



# **Annual Report of the Independent Monitoring Board at HMP Hewell**

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

**Published January 2022**



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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
- 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 IMB is part of the United Kingdom's National Preventive Mechanism.

## **2. Description of the establishment**

HMP Hewell is a local adult male category B prison.

Certified normal accommodation and operational capacity:

Baseline certified normal accommodation (CNA)	998 ('uncrowded')
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Maximum CNA	1,074 ('crowded')
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Operational capacity	900
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Physical health provider: Care UK

Mental health provider: Care UK (became Practice Plus Group in October 2020)

Substance use treatment provider: Care UK (became Practice Plus Group in October 2020)

Learning and skills provider: Novus.

Library service: Worcestershire County Council transferred to Novus in November 2020

Community rehabilitation companies (CRCs): Staffordshire and West Midlands; Warwickshire and West Mercia - became The Probation Service in June 2021

Careers information and advice: Coventry/Solihull/Warwickshire Partnership (CSWP)

Escort contractor: GEOAmey

Maintenance: Amey

Hewell is a purpose-built prison, opened in 1993, with single and double cells and shared showers. More than 40% of cells designed for one prisoner hold two. A quarter of the population is normally categorised as presenting a high risk of harm to others, with 20% organised crime gang nominals.

In June 2018, it was announced that the establishment would be subject to Special Measures. In February 2020, Special Measures was replaced by the Prison Performance Support Programme. In recognition of 'the deep-rooted issues that cannot be fixed overnight', Hewell was named as one of the prisons to be given bespoke support, with measures including additional staff, enhanced standards training and airport-style security.

Her Majesty's Inspectorate of Prisons (HMIP) made a scrutiny visit to Hewell on 11 and 12 August 2020.

Following attempts to clean and remove infection from the inpatient unit, a decision was taken to close it, and the last patients left in August 2020.

The new virtual court centre is a suite of rooms in the prison able to engage confidentially with suitably equipped courts and offices elsewhere. It promises important benefits for the progression and resettlement of prisoners. Not only does it allow an efficient virtual connection between an individual prisoner and a court, but it

also creates a means for solicitors and other professionals, such as offender managers, to engage easily with their clients.

The Board has observed prisoners, accommodated in suitable surroundings dedicated to the purpose, in discussion with their solicitors. Clearly the system can also be used very effectively with offender managers in the community. The exchanges are monitored visually from a control room, but its lack of a matching audio link ensures that the discussions are confidential.

### **3. Executive summary**

#### **3.1 Background to the report**

The Covid-19 outbreak has had a significant impact on the Board's ability to gather information and discuss the contents of this annual report. 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. Regular information is being collected specifically on the prison's response to the pandemic and is being collated nationally.

The prison was under the most restrictive Covid-related operating system for virtually the entire year, moving to Stage 2 on 20 September 2021. Given the restrictions imposed, the number and experience of members, there are areas of this report that are more limited than would be optimal.

This report covers the first full reporting year in the tenure of the new substantive Governor. Our evidence comes from personal observations gleaned on visits, remote monitoring contact with the prison, scrutiny of prison data and records, attendance at meetings, informal contact with both prisoners and staff and through handling applications from prisoners.

We are aware of a large number of planned initiatives to improve the prison which were due to be implemented once the prison moved to Stage 2 restrictions. In the main, as we have no direct or indirect evidence of these initiatives and how they impacted on prisoners, we have not included them in the report.

#### **3.2 Main judgements**

The Board's overall impression is of an improving prison which is now safer and more secure than we have shown in previous reports.

The Board is particularly keen to commend the agility and imagination with which the prison has managed the impact of the pandemic and the extent to which both the prisoners and staff have, largely, been protected from the direct impact of Covid. That the very significant restrictions have been implemented so calmly, thoroughly and with the support of the population is creditable.

Effective and safe handling of the impact of the pandemic would, in and of itself, have been a major challenge for the staff and management during the year. That this has been achieved at the same time as real progress has been made towards a bold and ambitious programme to move the prison forward is a significant achievement. The fact that the cultural change and genuine attempts to reset HMP Hewell have not yet been fully implemented should not detract from the ambition and radical nature of the vision and drive to improve the establishment.

The Board acknowledges that improvements in staff morale and, crucially, retention are beginning to have a positive impact on the stability and effectiveness of the prison. The challenge of training and building the confidence of a large proportion of

inexperienced staff and filling the gaps left by the departure of a number of experienced staff is significant but the Board observes that, in this regard, the early signs are positive.

The prison is showing real signs of developing a more overt sense of community and of shared experience for those living and working there. The Board recognises the potentially positive effect of this drive to substantive cultural change, though notes that the confidence to 'do things differently' is not yet fully embedded within all the staff.

The Board commends the very real progress made during the year towards making the prison cleaner, smarter and more comfortable. That said, the challenges presented by the basic fabric of the buildings, years of neglect and the infrastructure available to the staff limit this progress. Frequent false fire alarms, broken vehicle gates, unreliable/broken keys and antiquated computer systems have a deleterious impact on the smooth running of the prison and present frustrations for prisoners and staff. Such failings are often a daily distraction from other more constructive duties and therefore affect the wellbeing of the prisoners and illustrate working conditions for staff that are unsatisfactory. The inappropriateness of the prison for prisoners (and staff) with disabilities remains a disgrace.

While commending the progress made within the prison during the year, the Board is clear that systemic failings remain a cause for concern. Challenges inherent in a local prison, which include the churn of men, the significant proportion of remand prisoners (many of whom have spent longer on remand than would have been expected pre-pandemic) and the mixture of categories of prisoners are a problem for HMP Hewell. The fact that the majority of men share cells designed for a single occupant has largely become an accepted feature of life in the prison. Such arrangements are undignified and appear to create much of the tension within the prison. That prisoners are still held under indeterminate sentences remains, in the opinion of the Board, an injustice and an inhumane system for a civilised society. That genuine efforts are made to support such individuals in HMP Hewell does not mitigate the problem.

The paucity of, and difficulty of accessing, appropriate accommodation for the most vulnerable and unwell prisoners remains a concern for the Board. Increased emphasis on improving the wellbeing of such men at Hewell and early signs of more focused and therapeutic care for such individuals does not and will not, in the view of the Board, replace genuinely appropriate alternative arrangements for such men.

### **How safe is the prison?**

The prison is now safer than in our past reporting year as measured by levels of assaults, both between prisoners and against staff. The Board notes the challenge of continuing this trend once the current restrictions are eased, though has confidence that the cultural and regime changes being introduced will support this positive transformation. The Board is pleased to note the almost, but not complete, eradication of cell fires within the prison.

Levels of self-harm within the prison, though still too high, are decreasing, and the Board notes the more personalised and targeted support and interventions offered to individuals at risk of such behaviours.

The Board is aware of the early positive impact of the new and more closely managed system of using the assessment, care in custody and teamwork (ACCT) system and notes an increasingly effective use of multidisciplinary reviews. The Board would like to see a fuller implementation of the key worker scheme, currently offered only to the most vulnerable cohorts due to staffing challenges.

Data and incidents observed show a decrease in the use of force and a proactive approach to further improvement. Incidents observed and recorded indicate that use of force is administered in a safe and humane manner.

### **How fairly and humanely are prisoners treated?**

The Board has no evidence of active or intentional discrimination within the prison but is concerned at an apparent lack of appetite by management to investigate or question more subtle or inadvertent unfairness in the treatment of prisoners.

The much-improved data collection in the area of equalities is to be commended, though the Board would welcome more robust interrogation of that data and its implications. There are early signs (e.g., in the form of increased, though still low, levels of self-declaration) that the drive to welcome and celebrate diversity and different minorities is paying dividends, though the Board is clear that token acknowledgement of diversity is no substitute for fundamentally fair treatment. The Board notes the unrealistically low number of discrimination incident report forms (DIRFs) submitted during the year and shares the prison's assumption that this reflects a lack of confidence on the part of prisoners in the DIRF system. The Board welcomes the prison's intention to address this in the coming year and will follow progress with interest.

In terms of specific protected characteristics, the Board commends the intention to introduce forums for different groups of prisoners and acknowledges the real efforts being made to encourage engagement from minority groups. The Board welcomes the plan to work with the Zahid Mubarek Trust around issues of race within the prison but notes significant gaps in focus on other groups; for example, older prisoners, those with hidden disabilities and those with limited language skills. Facilities for prisoners with mobility issues remain unacceptable.

