



Annual Report of the Independent Monitoring Board at HMP Exeter

**For reporting year
1 January 2021 – 31 December 2021**

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Introductory sections 1 – 3

1. Statutory role of the IMB

The Prison Act 1952 requires every prison to be monitored by an independent board appointed by the Secretary of State from members of the community in which the prison is situated.

Under the National Monitoring Framework agreed with ministers, the Board is required to:

- satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release
- inform promptly the Secretary of State, or any official to whom authority has been delegated as it judges appropriate, any concern it has, and
- Report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively, its members have right of access to every prisoner and every part of the prison and also to the prison's records.

The Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that states designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detainees and to make recommendations for the prevention of ill-treatment. The IMB is part of the United Kingdom's National Preventive Mechanism.

2. Description of the establishment

2.1 HMP Exeter is a category B local and resettlement prison which holds prisoners remanded or sentenced by the courts in south west England and those resettling in the region. It is a traditional Victorian inner-city establishment built in 1853. Consequently, it remains under constant pressure due to limited capacity for expansion and deterioration of its structure and fabric. Its operational capacity at the end of the reporting year was 431. This had been gradually reduced during the year for scheduled maintenance work to be undertaken. Prisoner numbers during 2021 have averaged 406. Most prisoners share a cell with almost 80% living in overcrowded conditions. The majority of cells have in-cell sanitation with the exception of D wing, which accommodates prisoners on the enhanced level of the incentives scheme, where there is 24-hour access to communal facilities. The cell-sharing risk assessment (CSRA) rating at Exeter provides for between 70 and 86 single-occupancy cells to accommodate prisoners deemed unsuitable to share with others. Prisoners at Exeter have access to in-cell telephones.

A feature of HMP Exeter is F wing, a social care unit. The unit can hold up to 11 prisoners with acute health and social care needs. It also contains a palliative care suite for terminally ill prisoners and a constant watch cell. F wing often receives prisoners from establishments where the delivery of end of life care cannot be provided. The wing is a resource for the regional cluster.

In terms of the demographics of the prison these have remained broadly similar to previous years. Averages across the reporting year show that 6% of the prisoner population were defined as young adults (18 to 20 years), 12% were between 21 and 24 years, 18% between 25 and 29 years, 32% between 30 and 39 years, 20% between 40 and 49 years, 9% between 50 and 59 years, and 3% over 61 years. The ethnicity structure of the prison can vary marginally from month-to-month, but at the end of 2021 White ethnicity comprised 79% of the population. Data for disability shows that 23% of prisoners presented with a disability and 23% of prisoners were identified with mental health issues.

As a local and resettlement prison Exeter normally has a high turnover of prisoners although Covid-19 has again increased the length of stay for certain groups of prisoners. The average length of stay for sentenced (non-resettlement cohort) is between four to six weeks. Resettlement prisoners can be at Exeter anywhere between a week and 16 months, if from the Exeter local delivery probation unit. HMP Exeter fulfils a number of functions, not all of which are compatible. Prisoners arrive with high levels of need and increasingly with mental health issues. Although the regime, opportunities and facilities offered are best suited to those on shorter sentences, a recently increased resettlement role has meant that higher numbers of longer-sentenced prisoners are transferred from elsewhere. For these prisoners, who have very different needs from the other groups, the regime and training and work opportunities offered at Exeter are not always well suited to their resettlement needs.

2.2 Key providers:

- Healthcare is provided by Practice Plus Group, formerly known as Care UK, with some services contracted out.
- Mental health services are subcontracted by Practice Plus Group to Devon Partnership Trust.
- Social care plans are delivered by Practice Plus Group.
- The integrated substance misuse services (clinical elements) are provided by Practice Plus Group with the psychosocial interventions subcontracted to EDP Drug & Alcohol Services to deliver.
- The community rehabilitation company (CRC) was the Dorset, Devon and Cornwall CRC.
- Learning and skills activities are provided by Weston College.
- Serco have now taken over the escort contract.
- Maintenance is provided by Government Facility Services Limited (GFSL).
- Choices Consultancy Service delivers family services.

In addition several voluntary organisations provide a range of smaller services.

HMP Exeter is part of a south west prison cluster (which also includes HMP Channings Wood, HMP Dartmoor and HMP Guys Marsh) and a number of services and resources are shared.

3. Executive summary

3.1 Introduction

3.1.1 This report presents the findings of the Independent Monitoring Board (IMB) at HMP Exeter for the year 2021. It is the second annual report produced during the period of Covid-19. All members of the Board returned to direct monitoring in May, but the Covid-19 pandemic has had a significant impact on the Board's ability to undertake its normal monitoring. The Board has, therefore, tried to cover as much ground as it can in these difficult circumstances, but inevitably there is less detail and supporting evidence than usual. Ministers are aware of these constraints.

3.1.2 The Board's report is based on:

- direct monitoring of accommodation, facilities and services
- remote review of documentation, records and data
- external reports: Prisons and Probation Ombudsman (PPO) and Her Majesty's Inspectorate of Prisons (HMIP)
- attendance at some prison meetings
- conversations with prisoners, staff and other agencies
- monitoring of prisoner complaints
- dealing with prisoners' applications to the IMB

3.2 Background to the Report

3.2.1 IMB monitoring arrangements

Until May 2021 the Board was adopting a hybrid approach to monitoring (see 3.2.2). Arrangements to enable prisoners to contact the Board, via the applications process, were continued from the previous year and Exeter also participated in the 0800 applications phonenumber service. However, this was not well used by the prisoners. During the reporting period five new Board members were appointed and inducted.

3.2.2 Impact of the pandemic

For the entire reporting period the prison has been operating against a background of the pandemic and various levels of an exceptional delivery model (EDM) have been in place. The prison has not yet been able to return to the pre-pandemic 'normal regime'. Although the pandemic has generally been well managed, with plans in place to control Covid-19 and risks managed at regular outbreak control meetings, there have been positive cases among the prisoners and staff. In February 2021 the prison experienced a significant outbreak of Covid-19 when more than 100 prisoners and 70 staff had to isolate. At the time of the HMIP scrutiny visit in March the prison remained an outbreak site. By the end of the reporting year the prison was again declared an outbreak site. However, it is to the credit of the management, staff and prisoners that there were only two limited outbreaks of Covid-19 infection during this time and there was no serious illness or deaths from Covid-19 in the prison population. One impact of this situation is that a number of prison processes and programmes have suffered as a result of the disruption, for example key working (see 5.3.1), challenge, support and intervention plans (CSIPs) (see 4.3.1) and prisoner induction (see 4.1). Additionally, the restricted daily regime came at a cost

to prisoners in terms of reduced opportunities to engage in education, work and training (see 7.1.1 and 7.1.2), social interaction and other routine activities including exercise (see 6.5) and domestics. Our focussed monitoring on the impact of Covid-19 on prisoners at Exeter (see 8.3) also suggests that the impact of this is likely to have been particularly severe because most cells are shared by two people, which not only makes them cramped, but limits opportunity for privacy and personal space.

3.2.3 External inspections

The last full HMIP inspection of Exeter took place in May 2018 resulting in an urgent notification to the Secretary of State for Justice. Following this an independent review of progress was undertaken in 2019 and in March 2021 HMIP undertook a scrutiny visit. The reporting year, therefore, covers a period where the prison was still taking forward a performance improvement plan (PIP) and an action plan arising from the 2018 HMIP inspection report and 2019 independent review of progress. The scrutiny visit identified that progress had been hampered by high turnover of staff at all levels and that 'significant progress was still needed in order to create a safer, more decent and secure establishment' and 'outcomes for prisoners at Exeter still required improvement'.

3.2.4 Staffing

At the beginning of the reporting period the staff-in-post position, across all officer grades, showed the prison to be fully staffed. However, this masks the staffing challenges faced by the prison again this year. Around one in three officers had been appointed in the previous year. Because of the pandemic these less experienced officers, and the new cohort of officers (POELTs) appointed, have not had the same training opportunities or experienced a normal regime and interactions with prisoners. As the prison has gradually moved through the stages in relaxing restrictions, some less experienced staff have found the transition from lockdown difficult (see 5.3). At times of staffing shortages, Exeter has been able to take advantage of an incentivised Payment Plus (PP) scheme providing opportunities for officers to work extra hours. While this has provided the prison with a short-term solution, it masks the more serious issue of the inability of the prison to retain officers. Job opportunities in other national services (such as the police or railways) appear more attractive and better paid. Additionally, the Board is aware that there have been instances of staff fatigue as a result of shortages and PP, which could have negative consequences for the safe and secure running of the prison. The Board believes that as a profession, prison officers do not always receive the same kind of parity as some other public servants (for example, priority with the Covid-19 vaccine roll-out) and that this often leads to perceptions of being undervalued.

A lack of stability within the senior management team (SMT), raised previously by the IMB and also HMIP in 2021, has unfortunately persisted. This is reflected in a series (three) of external and internal temporary appointments or secondments at deputy governor level. A number of temporary appointments to back-fill key posts within the SMT following resignations or promotions to other establishments has also occurred (see 4.3). The impact of this has slowed progress and disrupted the ability of the prison to take forward improvements in a timely, consistent and sustained manner.

During the reporting period there have also been limits on staff training and professional development. The control and restraint (C&R) qualifications of many officers are overdue and this is of particular concern in an area such as the care and separation unit (CSU).

3.2.5 Violence and self-harm

There has been a steady increase in the number of violent incidents recorded each month (see 4.3). Variations between months tended to coincide with periods when the regime had either started to open up following some relaxation of Covid-19 restrictions or when prisoner interactions were more limited because of a more tightly restricted regime. In March HMIP reported that prisoners' perceptions of safety were poor.

Incidents of self-harm (see 4.2) have varied across the year. They declined gently in the first eight months of the year but increased towards the end of the year to a very high monthly rate of about 70. Data shows that a small number of prolific self-harmers account for a disproportionate number of reported incidents.

3.2.6 Healthcare

It has been another difficult year for healthcare (see 6.1) because staffing problems have coincided with the ongoing need to manage the pandemic, which has exposed some vulnerabilities in the system. Healthcare appointments were restricted to urgent care and medications only, as in the community, although GP appointments were able to continue via telephone calls.

