



Annual Report of the Independent Monitoring Board at HMP Dartmoor

**For reporting year
1 October 2020 – 30 September 2021**

Published December 2021



Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Executive summary	5
Evidence sections 4 – 7	
4. Safety	10
5. Fair and humane treatment	13
6. Health and wellbeing	20
7. Progression and resettlement	25
The work of the IMB	29
Applications to the IMB	30

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
- 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 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 Independent Monitoring Board (IMB) is part of the United Kingdom's National Preventive Mechanism.

2. Description of the establishment

- 2.1 HMP Dartmoor is a category C training prison for up to 640 adult male prisoners.
- 2.2 The prison is situated in Princetown, on the western edge of Dartmoor National Park, eight miles from Tavistock and 16 miles from Plymouth (the nearest main-line railway station). Access is difficult, with very limited public transport. The local environment is harsh and can be particularly bleak in the winter months.
- 2.3 The prison comprises six residential wings (known in HMP Dartmoor as tors), a care and separation unit (CSU), a healthcare suite, a chapel, and education facilities and workshops. In addition, there is a large gym, a well-equipped kitchen and other facilities to support the life of the prison. A fully integrated smoke-free regime is in operation; all wings are integrated and accommodate main and vulnerable prisoners, including those who have committed sexual offences, in single cells. The prison and prisoners are supported by contractors and charities, either working in the prison or visiting on a regular basis.
- 2.4 The buildings are leased from the Duchy of Cornwall, and the Prison Service is responsible for their upkeep. Notice of termination of the lease has been given and the prison will close in 2023 unless the lease is renewed.
- 2.5 Most of the buildings in the prison are old but kept clean, built of granite and prone to damp. There are well-maintained and attractive garden areas. The prison is one of the major employers in the town, alongside agriculture, tourism and a brewery.

3. Executive summary

3.1 Background to the report

3.1.1 The Covid-19 pandemic has continued to have a significant impact on the Board's ability to carry out its duties. During most of the reporting year, members' access to the prison was more limited than usual, although prisoner applications were collected and limited onsite monitoring undertaken at least every week. This was supplemented by data provided by the prison in regular management reports, rather than from independent monitoring. In some areas, there was less supporting evidence collected. Until July 2021, the Board met once a month via telephone conference. Since July 2021, the Board has met in-person in the prison again.

3.1.2 Ministers are aware of these constraints. Regular information is being collected specifically on the prison's responses to the pandemic, and that is being collated nationally.

3.2 Main judgements

3.2.1 Throughout the reporting year, HMP Dartmoor has been under central Her Majesty's Prison and Probation Service (HMPPS) Gold Command, with measures to assist in managing the estate through the pandemic. The Board is pleased to report that these measures, coupled with the commitment and hard work of management and officers, have been successful for Dartmoor in limiting Covid-19 infections. Apart from one limited outbreak over Christmas 2020, which was soon contained, there have been no significant outbreaks in the prison. There was one death in the prison within 28 days of a positive Covid-19 test during the reporting year.

3.2.2 We commend management and staff for the support offered to prisoners during the pandemic. This is particularly notable in an environment where there has been a change of Governor following retirement, and a striking lack of continuity in the senior management team and wing management following retirement, other absences and a number of acting-up positions. There have been, for example, three Deputy Governors, three heads of residence and safety, and several officers acting up to senior officer/custody manager/governor grade in the year.

3.2.3 However, the Covid-19 measures have come at a price for prisoners and staff alike and the year has been atypical. For prisoners, there have been extensive lock-up times, no face-to-face visits for much of the year and restrictions on activities, which have had their own, largely detrimental, impact on prisoners and their wellbeing, as highlighted in the rest of this report. For staff, there have been the stresses and difficulties with coping with the prison environment during the pandemic, alongside concerns about the safety of their families, and all in the context of needing to cope with the uncertainties about closure and a frequently changing management team.

3.2.4 Since the last Annual Report:

- The closure notice and the current lack of clarity on how it is to be implemented have led to a situation in HMP Dartmoor that is now impacting negatively on many sections of prison life. This has been a theme of the last two reports and is a major theme of this latest report too. We have raised this

with ministers in our previous reports but do not consider our concerns to have been addressed in the replies.

- The closure notice continues to affect staff recruitment and retention, both operational and non-operational. We are also being told by functional management that recruitment in non-operational grades has become problematic. Over the course of the reporting year, the Board learnt of difficulties in filling vacancies in the kitchens, industries and healthcare teams.
- The Board's findings last year also show that, before lockdown, the lack of investment in buildings, staff and equipment was resulting in a shortage of work placements for the prisoners and increased their time in cells and on the wing. This has not changed, even as the regime has been relaxed.
- The number of times that the prison has been on a red or red/amber regime, resulting in prisoners being locked up for excessively long periods, especially at weekends, has increased, despite a relaxation in the restrictions imposed during lockdown, and is a matter of grave concern for the Board. Although some of this is caused by the number of bed watches and constant watches, staffing levels also have an impact here.

How safe is the prison?

3.2.5 We find that the prison is generally a safe place, a view generally supported by the many prisoners we have spoken to throughout the year. The uncertainties around closure and the lack of capital investment over recent years continue to raise several safety issues for prisoners and staff alike, including, for example, stretched staffing levels and the lack of drug scanners on entry, both of which have been reported in previous years. However, to its credit, the prison manages to work round the issues that arise, although the Board is concerned about how long these workarounds can be sustained. *(See section 4 for supporting evidence).*

How fairly and humanely are prisoners treated?

3.2.6 The prison works hard to ensure that prisoners are treated fairly and humanely. All areas of the prison have striven hard to support prisoners during lockdown, with in-cell education and faith packs, welfare visits for those considered vulnerable and, in the absence of physical visits, promotion of family contact through Purple Visits (a video-calling platform).

3.2.7 In the early part of the reporting year, prisoners continued to tell us that they only had less than 60 minutes a day out of their cell. Prison management have worked hard to extend this, and by the end of the year a minimum of 90 minutes was being targeted, with further significant extensions of unlock times planned beyond year-end. The Board has concerns that the lack of operational staff at certain times

means that prisoners are still locked up on some days for far too long. This is a particular problem at weekends. *(See Section 5 for supporting evidence)*

3.2.8 Monitoring evidence as the Covid-19 regime relaxes points strongly to prisoners now not being afforded the level of regime, amenities and equipment that they should expect. Examples include: a lack of staff, impacting on unlock times and on wing regime restrictions, including access to showers and telephones; under-investment in the infrastructure, with frequent outages of television services and telephones; and the impact on prisoners of frequent breakdowns in kitchen and laundry equipment. The Board increasingly questions how HMPPS proposes to address these issues in a prison due to close in 2023.

How well are prisoners' health and wellbeing needs met?

