



Chair, Independent Monitoring Board
HMP Wakefield
5 Love Lane
Wakefield
WF2 9AG

5 April 2023

Dear Chair,

**HMP WAKEFIELD: INDEPENDENT MONITORING BOARD ANNUAL REPORT
FOR 1 MAY 2021 – 30 APRIL 2022**

Thank you for your Board's report for the year ending 30 April 2022. I was saddened to hear there were two deaths in custody during the reporting year due to terminal conditions. As you are aware the Prisons and Probation Ombudsman (PPO) carry out independent investigations into deaths in custody and I would like to assure the Board my officials take recommendations from the PPO very seriously.

I am very much aware of the amount of effort that goes into producing annual reports and thank you for providing a comprehensive picture of HMP Wakefield over the reporting period, especially as you had several vacancies.

I address below the specific points you have raised for my attention:

I understand the Board's ongoing concerns about prisoners serving indeterminate sentences of Imprisonment for Public Protection (IPP). The Justice Select Committee (JSC) published their report into the IPP sentence on 28 September 2022 after a year-long inquiry which contains considered recommendations for change. The Government has published its formal response to the Committee's report, which can be accessed at <https://committees.parliament.uk/work/1509/imprisonment-for-public-protection-ipp-sentences/publications/>. The JSC's main recommendation was to undertake a full resentencing exercise of all remaining IPP offenders who had not yet had their license terminated. Although the IPP sentence was abolished in 2012, it is the Government's long-held view that retrospectively changing the sentence which was lawfully passed would give rise to an unacceptable risk to public protection and that the IPP Action Plan, suitably updated, remains the best option by which these offenders can progress towards safe release. As such, the Government has rejected this recommendation and has no plans to conduct a resentencing exercise. Any re-sentencing of IPP offenders would inevitably result in the immediate release of many offenders who have committed serious sexual or violent offences, in many cases without any period of licensed supervision. It is vital for public protection that those serving the IPP sentence in prison, whether not yet released or recalled following release, are released only where the Parole Board determines that they may be safely managed in the community.

The focus remains on supporting all those continuing to serve the IPP sentence in prison by providing them with opportunities to show they can be safely released by the Parole Board and to help those serving the IPP sentence on licence in the community to work towards applying successfully, once eligible, to have their licence terminated. However, the Committee's report does provide an opportunity for HM Prison and Probation Service (HMPPS) to review the work being delivered via the IPP Action Plan,

even though efforts in recent years have delivered substantial reductions in the number of IPP prisoners who have never been released. The latest published figures stood at 1,394 at the end of December 2022. This is reduced from 1,602 at the end of December 2021. The IPP Action Plan is therefore being reviewed and refreshed to ensure it is as robust, structured, clear, measurable, and properly targeted as possible.

I recognise the Board's further concerns for people in prison suffering with mental ill health who require transfer to a secure hospital. Since the last annual report response to the Board in November 2021, the Government published the draft Mental Health Bill in June 2022 which contains measures to speed up access to specialist inpatient care and treatment, as well as introducing a statutory 28-day time limit for transfers from prison to hospital. This time limit mirrors that introduced in the NHS England's good practice guidance, published in June 2021 and together with operational improvements will reduce unnecessary delays. It is acknowledged that HMP Wakefield holds a number of complex prisoners who are awaiting assessment for transfer to a secure hospital setting or may have been remitted from hospital to HMP Wakefield. It remains the case that the Long Term and High Secure Estate has a role in accepting prisoners back from hospital through the remission process in the good practice guidance, but since the Covid-19 restrictions lifted, there has been an improvement in adherence to the NHS good practice guidance for transfers from prisons to secure hospital beds.

Regarding the Board's concerns about healthcare performance and complaints, the Ministry of Justice (MoJ) and HMPPS together with health partners remain committed to ensuring that people in prison have access to an equivalent standard, range and quality of health care in prisons to that available in the wider community. All health treatment in custody is the responsibility of NHS England and NHS Wales and established governance arrangements are in place which provides an opportunity for Governors to raise concerns about local healthcare delivery with NHS Health and Justice Commissioners and providers. As the Board is aware health complaints and concerns are managed in line with the NHSE National Complaints process and in addition to the NHSE Commissioning team quarterly contract monitoring process, regular NHSE Quality and Commissioning visits have been taking place, with complaints management being one of the areas reviewed. In addition, following a change in healthcare management at HMP Wakefield, the complaints process has been reviewed and the number of outstanding complaints has now reduced.