3.2.7 Prison maintenance

Scheduled maintenance to residential accommodation has meant that for much of the reporting year the prison has operated with a reduced capacity and contractors on site. The refurbishment of D wing suffered a number of delays and eventual handover was significantly overdue and fraught with snagging issues including faults to the fire detection system (see 5.1.1). Work to the temporary visits hall was delayed, which pushed back demolition of the old hall and work towards the construction of a new visits complex. Towards the end of the reporting period the refurbishment of B wing, which accommodated vulnerable prisoners (VP), and their temporary relocation to A4 created a number of practical challenges for prisoners. Some of these impacted on their perceptions of safety and opportunities (see 5.1.1).

3.2.8 Information technology

The IT infrastructure does not always support effective administrative and operational functioning. The service is slow, often unreliable and a shortage of suitable equipment has limited the scope of communication with the Board during the pandemic. For example, the Board could not attend segregation review boards (SRBs) remotely, via telephone conferencing, because there was insufficient hardware available to facilitate this. Similarly, on only one occasion could a governor report via Zoom at a Board meeting because the prison had only one suitable laptop/iPad. The Board regularly encounters difficulties with the office IT system.

There have also been a number of occasions where the CCTV for the prison has suddenly gone down. The Board was surprised to hear that the maintenance contract for this did not provide for, or cover, urgent repairs. This is a worrying

situation, which creates unnecessary risks. The potential impact on the safety and security of the prison is obvious.

3.2 Main judgements

How safe is the prison?

HMP Exeter continues to experience high levels of violence and self-harm. Despite a vision and some strategies to ensure and improve the safety of prisoners there are still some vulnerabilities, at both a managerial and operational level. These can have an adverse impact on outcomes for prisoners. The Board still has concerns about the assessment, care in custody and teamwork (ACCT) and CSIP processes that are designed to keep prisoners safe (see 4.2.2 and 4.3.1). Covid has played a part in adversely affecting efforts to improve safety, along with an increasing number of prisoners with mental health issues and a significant number of prisoners with a history of self-harm. A commitment to safety requires a coordinated multi-dimensional approach and is as much about culture and effective relationships as processes. While there is clear evidence that the prison is committed to reducing violence and self-harm and interrupting the supply of illicit items, which are associated with debt, bullying and violence, there is still scope for improvements.

How fairly and humanely are prisoners treated?

The overcrowded conditions and severely restricted regime resulting from the Covid pandemic has meant that living conditions have not always been humane (see 5.1.1 and 6.5.2). Additionally, some issues with clothing and kit have undermined the decency agenda. However, standards of communal cleanliness have improved year on year, which is an achievement in such a challenging environment. Attempts have also been made to brighten up some areas through painting parties.

Staff-prisoner relationships, with the exception of the CSU (see 5.2.2) have unfortunately deteriorated (see 5.3.1, 5.3.2, and 8.3), which has had an impact on how respectfully some prisoners feel they are treated. Written communications with prisoners (see 5.7 and 5.4.2) generally reflect respect and fairness and the regular monitoring of data reveals no evidence that prisoners with protected characteristics are treated unfairly.

How well are prisoners' health and wellbeing needs met?

Although there were some unwelcome outcomes of the prison's response to Covid (see 6.3, 6.5.1, 6.5.2 and 8.3), the pandemic was generally well-managed and the prison is to be commended for its success in preventing and managing internally generated infection. Arrangements for medically vulnerable prisoners followed, as far as possible, those in the community. Prisoners eligible for Covid vaccination received this in line with government priorities operating in the community. Challenges posed by the pandemic did have an impact on outcomes for prisoners (see 6.2.1) and were often comparable to those experienced in the wider community. While prison is not an appropriate environment for those with mental health conditions, the restricted regime and limited purposeful activity did not help prisoners' wellbeing or mental health. Emergency care was generally managed effectively and response/waiting times appeared reasonable.

How well are prisoners progressed towards successful resettlement?

Opportunities for prisoners to make progress towards their resettlement have been limited. This has been the case for those on short-term sentences and those in the resettlement phase of their sentence. While Covid has certainly played a part (see 7.4), maintenance issues and staffing shortages (see 7.1 and 7.2) have also had an impact. Although the prison has a vision and plans for improvements in this area, it has still not progressed these sufficiently. Opportunities for prisoners to engage in the kind of experiences and work to support resettlement in the community are inadequate at present (see 2.1).

3.3 Main areas for development

TO THE MINISTER

Will the Secretary of State:

- Exert influence to help the retention of prison officers by recognising the work they do and ensuring parity with other public servant roles (see 3.2.4).
- Increase the human and financial resources required to more effectively support the rehabilitative and resettlement role of local prisons (see 7.2).
- Intensify efforts to support individuals who are at risk of homelessness on their release from prison and increase the level of expectations on local authorities and the Probation Service to improve accommodation outcomes (see 7.4).

TO THE PRISON SERVICE

Will the Prison Service:

- As a matter of some urgency support Governors to reduce the backlog in staff training and particularly C&R basic, refresher and advanced training.
- Invest in improving systems, processes and expectations associated with the management of prisoners' property (see 5.8). Current arrangements often reflect insufficient care and attention to the management of prisoners' property both internally and on transfer between prisons.
- Improve the arrangements for procurement of maintenance work to enable Governors to be more confident in their scheduling of changes having an impact on prisoners and their access to services or amenities (see 3.2.7 and 5.1.1).
- Invest in an IT infrastructure, hardware and technical support which enables prisons to function more effectively and communicate with stakeholders and others in a more diverse and contemporary way (see 3.2.8).
- Improve the arrangements for external seconded and temporary SMT cover so that there is time for the seconded person to share their expertise, make an impact, and be involved in embedding improvements etc., before they are moved on, which often creates additional turbulence within existing staff roles.

TO THE GOVERNOR

Will the Governor:

- Review the current arrangements for prisoners' induction (particularly support for young adults) and implement quality assurance systems to make sure that prisoners new to custody are given all the information they need in their early days at Exeter. This should include information on the IMB (see 4.1).
- Undertake to improve the effectiveness, management and oversight of CSIPs.
- Review systems and processes for the receipt, recording and distribution of prisoners' property to ensure that effective communication with prisoners takes place and that property is treated with respect and distributed in a timely manner (see 5.8).
- Review how prisoner complaints are recorded for analytical purposes to ensure consistency of data categorisation (see 5.7).
- Prioritise the plans for developments around prisoner progression and the resettlement role of the prison so that progress is made and results in improved outcomes for prisoners in terms of better education, training and workshop opportunities and, thereby, prospects on release (see 7.1 and 7.2).
- Undertake to improve communication with and feedback opportunities for prisoners (paragraphs 5.4 and 8.3).

3.4 Progress since the last report

The Board is pleased to note improvements in the following areas since the last report:

Safety

- Use of force – the appointment of a full-time coordinator and management oversight and quality assurance (see 4.4).
- CSU – improvements to the supervision arrangements of the CSU by providing a greater staff presence in the unit office out of hours (see 5.2.2).
- Preventing illicit items – efforts made and initiatives launched to reduce and prevent illicit items entering the prison (see 4.5).
- ACCTs – efforts made to ensure reviews are multidisciplinary and attended by appropriate representatives from other services within the prison. Improved procedures are in place for ACCT assurance checks (see 4.2.2).

Fair and humane treatment

- Cleanliness of communal areas – raised expectations and outcomes for prisoners (see 5.1.1).
- Improvements to accommodation and living conditions for prisoners; for example, wing refurbishment projects (D and B wings) and repainting in communal areas.

Health and wellbeing

- Attendance at segregation review boards – healthcare/mental health staff now routinely attend and contribute to reviews (see 5.2.5).

- The appointment of a custodial discharge coordinator within healthcare ensures that prisoners transferring and being released from Exeter have their health needs properly coordinated and passed on to community services (see 6.1).

Progression and Resettlement

- Purple Visits – increased take up of Purple (video) Visits (paragraph 7.4).

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

Monitoring of reception and induction processes in the prison has been affected by the need to isolate newly arrived prisoners. The arrangements for new arrivals have never been ideal, even allowing for the different needs of those with drug dependency, the risk of self-harm and additional challenges facing some new arrivals who have never been in prison before.

Our visits to the reception facility were often marked by staff concerns about late arrivals from courts and other prisons caused by circumstances beyond the prison's control. The introduction of the body scanner in reception has created an additional formal stage to the reception process and led to some new arrivals being taken to the CSU under the secreted items policy (SIP) (see 5.2.6). The Board understands that knowledge of the scanner outside the prison has had a deterrent effect and has helped to reduce the number of prohibited items brought into the prison. Observations of the reception process showed that newly arrived prisoners were treated with respect.

The Board has always had some reservations about the first night location of C4, which is shared with substance misuse prisoners. Anecdotal evidence from speaking to recently arrived prisoners on C4 landing shows a variety of experience in terms of how soon they had contact with healthcare, education etc. On a more basic level, concerns were often expressed about how quickly newly arrived prisoners gained access to telephones especially if they arrived at the weekend. There is also evidence (see HMIP report, 2021) that the arrangements for newly arrived prisoners were not always well managed. Prisoners who should have been isolated from the main population were observed socialising in other prisoners' cells, which 'undermined the purpose of the reverse cohort unit'.

IMB conversations with newly arrived prisoners have raised concerns about how systematic and thorough the induction process is. Some prisoners reported that not knowing how to access some essential services, such as through the kiosks, made them feel more vulnerable. Evidence to suggest that the induction process could be improved is also provided by HMIP (2021, p.6) who found that 'Induction for new prisoners was ineffective and prisoners told us that they did not get the information they required from induction, for example, how to perform day-to-day tasks such as using the electronic kiosks to make applications or complaints. Leaders and staff could not account for how much, if any, of the induction process individual new arrivals had completed'.

4.2 Suicide and self-harm, deaths in custody

4.2.1. Incidents of self-harm have varied across the year and declined gently in the first eight months of the year with 38 in August being only half the monthly rate at the start of the year. However, the last four months have shown a substantial increase and a return to the very high monthly rate of about 70. Our monitoring of the daily handover bulletins demonstrates how often incidents of self-harm feature every day.

A small number of prisoners account for the majority of incidents and in December 37 (52%) of the 71 incidents were caused by just seven prisoners. Cutting is the main form of self-harm, which accounted for nearly three-quarters of all incidents in December. Ligatures are also mentioned frequently in the daily occurrence logs but feature less prominently in the incident analysis because they often do not lead to any actual harm. The Board understands that earlier in the year there was a conscious attempt to engage with prolific self-harmers through a forum, but we have not yet seen the outcome of this initiative.