3.2.9 Supported by prisoner comments during the year, the Board commends the professionalism of the healthcare teams, who have continued to treat prisoners face-to-face at a time of high-risk and challenging staffing levels, through the Covid-19 pandemic.

3.2.10 Based on our monitoring, the Board is of the opinion that healthcare provision to prisoners is generally of a good standard and is provided in a professional and timely manner. However, we are concerned about limitations on the mental health support available to prisoners, particularly in an environment of extended times locked up in cells. We also have concerns about the long waiting times for non-emergency dental support. *(See Section 6 for supporting evidence)*

How well are prisoners progressed towards successful resettlement?

3.2.11 Dartmoor is not a resettlement prison but has released 220 prisoners back into the community during the reporting year. Before lockdown, and within the resource limitations of a training prison, staff tried hard to give prisoners adequate preparation for release. During lockdown, it was even harder to ensure adequate preparations. Since the regime has been relaxed, these preparations have started to be put back in place, but the Board remains concerned that some prisoners are being released back into very temporary accommodation, with only limited support being offered. *(See section 7 for supporting evidence)*

3.2.12 The Board understands that inter-prison transfers were minimised nationally during the pandemic but, with transfers resuming, the Board remains of the opinion that it would be better if prisoners due for release were transferred in adequate time to a resettlement prison where they can be given the full resources and advice that HMP Dartmoor is unable to provide. *(See section 7 for supporting evidence)*

3.3 Main areas for development

TO THE MINISTER

1. Concerns raised to the minister in the previous report have, in the opinion of the Board, not been addressed adequately, even when follow-up clarifications were sought by the Board. In particular, the lack of clarity on closure is having a detrimental effect on the prisoner experience (lack of investment, staff shortages impacting on the regime) and on staff (impact of uncertainties on home life, turnover, recruitment). What measures does the minister plan, to ensure that concerns raised in this report are meaningfully addressed? (*Ref: 3.2.4*)
2. What reassurance can the minister offer that until HMP Dartmoor closes in 2023, prisoners currently in the establishment will not be harmed or discriminated against, compared with other prisoners elsewhere in the national prison estate, due to a lack of staff and a failure to invest in the infrastructure, security, kitchens, laundry and other equipment? (*Ref: permeates report*)
3. HMP Dartmoor still had 29 prisoners serving indeterminate sentences for public protection (IPPs) at the end of the reporting year. Most are substantially over tariff or have been subject to recall. What changes are in the pipeline for these individuals? How will their release be achieved and how will they be supported on release, so that they do not endlessly return to prison under recall? (*Ref: 7.5.4*)
4. The long wait for psychiatric hospital placements (96 days in one case this reporting year) is of concern to prisoners, staff and the Board. What measures are being taken by the MoJ, working with other Departments, to reduce these waiting times? (*Ref: 5.2.7*)

TO THE PRISON SERVICE

1. What is the path for Dartmoor prisoners who require 24-hour health or social care support? (*Ref: 6.2.8 and 6.4.3*)
3. When is the prison going to receive the funding necessary to help return towards fuller employment? (*Ref: 7.2.2*)
4. What measures are planned to help ensure that the release planning model is fully implemented, to support prisoners coming towards release, including the timely community offender manager/prison offender manager handover? (*Ref: 7.3.3*)

TO THE GOVERNOR

1. How will the Governor continue to track the recommendations from last year's IMB annual report, which have been in abeyance because of the Covid-19 regime? (Ref: 3.4)
2. What measures are in place to ensure that all wings (tours) always have complaint forms available, to protect a prisoner's right to complain? (Ref: 5.7.2)
3. What steps will be taken to strengthen the discrimination incident report form system and ensure adequate and timely responses to all submissions? (Ref: 5.4.11)
4. Given Dartmoor's remote location, can the Purple Visits system be expanded to the benefit of more prisoners and their families? (Ref: 7.4.2)
5. Given the importance of family communications, when will the prison take forward in-cell telephony, including completing the required asbestos survey? (Ref: 5.1.8 and 7.4.3)
6. On a small number of occasions, prisoners have not been able to access Listeners and the Samaritans at night. What steps is the prison taking to ensure that these services are available at all times of the day and night, including making sure that all staff understand that access to these services should be allowed? (Ref: 4.3.7)

3.4 Progress since the last report

3.4.1 Given the Covid-19 lockdown, there has understandably been limited progress on many of the issues raised to Governor in the last IMB annual report. As the prison progressively unlocks, it is fair to say that prison managers are mindful of, and beginning to address, the questions raised last year, concerning equality, support to prisoners who have been shielding for a long period, the dialogue road mapping scheme, body-worn cameras and the library service. For example, although the situation has somewhat improved, there is still inconsistency regarding the use of body-worn cameras, and this needs addressing as a matter of urgency. In addition, the Board notes the continued lack of library stock refresh and inter-library loans.

Evidence sections 4 – 7

4. Safety

4.0.1 The management of safety is the responsibility of the head of residence and safety. Regular meetings concerning safety intervention, safer custody and use of force are held, and the minutes have been circulated to the Board for remote monitoring. This has been particularly useful this year, as our attendance at meetings has been very limited due to lockdown. The Board is concerned at the low level of attendance at recent meetings of the safety intervention committee and the potential impact on the support of prisoners in greatest need.

4.0.2 The Board receives the safer custody reports daily, which has enabled, during the pandemic, some monitoring based on data of prisoners who are on an assessment, care in custody and teamwork (ACCT) document, those on a challenge, support and intervention plan (CSIP) and those who have recently ceased medication, and trigger dates which may provoke safety concerns.

4.1 Reception and induction

4.1.1 The Board monitored the reception and first night procedures, when the regime allowed, and found them to be satisfactory. In the first half of the year, transfers were minimal, reflecting national Covid-19 protocols. As regimes have slowly eased, transfers have increased, with individual transfer groups being isolated on arrival in separate cohorts.

4.1.2 Before the restrictions to the regime, Board members would attend the weekly induction sessions held in the gym, to inform prisoners about the work of the Board. These sessions are currently not taking place, but the Board hopes that they can be reinstated soon.

4.2 Suicide and self-harm, deaths in custody

4.2.1 There were three deaths in custody during the year. The coroner's reports are not yet available.

4.2.2 The average monthly total of self-harm incidents was approximately eight, which is slightly lower than in the last reporting year. The vast majority involved prisoners under the age of 40, and half were prisoners who had a registered disability. Such incidents were spread across all wings. Towards the end of the reporting year (July 2021), just over 20% of the prison population had a history of self-harm, of which 3% were currently active.

4.2.3 The monthly total of ACCT documents throughout the year peaked at 39 in November, with a low of 18 in December. A revised ACCT document was introduced in July, with the objective of improving the delivery and culture surrounding the ACCT process. It is too early to draw conclusions as to the success of this, but early signs are encouraging, based on the small number of ACCT documents Board members have reviewed. With the Covid-19 restrictions, no ACCT reviews were attended during the year.

