



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

**For reporting year  
1 August 2020 to 31 July 2021**

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## Introductory sections 1 – 3

### 1. Statutory role of the IMB

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

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

- satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release
- inform promptly the Secretary of State, or any official to whom authority has been delegated as it judges appropriate, any concern it has
- 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**

HMP Bristol is a category B public sector local and resettlement prison holding adult and young male offenders.

It has had an operational capacity of 505 adult males, with a typical roll of 480–500 at any time over the past year.

The daily profile of the prison population varies, as many come from the local courts, awaiting trial locally, or are transferred to HMP Bristol in readiness for local release.

Given the population type, the rate of turnover of prisoners is high, with a churn of 20–30 individuals per week.

There is a large proportion (50%) of unsentenced remand prisoners. There is also a small number of lifers (recent figure 19) at HMP Bristol, or those who have an indeterminate sentence (recent figure 37, of which 17 are indeterminate sentences for public protection (IPP)) or with other complex needs who find themselves stuck in the system at this local prison.

HMP Bristol was first opened in 1883, and is a Victorian gaol, built with cells designed for one occupant but now often housing more. Further wings were added in the 1960s and 1970s. It is situated on a compact site in the densely populated area of Horfield within the city of Bristol, with prison walls closely located to exercise areas, enabling banned substances to be thrown over the walls and drones to easily access windows on the residential blocks.

A and G wing house standard prisoners and share a wing office.

B wing has previously held enhanced or super-enhanced prisoners, but this was not possible during the reporting year. There is no in-cell sanitation on this wing.

The Brunel unit was previously a dedicated healthcare wing for prisoners with complex mental health and physical health needs. In July 2021, it was reprofiled as a wing with single-cell occupancy, flat location for prisoners with mobility needs, and also has a dedicated constant watch cell.

C wing houses the reverse cohort unit (RCU) for new receptions to isolate in until tested negative for Covid-19. It also has the first night centre and an integrated drug treatment recovery and detoxification unit.

D wing is designated for vulnerable prisoners, including a ground floor wing spur for elderly prisoners and an adapted cell for a wheelchair user on the ground floor of the main wing.

The segregation unit has 10 cells.

### **3. Executive summary**

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

This is the second annual report produced during the period of Covid-19, and during this time various levels of an exceptional delivery model (EDM) have been in force. While many restrictions were in place during this period, there were also many new practices of quarantine, testing and vaccination being implemented. It is of great credit to the management, staff and prisoners that there were only two small outbreaks of Covid-19 infection during this time, which were short lived, and there were no serious illness or deaths from Covid-19 in the prison population.

The operational capacity at Bristol was maintained at a reduced level, agreed following the urgent notification by HM Inspectorate of Prisons (HMIP) in 2019, to facilitate progress in areas of safety and decency. The HMIP scrutiny visit in September 2020 was very positive about progress made, and the prison has since come out of the urgent notification. Although this is just out of the reporting period, we feel it is worth noting and celebrating.

#### **3.2 Main judgements**

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

Since the HMIP inspection of 2019, safer custody has remained rated at level 1, the lowest rating given by HMIP. Several initiatives have been introduced over the last 18 months. These include not unlocking a whole wing at one time, food only being served one landing at a time at supervised serveries, wellbeing buddies, and weekly safety action (SAM) and safety intervention (SIM) meetings to support those who are at risk of self-harm or perpetrating violence. All prisoners have access to a safety hotline from their in-cell phone line. The usage is monitored by staff, and welfare checks on prisoners are made if any concerns arise. Main concerns raised were recorded as mental health, medication and transfers. There is an external safety line, where family or friends can leave messages concerning the welfare of prisoners. This is also monitored, and welfare checks are carried out if necessary. All these initiatives have seen an improved downward trend of self-harm and violence, with data to support this.

The Board has the perception, and has heard from prisoners, that the prison has felt safer in the last year. This is supported by the HMIP scrutiny visit survey, which found that 28% of prisoners felt unsafe, a significant reduction from 62% reported in 2019. The safer custody team has carried out focus groups and surveys on feeling unsafe, and these concerns can also be expressed at prison council meetings attended by wing representatives.

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

On returning to the prison as restrictions began to be lifted in spring 2021, the Board has noticed that the general environment has significantly improved on the wings and in the grounds. As noted in last year's report, the wings feel calmer and prisoners have free access to basic toiletries and prison clothing. Staff consistency on the wings has led to better communication with the prisoners.

There is still a problem with disability access, especially to the healthcare building, due to the Victorian buildings and layout of the prison.

Key working has been adapted during the year, and has not been consistently delivered.

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

Healthcare provision is generally good and there has been successful management of Covid-19 infection, prevention and vaccination.

A variety of wellbeing resources are available for prisoners and staff.

There is an increasing number of older and disabled prisoners with medical, mobility and social care needs in the prison. Typically, around 30 prisoners are classified as needing personal emergency evacuation plans (PEEPs). While these needs are mostly being met, this can impact on staffing, due to hospital attendances and increasing numbers of bed watches. At its peak, there were nine prisoners on 24-hour bed watches requiring one-to-one supervision.

The Criminal Justice Inspectorates joint inspection report, 'Neurodiversity in the criminal justice system: A review of evidence', published in July 2021, estimated that half of people entering prison could reasonably be expected to have some form of neurodivergence, and this impacts their ability to engage. Support for neurodivergence in HMP Bristol is an area of concern for the Board.

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

There is a high number of remand prisoners who have spent long periods in Bristol and who may be released without having been fully prepared when they do finally get to court.

The improvement in the number of prisoners released to settled accommodation has been maintained and there are several initiatives now running to improve outcomes on release.

Education delivered in-cell during the EDM restrictions was well received and is gradually returning to a blended face-to-face and in-cell learning approach.

## **3.3 Main areas for development**

## ***TO THE MINISTER***

What initiatives – for example, training for prison staff – are planned to improve outcomes for prisoners with neurodivergent conditions, which, as we have observed and a recent review outlined, impacts their ability to engage?

How is the Ministry of Justice working with other agencies to consider alternatives to prison for elderly and vulnerable prisoners who could be better managed in non-custodial environments?

Why was Covid-19 vaccination not carried out as a pan-prison programme to protect vulnerable prisoners in crowded environments and also staff, many of whom should be considered equal to care staff in their role? Is this being reviewed for the future?

## ***TO THE PRISON SERVICE***

Can you provide further resources and guidance as to how key work should be delivered and how well it is achieving its strategic intentions?

The reduction in the operational capacity following the urgent notification in 2019 has facilitated the progress in safety and decency observed in our report. We hope that the numbers will not be increased too quickly or too high to enable this progress to be consolidated.

Please encourage HM Prison and Probation Service (HMPPS) and other visitors to the establishment to make contact with the Board. As independent volunteers carrying out a statutory role, we are a vital set of eyes and ears, and can provide valuable information and insights into the prison.

Property delay or loss during transfers from other establishments remains a problem locally and nationally. What is being done to improve this?