There is evidence that the prison regularly monitors individual prisoner behaviour in relation to self-harm and safety. A safety intervention meeting (SIM) is held weekly and led by a governor and attended by a multidisciplinary group. This meeting focuses exclusively on those deemed to be most vulnerable, such as those designated as 'the critical few' (those individuals currently receiving more than one intervention/support), deliberate self-harmers, and those on an ACCT.

Monthly safer custody reports collate data on ACCTs and incidents of self-harm. These record the method of self-harm and the purported reason, as well as location and an equalities breakdown. The Board is pleased to note that these reports now include a section on self-harm by prisoners who are in custody for the first time. The analysis also shows that the incidence of self-harm is much greater among prisoners who are unemployed as opposed to those who are attending education or have cleaning jobs, for instance. The restrictions relating to the pandemic, which has limited opportunities for all these activities, has had a negative impact on prisoners in this respect.

4.2.2 ACCTs

The monthly number of ACCT documents has averaged about 78 over the year, with fluctuations between just over 80 in January and June, low points in May and September and the lowest monthly record of 60 in December. Overall this is very high and the prison, in its analysis of this, has attributed it to risk aversion following HMIP and PPO concerns about improving support for the most vulnerable prisoners including those at risk of self-harm. Understandably, a large proportion of ACCTs are opened for prisoners newly arrived in the prison, often as a result of SASH (suicide and self-harm) forms being received with them.

In the course of the year, the new ACCT v6 process was introduced. Training on this was rolled out to all officers. Members of the Board were pleased to have the opportunity of attending a training session. Initial reactions from staff indicated advantages in recording regular observations, but some disadvantages in terms of the quantity of information needed and time needed at the end of shifts. The Board was certainly aware of some initial frustration following the roll out, mainly because of perceptions of additional work involved. Some officers managing or monitoring the process suggested that the new procedures were not widely welcomed, with one very harassed officer commenting that 'they were not fit for purpose'. It is too soon to assess whether improved outcomes for prisoners will result, but we have noted better quality observations in the ACCT documentation.

During 2021 the Board undertook some focussed monitoring of the operation and management of ACCTs. This was prompted by two things:

- The high number of ACCTs open or in the post-closure stage at any one time.
- Criticisms made by the PPO in reports over the last few years.

We were also conscious of the planned introduction of new procedures, nationally, partway through the year (see above).

The Board routinely included in rota visits discussions with some prisoners who were on an ACCT. This elicited mixed responses on the value to them of the process. Some saw it as an exercise of more benefit to the prison management. A number of those to whom we spoke did not seem to fully understand the process and what it was intended to achieve.

Most ACCT reviews seem to take place in a timely way and there have been strenuous efforts to ensure that they are multidisciplinary and attended by appropriate representatives from other services within the prison. An ACCT review status list is published and monitored daily and there are procedures in place for ACCT assurance checks, where a team of five identified senior staff are assigned each week to undertake at least three assurance checks a month.

4.2.3 Deaths in custody and PPO reports

During 2021 there were four deaths in custody, including one which took place on the morning the prisoner was released, and after he had left the prison, but which is recorded against Exeter's statistics. At the time of writing all these deaths remain under investigation by the PPO.

During the reporting year the PPO published four final reports, two relating to prisoners who had died during 2019 and two relating to deaths in 2020. One involved a death in the palliative care suite of a prisoner who had been in Channings Wood, and who came to Exeter after a stay in the Royal Devon and Exeter Hospital. Of the other three, only one has so far been the subject of an inquest. There are some common themes in the findings of the PPO, for example, concerns over the management of prisoners at risk of suicide or self-harm, including ACCTs (see 4.2.2). There were also concerns that not all staff seemed to be aware of the correct procedures for calling for help in a medical emergency. The Board is aware that the latter point has been addressed by the prison with regular reminders of the correct codes to be used when medical assistance is urgently needed.

4.3 Violence and violence reduction, self-isolation

There has been a steady increase in the number of violent incidents recorded each month in the prison from an average of 18 per month at the start of the year to about 25 per month in December 2021. Variations between months include peaks in June and October 2021 and a dip in March 2021. This pattern tended to coincide with periods when the regime had started to open up following some relaxation of Covid restrictions or when prisoner interactions were more limited because of a tightly

restricted regime. In March HMIP reported that prisoners' perceptions of safety were poor.

In broad terms, two-thirds of incidents involved prisoner-on-prisoner violence and one-third were assaults on staff. There were 128 assaults on staff in the prison in the last 12 months – a very disappointing increase from 75 in 2020.

Across the year 45 incidents of violence by prisoners were sufficiently serious to have been referred to the police.

The prison monitors these incidents carefully with monthly reports. These include analysis of drivers of violence, location and time of day and the age, ethnicity and religion of those involved. A valuable addition this year has been the inclusion of a 'lessons learned' section analysing in detail specific incidents and highlighting good practice and areas for improvement.

The thoroughness of these monthly reports has not always been matched by regular meetings to consider them and any implications for good practice. Since the pandemic the business of the violence reduction and safer custody meetings has been combined and while this is a welcome move, effectiveness has sometimes been limited by cancelled meetings and inconsistent leadership. Over the past 12 months three different governors have been responsible for this area (see 3.2.4). The Board would like to see greater continuity for violence reduction and safer custody at governor level and better regularity of monthly meetings.

4.3.1 Challenge, support and intervention plans (CSIP)

Given the levels of violence at Exeter it is again disappointing to report that CSIP has not been functioning. The Board remains very concerned about the effectiveness, management and oversight of this strategy. The Board undertook a short period of focussed monitoring, which confirmed that although prisoners were being referred for CSIP their suitability for the programme was not being assessed in a timely manner. Similarly, once identified as on the programme, and recorded as such on the safer custody daily status log, scheduled reviews were not undertaken in a timely manner. The Board did speak to one CSIP prisoner who claimed he had only just been told about it and 'did not know what it was all about'. It was very difficult for the Board to speak to prisoners about their experience and perceptions of CSIP because we did not have confidence that prisoners on the CSIP list were aware that they were on CSIP and/or had been reviewed, despite their review date having passed. Our concerns about this situation were reported to the SMT and were acknowledged. Towards the end of the year there were some efforts to reboot the CSIP programme, but the Board remains concerned about the ability of the prison to engage the necessary staff to embed and sustain this renewed focus.

4.4 Use of force

The Board has been pleased to see the progress made during the year in improving the management of use of force (UoF), including tightening up on paperwork. We would commend the prison for responding to a point raised by HMIP and appointing a full-time coordinator in this area. Combined with the commitment of the senior management team, this has led to a number of improvements in governance and assurance. The Board has been able to monitor use of force using the reports in the

daily handover bulletins, through attendance at the monthly UoF meetings, and through regular viewing of body worn camera (BWC) footage. One unplanned UoF incident was observed and involved control and restraint (C&R) where the prisoner was taken to the ground (twice) and removed to the CSU under restraint. Some training needs were identified by a senior officer present.

Overall, 2021 saw more incidents where force was used (438) than in 2020 (356). This is not altogether surprising, given that the easing of some restrictions, including larger cohorts being unlocked at any one time, created more opportunities for interaction and disputes. Most incidents were spontaneous and involved guiding holds rather than full C&R. The duty governor reviews all BWC footage from the previous day and action is taken if any bad or good practice is identified. During the year at least two officers were taken off prisoner-facing duties because of concerns identified about their handling of use of force. This action reflects the commitment of the SMT to ensure that challenging prisoner-staff interactions are respectfully managed. The Board has been pleased to see much better use of BWC during the year with regular reminders to staff of the importance of recording incidents. The logging of BWC use on the daily handover bulletins serves as a reminder of the importance of this especially for evidential purposes (see 5.2.7).

At the monthly UoF meetings a significant contribution is made by the equality and diversity team, with focus groups held if issues are identified with particular sets of prisoners. These enable some issues to be explored in more depth and we hope this can be developed further. The meetings also review incidences of outstanding paperwork, particularly annex As, and this has resulted in greatly improved performance in the timeliness and quality of paperwork. For November and December there were no outstanding annex As at the time of the monthly meeting. This will require continued vigilance so that performance does not slip. A continuing challenge is getting prisoners to engage with debriefing and many of the forms still lack details.

It is disappointing that central training on use of force has only recently restarted and there is a significant backlog throughout the country. Some officers will not be able to attend training until 2023. It is clear from the Board's monitoring of this area that some officers would benefit from refresher training (see above) and we hope that HMPPS will give this some priority. We welcome the training delivered locally, which will assist in upskilling officers.

4.5 Preventing illicit items

It has not been possible to undertake an effective comparison between 2021 and 2020 because of the impact of the pandemic, but the prison has noted a decrease in 'code blue' incidents arising from use of illicit drugs. The restrictions required by Covid have been a double-edged sword. They have helped to restrict supply of illicit drugs, but also increased interest in alternative substances such as hooch, while curtailing the opportunities for delivering a meaningful regime and purposeful activity. The latter is particularly important in trying to alleviate the boredom that can lead to drug taking.

Regular perimeter searches continue to be successful in finding 'throw overs' and the Board has been pleased to see dog searches of cells undertaken, and action

taken against prisoners in possession of drugs or hooch. Monitoring of adjudications for drugs matters shows that the process does try to gain intelligence to undermine the availability of drugs on the wings. Intelligence-led scanning for mobile phone use and possession has also paid dividends.

Mandatory drug testing (MDT) has not operated regularly due to Covid restrictions.

The prison regularly issues warnings about the risk of contaminated drugs, including a leaflet drop to all cells in September. The Board has also noted better management of the queues for methadone and other medication, where there can be opportunities for items to be passed and diverted between prisoners.

The installation of a body scanner in reception (see 5.2.6) has undoubtedly led to some disruption of supply, along with continued efforts to prevent mail impregnated with psychoactive substances (PS) reaching prisoners.