4.2.4 The ACCT care plans monitored by the Board appeared more comprehensive than the previous system, and better detail the sources of support. Case reviews seen by the Board were thorough and detailed, although some of the ongoing records were not always fully completed. When talking to prisoners on an ACCT, most were generally positive regarding the support they were receiving, but a small number felt that the ACCT was becoming a substitute for counselling, relevant courses, and access to the offender management unit (OMU) and key workers.

4.2.5 The Board raised concerns with the prison's management that the cells for prisoners who are under constant watch are drab and unwelcoming, and not therapeutic. The Board understands that, towards the end of the reporting year, funding has been found for these cells to be refurbished.

4.3 Violence and violence reduction, self-isolation

4.3.1 When talking to prisoners on the wings, while not claiming to be a comprehensive survey, the overall impression is that they feel safe, both in their cells and on association. Those who have spent time in other prisons often comment about the relative safety of Dartmoor, and the incidents that arise are often the result of drug and debt issues. Some of the older prisoners mention the safety concerns they sometimes feel when mixing with other prisoners, particularly in vulnerable areas, such as when they go to collect medication. Board members themselves feel safe when carrying out their duties around the prison.

4.3.2 The Board has received 35 applications this year relating to staff/prisoner concerns, including bullying. A small number were multiple applications from the same individual.

4.3.3 The number of prisoners on CSIPs has varied throughout the year. In February, there were eight prisoners, half of them for more than 120 days. At the end of the reporting year, only one CSIP was open. The CSIP exit strategy for these prisoners is not always clear to the Board.

4.3.4 At the end of the reporting year, three prisoners were self-isolating. The number self-isolating has varied throughout the year, with some prisoners isolating for long periods of time.

4.3.5 The Board witnessed first-hand the excellent support that 'buddies' provide to prisoners on all wings, and this was confirmed in discussions with the prisoners being supported.

4.3.6 During the early part of the reporting year, the number of Listeners was reduced to two and the service was only available part-time, with calls to the Samaritans being the alternative. The Board is pleased to report that at the end of the reporting year, following the reinstatement of training by the Samaritans, which Listeners consider excellent, a full complement of eight Listeners is now in place. We are told by Listeners that the most common callout, representing over half of the requests, concerns anxiety over a perceived lack of information and support regarding release and resettlement.

4.3.7 On a small number of occasions, the Board has noted that prisoners have not been able to access Listeners and the Samaritans during night patrol state, and this has been raised with management. This will continue to be monitored by the Board over the course of the next year, as it is clearly an unsatisfactory situation.

4.4 Prisoners with specific vulnerabilities

4.4.1 It has been a particularly difficult year for prisoners with specific vulnerabilities, given the long lockups and reduced social interaction. Although key working substantially stopped throughout the year, the prison has done its best to support vulnerable prisoners, both through normal wing-based support, and through the ACCT process and daily/regular visits from a welfare team and the chaplaincy.

4.5 Use of force

4.5.1 During the reporting year, there were 173 recorded incidents involving the use of force, which is a slight reduction on the previous reporting year. The vast majority were spontaneous unplanned incidents.

4.5.2 In last year's annual report, the Board raised concerns regarding the inconsistency in the use of body-worn cameras, and this remains an issue. For example, only 50% of incidents were recorded in October 2020, and 40% in May 2021. The prison has explained to the Board that this is partly down to times when the system or incident does not allow body-worn cameras to be drawn. However, the Board would hope that the figures increase.

4.5.3 During the year, Board monitoring noted a consistent improvement in the completion of use of force paperwork, with 91% completed at the end of the year. Very few incidents resulted in injuries to prisoners and staff.

4.5.4 Training in the use of force has taken place and the prison has been signed off for spontaneous protection enabling accelerated response (SPEAR) and the use of PAVA (a synthetic pepper spray), and a training programme has been drawn up. The Board will be monitoring the progress of these initiatives in the forthcoming year.

4.6 Substance misuse

4.6.1 Despite the best efforts of prison and healthcare staff, substance misuse continues to be an issue with drugs entering the prison. The Board welcomes an increase in the use of dogs this year, which are now used in the prison daily to track down illegal substances.

4.6.2 Integrated substance misuse service workers continue to work with prisoners to tackle their addiction in very challenging times. They tell us that the link between access to drugs and violence remains a major safety issue, although compared with other parts of the prison estate, levels of violence are low.

5. Humane treatment

5.1 Accommodation, clothing, food

5.1.1 There are six residential wings, named after local Dartmoor tors, not including the safer custody care and segregation unit. Using information provided by the operational briefing sheets on sampled dates, the occupancy has ranged from 614 prisoners in December 2020 to a low of 561 in June 2021, and up again to 617 at the end of September 2021.

5.1.2 In general terms, the accommodation on the residential tors is maintained in a tidy condition, with some wings achieving a particularly high standard of cleanliness. Complaints to the Board about accommodation represent a consistently low proportion (10 out of 180 in the current reporting year, compared with nine out of 134 in the previous period). Of these, none have been about a lack of cell furniture.

5.1.3 The number of cells out of use on sampled dates has varied during the year, from a low of two (in June) to a high of 16 (in April) and this reflects the challenges presented by wet weather to the building fabric. It is significant to note that where cells are taken out of use due to water ingress, they tend to remain so for a period of several weeks rather than days. There is also clear evidence of water damage to plaster on Arch Tor and Granite Tor west-facing elevations, and visits to some cells on Down Tor by Board members also noted damaged plaster within cells.

5.1.4 The Board was concerned that for a significant period of the reporting year, prisoners complained that they had only 30 minutes out-of-cell time daily in which to manage their showers, telephone calls, etcetera. The regime stage-related increases to one hour and subsequently to 90 minutes have been widely welcomed, although the frequency of red and amber/red states due to staffing availability and other staffing commitments, including bed watches and constant watch (particularly at weekends), has impacted negatively on these improvements.

5.1.5 The Board was pleased to note the additional time (specifically cited in a 'notice to staff') afforded to prisoners working in recycling and the kitchen to shower before taking their meal, although in some cases this has, again, become a cause for prisoner complaint towards the end of the reporting year due to its non-observance.

5.1.6 Shower units on the tors differ in number, location and layout. In general, privacy screens or curtains continue to be maintained effectively and prisoner cleaning teams keep shower facilities in generally good condition. In Down Tor, the restricted access to the showers prevents the use of privacy doors, which, in turn, compromises decency. The redecoration of the shower units which took place previously still holds them in a good to satisfactory condition, although it has been noted that the ceiling in the Arch Tor showers is flaking and peeling. During the reporting year, funding was found to rectify some of the units, although not on all tors.