Despite the challenging population, it was reassuring to receive your comments that the prison is safe and provides a calm environment where prisoners are treated consistently with the expectations of the United Nations Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. It is pleasing to note that relationships and communication between staff and prisoners are effective and regular forums have been reintroduced to take in to account the views of prisoners. It was encouraging to read about the introduction of the sensory room and the benefits this can have for a prisoner on the autism spectrum.

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 Wakefield.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Damian Hinds', is positioned above the printed name.

Damian Hinds
Minister for Prisons and Probation

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HMPPS comments on matters raised in the report

SystemOne Project

It is important to acknowledge that integration between prison and health IT systems is technically complex and there are not clear arrangements in place on who funds the work or maintains it. However, NHS England and HMPPS Digital have engaged closely over the past few months and have agreed a technical approach for integration. The first feature to be deployed will be the automated transmission of prisoner transfers between prisons and prisoner cell moves to the GP's patient administration system, which is currently SystemOne. This will enable clinicians to have accurate, real-time visibility of a prisoner's location and allow them to perform routine healthcare tasks more efficiently and effectively.

Legal Resources for Prisoners

The Prison Education and Library Services for adult prisons in England Policy Framework sets out a list of mandatory publications that must be made available within prison libraries for prisoners to access. These include up to date copies of Archbold's Criminal Pleading, Evidence and Practice, The Civil Procedure Rules, and extant Prison Service Instructions, Prison Service Orders, and Policy Frameworks except for those that have restrictions placed on them. The framework can be found at <https://www.gov.uk/government/publications/prison-education-and-library-services-for-adult-prisons-in-england>. It is noted that the Board also recognises the positive work of the prison library at HMP Wakefield which is holding legal sessions to assist prisoners in their legal investigations.

Sports Pitch

The Board will be aware that due to a blockage and collapse of a soil drain from the residential units, the astroturf football pitch had to have a large section removed in 2020 to allow for the repair of the drain. As a result, the pitch could not be re-laid due to its degraded condition. It is recognised that the entire pitch should be replaced with a next generation all weather playing surface and HMP Wakefield's only alternative facility is a shared exercise yard to provide outdoor exercise opportunities. However, the prison has not been successful in bids to fund this to date via MoJ Property as this work is not currently affordable given other budgetary demands, or grant funding from the Football Association. A further bid to replace the part of the pitch affected by the drainage collapse has been submitted and a bid decision is expected shortly.

In-cell Telephony

HMPPS is in the process of planning the implementation of in-cell telephony across the dispersal estate and work specifically at HMP Wakefield commenced in January 2023. Implementation at HMP Wakefield is anticipated to be completed towards the end of 2023.

Digital Prison Services System

All the Digital Prison Services (DPS) system content is based on thorough research with users, operational and policy colleagues. Features such as index offence being available on the prisoner profile page has been identified as a clear requirement. It should also be noted that DPS is a secure system with only appropriately vetted staff having access and is not accessible to prisoners.

Assessment, Care in Custody and Teamwork (ACCT)

HMPPS does not currently have the technological capability across prisons to make ACCT fully digital and whilst improvements could be made through digitisation, HMPPS is not currently funded for this, so it is essential for ACCT to be used consistently across prisons. Therefore, it was decided that as part of the

introduction of ACCT v6 that some but not all elements of the ACCT would be available electronically and these provide staff with the ability to complete all forms in the ACCT document electronically, with exception of the ongoing record. This allows documents to be shared easily with other relevant departments and whilst ACCT remains a paper-based document this will continue to be reviewed as technological capabilities within prisons improve. In addition, an increased emphasis has also been placed on the importance of multi-disciplinary input into ACCT support, in particular the need for case reviews to be attended by multi-disciplinary partners who are relevant to providing support to the individual which would include healthcare staff. The escalation route for individuals with complex needs also focuses on information sharing between departments utilising a multi-disciplinary meeting approach, through the Safety Intervention Meeting.