Towards the end of the year enhanced gate security has been in force. This has required all staff and visitors to go through airport-style security with random full searches (including the participation of the detection dogs). Additionally, a recent requirement has been that all staff and other visitors must declare in advance and have a letter of permission to bring into the prison any forms of medication. The Board is aware that both initiatives have proved successful in preventing illicit items entering the prison. Nevertheless, while there is clear evidence that the prison is doing all that it can, none of these initiatives have entirely stopped some drugs and other illicit items getting into the prison.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 Accommodation

Throughout the year a number of refurbishment projects have been ongoing (see 3.2.7) and there has inevitably been some disruption for staff and prisoners alike. The eventual handover of D wing was fraught with snagging problems involving the fire detection system and urinals backing up. An additional frustration for some of the prisoners on D wing was very poor TV reception. B wing, which accommodates those prisoners deemed as vulnerable (VPs), was decanted for refurbishment and prisoners were relocated on A4. Despite this being a scheduled event, and a maintenance order being placed by the prison to erect a secure gate to prevent access by other A wing residents, these safeguarding arrangements were not in place at the time of the move. A number of VPs raised concerns about this with Board members and it was clear that this had an impact on their perceptions of wellbeing and safety.

The condition of prisoner cells is variable and the Board is aware that reported minor repairs can take some time to resolve. The Board remains concerned about the overcrowded accommodation, which makes shared cells cramped and limits opportunity for privacy. Covid-19 symptomatic prisoners (and their cell mates) were required to isolate and there is evidence (HMIP, 2021, p.6) that at points, prisoners in isolated conditions could not leave their cells for at least 10 days. In this respect arrangements for such prisoners were not decent. We were also aware of concerns from some A wing prisoners about access to showers. Our enquiries found that the regime in place at the time did not always enable prisoners to shower every day.

An issue about which the Board first raised concerns in 2017 concerns the number of prisoners claiming to have fallen out of bed and from the top bunk. During the year there has been a number of prisoners reporting to healthcare with injuries claimed to have resulted from such falls. While the Board understands that 'contract removal' of the old beds is required, it is concerned that a solution has not been found sooner and that a risk to prisoners still exists on some wings. There is also the risk of litigation and compensation payments by the prison. We hope that the refurbishments taking place, and scheduled to take place, will address this issue as a priority.

Standards of cleanliness in communal areas, while sometime variable, have improved significantly over the last two years. The clean and decent agenda driven by the Governor is becoming more embedded and in some areas there has been a cultural shift in terms of expectations.

5.1.2 Clothing and kit

It has not been unusual for the Board to be contacted by prisoners about a lack of availability of clean clothing and bedding. Not all wings experienced the same levels of stock unavailability. In some cases it was found that clothing was being hoarded by individuals as a strategy to ensure availability and this resulted in them having more clothes than they were entitled to. This just exacerbated the problem and resulted in unequal access and distribution across and within wings. The Board found that once the prison was aware of the scope of the problem additional kit and

bedding was sourced and its allocation was more tightly managed and controlled. For example, a concern from the Board about a shortage of socks was responded to very quickly by the clothing exchange store (CES).

5.1.3 Food

Given the limited spend available per prisoner (raised to £2.20 towards the end of the year), the food served at HMP Exeter is generally of a good quality and much is prepared on site. At the point of delivery to most of the wing serveries the food has remained reasonably hot and the meals are enjoyed by the vast majority of prisoners. Overall, the Board commends the work of the kitchen to prepare wholesome and edible meals.

During the reporting year 10 complaints (less than 1% of all prison complaints) were made about the food. Five applications (3% of all applications) to the IMB were made about food. An analysis of all these complaints (15) indicates that the majority were about choice of food particularly during Ramadan. Two complaints were around temperature checks of food and one about wrapping of the food, others about portion sizes.

Towards the end of the year, and with the closure of B (VP) wing, a temporary servery had to be established at the end of A4 landing. This was not an ideal location being a thoroughfare and adjacent to one of the constant watch cells. However, the scope for an alternative was limited, with prisoner safety being a priority. In anticipation, the prison purchased a number of large commercial thermal food containers. Initially some prisoners told us that the food was not sufficiently hot, but as arrangements settled we received fewer comments about this.

Complaints regarding the temperature of food arriving from the kitchen were responded to by regular checks of the file records in each wing servery. During the year there have been improvements in the prison's own monitoring of this area. Serveries have been provided with food thermometers and daily temperature checks and recording have been implemented. Once the servery orderlies were aware of the recording and reporting requirements we found that this was completed on a daily basis, mostly without exception. The Board hopes that these improvements can be sustained and across all wings in the prison.

There were, however, serious lapses in the wearing of face coverings (when restrictions were in place) and also with the wearing of the correct servery 'whites'. This resulted in many orderlies wearing inappropriate clothing for catering purposes. Although there has been an effort to improve expectations and standards of hygiene at the serveries, compliance is still inconsistent across the prison.

The Board found that the serveries on all wings were generally clean and well organised as far as the serving of food was concerned. Officers were usually present, but not always.

5.2 Segregation

5.2.1 The CSU is located in a basement on A wing (A1) containing eight cells, a special accommodation cell, adjudication room and shower room. The CSU office is at one end of the unit and CCTV covering the area is only visible from the office

area. Largely due to its location, the CSU remains an unsatisfactory environment. The Board continues to question how conducive this environment is to the care and rehabilitation of some of the prison's most challenging prisoners. The communal area is kept as clean and bright as possible within the constraints and officers and orderlies do a satisfactory job in this respect. In the winter months the cells are often cold and additional bedding and/or clothing is required. The Board is pleased to note that this has been more readily available than in previous years.

5.2.2 Staffing

In its 2020 report the Board raised concerns about the late evening and night-time supervision arrangements of the unit, which was covered by visits from A wing officers upstairs. We note that following a staff reprofiling, CSU staff are now part of a larger EGS (enhanced gate security) team. This has improved the supervision of the CSU by providing more of a staff presence in the unit office out of hours. However, the Board is aware that staff shortages and the sudden need for outside escorts or bed-watches can undermine this. Nevertheless, the Board welcomes this move. As with other areas of the prison, the leadership of the unit has not been stable and there has also been a significant turnover of CSU staff. A few of the more experienced staff have remained and provide stability to the team. The Board wishes to acknowledge the patience and dedication of the CSU staff. Under challenging circumstances and conditions, they work supportively to build relationships and engage positively with some of the most disturbed and demanding prisoners at Exeter. Staff in the CSU get to know the men in their care well and can talk confidently about their needs, progress and plans for reintegration. The Board has witnessed good use of interpersonal skills to defuse potentially volatile situations (see also 5.3.1).

5.2.3 Regime

By its very nature the CSU runs a restricted regime compared with normal location. Throughout the reporting year the unit was able to follow its normal CSU regime with access to showers, telephones, kiosk, cell cleaning and exercise. Education packs, reading materials and distraction packs have all been available. Access to wind-up-radios, which has been an issue in the past, has been improved and there has been better oversight of stock levels.

The Board did have occasion to be concerned about arrangements for segregated prisoners to attend medical appointments in the clinic. While aware that staffing pressures can impact on the availability of officers to accompany prisoners to appointments, we feel that a prisoner in the CSU should not be disadvantaged in their access to healthcare or attendance at a scheduled medical appointment.

5.2.4 Monitoring

During the reporting period the Board's monitoring of the CSU has been undertaken both directly and remotely. When directly monitoring, the unit has been visited at least twice a week. The Board has been provided with a daily list of prisoners held in the CSU and this arrangement has been regular and helpful. Systematic circulation of the segregation monitoring and review group (SMARG) document has unfortunately been a casualty of senior staff changes.

5.2.5 Segregation review boards (SRBs)

During periods of remote monitoring attempts were made to monitor SRBs by reviewing the completed 'continued authority for segregation' document. As experienced in the previous year, the success of this was very variable and contingent on the Board receiving the scanned form. This did not always happen. The limited size of the review room at times precluded IMB in-person attendance for social distancing reasons. Consequently, the Board was not able to attend as many SRBs as it would have liked. In this respect, it has still not been possible to monitor the arrangements and the impact of holding SRBs on fixed days/times of the week. Nevertheless, based on the available documentary evidence and our limited direct monitoring, the Board is confident that the improvements observed in 2020 have been sustained and embedded. The attendance of healthcare/mental health is now routine. The Board has not had occasion to query the outcome of any SRB it has reviewed, although it did challenge the removal of a radio from a prisoner whose segregation was continued. The Board is content that SRB judgments are reasonable and that correct procedures are being followed.

5.2.6 Days spent in segregation

Across the reporting year a total of 2,083 days were spent in the CSU, which is an increase of 2.3% compared with 2020.

- 57% of days were spent on good order or discipline (GOoD) (46% in 2020)
- 37% of days were spent on CC (48% in 2020)
- 6% of days were spent on rule 53(4)

The increase in prisoners held on GOoD reflects the increasing number received from reception under the secreted items policy (SIP) having tested positive on the body scanner. The Board has noted that these prisoners are rescanned regularly and leave the CSU as soon as they present with a clear scan.

In terms of days spent in the CSU by minority ethnic prisoners, there were 385 days (19% of all days). This is fewer than in the previous year (22%). The Board reviews the monthly SMARG report with reference to:

- The percentage of prisoners from ethnic minorities held in segregation compared with the total prison population.
- The percentage of prisoners from ethnic minorities held in segregation compared with the total ethnic minority population.

The Board is confident that there is no evidence to suggest that minority ethnic prisoners are disproportionately represented in the segregation unit.

It is always a concern to the Board when prisoners on an open ACCT are held in the CSU. Evidence from the 'initial authority to segregate' documents does indicate that initial healthcare screening is prompt. The men appear well cared for and observations and reviews have been timely. During the year 76 prisoners, which amounts to a 33% increase on 2020, were held on an ACCT.

Turnover in the unit continues to be high, with most men being returned to the wing rather than transferred. During the year the longest stay in the CSU was 81 days and there was one prison group director (PGD) review for a man held in the unit beyond 42 days.

The special accommodation cell has been used on seven occasions, but records show that time spent in this environment is minimal and that arrangements are tightly regulated with defensible decision arguments reviewed by the Governor.

There were no prisoners held in the CSU awaiting transfer to secure accommodation during 2021. However, three prisoners who were subsequently transferred to secure accommodation did spend some time in the CSU.