5.1.7 During the year, Board members heard, both from prisoners and through several applications received, about failures with the television system and telephones in various parts of the prison. This was a cause of some frustration to prisoners, particularly during the periods when out-of-cell time was most seriously restricted. There has been, and is still, a continuing frustration that these services have failed to achieve a degree of reliability on most wings. As the rectification service is contracted in through Gov Facility Services Limited (GFSL), response times varied, as did the perceived quality of the rectification.

5.1.8 The possibility of in-cell telephony was raised during the year, but this seems to have been delayed because of requirements to first complete an asbestos survey.

5.1.9 The Board commented positively last year on the installation of wing-based washing machines and driers, but where these units fail, there can be a significant period before a replacement is procured – it took three months to procure and supply this on Granite Tor – and this in turn combines with other inconveniences in generating frustrations for the prisoners.

5.1.10 It is understood that the replacement of the main laundry boilers has been postponed as a capital expenditure item, so, except for a period in June 2021 when laundry had to be transported to HMP Channings Wood, the equipment has needed constant attention, and staff and prisoners alike should be recognised for all their work in helping to keep the boilers working.

5.1.11 The Board is pleased to note that the kitchen has managed well throughout this reporting period, including special menu provision for Christmas, Easter and for those adhering to the strictures of Ramadan, despite a reduced kitchen staff and prisoner team, and some major items of equipment awaiting repair. The quality of meals is regularly observed through rota visits and generally appears appetising, with very few adverse prisoner comments. The use of wing-based comment books has generally ceased due to Covid-19 handling procedures, and the Board hopes that these can be reinstated soon.

5.1.12 Board members have noted formally on several occasions the frustrations of the kitchen management team that several equipment repairs have been 'on the books' for several months without effective rectification or replacement. One flooring repair, which kitchen staff tell us has a health and safety implication, has been outstanding for much of the year and remains so. More recently, the attempts to recruit two members of staff have been hampered by administrative delays in obtaining necessary clearances and, we are told, little interest in filling the posts due to the prison closure notice.

5.2 Segregation

5.2.1 There are seven cells for use in the CSU and, although busy, it is not usual that the unit is completely full, which allows some flexibility of movement. The cells are cleaned and decorated by two prison orderlies, whose work is frequently praised by

officers. In this reporting year, work has been carried out by maintenance teams to provide new entrance doors and a bright holding room on the unit.

5.2.2 The cells have a bed and a chair, but efforts to provide risk-assessed tables in all the cells have not materialised so far. In early spring, wooden tables arrived, which staff had not ordered and recognised were not appropriate; however, they were placed in the cells and two were destroyed in two days. The cells do not have televisions but there is a small library of books, and prisoners are provided with distraction materials if needed.

5.2.3 The Board is notified promptly whenever a prisoner arrives on the unit, with relevant information, concerning whether he arrived under restraint, is on an ACCT, and the reason for admission to the unit. During this reporting year, the Board has continued weekly visits to the CSU and attended segregation good order or discipline (GOOD) reviews whenever possible. Each prisoner is spoken to individually during visits. Almost all prisoners appreciate the support that they received from CSU staff. Some adjudications are also attended by Board members. In addition to this, one Board member speaks by telephone weekly to the staff in the CSU about the current intake.

5.2.4 Prisoners placed in cellular confinement are encouraged to behave by an incentive scheme recently introduced, whereby good behaviour can result in a return to the wings after two-thirds of the days in the CSU have been served. The paperwork for prisoners spending long periods in the CSU is made available to Board members.

5.2.5 There have been two prisoners who have started dirty protests in the unit in this reporting year. These were dealt with efficiently by moving the prisoner daily into an empty cell to allow cleaning.

5.2.6 Based on our monitoring, the officers in the CSU make good relationships very quickly with the prisoners placed there, some of whom have very complex behaviour and mental health difficulties. Staff shortages in the prison sometimes result in officers having to provide temporary cover in the CSU, and it is then obvious that they are in unfamiliar surroundings and do not have the in-depth knowledge of the prisoners that the team usually displays.

5.2.7 A number of prisoners spent particularly long periods in the CSU in this reporting year, which was of concern to the Board and prison management, with whom care and future plans were discussed. Two prisoners with complex mental health issues were there 71 and 75 days, respectively; the latter was a prisoner serving an indeterminate sentence for public protection (IPP) who was many years over his tariff. One frequent returner had his spell in the CSU broken by staying in the constant watch cell on a wing, and then returned for a further 71 days before transferring. The final two long-stay prisoners had been assessed as fitting the criteria for a secure mental health facility and waited 62 days and 98 days, respectively, for a transfer. The long wait for psychiatric hospital placements has been a concern for the Board, and we would welcome an improvement in the length of time for assessment and transfer. *(See question to Minister).*

5.2.8 Occasionally, prisoners are kept on GOOD in normal location. There has been one such case during this reporting year, when the prisoner was too anxious to go to the CSU. A Board member attended his review meeting on the wing, which was conducted in a supportive manner.

5.2.9 The statistics gathered about the performance and management of the CSU are monitored by segregation monitoring and review group meetings, which were taking place bi-monthly pre-pandemic. There have not been any meetings during this reporting year.

5.3 Staff/prisoner relationships, key workers

5.3.1 Staff/prisoner relationships at Dartmoor are generally observed to be good and supportive, a view that is generally endorsed by the prisoners we speak to.

5.3.2 The Board understands the difficulties that were presented in conducting key work during lockdown due to the Covid-19 pandemic. However, since lockdown restrictions began to be relaxed, very few, if any, key work sessions have been carried out. This is a matter of regret, and the Board supports the prison's intention for key work to return, hopefully to at least at its pre-pandemic levels, of some 65% of all prisoners having a regular weekly meeting with their assigned key worker.

5.4 Equality and diversity

5.4.1 The prison's own population tracker, as at September 2021, reported 245 prisoners who had self-declared a disability on reception, 29 foreign nationals from 18 nationalities, 44 Black, Asian or Minority Ethnic (BAME) prisoners, 480 prisoners self-declaring as heterosexual/straight and 21 declaring as gay or bisexual. These figures have remained broadly constant throughout the reporting year.

5.4.2 Board monitoring indicates that prison management and staff generally place a high priority on fair treatment and equal access to services for all prisoners. However, this generally high personal commitment from management and officers is not well supported or overseen by management processes, although these are slowly being introduced as Covid-19 restrictions ease.

5.4.3 As recorded in the Board's last annual report, prisoner forums ceased with lockdown, including those relating to equality. Towards the end of the reporting year, as the prison progressed to stage 2 of the HMPPS recovery plan, the forums slowly returned. The diversity inclusion action team (DIAT) has recently met twice (July and September), a full-time equalities officer has been appointed, prison staff protected characteristic strand leads have been appointed and the expectation is that prisoner representatives will be appointed and attend the next DIAT meeting. We commend these steps, which include reinstating prisoner-led forums to represent the interests of communities, including those who are over 50; Gypsy, Roma and Traveller; and black, Asian and minority ethnic prisoners. As an initial step, the coordination of weekly meetings for black, Asian and minority ethnic prisoners on individual wings have recently been recommenced, facilitated by the prison.

