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Parliamentary Under-Secretary of State for Justice

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# HMP/YOI FOSTON HALL: INDEPENDENT MONITORING BOARD ANNUAL REPORT FOR 1 DECEMBER 2019 – 30 NOVEMBER 2020

Thank you for your Board's report for the year ending 30 November 2020. 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 reporting year. I was saddened to hear there was one death in custody; every death is a tragedy and my officials take recommendations from the Prisons and Probation Ombudsman very seriously.

HM Prison and Probation Service (HMPPS) remains committed to doing all it can to support those serving indeterminate sentences of Imprisonment for Public Protection (IPPs). This commitment has in recent years delivered a substantial reduction in the number of IPP prisoners who have never been released. That number stood at 1,784 at the end of March 2021. This is reduced from 2,039 at the end of March 2020. This is very good progress considering that the population of unreleased prisoners serving IPP sentences was, at its highest in 2012, over 6,000. It is important to note that, as the number of IPP prisoners who have never been released continues to decrease, the proportion of those who remain in prison who committed more serious offences and whose cases are complex grows. Many of these prisoners are still assessed to pose a high risk of committing further violent or sexual offences and have a complex set of risks and needs. These must be addressed before the Parole Board can consider release. This is not a simple task, and we continue to work with these individuals to offer them opportunities to reduce their identified risks.

To continue this progress, HMPPS and the Parole Board continue to deliver and regularly review the joint IPP Action Plan, which aims to deliver the support prisoners serving IPP sentences need in order to demonstrate that they can be safely released. As part of the psychology work stream consultancy/case file reviews are written on all priority IPP prisoners in custody where they have failed to make any progress after two or more post-tariff parole hearings. This cohort has been expanded to include all short tariff prisoners (less than two years), irrespective of previous hearing outcomes. These reviews reinvigorate cases that are not progressing and, where necessary, with consultation, practitioners agree and identify appropriate individual progression pathways. We also continue to monitor Progression Regimes at four prisons across the country, which are dedicated to progressing indeterminate prisoners struggling to achieve release via the usual routes.

It was encouraging to read the Board's recognition that the provision of additional resources to address homelessness during the pandemic has reduced the number of prisoners being released without an address. We have implemented an enhanced 'Through the Gate' service for prisoners, to aid the provision of resettlement in all resettlement prisons. This new specification includes the requirement that all Community Rehabilitation Companies complete specific, tailored tasks to help prisoners to gain employment, as well as secure and maintain settled accommodation and manage debt and their financial affairs. To support the oversight of its Covid-19 response due to considerations surrounding public health and public protection, we set up Homelessness Prevention Taskforces (HPT) and secured £8.5 million to help prisoners upon release from prison find accommodation and help them move on to permanent accommodation. The scheme initially ran between 18 May and 31 August 2020, providing up to 56 nights' accommodation per individual meaning some prison leavers were accommodated up until the 26 October 2020. Due to the ongoing pandemic, the scheme was extended to 9 April 2021. This means that individuals may receive support up to the 26 May 2021. These teams have been very successful in securing improved accommodation outcomes and building new local partnerships with local authorities and housing partners. We are considering how the regional HPTs might be a feature of the future landscape. We have started to draw together learning, including analysis on tracking the outcomes arising from the intervention, from the first wave scheme and will combine the learning from both schemes in due course, with the intention of publishing a report in Autumn 2021.

To ensure that provision of accommodation is kept as an imperative, the future performance framework for probation unified delivery will include a target on the number of individuals being housed on release from custody (90%), aligned with current prisons metrics, to promote joint working between prisons and the National Probation Service in supporting prisoners leaving custody. There will also be a metric concerning settled accommodation for all service users under supervision (those released from prison and those on community sentences) three months after commencement of their supervision (80%), which will support referrals to accommodation services provided under the Dynamic Framework. We have increased Approved Premises capacity by 56 beds, in line with our commitment to delivering an additional 200 beds.

It was encouraging to receive your comments about the various measures introduced to support prisoners during lockdown and that the installation of in-cell telephones has had a very positive impact. I was pleased to read that despite the challenges brought about by Covid-19, prisoners have been able to practise their faith and information has been provided about all events, such as the International Day Against Homophobia, Transphobia and Biphobia.

I note you have raised some local issues of concern in your report which the Governor 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/YOI Foston Hall.

