



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

**For reporting year  
1 June 2020 – 31 May 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 IMB is part of the United Kingdom's National Preventive Mechanism.

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

HMP Swansea was built in 1861 to accommodate 219 prisoners and the residential block is structurally unchanged, although modernisation and upgrading has taken place. A new wing, G wing, was opened in September 2015, adding another 60 places. Prior to the Covid pandemic, the ever-increasing prison population meant that the operational capacity of Swansea was set at 475. Most cells accommodate two prisoners, however there are a few cells accommodating three, along with a small number of single cells. During the Covid pandemic, the prison population was reduced considerably to give more single cell capacity and allow flexibility in the way suspected or actual cases of Covid could be appropriately managed.

There is currently an extensive programme of cell refurbishment and work is ongoing to provide in-cell telephony, together with additional security measures.

### **3. Executive summary**

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

The Covid-19 outbreak had a significant impact on the Board's ability to gather information and discuss the contents of this annual report. During most of the reporting year, there were only two active members of the Board who were able to make visits to the prison. The Board therefore tried to cover as much ground as it can in these difficult circumstances, but inevitably there is less detail and supporting evidence than usual. Ministers are aware of these constraints. The Board recognised the effort by the managers and staff of HMP Swansea to protect the prisoners in their care from infection by Covid-19 and to provide a humane and fair system during this difficult time.

Since the disappointing HM Inspectorate of Prisons (HMIP) report in 2017, improvements have been made to the way HMP Swansea has been managed and the services it provides to prisoners. Successive Governors have sought to take on board the recommendations of HMIP and considerable success has been achieved in raising standards, not only environmentally but also in the relationships between staff and prisoners and the opportunities and services available to prisoners.

Respect for individuals is paramount. Relationships between staff and prisoners are central to the wellbeing of the prison. All members of staff play a vital role in maintaining a stable and, above all, safe environment. The aim of the prison, through the varied and positive programmes and activities available, is to enable prisoners to address their offending behaviour and thus reduce their risk of reoffending and to assist with resettlement. This is achieved through partnerships with a wide range of statutory, private and voluntary organisations.

#### **3.2 Main judgements**

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

It is the Board's view that HMP Swansea was a safe prison. Violence continued to remain at a low level, which the Board believes reflected the historically good relationships that staff had been able to build up with prisoners. This was clearly demonstrated during the pandemic, when prisoners have been locked in cells for far more time than is normally the case.

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

The Board is satisfied that, generally, most prisoners were being treated fairly and humanely. The restricted regime, put in place during Covid-19, raised concerns, as did the suspension of visiting arrangements – although the new social video call arrangements were a great benefit and proved popular with prisoners and their families. It is hoped that these will continue in the future.

The prison governors held weekly meetings with representatives of the prisoners where all aspects of prison life, the Covid pandemic and the general prison regime were discussed. In general, morale amongst prisoners was good.

The Board was concerned about the length of time that prisoners were on remand and awaiting court appearances.

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

There was a slight improvement in relation to prisoners' access to mental health support, aided by a grant received from the Welsh Government. However, mental health provision continued to cause concern to the Board. During the Covid-19 pandemic, services which supported prisoners' health and wellbeing were restricted, at a time when their need for it was very high. There was concern about the level of dental provision..

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

Unfortunately, the advances made in relation to resettlement and training activities, such as the call centre and the barista workshop, were suspended during the pandemic. However, other activities such as the sewing workshop, cleaning services and multi-skill training continued. The prison continued to support prisoners with their resettlement. However, the education department has been severely curtailed, although prisoners have been provided with education packs and library books for their use on wings. The education department continued to be involved in the induction process for new prisoners.

## **3.3 Main areas for development**

### ***TO THE WELSH GOVERNMENT***

The Board recognises the improvements in prisoners being able to access accommodation on release and welcomed the Welsh Government's initiative to house all rough sleepers during the Covid-19 pandemic. We would make a plea that this scheme be continued for prisoners leaving custody without accommodation in future.

The Board remains concerned as to the mental health service offered to prisoners within HMP Swansea. The Board would ask the Welsh Government to raise this issue with Swansea Bay University Health Board.

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

The Board has been concerned with the number of times where prisoners from 'out of area' are being received into HMP Swansea, whether from transfer from other Welsh prisons or from prisons in England. We fully appreciate that the Prison Service is often under pressure to accommodate prisoners but would ask that reducing the number of out of area prisoners be considered when making placement decisions.