## ***TO THE GOVERNOR***

The Board has welcomed Governor attendance at our Board meetings, and useful communication between meetings including with the Deputy Governor. We hope that we will be invited to meet visitors to the prison and attend appropriate debriefings, which did not happen consistently during this year.

It would also be useful to share details of how various initiatives are aligned to key areas for improvement, so we can better monitor and report on developments.

Can you facilitate access to appropriate room allocations, so that the mental health, substance misuse and other teams can deliver their full range of programmes effectively?

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

## **Safety**

The safety team has put in place processes to improve safety and wellbeing, and this is evidenced by the reduction in self-harm and violence. The Board is grateful that while monitoring remotely, the governor of safer custody was available for a weekly telephone update and always responded to questions or concerns by email.

## **Fair and humane treatment**

Accommodation and general environment improvements have continued and built on last year's progress, which has had a positive impact on the mood within the prison. Prisoners have continued to report positively about the management of the regime, with smaller groups out on the wings for meals and domestics.

Disability access has still not improved, including access to the healthcare building.

Issues regarding loss of property and delays in receiving property when transferred to and from other establishments continue to be a problem, although reduced in number this year.

## **Health and wellbeing**

Cooperation between healthcare and prison staff reported last year has continued. As in the community, there are still delays for some services, such as dental treatment.

Time taken to transfer prisoners with severe mental ill-health to a secure hospital placement has improved slightly but varies significantly between different hospitals.

## **Progression and release**

Last year's improvements in numbers released into settled accommodation have been sustained despite the cessation of the government funding for hotel accommodation. The prison has been proactive in working with outside organisations and has been successful in starting new initiatives aiming to improve outcomes on release.

There are, however, some prisoners in Bristol who seem to be inappropriately placed. This includes individuals with significant mobility and social care needs, those recalled or remanded waiting for court dates, and vulnerable immigration detainees.



## **Evidence sections 4 – 7**

### **4. Safety**

No further full HMIP Inspection has taken place since June 2019. In this reporting year, self-harm and violence has reduced at HMP Bristol, and by comparison with other local prisons, but the HMIP safety rating remains at Level 1 which is the lowest rating.

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

Prisoners entering reception are screened by healthcare staff for Covid-19 infection. They are then transferred to the RCU on C wing for up to 14 days. Prisoners are tested on days 1 and 5, and if a negative result is confirmed can be transferred to other wings after day 7.

Induction takes place on day 1, conducted by a team of trained peer mentors and Listeners supervised by an induction officer. Full induction is given for those in prison for the first time in the first night centre. Induction is held separately on C wing for licence recall prisoners, and those who have been transferred. Prisoners who arrive but require detoxification are given induction after day 5. Separate inductions take place for vulnerable prisoners (VP's) and those who are placed in the Brunel unit.

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

There has been a reduction in the number of assessment, care in custody and teamwork (ACCT) documents opened, from 1,041 in the last reporting year to 781. Most ACCTs are opened in reception due to a past history of self-harm or expression of low mood, anxiety or intent to self-harm. The Board regularly reviews a sample of ACCT records as part of visiting.

ACCT Version 6 was introduced in July 2021 and is a revised document. Staff have received training on how to manage it correctly.

Self-harm has reduced, from 1,026 incidents recorded last year to 570. Most incidents of self-harm are recorded as cutting. Main triggers for acts of self-harm are recorded as anxiety/stress, mental health and family. Prisoners who are recorded as self-harming, and the support they can be offered, are discussed weekly at the SAM. The introduction of wellbeing mentors, alongside access to Samaritans and Listeners, is another initiative to help support prisoners at risk of self-harm. Distraction packs have been available to all.

There has been one death in custody this year, apparently due to a drug overdose. The Prisons and Probation Ombudsman report has been produced and its findings regarding drug strategy, and challenge, support and intervention plan (CSIP) management are being addressed by the prison. None of the outstanding inquests have taken place.

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

There were 234 recorded incidents of violence in this reporting year, a reduction from 333 last year, and this is now lower than comparison data for other local

prisons. There were 102 recorded assaults on staff and 138 incidents of prisoner-on-prisoner assaults. The main reasons stated for violence were prison disagreements, mental health, bullying, debt and the illicit economy. All prisoners who commit violence are referred to the CSIP process. This plan is used as part of the violence reduction strategy, and prisoners who assault staff should be debriefed and the drivers for violence understood.

In this reporting year, it is noted that, of 152 violent prisoner-on-prisoner incidents recorded, 68 were unwitnessed by staff. In some cases, closed-circuit television (CCTV) coverage was unavailable and no action could be taken against the potential perpetrators.

#### **4.4 Prisoners with specific vulnerabilities**

Vulnerable prisoners are housed on D wing. All prisoners of concern are discussed at the weekly SIM. The number and wing location of prisoners who receive social care, safeguarding referrals and PEEPs are recorded.

#### **4.5 Use of force**

Recorded incidents of use of force have reduced from 544 last year to 416. The main reasons recorded for the use of force were non-compliance and threatening or abusive behaviour. Most recorded incidents are full control and restraint, and the use of rigid-bar handcuffs is recorded.

Use of force learning and development meetings have taken place regularly but the Board has only attended two in person this year. During these meetings, good practice has been witnessed but it is still a concern that footage is not always available, as body-worn cameras (BWCs) were not worn or turned on and no CCTV footage was available. The majority of recorded incidents are unplanned and this highlights the importance of BWC footage to monitor the proportionate use of force effectively.

Use of force should be used as a last resort and should be reasonable and proportionate to the seriousness of the circumstance. A review on neurodiversity published by HMIP in July 2021 reported that prisoners with neurodivergence should receive greater support and understanding. At the learning and development meetings attended, it has been noted that prisoners with neurodivergence have not always had this taken into account when force is used.

Pava is only to be used by trained staff. It has not been used this year.

#### **4.6 Substance misuse**

The substance misuse team is provided by the partnership of Avon and Wiltshire Mental Health Partnership (AWP) and Hanham Secure Health.

Assessments, including any appropriate drug screens, are carried out on new receptions, and community opiate substitution therapy prescriptions are confirmed and monitored. C wing has a dedicated landing for a detoxification unit, as well as housing the RCU for new receptions to isolate. Face-to-face interventions were

significantly reduced during the year, but monitoring and support of new arrivals with drug and alcohol problems continued remotely.

Trends in community drugs usage and those found in the prison are monitored regularly at drug strategy meetings. Mandatory drug testing (MDT) data was not available due to suspension during the EDM.

During the year, the Board noted that a reduction in supply of drugs, including new psychoactive substances, or 'spice', was followed by an increase in the finding of hooch on several wings. The exposed hot water pipes on B wing seemed to be a popular location for this, and it was associated with an increased reporting of violence on the wings. As lockdowns in the wider community were lifted, reports of throwovers increased. A couple of capital funding bids for netting over some of the exercise yards close to the perimeter were successful and are due to be completed by the end of the financial year. There is also improving collaboration with the local police for reporting suspicions.

MDT did not take place in the reporting year. A dedicated security team was proposed to coordinate MDT, suspicion testing and searching but was not progressed due to resource limitations and Covid-19 restrictions. Suspicion MDT testing has since restarted, with ongoing training planned.