5.4.4 The positive steps being taken before lockdown to develop further equality and diversity needs, including a new day centre and reviewing the availability of activities

for older prisoners in the diversity centre, have understandably been on hold during lockdown. It is planned that the day centre for older prisoners (Two Bridges), which opened in late 2019 but subsequently had to close, reopens as soon as it can under Covid-19 restrictions, focusing on prisoners with special needs such as dementia. It will provide activities for 15–20 prisoners on a morning and afternoon rota basis. Activities for older prisoners are also currently being reassessed as restrictions ease.

5.4.5 On a few isolated occasions, fairness and equality of treatment is not always achieved. Where the Board has had concerns and has raised them with management, rapid action has been taken. For example, a foreign national prisoner with very limited English was moved to a wing where another prisoner spoke his language after Board involvement. It is also noted that few prisoner applications to the Board have related to diversity or equality, a similar picture to last year.

5.4.6 HMP Dartmoor remains a challenging environment for those with restricted mobility. The challenges for those using a wheelchair in accessing their cells and other areas of the prison, as reported in previous annual reports, remains. The Board has observed that the stairlift for indoors chair access to the healthcare centre has only been working intermittently, requiring users to go outside and be exposed to the elements. On a positive note, during the year an emergency evacuation test was successfully conducted of prisoners with mobility issues on F wing, using specially procured wheelchairs for this purpose.

5.4.7 At the start of the Covid-19 lockdown, Fox Tor was dedicated as a shielding unit for a small group (26) of the most clinically vulnerable prisoners. This has continued until the end of the reporting year, although shielding restrictions are now easing. Board members have spoken to most of these prisoners, and they tell us that they feel well protected and are extremely appreciative of the support received from staff, including, where feasible, an unlocked cell policy. Several have continued to tell us that reduced mobility from the lockdown has had an adverse impact on their health, and some say that emerging from a long period of shielding may be difficult for them.

5.4.8 It is also noted that concerns have been raised to the Board this year about the care of prisoners with dementia and on the autistic spectrum, both of which conditions require both the specialist training of staff and the benefit of consistency of staffing, which have not, the Board has been told, always been available – the latter sometimes due, for example, to the need to cover for staff absence.

5.4.9 The prison received 27 discrimination incident reporting forms (DIRFs) during our reporting year. Pre-Covid-19 lockdown, a system was introduced where the responses to 100% of these forms were independently quality assured by an external specialist. An initial review by the specialist highlighted that there were prison training needs in the handling of DIRFs. The Covid-19 lockdown intervened and work here was suspended. This independent review has not been re-established and training has not yet been completed.

5.4.10 We monitored the prison records of responses to the 27 DIRFs in the year. Seventeen were not upheld, many of which related to recategorisation to category D

and delayed transfers, rather than DIRF issues. Only four were upheld, three of which related to prisoners fasting during Ramadan and not being unlocked in the middle of the day as they were fasting. This was rapidly addressed, and the prisoners were unlocked.

5.4.11 Based on the Board's monitoring, the DIRF system is responded to inconsistently, with frequent poor documentation and little evidence of independent quality assurance during Covid. Of particular concern was the number of DIRFs where it was not clear to us how they had been processed and resolved, and a small number where there appeared to be no management follow-up when a prisoner signs to say that they wish to withdraw the DIRF having spoken to wing staff. A Board member also spoke to a governor who, according to the records was investigating an overdue DIRF response. This governor had no knowledge of the DIRF. (See *question to Governor*)

5.5 Faith and pastoral support

5.5.1 Throughout the year, members of the chaplaincy team have been in the prison during the day and 'on call' out of hours. Prisoners have, again, frequently expressed to the Board their strong appreciation of the faith and pastoral care they have received during the pandemic. This includes the support that they received day to day, and also during times of personal or family crisis.

5.5.2 The chaplaincy continues to support prisoner welfare, seeing prisoners regularly (with 2,500 pastoral visits in the reporting year), attending substantially all ACCT (1,200 reviews) and GOOD reviews, as well as supporting all prisoners being discharged. The ACCT review attendance is of particular importance to prisoners as, at present, neither the mental health nor substance misuse team can attend every ACCT.

5.5.3 Bereavement and crisis support by the team has also been particularly important during the pandemic. The Board commends the introduction of iPads, enabling live streaming of some funerals and the capacity to hold a virtual compassionate visit. Over the last six months, some funeral and compassionate in-person visits have resumed. Chapel memorials for individual prisoners have continued throughout the year, as have individual one-to-ones and quiet time.

5.5.4 Throughout the year, in-cell faith materials have continued to be provided to support prisoners of all faiths. Most of the material has been produced by chaplaincy HQ, but the Church of England/Free Church material is produced by the chaplaincy team in Dartmoor and shared with HMP Exeter. This has been a major workload for the team, alongside their other responsibilities, with over 12,500 individual faith sheets delivered over the year. Our monitoring indicates great appreciation from prisoners for this in-cell material.

5.5.5 As the prison moves to stage 2 of the HMPPS recovery plan, congregational services are resuming as of at the very end of our reporting year. However, because of restrictions on cohort sizes, it is estimated that the Sunday chapel service will only

be available to individual prisoners every six weeks. Attendance at Roman Catholic mass will be every two weeks. The Board notes that this part congregational, part in-cell interim arrangement places additional work on the chaplaincy, as the in-cell material will still need to be prepared, as well as services prepared for.

5.5.6 On average, 2.2 full-time-equivalent (FTE) chaplains are in the prison on any day. There have been several changes to the chaplaincy staff and volunteers during the year, with staff leaving or reducing their hours, and new staff and three volunteers are being recruited and awaiting security clearance.

5.6 Incentives schemes

5.6.1 It has not been possible to observe how the new rewards and incentives scheme, introduced in January 2020, has been received as the regime required in response to Covid-19 precluded the use of the basic level of the scheme and the general activities that would have opened the track to rewards and privileges. This area is currently being reviewed and updated by the prison.

5.7 Complaints

5.7.1 The Board received several oral and written applications alleging the loss of complaints submitted following the prison's complaints procedure. Although it would be correct to note that not all complaints (Comp 1 and Comp 1a) have been processed within the set-out time scales, enquiries with the complaints clerk have consistently confirmed the proper recording and tracking of a complaint.

5.7.2 The Board is concerned that official prison complaint forms (Comp1 and Comp 2), which represent an important lifeline to prisoners, were at several times during the year reported as being unavailable on some of the wings. Both staff and prisoners have repeatedly raised this issue with members of the Board during rota visits. *(See questions to Governor)*

5.7.3 Healthcare manages and monitors healthcare complaints, looking for patterns and managing any investigations. These are not monitored by the Board. However, the Board has fed back concerns raised by prisoners that complaints about healthcare can sometimes appear to be adjudicated on by the people involved in the initial complaint.

