



Annual Report of the Independent Monitoring Board at HMP/YOI Moorland

**For reporting year
1 March 2022 – 28 February 2023**

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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/YOI Moorland is a category C public sector resettlement prison holding adults and young offenders. It is a foreign national hub, and at the end of the reporting period was housing 148 foreign national offenders (FNOs). Part of one house block is an incentivised substance-free living unit, and part of another is an NHS-funded intermediate care unit for men discharged from hospital but not yet ready for normal location.

The prison operational capacity is 1,058, an increase of 94 since our last report.¹ The increase has been achieved by a combination of additional Bunkabed units, the use of single cells for double occupancy, and by stopping a roofing project from

¹ Figures included in this report are local management information. They reflect the prison's position at the time of reporting, but may be subject to change following further validation and therefore may not always tally with Official Statistics later published by the Ministry of Justice.

taking place in areas occupied by prisoners. During recent months, the role of one large house block has been changed to accommodate prisoners convicted of sexual offences (PCOSOs), so the population now consists of 588 PCOSOs (often referred to as Res 2s) and 470 others (referred to as Res 1s or 'mains'). All the young offenders are in the latter category.

3. Key points

3.1 Main findings

Safety

- Prisoner-on-prisoner assaults increased during the reporting year, as did the number of assessment, care in custody and teamwork (ACCT) documents opened, while self-harm incidents decreased.
- The quality of ACCT documentation was variable: sometimes good, but sometimes focusing on the prisoner's behaviour rather than his mood as assessed by meaningful interactions.
- De-escalation measures proved to be successful, leading to a marked reduction in the recorded use of force. However, concerns remain about inconsistencies in the use of body-worn video cameras during use of force incidents.
- There are ongoing issues with illicit substances getting into the prison, despite security measures.

Fair and humane treatment

- The standard of accommodation is clean and decent.
- Staff-prisoner relationships are generally good, and the Board is pleased that the number of key worker sessions is increasing.
- Concern continues about the limited budget for food: while the kitchen does an amazing job in catering for such a wide range of special dietary needs, prisoners often complain about small portion sizes.
- Prisoners have little confidence in the complaints and discrimination incident reporting form (DIRF) systems, often reporting to the IMB that they have submitted forms which, when the Board investigates, do not appear to have arrived.
- Prisoners are not always informed in writing about their incentive level, which means they cannot appeal within the time limit, and the system is seen as mainly punitive rather than motivating.
- Lost property, both within and between establishments, continues to be a cause of great frustration for all concerned.

Health and wellbeing

- Our evidence suggests that the overall care of prisoners' health and wellbeing is equivalent to that which they could expect in the community.
- Waiting times have been tackled successfully.
- Good efforts have been made to investigate and address the causes of prisoners not attending for appointments.
- The NHS intermediate care unit was initially underutilised, but more patients have been admitted towards the end of the reporting year.
- The Board remains concerned about undue delay in transfers to specialist psychiatric units.

Progression and resettlement

- Access to education has recovered from the limitation imposed during the pandemic, and there has been an encouraging increase in use of the library.
- A range of vocational training and work opportunities is offered, leading in some cases to a formal qualification, and in others to the more generic work skills requested by employers.
- New management of the resettlement hub is leading to more coherent planning for release. However, lack of access to programmes such as Horizon is causing frustration, especially for prisoners for whom the parole board has specified it.
- The situation of IPP prisoners, especially those who have no clear prospect of progression and resettlement due to lack of access to programmes, continues to be a concern for this Board.

3.2 Main areas for development

TO THE MINISTER

- Can the Minister predict when the statutory limit of 28 days for transfers of prisoners needing secure psychiatric care, which was referred to in the previous Minister's response to our report last year, will be passed into law?
- Can the Minister please explain how the IPP action plan published by the Ministry of Justice in April 2023 will address the issue of access to programmes recommended by the parole board but not available to the prisoner?

TO THE PRISON SERVICE

- Can increased staffing be provided so that the important activity of key work can be delivered consistently and to a high standard for all prisoners?
- The loss or delay of prisoners' property is still a big problem. How will you ensure that the situation will be improved by the new national framework?

TO THE GOVERNOR

- What further action can be taken to improve prisoners' confidence in the systems for complaints and DIRFs?
- Can there be a review of how the incentives system might be adapted so that prisoners perceive it as less punitive and more motivating?