5.2.7 Adjudications

Adjudications have continued throughout the year and at the height of Covid-19 have taken place in the chapel. The independent adjudicator (IA) continued to be a virtual process. A combination of direct monitoring and review of the monthly SMARG report has enabled the Board to monitor both data and procedure. A total of 2,774 adjudications took place during 2021 and this is very similar to 2020 (2,773). With the exception of a peak in January (287) the monthly profile has remained consistent. Forty-one percent of offences charged were proven on the first appearance. Again this year a consistent recommendation from the SMARG report was a need to improve the presented evidence in the collation of CCTV and BWC footage, if proven monthly rates are to increase. It is disappointing that for nearly two years a training need has been identified but does not appear to have been addressed or had any impact in this respect. Such a situation does not make best use of officers' time spent on the adjudication process. The Board is aware that there has been a focus on getting officers to activate their BWCs at incidents, but clearly there is work to be done on both activation and the effectiveness made of the evidence captured. Although data on prisoner characteristics is collected, with the exception of age, there is no analysis of other equalities data pertaining to adjudications in the SMARG report. This should be considered because perceptions of the fairness of 'nicks' are important elements in prisoners' perceptions of procedural justice and in establishing sound prisoner-staff relationships (paragraph 5.3).

Seventy-three percent of prisoners referred for adjudication were in the 25+ age category. Young adults (18-21 years) accounted for only 9% of all adjudications.

5.3 Staff-prisoner relationships, key workers

5.3.1 Staff-prisoner relationships

The continuing restrictions necessitated by the pandemic have inevitably affected the building of relationships between prisoners and staff. Throughout the year we have observed some good examples of positive and productive relationships, particularly in the CSU and the social care wing (F wing). We commend particularly the efforts of staff in the CSU (see 5.2.2) who have had to deal with some particularly challenging individuals over the past year and have often been the subject of verbal abuse and worse.

During the year the Board has witnessed some good use of soft skills to calm prisoners and de-escalate potentially disruptive or volatile situations (see 5.2.2). References in the daily handover bulletin about the use of 'the strategy of choices' and 'Five Minute Intervention (FMI)' skills shows that interpersonal skills and

situational awareness have been used to interact effectively. However, some Covid-19 restrictions, which have been designed to minimise direct and personal contact, cannot have encouraged the use of soft skills in the treatment of prisoners in some situations. This context also means that new or less experienced staff have had less opportunity to develop or use these important communication skills. The Board is aware that HMIP (2021) noted that ‘staff-prisoner relationships were lacking’ and cited examples of this ‘as unresponsiveness to prisoner requests and enquiries’ (p.6).

As restrictions were eased it has been challenging, especially for less experienced staff, to develop good relationships with prisoners, particularly with those who only stay at Exeter for a relatively short time. We have some direct feedback from a small sample of prisoners who were interviewed during our Covid-19 enquiry (see 8.3), which painted a mixed picture of relationships. Some were seen as fair and decent and others not. This was also a finding of HMIP (2021) who reported that ‘staff-prisoner relationships were lacking’ (p.6) and required improvement.

Some prisoners expressed a concern that officers did not stick to the Covid-19 rules themselves and did not enforce them with prisoners. The Board expressed concern on a number of occasions that mask-wearing was not being observed by some officers or prisoners. Despite a number of reminders sent out by the Governor this was not consistently complied with.

5.3.2 Key working

Covid-19 restrictions and shortages of staff have had a major impact on the delivery of the key worker scheme. The Board had been concerned about the inadequate functioning of this before the pandemic (see annual reports 2019 and 2020) and it is disappointing to report that only an average of 6.8% of planned sessions over the year were actually delivered. Although statistics for the year show that there was an average of 102 active key workers theoretically available at any one time, and prisoners were allocated a key worker relatively quickly, initial sessions were often not delivered for some weeks. Despite ongoing deficiencies in the functioning of the key worker scheme the Board notes that the deployment of officers to undertake key working has improved. This has allowed officers to have rostered, dedicated key worker time, a much-improved arrangement as they are able to focus on the work without conflict with competing duties.

5.4 Equality and diversity

5.4.1 Work to promote equality across all areas of prison life remains an aspiration. Strategies and initiatives do not seem to have embedded sufficiently to have improved outcomes for prisoners. HMIP (2021) found that work to promote equality remained weak (p.7) and that Black and minority ethnic prisoners had poor perceptions of life at Exeter (p.17).

One of the ways the prison has tried to address this is by recruiting, where possible, prisoner representatives with as wide a range of protected characteristics as possible. However, widening representation does depend on being able to recruit

from a pool of prisoners who put themselves forward. Work is ongoing to recruit full- and part-time prisoner representatives and for this role to have 'work status'. The work of the representatives has improved information sharing and the promotion of equality and diversity issues, but face-to-face interaction has diminished.

At points during the year a series of open forums covering a range of equalities and diversity issues were arranged. However, a combination of Covid restrictions, lack of interest or a reluctance to attend hampered this initiative.

Each of the protected characteristics now has a nominated member of the SMT to lead development and there is recognition that in working towards an inclusive and accepting culture, work also needs to be undertaken with staff as well as prisoners. A culture cafe was an initiative designed to engage staff. However, the equalities team believe that more operational input is needed, even on a part-time basis, to undertake consultation work and promote the forums. Using the kiosks to promote the forums was less effective than was hoped and it was felt that more posters might be more effective.

There is a strong link with the chaplaincy team who were particularly active in seeing prisoners face to face during the lockdown periods. This relationship was valuable and valued (see 5.5).

Monthly equality action team (EAT) meetings continued throughout the pandemic (except in November) and were well attended by stakeholders including prisoner representatives who were actively engaged. An analysis of equalities and diversity data was undertaken each month and reported on across the key areas of the prison, for example: violence reduction (see 4.3), segregation (see 5.2.6) and use of force (see 4.4) with a focus on identifying any disproportionate outcomes for prisoners.

5.4.2 DIRFs

The HMIP scrutiny report (2021) found some weaknesses in the discrimination incident reporting form (DIRF) procedure. In response all DIRFs are now triaged by either the equality and diversity inclusion lead or by a custodial manager. This determines whether the matter raised is appropriate for the DIRF procedure or whether the prisoner should be advised to pursue their concern by way of a COMP1. This has ensured that the correct procedure is applied from an early stage.

Efforts to publicise the DIRF procedure were assisted by the recruitment and training of a number of representatives. This was initially effective and resulted in the submission of 13 DIRFs in May. However, a combination of prisoner and representative turnover and Covid restrictions meant that DIRF submissions reduced again subsequently. However, the value of the practice of deploying sufficient representatives was demonstrated. Across the year 37 DIRFs were submitted and of these four were upheld.

Central to the equality and diversity agenda is the effectiveness of the DIRF process. Because of clerking and staffing issues the Board only received DIRFs intermittently during the year. However, a dip test across the entire year was undertaken to

monitor how the process is performing in Exeter. Observations suggest that more efficient processes might be operated, which would provide all interested parties with consistent information about outcomes and reassurance that the process is robust and effective. While the dip sample provided set out the complaint and the outcome, with a thumbnail sketch of the steps taken to investigate, there was no record of the evidence on which the outcome was based. For example, it was recorded that 'Officer X was interviewed about the incident and no evidence to support the complaint was found'. However, there was no record of what Officer X was asked or had said. This is not to say that the conclusion is wrong, but simply that there is no evidence recorded on which it can be seen to be based.

5.5 Faith and pastoral support

Despite some leadership changes during the year the chaplaincy team performed a highly commendable job under the most challenging of circumstances. At a time when there was heightened anxiety amongst prisoners, and in the absence of collective worship, for those prisoners needing support and contact on a regular basis the positive impact of the faith team cannot be overstated. They also provided a crucial role in communicating with the many prisoners who had deep concerns during the lockdowns about the welfare of their family and friends. When restrictions eased, the services of various faiths resumed, although socially distanced and requiring the wearing of face masks. The recommencement of communal services gave a welcome opportunity for prisoners to worship together once more.

5.6 Incentives schemes

Once again, and because of regime restrictions operating throughout the year, the suspension of the basic level of the incentives scheme has continued. In practical terms this has meant that all prisoners (except those in the CSU) have access to an in-cell television and privileges are given to standard or enhanced level prisoners as appropriate. Prisoners were also allowed to wear their own clothes. The Board welcomes the contribution this has made to prisoners' wellbeing and to supporting a humane environment during challenging times. We understand that a new incentives framework, and the reintroduction of basic status, is planned for 2022. However, a change to this is that TV removal will be the exception rather than the rule. This is as a result of a study into the link between the removal of TV and self-harm. We strongly support this change.

5.7 Complaints

The prison produces a basic monthly report on complaints received from prisoners and this analyses the number and nature. Monitoring of timeliness of response is considered weekly. Towards the end of the year the Board started to receive the monthly report at its meetings. As in other areas of the prison, there have been a number of in-year staffing changes in the office dealing with complaints.

During the reporting year 1,018 complaints were made, which is an increase on 2020. Some 41% of these were identified by the prison as not attended to within the seven-day time frame. Across the year timeliness of response did vary with April (47% overdue) being the worst month and March and November (the months with the highest number of complaints made) being the best months with only 20% of responses overdue.

In reviewing and monitoring the prison's data on complaints, the Board identified some inconsistencies in categorisation. For example, issues related to property were mixed with 'reception' and 'residential'. Some complaints about canteen were mixed in with 'financial complaints and staff conduct/bullying complaints were sometimes recorded under 'residential' whereas others were logged under 'staff'. This inconsistency in coding is potentially problematic in terms of the accuracy and meaningfulness of any trends or patterns that emerge. The prison should, therefore, consider reviewing the reliability and consistency of its data categorisation.

Monitoring of the nature of the complaints made showed that:

- 258 complaints (25%) were about property that had either gone missing at Exeter or not transferred from a previous establishment (see 5.8).
- 111 complaints (14%) were made about canteen, which also included complaints around financial accounting with money allegedly charged wrongly to prisoner accounts (31).
- 97 complaints were about the state of cell accommodation and included bedrails, damp cells, heating and lighting (see 5.1).
- 64 complaints were made about staff, for a variety of reasons, including allegations of bullying or excessive use of force (see 5.3).
- 56 complaints were about mail being opened when the prisoner argued that it should not have been.
- 8 complaints were recorded about insufficient access to the gym.

Complaints about medical issues were normally sent on to healthcare to deal with (see 6.2).

The prison has established sound quality assurance arrangements in relation to monitoring the responses to complaints. The Board, as part of its monitoring of this area, also monitor a sample of six complaints a month. Aside from some IT problems experienced by some members of the Board, we have generally found that the improvements noted last year have been sustained and that the areas that required improving (such as recording the date the complaint was received and responders signing and dating the forms) have been.

Outcomes for prisoners in terms of the quality of the response are generally good. Most responses are polite, factual and address the issue(s) raised. The best responses show some evidence of investigation and offer some helpful advice.