The Board believes that prisoners are, on the whole, treated compassionately and humanely. That said, we are concerned that a minority of individuals do not have their needs sufficiently met unless and until they present a disciplinary problem for the prison.

### **How well are prisoners' health and wellbeing needs met?**

While the Board cannot comment on clinical matters, it remains consistently struck by the level of discontent on the part of prisoners with not having their health needs met and with healthcare services in general. This discontent is particularly prevalent



regarding mental health care provision. We have some evidence of tension between the prison and the healthcare provider, which is to the detriment of the prisoners.

The Board notes the conspicuous and explicit focus on wider wellbeing of prisoners and commends the adoption of a more holistic approach to the wellbeing of the men accommodated at Hewell. The development of a houseblock specifically designed to focus on men with health or wellbeing needs (including drug and alcohol issues) and the development of the Targeted Care Pathway to bring the various disparate strands of care and support together is welcomed by the Board. This specialist unit is still in its infancy and the Board looks forward to monitoring its progress and the impact it has on both the individuals housed there and on the wider prison community. The delayed opening of the much-heralded Oak Unit (in the former inpatients unit, to accommodate the most complex individuals routinely accommodated in segregation and to act as a staging post to/from specialist mental and other health facilities) is disappointing. The Board commends the ambition behind the plan and looks forward to its opening. In the meantime, the Board repeats its previously-reported view that inadequate provision is currently made for the most challenging individuals – either in the prison or in the wider criminal justice and health systems.

### **How well are prisoners progressed towards successful resettlement?**

The Board has little direct evidence of progress or otherwise in this area, which has been particularly impacted by the Covid-19 restrictions. Some isolated examples of activity are briefly described elsewhere in this report. However, the Board remains concerned that there are prisoners at Hewell whose status (imprisonment for public protection (IPP), life sentence, category D etc.) make it an inappropriate location for these men to be progressed towards successful resettlement.

## **3.3 Main areas for development**

### ***TO THE MINISTER***

The Board again restates its previously recorded concern at the prevalence and treatment of prisoners held in custody indefinitely under indeterminate sentences for public protection. We have seen no evidence of attempts to manage the sentences of these individuals with any focus on forward progression. Nor have we seen recognition that the despair of endless detention results in self-destructive behaviour, leading to the use of segregation and challenges to discipline within the prison. This, in turn, causes these prisoners to fail at the parole board. We urge the minister to take up the issue of prisoners still being held in custody indefinitely despite the power to pass such sentences being removed eight years ago.

Similarly, the Board remains concerned about the difficulties encountered in transferring prisoners with severe mental health/behavioural issues to an environment where they can be treated effectively. Again, will the minister work with colleagues in other departments to ensure greater availability of more suitable locations for these prisoners?

### **TO THE PRISON SERVICE**

In the light of long remand periods, review the policy that remand prisoners are exempt from some of the obligations that go with effective resettlement and opportunities are provided.

Ensure that prisoners inappropriately located at HMP Hewell (by reason of their category, etc.) are speedily moved to appropriate prisons.

Provide funding to ensure that those with mobility issues can move around the prison e.g., lifts and widened doorways.

When the category D Hewell Grange was open prisoners were employed to maintain the approach to the prison, cut the verges and clear and tidy the car parks. Those prisoners are no longer present and funding to fulfil these requirements is necessary.

### **TO THE PRISONS AND PROBATION OMBUDSMAN**

Please conclude the report into the death on 14 June 2018, so that any identified lessons learned may be acted upon.

### **TO THE GOVERNOR**

Maintain the improvement with the early days unit, including improved transition from the induction houseblock to permanent accommodation.

Improve identification of those prisoners with learning difficulties/disabilities and their consequential support.

Maintain culture change pressure to have a consistent standard of staff behaviour towards prisoners.

Improve the handling of prison complaints and applications systems, focusing particularly on those which raise issues of discrimination, to ensure that such concerns are appropriately addressed and where necessary dealt with through the DIRF process.

Improve the cleanliness and appearance of the approach to the prison.

Maintain a focus on equality issues to ensure that all prisoners are treated fairly. For example, but not exclusively: the provision of wheelchairs in reception, translation services and information in other languages.

## **3.4 Progress since the last report**

The Board's report for 2019/20 included requests for improvements to the following areas, with the following actions resulting:

TO THE MINISTER	
The Board restates its previously recorded concern at the prevalence and treatment of prisoners held in custody	Board members continue to meet IPP prisoners, often demonstrating poor

<p>indefinitely under indeterminate sentences for public protection. We have seen no evidence of attempts to manage the sentences of these individuals with any focus on forward progression. Nor have we seen recognition that the despair of endless detention results in self-destructive behaviour, leading to the use of segregation and challenges to discipline within the prison. This, in turn, causes these prisoners to fail at the parole board. We urge the minister to take up the issue of prisoners still being held in custody indefinitely despite the power to pass such sentences being removed eight years ago.</p>	<p>behaviour, who despair of ever being released.</p>
<p>The Board remains concerned about the difficulties encountered in transferring prisoners with severe mental health/behavioural issues to an environment where they can be treated effectively. Again, will the minister work with colleagues in other departments to ensure greater availability of more suitable locations for these prisoners?</p>	<p>This remains an issue.</p>
<p>TO THE PRISON SERVICE</p>	
<p>The Board would like to see a clearer articulation of the expectations, priorities and remits of a local prison, to enable Hewell to focus on fulfilling that declared role. Further, the Board is keen to see evidence that only prisoners fitting the recognised profile for a local prison are routinely accommodated at the establishment.</p>	<p>This remains a concern.</p>
<p>Sufficient funds should be identified to improve access and accommodation for those with physical disabilities.</p>	<p>This remains an issue.</p>
<p>Even before the restrictions caused by the pandemic, the Board was concerned (admittedly on the basis of limited evidence) about the paucity of effective educational provision for those in Hewell. The situation has worsened</p>	<p>The board was unable to gather evidence on this issue.</p>

with the restricted regime. The Board urges more effective scrutiny of the education contracts, to ensure more effective outcomes.	
TO THE PRISONS AND PROBATION OMBUDSMAN	
Please conclude the report into the death on 14 June 2018, so that an inquest may be carried out.	Twelve months on, no report has been received.
TO THE GOVERNOR	
The Board is keen to see evidence of a concerted focus on addressing prisoners' mental health needs. We wish to see improved outcomes for those accessing these services and interventions. The Board would wish to see evidence of a reduced incidence of self-harm.	The Board acknowledges that reduction in self-harm has been achieved and is impressed with the development of a specialist wellbeing unit.
The Board is concerned at the lack of robustness in the approach to equality issues and would welcome renewed vigour and accountability in this regard. We recognise that progress has recently been made in terms of collecting data but are concerned still at the lack of rigour in its analysis and lack of influence on practice. We are keen to see equality embedded in the regime and evidenced in day-to-day activity.	<p>Hewell is improving its handling of Equalities issues but still takes comfort in the collection and (as yet imperfect) collation of data rather than analysis/action.</p> <p>The distinction between the superficial embracing of diversity and the view that equality means fairness is still not adequately understood.</p> <p>Therefore, though the notions of equality and diversity are becoming part of the narrative within Hewell, it is not yet the case that the impact of those principles on fundamental fairness and access to rights is sufficiently widely recognised.</p>
The Board is often aware of a reliance on systems and processes in managing issues within Hewell, rather than a focus on robust problem solving and effective decision making. This tendency is demonstrated in the frequency with which ostensibly minor issues or concerns are allowed to escalate, with	This remains the case.