3.3 Response to last report

Issue raised	Response given	Progress
Minister There remains a delay in the transfer of prisoners requiring secure psychiatric care. This appears to be a national problem. Can the Minister ask cabinet colleagues in the Department of Health and Social Care and the Treasury to address this shortage of beds?	Draft Mental Health Bill published in June 2022 includes provision to introduce a statutory time limit of 28 days for transfers to hospital. The overall strategic direction of NHS England continues to be the maintenance of existing secure hospital bed capacity ... not an increase.	The draft Mental Health Bill published in June 2022 has not yet been passed into law, so the statutory position remains unchanged. This year one prisoner waited 55 days from referral to transfer.
Prison Service 1. Can consideration be given to the implementation of the 2019 HMP/PS nine 'priority' and four 'key' ideals, suggested as best practice in working with IPP prisoners, to ensure a consistent and humane offer to this cohort of prisoners? 2. Can consideration be given to resourcing the backlog of programme provision, to allow progression towards safe release for determinate sentenced prisoners?	1. Locally at HMP/YOI Moorland the implementation of the IPP ideals is part of the prison's current and future planning. 2. HMP/YOI Moorland has successfully increased the group size of offender behaviour programme delivery and to date the prison has started 30 prisoners on Thinking Skills Programme, Resolve and Horizon this year. The prison is expanding TSP delivery in place of Resolve.	1. IMB Moorland has developed a 'traffic light' monitoring tool based on the IPP ideals for use from 2023 onwards, which has also been adopted by the other IMBs in Yorkshire and Humber. The Governor has been supportive about its introduction. 2. Prisoners continue to report that lack of access to programmes has felt like an obstacle to progression, especially if the parole board has recommended a particular course. The TSP is being run but the resumption of Horizon

	HMPPS psychology service group directorate is working with the prison to find alternative places at other prisons.	awaits the rectification of the staffing shortage. Waiting times for transfers are often long.
<p>Governor</p> <p>1. Can key worker sessions be prioritised?</p> <p>2. Can relationships with local employers be established to provide a pathway into employment on release?</p> <p>3. Can there be a general improvement in sentence progression and resettlement services for prisoners?</p> <p>4. Can the 2019 HMPPS 'Ideals' document be adopted and implemented for IPPs in Moorland?</p>		<p>1. Key worker sessions have increased, and usually 36 are planned each weekday, giving priority to the most vulnerable prisoners. However staffing levels limit what can be delivered.</p> <p>2. Good progress has been made in liaison with local employers via employment fairs and contracts in workshops.</p> <p>3. Staffing difficulties in OMU are being resolved and the resettlement hub is making good progress.</p> <p>4. A prison offender manager (POM) has been appointed to lead on IPPs, and the prison has agreed to co-operate with the IMB traffic light monitoring tool adopted across Yorkshire and Humber.</p>

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

4.1.1 There were 1,341 receptions in the reporting year, the majority from Doncaster and Leeds. All prisoners were processed in reception, which now looks brighter and fresher following redecoration. New arrivals are body-scanned prior to transfer to the induction wing: those scanning positive are transferred straight to the segregation unit. (See 4.5.3.)

4.1.2 Posters inform arrivals of the key processes and procedures within Moorland. Written information is also available in 17 languages, and all other languages are available via a Language Line conference call.

4.1.3 Board members have observed prisoners in reception and induction. The Board saw a high level of professionalism and care from staff and peers.

4.2 Suicide and self-harm, deaths in custody

4.2.1 In the reporting year, 292 ACCTs were opened, compared with 206 last year. IMB members reviewed ACCT documents during their rota duties. The quality of ACCT documentation appeared generally adequate, but on occasions during the middle part of the year it failed to describe the prisoner's mood, focusing only on his behaviour or activities. The Governor assured the Board that robust quality assurance measures were in place. It is pleasing to report that in subsequent monitoring visits members noted evidence in post-closure documentation of staff sensitivity to the prisoner's mood, and heard positive feedback from a prisoner information desk (PID) worker about the approach to ACCTs which he had observed.

4.2.2 On one occasion this year, a Board member asked a governor conducting a segregation review to reconsider her decision not to open an ACCT for a prisoner threatening self-harm. It was pleasing that she was prepared to respond positively.

4.2.3 There were 134 prisoners who self-harmed during the year, in a total of 337 incidents - a reduction from 385 last reporting year. In all but 39 incidents, the triggers were stated to be internal to the prison. Various measures have been taken to reduce self-harm, including the identification of single case coordinators, 24-hour access to Listeners and to the Samaritans phone line, safety peer mentors on units and animal therapy.

4.2.4 Fifteen Listeners are now operational, with a further five awaiting training once the Samaritans can confirm a date. One PID worker told a Board member that there should be more publicity for the Listener scheme. The Board's view is that it would be useful to have more Listeners in place when possible. Prisoners can also access the Samaritans' helpline through in-cell phones, and according to the PIN phone system, this occurred on 7,665 occasions during the reporting year.

4.2.5 There were five deaths in custody during the reporting year, of which one occurred after release. The remaining four were all apparently due to natural causes. Prisons and Probation Ombudsman (PPO) reports have been received on two of these, and while the clinical review made some recommendations for improvements in health care procedures, which are being acted upon, nothing was identified which would have altered the outcome in these cases. The conclusion was that the quality of health care provided was equivalent to that which would have been received in the community.

4.3 Violence and violence reduction, self-isolation

4.3.1 In the reporting year, there were 114 recorded incidents of violence. This represented a significant increase on the 84 incidents recorded in the previous year. However, at 28, the number of assaults on staff was only four more than in the previous year. It was the rise in prisoner-on-prisoner assaults (at 86, 43% more than the previous year) which is more remarkable. Retaliation (given as the reason in 39 such incidents) was far and away the largest category, with bullying (at 12) the next highest category. We can only make an educated guess, but we suspect that the gradual return towards a more normal post-Covid regime during the reporting year will have brought more prisoners into direct contact with each other, thus providing opportunities for assaults.