5.8 Property

Once more complaints about property have been a significant issue, attracting 9% of the applications received by the Board and 25% of complaints received by the prison

(see 5.7). Understandably, prisoners often become very agitated about this, especially if they cannot access personal items and information such as phone numbers. Some of the concerns raised with the Board have been about the time taken to receive their property from reception or when they are transferred internally to the CSU. Another particular issue has been property going missing when a prisoner is transferred from another prison to Exeter. Whilst the missing items are usually tracked down, the staff in the business hub often have difficulties getting responses from other establishments. The Board is also concerned that insufficient attention and care is sometimes given to securing and moving property when a prisoner has to move cells or is moved to the CSU. We appreciate that staff must give priority to safety and security, but more attention to this at the time would save resources later on when officers are trying to locate property. It has been a particular concern that some property during 2021 has appeared to go missing during the reception process.

We have also received some applications about property (parcels) sent into the prison by families. While there are clearly security protocols which need to be followed, some of our investigations have led us to discover that the property was delivered to the prison, refused by the prison and returned to the sender. While this sounds simple, investigations concerning property sent in are anything but, not least because two different areas – reception and correspondence – have some involvement. We found that:

- Prisoners have claimed not to have been told about the status of their parcel, or why it has been returned.
- Parcels returned to sender have allegedly gone missing and not been received.
- Tracking of what had happened to parcels was hindered because signatures were either illegible or inaccurate.

The Board remains frustrated that better communication and systems and processes, perhaps utilising some form of barcoding arrangement, cannot be implemented at both a local and national level to improve this important aspect of prisoner life.

6. Health and wellbeing

6.1 Healthcare general

Healthcare is provided by Practice Plus Group, formerly known as Care UK. This contract expires in September 2022 and is currently out to tender.

Healthcare services operate seven days a week, 24 hours a day. Clinics, including dentistry, physiotherapy, radiology and ophthalmology, are normally held from Monday to Friday. Prisoners may book their own appointments using the wing kiosks. During the year there were 31,565 face-to-face and booked-in appointments for healthcare services. There have been staffing issues (see more below) throughout the year and 34% vacancies remained at year end, however this is an improving picture with interviews arranged.

A discharge coordinator was appointed within healthcare in 2021 to prepare and support the most vulnerable prisoners before, on and after release. This has ensured prescribed medications are issued on release and liaison with community healthcare provides continuing care where necessary. This has also helped with prisoners' transfers to other establishments.

During 2021 the Board experienced difficulties in contacting the head of healthcare for regular updates, either by telephone or in person. In August the healthcare Senior Management Team effectively collapsed. The head of healthcare unfortunately had a period of sick leave during her resignation notice period and this coincided with the practice manager starting her maternity leave. These difficulties were of immediate concern since there were already acute staffing shortages in the Practice Plus team. During August and September the healthcare team were short-staffed and sourcing agency staff was incredibly difficult. On at least one occasion there was no registered nurse cover at night. There were also times when Practice Plus Group staff from across Devon, Dorset and Norfolk supported the Exeter team to ensure the delivery of healthcare services.

The deputy regional manager came on site to provide some support and an interim head of healthcare started in October. The new head of healthcare started at the end of November and the interim head of healthcare continued on-site to support the induction. Recruitment and the sourcing of agency staff continued. A weekly staffing plan is produced by the on-site team and the Governor is now informed in advance if there are likely to be problems involving staffing.

6.2 Physical healthcare

Healthcare's approach to dealing with concerns and complaints follows a tiered approach. During the year 82 prisoner concerns were registered and 23% of these were responded to within five days. Of the remainder, 3% were upgraded to either a stage 1 complaint or complaint status. The Board notes that healthcare, as a category, continues to be the subject of the highest number of applications it receives (20% of all applications – see also 8.3). Many of the concerns raised have been about delays in the healthcare complaints process and from the Board's

monitoring it is clear that healthcare has not always been able to respond in a timely manner.

HMP Exeter responded to the Covid pandemic by ensuring that the Governor or a member of the SMT met with the head of healthcare and other members of the Practice Plus team every day. This helped ensure that everyone had a shared understanding of the changing and most up-to-date guidance from Public Health England, HMPPS and NHS England and how the prison would respond.

Nonetheless, Exeter became a Covid outbreak site in February 2021, with more than 100 prisoners and 70 staff self-isolating. Matters subsequently improved with only minor outbreaks for the rest of the year and the restricted regime was slightly relaxed with larger prisoner cohorts allowed out of their cells at any one time (see 6.5.2). Mask-wearing was compulsory throughout 2021, although compliance has been variable. From December all those attending prison visits, including prisoners, had to have a negative lateral flow test before being allowed into the visits area.

Prisoners' Covid vaccinations started in January with the most vulnerable prisoners, in line with the priority groups in the community. Across the year 1,296 prisoners were offered their first vaccination, with 1,030 (79%) taking it up and 266 prisoners declining. Second vaccinations were offered to 685 prisoners and clinics were continuing at year end.

Any prisoner presenting with Covid-19 symptoms was isolated for 10 days, with their cell mate if they had one, and tested for the virus. They were monitored twice a day by healthcare staff and medications were administered at the cell doors with nurses escorted by officers. Only one prisoner in 2021 was transferred to hospital for treatment for Covid-19. New receptions and prisoners transferred from other prisons were tested and placed in a reverse cohort and isolated for 10 days as a precautionary measure (see also 5.1.1).

6.2.1 The Board was aware of a number of matters which have had an impact on the healthcare experience of prisoners during 2021:

- Access to the wing kiosks, and therefore opportunity to book healthcare appointments, has sometimes continued to prove difficult, due to the limited Covid-19 regimes and restricted time out of cell.
- Smoking cessation clinics were reintroduced in the prison at the end of the year and as Covid restrictions allowed.
- About 40% of prisoners were allowed to have some medications in possession during the Covid regime, each prisoner having first been risk-assessed. However, there are no secure storage facilities in cells. In-possession medication procedures have improved since being strengthened in 2020.
- In 2021 healthcare consultations have continued to take place by telephone, using prisoners' in-cell telephones, in order to reduce person-to-person contact; where this has not been appropriate, consultations have taken place in person. The average waiting time to see the GP was 4.5 days.
- There have continued to be missed appointments because of a shortage of 'runners' to escort prisoners. This remained a problem at times under the restricted regime because of staff absences. In 2021 there were 1,668 'did not

attend' missed appointments, which amounts to 36,662 minutes (611 hours) of time wasted.

- Some prisoners arriving from court on Fridays and Saturdays still experienced delays or interruptions to their medication. This was normally because confirmation from the community GP, prior to immediate and continuing prescription, is required.
- A new full-time pharmacist started in January 2021.
- During the Covid-19 restricted regime medication hatch times have been extended to allow for differently cohorted prisoners to move around the prison. Prisoners in isolation had their medications administered at the cell doors. However, HMIP criticised the custom of 'potting up' (unsafe delivery of medicines to isolating prisoners' cell doors) but this practice has been reviewed and the arrangements changed and a new policy put in place.
- As in 2020 there have been fewer suspected PS incidents requiring urgent medical assistance (nine) and the prevalence of PS in the prison has reduced during Covid-19. Additionally, there have been fewer ambulance attendances as staff have become more experienced at dealing with the effects of PS.

6.2.2 The dental service is provided by Time for Teeth, which normally operates two days a week. Difficulties with any treatment involving aerosol-generating procedures (AGPs) continued early in the year as the prison did not have the ventilation equipment necessary to ensure safe working. A ventilation unit was subsequently sourced and AGPs were able to take place. The average waiting time to see the dentist was 11 weeks.

6.2.4 In normal times prison opticians provide a service two days a month. The optician has been running clinics at 80% of the normal contracted sessions. Healthcare do not record the average wait time for the optician, but 27% of patients seen by the optician had waited over six weeks.

6.2.5 Physiotherapist and podiatrist appointment waiting times are not recorded by healthcare but 38% of patients seen by the physiotherapist had waited over six weeks and 22% of patients seen by the podiatrist had waited over six weeks.

6.3 Mental health

6.3.1 The mental health service is provided by the Devon Partnership Trust (subcontracted by Practice Plus Group) and the mental health team provide seven-day-a-week care, with cover from an on-call service. Staff include psychiatric nurses, a learning disability nurse, psychologists who can provide guided self-help, and one psychiatrist three days a week.

There have also been some changes to the management within mental health. In October the head of mental health left following promotion to another role. The replacement was an internal appointee and the Board was pleased that this enabled continuity of care for prisoners with mental health issues.

It has been another difficult and very busy year for the mental health team, as many prisoners have struggled with mental health problems during the restricted Covid-19 regime. The Board's Covid enquiry (see 8.4) indicated that restrictions had increased the challenges to mental health, particularly because of additional in-cell isolation, but also from the lack of purposeful activities available, and the absence of in-person visits. We can only speculate about the longer-term impact of the restrictions on prisoners' mental health, but in 2021 the number of self-harm incidents per month varied from between 38 and 73, averaging 61 per month (see 4.2). This represents an increase in self-harm compared with the previous year.

6.3.2 During the reporting period the following matters were noted:

- Staff have continued to minimise face-to-face contact where possible to reduce risk of infection with Covid-19. Urgent cases were seen and other prisoners received a letter explaining that they would be seen as soon as practicable.
- All ACCTs are reviewed by a multidisciplinary team including contributions from mental health (see also 4.2.2), and prisoners are seen within the first 24 hours. Referrals, which can come from any staff working with the prisoner, averaged 28 a week and were triaged according to urgency. During 2021 there were 1,437 referrals for mental health assessment and 1,339 mental health assessments were carried out, 98.4% of these within agreed timescales. The main cause for delays in conducting mental health assessments was patients testing positive for Covid at the point of referral. There were 98 referrals which did not lead to an assessment. This was because they were already on the mental health caseload, had already been recently assessed, were referred inappropriately, or were released/transferred elsewhere shortly after the referral was made.
- Psychologists have continued to conduct initial assessments on the telephone but are now working face-to-face with prisoners for their sessions. Face-to-face prisoner support groups have not yet restarted.
- Prisoners continued to be given written advice to support their mental health, such as distraction techniques.
- Mental health staff delivered on-site training on suicide awareness to new uniformed staff.
- As in 2020, it has not been possible to run any but essential training in the prison during 2021 and therefore a planned training programme for all operational staff in mental health awareness has still not taken place. An information pack for prison officers about mental health is being finalised and will be issued early in the new year.
- During 2021 the mental and physical healthcare teams have supported 56 prisoners who were sufficiently unwell to need constant supervision (CS). The CS cells were used 84 times during the year, which meant that some prisoners spent more than one period of time on constant supervision. The Board is impressed with the way in which these very vulnerable prisoners were cared for until they were assessed as well enough to be placed on normal location. Credit should also go to the officers responsible for observing them, for engaging with them and relating to them in a positive way.