<p>recourse to documentary systems; for example, the complaints or adjudication systems not resolving the issues as speedily or effectively as possible. We would like to see frontline officers being more proactive in resolving concerns.</p>	
<p>The Board is aware of the challenges presented in the preparation and serving of food. During the reporting year, there have been too many instances of broken kitchen machinery, limiting the range of food prepared. The Board has significant evidence, in the form of formal applications, anecdotal comments and our own observations, of unappealing food being served. A regular lack of hygiene measures – for example, missing protective clothing and broken warming trays, as well as unsatisfactory serving conditions and practices, such as blocked servery drains and sandwich fillings served in cling film – have been a frequent cause for concern. There is an almost total lack of facilities for prisoners to eat other than in their cells. We would urge a focus on the importance of food, and on its quality and presentation, in the coming year.</p>	<p>While the quality and presentation of food provided appears to have improved overall, the Board is aware of some isolated issues around portion control and food quality.</p> <p>Concerns around food preparation and serving equipment remain.</p>

## **Evidence sections 4 – 7**

### **4. Safety**

#### **4.1 Reception and induction**

The Board is pleased to report improvements in the physical arrangements in reception, with significant work undertaken to smarten up the area. Reception is now a clean and welcoming space and efforts are made to keep men comfortable and supplied with food and drinks. We have previously reported a lack of bedding and other basic supplies for new arrivals but are pleased to note that such shortcomings are no longer an issue. However, there is a perpetual lack of wheelchairs for use by men arriving at Hewell and this presents challenges, to both those few individuals and to staff, in locating them safely and in a dignified manner on arrival at the prison.

The frequent late arrival of men to Hewell continues to cause problems and put pressure both prisoners and staff to ensure that appropriate processes are conducted in a timely fashion.

We are aware of some missed opportunities in the basic custody screening checks on arrival to identify protected characteristics and signpost relevant support within the prison but note that improved training in this area is planned.

The Board is aware of impressive use of orderlies within reception to provide reassurance and guidance to new arrivals and those leaving the prison.

The introduction of the body scanner for new arrivals has had a significant impact. A review of October 2020, January 2021, April 2021, and July 2021 daily management reports shows respectively nine, zero, eight and two positive scans.

Of concern, however, is the lack of clarity around the thresholds for intervention in those cases where it is thought that a prisoner is concealing a package, with only one such case in those months being sent immediately to outside hospital. We are aware of the existence of a policy around such cases but have noted with concern a range of interpretations of that policy. Prisoners have been kept in segregation for several days (in one case reportedly suffering from drug withdrawal) without medical confirmation of the existence of a package. It would seem that if a package is present, the risk to the prisoner of retaining it is significant; if a package is not present, then a prisoner is segregated without being able to prove his innocence. Many positive scans ultimately remain inconclusive.

The Board notes and welcomes the concerted efforts made by the prison during the year to improve the experience of prisoners of their early days and weeks in custody.

The refurbishment of one of the spurs in the newly designated early days centre in the first part of the reporting year necessitated the partial use of another house block as an overflow induction unit. This, combined with the onerous but carefully managed Covid restrictions for new arrivals, inevitably disrupted the induction processes. Latterly, the consolidation of all induction to a single house block and the ongoing physical upgrading of that house block has been noted. Social distancing requirements remain a constraint on induction arrangements, but the Board has

been told of ambitious plans to improve the situation. The physical location of healthcare staff on the induction house block and the provision of education testing facilities on site is welcomed. The Board awaits the full implementation of the planned weekly induction programme with interest.

The Board recognises the significant challenge of identifying, assessing and planning for the individual risks and vulnerabilities of an ever-changing population within the induction unit. We also acknowledge the inherent difficulty of providing appropriate induction for a disparate group of prisoners ranging from experienced men transferring from other establishments, to prisoners on licence recall and individuals facing their first ever night in custody. This range of individual circumstances presents particular challenges for the prison in seeking to personalise care while ensuring a consistent approach. Many men arriving at Hewell are in poor mental and/or physical health and a large proportion are dealing with drug and alcohol withdrawal, all factors that need addressing urgently and safely on arrival.

The Board has evidence of good relationships between staff and prisoners and of constructive and valuable peer support from other prisoners in both reception and the induction units, with a humane response demonstrated to the new arrivals. Individuals in custody for the first time are identified and provided with additional support, though even the specialised provision of the large and noisy induction unit might be considered an impossibly daunting place for such individuals.

We note that new arrivals are sometimes disproportionately affected by issues that might have a less serious impact in other areas of the prison. Problems with food quantity and quality have been identified as a particular problem for new arrivals, given their often poor physical condition and delays in securing access to personal money and canteen provision to supplement prison food. Any delays in securing phone PINs have a particular, and regrettable, impact for new arrivals as they prevent contact with friends and family at a crucial time. Poor or lacking English and difficulties with literacy also present extra difficulties for some new arrivals trying to navigate the prison system, often for the first time. The Board would like to see translation services and information in other languages provided as a priority in this area.

The Board is also keen to see attention focussed on the safe and secure transition of men from the induction unit to their permanent accommodation. We have evidence of some individuals facing that transition with increased anxiety and feeling lost on arrival at their new house block. We would hope that, when restrictions allow, a more gradual orientation programme could be introduced.

## **4.2 Suicide and self-harm, deaths in custody**

In our last reporting year, we had become concerned at the level of self-harm in the prison so, utilising the prison's daily handover reports, we began collating detailed statistics from March 2020.

In the full inspection of June 2019, HMIP commented that there had been 350 self-harm incidents in the previous six months, and that this was higher than in similar

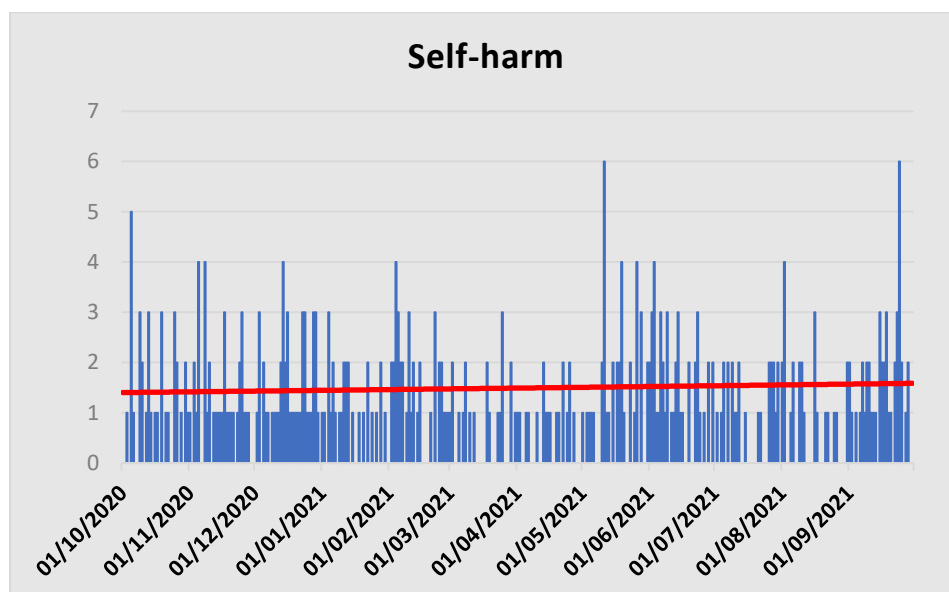
prisons. HMIP's short scrutiny visit in August 2020 reported that self-harm reduced by 10% going into lockdown, implying about 315 incidents in a six-month period.

This tallied almost exactly with our factual count of 321 self-harm incidents in the six months April to September 2020, the end of our previous reporting period.