4.3.2 Challenge, support and intervention plans (CSIPs) are considered a key tool for reducing violence and thus improving safety in prison. While, on average, 125 referrals were made per month in the previous reporting year, this has risen to an average of 155 referrals per month this year. It would be expected that this rise would match the increase in opportunities for violent behaviour, which appears to be driven by the relaxation in restrictions on prisoners' contact with each other, and it is reassuring that the CSIP process was available. The prisoner works on the relevant workbook with their CSIP manager – now, for a trial period, usually the senior officer on the house block where the prisoner resides – with the aim of reducing offending and the cycle of violent thought processes

4.3.3 During the reporting year, the Board was informed of seven serious incidents, including the four pre-release deaths in custody referred to in 4.2.5 above. There was one incident at height and two prisoner-on-prisoner hostage incidents. Officers handled all these events in a calm and professional manner, and there were no injuries to staff or prisoners.

4.4 Use of force

4.4.1 HMP Moorland continues to record a low use of force for a prison of its size. During the reporting period there were 190 use of force incidents recorded, as compared with 242 in the previous year, a significant reduction. The largest category of incidents was for non-compliance, and most recorded incidents used minimal level of force. De-escalation was promoted to prevent force having to be used and to maintain discipline, which led to a marked reduction in the number of forced removals to the segregation units compared with the previous year.

4.4.2 PAVA was drawn on three occasions during the year, but only used once. Neither batons nor body belts were used during the year. The special accommodation for violent prisoners was used six times during the year.

4.4.3 All incidents where force is used are reviewed at the weekly use of force development meetings, with an overview available at monthly meetings, to which IMB is invited and has attended where possible. Age and ethnicity continued to be noted for monitoring purposes, and did not give any cause for concern.

4.4.4. In addition to considering general trends, and issues such as the availability of training, incidents captured on body-worn cameras and/or CCTV are painstakingly reviewed, with learning points identified and good practice commended. However, the meetings have noted that at the start of some unplanned incidents, staff were not turning on their cameras and there was no record of the build-up to the incident. This may serve to undermine the reassurance otherwise available that incidents are generally well-handled, using the minimum necessary force.

4.4.5 The proportion of officers with in-date control and restraint training (including refresher training) had reached 82% (against a target of 85%) by the end of the reporting year, thanks to the efforts of trainers. Training across the prison in personal protection techniques – SPEAR – was also being rolled out for both officers and civilian staff, and almost 60% have now done this course. Members of the IMB have also undertaken this training.

4.5 Preventing illicit items

4.5.1 Despite the enhanced security measures, there remain some ongoing issues with illicit substances getting into the prison.

4.5.2 The use of the body-scanner in reception has continued to be the first point of prevention for incoming prisoners and is also used where any suspicious activity is detected, e.g. prisoners apparently 'under the influence' (UTI), substances found or security intelligence.

4.5.3 During the year, there have been 2691 body-scans completed, with 66 positive indications – a significant reduction compared to 124 last year. Those prisoners testing positive are held on a 'dry cell' on the segregation unit, receiving daily body-scans until they test negative. Prisoners have complained to Board members about controls on their flushing the toilet. Disputes sometimes arise about the results of body scans. An external audit has shown that quality assurance in the use of the body scanner was excellent, though the Board notes that this does not mean that body scans may not sometimes be misinterpreted.

4.5.4 Due to the prevalence of spice paper, all incoming mail is scanned, except for legal correspondence, which can be tested without being opened, if there are concerns. Reception prisoners also have their clothing washed and returned to them, to ensure that no spice paper secreted in clothing is brought into the prison this way.

4.5.5 Dogs trained in the detection of drugs are deployed before visitors are admitted, and any visitor identified by a dog is restricted to a closed visit.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 The Board has regularly inspected all accommodation and functional parts of the prison. Despite the small number of members available compared with the recommended complement (see Board statistics, p24), all areas have been visited at least once a quarter (some more often), and a short weekly report has been made to the Governor on each occasion highlighting both good practice and any causes for concern, to which she responds.

5.1.2 The general standard of accommodation is good, and the house blocks are clean. There have been problems with pigeons gaining access and leaving droppings despite the best efforts of the prison staff. An issue with rats has been actively tackled by the acquisition of several feral cats.

5.1.3 Pressure on the prison estate generally is reflected in the increase in operating capacity without a parallel increase in numbers of cells. This has necessitated more single cells being converted to doubles. From time to time, the IMB has received applications seeking single occupancy, to which we can only respond that demand exceeds supply and single cells are allocated by the prison management on the basis of risk assessment.