The Board is increasingly concerned at the effect that the restricted regime will have on the prison's ability to provide a safe, humane, and positive environment which encourages prisoners' progression to resettlement. This is despite all the efforts being made by staff to support the prisoners in their care. The Board shares the concerns of other Welsh Boards that long-term continuation of regime restrictions will have a further detrimental effect on the wellbeing of the prisoners.

### ***TO THE GOVERNOR***

We applaud the establishment in its efforts to maintain key worker sessions during the restricted regime but would ask that consideration be given to whether the cross-deployment of key workers affected the incidence of self-harm (see paragraph 5.3.2).

The Board recognises the efforts that the establishment has made in increasing its understanding of the needs of prisoners within the protected characteristics groups.

The early activation of body-worn cameras (BWCs) should continue to be encouraged (see paragraphs 4.4.2 and 4.4.3).

## **Evidence sections 4 – 7**

### **4. Safety**

Significant efforts have been made to address the issues raised in the HMIP report of 2017. There has been the introduction of a safeguarding team in January 2020. The deputy governor who leads the team also sits on the West Glamorgan Safeguarding Board.

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

4.1.1 Previously prisoners who arrived late were not given the chance to speak to Insiders (who are trusted prisoners who offer peer support). They are now informed about the role, even though they cannot speak to them.

4.1.2 Listeners are available on the induction wing and concerns raised during the reception process are passed immediately to induction wing staff.

4.1.3 New arrivals were an issue following the Covid lockdown with the need to isolate and test them. Prisoners arriving were tested and isolated from the rest of the prison population. The prison coped well with few outbreaks.

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

4.2.1 There has sadly been one death in custody during the reporting period. The IMB was informed and the matter is being investigated by the PPO. We understand that procedures have been put in place or reinforced following the incident.

4.2.2 Self-harm data shows a significant decrease in incidents over the reporting period. All serious incidents are logged and thoroughly investigated. Procedures have been put in place to refine data collection in order to explore more fully the reasons behind these incidents.

4.2.3 The available data shows that in November 2020 21% of self-harm incidents involved those in prison for the first time. There is no discernible pattern in respect of reasons for self-harm. However, it appears that self-harm was often carried out in the first few months of custody. There were a number of prisoners who had been previously been involved in self-harm incidents within the data. The prisoners most involved in self-harm incidents were in the induction stage which has been lengthened during Covid. Early days paperwork is now being completed, which should help the prison to be more aware of any incidents of self-harm which occurred before the prisoner entered the prison, by considering any history of previous self-harm.

4.2.4 The number of self-harm incidents dropped significantly in 2020 to 228 incidents as opposed to 428 incidents in 2019 but the overall prison population was significantly lower. The numbers fell further in November 2020, which when analysed appeared to reflect that the prison population was lower than the equivalent period the previous year. The induction wing saw the highest number of incidents. There has, however, been an inconsistency with the quality of the incident reporting system (IRS) reports, some being more detailed than others. This is being addressed. Other



than the lower population, there is no clear picture as to why the drop in self-harm occurred as it seems to be against what would have been expected with such long periods of confinement. The low numbers continued into April 2021.

4.2.5 Distraction packs were provided to try to alleviate stress and tension.

4.2.6 Members of the crisis team, including personnel from mental health, attended all reception boards where all cases were reviewed. The introduction of a primary mental health care team late in 2020 to deal with crisis and intervention was welcomed.

4.2.7 Counselling continued to be an extremely valuable resource and the counsellor continued to have a very heavy caseload.

4.2.8 Those subject to assessment, care in custody and teamwork (ACCT) documents were allocated key workers who carried out regular checks. There is now a further check in progress involving a member of the safer custody team. The number of ACCTs opened significantly reduced in May 2020, with D and F wings seeing only one incident each. By July, the figures were increasing, which is believed to have coincided with the opening up of the prison. Despite the increase, numbers were still low.

4.2.9 Although March 2021 did see a further increase in ACCTs it was still below last year's figures, although the population was very low in comparison to previous years. The number of ACCTs as a proportion of the prison population was higher than last year, being 13.2% in comparison to 10.4%.

4.2.10 The recruitment of Listeners has been problematic. New inductees did not fully understand the role and a new two-day induction process was introduced in November 2020 to deal with this issue.

4.2.11 The Listener suite is available on the induction wing and telephone calls to the Samaritans are facilitated to ensure the Listeners themselves have support.