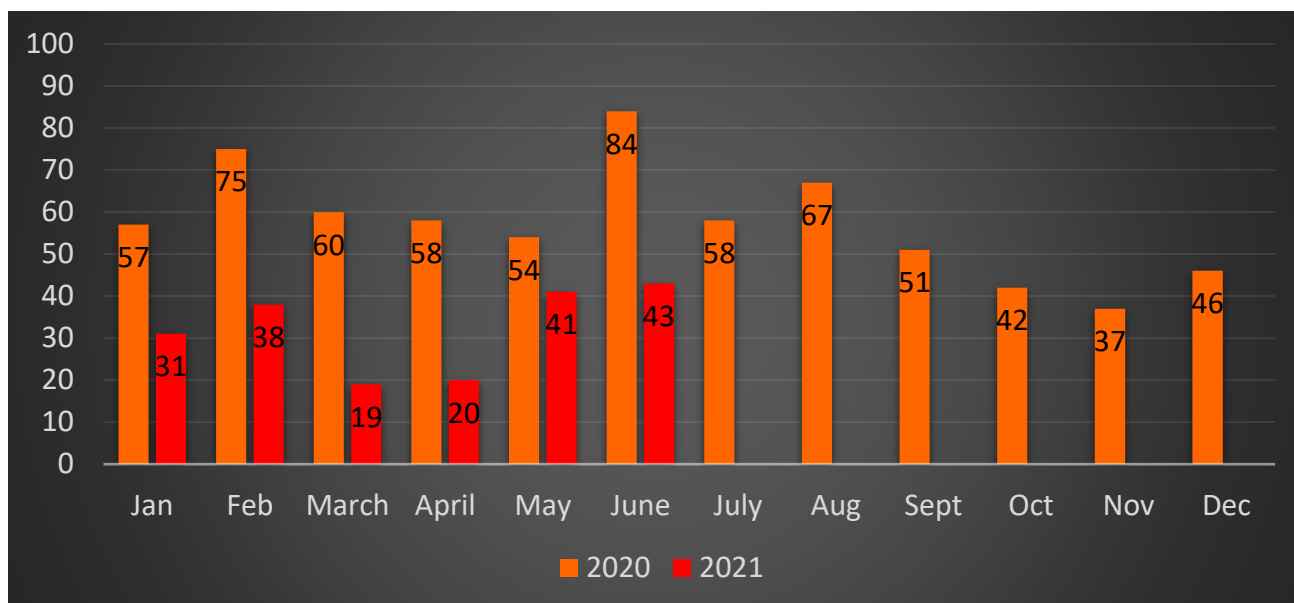
We are, therefore, pleased to record that self-harm incidents in the following half year, October 2020 to March 2021, fell significantly by 38.9% to 196. In the second half of our reporting period, April to September 2021, there was a further 6.5% fall to 184.

To reinforce this, at the time of last year's report self-harm accounted for 49% of all healthcare callouts, whereas that has now fallen to 33%. The number of prolific self-harmers has similarly fallen.

We cannot be sure of the reasons behind this welcome reduction, but some likely causes present themselves. Covid-restricted regimes and a policy of unlocking only a portion of a houseblock at a time have reduced the opportunity for bullying, and men have reported feeling safer. The quantity of drugs coming into the prison has reduced (see 4.5 below). Officers have had more time to engage with vulnerable prisoners generally, and the most complex cases are now located in a spur of one house block with embedded mental health support. Also, at our request wing officers now routinely seek reasons from those self-harming, and these are recorded in the daily briefings to assist in understanding and targeting support.







Taken from HMP Hewell safety meeting presentation July 2021, showing self-harm comparison figures

Within the current reporting year there have been five deaths in custody, two apparently from natural causes and three apparently self-inflicted. An initial PPO report into one of this year's deaths has been received, indicating that it was apparently from natural causes and raises no concerns. All of these deaths are awaiting inquest.

Within this reporting year there have been five inquests for deaths from previous reporting years: four verdicts of natural causes and one of suicide. Arising out of these deaths, there have been a number of PPO and coroner recommendations.

### **Summarised PPO and coroner recommendations**

There have been seven PPO reports published this reporting year, with six of these reports containing recommendations for the prison and/or healthcare. Of these reports, four related to deaths from natural causes, one from suicide and one resulting from a drugs overdose.

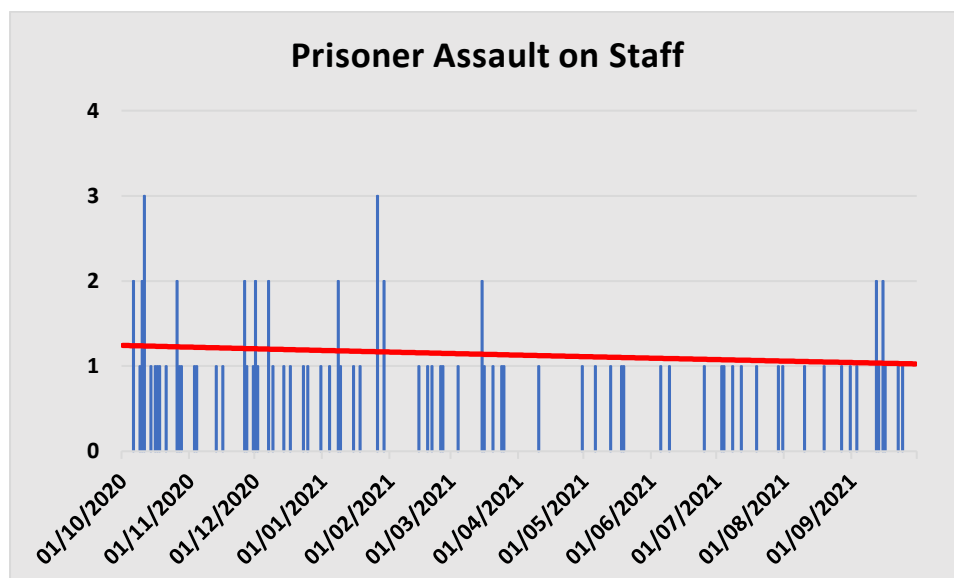
- Three reports raised concerns about the appropriate use of restraints and the decision-making processes involved (date of deaths: 04/08/2020, 18/12/2019 and 16/09/2018). These three prisoners had significant health issues, and all died from natural causes. In summary, the PPO did not consider that appropriate risk assessments had been completed that reflected the impact their health issues had on their mobility and risk levels when deciding on the level of restraints to be used. In response to PPO recommendations, the prison appears to have implemented review systems to monitor escort risk assessments. In addition, it was reported in April 2021 that the regional safety team had 'dip tested' escort risk assessments and had found no instances of the inappropriate use of restraints, though they had highlighted a number of administrative problems which were being addressed.

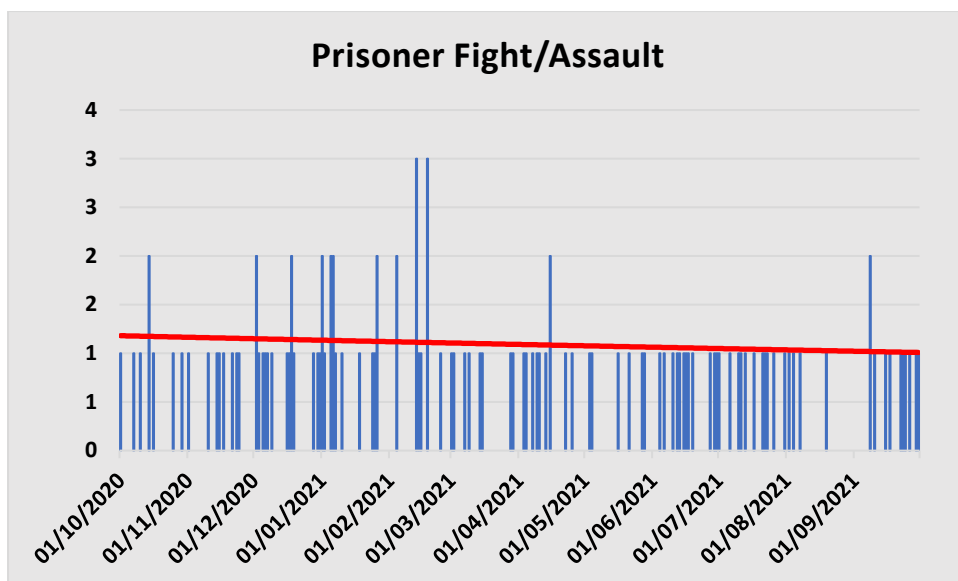
- Two reports raised concerns that aspects of healthcare had not met the test of being equivalent to what would have been received in the community (date of deaths: 04/08/2020 and 16/09/2018).
- The report into the death by suicide (date of death (DoD): 25/06/2019) makes several recommendations about the assessment of risk of self-harm, the recording of known risk factors and the sharing of relevant information, and the subsequent monitoring and use of ACCT documentation by prison and healthcare staff. In response to this, the prison has accepted the recommendations and implemented review systems to enable monitoring of ACCTs and the care provided to prisoners presenting as being at risk of suicide and self-harm.
- Other issues raised included: appropriate screening for malnutrition (DoD: 01/04/2020); sharing of information between healthcare and prison systems/operational staff (DoD 25/06/2019 and 01/06/2018).

There are currently nine inquests awaiting completion (four from previous reporting years, two from each of 2018/19 and 2019/20): six apparent self-inflicted deaths, one apparent accidental death and two apparent deaths from natural causes. There are currently five initial PPO reports outstanding, with one report relating to a death from 14 June 2018 (the remaining four relate to this reporting year).