Photocopying of all mail other than Rule 39 legal mail continues. The Board is aware of instances of legal mail being used to get drugs through security, but also a very few instances of legal mail being opened incorrectly, which were followed up appropriately by the prison. Suspicious Rule 39 mail is now taken to the security department, and solicitors are contacted to see if it is legitimate.

Other measures to reduce drug supply include enhanced gate security for all staff and visitors to the prison. Airport-style security screening is now a routine process for everyone entering the establishment.

A body scanner was installed at reception and prisoners arriving from court, other establishments or medical appointments can be scanned for concealed items. The scanner is also used when there is suspicion of concealment – for example, prisoners refusing to squat during cell searches. An amnesty room is available for prisoners to use before and after being scanned. The number of finds reported is low but it is probable that the use of the body scanner will discourage people purposefully being detained to bring drugs and other items into the prison.

Drug strategy is now being led by a police officer on a two-year secondment from Avon and Somerset Police. He took up his post in April 2021 and this seems an innovative initiative to bring experience, local contacts and ideas from the community into the prison. Since security staff are focused on the first strand of the drug strategy, reducing the flow of drugs into the prison, his focus is on the other two strands – reducing demand and supporting recovery, which are often neglected. He is aiming to use his influence within the prison senior management team to empower substance misuse staff and key workers, and the Board will monitor how this develops with interest.

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

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

After years of neglect and the Board's reporting of the poor standards of accommodation and facilities, HMP Bristol has, at last, had access to the necessary capital work funds, as well as the creation of a dedicated prison works maintenance party, to complete the upgrade of many of its key areas.

A and G wings have now been almost fully refurbished, with flooring replaced, and both serveries and all showers fully refurbished.

Other work completed during the year included:

- staff showers/facilities, including the installation of a new boiler
- refurbishment of showers and toilets in the Brunel unit
- new boiler currently being installed on B wing
- refurbishment of the multi-faith centre (Harmony Centre)
- refurbishment of the ground floor of Oak Centre to create new offender management unit (OMU) offices
- new staffroom created at the top of F wing.

Future work is also planned to include:

- refurbishment of the showers on C wing
- full refurbishment of the Brunel unit, to be completed by the maintenance party
- replacement of all cell windows
- installation of a new boiler on C wing
- new roof for the Oak Centre
- repair of drains.

It is pleasing for the Board to note that all cells are now entirely furnished with new white wood-frame beds and furniture, with the old Victorian metal beds of the past finally gone. Privacy curtains are provided in-cell, and graffiti to the walls has been reduced through the use of a 'blackboard' paint, to enable prisoners to use temporary chalk on their cell walls.

Overall, the general ambience of the prison is one which feels revived and refreshed, with less litter and an abundance of filled plant containers around the establishment. The garden area and fish pond have been tidied up, and animal enclosures introduced for chickens and bees.

A prisoner cleaning team operates efficiently to keep all the common areas clean, and prisoners have access to their own cell cleaning packs.

Although physical cell checks were not always possible during the year, fabric and cell decency checks are now undertaken on a regular basis both by wing staff and

senior managers. If any checks are missed, then this is followed up directly by the head of residency.

As the heating systems utilised are compromised by the nature of the Victorian accommodation, heat control can be ad hoc. The Board is advised that it can take up to four days to bring the prison up to temperature and/or to turn the heating off completely. This means that during periods where the weather is changeable and unpredictable, the prison can be too hot or too cold. Regulations apply to ensure that minimum temperatures are adhered to and blankets are issued to prisoners during particularly cold spells. However, there are no regulations around maximum temperatures, and the Board has witnessed hot radiators on during hot spells and prisoners confined to hot cells for long periods. Without modern facilities and air conditioning, this problem is likely to become worse over time, with new cell windows planned with restricted opening, as well as climate changes.

Overall, the Board has seen improvements in maintenance follow-up and laundry facilities, and received fewer complaints in these areas. Availability of prison kit has also improved and the new 'help yourself' readily available supplies of essentials such as pants, toilet rolls, soap, shampoo, etcetera, have stopped the practice of prisoner stockpiling which created shortages in the past. Issues have occurred – for example, with the delayed provision of XXXL kit or the provision of kit from the female estate for transgender and other prisoners.

The standard of food provision remains good. Portion control has been improved through the use of dedicated 'one portion' containers. There has also been a marked improvement in supervision of the wing serveries. This has been driven by the EDM put in place, which has facilitated better management of pre-ordering, limited queues at the serveries and improved hygiene procedures. As with other facilities, the Board has had virtually no complaints from prisoners in this area during the year.

## **5.2 Segregation**

The segregation unit has 10 cells. Occupancy continues to be generally low. If appropriate, prisoners are segregated on the wings and segregation cells used for those who need to be separated from the wings or have specific unlock protocols.

In general, the Board remains satisfied with the improved environment and management of prisoners in the segregation unit. Staff are helpful and mostly well-informed about the prisoners in their care, and have been observed to interact well with them, even during forced removals and other challenging situations.

A prisoner who had been on the segregation unit for over a year and on dirty protest for most of this time was transferred to HMP Portland in April. Initial reports were that he had settled well and was engaging in some regime there, which was surprising, given his behaviour at Bristol, despite regular review at complex case meetings. This did raise concern within the Board that attitudes towards him could have become entrenched due to the persistence of his challenging behaviour.

This transfer has, however, improved the general environment of the unit, and cell repairs and upkeep are good. Prisoners are seen to access exercise and fresh air,

and are offered showers and access to phone calls. There is a small library of donated books, distraction packs and activity leaflets on the unit.

There have been a few occasions of other prisoners staying in segregation for over 42 days. This has been appropriately flagged and options discussed, and the Board has observed careful consideration of how to move them out of segregation either within the prison or to other establishments.

Board members have not been able to attend many good order and/or discipline reviews, but have been able to look at paperwork, which is up to date and complete. There have been prisoners in segregation who are also on ACCTs, but documentation is up to date and mental health staff are involved in reviews and available for support.

The Board has observed several adjudications on the unit and has been impressed with the way these are carried out in a fair and appropriate manner.

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

Despite key work being a declared pillar of the HMPPS planned prison improvements, it continues to be available to prisoners on an ad hoc basis. The notion that every prisoner should have access to a 45-minute chat with a dedicated key worker on a weekly basis is still a goal that remains very much out of reach, partly due to the EDM, but also to insufficient staffing. Key work, as part of staff profiling duties, will often suffer when staff need to be profiled for other, more pressing duties, including healthcare escorts, constant supervision and bed watches.

HMP Bristol has sought to mitigate the problem. Firstly, there was a daily 'welfare check', essentially asking every prisoner if they were 'OK'. Secondly, all identified vulnerable prisoners should have had a version of key work oversight provided to them by local wing staff.

HMP Bristol has been offering key worker sessions every week to its prisoners on ACCTs (including post-closure), on CSIPs, with a high violence in prisons estimator (VIPER) score and with a high score on the maturity screening. This accounts for about 13% of the current population.