Transfers to local secure mental health units appear to be improving and these can usually happen within the 14-day target period. However, delays are often due to a national shortage of secure mental health beds and some improvement is still needed if the secure units are out of the area. In 2021, of the nine transfers from Exeter, six were undertaken within the recommended 14-day limit, one waited for 26 days, one waited for 29 days and one waited for 36 days. The average waiting time was 13 days. Although this represents an improvement, the Board remains concerned that prisoners with severe mental health concerns and those awaiting transfer to secure mental health units often experience time in inappropriate conditions in the CSU (see 5.2.1 and 5.2.6).

6.4 Social care

Although F wing holds those prisoners with higher social care needs, prisoners with social care needs can be located across the establishment and depending on their care plan requirements. Referrals for social care can come from a variety of sources, including self-referral. Devon County Council have a specialist prison assessment team consisting of a social worker and occupational therapist who work with the prison and providers to ensure that social care needs are met. Care plans are either delivered by trained prisoner 'buddies', who can help with daily living activities, or by Practice Plus depending on the level of need.

F wing also holds elderly and or clinically vulnerable prisoners and as in the previous year, in 2021 the SMT continued to try to reduce the risk of Covid-19 contagion by limiting non-essential footfall as well as prisoners' time out of cell and interaction with other prisoners. Buddies have returned to the wing, but are no longer resident there. Towards the end of the year there were two cases of Covid-19 in the unit with one requiring hospitalisation.

The Board is concerned that some prisoners on F wing have not been moved on to prisons where they can participate in courses which will help them address their offending behaviour. These prisoners have, in some cases, been waiting for years to be moved to more appropriate locations. It is also concerning that some of these prisoners have been advised they would be transferred, thereby raising hopes, only for this to not happen. The Board has raised this regularly with the last three Governors, but with little effect. The response we have been given was always that the receiving prison was either still assessing their ability to meet the needs/social care required or has decided that they cannot meet that need. However, it remains unacceptable that the Prison Service cannot manage more efficiently and effectively the transfer of prisoners with disabilities and or social care needs. At the end of the year F wing was closed for refurbishment and prisoners were finally transferred as a consequence. The Board hopes that this will now allow these prisoners to progress, which they have been unable to do while in Exeter.

F wing also has a palliative care suite, which enables end-of-life care in a supportive environment. Care is provided by a GP lead and supported by the local hospice service. No prisoners have received end-of-life care in 2021.

6.5 Exercise, regime

6.5.1 Exercise and physical activity

The pandemic impacted on the ability of the physical education (PEI) team to achieve the service specification (rule 29) in relation to physical education. In terms of access to the gym they were only able to deliver around 50% of this aim.

The Covid-19 regime also meant that PEIs were often redeployed to help with staff shortages around the prison and gym activity was suspended or further curtailed.

As the restrictions lessened, gym and physical activity was restricted to socially distanced outdoor activities. These were non-contact and without the use of any equipment and with a maximum group size of eight. Sessions operated four times a day for seven days a week. Prisoners requesting these sessions were restricted to one per week to enable greater access for all. However, arrangements did enable prisoners to request an additional session if spaces were available. Even at the end of the reporting year, because of HMPPS imposed restrictions due to Covid concerns, it was not possible to use free weights. Once restrictions were further eased, fixed weight equipment was able to be used inside and there was an increase in permitted attendees. Up to 36 prisoners a day (252 per week) were able to access gym facilities. Targeted efforts, through direct contact with prisoners, have been made to encourage those prisoners who do not normally attend any gym or physical activity sessions to participate.

PEI staff also run first aid training for prisoners and staff.

When restrictions are reduced to a level allowing for better access to physical activity, there are plans in place to restart fitness clubs, which include weightlifting, racket sports and circuits. There are also intentions to run sessions that focus on the over-50s population and cater specifically for different groups. While the ambition of the PEI department is to be able to increase attendance up to 400 different prisoners attending on a weekly and regular basis, staff feel that without an increase in resourcing this will be very challenging to achieve.

Work with external partners, such as Exeter City football club, has continued, but the pandemic has delayed opportunities for some prisoners to achieve a football leadership qualification. This is due to restart in January 2022 with seven more prisoners expected to qualify.

The services of the PEI team remain well received and the only complaints received by the prison (seven) were all about not enough access to, or frequency of, sessions.

6.5.2 Regime and time out of cell

Inevitably time out of cell has been a concern and particularly so given the Exeter environment (see 5.1.1). The prison seemed slow to progress through the opening up stages following lockdown, but much of this can be attributed to staffing difficulties and setbacks in terms of intermittent outbreaks and the need for infection control. Most prisoners have had limited time out of cell because the regime has not been able to provide for the levels of purposeful activity pre-pandemic. As far as possible exercise (fresh air) and domestics have been prioritised, although we are aware that some prisoners have raised concerns about access to showers (see 5.1.1). When restrictions were at their greatest, prisoners averaged 90 minutes a day out of cell and this was for exercise, showers, other domestics and interacting with staff or

other prisoners within the cohort. Working prisoners experienced more time out of cell, but few were full-time workers. The collection of meals and medication briefly added to time out of cell. Weekend regimes were often more restricted. Arrangements for symptomatic prisoners isolating has been variable and at times poor and not decent (see 5.1.1).

7. Progression and resettlement

7.1 Education, library

Education is provided by Weston College. A good range of shorter courses is provided and these are generally well regarded by prisoners. However, Covid-19 restrictions and staff shortages had a serious impact on education provision throughout 2021.

At the beginning of the year no face-to-face teaching was offered at all. Education continued to be provided via in-cell packs, which were then marked by Weston College staff who remained on site throughout the year. Packs were requested via the kiosk and prisoners could have three at a time with a fortnight for completion. Feedback was either in writing, through the door or via the in-cell phones.

Some face-to-face teaching resumed in June, although numbers were limited to four in each class. This, combined with staff shortages and the Covid-19 protection arrangement of separating prisoners into 'bubbles' (which sometimes resulted in prisoners being locked up when they had a class scheduled), led to patchy attendance. This improved as restrictions eased. At this point, classes were available to C wing in the morning, A wing in the afternoon. Friday morning was reserved for B wing (VP) prisoners. Consequently, the availability of in-cell education packs was reduced for A and C wings. When the prison moved from Stage 3 to Stage 2, class numbers were increased to a maximum of six and D wing prisoners were allowed to join any session. Class numbers represent a maximum and, for the reasons given above, it is rare for a class to have full attendance. Subsequently, as restrictions eased further, the maximum number increased to the usual eight. However, as Covid cases rose again towards the end of the year, this was reduced to five and D wing again only had in-cell learning packs available.

7.1.1 Courses offered

Courses provided cater mainly for shorter-term prisoners. Assessment at induction reveals that over 65% of prisoners are below level 3 in maths and English, emphasising the importance of basic skills in the prison curriculum. It is commendable that Weston College offers some courses at level 1 in Exeter with follow-on courses at Dartmoor, Channings Wood and Guys Marsh where many prisoners are transferred.

The designation of Exeter as a resettlement prison necessitates a wider range of courses to meet the needs of longer-term prisoners nearing release. This is under consideration (see 7.2).

7.1.2 Library

As with other parts of the prison, the library was significantly affected by Covid restrictions and was not open to prisoners for a number of months. Further delays were caused by the impact of essential repairs to the chapel, which adjoins the library. During this time, the librarian and her colleague made every effort to ensure books were available on each wing and to try and respond to any particular requests. There were delays in securing an orderly for the library and difficulties in securing prisoners to act as links with the two main wings. When restrictions were relaxed there remained challenges in getting prisoners to and from the library when there were shortages of staff and the numbers who could be in the space at any one time

were restricted. The Board has some concerns that prisoners from the VP wing may have particular difficulties in getting access to the library.

7.2 Vocational training, work

The prison nominally has three workshops: a main workshop, a VP workshop and a small workshop for D wing (low risk prisoners).

The VP workshop has been closed throughout the year. Boiler and building problems made it too cold for winter use so VP prisoners were allocated sessions in the main workshop and this has continued throughout the year. Meanwhile the VP workshop became and continues to be a storage facility.

The D wing workshop, in which up to ten prisoners are employed on commercial contracts painting and packing models and figures for model railways, was closed for much of the year. It reopened in October, but soon closed again owing to low numbers and staff shortages. The work is meticulous and rewarding and is appreciated by the prisoners so its closure was a loss.

The main workshop was out of use at the height of Covid restrictions but was reopened for use by VPs and by November was operating full time. A brief attempt to include some sessions for main wing prisoners was soon ended owing to low numbers. A contributing factor was that main wing prisoners have a number of other work opportunities including cleaning, serveries, kitchen, wing orderly, and painting, which are not available to VPs. However, the Board is concerned about the current lack of workshop space and limited opportunities for full-time work.

Consideration is being given to development of further courses, especially of a vocational nature, to support the prison's enhanced resettlement role. The construction industry and waste management have been identified as possible areas. However, it is disappointing that the prison has still not been able to progress the plans it has previously outlined to us in this area. With the exception of painting and decorating it is also disappointing that the prison has not taken more opportunity to utilise prisoners' existing skills for prison repair and maintenance. While it is acknowledged that safety and security and a cramped site and ancient buildings have an impact on possibilities for work and industries, opportunities for prisoners to engage in the kind of work to support resettlement in the community are certainly inadequate at present.

Both for education and work there is piecemeal provision, which complicates service delivery. Some funding for education comes through the PEF (Prisoner Education Fund) but additional funding specifically aimed at bringing marginalised and vulnerable groups closer to the job market comes through CFO 3, a programme delivered by the HMPPS Co-Financing Organisation, part-funded by the European Social Fund and administered in the prison by the Shaw Trust. Vocational opportunities are also fragmented, for example employment in the laundry and clothing exchange store (CES) is under GSFL whereas horticulture (currently in abeyance) is under Weston College.

The nature of the population in HMP Exeter exacerbates all these issues: it is a transient population with a high level of churn and a high proportion of remand rather than sentenced prisoners and always a number of short-term licence recalls.