5.8 Property

5.8.1 The Board was pleased to note a continuing low number of complaints regarding loss of property within the prison (up from four to six since last year). There were, however, still 18 complaints concerning property lost immediately prior to transfer or in transit to the prison. The facility for prisoners to bring more of their personal kit with them in transit, rather than have it sent separately due to space limitations, appears to have helped reduce the number of complaints during the current year.

6. Health and wellbeing

6.1 Healthcare general

6.1.1 Primary care services were commissioned by the NHS from Practice Plus Group (previously known as Care UK), which provides services to over 40 prisons. Mental health services are sub-contracted through Devon Partnership Trust; substance misuse services through Exeter Drugs Project; and dental services through Time for Teeth. No Care Quality Commission assessment was carried out during this reporting year.

6.1.2 During this reporting year, due to the Covid-19 restrictions, the monitoring of healthcare provision has involved a mixture of rota visits; attendance at the local delivery and quality meetings (chaired by the Governor); attendance at GOOD boards; regular reports from, and meetings with, the head of healthcare; the monitoring of daily and weekly management information; conversations with prisoners and data from other reports. The patient forum, which includes prisoners, has not met during this period.

6.1.3 The Board has concerns about the length of time that prisoners wait for dental treatment – up to two years in some cases – but acknowledges that this reflects similar waiting times outside the prison.

6.2 Physical healthcare

6.2.1 The Covid-19 pandemic had a profound impact on the delivery of healthcare, as the prison regime required the continuation of enforced social distancing and regime restrictions. The Board commends the fact that there have continued to be good, supportive relationships between the healthcare teams, prison officers and prisoners to tackle the challenges. The Board recognises that the shielding and cohorting strategies have been successful in shielding vulnerable prisoners and preventing possible infection spread from new arrivals into the prison, as well as isolating people with symptoms of Covid-19. This strategy, along with good infection prevention and control practices and outbreak management, has resulted, in relatively few Covid-19 outbreaks. An outbreak in December 2020 resulted in 142 prisoners contracting Covid on four of the tors, but it was quickly contained, and by early January 2021 the outbreak had been concluded.

6.2.2 The vaccination rollout has proceeded along national guidelines with, at our year end, 84.7% of prisoners vaccinated and 14.8% declining. Work continues to improve the acceptance rate, although it is reported that vaccination supplies are now becoming a limiting factor.

6.2.3 Primary care is run by a team including GPs, nurses, pharmacists and healthcare assistants. The full complement is 23 FTE staff. However, at the end of the reporting year there were six vacancies, including the GP post, which has

remained vacant, with locum cover, for a considerable period. Recruitment across all posts is proving to be difficult, in part due to the closure notice that is in place. The Board has been told that this situation is likely to get more problematic as we get nearer to the closure date. In addition, successful candidates have been lost due to the slow administration of security clearance. The vacancy rate, together with sickness and isolation levels, has made staffing difficult and has resulted in some clinics being cancelled due to a shortage of staff.

6.2.4 Patient surveys conducted by Practice Plus continue bi-monthly, with a high return rate between 66% and 85%. The responses are positive, with over 95% recommending the service, and confidence in it above 83%. Overall, excellence ratings dipped in the late summer, from 84% to 72.73%. This coincided with a cluster of concerns raised by the Board through rota reports that some prisoners have expressed the view that the responsiveness and service quality declined during July and August, particularly on the shielding wing, Fox Tor. Several factors may have contributed to these concerns: two experienced 'buddies' left the prison; there were changes in the procedures relating to local authority care plans; a long-serving nurse, who had worked on the wing for many years, retired and was not replaced like-for-like due to resource limitations; and changes in healthcare priorities as the regime changes had taken effect. The Board acknowledges that the head of healthcare is aware of these concerns and is taking steps to ensure prisoner confidence and good service provision.

6.2.5 In line with the recent move of the prison to stage 2, the plan for re-introducing services halted during the pandemic and reducing the backlogs has been implemented. All clinics are now working as near to full capacity as possible. However, it will take some time for services fully to recover as, due to social distancing, waiting room capacity, cleaning regimes and the need for safe practice, clinics will be operating below full capacity for some time. As part of this, actions are being taken by healthcare staff to reinstate the patient forum, but all the previous members have now moved out of the prison and it is proving difficult to recruit prisoners, despite considerable effort by the healthcare staff.

6.2.6 Dental provision and non-urgent two-year waiting times continue to be a challenge but are not out of kilter with those in the general population. Urgent needs are met in a timely way but, due to the Covid-19 restrictions, some aerosol-generating treatments have not been available or can only be done at the end of a surgery and, because of the cleaning regime, fewer people can be seen. Additional dental provision has been requested and approved but not yet implemented. Waiting times for optician and podiatry appointments are improving significantly.

6.2.7 In addition to the delivery of healthcare services, the healthcare staff contribute to GOOD and ACCT reviews, as well as visiting the CSU to certify the fitness of prisoners for segregation. The Board's monitoring indicates the need for better communication relating to ACCT reviews, as in some cases mental health staff were not informed, so the review was completed without their input.

6.2.8 One major area of concern for healthcare staff, the prison and the Board relates to the number of complex needs patients and hospital admissions that result in long-term bed-watches, due in part to the high number of older, chronically sick prisoners. The physical environment at Dartmoor is not appropriate to care for those patients who require enhanced 24-hour care/social care and it does not meet their needs.

6.2.9 Other issues brought to the Board's attention by healthcare staff include the pressure on hospital escorts due to staffing issues, and late receptions resulting in difficulty in completing a full health screening at the time of transfer.

6.3 Mental health

6.3.1 The mental health team comprises a full-time senior mental health practitioner and senior assistant psychologist, together with part-time consultant psychologists, shared across two other prisons; there are also shared nurse specialist posts in learning disability, attention-deficit hyperactivity disorder, older person's mental health, autistic spectrum disorder and patient engagement. The autism specialist, based at HMP Channings Wood, has left the service and not yet been replaced.

6.3.2 Mental health awareness training for prison officers and training on the impact of autism are being offered by the mental health team, but attendance by officers proves to be a problem due to staffing issues. Based on our monitoring of staff/prisoner interactions on the wing for those on the autistic spectrum, further training is a priority and would in some circumstances benefit prisoners and officers alike.