There is a plan in place to develop a new model which would increase the number of prisoners receiving key worker sessions on a regular basis. All prisoners would receive a key worker session every month, and a high-risk cohort twice a month. The high-risk cohort is a locally agreed cohort of prisoners who it is believed would most benefit from regular meaningful contact.

Those leading on key work are seeking to engage staff in adopting this new approach, ensuring that they understand the importance of good prisoner relationships and creating a 'key worker champion' role within each wing, who will be a local point of contact for colleagues and a champion for quality and standards. Prisoner-nominated 'welfare officers' have also been appointed and trained to offer prisoner-to-prisoner support where required.

Despite the initiatives to meet key work targets, the Board has yet to see much evidence of the quality and positive outcomes of that key work on prisoners. In particular, there have been several examples of the Board witnessing inconsistent engagement and use of coping strategies by staff dealing with particularly 'difficult' prisoners. Due to prisoners' challenging behaviour (for example, due to autism spectrum disorder or an ongoing dirty protest), staff have sometimes been reluctant to step in and try to make a difference. Given the confines of prison life, this has exacerbated rather than improved the outcomes for some of these vulnerable prisoners.

The Board highlights the case of one particular prisoner with Asperger's syndrome and severe anxiety who was remanded in custody for over 14 months pending trial. Given delays to the court process due to Covid-19, the prisoner was offered a plea bargain which, given time served to date, would allow his immediate release. Having taken this offer of the plea bargain to secure release, the prisoner's detention was then extended on instruction of the Home Office pending an intention to deport, and so he has remained in custody at HMP Bristol with no clear path forward. The Board has witnessed highly detrimental effects on this vulnerable prisoner (leading to threats of suicide) as well as a lack of active or timely engagement from various officials that have been involved in his case. Despite completion of his sentence, he remains in prison, unable to get bail or removal to an immigration removal centre, without clear justification or explanation and without any independent legal advice. The Board notes that the prison does its best to accommodate his needs but there is no clear champion to positively assist him or his outcome while he remains detained at HMP Bristol.

### **Resourcing**

Prisoner treatment and key work was inevitably impacted by the ongoing lack of resources. Despite staffing numbers being, on paper, above the benchmark of 154 staff, in reality staff are unavailable for weekly commissioned work requirements due to a number of factors, including, for example, training, allocation to specific tasks/projects, sickness, Covid-19 isolation and restricted duties. This can be seen in the following table:

<b>Month</b>	<b>No. shortfall of staff versus benchmark</b>	<b>Equivalent lost hours – work not completed due to resource deficiency</b>
Aug 20	32.51	1,176
Sep 20	38.5	1,359
Oct 20	40.5	1,420
Nov 20	78	2,598
Dec 20	43	1,506
Jan 21	37	1,320
Feb 21	35	1,258
Mar 21	34.96	1,091
Apr 21	36.26	1,131
May 21	35.71	1,114
Jun 21	33.36	1,041
Jul 21	43.31	1,351

The Board noted that forecast attrition rates were around four staff per month, which is approximately 48 per annum, or more than 30% of the approved staff complement. This is a very high percentage for any organisation to cope with, which must add significantly to the challenges facing the management team.

Exit interviews with departing staff have indicated a number of issues regarding uncompetitive pay, long working hours and challenging working conditions, among others. Given the limited influence that local management has on some of these issues, the focus recently has been on softer factors, such as improving working conditions, training and teamwork. However, given the ongoing relocation of other government departments to the Bristol and South Wales area, pressure on retention will remain high as staff can relatively easily seek straightforward inter-departmental transfers into roles which are better paid and less arduous.

## **5.4 Equality and diversity**

The Board has been successful in obtaining some information regarding the number of complaints submitted regarding equality and diversity, and other related data. The prison now has a full-time equality and diversity lead and a part-time equality and diversity officer employed. It has, however, been challenging to maintain a consistent line of communication with the allocated staff due to absence and consequent cancellations of equality and diversity meetings, to which the Board has otherwise received an open invitation.

The Board has been promised full access to electronic copies of discrimination incident report forms (DIRFs) and the responses. However, due to ongoing issues with accessing the internal prison computer system, the Board has been unable to access this data. A total of 28 DIRFs were submitted in the first six months of 2021, two of which have been upheld. To compare, the calendar year of 2020 saw 91 DIRFs submitted, with 12 upheld.

The average number of days taken by the prison to conclude DIRF submissions (from the date of receipt) has risen to 19 in 2021, in comparison with 12 days in 2020.

The Board has made a targeted effort to follow up on prisoners' DIRF concerns and, while a recent incident showed that some prison staff are yet to receive cultural awareness training, the equality and diversity lead is currently in talks with a company to supply this.

Age-related matters: The focus has been on both young adults and the older population in the prison. The prison is starting face-to-face engagement with Age UK for the latter population group and the hope is for a joint project to take off between Age UK and the Bristol Bears rugby team, aimed at wellness with the over-50s prisoner group.

Ethnicity: The prison has seen good engagement by prisoners in related meetings that have been held. Discussions have included food, access to the prison shop,



television channels, canteen products and the DIRF process. Notably, a cell drop to remember and reflect on the murder of George Floyd was undertaken by the prison.

In June 2021, the prison population consisted of 368 prisoners from a white background (including 39 'white other' and eight 'white Gypsy/Irish Travellers'), while there were 120 prisoners from a black, Asian and minority ethnic background, and another four prisoners about whom ethnicity data was unknown (two of whom had refused to supply this information).

In the four months up until the end of the reporting year, 18 DIRFs were submitted by prisoners in relation to ethnicity issues.

**LGBTQ+:** The prison reports positive progress in the last reporting quarter, with planning for August 2021's pride event to feature games, awareness, food and celebration, with engagement for both staff and prisoners.

**Religion or belief:** The prison reports good progress in regard to the development of support for all faiths and none. It hopes to receive support from the Humanist Association, which may be able to develop a chaplain training programme to support prisoners.

The Board has observed a genuine effort on behalf of the prison lead to ensure that equality and diversity issues are tackled appropriately and sensitively in the prison. The lead has informed the Board that the prison works closely with the Zahid Mubarek Trust (the regional prison partner) regarding advice on strategy, policy, and DIRF complaints and quality assurance, and that the lead's investigation forms and examples are reportedly used as regional best practice.

## **5.5 Faith and pastoral support**

The multi-faith department at HMP Bristol is the first in a UK prison to introduce the Harmony project, with the support of HRH the Prince of Wales. The aim is to help prisoners learn new ways of looking at themselves through the seven principles of nature and change the way they interact with others (<https://www.theharmonyproject.org.uk/>).

Harmony courses, events and various collective worship services are carried out in the newly decorated Harmony Centre.

Work has been under way during the mid-part of 2021 to support the opening, in August 2021, of a Harmony Garden with a small labyrinth, scented flowers, herbs, a water feature and benches. Three beehives were introduced in June 2021, and are in active use, with beekeeper training available to prisoners. The training package is also being offered to staff and the local community.

