the system would receive mental health support. We fully support the setting up of such a task force, which is long overdue.

**While neither new nor simple, this issue is now urgent. We recommend that the budget for mental health and the provision of broad based services that divert from prison sentences be urgently reviewed and action taken.**

## **Numbers / Overcrowding**

Overcrowding continued to be a problem in the Centre with numbers reaching in excess of 140 on occasion (Capacity 105). This is a most serious issue for the Governor, management, staff and the women themselves with potential adverse consequences.

At the outset of the Covid pandemic a decision was taken to release/transfer a number of women to help alleviate the impact that Covid would have on overcrowding. It is important that the reduction in numbers, achieved swiftly when required by the onset of the Pandemic, is maintained when Covid related restrictions ease.

## **Communication**

In relation to incoming calls from families booking visits, previously they were received in Mountjoy and transferred to the Dóchas Centre. This was problematic at times. A new dedicated direct line to the Dóchas Centre has been introduced and has brought a welcome improvement with families finding it easier to get through and the visit booking system working more smoothly.

During lockdown, when physical visits were prohibited, the women communicated with their families via video link. This operated very satisfactorily and especially during the Christmas season when women could see their families in their own environment.

In-cell telephones were also installed in Cedar, Elm and Willow houses. While this was a response to the Covid restrictions, we welcome it as a long-term improvement.

## **Step Down facilities**

An open prison facility for women has been on the agenda for an extended period of time – recommended as far back as the 1985 Whittaker report.

While we are still a long way from an open facility, the development of the Outlook programme is an improvement in Step Down options. The Dóchas Centre has nine places available and to date outcomes appear good in this programme; in 15 months no one has returned from that facility back into the Dóchas Centre. It is an excellent facility providing good support. Once they complete their time there, the women return home and have a commitment to “community return” (community service) for three days a week. We wonder whether it is possible that this could be served during their time in the Outlook facility so that they are more free to resume their lives and seek employment upon release.

While we welcome this as a step in the right direction, the provision of comprehensive step down facilities requires further development and resources.



## Acknowledgements

We would like to acknowledge and record our thanks to Governor Murtagh, assistant Governor Horgan, chief Officers, the ACO's and all the staff for their courtesy and cooperation extended to the Visiting committee at all times.

Further we would like to take this opportunity to commend the Governor, Management and staff in their swift, efficient and prompt action in handling the Covid pandemic crisis and in the measures taken to keep the Dochas Centre Covid free.

## The Visiting Committee

Imelda Henry (Chair)



Anne Confrey



Christine Ryan



Carol Conway (appointed February 2020)