5.1.4 Repair of the roof is continuing, and contractors provide reactive maintenance.

5.1.5 The provision of food is a key issue in a restricted environment, and whilst food quality is generally reported as good, the IMB has received complaints regarding small portion sizes. Applications during the reporting period to the IMB regarding food were low at 10, representing less than 4% of the total.

5.1.6 The Board regularly inspects the comments book available in each house block, but has repeatedly found that it is kept behind the servery where it is not easily accessible to prisoners. There is evidence that these books are reviewed and signed by catering staff on a regular basis, but all too often there is nothing for them to respond to.

5.1.7 Around 26 types of menus dealing with religious, medically approved and other needs are provided from the kitchen daily. Those with complex food issues are addressed at an individual level, and the IMB has on several occasions met the catering manager on a house block visiting a prisoner to discuss his specific dietary needs.

5.1.8 The kitchen management is concerned that the national daily food allowance of £2.12 fixed many years ago has not kept pace with inflation. The prison continues to supplement the allowance.

5.1.9 There is a growing issue that prisoners' pay for work is not keeping up with the increased prices in the permitted canteen catalogue, so they are unable to supplement their food as much as in the past. This is a national problem.

5.2 Segregation

5.2.1. The segregation unit has an overall capacity of 28 cells, plus two cells designated as “special accommodation”. The Board is notified of all transfers into the unit, and whenever a member attends the prison for any reason they visit all new admissions, so most are seen within 72 hours. In addition, a member visits everyone in the unit on a weekly basis, and staff are always very helpful in facilitating this. The use of special accommodation is notified promptly, and usually limited to a few hours at most.

5.2.2. While some prisoners dispute the reason for their segregation (e.g. they deny that images detected by scanning at reception are in fact secreted items) issues about the regime itself are rare (e.g. requests for a radio, a distraction pack, or access to some property from their house block) and are usually rapidly rectified. Some prisoners are reluctant to move back to normal location.

5.2.3 Some prisoners are transferred to the segregation unit for isolation having tested positive for Covid, and the Board has not received any objections, either verbal or written, from these prisoners.

5.2.4 Sample adjudications are observed, usually once a fortnight, and the Board is satisfied that these are conducted in a fair and professional manner. Prisoners generally appear content with the outcome, even when this involves a number of days of cellular confinement.

5.2.5 Segregation reviews are scheduled twice a week, and Board members usually attend in person, though occasionally via the spider telephone. During the reporting year, members attended 83 sessions during which 257 individual reviews were observed. Conduct of these reviews varies according to the style of individual governors: however concerns raised by the Board with the Governor and deputy governor (for example, the failure to introduce those present to the prisoner) have been addressed.

5.3 Staff-prisoner relationships, key workers

5.3.1 Generally the relationships between prisoners and staff appear to be good on the whole, though it was of concern that the number of applications relating to staff/prisoner concerns, including bullying, was 47 (12.6% of the total) compared with last year's 30 (8.2%). The return towards a more normal post-Covid regime may be a factor.

5.3.2 The Board is pleased to note that the number of key worker sessions planned (and usually achieved) is on the increase, and that the Governor is committed to developing this area of work as staffing allows, giving priority to vulnerable prisoners. We note from the daily briefs that on weekdays 36 such sessions have often taken place, though on occasions these have had to be cancelled due to staff being needed elsewhere, e.g. for emergency escort duty.

5.4 Equality and diversity

5.4.1 Fifty-six discrimination incident reporting forms (DIRFs) were received by safer custody during the reporting year (see Annex A for breakdown by characteristic and percentage upheld).

5.4.2 The Board reviewed a random sample of nine (16%). Prisoners were sent an acknowledgement on the day the DIRF was received, informing them who would be investigating, and most then received a final response within a reasonable timeframe. The responses were on the whole polite and professional, but variable in the thoroughness of investigation undertaken. Some had not been signed off by the deputy governor even some months after completion: while not national policy, this forms part of the local quality assurance system.

5.4.3 The Board was told by several prisoners that they had not received a response to a DIRF: on inquiry, safer custody told the Board that no such DIRF had been received. The Board is unable to determine whether these DIRFs were not in fact submitted, or whether they had somehow gone astray. It seemed clear that some prisoners had little faith in the DIRF system, and one told the Board that whenever he submitted a DIRF he also phoned the IMB 0800 number on the same day to ensure that the issue was recorded.

5.4.4 There is a bi-monthly equalities action team (EAT) meeting which reviews data and feedback from prisoner forums for each protected characteristic. A member of the Board attends when possible, and we are pleased to note the commitment of the Governor to ensure action on any issues raised.

5.5 Faith and pastoral support

5.5.1 Once pandemic restrictions were eased, the chaplaincy team resumed an active programme of services and group work for the major faith groups. This has been welcomed by the prisoners, though some would like to see weekend services reinstated, which are currently not offered. The chaplains offer a lot of individual support to prisoners at times of special need, and visit the segregation unit daily. They have also been of help in resolving some DIRFs, and advising when requests for special food are made on religious grounds.