6.3.3 During the lockdown period and under the restricted regime, monitoring by the healthcare team indicated an increase in prisoners self-reporting mental health issues, and this was also evidenced by reports from prisoners on ACCTs, the use of psychoactive agents (such as 'spice') and incidents of self-harm. Throughout the period of lockdown, the levels of distress have understandably risen, and the Board's monitoring indicates that healthcare staff consider there to be an increased number of anxious and troubled prisoners. The Board understands that the move to stage 2 increased the challenges of access to patients and has impacted on the number of 'did not attends' and no access visits for appointments. The Board hopes to see an improvement as the regime is relaxed.

6.3.4 Healthcare staff report an increase in the number of younger violent prisoners with undiagnosed behavioural problems, trauma and frequently with complex needs that are beyond the services offered by the mental health team within the current commissioning agreement. There has, for example, been a continued increase in the number of prisoners with personality disorders and more serious enduring mental health conditions.

6.3.5 The Board is concerned that current services do not cover cognitive behavioural therapy, trauma working, talking teams, trauma work, some group work

and counselling. As a result, the mental health unit is not resourced to provide the full range of services that are now required as the prison emerges from the pandemic and cannot therefore totally meet the needs of the prison under its developing profile.

6.3.6 Staffing in the mental health team has been difficult due to vacancies, sickness, training and annual leave, and often only minimal qualified clinical cover has been in place. The increase in mental health issues due to the lockdown and associated regime changes has combined with reductions in available services due to staffing limitations and restricted ways of working, which the Board acknowledges has created a challenging working environment, although the timescale for referrals is met in 90% of patients.

6.3.7 The Board was particularly pleased to note that a small number of prisoners whose mental health was being affected by the 23-hour lock-up were found jobs to help them overcome their issues and commends the partnership working that saw this established. The Board also welcomed a new initiative to establish four paid mental health peer support workers on Burra Tor; training has now been completed and the support is active.

6.3.8 During this reporting period, there have been two occasions when there have been significant delays in transfers to secure mental health hospitals. Both prisoners spent significant periods of time – up to 92 days – in segregation. Even after an assessment was carried out, prisoners had to wait for an unacceptable period before being transferred to secure mental health provision. It is the view of the Board that this created an inhumane situation for the individuals concerned, as their mental health significantly deteriorated during this period. The situation also impacted on other prisoners within CSU, as well as the staff.

6.4 Social care

6.4.1 There has been a significant increase in social care need during the year, with the number of prisoners receiving a social care package having risen during this year, from five to 13, and to a total of 51 hours of support per week. The care packages range from support with showers to regular welfare checks. Based on our monitoring, the Board is concerned that this increase is causing problems due to the lack of capacity within the healthcare team.

6.4.2 Buddies provide support and non-intimate care to approximately 30–40 prisoners, and their work is highly valued and carried out to a very high standard. During this period, several experienced buddies have moved from the prison and, due to the pandemic restrictions, training for replacements from RECOOP (Resettlement and Care of Older Prisoners) has been restricted.

6.4.3 If social care support is not provided over a 24-hour period and when needed, patients will not be safe to remain in the establishment, and there is a difficulty in

moving such patients to establishments which can meet their needs. The Board understand arrangements here to be under current review.

6.5 Exercise, regime

6.5.1 As already noted in this report, the Board has, throughout the year, felt it necessary to raise serious concerns around the amount of time that prisoners have out of their cells, including exercise time. Prison managers are fully aware of the impact of these restrictions and have done their best throughout the year, within the Covid-19 and cohorting guidelines, and staffing, to increase time out of cell. At the end of the year, as Covid-19 and cohorting restrictions were slowly being eased and there was an increase, albeit limited, of out-of-cell education and work opportunities, the limiting factor here was staffing, driven by bed watch and constant watch cover and staff absence. Restricted regimes were regularly in place and prisoners continued to be locked up frequently for long periods.

6.5.2 Concerns have been expressed, particularly by prisoners on Arch Tor, that due to the number of self-isolating prisoners on the wing and the complexity of keeping cohorts separate, their time out of cell has been significantly less than on other wings. This was drawn to the attention of the Governor as soon as the Board heard of these concerns.

6.6 Drug and alcohol rehabilitation

6.6.1 The Board understands that the substance misuse services team (Exeter Drugs Project) continued its work through the pandemic period and was informed that over 150 one-to-one sessions have been held monthly, with group work provision restarted in July. Referrals are increasing due to the restarting of prisoner flow and transfers in and out increasing. Case numbers remain at around 130+.

6.6.2 The Board has concerns that the service risks relating to drug rehabilitation reflect those of the rest of the healthcare team: the prison closure notice impacts on the ability to attract and retain staff; the length of time taken for vetting new staff has resulted in the loss of selected candidates; and the shift in the prisoner population has resulted in more demand for this service.

7. Progression and resettlement

7.1 Education, library

7.1.1 The Board commends the enthusiasm and drive of the prisoner learning and skills manager and his team in overseeing quality education support during the pandemic. Many prisoners have commented on this. Education courses and library services are provided by Weston College, and when the prison went into lockdown all education courses were stopped and library services suspended.

7.1.2 The Board was shown a total of 39 in-cell subject packs that were developed on a wide range of subjects, including one on resettlement. Over 400 prisoners accessed these packs, which had a course length ranging from a few hours to 12 weeks. Monitoring by Board members found that most prisoners felt that the quality of the packs was high, and several claimed to have done them all. The turnaround from submission to marking to return of the work was reduced to 48 hours, but by January 2021 'pack fatigue' had set in and pack usage greatly reduced. This situation was compounded by the fact that the design and content did not allow for their use towards City and Guilds accreditation. Over 175 prisoners also requested craft and distraction packs.

7.1.3 As the prison moved to stage 2, education classes slowly began again, with single cohorts and a maximum of six prisoners in each classroom. Decisions on which prisoners could attend were based on their need, how close they were to resettlement and whether they had completed in-cell packs. The quality of classes and teaching seen by Board members has been excellent. As of September 2021, most courses are running or about to begin (for example, English for speakers of other languages) with mixed cohorts, but with numbers generally limited to eight. The Board commends the prison's intention that these numbers are increased when possible.

7.1.4 During lockdown, an innovative library service was offered shortly after service suspension, with each wing being provided with a list of possible books to choose from. Since the gradual reopening of the library in May 2021, single cohorts (maximum of six) have had access to it either as part of the wing or in work groups (for example, recycling). From the Board's discussions with the service users, those prisoners on Open University courses appreciate the support they have had from the librarian and the amount of time they have been able to spend in the library. At the end of the reporting year, there were 450 prisoners with library cards and efforts were being made to reach those prisoners who did not use the service.

7.1.5 The Board notes with regret the continued lack of library stock refresh and inter-library loans. On a positive note, delivery of material for the black, Asian and minority ethnic population in the prison is expected shortly and there is a recognised need to provide more support and opportunities for minority groups within the prison.