4.2.12 Listener numbers increased at the beginning of 2020. The data shows a gradual increase during March, April and May. As lockdown commenced the number of call-outs to Listeners increased. Greater support was provided on induction in August 2020 as the number of calls made by men serving their first prison sentence increased. The number of call-outs, however, fell towards the end of April 2021 but calls to Samaritans increased, suggesting that more may need to be done to raise awareness about the role of Listeners during the induction process.

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

4.3.1 Data showed a significant decrease in the number of prisoner on prisoner assaults at the beginning of the reporting period, and despite that figure increasing in June 2020, the numbers were still relatively low. There was a significant increase again in October but this was mainly due to one individual. Staff were encouraged to put in challenge, support and intervention plans (CSIPs) for incidents and members of the safer custody team were available to staff if they needed assistance to make a referral. Incidents increased again in December, with a rise in the number of assaults on staff.

4.3.2 The violence reduction team data showed that, although per head of population the percentage of incidents was higher than previous years, the perpetrators appeared to be responsible for multiple incidents as opposed to previous years where perpetrators were mostly responsible for individual incidents. So the data suggests that the violence is not more widespread. In 2020, there were 26 assaults on staff but eight men caused 60% of the incidents. Spitting has increased and accounts for 16 of the assaults on staff.

4.3.3 There were 387 CSIPs opened in 2020 and 124 referrals made. At the start of the reporting year, the number of referrals was low, but it has increased following intervention and support from the safer custody team.

#### **4.4 Use of force**

4.4.1 Generally, all incidents are reviewed weekly, although in times of high incidence only a selection are reviewed. This has led to officer performance recognition, staff training or investigation of the incident. There has been a reduction in the number of use of force (UOF) incidents in the reporting period.

4.4.2 There has been a reduction in the use of BWC by staff. These are issued but have not always been activated when dealing with prisoners or incidents. The BWCs are visible and worn. To improve matters, there has been an active enforcement of the use of the cameras by senior staff and when there is an incident officers are prompted to turn on their cameras. The prison has actively promoted the use of BWC and training and literature has been produced to enhance the awareness and understanding of staff which has seen an improvement.

4.4.3 There has also been an uptake in UOF refresher training of staff with eight staff having undertaken training and further staff due towards the end of the reporting period waiting to start training.

4.4.4 The use of PAVA has been agreed. During the reporting period none has yet been deployed.

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

4.5.1 The prison introduced a body scanner on 20 October 2020 to assist in the fight to control the smuggling of drugs into the prison. This has identified many of those who have brought illegal substances into the prison and has seen the number of incidents identified initially increase. Staff have been trained in the reading of the images.

4.5.2 The availability of drugs at the prison fell during the reporting period. It may have been due to the impact of lockdown across the prison, including a stop on social visits which limits the opportunities for drugs to enter the prison.

4.5.3 At certain times, the prison experienced severe problems relating to the availability of drugs, particularly so-called 'legal highs' and Spice. However, detection rates were improving, with the increased use of drug dogs and vigilance of staff. The Governor, at selected times, deployed officers outside the prison walls to deter items from being thrown over the walls.

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

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

5.1.1 Prisoner accommodation is in a mix of buildings with some wings dating back to the nineteenth century. The majority of cells are double occupied (6ft x 9ft) with privacy curtains around the toilet area. Spending 23 hours in this space during the Covid-19 restricted regime has presented challenges for men, with one prisoner describing it as 'mentally trying'. In an IMB survey carried out in March/April 2021 65% of respondents (out of 66 returns) strongly agreed or agreed with the statement 'I am worried that my mental health is suffering'.

5.1.2 There has been an ongoing cell refurbishment programme over recent years, though this initially slowed down during the first phase of the restricted regime, with only essential maintenance carried out by the contractor Amey. The work involves removing metal bunks and replacing them with wooden ones, providing increased shelving and upgraded sanitation. This is observed to be a considerable improvement on existing facilities and feedback at wing representatives' meetings has been positive. The work to install in-cell telephony continued during the latter part of the year with connection delayed and expected towards the end of 2021.

5.1.3 There continues to be poor disability access, with most areas placing considerable restrictions on wheelchair users, for example. One wing is accessible with ramps and has a lift, but in general the prison would look to relocate a wheelchair user to another more suitable establishment. There is a Disability Discrimination Act (DDA) 2005 compliant stair lift at reception.