The multi-faith department has created the following range of courses, to be delivered by the chaplains as the EDM is lifted:

- Living with Loss – a seven-week course exploring the nature of loss and grief

- Mindfulness Meditation – a four-week course teaching the art of meditation, mindfulness and contemplation
- The Qur'an and Contemplation – a four-week course for Muslim prisoners needing support, inner peace and spiritual contentment
- The Labyrinth: A Journey to YOU – a four-week course; Labyrinth walking is an ancient practice for spiritual centring, contemplation and self-examination
- Living in Harmony – a seven-week course that will look closely at each of the seven principles of nature.

## **5.6 Incentives schemes**

A new earned incentives policy (IP) was rolled out from May 2020 to allow prisoners to work towards the super-enhanced status. It has been difficult to fully operate the new IP scheme this year, as the behaviour expected for enhanced status (for example, attendance at work or education) has not always been possible. However, what has changed is the decision not to use the policy to penalise prisoners (for example, during lockdown, access to a television was considered a basic need for all, and not linked to the incentives policy). An emphasis on using the 'carrot' rather than 'stick' approach has generally been well received and not led behaviour to deteriorate.

An updated IP policy was implemented in June 2021, and the position for HMP Bristol is clearly stated; it is recognised that punishment does not drive the right outcomes for anyone, and while there need to be consequences for intended poor behaviour, the focus for Bristol must be the growth of positive behaviour – for example, while a television can be removed for poor behaviour, the removal will not be automatic.

The IP policy allows progression to enhanced status via automatic review within 14 days of entering custody, providing that the prisoner has shown a willingness to engage in induction and activities.

A tuck shop was created for super-enhanced prisoners, to allow them to access popular canteen items more frequently. This has proved popular and a welcomed improvement, and feedback from prisoners was positive.

There is a risk assessment plan in place to allow C wing enhanced orderlies to remain out during the lunchtime patrol, unlocked behind their spur, as recognition for their effort in delivering the required standards of cleanliness.

## **5.7 Complaints**

Between August 2020 and July 2021, 1,480 complaints were received, increasing from 1,275 reported last year. The three most common complaints were related to:

- property: 21% of the total (see section 5.8)
- finance/cash: 20% of the total
- residential: 9% of the total.

The target for responding to complaints in writing is five working days for general complaints, and 10 working days for complaints relating to staff. Based on reported data, these targets were met more than 90% of the time.

The ratio of Comp1A forms (raised by a prisoner when they are unhappy with the initial response) to Comp1 forms (the initial complaint) was approximately 5%, which suggests that the complaints process is reasonably effective in addressing most prisoners' complaints.

The much-anticipated arrival of automated kiosks on the wings, which would allow complaints, applications, canteen orders, healthcare appointments and other prison systems to happen electronically, has been further delayed by unexpected cabling issues. This is disappointing and the Board hopes that finance can be found to enable this before too long.

## **5.8 Property**

Property was the biggest cause of complaints, and the second highest for Board applications. It continues to be a significant cause of concern for prisoners.

Loss of property during transfer from other establishments was a common cause of complaint, with the three-bag limit for transportation meaning that excess bags have to be delivered later, with the associated delay and risk of being mislaid. If the excess bags contain personal items, such as family photographs, it can be particularly distressing for prisoners.

Another significant cause of property complaints is when a prisoner is removed to segregation for disciplinary reasons, with items reported missing following the subsequent cell clearance. Given that the priority in this circumstance is on the safe removal of the prisoner rather than the security of their property, it is understandable that care of property is a lesser concern. However, some increased focus on securing prisoners' property in this circumstance would be beneficial.

An additional factor in property-related complaints has been that the property store was flooded on several occasions due to damaged drains, causing some damage and restricting accessibility. Work is currently in progress to repair the drains.

## **6. Health and wellbeing**

### **6.1 Healthcare general**

Healthcare is provided by a partnership of Avon and Wiltshire Mental Health Partnership (AWP), which delivers mental health and substance misuse services, and Hanham Secure Health, which delivers GP and primary nursing care as well as administrative staff. Other providers have regular clinics for dental, optometry, physiotherapy, podiatry, ultrasound and other services.

As in the community, healthcare staff have shown resilience in facing significant challenges during the pandemic and now, in the return to face-to-face services, as

well as coordinating the Covid-19 vaccination programme. There has been regular communication with and guidance from Public Health England.

HMP Bristol was one of the last local prisons to report an outbreak of Covid-19 in November 2020. Good infection control measures and an active testing programme by healthcare and prison staff resulted in only two small, short-lived outbreaks in November 2020 and April 2021, and no cases of Covid-19 leading to serious illness in prisoners. Mask wearing and social distancing was complied with reasonably well, with prisoners reporting feeling safe and happy with the measures to protect them. A team of prisoners was trained to undertake lateral flow testing for staff and visitors.

The HMIP scrutiny visit raised only one healthcare-related key concern, about dental waiting lists, which had increased during the pandemic.

Healthcare staff vacancies have improved but recruitment is an ongoing challenge and agency staff are used when needed. The figures below show the staffing situation in June 2021:

physical health: 4 vacancies

medicines management: 4 vacancies

mental health: 6.5 vacancies

substance misuse: 3 vacancies.

The head of healthcare reports a good working relationship with the Governor and issues are discussed regularly either immediately or at a bimonthly joint meeting.

There is also a bimonthly health information group: a forum for prisoners, which was not able to meet regularly during most of the year but has now resumed. It has raised some useful pointers for health promotion – for example, suggesting that, as prisoners tend not to read noticeboards, a newsletter delivered by cell drop may be more effective. This is now planned but has not yet been started.

A health bar was introduced and is now available on all wings, for prisoners to buy risk-assessed items for self-care. The aim is to encourage self-care and reduce demand for prescriptions for things like dandruff shampoos that would normally be available over the counter at community pharmacies.

There has been an increase in healthcare complaints, from 11 in October 2020, with 19 compliments, to 30 in June 2021, with no compliments. The main issues continue to be related to medication. The increase in complaints may reflect a reduction in tolerance, but could also indicate the need for clearer communication – for example, of changes in prescribing due to adherence to guidelines in prison. Some of these guidelines (such as which medications can be given in-possession) were amended during the EDM and have now changed again, which can be confusing. In-possession safes have been fitted in most cells throughout the prison, to give risk-assessed prisoners more autonomy.

Disabled access continues to be problematic, with no access to the routine clinics for patients in wheelchairs or with other significant mobility issues, as the clinics are held

on the first floor of a Victorian building. There has been discussion, but no specific outlined actions identified, about an external stairlift.

## **6.2 Physical healthcare**

Primary screening of new receptions continued throughout the year by nursing staff, with GPs arranging prescriptions. Despite concerns that healthcare staffing levels may affect secondary screening, this has remained good, with 97.6 % of secondary screening taking place within seven days in June 2021. This is an important opportunity to engage prisoners with health issues such as blood-borne virus and sexual health screening, as well as substance misuse engagement and identification of long-term conditions requiring monitoring.

During the EDM, GP and nursing care was triaged and delivered mainly on the wings. Clinics are now back running regularly, with a waiting time for a routine GP appointment of around three weeks. Clinics now run in set sessions, for one wing each morning and another in the afternoon, to reduce the Covid-19 transmission risk. Triage is undertaken for urgent issues. This has improved some aspects of clinic attendance, as prison officers only need to collect from one wing per clinic. This practice may continue as restrictions are lifted, as one of the lessons learned from the pandemic.