5.6 Incentives schemes

5.6.1 Some concerns have been raised with the Board about the incentives scheme. Cases have been identified where a prisoner has not been given written notification that a downgrading of the incentive level has been entered on his record, meaning that he was denied the opportunity to appeal within the permitted timeframe.

5.6.2. The scheme is viewed by some prisoners as punitive rather than incentivising, and it has been observed that enhanced status offers little reward compared with standard (see also 7.4.5).

5.7 Complaints

5.7.1 The total number of complaints received by the prison for the year April 2022 to March 2023 (the nearest available period to the IMB reporting year) was 2,577 compared with 1,583 in the previous year, an increase of 68%.

5.7.2 This included 210 complaints to the Governor under confidential access, and 330 which needed to be answered by other establishments. Of the remaining 2,037, 1,964 (96.5%) were answered on time.

5.7.3 The Board is satisfied that the confidential complaints are dealt with appropriately: this may include returning some which were not eligible to the main system, diverting to the equalities officer some which were better categorised as DIRFs, and taking action on those which involve allegations about staff. These complexities mean that the normal time limits for answering complaints are not applicable.

5.7.4 While delays in responding caused by other establishments do not form part of HMP Moorland's key performance metrics, they do nevertheless frustrate prisoners, and often result in applications to the IMB. The Board would be pleased to see measures put in place to address this by the escalation of complaints to which another prison has failed to respond in a timely manner.

5.7.5 As before, the largest single category by far was complaints about property, (568, 22%), which mirrors the pattern in IMB applications (see 5.8.1 and Annex A.)

5.7.6 Prisoners regularly tell Board members that they have no confidence in the complaints system, and many IMB applications state that complaints have been sent in but no response received. Often when we enquire, we are informed that no such complaint has been received by the business hub, and we are unable to determine whether the prisoner has misinformed us or the complaint has been submitted but gone astray.

5.8 Property

5.8.1 The Board continues to receive a relatively high level of applications about prisoners' property (59 or 16% of the total), which were this year equally divided between losses in Moorland and losses during transfer from another establishment. Too often, the intervention of the Board is unable to effect a resolution to the prisoner's satisfaction. It is disappointing that property, which by the very nature of imprisonment is often of great significance to prisoners, remains such an intractable issue.

6. Health and wellbeing

6.1 Healthcare general

6.1.1 General healthcare continues to be commissioned by the NHS and provided by Practice Plus Group. A new manager was appointed in January 2023. The dental contract is separately managed by NHS England.

6.1.2 A Care Quality Commission inspection took place in March 2023, at the same time as an HMI Prisons and Ofsted inspection. Although this was just after the end of our reporting period, the Board takes the view that the generally positive initial debrief reflects the situation over the previous year.

6.1.3 A healthcare meeting (prison health operation group) takes place every three months, which a Board member observes when possible. The monthly healthcare forum with prisoner healthcare representatives from each house block, which was suspended due to Covid, was re-established during the year. There are also patient engagement 'You said, we did' posters on house blocks highlighting responses to prisoner comments.

6.1.4 There were a total of 53 healthcare applications to the IMB this year compared with 52 in last year's report: one prisoner submitted nine of these applications. There continued to be medication issues, and the lack of safes on house block 6 has caused some concern, although these are awaiting installation. The broken machine in dentistry has caused some delays, although the average waiting times are below those generally found in the community. Similarly the waiting times for routine appointments for GP, physiotherapy, optician and podiatry are reported as less than one month.

6.2 Physical healthcare

6.2.1 The Covid pandemic continued to impact on prisoners and staff during the year, but to an ever-decreasing extent. Flu vaccines and Covid boosters for all eligible men have been offered, and provided when requested. Other relevant vaccines are also available.

6.2.2 There have been a number of occasions when prisoners have not attended healthcare appointments, causing frustration and waste of resources. The causes have been investigated and addressed (e.g. placing appointments on NOMIS, the national offender management information system, to ensure staff know of appointments; issuing movement slips).

6.2.3 There has been an increase in the number of prisoners prescribed supervised medication. This is due to a combination of failed spot checks and medication that is not allowed in possession based on risk assessment. A safer prescribing meeting is held every week, and following this prisoners are seen face to face to discuss why medication needs to be stopped or supervised.

6.3 Mental health

6.3.1 The Board regularly sees the input provided by the mental health team to prisoners in the segregation unit and those on ACCTs.

6.3.2 The mental health team provides a good range of evidence-based interventions to meet the needs of the prison population, responding promptly to referrals.

6.3.3 Yet again, the issue of delay in transfer of prisoners needing psychiatric inpatient care has arisen. One prisoner waited 55 days from referral to transfer, well beyond the target of 28 days, which is itself longer than a patient sectioned in the community would wait. We remain concerned that the draft Mental Health Bill published in June 2022 with its promised statutory time limit of 28 days for such transfers has not yet been passed into law.