5.1.4 Showering facilities are patchy, with water pressure issues on some wings and a lack of privacy on others. It is planned for showers on two wings to be refurbished in the near future. The heating system is antiquated with a flow and return system through pipes meaning there is no facility to adjust heat in individual cells. This is compounded by poor window ventilation, though again there is a programme of upgrading underway. At the latter end of the year, however, suppliers were struggling to obtain certain building materials and a new bid for ongoing refurbishment has to be submitted annually.

5.1.5 During the reporting period, there has been enhanced cleaning undertaken throughout the prison to combat the spread of infection.

5.1.6 All laundry has been brought in-house during the year (it was previously sent to HMP Leyhill) with upgraded/replaced machines to accommodate this change.

5.1.7 The number of prisoners working in the kitchen was reduced during this period to 10 following Covid-19 risk assessments. Extra cleaning duties were introduced and the kitchen carried a full-time vacancy throughout, although cover was arranged through agency staff. Additional work preparing breakfast and comfort packs was carried out by a small number of men in a workshop. The food budget was £2.24 per man per day with no additional budget for special diets e.g. diabetic or low lactose, although these continued to be catered for and liaison with healthcare regarding special diets appeared good. Between 75– 80% of food is home-made e.g. sandwiches, savoury dishes, pies, puddings. Fresh vegetables have been replaced with frozen ones due to the poor quality from suppliers.

5.1.8 While observing the preparation of meals, sampling etc. was severely restricted during this time, the IMB did have access to the four-week menus (which demonstrated variety), telephone discussions with staff, feedback from prisoner representatives' meetings and its own survey. The latter saw an even spread between prisoners agreeing 'the quality of the food in the prison is good' (52%) to those who disagreed (48%) with a survey return rate of 22% overall.

5.1.9 Kitchen staff demonstrated very positive efforts to engage with prisoners and carried out surveys and used the in-cell television information channel throughout the year to promote themed meals, survey results and changes to menus (as well as making paper-based information available). One of the main complaints of prisoners has been the removal of a hot breakfast – breakfast packs are distributed the previous day. A brunch on a Saturday has gone some way to respond to this feedback.

## **5.2 Segregation**

5.2.1. The care and separation unit (CSU) is housed alongside C wing (30 prisoners) and consists of five cells and one special accommodation cell, used infrequently but often for searches or de-escalation situations. Showers are shared with C wing and an exercise area is shared with G wing. There are no specifically dedicated staff detailed to the CSU and duties are undertaken by C wing staff. However, the wing does have a higher staffing ratio compared to other residential wings as it deals with more challenging prisoners. IMB members were absent from the prison for a considerable amount of the reporting year so were unable to monitor CSU conditions in person or speak with prisoners, instead relying on officer reports via telephone. Segregation monitoring and review group (SMARG) meeting minutes were another source of useful information on the operation of the unit and issues relating to prisoner care.

5.2.2 There was a significantly higher number of men held in the CSU during the reporting year compared with 2019/20 (183 compared to 103), with the increase occurring during the latter half of the year. To a large extent, this coincided with the introduction of the body scanner in reception in October 2020. At times the number of men shown positive for concealed substances exceeded the cells available and meant they had to be held in segregation conditions on other wings. The main reason for this increase was further borne out by the fact that, although the number of men placed on report reduced significantly during the five month period January–May 2021 compared to the previous year (83/579), the number of men held in the CSU virtually doubled compared to the same period in 2020 (100/57).

5.2.3 The average stay in the CSU was three days, with one prisoner held for over 42 days; a particularly challenging man who was eventually moved to a residential wing. The number of prisoners held in CSU with an ACCT was 28 in 2020/21 and 20 in 2019/20, with defensible decision paperwork being completed for all. Use of force incidents were comparable: 20 in 2019/20 and 18 in 2020/21. The regime stayed the same during the Covid-19 restrictions with no TVs, men provided with radios depending on behaviour and distraction packs as provided to the general population.

5.2.4 There was one dirty protest during the year which was not for a sustained period of time and was part of range of challenging behaviours presented by this individual who has now been integrated back to a residential wing.

5.2.5 Adjudications took place on C wing adjacent to the CSU and were supported by an adjudication liaison officer (ALO) who prepared all paperwork and assisted the Governor during adjudications. There was a shortfall of trained ALOs which is currently being addressed. IMB attendance at adjudications and GOOD reviews was severely curtailed during the year and, while some members phoned in to adjudications, the quality of the telephone connection did not enable everything to be heard clearly. With respect to awards, greater consideration was given to the effects of the already much-restricted regime during this period, with lesser punishments being handed down e.g. no prisoners were put on a basic regime. No adjudications were referred to the independent adjudicator.