Healthcare staff have reported general progress regarding clinic attendances; however, this can be hampered by prison staffing issues, such as a high number of bed watches, which reduces the availability of clinic runners. In April 2021, 140 out of 445 clinic appointments and 14 hospital appointments were missed due to a lack of staff available for escorts.

There has been discussion of a variety of measures to reduce the need for outside appointments and associated prison escort staff. A physiotherapy audit discussed collaborative training and practice with the local hospital, to see if some management – for example, of hand injuries – could be carried out within the prison. Virtual orthopaedic assessments are also being set up. More opportunities like this would be helpful in improving access to appropriate healthcare provision but are, of course, dependent on engagement with secondary care as well as good technological support within the prison.

Dental services have been particularly badly hit during the pandemic, due to the high risks of Covid-19 transmission with aerosol generating procedures (AGPs), which led to them being suspended. These are now available but are limited due to the specific equipment, training (for both dental and prison staff) and time needed to clean and ventilate rooms after AGPs. Time for Teeth, the dental provider, reported that, in April 2021, approximately 22% of the population were awaiting dental treatment. It expressed concern that delays impact on already poor dental health in this population and may lead to avoidable teeth extractions. There were a few occasions where respirator-trained officers were not detailed to the dental clinic, leading to patient cancellations. There was also an issue when a disabled patient could not access the dental clinic, and there was no agreed pathway for him to attend an outside clinic, again leading to a delay in treatment. This has been resolved since

Covid-19 restrictions have been lifted, with an agreement with HMP Leyhill to provide appointments for prisoners who are unable to access the Bristol dental clinic.

Waiting lists for the external providers are held independently and it has not been possible for us to establish accurate current waiting times for these services.

The Covid-19 vaccination programme was rolled out according to NHS England guidance, to mirror the community programme. This was despite early guidance from scientific bodies advocating pan-prison vaccination for detainees and staff. There was a clear feeling that those in prison could not be seen to get vaccinations ahead of the community, despite the increased risk of transmission in the crowded prison environment. Early vaccine supply meant that the prison lagged slightly behind the community cohorts initially. Vaccination was delivered both on the wings and in regular weekly vaccination clinics. Over 95% of the prisoners in Bristol were offered vaccination. There is hesitancy among some groups to get vaccinated, and encouragement with cell drop leaflets, as well as use of peers with positive attitudes to vaccination, has been used. Prisoners coming into the prison, particularly in younger age groups, have a lower rate of vaccination than in the community in general, reflecting a largely disenfranchised population. However, healthcare staff vaccinated over 529 prisoners in the reporting year, with 272 prisoners (out of a total prison population of around 500) with at least one vaccination as of 1 August 2021. This is a lower vaccination uptake than in the community, despite the commitment of the prison and healthcare staff. Weekly vaccination clinics continue to be offered to all prisoners who are not fully vaccinated.

### **6.3 Mental health**

The mental health team reports that it has not seen a significant increase in mental health problems during the past year, but there is a concern that this may increase as frustrations develop due to fatigue with restrictions. There is also a concern about trauma and fatigue in healthcare and prison staff.

The mental health caseload fluctuates according to the prison roll, but is at around 52 cases, which is just under 10% of the prison population. There will be many more with low-level depression and anxiety, which, as in the community, is not covered by secondary care services.

There are still some delays for prisoners to be transferred to secure mental health beds, although there has been a slight improvement. Waiting time can depend on area, and recent transfers have varied from four to 70 days.

There are some specialist services available. A clinical psychologist and some nurses do one-to-one trauma work, and there are two neurodevelopmental nurse practitioners. There is also an attention-deficit hyperactivity disorder practitioner providing assessments and diagnosis, and supervising medication. There is no specialist personality disorder service but staff have training and experience in working with service users who have this diagnosis.

The Board has noted input from the neurodevelopmental staff for a prisoner with high-functioning autism. There was also some support and training for staff, but this

does not always translate into consistent approaches from the prison systems and staff towards his specific problems, which has led to exacerbations of his complex situation.

Therapy groups run by the mental health team have restarted, but there are problems in getting access to suitable rooms. Some groups are delivered on the wings, but not all wings have suitable spaces. They have also tried to deliver sessions in the healthcare building, but there are often issues with the availability of staff to bring the prisoners to them. This is a source of frustration for the mental health team, which has prisoners waiting for groups, and staff ready to deliver them.

#### **6.4 Social care**

Social care is provided by an agency, Agincare, following referral from the safer custody team to Bristol City Council. There have been between six and 10 prisoners at any one time requiring social care during the reporting year, a small but significant increase. Social care staff are a visible presence on Brunel and D wings especially, and appear to have good relationships with the prisoners.

The Avon and Dorset safety team visited in April 2021 and, among other areas, looked at whether prisoners with social care requirements were having their needs met. A social care questionnaire completed by prisoners showed positive feedback from all but one prisoner receiving care. Care plans were checked and found to be of good quality.

Brunel wing provides a flat location for prisoners with mobility issues, but is not a designated healthcare wing. There is a wheelchair-accessible cell on D wing.

There have been several situations where prisoners with care needs have arrived from court without an assessment as to whether the prison can meet those needs. On one occasion, a wheelchair-dependent prisoner was brought in without any handover from police custody about care needs. As a result of concerns about his ability to transfer to bed and toilet facilities, he was sent out to hospital and then returned almost immediately, needing an urgent referral for assessment by the rapid response team the following day.

Another prisoner who is a double amputee was admitted and soon discharged to hospital due to ongoing medical needs. He spent most of his time in detention in hospital as a bed watch, and was discharged from hospital back to his home area.

As the number of prisoners with care needs rises, it seems questionable whether a local prison such as Bristol is an appropriate place for them to be located. The recent high level of bed watches involving some of these prisoners has impacted staffing and has knock-on effects for the delivery of the regime and escorts for healthcare appointments.

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

During the pandemic, there were restrictions on the time out of cell and the regime provided for the core day. However, with the use of wing landing 'bubbles', the prison managed to offer extended time in the open air and for domestics every day. The

HMIP scrutiny visit found that prisoners had a minimum of one hour 45 minutes out of cell, but over half of prisoners were out of cell for considerably longer, for various forms of purposeful activity.

The Board found that prisoners accepted this regime, and in particular found that the quieter landing-based groups felt safer than the whole-wing association periods of the past. In-cell telephones meant that prisoners did not have to choose between family contact and domestics.

Gym staff ran timetabled outdoor programmes, including early morning and evening sessions to give access to prisoners at work. As restrictions have lifted, the use of wing bubbles continues, but the provision of activities has increased. The gym is now visibly busy.

## **6.6 Drug and alcohol rehabilitation**

Substance misuse interventions were significantly reduced during the year. However, all new arrivals were assessed, and day 5, week 4 and week 12 reviews continued with use of in-cell self-assessment and support packs. Information on drug use issues and support available was put on noticeboards and in-cell television, and updated regularly.