Yours sincerely,

Per la ale

ALEX CHALK MP

## HMP/YOI FOSTON HALL: INDEPENDENT MONITORING BOARD ANNUAL REPORT FOR 1 DECEMBER 2019 – 30 NOVEMBER 2020

## **HMPPS** comments on matters raised in the report

#### **Maintenance**

D wing and Segregation unit

As the Board is aware the original proposal for D wing was to demolish it, along with the Segregation Unit, and replace this building with new, fit for purpose, accommodation. This bid remains unsupported at the present time due to competing funding priorities. Funding was, however, approved to renovate the Segregation Unit and works have recently been completed. Whilst this work will improve the Segregation Unit, the Governor does share the Board's concerns that it will not fully address the issues with the physical size of the Unit.

Reactive and planned maintenance tasks continue to be completed on D wing and a variable budget is in place to fund remedial work from both reactive and planned maintenance. Temporary heaters have been made available for the rooms that suffer heat loss through the winter months. Other improvements for D wing include replacing the bunk beds and CCTV. Repair work to the external fabric of D wing has also taken place throughout the year.

#### Healthcare unit

It is accepted that there is currently insufficient space for the healthcare team to deliver all the commissioned services at HMP/YOI Foston Hall. This is being picked up as part of the ongoing National Women's Prisons Health and Social Care Review (Women's Review) which has been jointly commissioned by NHS England and NHS Improvement and HMPPS. In the interim an additional office has been provided at HMP/YOI Foston Hall to house the clinical substance misuse service and a more appropriate room is being created in Reception for healthcare screening. A strategic review of accommodation across the prison has identified some group room space which can be made available on a booking basis for healthcare group work.

#### Interview/meeting rooms

The strategic review of accommodation across the prison has identified some multi-use room space which is now bookable. The provision and availability of rooms will be kept under review as the prison implements the Offender Management in Custody model.

## CARE (choices, actions, relationships, emotions) Offending Behaviour Programme

In November 2020 the Accredited Programmes and Interventions Strategy Board (APISB) took the decision that CARE was no longer clinically or operationally viable and the programme was rolled down. CARE was due for re-accreditation in March 2021 and this has been allowed to expire. The APISB board recognised that the HMPPS delivery landscape had altered significantly since the introduction of CARE. Additional Services such as the Offender Personality Disorder (OPD) pathway and changes made to enhance the Thinking Skills Programme (TSP) offer in the female estate raised important questions about the added value of CARE. There were also a range of operational and delivery challenges associated with the roll out of CARE which restricted the scope of the CARE offer.

The roll down of CARE has not and will not result in a reduced offer for women in prison. The Women's Estate Psychology Service (WEPS) will continue to work with our partners within Offender Management Unit departments to support sentence planning for women who would have previously been referred to CARE. It is key to note that OASys data analysis indicates that over 80% of women in prison who met the

actuarial risk criteria for CARE also meet the actuarial risk criteria for TSP. This emphasises importance of ensuring that women are re-directed to the most appropriate service which for many may be TSP as an alternative Offending Behaviour Programme. It is acknowledged that not all women will meet the need criteria for TSP and for some additional or supplementary work will be required to address key risk factors. Psychology activities completed under Offender Management benchmarked tasks are designed to inform this case specific understanding.

Where appropriate WEPS will continue to offer bespoke 1-1 work for women who require offending behaviour related intervention and whose needs cannot be met via an alternative service such as TSP or an OPD service. This will be offered across the female estate. Offender Supervisors can submit referrals for 1-1 work using the WEPS Referral process. WEPS will prioritise women who are closer to release or tariff expiry and who are higher risk.

This flexibility in this approach is particularly important given that Intervention Services are in the process of developing a revised intervention offer for women in custody. The strategic review strand of this work is expected to complete in 2021 but any revised intervention offer is not expected until the end of 2022. Intervention Services will provide updates on this work in due course.

#### Autism

The healthcare provider is not commissioned to provide an autism screening or diagnostic service. Patients with features of autism are managed as a presumed diagnosis and supported through the psychiatry service, the mental health team and by the Local Authority social worker, with appropriate community referrals on discharge. The healthcare provider does provide a learning disability diagnostic service for all regardless of their home area.

Where autism may be a factor the Prison Offender Managers (POMs) can have case discussions with the prison's psychology team about whether it may be useful to consider screening in the community and further explore a potential diagnosis. The specific needs of prisoners with autism are taken into consideration by the POM when putting together a sentence plan.

HM Inspectorate of Prisons and HM Inspectorate of Probation, with support from HM Inspectorate of Constabulary and Fire & Rescue Services, have been asked by the Ministry of Justice (MoJ) to conduct an independent evidence review on neurodiversity in the criminal justice system (CJS). The review is part of MoJ's commitment that everyone who encounters the CJS is treated fairly, including people with neurodiverse conditions and the findings will help the MoJ to develop effective policy to improve awareness of neurodiversity in the CJS. A report of the findings is due to be published in summer 2021.