5.2.6 During remote monitoring, IMB members being informed of CSU admissions and GOOD reviews was inconsistent but in part reflected the lack of presence of the IMB at the prison. This needs to improve moving forward.

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

5.3.1. HMP Swansea is fortunate to have a very stable workforce. During both phase one and two of the pandemic, there was no notable increase in sickness absence and turnover was low (seven starters – 13.6 leavers).

5.3.2 Key worker interactions reduced significantly during the year, in line with national guidelines. In January/February 2020 there were 1,366 key worker sessions recorded compared to 662 in January/February 2021. Key worker sessions were targeted at more vulnerable prisoners including those on ACCTs or in post-closure; under-21s; those on CSIPs; foreign nationals; those with personal emergency evacuation plans (PEEPs) and veterans. This could mean more frequent and longer sessions were possible for these groups. The quality of session notes continued to be reviewed by custodial managers on a daily basis and the latter quality assured by an offender management unit (OMU) senior probation officer. The IMB's opportunity to monitor paperwork was very limited during the year.

5.3.3 Although the IMB included the questions in its March/April 2021 survey 'My key worker sees me every week' (43% strongly agreed or agreed) and 'Meeting my key worker is helping me' (42% strongly agreed or agreed), the results should be seen in the context of 60% of respondents having been in the prison for six months or less. Unless prisoners were in one of the vulnerable categories listed above, they would not have been allocated a key worker. Taking this into account, responses to the IMB survey would appear to be positive.

5.3.4 During this period, the prison – led by the Governor – held two meetings weekly with nominated Covid prisoner representatives – one for sentenced men and one for men on remand – to ensure that the restrictions and changes were clearly communicated. Minutes of these meetings were available to the IMB and meetings were attended by the Chair towards the latter end of the year. Minutes reflected that prisoners were able to bring concerns both related and unrelated to Covid/the restricted regime and these were followed up at subsequent meetings.

5.3.5 While face-to-face interactions with prisoners were very limited during this time – the majority of IMB members monitoring remotely – as noted previously, a response rate of 22% was achieved to the IMB survey circulated during March/April 2021. The purpose of the survey was to ascertain how prisoners were feeling after 12 months of a severely restricted regime and the impact of Covid. Feedback was mixed, with some disappointing satisfaction levels to questions like ‘Staff ask me how I’m coping’ (54% strongly disagreed or disagreed) and ‘The prison is keeping me safe during the Covid outbreak’ (41% strongly disagreed or disagreed). Higher satisfaction levels were achieved to questions such as ‘My faith needs have been met’ (73% strongly agreed or agreed), with similar levels of positive responses to questions about the regime e.g. making a phone call, taking exercise and having a daily shower.

## **5.4 Equality and diversity**

5.4.1 An equalities meeting was held on a monthly basis and has continued during the reporting year, generally chaired by either the Governor or deputy. The equalities officer split his time between equalities (60%) and safer custody duties (40%). The IMB has continued to receive minutes of these meetings, which contained a large amount of data monitoring outcomes for protected groups including incentives levels, use of force, segregation, adjudications and data, for example on discrimination incident reporting forms (DIRFs), foreign nationals, LGBTQ+ prisoners and the number of Welsh speakers. Actions were recorded at the beginning of the minutes and no action was removed until completed and reported upon.

5.4.2 The proportion of Black, Asian, and minority ethnic prisoners varied little, averaging between 15% and 17% of the prison population throughout the reporting period. As a snapshot, in May 2021 there were 54 Black, Asian, and minority ethnic men recorded with 46 out of area – 17 from England, eight from south-east Wales and 21 foreign nationals. To some extent social video calls have overcome some of the difficulties that out of area men experience in maintaining family contact. Black, Asian, and minority ethnic monitoring against the categories in 5.4.1 demonstrated no significant disproportionality. However, in June/July 2020, analysis of employment by ethnicity found the percentage of wing workers from Black Asian and minority ethnic communities disproportionately low (only 6%) – this had improved by October 2020 to 10% and monitoring is ongoing. Additionally, from reporting on employment through pay scale in February 2021, it was evident that there was healthy ethnic diversity amongst employed men. A survey prepared by the psychology department was distributed near the end of the reporting year to Black, Asian, and minority ethnic prisoners in response to the HMIP finding that they did not feel safe – results had not been analysed by the end of the reporting year but a good response rate of 50% had been achieved.