#### 4.3 Violence and violence reduction, self-isolation

The following graphs of prisoner on staff and prisoner on prisoner assaults illustrate that, despite some difficult weeks, both have reduced over the reporting period and are reduced from previous years.





#### 4.4 Use of force

Data drawn from the prison's use of force monitoring meetings shows a continuing decrease in instances of the use of force (UoF). The following table of instances of force being used shows a significant continued decrease in the use of force over the past three years:

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	60	67	102	96	105	99	76	77	54	61	90	68
2020	88	65	89	74	56	84	59	47	51	50	44	39
2021	38	32	50	33	40	38	43	37	47			

Refusal to relocate or return to cell remains the main reason for use of force, followed by threats to staff and security.

The data available at the monitoring meetings shows that level of UoF in respect of age, religion, and ethnicity was proportionate to the population of the establishment.

Injuries during use of force have been minimal, with a slightly higher number of injuries to staff than prisoners. PAVA spray has not been used in the prison in the reporting year. There were two baton strikes during the year. Ratchet cuffs were used 14 times and rigid bar cuffs seven times. The last use of special accommodation was October 2020.

The Board is pleased to report the depth of analysis and discussion undertaken by those present at the UoF committee when it reviews video footage of significant incidents. No incident viewed has raised concern about safe or humane treatment of prisoners involved. Lessons learned and action taken following video reviews are predominately about officers not deploying the right technique and exposing

themselves to harm. Action points and training needs identified are followed up at subsequent meetings.

The use of body-worn cameras is promoted but hampered by out-of-date equipment which frequently fails, and the need for continual training of officers to ensure footage is of a usable quality. The UoF committee have made this a priority in the current year and are monitoring closely to increase the percentage of incidents recorded.

#### **4.5 Preventing illicit items**

There has been no mandatory drug testing in the prison during the pandemic, in line with national policy. This lack of random testing is an increased risk, but senior management point to intelligence that there is a much-reduced level of illicit drugs in the prison following the progressive introduction of enhanced security measures. Our monitoring of the prison's daily briefing reports appears to bear out management's claims and reveals spectacular success in reducing illicit drugs coming into the prison.

For example, in the first two months of the body scanner's installation, there were 12 positive scans per month. The next six months saw a 68% reduction to an average of 3.8 per month, and in the last three months of our reporting year there were a total of just four positive scans, including none in the final month. Prisoners have confided in us that word has got around that all arrivals will be scanned, and this has discouraged nearly all attempts.

Equally impressive is the extent to which the scanning of envelopes purporting to contain privileged rule 39 legal mail has resulted in many fake items being intercepted. The quarterly totals of intercepted attempts were: Q1 39, Q2 28, Q3 19 and Q4 2. This ingress route into the prison therefore also seems to have successfully been closed off.

## **5. Fair and humane treatment**

### **5.1 Accommodation, clothing, food**

The transformative nature of the drive towards cleanliness and hygiene has had a remarkable impact on the state of the residential accommodation in the past year. However, the fundamental challenges of the age and construction of the buildings remain, with old and unreliable heating systems being inadequate in the coldest weather and insufficient ventilation being available in the hottest weather. Extra blankets were sourced from another prison during one particularly cold snap to mitigate the impact of an unresponsive and unpredictable heating system.

It remains a concern that cells designed for a single occupant are largely used to house two prisoners, with consequent compromises of dignity and space as well as the disruptive and constant challenge of managing security and safety issues arising out of cell-sharing arrangements.

While the quality and presentation of food provided appears to have improved overall, the Board is aware of some isolated issues around portion control and food quality. It is the view of the Board that simple challenges remain accepted and have become normalised, for example some meals contain both soup and a dessert requiring a bowl. With a single bowl, a prisoner has to choose which to have. There is, regrettably, no sense of mealtimes being celebrated as communal events, given the almost total lack of space for shared eating. While special cohort arrangements have been necessary during the pandemic, we would like to see efforts made in this regard. It remains unacceptable in the 21st century that prisoners have to carry their food (without trays, which makes carrying the various items challenging on the stairs even for the most able bodied) to their cells to eat in close proximity to their toilets. Repairs to servery equipment and the availability of protective clothing remain inconsistent.

The number and frequency of maintenance issues remains a cause of concern. Frequent false fire alarms, broken keys and problems with gates create disruption to the regime and consequently to the staff and prisoners.

### **5.2 Segregation**

The notably improved condition of the unit is to be commended with, for example, the replacement flooring adding to the feeling of a clean and well cared for part of the prison. Of equal note is the increasingly calm atmosphere that prevails most of the time in the unit, with little shouting and disruption observed during the year.

During the early part of the reporting year, staffing in the unit was consistent and stable. This had noticeable benefits in terms of the detailed knowledge that the staff had of the men and their individual circumstances. Towards the latter part of the year, staffing constraints have led to more guest staff on the unit and overall staff shortages which resulted in some more disrupted times.

An improvement has been noted in the energy and focus used to move men out of segregation as speedily as possible, with most individuals, including many who

refuse to cell share, moving in and out of the unit quickly. Those individuals who present more challenge, though now fewer than in previous years, still too often languish in the unit with no clear and achievable exit plan despite the efforts of staff.

It remains a concern of the Board that prisoners with complex mental health needs and or behavioural issues, and some on ACCTs, are accommodated in the segregation unit, often for prolonged periods. One man was notably accommodated in the unit for three months from the time of his referral to a specialist mental health unit.

The lack of alternative accommodation within Hewell, and elsewhere in the criminal justice system, results too often in men being accommodated in the segregation unit for the lack of more appropriate spaces. The delayed commissioning of the specialist Oak Unit has resulted in one pathway for challenging prisoners being unavailable. What seem to be inconsistent and restricted criteria for transfer to the specialist wellbeing unit for men from the segregation unit has, we are told, led to some being 'stuck' in the unit. We have noted that some men who refuse to engage in what is deemed an acceptable way with mental health services are not accepted onto the wellbeing unit, which leaves them rather stuck without specialist input and treatment.

Given the Covid restrictions, it was clear that genuine attempts to enable men within the unit to access as full a regime as possible were made, with examples of positive, careful and patient work to encourage vulnerable individuals to participate in the regime, to keep themselves and their cells clean and to retain family links through phone calls.

The Board can report that good order or discipline (GOoD) Boards are held regularly and are well managed and documented. Although staff from healthcare are always (sometimes not willingly) in attendance at the reviews, it has to be said that often that presence is in body rather than in the spirit of being able to give meaningful input into the safety of an individual being segregated. The most successful and constructive reviews have often been those attended by, for example, a prison offender manager or key worker, or, in a few cases, a mental health specialist with direct knowledge of the individual.

### **5.3 Staff-prisoner relationships, key workers**

Over the year, the Board has monitored a significant and radical change in the culture at the very top level of management, with a real sense of driving change within the prison. While we have evidence that some staff, and prisoners, appreciate the intent behind this drive to improvement, the necessary change in mindset and approach has yet to become embedded throughout the whole organisation. There are specifically places within the prison where staff culture has proved resistant to change so the Board has yet to see prison-wide significant tangible outcomes from this ambitious initiative.

The Board has noted the decline in staff attrition rates and the benefits for prisoner welfare arising out of a more stable workforce. That said, the proportion of inexperienced staff members remains high, and we have some evidence of less

experienced staff sometimes lacking the confidence or soft skills to manage challenging situations to de-escalate them sufficiently. We are conscious that the very restricted movement of prisoners around the prison during the pandemic has created an artificial environment which might prove a challenge for less experienced staff members when normal levels of activity resume.

The Board is aware of some inconsistency in approach between individual staff members and between staff teams, leaving prisoners sometimes confused about boundaries and expectations. We have some evidence, among a lot of good practice, of apparently arbitrary decisions being made by staff.

In terms of feedback from prisoners about staff, the Board is aware of a mixed response, with some very positive testimonies about staff and their approach and some more critical. Our observations are usually of constructive engagement between staff and prisoners, and we have little evidence of overtly inappropriate exchanges, though we would note that staff could usefully be more proactive and positive in dealing with prisoners' queries rather than dismissing them or advising recourse to official applications/complaints. The propensity of many staff to rely on formal processes to resolve issues for prisoners remains a concern. The Board has been made aware of a disturbing number of incidents of prisoners claiming to have been goaded and/or routinely victimised by staff.