6.4 Social care

6.4.1 This year saw the introduction of the intermediate care unit (ICU). It is funded by the NHS and provides nursing, occupational therapy and physiotherapy staff to support and accelerate a prisoner's recovery/rehabilitation and return to normal prison location. The unit serves Yorkshire and Humber and reduces the need for hospital stays and staff resources on bedwatches. However, despite the prior investigation and evidence-based rationale, there has been very little demand (a total of 15 since April 2022) for these nine beds, with a maximum of three prisoners who could not be evacuated without assistance. However, in the final three months of the year, there has been a gradual increase in appropriate referrals and for those transferred to the ICU, progress has generally been good.

6.4.2 For all prisoners, social care assessments can be arranged, especially if needed as part of their discharge and resettlement plan.

6.5 Time out of cell, regime

6.5.1 The Governor and senior team regularly review the regime and have sought to expand time out of cell as the year progressed. Gym sessions and courses have expanded, and exercise equipment was installed in the exercise yards and indoors on some wings (including the segregation unit). Prisoners were very positive about this.

6.5.2 Similarly, work places have increased but most on a half-time basis, with the exception of certain key posts. Re-rolling of the prison has caused some change of work options for PCOSOs and standard prisoners. Education provision has also increased. (See also 7.1 and 7.2.)

6.5.3 Staff availability was the biggest factor that impacted on regime provision. In the event of reduced staffing, all prisoners have a minimum of two hours out of cell daily, including a minimum of one hour of outdoor exercise (except on days scheduled for staff training.) In practice, this means 22 hours in cell for those without access to education or work and often for more prisoners at weekends.

Prisoner applications and conversations with the IMB often relate to wanting more 'social' time out of cells, but this is lacking except on the incentivised substance-free living (ISFL) unit (see 6.6.2).

6.6 Drug and alcohol rehabilitation

6.6.1 During the reporting year, 1,819 prisoners have engaged with the substance misuse service (SMS). The SMS continues to assess those presenting as being under the influence of illicit substances within 24 hours to see if they are willing to engage with the service or need support. An array of clinical treatments is provided for service users who have both drug and alcohol issues.

6.6.2 The ISFL unit has been running for 20 months: during the last four months of the year there were no positive urine screens or oral swabs. A recovery mentor is employed to deliver group work and peer support, and service users have the opportunity to meet those with lived experience of recovery whose success stories can help with motivation.

6.6.3 Service users due for release are advised about harm reduction and the risks of overdose, and are given training in the use of naloxone. They are provided with a release pack that includes information about local services, including food banks and Covid advice. They are referred to local community drug and alcohol services, and appointments are arranged for continuity of care.

6.7 Soft skills

6.7.1. Peer support on the wings is provided by a number of identified prisoners, for example, PID workers, healthcare reps, equality reps, peer mentors, Buddies and Listeners.

6.7.2. Services are provided by Pact to foster family relationships, and reading schemes are provided by the Shannon Trust. Family days in the visits hall have been well attended and appreciated.

7. Progression and resettlement

7.1 Education, library

7.1.1. The prison adopts a three-pronged approach to the delivery of education in an attempt to mirror the same range of choices as would be available in the community. There is in-cell teaching (via reading), a blended approach of in-cell and education department sessions, or total attendance at education department sessions. For higher level learning, prisoners can take on distance learning funded through the prison education grant. For Open University courses, prisoners have to take on a funding agreement of their own.

7.1.2 A full-time teacher is employed for those prisoners with learning difficulties or disabilities. It is now mandatory for a rapid screen test to be carried out if one has not been done in the last six months. The prison has recently appointed a neurodiversity manager and it is expected that this role will include identifying those who may require some adaptations.

7.1.3 Board members' observations of education sessions have been positive about the way in which teachers exercised group relations and responded to individuals. These sessions often required sensitivity to the needs of foreign nationals.

7.1.4 There has been a welcome uplift in the use of library facilities since the easing of restrictions due to the Covid pandemic. Sixty-two per cent of the prisoners are now active members of the library. The facility was accessed 1,325 times during October 2022 and 2,146 resources were issued. The increase in use of the library appears to be due to more interest from Res 1 prisoners, since Res 2 prisoners have always been enthusiastic readers.

7.1.5 The Storybook Dads project has been restarted following the pandemic restrictions and some prisoners themselves are now writing their own stories which they record and send to their children in order to maintain positive contact. The Raising Readers project has also started and this consists of packs of books being sent out to the children of prisoners to encourage them to read.

7.1.6 One issue which has regularly been raised with Board members and which is well-recognised by library staff is the limitation on full-time workers from Res 2 accessing the library on a Friday afternoon and some bank holidays. The problem appears to result from officers not being available to accompany prisoners to the library because it is not yet part of the profile of their responsibilities. Fortunately, the library staff have been able to continue with the delivery-and-return scheme, which was so useful during the lockdown period. This is helpful to full-time workers and the returns boxes on the wing are well used.

7.2 Vocational training, work

7.2.1 In order to enable more prisoners to engage in purposeful activity, more are offered only part-time work as opposed to full-time. Some are, of course, unhappy about the consequent reduction in earnings. Nevertheless, prisoners in the workshops are regularly positive about the respect they are afforded by the supervisory staff and regard the activity as a welcome change from life on their wing.