5.4.3 The equality officer organised an annual rota, which was followed to ensure that forums were held for all of the protected characteristics. The organisation of specific focus groups/prisoner forums for protected characteristics was very little affected by the Covid regime and most went ahead throughout the year, including a Black, Asian, and minority ethnic focus group in response to the Black Lives Matter protests worldwide; a forum for those who identify as Gypsy, Romany or Traveller; an LGBTQ+ forum; a forum for Muslim prisoners to discuss Ramadan/Eid; a foreign

national focus group and a Welsh speakers forum. While the over-50s club was lost due to safety considerations, a focus group was conducted with one-to-one interviews providing feedback on a range of issues. The equalities meeting minutes recorded the main outcomes/feedback from all these groups/forums and took any actions forward.

5.4.4 To replace some face-to-face focus groups/forums, a number of questionnaires were also circulated including one targeted at men with disabilities. Additionally, the equalities officer regularly attended the Covid representative focus groups, held on a weekly basis, to share information and pick up on issues related to equalities. Training for prisoners to act as equality representatives took place. Religious festivals such as Eid were observed as far as possible with themed menus, information shared via the in-cell TV and 'goody bags' for the men distributed by the imam, but no group sharing of food was possible.

5.4.5 The number of foreign nationals fluctuated over the year but averaged between 25–30. The equalities officer was the main point of contact and assisted foreign nationals with paperwork. Towards the latter end of the year, nearly 50% of this group were Albanian nationals. The Home Office representative did not visit the prison for some months and only returned in July 2020. No English for speakers of other languages (ESOL) classes were available during this period but access to thebigword (a translation and interpretation service) was available to all officers – notably however, thebigword was predominantly accessed by the equalities officer. Reception staff and key workers need to be encouraged to access the service. Where feasible, men of the same nationality were housed on the same wing and employed in the same workshops to enable communication and informal ESOL opportunities. Towards the latter end of the year, all foreign nationals were being offered a phone call to their embassy when received into custody.

5.4.6 There continued to be issues about the movement of foreign nationals who have completed their sentence but remain in custody under Immigration Act powers. A stagnation of movement of foreign nationals to immigration removal centres and last minute IS91 paperwork was in evidence. Covid clearly impacted on flight cancellations affecting some foreign nationals, with one experiencing three cancelled flights to Vietnam. One foreign national completed his sentence in December 2020 but still remains in the prison. The Board has significant concerns about Home Office support for these prisoners.

5.4.7 During the pandemic, A1 became the shielding landing for older men and those with underlying health conditions, with numbers between 12–18 at any given time. These men had dedicated staff and their own regime and were isolated from the rest of the prison population.

5.4.8 The number of DIRFs received was significantly down on the previous reporting year, with a number of months with none at all. There were 18 in total, 14 from prisoners and four from staff; with 38% from Black, Asian and minority ethnic staff and prisoners. The low numbers were discussed at a regional level, with HMP Usk experiencing similarly low numbers. It was felt that both the holding of two Covid representative meetings a week (enabling issues to be raised) and the restricted regime/limited time out of cell may have impacted on numbers. There was an issue of a percentage of DIRFs being used when a standard complaints form (Comp 1) would have been appropriate – conversely Comp 1s that related to protected

characteristics concerns were rerouted to the DIRF process. During the year, the DIRF form was changed nationally with only prisoners (as opposed to staff) being able to use the new version.

5.4.9 Remote monitoring placed severe restrictions on the IMB's ability to gain equalities-related feedback directly from prisoners – specifically those with protected characteristics. It was predominantly dependent on officer feedback and minutes of equalities meetings, focus/forum groups and prisoner representative groups. This information did demonstrate, however, that the focus on equalities continued throughout this period.

## **5.5 Property**

Missing items of clothing, particularly relating to transfers from other prisons, continue to feature in IMB applications.



## **6. Health and wellbeing**

### **6.1 Healthcare general**

6.1.1 Healthcare services are provided by Swansea Bay University Health Board.

6.1.2 Following the start of the restricted regime, the regime for the testing, cohorting and general care of prisoners was handled very well, with extremely good outcomes. The prisoner survey undertaken in March/April 2021 demonstrated acceptance by the overwhelming majority of the general population of the more restrictive regime and in fact demonstrated appreciation of the work of the prison in their attempts to provide a safe and secure environment.