7.3 Family contact

Towards the end of the year the old visits hall was demolished and, for the time being, a temporary one has been placed on part of the exercise yard. This provides quite a pleasant space though noisy, and lacks the play facilities that were in the old visits centre. The old centre was, however, in place when face-to-face visits resumed in late summer, albeit with reduced numbers to facilitate social distancing.

Owing to Covid restrictions no face-to-face visits took place in the early part of the year but take up of Purple (video) Visits increased. All cells apart from those in the CSU have phones which have facilitated family contact for prisoners. In addition Storybook Dads has continued to offer a different way for prisoners to communicate with their children.

7.4 Resettlement planning and progression

Covid restrictions had a serious impact on pre-release programmes. Catch22 (formerly part of the CRC) was assimilated into the resettlement team in mid-2021. Some of its functions have been transferred to CRS (community rehabilitative services). The resettlement team undertakes all assessments on arrival but thereafter is not responsible for prisoners identified as high risk, who are managed by probation. This transition has proved difficult.

Although the team ended the year with only four members (down from a previous eleven), in practice they have found that their workload has hardly diminished. One example of how the new system causes difficulties and frustration is in finding accommodation. Previously the Catch22 team, on identifying that a prisoner would need accommodation on release, would contact the relevant housing department or other providers. Now they are required to flag up that a referral for accommodation needs to be made to CRS, but they then have no way of checking or monitoring the progress of any referral. Currently all CRS staff are based in the community though gradually several are holding regular sessions inside the prison. This arrangement is frustrating to both resettlement team staff and to prisoners who inevitably ask the resettlement team to follow up their accommodation concerns. Communication problems and delays are inevitable.

Accommodation for prisoners on release remains a major concern owing to the serious shortage of suitable accommodation, especially for single young men and especially those who will need support to maintain accommodation. Most prisoners report on release that they are going to a temporary arrangement with family or friends, which is not always conducive to long term successful resettlement.

Board members have routinely visited the 'departure lounge' where the visitors' centre outside the main gate is made available for last-minute practical support such as phone charging and checking on travel details as men leave the prison. The departure lounge is run by one enthusiastic staff member whose commitment is commended. He also organizes a 'checkout lounge' which takes place most months in the prison and offers prisoners in the last weeks of their sentence an opportunity to meet agencies that can support them on release with matters such as mentoring, training, addiction support and other services. The checkout lounge was in abeyance for much of the year but resumed in October. The same member of staff organises

occasional events such as job fairs. The first of the year was held in November and was well attended both by prisoners and potential employment/training providers. A housing event is planned and it is hoped both these events will be regular occurrences. It is pleasing to see that these initiatives have become embedded and offer good support in the period leading up to and at the point of release.

Overall, the resettlement picture is one of a team in transition and it is too early to assess whether this has resulted in an improvement in outcomes for prisoners. When the new resettlement model is fully in place (projected to be March 2022) it is estimated that the team number will rise to seven. It is also hoped that a CRS liaison will be permanently located within the prison to improve communication and through-the-gate planning. The Board will monitor progress closely during 2022.

8. The work of the IMB

8.1 Board support

With challenges posed by the pandemic, the ability of the Board to undertake its monitoring function would not have been possible without the support of the Governor and his SMT. They have been willing to keep the Board updated on events, plans and advice from HMPPS. Responses to matters or queries raised in rota reports have been prompt and considered. The Board is particularly grateful to the Governor for his efforts in finding the IMB a more suitable and dedicated office space.

Administratively, the work of the Board has been affected by a succession of IMB clerks – three during the reporting period. This has meant that members have had to take on extra duties to ensure normal and effective functioning.

During January and February five new members had their appointment confirmed and started their induction period. However, they did not begin their shadowing until May when direct monitoring resumed. In the intervening period some worked, often by Zoom, with their mentors or other experienced members and many were able to engage with the Secretariat-delivered online-training. By the end of the reporting period all the new members had progressed to a point where they were confident to work independently, or in pairs, and were on the monthly rota. This made a significant difference to what the Board could cover during its monitoring.

During the year the Board undertook periods of focussed monitoring in the following areas:

- ACCTs
- Food serveries – monitoring and recording of food temperatures
- Covid-19 – prisoners' perceptions of the impact
- CSIP – monitoring of programme implementation

The Board has continued to meet monthly either via Zoom or more latterly in person. The Chair participated in the regular regional Chairs' meetings.

Two members of the Board participated in the national 0800 applications line and the Board is pleased to see that this initiative has continued. Not only did it ensure that prisoners still had access to the IMB at the heights of lockdown, but it also enabled members shielding to continue to make a significant contribution to the work of the IMB.

Members of the IMB undertook training on the new ACCT roll out and access to P-NOMIS and have participated in the new online anti-corruption and conditioning course.

8.2 Board statistics

Recommended complement of Board members	13
Number of Board members at the start of the reporting period	6
Number of Board members at the end of the reporting period	11
Total number of visits to the establishment	182 NB Direct monitoring only resumed in full in May 2021.
Total number of shifts on the 0800 telephone line*	65
Total number of segregation reviews attended	Direct 11 Remote 24

8.3 Applications to the IMB (including via the 0800 telephone line)

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	8	14 (+75%)
B	Discipline, including adjudications, IEP, sanctions	3	0
C	Equality	4	8 (+100%)
D	Purposeful activity, including education, work, training, library, regime, time out of cell	3	11 (+267%)
E1	Letters, visits, telephones, public protection restrictions	7	9
E2	Finance, including pay, private monies, spends	1	8 (+700%)
F	Food and kitchens	1	5
G	Health, including physical, mental, social care	23	37 (+61%)
H1	Property within this establishment	7	12 (+71%)
H2	Property during transfer or in another establishment or location	7	5
H3	Canteen, facility list, catalogue(s)	4	10 (+150%)
I	Sentence management, including HDC, release on temporary licence, parole, release dates, re-categorisation	10	8
J	Staff/prisoner concerns, including bullying	14	20 (+43%)
K	Transfers	6	5
L	Miscellaneous, including complaints system	30	32
	Total number of applications (this includes 5 Applications to the 0800 Applications line and 7 Applications received via the Secretariat and submitted by a family member)	128	184

Applications to the Board increased by 44% in 2021 but did not return to the number received pre-pandemic. Yet again very few (five) Exeter prisoners made use of the 0800 number to make an application.

Healthcare as a category continues to be the subject of the highest number of applications (20% of all applications) and this perhaps reflects some of the difficulties there have been with healthcare this year (see 6.1).

Applications received around 'staff/prisoner concerns, including bullying' show a worrying increase on last year (+43%). However, this is not surprising when considered alongside the observations of HMIP (2021) who reported that:

- 'staff–prisoner relationships were lacking' (p.6)
- 'the relationships between staff and prisoners required improvement' (p.14)
- '41% said they had experienced bullying or victimisation by staff'(p.14)

The Board is aware that the prison has taken this finding seriously and is trying to improve matters via renewed attention to the respect agenda.

Property matters (H1 and H2 combined) represented 9% of all applications made and an increase on the previous year. While not as high as some other areas, it remains the most time-consuming and difficult area for the IMB to investigate (see paragraph 5.8).

Concerns around canteen have also increased and are linked with category E2 concerning finance/spends/money. The two main areas of issue have been with canteen going missing and/or payment having been taken but canteen not delivered. The Board is aware that the prison has recognised an issue with canteen going missing and has undertaken an investigation. The Board is also aware that there have been some problems with the supply/delivery and courier service.

Accommodation was also a subject of increased dissatisfaction (8% of all applications).

Unsurprisingly concerns around purposeful activity have increased significantly this year (paragraphs 6.5, 7.1, 7.1.2).

It is a worry that there has been an increase in concerns around equality and the Board notes that strategies and initiatives to promote equality across all areas of prison life do not seem to have embedded sufficiently to have improved outcomes for prisoners (paragraph 5.4.1).

8.4 Covid-19 enquiry

The IMB undertook a short, focussed enquiry in the autumn of 2021 to better understand the experiences and views of prisoners in HMP Exeter during Covid-19 restrictions. We developed a limited set of prompts, made notes on the responses of 16 prisoners from as wide a range of prisoners as we could arrange and analysed them thematically. The report was concluded in November 2021, before the Omicron variant required the extension of restrictions.

We learned that the prisoners believed the following:

- Increased time in cells was very hard, and the mental health of many prisoners was challenged by isolation.
- Communications between the prison authorities and the prisoners suffered from some inadequacies and inconsistencies.
- Innovations such as Purple Visits were successful and should continue; appreciation was expressed for other innovations such as distraction and education packs.
- Young adults found coming into prison during the period of Covid restrictions very difficult, especially those who had hoped for help.
- Lack of opportunities for rehabilitation was one of the biggest costs of the epidemic. On top of this many services and sources of support for prisoners and for managing their sentences were absent.
- Lack of staff training and of experience for new officers was seen to affect prisoners' relationships with officers, and incidents of perceived lack of

respect or care were referred to. So were the efforts of the many staff who had mitigated the worst effects of restrictions.

In 2022 the Board intends to follow up on:

- introduction of the IMB to new prisoners
- monitoring the planning and implementation of post-Covid practice

The Board will seek further information from senior managers about:

- communications with the prisoners
- training of officers
- induction and support for young offenders
- planning how to deal with backlog of support activities

We expect to monitor further these areas noted above as well as the following:

- planning the safe easing of restrictions
- continuing with video visits

Glossary of abbreviations used in this report

ACCT	assessment, care in custody and teamwork
BAME	Black, Asian and minority ethnic
BWC	body-worn camera
CES	clothing exchange store
CRC	community rehabilitation company
CRS	community rehabilitative services
CS	constant supervision
CSIP	challenge, support and intervention plan
CSRA	cell sharing risk assessment
CSU	care and separation unit (segregation)
DIC	death in custody
DIRF	discrimination incident reporting form
EDMs	exceptional delivery models
EGS	enhanced gate security
GFSL	Government Facility Services Limited
GOoD	good order or discipline
KW	key worker
MDT	mandatory drug testing
OSG	operational support grade
PGD	prison group director
POELT	prison officer entry level training
PP	Payment Plus
PPO	Prisons and Probation Ombudsman
PS	psychoactive substances
SaSH	suicide and self-harm
SIP	Secreted Items Policy
SMT	senior management team
SRB	segregation review board
UoF	use of force
VP	vulnerable prisoner



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