Recruitment campaigns for staff to work on the newly devised wellbeing unit and the re-vamped early days centre appear to have been successful, with staff with a demonstrable interest in these areas being selected. Such selection has also been deployed for the segregation unit and for the yet to be opened Oak Unit.

The Board is aware of low-level infringements to prison rules that are not dealt with by staff; for example, prisoners routinely use their vapes on the walkways and in the servery areas. Clothing regulations, e.g., in the servery area are also often not enforced.

The prison has a well-established, active and very visible staff care team which the Board has seen involved in the aftermath of challenging incidents in the prison and in providing general support to colleagues. It is clear that staff feel supported by the presence of this team.

## **5.4 Equality and diversity**

The profile of equality and diversity issues has increased during the year and this renewed focus is welcomed. The appointment of a full-time lead on equalities, diversity and inclusion is noted, as is the embedding of the framework of monthly equalities committee meetings and the appointment of leads for the legally prescribed protected characteristics. We also note early signs of efforts to engage with the wider staff body by recruiting equalities champions, and with the prisoner body by boosting the number of equalities representatives. The impact and the imagination applied to these recruitments to make them as inclusive as possible remains to be seen.

The Board notes the continued efforts made by the prison to recognise and serve prisoners following a range of religions. Even during the pandemic significant work went into facilitating those individuals wishing to observe Ramadan.

One of the successes of the recent boost to the equalities framework is the collation and sharing of increasing amounts of data and comparators. This progress has, to date, not yet been universally transformed into an appetite to interrogate and fully understand the data or to seek anything other than a superficial explanation of anomalies that come to light.

The data collected around disability is a cause for concern for the Board, with duplication between categories and little convincing explanation about which prisoners are captured in which category.

There is evidence that equalities issues raised within the prison complaints system, either explicitly or by implication, are seldom addressed in the replies sent to prisoners. Such issues raised by the complaints mechanism do not appear to be used to inform the work around equalities within the prison.

The Board has no evidence of active discrimination within Hewell and notes the very low numbers of DIRFs submitted. That said, the disproportionate representation of black, Asian and mixed-race prisoners (race being the only protected characteristic for which data appears currently to be collected in this area) in both positive and negative behaviour metrics and in adjudications has, to date, been accepted and explained away rather than fully investigated by the prison. Plans to work with the Zahid Mubarek Trust in this area are welcomed.

The fabric of the prison presents real and unacceptable challenges for prisoners and staff, with limited mobility, even though some increased ramp provision has been added. The numbers of prisoners disclosing lack of mobility as a physical disability remain significant. The single lift in the residential area (unsatisfactorily located in the accommodation for prisoners requiring some separation from the main body of the prison population) is insufficient and was out of service for large parts of the reporting year. This failure meant that prisoners who use wheelchairs were prevented from accessing fresh air, exercise or the servery to collect their food for several months. On at least one occasion a prisoner could not attend an outside hospital appointment because the staff trained to use the evacuation chair, an undignified solution but the only possible way of him leaving the building, were unavailable. Such situations have obvious and unacceptable implications for safety. This lack of accessibility has been largely regarded as a regrettable inevitability by the prison rather than the outrage that it surely is. Individuals with physical disabilities appear to be identified and well supported subject to the constraints of the buildings and we are aware of enabling equipment, e.g., seats for showers and kettle holders, being issued. The prison, however, remains unsuitable for individuals with physical disabilities.

The Board is aware of ad-hoc arrangements to support prisoners with little or no English and we have seen some effective use of staff and other prisoners to interpret for such individuals. The use of the mandated telephone translation service is inconsistent, and it has been described as difficult to use by staff. While language



needs are not limited to foreign national prisoners, this group has increased in number during the year from 94 in November 2020 to 158 in July 2021. The Board is aware of many prisoners relying on their peers to interpret daily life in prison for them, which could have implications for safety and safeguarding. There are early signs of attempts to provide information in different languages, for example posters in the induction unit, but it is the view of the Board that such efforts need to be accelerated and formalised. The Board is aware of particular problems facing new arrivals in Hewell who do not speak or understand English and instances of some individuals unable to communicate their whereabouts to their families. Language problems are a barrier to integration and an impediment to prisoners understanding and accessing their rights.

The Board is not yet satisfied that sufficient screening is available to identify those prisoners with learning difficulties/disabilities, although some data on this is now collected as part of the equalities work. We are satisfied that any prisoner arriving at Hewell with a formal diagnosis is appropriately identified. We remain concerned that the additional challenges of prison life exacerbate the difficulties, in many cases leading to a cycle of disciplinary/behavioural issues, and there is little appetite to deal with the underlying issues. We have seen, and it has been anecdotally confirmed by staff, that some behavioural challenges are likely to be caused by learning disabilities going undiagnosed.

Though the Board welcomes the early signs that the prison is working to identify and support prisoners with invisible disabilities and undiagnosed learning difficulties, the challenges of prison life are extreme for many of these individuals, and we note the efforts within the wellbeing unit to address the particular needs of this cohort. There have been occasional instances of staff members identifying such needs in the men in their care, but such awareness and education is yet to become widespread.

The Board is aware that some men who are unable to read and write remain unaware that they can submit applications or complaints orally. There is little evidence of concerted attempts to facilitate access to prison systems for such men, who often rely on their peers to read and write for them. The overriding reliance on written systems within the prison disadvantages men with limited literacy skills.

The Board has no evidence of special provision made for older prisoners, who currently make up around 10% of the population.

## **5.5 Faith and pastoral support**

The reach and depth of the chaplaincy team is a strength of the prison, with concerted efforts made to support men of all faiths and none.

The pandemic presented a particular challenge to the chaplaincy team by nature of its usual face-to-face work. This challenge was compounded by the impact of the tragic death of the recently retired managing chaplain, who had continued to volunteer and be present in the prison, and the sudden illness of one of the key members of the team. The limits to corporate worship and the inability of their active

team of volunteers to enter the prison during the most extreme lockdowns also created problems.

The Board is aware of extensive efforts made to support bereaved prisoners during the pandemic, including making provision for funeral services to be followed online.

## **5.6 Incentives schemes**

The partial suspension of the incentives and earned privileges (IEP) scheme during the pandemic has limited the extent to which the Board has been able to monitor this area of activity, subject to the comments made about apparent disproportionality in section 5.4 above.

## **5.7 Complaints**

During the reporting year there has been a welcome downward trend in the number of complaints made using the internal prison complaints system. The topics most often complained about remain healthcare, property and staff.

The Board's research has shown that most complaints are administered effectively and are usually replied to within the prescribed timescales. It is, however, the view of the Board that too often the crux of the issue is not dealt with in the reply to a complaint and that the detail rather than the substance of the issue is prioritised. Too often, in our view, a problem-solving approach to the issue is not taken. A particular concern is that in the case of prolific complainants, each individual complaint is too often handled in isolation rather than the broader picture and any underlying issues being identified and addressed.

The Board has regularly reported on issues being raised by prisoners in the complaints system which could and arguably should have been dealt with less formally by staff. It remains the case that a simple request is not resolved, or the prisoner is told to 'put in an app'. This reliance on formal systems appears to the Board to indicate either, at best, a lack of confidence in staff to deal with simple queries or, worse, a complacency or unwillingness on the part of some staff to provide an answer rather than 'pass the buck' onto the formal system of apps and complaints.

We have reported elsewhere (Section 5.4) on the insufficient attention paid to equalities issues raised through the complaints system.

## **5.8 Property**

The Board continues to receive applications from current prisoners and from other IMBs regarding alleged loss of prisoners' property.

## **6. Health and wellbeing**

### **6.1 Healthcare general**

We reported last year that the provider was subject to a requirement notice from the Care Quality Commission for failures under three regulations. There are no notices still in force.

Our last report commented that local delivery board meetings were spasmodic and often subject to late cancellation. In our current year, these liaison meetings between healthcare and prison managers have become very much better organised, regular and business-like, with fewer outstanding issues rolled over. They have been renamed 'health and wellbeing committee' and the Board accepts an invitation to observe all of them.

We are delighted to note that healthcare recently achieved first place out of a comparator group of 47 for its quality and outcomes framework (QOF) score, an NHS patient care measure.