7.2 Vocational training, work.

7.2.1 In October 2020, approximately 20% of the industries workforce was classified as 'essential', including the kitchen, laundry, and recycling, and continued to be staffed by prisoners. The rest ceased with the Covid-19 restrictions, although key on- and off-wing cleaning activities also continued. As restrictions first began to ease slightly, cleaners, gardeners and wing orderlies began to move around the prison more.

7.2.2 As the prison reached stage 2, with a relaxation in the number of cohorts who could work together, the industries were able to support, in a Covid-19-friendly manner, 66% of the pre-pandemic workforce. At the end of the reporting year, there were 220 prisoners who were unemployed and on waiting lists, and this number is not expected to drop to less than 70, which means that there is a requirement for two or three more workshops for full employment. The Board welcomes the ongoing enquiries through New Futures Network into what activities the prison is permitted to engage in – for example, helping a charity by sorting clothes.

7.2.3 Based on our monitoring, prisoners have welcomed the return to work. The award of the prestigious Windlesham Trophy by the Royal Horticultural Society to HMP Dartmoor for the quality of its gardens showcases the achievement and motivation on the part of both prisoners and staff, and the Board congratulates all involved.

7.2.4 A work self-assessment report for 2019–2020 identified strengths and areas which could be developed. One of these was the balance between the support and qualifications gained in education and the industries. National vocational qualification levels 1 and 2 were added to 'land-based activities', and imminently 'progress in workshops employability skills' will be embedded in all workshops, enabling prisoners to develop and demonstrate the soft skills necessary for employment on resettlement. The Board will be monitoring the welcome provision of new training courses in the next reporting year.

7.2.5 Despite HMP Dartmoor not being a resettlement prison, the Board has found great commitment in developing industries, training, education, and activities from prison staff with limited budgets, working to enable prisoners to progress and work positively towards a successful resettlement.

7.2.6 Board members' discussions with managers working in industries and education have indicated that hindrances to further development are largely related to the uncertainty over the future of the prison and the effect that has on investment; the difficulty in recruiting appropriate staff; and the lack of suitable workshop space.

7.3 Offender management, progression

7.3.1 The reporting year saw a change in the way that resettlement services in prisons were provided, now by the National Probation Service (NPS) and community rehabilitation companies. The previous arrangement was more fragmented with the privatisation of some parts of the NPS – dealing with low- and medium-risk

prisoners. Some of these changes impacted on staff and are still being worked through.

7.3.2 There were other key changes, such as the implementation of the offender management in custody (OMiC) model.

7.3.3 Offender management will also be delivered by the probation service. Although HMP Dartmoor is not a resettlement prison, it releases prisoners into the community. As part of the OMiC model, there is a requirement that a comprehensive handover between the prison offender manager (POM) and the community offender manager (COM) takes place. In practice the COM is assigned at 7.5 months prior to release (or eight months prior to release for parole eligible cases) the handover should be arranged within four weeks of COM assignment. The prisoner is invited to that meeting, along with any other significant persons involved, including the key worker. The Board was concerned that, in a small sample of prisoners due for release within this timeframe, we were told that these meetings were not taking place, and the planning that was set up was delivered very close to the date of release.

7.3.4 Monitoring by the Board still indicates a potential issue with prisoners not being told where they will be staying on their first night on release. Although there has never been a requirement for administrative staff to advise the prisoner of where they will be living – this being a matter between the prisoner and their COM, the expectation is that a prisoner must receive this information, with a confirmed address, 28 days prior to the release date. The Board regrets that, at the moment, the OMU cannot guarantee that this is always the case, especially if accommodation in approved premises is being sought. The lack of suitable accommodation outside prison is creating issues.

7.4 Family contact

7.4.1 Visits to the prison from families and friends have remained restricted this reporting year, despite an easing in the regime. As at the end of our reporting year, only five open visits can take place per session, in a reduced period of one hour, and all visitors, prisoners and staff have to wear masks. If all spaces are filled, the maximum number allowed is 21 visitors, including children, and seven prisoners, two of whom will be in closed conditions, giving a total for the room of 28 people. No refreshments are provided.

7.4.2 Purple (video) Visits were introduced under lockdown and the Board welcomes the fact that these virtual visits have continued as the regime has been relaxed, as prisoners tell us that they are highly valued. The Board would welcome consideration of whether the scheme could be expanded, as some prisoners say that the time, distance, cost and inaccessibility by public transport makes it difficult for families to travel to the prison.

7.4.3 HMP Dartmoor, unlike many other establishments in the prison estate, has no in-cell telephones, and prisoners must use wing telephones that are less than reliable, and in some cases have poor privacy shielding. As reported in previous years, the Board believes that this arrangement is unsatisfactory, particularly at a time when family communications and support are even more important than usual.

7.5 Resettlement planning

7.5.1 HMP Dartmoor is not a resettlement prison and does not receive a separate budget for resettlement activities. Limited funds have been found by prison management reallocation from other budgets to the detriment of these. This continues to be of concern to the Board, given that 220 prisoners were released directly from the prison back into the community over the reporting year.

7.5.2 Among those prisoners released, 47 were post-recall releases and 20 of these were assigned approved premises. Thirty-one prisoners were released on home detention curfew (HDC) and 54 were conditional releases, with the prisoners provided an approved accommodation address.

7.5.3 The Board remains concerned that too many category D prisoners face a long wait to be transferred to a facility designated as appropriate in their sentence plans. Despite the severe restrictions on transfers in the prison estate during lockdown being eased during the reporting year, there are still 33 prisoners in HMP Dartmoor waiting for transfer.

7.5.4 The Board also notes with concern that 29 prisoners serving an indeterminate sentence for public protection (IPP) who remain in HMP Dartmoor are all well over their tariff. (*See question to minister*)

7.5.5 We have been informed by the prison that changes in the working practices of OMU have made the caseload of probation workers an issue. The Board received complaints from prisoners due for release in less than 12 weeks that pre-release courses were difficult to access and limited in numbers. This caused concern and additional stress to these prisoners, who were concerned that their release on probation might be delayed or put in jeopardy.

8. The work of the IMB

Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	10
Total number of visits to the establishment	204
Total number of segregation reviews attended	22

Applications to the IMB

Reporting year: 2020–21	Category: Applications	Oct 20 – Sept 21 Annual totals	Information only: Comparison with full year 2019–20
Accommodation	A	10	9
Adjudications/discipline/ incentives and earned privileges	B	11	4
Equality/diversity	C	0	0
Education/employment	D	23	14
Family visits/letters/telephone calls	E1	16	18
Finance/pay/private monies/spends	E2	3	1
Food/kitchen	F	6	2
Health	G	25	19
Property within	H1	6	4
Property/transfer	H2	18	13
Canteen	H3	2	2
Sentence related	I	16	11
Staff/prisoner	J	35	28
Transfer	K	9	9
Annual total: 180		180	134



This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at <https://www.gov.uk/government/publications>

Any enquiries regarding this publication should be sent to us at imb@justice.gov.uk.