A total of 85 prisoners were receiving opiate substitution medication in September 2020. Individual face-to-face interventions restarted in March 2021, and group work in May 2021, but there have been difficulties in getting reliable room allocations for these programmes.

Continuity of care post-release is supported, including giving naloxone packs for opioid overdoses to prisoners at risk on release. There were some instances of packs being returned rather than sent out on release, but increased awareness and training for staff were introduced to address this.

Poor supervision of medication queues has continued to be reported, and is, of course, a risk for diversion of desirable medication. This has been discussed in both the healthcare and drug strategy meetings. Medication supervision is profiled, so this would seem to be a quality issue. Healthcare staff are monitoring and reporting concerns as they arise, so that they can be discussed directly rather than anecdotally, and this remains on the healthcare risk register.

## **6.7 Soft skills**

Prisoner wellbeing mentors have been trained to assist and signpost prisoners to the various wellbeing resources available in the prison. As Bristol is a local prison, these mentors often move on soon after training, which means that there is ongoing demand for this training programme. Hopefully, the learning from this by prisoners moving on from Bristol will continue to be beneficial to them in the future.

The Board has seen wellbeing resources promoted on newly updated wing noticeboards and in-cell leaflets.



Staff have access to mental health and wellbeing resources via a regular email from a mental health allies programme. The prison also holds regular staff events, with food available from the catering team.

The chaplaincy programmes and the Harmony project provide opportunities for prisoners and staff to have beneficial time in the open air and green spaces.

## **7. Progression and resettlement**

The Board has not been able to directly monitor this area fully over the past year. We have not had any significant complaints or comments about education or workshops from prisoners during the restrictions or as we have returned to face-to-face monitoring.

### **7.1 Education, library**

Education provision is run from the Phoenix Centre, which opened in 2019, with excellent facilities available. Tutors are provided by Weston College.

During the EDM, education was provided by in-cell learning packs, which were well received.

The HMIP scrutiny visit commented favourably on 'constructive in-cell education activity packs, the needs assessments of new arrivals and 200 books being provided to all wings'.

Bristol was one of the first establishments to return to face-to-face learning, in April 2021, using wing bubbles.

Ofsted visited in July 2021, to conduct a progress monitoring visit of education provision. The Board was not invited to the feedback session, but a verbal report was that reasonable progress had been made. A copy of the report is awaited. At that time, 50% of the prisoners were in meaningful activity, but the target of 80% was not being met, and the prison was encouraged to increase opportunities for attendance. Prisoner attending education receive payment, so that they are not disincentivised to pursue basic literacy and numeracy.

Education staff have mentioned some frustration with the lack of escorts to education, particularly for new arrivals, who need assessment before they can be placed into appropriate sessions.

The Board has had positive comments from prisoners about their experience of creative arts programmes. There was an inclusive art exhibition, Hope from the Yards, in March 2021 (<http://www.prison-education.co.uk/2021/03/23/hope-from-the-yards-art-exhibition/>). Prisoners involved in music lessons from the charity Changing Tunes have spoken to members about how good it felt performing on the wings for other prisoners and staff.

Library services are currently available by timetabled access for wing bubbles, and this is clearly advertised on the wing noticeboards. The Board has noted that library staff were willing to respond to requests for printouts of prison policy documents (Prison Service Instructions), which are only available online for a prisoner challenging how policies are being applied. The Board has also seen individual wing libraries being introduced, with activity packs and other information available.

## **7.2 Vocational training, work**

All workshops remained open during the EDM, with reduced numbers and wing-based groups to aid social distancing. The HMIP scrutiny visit found that: 'Purposeful activity that was safe and appropriately socially distanced had been maintained for about 44% of the population throughout the restricted regime'. Inspectors also found that equal access was provided to prisoners to work and prisoners appreciated the support given to them.

Attendance rates for workshops, wing-based work and courses continued to be high (up to 95% reported in April 2021). The prison also introduced more education into the workshops, so that prisoners can learn to read and do mathematics while they are working. For those attending education, some courses were run on the basis of being part time in the classroom, with homework to be done in cells and marked later, enabling them to also attend work.

Prisoners can get useful work experience working in the kitchens and the Cross Keys staff café, when open, and this is a sought-after job. At one time, national vocational qualifications through the charity Clink were available, but this had not happened recently. Work parties for Covid-19 cleaning, recycling and refurbishing the wings are evident when walking around the prison. Workshop leaders in workshops building and repairing furniture for the wings were praised by prisoners for their positive attitude towards them and the chance to learn useful skills. Prisoners working on various garden projects also spoke highly of the opportunities on offer, and the consequent improvement in the environment of the prison grounds is clearly seen.

## **7.3 Offender management, progression**

The Board has noted that prisoners are spending longer periods in prison on remand due to backlogs in court. Prisoners are not allocated an OMU officer or resettlement support while on remand, which the Board found led to anxieties about what would happen on release. Prisoners have also expressed pressure to plead guilty when their case eventually comes up, so that they are released on time already served rather than face further delays in court processes. This situation seems unfair and illogical.

There was a change in leadership in the OMU during the reporting year, and the department was eventually moved into new premises in the prison after a long delay due to problems getting a cable connected to the Oak Centre. The new premises give more opportunities for private spaces to meet prisoners and will hopefully improve access for them. The HMIP scrutiny visit noted: 'There was no longer a

substantial backlog of OASys [offender assessment system] assessment work, and this left the prison well placed to manage risk during the crisis'. The current backlog remains minimal and is monitored weekly by the head of the OMU.

The Board noted an increase in the past year of IMB applications relating to concerns about sentencing, progression, access to the OMU and probation services, and delays in receiving paperwork. The OMU has instigated a duty prison offender manager (POM) system, so that applications can be dealt with more efficiently. There is also training being undertaken by probation officers and prison POM team members to enable them to deliver some learning packages or toolkits, which, although non-accredited, may help IPP or other prisoners who are stuck in the system demonstrate some progression activity.

#### **7.4 Family contact**

Face-to-face visits were suspended nationally due to Covid-19 lockdown restrictions, so the visits statistics are only relevant to part of this reporting period. The provision of in-cell telephones and extra telephone credit for family calls has been a lifeline for prisoners.

Purple Visits (a video conferencing facility) commenced in July 2020 and 21 sessions were offered daily. All prisoners are entitled to book two per month but can request more by exception. In addition, evening visits are offered on Tuesday and Thursday evenings, to allow after-school support, assisting children with homework and education. On average, seven visits are used per day. The usage has been lower than envisaged; frustration was mentioned at the system freezing due to facial recognition or movement by visitors. However, overall, the provision of Purple Visits has been successful and well received. It has enabled, and even enhanced, family contact for some prisoners, as those family members who may previously have been unable or unwilling to attend prison can now participate in a live video link-up.

Face-to-face visits recommenced on 1 May 2021, and 99 visits per week are available in total. However, the number used is lower than envisaged, and averages out at six per day during the week, which is around 50% of the availability, but is often fully utilised at weekends. From Monday to Friday, there are 55 visits available to book, and weekends offer 44 spaces, split into two sessions daily. The face-to-face visits operate alongside Purple Visits and increase the options for all prisoners to stay in touch with family and friends.