### **6.2 Physical healthcare**

Physical healthcare provision is at an acceptable level, and comparable to what could be expected in the community. The response to unscheduled incidents of illness or injury on the houseblocks is prompt and efficient, with the outpatient unit able to deal with routine conditions.

Waiting times for outpatient appointments are generally acceptable, but with some volatility. Routine GP appointments in recent months have been available in four to 16 working days, depending on resource and demand, but invariably urgent cases are seen within 24 hours.

In the dental clinic routine appointments are currently available within 10 working days; however, recently there was an equipment breakdown, causing a longer wait for appointments. As for the GP clinic, urgent cases are seen within 24 hours. Waiting times for the optician and physiotherapy are reasonable.

Attendance for appointments at the GP outpatient clinic is 79%. This compares with only around 50% pre-Covid lockdown. The attendance rate has reached as high as 92% when the prison provides a dedicated escorting officer, based in healthcare, to fetch men from the houseblocks for their appointments, and the attendance rate improves when there are regime restrictions and men are not scattered to activities. However, prison management prefers responsibility for getting men to outpatient appointments to be part of daily house block officer duties. That debate continues.

Successful attendance at hospital appointments is running at an acceptable level.

The inpatient unit closed in August 2020, just before the start of our reporting year (see 6.3 for a description of its intended future use). We are repeatedly told that all patients requiring an inpatient level of care can be managed on the wings, but this does not completely reassure us.

An average of 44% of prisoners taken ill (approximately four a week) are escorted to outside hospital A&E for assessment, hardly any of them being admitted. This has provoked a challenge by the Governor as to whether more cases could be dealt with safely by healthcare within the prison, as hospital escorts are labour intensive and drain resource, leading to officer shortages and restricted regimes. Healthcare has defended what must necessarily be clinical decisions and we have not become involved for that reason, but the point has been made. An average of two or three hospital bed watches at any time contributes to pressure on officer resource.

We receive more applications from prisoners about healthcare than for any other category, even property. Many of these applications are inappropriate, e.g., where we are asked to interfere with prescription decisions, or are an attempted shortcut to save submitting healthcare applications. It is even apparent that some prisoners try to use our perceived influence to obtain unjustified drugs which they can then trade with others, a phenomenon which is exacerbated with the shortage of illicit drugs now entering the prison (see 4.6). With an average of 260 receptions and releases each month at this busy local prison, keeping on top of prescribing is a huge challenge. Nonetheless, allowing for all this we are still left with the impression that often there are unacceptable delays in men receiving necessary medication, either on arrival into the establishment or in the issue of new or renewal medication for existing prisoners.

Daily dispensing of medication is problematic, with local friction between pharmacy staff and wing officers. The core day on the house blocks has recently been reorganised in an effort to accommodate efficient medication dispensing twice a day, but pharmacists complain that they are allowed insufficient time to dispense safely. Wing officers accuse pharmacy staff of arriving late or taking too long to set up. Wherever fault lies, daily disruption is being caused to house block regimes and rolls, and it is to be hoped that prison and healthcare management can agree an early solution.

### **6.3 Mental health**

The mental health team's caseload represents 52% of the population, encompassing mental illness (21%) or personality disorder (31%). This is a huge and demanding workload.

The segregation unit often houses men with serious mental health issues, awaiting transfer to a more appropriate secure location. The delay in transferring them is often unacceptable, but partly reflects the scarcity of suitable secure places. Segregation is far from ideal for these prisoners, but is regarded as the least-worst option. During the reporting year there was an average of four prisoners approved for secure accommodation but awaiting transfer.

An unresolved problem is the lack of appropriate representation at rule 45 reviews of mentally unwell prisoners in segregation. Healthcare largely complies with the duty to have at least a primary care staff member at all rule 45 reviews, although sometimes they arrive late, or not at all. But best practice would be that reviews of

mentally unwell prisoners would be better served by the attendance of someone from the mental health team. This has been accepted in principle by all parties, but agreeing a working procedure seems to be heavy work.

The former inpatient unit was refurbished and adapted to accommodate complex challenging prisoners and will, in essence, be a PIPE unit (psychologically informed planned environment). It has been named the Oak Unit and opened days before the end of our reporting year. A referral and assessment procedure has been finalised for the selection of suitable residents, who were just beginning to arrive.

See also 6.6: complex dependency unit.

#### **6.4 Social care**

Frequently the needs of prisoners with mobility issues are not met.

There has been some difficulty experienced when prisoners have been discharged from local hospitals without the prison being alerted to their social care needs, and the prison has not been adequately prepared for their arrival. An updated protocol is now being worked-up to achieve better liaison between the hospitals and the prison. For example, in the last week of our reporting year reception refused to accept a prisoner who could not walk and who had just been discharged from a local hospital.

#### **6.5 Exercise, regime**

For the whole reporting year, access to traditional regime was severely limited. Nevertheless, the Board is of the view that the prison did everything in its power to maximise access to elements of the regime.

At the end of the reporting period prisoners were able to have one gym session a week. A long-serving officer was proud of the fact that during lockdown they had physically knocked on every cell door once a week, encouraging men to take up the gym session; they believe this improved mental health and kept tensions and management problems down.

#### **6.6 Drug and alcohol rehabilitation**

One house block has traditionally been the detoxification wing. A wellbeing unit has now been established on this houseblock, housing prisoners with complex dependency, either for drug misuse or mental health problems. Mental health practitioners are based permanently in the unit, which is achieving some early good results.

#### **6.7 Soft skills**

Social distancing and other Covid restrictions have significantly limited group activities during the year.

The art project created by men on the wellbeing unit to create decorative panels for the main walkways has had an immediate and very visible impact on the appearance of the prison. An extensive origami project set up on the initiative of a prisoner appears to have had a marked impact on the mental health and stability of many men in the prison.

## **7. Progression and resettlement**

### **7.1 Education, library**

During the reporting year a library service was provided to houseblocks. Library staff reported an increase in the number of prisoners borrowing books and DVD's during that period. Library staff were also able to encourage men to complete in cell activity packs.

The prisoners who work in the library tell us of the benefits they think they have brought to prisoners, and how they enjoy introducing and matching books to men. They speak of the library being more than books and give examples of librarians being able to access information on a range of topics to assist prisoners. They have an insightful view about the number of men who cannot read or write and how they can be helped while in prison.

The enthusiasm and positivity of the staff is a tonic.

### **7.2 Vocational training, work**

A number of initiatives to train men with construction and painting and decorating skills have been launched, including a project whereby a small number of prisoners are employed to work with contractors to redecorate and refurbish prison accommodation and the launch of a training academy by a commercial company to provide men with formal training and qualifications in the painting and decorating trades. The Board has no evidence of the reach or impact of this academy.

### **7.3 Offender management, progression**

It remains a concern for the Board that men remain incarcerated under IPP sentences with little hope of progression or release. In late September 2021, the IMB carried out a short investigation into the circumstances of men serving IPP sentences at HMP Hewell. At that point there was a roll of 882, of which 29 appeared to be IPP prisoners: 23 of them had been out on licence but had been recalled to custody; the remaining six had been in custody since their original sentencing.

The IMB interviewed six of the men recalled and one of those continuously in custody, about a 25% sample of the total group.

Three of the men recalled had been out on licence for six months or less; the other three had spent from 18 months to five years on licence before being recalled. The reasons for their recall were given with apparent frankness, though one man claimed to have received no papers whatsoever in connection with his recall.

Broadly speaking, it was to be hoped that the behaviour or circumstances which had led to the recall would be addressed during the men's time back in custody. The length of this period varied considerably. One man, the person claiming not to have received any papers, had been back for only two months; the others had been back for periods ranging from one to four years. Given the significance of the impending

Parole Board hearings, the IMB was particularly interested in how this additional time in custody had been spent.

Even within this small group, the findings were very patchy. The IMB was particularly concerned by the situation of the man who had served four years since his recall. He described himself as autistic, which seemed very evident to a lay observer, and reported that he had had no job or courses or other interventions during that lengthy time in custody. Of the remaining four, one had had work in the kitchen and the other three had done some relevant work in their cells. It was encouraging to learn of a “relapse prevention course”, begun in the prison and to be continued on the outside.