7.2.2 The issue of qualifications and certification based on the prisoners' work experience is one which the Board members regularly discuss, given the resettlement designation of the prison and the training designation of the Res 2 subsection of it. Some workshops have very clear qualifications attached to them with the prospect of related employment on release. Examples of these are the forklift truck driving licence, Braille translation, Clinks hospitality programme, server work, and painting and decorating.

7.2.3 Currently, however, some employers have requested that the prison focus upon inculcating generic work skills, such as attendance, compliance and teamwork, rather than other competencies which can be taught by the employer. Some workshops, such as the DHL packing service, present a realistic version of a working environment, and support for prisoners who request it for preparation for job applications. Similarly, Doncaster Cables, ASD Lighting, TV repair and waste management provide opportunities for practising the generic competencies to which employers refer, without formal qualifications. The prisoners are encouraged to complete a self- assessment workbook entitled 'My workshop progress'.

7.3 Offender management, progression

7.3.1 Some previously reported staffing difficulties in the OMU (offender management unit) are being resolved.

7.3.2 When HMP Moorland is responsible for the OASys assessment of a prisoner, the programmes department carries out a basic screening in order to decide what programmes may be appropriate. The completion of OASys assessments within the expected time limits is at 80%, meaning that around 130 of these are being completed each month.

7.3.3 Several prisoners have mentioned that the lack of access to programmes in the prison has felt like an obstacle to their progression, especially if the parole board has made that particular recommendation. Parole hearings are being conducted either online or face to face at the parole board's discretion, depending upon the complexity of the case.

7.3.4 Currently the Thinking Skills Programme (TSP) is being run but the Horizon programme is expected to restart only when the staffing shortage has been rectified. This latter programme will be especially important given the expansion of the numbers of prisoners in HMP Moorland who have committed sexual offences.

7.3.5 As noted in the Board's 2022 report, we have shown a particular interest and concern for the position and circumstances of IPP prisoners (on imprisonment for public protection sentences). The questionnaire which our members formulated, based on nine ideals published by the MOJ, has been used in HMP Moorland to guide our discussions with the prison staff as to what changes might be possible, at minimal expenditure, to help those who are suffering the effects of one of these sentences. One positive outcome has been the appointment of one of the prison offender managers (POMs) to take the lead on IPPs and to alert their colleagues to the unique nature of these prisoners' sentences.

7.3.6 The Board was heartened by the willingness of other IMBs in the Yorkshire and Humber region to join us in highlighting the position of IPP prisoners, as well as by the support of the prison group director and the regional governors who attended a special meeting to hear about our proposal for a coordinated monitoring exercise across the region. (See Annex B)

7.3.7 The current position in HMP Moorland is that eight IPP prisoners who are over their tariff and have never been released are identified as 'stuck'. They are part of the national IPP project. Six have clear progression plans, but most of these include specialist intervention/treatment units for which there are long waiting lists. The other two are refusing to engage with the process: their POMs and the associated psychologist from the national project are trying to instill hope and support re-engagement. The Board will remain focused on this issue.

7.4 Family contact

7.4.1 Contact with families has benefited from the innovations which were necessary during the Covid restrictions. The use of video calls with families has continued although some unreliability in the technology has been reported to the Board.

7.4.2 The Storybook Dads project which was initiated by the library staff has been restarted following Covid, as mentioned above (see 7.1.5).

7.4.3 There remains a concern about the lack of facilities for children in the visits hall, which previously offered supervision for the youngest children by volunteers. Pact intends to offer table-top family activities.

7.4.4 The availability of food in the visits hall for families who may have travelled long distances is seen as a strength of the provision, as is the opportunity to purchase cupboard items for prisoners to eat at a later date.

7.4.5 It has been drawn to the Board's attention that the more favourable meeting arrangements for enhanced status prisoners no longer seem available as an incentive.

7.5 Resettlement planning

7.5.1 Our 2021/22 annual report asked that the Governor look at the possibilities for improving the resettlement planning in the establishment. We were pleased to hear from the governor with responsibility for this aspect of prison life that a variety of initiatives have been taken, as follows.

7.5.2 A new appointment was made for management of the resettlement hub in October 2022, with a brief to coordinate the activities of the hub as a one-stop shop and retain oversight of its impact.

7.5.3 While contact with all prisoners due for release is made 12 weeks beforehand, applications can be made at any time prior to that for support and advice on issues such as debt or banking needs. Referral for this can be made by the prisoner themselves or by their POM.

7.5.4 A priority for the hub is for each prisoner to be provided with a means of establishing identity and access to a bank account. One of the major banks helps with this.

7.5.5 The hub has already begun to contact new potential employers and arranged four employment fairs in February. The number of prisoners attending has varied between 20 and 40. The companies offering work opportunities have varied from construction, scaffolding and cleaning to beer production.

7.5.6 The hub liaises with community probation services to identify how many prisoners are still in work after six weeks following release. These outcomes have ranged from 22.6% in November 2022 to 26.1% in February 2023.