In preparation for face-to-face visits, the staff cleared the visits hall and had it set up with a safe space between all tables for visitors. All visitors entering the establishment were safety screened and temperature checked, and given questions to answer regarding contact in the community, to reduce the risk of visitors with Covid-19 symptoms entering the establishment. Facemasks were required, except for children under 11 and people exempt for medical reasons.

Prisoners expressed how difficult they found the face-to-face visits – for example, with no skin contact and struggling to hear with a facemask barrier. However, they did enjoy finally meeting up with someone, and some used this in addition to Purple Visits.

Staff have been accommodating to visitors who struggled with the stairs into the visitors centre, and made special arrangements to ensure that the visit went ahead and set up a room elsewhere on site.

Overall, there is no doubt that Covid-19 has impacted face-to-face visits. However, prisoners do have Purple Visits and telephones in their cells, to contact approved numbers, provided that they have credited their account. All of this will have contributed to the visit numbers and is subject to monitoring by staff, to enable the best options to be provided for family contact with prisoners.

### Statistics:

	01/08/2020 – 30/04/2021	01/05/2021 – 31/07/2021	Approximate daily average	Total
Purple Visits available	21 per day	21 per day		21 per day
Purple Visits used	1,750	893	7	2643
Face-to-face visits available	Withdrawn	99 per week	14	99 per week
Face-to-face visits used	Withdrawn	473	6	473

## 7.5 Resettlement planning

Up to 85 prisoners are released from HMP Bristol each month. The HMIP scrutiny visit noted that the number of prisoners released into homelessness or temporary accommodation had improved during the pandemic (compared with 49% in the HMIP inspection report of 2019) but felt that it was still too high, at 25%. Figures for July 2021 showed a similar number, with 75% in settled accommodation post-release, although 87% of those released did have accommodation for the first night.

The government funding under the Homelessness Prevention Taskforce saw prison leavers being accommodated in hotels during the earlier part of the pandemic. This funding came to an end in May 2021 but the good partnership working has continued. A new project, Ready for Release, is part of the weekly or fortnightly meetings to discuss accommodation referrals and outcome for people approaching release and going to the Bristol, South Gloucestershire, Cheltenham and Gloucester areas, which are the largest release areas from HMP Bristol. These meetings are attended by probation, local authority and prison pre-release practitioners.

Ready for Release is also working with the pre-release team to monitor the number of 'duty to refer' referrals being completed for prisoners at risk of being homeless in the next 56 days under the Homelessness Reduction Act. These referrals are being completed prior to people being released and often lead to a housing assessment before release.

The Ready for Release team aims to improve outcomes by preparing for release from the day of reception. Prisoners at risk are identified in the first night centre and

by probation services within the prison. They are discussed at a multi-agency release board 10 weeks and then one week away from release, to prepare a release plan.

On the day of release, there is a Hub at the prison gate, where prisoners can access a variety of services. These include initial probation appointments, access to clothing toiletries and food packs, and support and advice regarding benefits, housing and transport. Prisoners can also use the telephone or charge their own mobile phones there. Requests for staff to donate clothing have been sent through local notices to staff, and staff in the centre confirmed that they have clothing available and drawstring bags available for prisoners' possessions, to reduce the indignity of leaving in prison clothes with just a plastic bag.

In June 2021, national probation and private community resettlement services, such as Catch 22, were combined. In Bristol Interventions Alliance won the contract to deliver accommodation services under probation's new Commissioned Rehabilitative Services. Most prisons in the region have staff on site to deliver support prior to release but HMP Bristol are only receiving an 'arms length' service. Referrals into this service can only be made by the Community Offender Manager

There are several other initiatives reported by the prison around accommodation and reducing reoffending, as listed below. The Board will monitor their progress with interest.

- Bristol City Council has funding for a one-year project to get 30 people into private rented accommodation, mainly targeted at those in the community on licence, but anticipates that it may be able to take on around three or four prison leavers directly from HMP Bristol over the year.
- St Mungo's Bristol homelessness outreach team has a dedicated member of staff coming into the prison regularly to meet prisoners with a history of rough sleeping in Bristol. This is to encourage early engagement with people while they are in custody.
- Bristol City Council has committed to a housing officer attending the prison once a week to meet prison leavers and pre-release staff to discuss housing referrals.
- Restore Trust and CFO Activity Hub regularly meet upcoming prison leavers both prior to and on release .
- 1625 Independent People, a charity, will provide wellbeing coaches – support prior to and on release – under a one-year project.
- Catch22 provides personal wellbeing services under the Probation Service's new commissioned rehabilitative services, with an initial focus on social inclusion.
- Restorative justice, including facilitating restorative conversations to support prisoners with links to their families.
- Age UK provide support for over 50s with a wide range of resettlement needs

## 8. The work of the IMB

During most of the reporting period, monitoring was carried out remotely, with regular telephone and email contact with wings and departments.

Applications were collected when possible, but also received via the IMB 0800 line. Two Board members volunteered on this for several months. Overall, 180 applications were received, which was a 17% reduction compared to the prior year. It should be noted that applications were lower in the first three quarters, which coincided with the EDM, with a return of applications to prior-year levels in the final quarter.

The top three reasons for applications were:

- Health (G): 22% of the total
- Property (H1 and H2): 12% of the total
- Staff/prisoner concerns (J): 14% of the total.

The largest increase in applications was 'Staff/prisoner concerns', which increased by 63%. We did not identify a specific theme for these concerns.

Monitoring visits resumed fully in May 2021, in compliance with the prison testing and distancing requirements.

Face-to-face Board meetings resumed in May 2021; prior to this, the monthly meetings were held via telephone or by video conferencing.

### Board statistics

Recommended complement of Board members	13
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	11
Total number of visits to the establishment	110
Total number of segregation reviews attended	3

## Applications to the IMB

The Applications received in the year are summarised in the table below:

Code	Subject	Previous reporting year	Current Reporting Year	Difference from previous year	% from previous year
A	Accommodation, including laundry, clothing, ablutions	3	12	9	300%
B	Discipline, including adjudications, incentives and earned privileges, sanctions	3	2	-1	-33%
C	Equality	3	8	5	167%
D	Purposeful activity, including education, work, training, time out of cell	4	5	1	25%
E1	Letters, visits, telephones, public protection, restrictions	19	12	-7	-37%
E2	Finance, including pay, private monies, spends	12	4	-8	-67%
F	Food and kitchens	4	5	1	25%
G	Health, including physical, mental, social care	39	40	1	3%
H1	Property within the establishment	19	11	-8	-42%
H2	Property during transfer or in another facility	25	10	-15	-60%
H3	Canteen, facility list, catalogues	9	6	-3	-33%
I	Sentence management, including home detention curfew, release on temporary licence, parole, release dates, recategorisation	12	18	6	50%
J	Staff/prisoner concerns including bullying	16	26	10	63%
K	Transfers	3	0	-3	-100%
L	Miscellaneous	45	21	-24	-53%
<b>Total number of applications</b>		216	180	-36	-17%







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