### **6.2 Physical healthcare**

6.2.1 There is no inpatient facility at HMP Swansea. Men requiring hospital treatment attend local hospitals. There is a daily visit by a general practitioner.

6.2.2 Prior to the restricted regime, prisoners were able to access GP, dental and optician appointments. Waiting times for routine appointments with both the GP and dentist were within community norms. However, the lack of optician services was of concern, although the effect on prisoners was mitigated by the provision of 'off the peg' reading glasses.

6.2.3 A further cause for concern was prisoners arriving at the prison who had not received their medication for many days while being held in police or court custody (due to the arrest/court process). This led to problems of prisoners suffering from withdrawal symptoms, resulting in erratic/disruptive behaviour. Of special concern was prisoners who missed out on medication for the treatment of mental health issues.

6.2.4 The healthcare team continued to have a high workload, with a large number of the prison population on medication, the team being involved in healthcare screening on arrival, involved with ACCT documents and responding to medical emergencies within the prison. However, in general, the healthcare team continued to provide a decent service.

6.2.5 Issues relating to healthcare remained a significant cause of applications to the Board. However, the majority were quickly resolved with explanations of where people were in the referral chain, and what they could expect. Healthcare staff continued to be very helpful in resolving issues brought to them by the Board.

6.2.6 The healthcare team had excellent links with the mental health and vulnerable housed persons outreach nurse, and with the doctors at the High St surgery, Swansea where prisoners of no fixed abode could attend on release.

6.2.7 There was also access to the GP out-of-hours service. There were regular visits from a sexual health specialist.

### **6.3 Mental health**

6.3.1 The provision of mental healthcare services was of high concern. The mental health nursing team is shared with Parc prison and access to the service was severely limited. The provision of service and the level of manpower was insufficient to meet client needs. The needs of individuals with complex mental health issues were not being met.

6.3.2 The prison also had one in-reach mental health nurse, providing the link between psychiatric and forensic psychiatric services to those who needed this service. Attendance at the prison by forensic psychiatrists was arranged through them.

6.3.3 The mental health homeless and vulnerable housed persons outreach nurse sat on the Prison Health Partnership Board. Healthcare staff liaised with the homeless team prior to release, informing them of treatments and medication of the released prisoner: this was proven to be a very positive step in the majority of cases.

## **6.4 Social care**

6.4.1 The introduction of the safeguarding team has been welcomed. The safeguarding panel comprised both internal and external stakeholders. Policies were reviewed and amended as appropriate, staff training was arranged, and current referrals discussed. The establishment endeavoured to ensure it maintained consistency of care for those who had been subject to social services interventions in line with current legal obligations. The safeguarding panel reviewed all referrals on a quarterly basis and referrals were tracked.

6.4.2 Screening at reception could highlight issues and a referral to social services could then be made. Elderly prisoners were automatically considered for referral.

6.4.3 Induction wing staff could make referrals but the process was difficult and could be via an incident report.

6.4.4 Concerns were reviewed by collators and analysed daily before being referred on to the most appropriate agency.

6.4.5 Safeguarding handouts were given to 297 staff. There was also a safeguarding awareness link with an outside provider for staff information. Adult and child safeguarding training was also available on e-learning, with plans for presentations for staff. Healthcare staff have completed Level 1 mandatory training in safeguard awareness.

## **6.5 Exercise, regime**

Since the implementation of the restricted regime at the end of March 2020, prisoners received two periods of 45 minutes out of cell each day, one in the morning, and one in the afternoon. Prisoners could choose to take limited exercise outside during these periods. However, this regime meant that most prisoners remained in their cells for 22.5 hours a day.

## **6.6 Drug and alcohol rehabilitation**

6.6.1 Meetings were carried out monthly. There was a pause in the mandatory drug testing (MDT) due to Covid during the reporting period. This had been the most effective tool for dealing with misuse of drugs and the challenge to reduce substance misuse. Searching was also reduced.

6.6.2 Narcotics Anonymous (NA) and Alcoholics Anonymous are both well supported across the prison, with NA having a waiting list of men wishing to attend. Literature on both groups was available at reception and in the library. Both were also able to provide support to men leaving prison.