The work of the IMB

Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	8
Number of Board members at the end of the reporting period	6 (including 1 on long-term sick leave and 1 with limited mobility))
Total number of visits to the establishment	240

The small number of active members compared with the recommended complement has inevitably increased the workload for each individual.

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year	Percentage in current year
A	Accommodation, including laundry, clothing, ablutions	14	7	1.9 %
B	Discipline, including adjudications, incentives scheme, sanctions	18	26	7.0%
C	Equality	23	26	7.0%
D	Purposeful activity, including education, work, training, time out of cell	9	16	4.3%
E1	Letters, visits, telephones, public protection, restrictions	29	32	8.6%
E2	Finance, including pay, private monies, spends	6	7	1.9%
F	Food and kitchens	56	10	2.7%
G	Health, including physical, mental, social care	52	53	14.2%
H1	Property within the establishment	22	29	7.8%
H2	Property during transfer or in another facility	40	30	8.1%
H3	Canteen, facility list, catalogues	9	8	2.1%
I	Sentence management, including HDC, ROTL, parole, release dates, re-categorisation	28	36	9.7%
J	Staff/prisoner concerns, including bullying	30	47	12.7%
K	Transfers	14	21	5.6%
L	Miscellaneous	16	24	6.4%
	Total number of applications	366	372	100%

Annex A Tables

Recorded violence

	2022/23	2021/22	Change	% change
Prisoner on prisoner assaults	86	60	26	+ 43%
Prisoner on staff assaults	28	24	4	+ 17%
Total	114	84	30	+ 38%

Discrimination incident reporting forms 2022-2023

Category of DIRF	Submitted 2022/23	Upheld 2022/23	% upheld	
Race	32	7	22%	
Religion	7	2	29%	
Disability	8	2	25%	
Age	1	0	0%	
Sexual orientation	6	1	17%	
Gender reassignment	1	1	100%	
Not specified	1	0	0%	
Total	56	13	23%	

Complaints April 2022-March 2023

Subject	Number	Percentage
Adjudications	17	0.7%
Bullying	18	0.7%
Canteen	111	4.3%
Confidential	210	8.1%
Education	25	1.0%
Finance/cash	150	5.8%
Food	111	4.3%
Gym	3	0.1%
Incentives scheme	43	1.7%
Letters/censors	103	4.0%
Medical/healthcare	58	2.3%
OASys/offender management	69	2.7%
Offending behaviour programmes	1	0.0%
Other	360	13.7%
Pre-release/release	32	1.2%
Recategorisation	26	1.0%
Reception	0	0.0%
Property	568	22.0%
Residential	268	10.4%
Security	8	0.3%
Segregation	1	0.0%
Staff	101	3.9%
Transfer/allocation	41	1.6%
Violence	3	0.1%
Visits	120	4.7%
Work	130	4.0%
TOTAL	2577	98.6% (rounding error)

Annex B

IPP monitoring form Yorkshire and Humber Region

QUARTERLY MONITORING OF PRISONERS IMPRISONED FOR PUBLIC PROTECTION (IPPs)

PRISON HMP.....

DATE.....

NUMBER OF IPP PRISONERS

IN 2022 NUMBER OF IPP PRISONERS:

RECEPTIONS..... RELEASES..... TRANSFERS.....

No	Issue – based upon the best practice ideals for working with IPP prisoners Ideals	Yes/No	Notes	BRAG status *
1	Has the prison nominated both staff and prisoner IPP Leads, through which communications, advice and activities can be channelled.			
2	Are the Leads available to ensure all IPP prisoners newly arrived in the prison have an introductory conversation, covering how the prison can support their efforts to make progress in their sentence.			
3	Do Leads meet regularly to discuss any issues and actions relating to IPP's			
4	Has the prison produced, implemented and delivered an IPP Strategy and Action Plan, to improve the prison's ability to support the progression of this cohort			
5	Has the prison provided an appropriate support package to IPPs in the lead up to a Parole hearing including, for example, mock Parole Boards.			
6	Are all Parole Board decisions timely delivered and discussed, in person by a POM or Key Worker, especially where immediate support is required, following a negative decision. Are staff available to ensure follow up engagement and support is provided, to reduce likelihood of the set-back affecting future progression prospects.			
7	Are the IPP POMs and/or Key Workers focused on preparing individuals for new environments, where IPP prisoners have secured a move to open conditions, or a release decision.			
8	Does the prison have active plans included in their family strategies and specific actions to engage and include families in the support and progression of IPP's			
9	Does the prison hold at least two IPP forums/community days per annum; ensuring attendance from members of staff from			

	functions affecting progression, and involve prisoners' families where possible.			
10	Has the prison established advice and support groups for IPP prisoners, and appropriate prisoner mentors for individuals to access.			
11	Do all staff working with IPP prisoners have awareness briefings on the additional challenges experienced by IPP prisoners and on current available initiatives to support progression.			
12	Does the prison collate and share data and information on the IPP population to the PGD for feedback and support			

*** Colour block for completion**

Blue – not physically possible or rejected

Red – uncompleted

Amber – in progress

Green – completed



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