



Chair, Independent Monitoring Board
HMP Thameside
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London
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MoJ ref: SUB 93224

16 December 2021

Dear Chair,

**HMP THAMESIDE: INDEPENDENT MONITORING BOARD ANNUAL REPORT
FOR 1 JULY 2020 – 30 JUNE 2021**

Thank you for your Board's report for the year ending 30 June 2021. I am grateful to you and your colleagues for your hard work in capturing these helpful observations, especially as you were short of Board members during the year and as Covid-19 impacted on your ability to gather information. I was saddened to hear there were two deaths in custody during the reporting year due to natural causes. My officials take recommendations from the Prisons and Probation Ombudsman very seriously. I was also saddened to hear that one member of staff died during the reporting year due to Covid-19. I appreciate the hard work and professionalism of everyone at the prison whilst having to come to terms with the loss of a colleague and a friend.

HM Prison and Probation Service (HMPPS) recognises that the continued provision of healthcare and medication is critical to support prisoners whose mental health might have deteriorated because of the pandemic. Governors have continued to work to ensure that prisoners can access healthcare in a timely manner, and where necessary address staffing requirements to improve timely access to the full range of commissioned health services. As regime restrictions are lifted, we are also looking at how we can promote positive wellbeing in prisons to better support prisoners and reduce the risk of individuals reaching crisis point and harming themselves or others. To this end, we have increased staffing levels by 4,088 full-time equivalent officers between October 2016 and June 2021 to enable the roll out of the Offender Management in Custody Key Worker scheme, which provides one-to-one support to every prisoner across the closed adult male estate and are supporting establishments to deliver this service in a safe and flexible way, as regimes are eased. In addition, we continue to fund the Samaritans excellent Listeners scheme by awarding a grant of £500,000 each year, through which as the Board is aware selected prisoners are trained to provide emotional support to their fellow prisoners. The local mental health team also make regular contact with those individuals who have increased concerns, utilising in-cell phones, as well as face-to-face consultations where appropriate. The healthcare team has also offered resource packs to support in any intervention programme where they can.

In terms of the resettlement service support provided during the pandemic, at the outset of the pandemic, HMPPS took decisive action informed by advice from Public Health England and Public Health Wales to protect prisoners and staff (which has been kept under constant review). Measures that included minimising movement between prisons, shielding the vulnerable, isolating people with symptoms of the virus, and quarantine of new entrants to custody.

However, as the Board has identified, there was a reduced number of National Probation Service staff and on-site support at the height of the lockdown due to staff deployment to essential roles in the community. Some level of Prison Offender Manager contact was maintained via in-cell telephony, essential Offender Manager functions such as reports to the Parole Board were prioritised and a Senior Probation Officer available throughout the period of lockdown. Rehabilitative work has had to be delivered in different ways but has been available. Keyworker sessions have continued focussing on basic needs and practical issues. Face-to-face resettlement support has slowly been introduced; the Immigration Team is providing on-site support and Novus is slowly introducing educational sessions in line with current Covid-19 advice on social distancing.

Turning to the Board's continued concern about the delays in transferring prisoners with mental ill health, due to the strong collaborative efforts of the Ministry of Justice (MoJ), HMPPS, Department of Health and Social Care and NHS England and Improvement (NHSE&I) a White Paper titled, Reforming the Mental Health Act, was published on 13 January 2021. The White Paper provides a commitment to introduce a statutory time limit of 28 days for transfers to mental health hospitals from custody. In addition, NHSE&I published new good practice guidance on 10 June 2021 which promotes timely access to appropriate treatment under the Mental Health Act and reduces unnecessary delays -

<https://www.england.nhs.uk/publication/guidance-for-the-transfer-and-remission-of-adult-prisoners-and-immigration-removal-centre-detainees-under-the-mental-health-act-1983>

It is acknowledged that many individuals requiring inpatient hospital care currently wait longer than 28 days for transfer due to the pressures being experienced on secure beds within the London areas. NHS England recognise this will be a longer term strategic and commissioning issue for Provider Collaborative and Integrated Care system partnerships to address. However, the two London Secure Service Provider Collaboratives are working with their providers to enable improved transition of patients from secure hospital to community services and this will help manage pressures for patients from prison accessing inpatient mental health provision. Locally the healthcare team meets weekly with the London Health and Justice Quality Lead to discuss current individuals awaiting hospital transfer.

Turning to some positive comments captured in your report, it was encouraging to read there has been a significant shift in approach towards more active and pre-emptive management and monitoring of safety within the prison, including the housing of gang related members. I was also pleased to note that the custodial management system is in the process of being upgraded and the opening of a video-conference centre during the reporting year. It is also encouraging to hear there is an active focus on repairing / replacing damaged residential wing facilities and equipment, and overhauling fire systems.

I note you have raised some local issues of concern in your report which the Director will continue to keep you aware of as work continues. HMPPS comments in response to other issues raised in your report are set out in the attached annex.

The Justice Secretary and I appreciate the valuable role played by members of Independent Monitoring Boards throughout the estate and we are very grateful for your continued hard work on behalf of HMP Thameside.

Yours ever,



VICTORIA ATKINS MP

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HMPPS comments on matters raised in the report

Transfers

The HMPPS Cohorting and Compartmentalisation strategy was implemented during the first wave of the pandemic. The purpose was to quarantine new arrivals, isolate those symptomatic or that had tested positive for Covid-19 and shield the vulnerable. The strategy was developed in collaboration with both Public Health England and Public Health Wales and has been revised and refreshed based on Covid-19 learning on multiple occasions throughout the pandemic. Cohorting does remain in operation in all prisons and the vast majority of prisoners are fully quarantined on arrival and transfer to ensure that these new individuals are kept separate from the wider population to reduce the risk of spreading the virus. In addition to cohorting, HMPPS has also rolled out a programme of asymptomatic testing for prisoners on reception and during transfer at all prisons, although not all tests are accepted by prisoners when offered as is the case in the community.

Locally at HMP Thameside measures also continue to be in place to reduce the risks of Covid-19 being circulated including contact tracing and routine staff testing, ensuring staff receive sufficient Covid-19 Personal Protective Equipment, and effective monitoring to ensure the use of face coverings and social distancing. The prison also has reduced numbers of prisoners employed in various areas such as the kitchens, prison shop, and in wing-based orderly roles to maintain social distancing. Levels of cleanliness across the prison have continued to remain high with the frequency and standard of cleaning providing visible reassurance to staff and prisoners that risks are being managed.

Regime Recovery

It is recognised that the regime that was being delivered at HMP Thameside was not providing as much time out of cell to prisoners as would be expected under Stage 3 of the [National Framework for Prison Regimes and Services](#) for recovery. Whilst prisoners have excellent in-cell facilities available at HMP Thameside, the prison provider has been challenged on regime delivery and improvements are being made. Further enhancements are planned to continually increase the time out of cell and purposeful activity opportunities that are made available to prisoners between 1 October 2021 to 24 January 2022. The Board will be reassured to note that it is envisaged by this point HMP Thameside will be delivering 75% of its pre-covid-19 regime levels.

The contract management team are working closely with the prison and education provider to ensure that the existing funded activity places and educational opportunities are delivered and maximised. In addition, funding has been agreed to introduce additional vocational training opportunities and forklift truck training. Both of these business cases have been approved and are progressing. We are also working with Serco and Novus to introduce in-cell learning through the recently upgraded Virtual Campus.