The one man who had yet to be allowed out on licence had received his IPP sentence in 2004. With a tariff of two years, he would have been considered for release in 2006. Yet ‘five or six’ successive appearances before the Parole Board had each resulted in an extension of his custody. He had, by his own description, not been a conforming prisoner, but had apparently now come to see that his route out of prison lay through demonstrating better behaviour inside. The IMB was not in a position to judge whether the frustrations of this greatly extended period of imprisonment had contributed to the behaviour which was keeping him there.

Following are two more individually focused examples from interactions with members at HMP Hewell:

*Reporting a rota visit on 30th March to Houseblock ...: 'A sombre conversation with a polite and thoughtful prisoner - 13 years into a three-year IPP tariff'. I remember this conversation very clearly - this prisoner was working as a domestic on the induction unit. We talked at length about his situation and the hopes he had for release and to be reunited with his partner and daughter - who was then, from memory, about 18. He was distraught at having missed her growing up. He told me that he had 'gone backwards' for a time during his sentence once he had served his tariff and had developed a serious drug habit which he was proud to have recovered from. His energy and focus at the time of our conversation was on doing everything possible to secure his release and on being reunited with his family. I remember being struck by his dignity and the remarkable lack of rancour he displayed towards the prison system.*

*One of the most challenging individuals held at Hewell is Mr D who is significantly over tariff on an IPP sentence. His behaviour has long been destructive and has featured frequent significant and distressing self-harm and regular periods of segregation. After a lengthy period of relative stability on Hewell's wellbeing unit an incident led to a further short stay in the Segregation unit 19-20th April. I visited him back on mainstream location on 22nd April and then had a lengthy conversation about his case with the prison psychologist who knew him and his case well. Mr D has received significant input and care from the prison and every effort has been made to support him subject to the fact that his IPP status reportedly exacerbates his condition. The incident in April was deemed in part at least to have been triggered by his anxiety around his oral hearing scheduled for 5th May. Since then, he has reportedly been stable and has not self-harmed. An invitation to consider a role as an orderly in the new Oak Unit at Hewell was recently made to Mr D but he felt unable at the time to consider the role and its implications. He remains in receipt of*



*extensive support and care with the priority being to maintain some stability for him. His IPP status makes constructive planning for the future almost impossible for and about him."*

We remain of the view that such a system is inhumane.

The situation of remand prisoners is a continuing concern to the Board. Estimated by the Prison Reform Trust to be typically 11% of the national prison population, remand prisoners are a much larger element of the roll at HMP Hewell. In the Board's most recent snapshot 187 of the 841 prisoners held there were on remand. This equates to a little over 22% of the total.

It is national policy that people who remain unconvicted are exempt from some of the obligations that go with effective resettlement. A period on remand, however, can bring the constraints and disruptions associated with custody without the elements which are potentially constructive. At its extreme, this can create situations such as one observed by the Board. A man, held on remand but resident in segregation, attended a hearing at court and found himself released. Within a single day he had passed from an extreme form of custody to the open street. For him the processes of resettlement cannot have even begun.

The Board draws two conclusions from this situation. One is the imperative of reducing the time spent on remand. The second is the value of the prison's ambition to coax more of the cohort on remand into appreciating that their time in custody could become an opportunity.

More generally, the prison has ambitious plans extend the opportunities which it offers, to sharpen their relevance and to make custody a more constructive experience. The Board admires these goals unreservedly, but it has largely been unable to monitor their implementation. The pandemic has prevented any systematic tracking of prisoners' experiences as they moved through their time at HMP Hewell.

During the year the Board has received a number of applications from category D prisoners who were frustrated at not being able to move to an appropriate prison to complete their sentence.

#### **7.4 Family contact**

*On walking from the car park to the Gate I attempted to put myself in the position of a parent or partner visiting a prisoner for the first time. The overgrown shrubs, rank grass and weeds as well as the accumulating rubbish (I counted 20 face masks, for example) would not give me confidence that conditions within the prison were any different. (Rota report 19 September).*

The experience of families arriving for a visit leaves much to be desired. Although the interior of the visitors' centre serves its purposes in a pleasant and appropriate manner, the approach to the building is quite different. It is neglected, dirty and overgrown with weeds. Families are not to know that it is entirely unrepresentative of conditions within the prison wall. The Board has raised concerns about this consistently.

The staff at the centre, in our experience, do their best to provide a warm welcome to visitors. We have evidence, however, of visitors being given inaccurate information about the facilities available and systems in place at Hewell by the central booking service and have been told of frustration at the lack of food to purchase and of drinking water.

The introduction of in-cell telephony has had a significant impact on the ability of prisoners to maintain contact with their friends and families – with the flexibility of time for calls being cited as a major benefit.

The use of video visits has largely been welcomed by the prisoners, with benefits reported to us including the lack of travelling time, reduced cost and mitigation of Covid risk to families. For some men, being able to see their families at home has been reassuring. One man was able to see the decorating his father had done, another was able to meet the new family puppy. In the scheme's early days some prisoners reportedly found the sight of their own home on the video overwhelming, but the prison took steps to provide additional welfare checks after such visits.

The restructuring of family liaison teams within the prison during the year after a bumpy start appears to be paying dividends, with a more coordinated approach to the services being offered. Much-improved communication with families in the form of newsletters and the use of social media for updates has been welcomed, though we have no evidence of the reach of such initiatives. We are aware of online family support groups and a regular Governor's forum with families.

During the year the main visits hall was refurbished, with the result being a welcoming and clean space. Prisoners were involved in the project in the form of an art project producing decorative panels for the play area.

## 8. The work of the IMB

This has been the fifth consecutive challenging year for the Board which has, at times, been on the verge on non-sustainability because of the pressure on members. While the impact of Covid-19 was the single most dominant force affecting the Board, other challenges also presented significant difficulties. Members' personal circumstances meant that at no time during the year were all members able to attend the prison, and for several months of the year we had almost no physical presence in the prison. The challenge of operating a mixture of in person and remote monitoring cannot be overstated.

Many of our experienced members have health or age-related restrictions on their availability and capacity. These challenges are likely to persist even with the lifting of Covid restrictions. Of the four members who were undertaking training and in probation in 2019/20, one resigned early in the reporting year. Five new members were appointed in December 2020, of whom one has since resigned. These new members were largely keen to attend the prison and gain experience, but their understandably limited availability presented significant challenges to the few experienced members who were able to train them on site. The hybrid system of onsite monitoring mixed with remote monitoring created severe challenges to the effective training of those new members.

The Board continues to enjoy constructive and professional relationships with the senior management and staff in the prison. However, it remains a disappointment and frustration that despite many requests the Board too often finds out about developments within the prison through social media rather than from the prison. This situation particularly affects fields such as the work that the prison does around children and families and projects involving outside agencies which support rehabilitation and training. This reluctance on the part of the prison to actively share information with the Board limits our monitoring and, in particular, limits our knowledge of many of the more imaginative and positive initiatives within the prison.

### Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	12
Total number of visits to the establishment	278
Total number of interactions with the establishment that resulted in an issue being raised on a rota report (including physical visits)	449
Total number of segregation reviews attended <b>(+virtual visits)</b>	48 (+56)

## Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	14	15
B	Discipline, including adjudications, IEP, sanctions	11	9
C	Equality	8	7
D	Purposeful activity, including education, work, training, library, regime, time out of cell	11	5
E1	Letters, visits, telephones, public protection restrictions	10	9
E2	Finance, including pay, private monies, spends	10	9
F	Food and kitchens	7	24
G	Health, including physical, mental, social care	114	53
H1	Property within this establishment	71	16
H2	Property during transfer or in another establishment or location	19	7
H3	Canteen, facility list, catalogue(s)	8	8
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	28	12
J	Staff/prisoner concerns, including bullying	65	66
K	Transfers	10	3
L	Miscellaneous, including complaints system	28	23
	COVID-19	6	4
	Total number of applications	<b>420</b>	<b>270</b>

Until August, all written applications were collected by the Business Hub and dealt with remotely. Now all applications are dealt with on site.

The number of applications returned to a more sustainable level. 59% were received on IMB application forms or paper; 25% through the national 0800 line and 16 % on Comp 2 forms. However, 84 applications (31%) came from two prisoners; prisoner R with 43 applications, all paper based, and prisoner D with 41 applications, all made to the national 0800 line.



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