## **7. Progression and resettlement**

### **7.1 Education, library**

7.1.1 Up until March 2021, there was mixed success building on the work of the previous year, with attainment targets reached and 80% of learners achieving an accredited qualification. Minimum starts, however, were still not reaching targets, with more work needed to improve outcomes for prisoners – the employability of the men was at a disappointing 32% and essential skills 57%.

7.1.2 Staff absences, even before Covid, due to maternity leave, vacancies and secondments, were hampering the drive to improve the education provision and uptake. A lack of numeracy and literacy among prisoners was often identified at induction, which was a cause for concern: with 980 of 1,352 men in the year completing numeracy and literacy courses.

7.1.3 During Covid, there were no classes but there was outreach on the wings, with one-to-one learning where possible for a limited number of men. Whilst work and educational opportunities were severely restricted, enhanced cleaning provided an opportunity for more men to undertake biohazard training and achieve BICS (British Institute of Cleaning Science) units.

7.1.4 Before Covid, when the library had to close for visits, the facility was much appreciated by a substantial number of the men as it provided both educational facilities and recreational reading material. The pleasant environment within a Victorian-built prison was welcoming and staff are helpful. Unfortunately, Covid has curtailed its services and neither staff nor prisoners seemed to be aware of its outreach programme, namely a trolley service provided by mentors.

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

7.2.1 The vocational curriculum training at the beginning of this reporting year showed substantial improvement with courses such as ICT, health and safety, food safety manual handling and barista training. However, they were suspended during Covid. It is hoped that the previous success can continue once the restrictions are lifted. Multi-skills in areas such as plumbing, painting and decorating are planned for post-Covid.

7.2.2 During Covid, an inspection found that managers maintained work for about a third of the prison population. The sewing workroom was usefully deployed making PPE and others were working in the kitchens and maintaining a high level of cleanliness on the wings, in the kitchens and shower areas.

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

7.3.1 The IMB has not been able to access meaningful information on this essential aspect of prison management including on sentence planning, reviews, staffing and offending behaviour programmes. This has been due to a change in staffing and the difficulties posed by Covid, preventing IMB members from making contact in person.

7.3.2 The HMIP scrutiny visits in August 2020 reported that there was no backlog of offender assessment system (OASys) assessments and the offender management unit had continued with most aspects of rehabilitation and release planning. The IMB has not been able to access any evidence to make its own judgement.

#### **7.4 Family contact**

Since Covid, the lack of in-cell phones (which were available at other establishments) has restricted the contact prisoners could have with their families. Social video calls were only established in mid-August and some social visits were reintroduced in the middle of July. Children between eight months and 11 years were not allowed to visit.

#### **7.5 Resettlement planning**

7.5.1 As with offender management, the IMB has had difficulty accessing meaningful information on resettlement work.

7.5.2 Earlier in the year emergency housing was found for all prisoners being released, but this was not continued and at the latter period of the reporting year, men were being released back into the community without sustainable accommodation, which is to be regretted.

## The work of the IMB

### Board statistics

Recommended complement of Board members	12
Number of Board members at the start of the reporting period	8
Number of Board members at the end of the reporting period	7
Total number of visits to the establishment*	62

\* Does include “virtual” visits when actual visits prohibited.

### Applications to the IMB (including via the 0800 telephone line)

Code	Subject	Current reporting year	Previous reporting year
A	Accommodation, including laundry, clothing, ablutions	<b>4</b>	<b>17</b>
B	Discipline, including adjudications, IEP, sanctions	<b>0</b>	<b>4</b>
C	Equality	<b>0</b>	<b>0</b>
D	Purposeful activity, including education, work, training, library, regime, time out of cell	<b>3</b>	<b>7</b>
E1	Letters, visits, telephones, public protection restrictions	<b>0</b>	<b>5</b>
E2	Finance, including pay, private monies, spends	<b>1</b>	<b>4</b>
F	Food and kitchens	<b>0</b>	<b>3</b>
G	Health, including physical, mental, social care	<b>4</b>	<b>22</b>
H1	Property within this establishment	<b>4</b>	<b>4</b>
H2	Property during transfer or in another establishment or location	<b>1</b>	<b>8</b>
H3	Canteen, facility list, catalogue(s)	<b>1</b>	<b>2</b>
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	<b>2</b>	<b>21</b>
J	Staff/prisoner concerns, including bullying	<b>9</b>	<b>5</b>
K	Transfers	<b>0</b>	<b>5</b>
L	Miscellaneous, including complaints system	<b>1</b>	<b>3</b>
	Total number of applications	<b>30</b>	<b>110</b>



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