

# Annual Report of the Independent Monitoring Board at HMP Isle of Wight

For reporting year 1 January 2022 – 31 December 2022

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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 Isle of Wight is a category B male training prison and part of the Long Term and High Security Estate Group. It primarily holds men serving long-term sentences for sexual offences, but also provides a remand unit serving the Isle of Wight Crown and Magistrates Courts.

The establishment comprises two sites - Albany and Parkhurst - and lies to the north of Newport, the County Town. Both sites are separate with their own perimeter walls. The prison's administration offices, including the Governor's office, are in Albany House which is outside both sites. This makes HMP Isle of Wight the only prison in the country where these offices are not inside the perimeter walls.

There is a single Separation and Reintegration Unit (SARU) located in Parkhurst. This means any prisoner from Albany requiring segregation must be transferred under escort. Both sites have their own Healthcare Centres but share a single Inpatient Healthcare Unit (IHU) located in Albany.

The prison has a DDC certified operating capacity of 1,101<sup>1</sup> prisoners distributed across 15 houseblocks. This includes the use of cell sharing in four houseblocks in Parkhurst reintroduced to meet the increasing population. At the end of 2022 the prison held 995 prisoners (up from 688 at the end of 2021) of different categories as set out in the table below.

Category	Number
Category B	306
Category C	660
Category D	7
Remand	22
ISPP (included in total)	132
Life Sentence (included in total)	91

The population, as shown below, is generally older than the average for England and Wales - almost one fifth are over 60 and 5% 70 or older.

Age	% of population
20-29	14.9%
30-39	27.4%
40-49	19.3%
50-59	19.9%
60-69	13.3%
70-79	4.0%
80-89	1.0%
90+	0.2%

<sup>&</sup>lt;sup>1</sup> 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.

## 3. Executive summary

## 3.1 Background to the report

This year in the establishment it has been somewhat better than 2021, the regime has been a little easier on staff and the board. The regime has slowly returned to some normality by the end of the year with a return to more regular work. Covid 19 had reduced during 2022 with few cases.

The IMB has remained very focused within both sites. All board members have played an important role with the prisoners and staff, also supporting each other's needs. We had 9 members on the board at the end of the year. We have, since October, recruited 3 new members who have passed their vetting and joined the board

The board's quota for members is 17 and so we are always looking for new members for this very important role that the board plays within the prison.

We have still been using the 0800 for prisoners to send in Apps, they have also been able to write to us via paper Apps. There has been a steady stream of Apps for the board, and with visits by us to the prisoners has been maintained.

The visit of HMIP was not unexpected and duly highlighted the issues of Category Cs being transferred to HMP IOW which is essentially a Category B prison. This has been addressed with the SLT looking into how the prison can best manage the situation through the implementation of a whole of prison project – SPIRES.

The Chair would like to thank the board for its dedication and support through 2022.

## 3.2 Main judgements

Three factors significantly influenced outcomes for prisoners during 2022.

First – the gradual introduction of a less restrictive regime with the improving Covid situation. Periodic outbreaks meant this was not a smooth journey, but 2022 saw the return of opportunities for work, education, exercise and communal worship.

Second - persistent staffing shortages across the entire prison staff. This slowed the return to a more normal regime, and:

- meant prisoners continued to spend considerable periods locked up
- impacted access to health care, including mental health services
- reduced access to work, education and the library
- hindered the establishment of relationships between prisoners and nominated key workers and offender managers.

Pro-active responsive steps were taken to recruit including local advertising on buses and bus stops, recruitment days and outreach to the community at Job Centres and the Isle of Wight College. Steps were also taken to encourage overtime

(the Payment Plus Scheme) and to identify ways to make the best regime possible with the available staff.

Third - the arrival of a significant number of Category C prisoners reflecting nationally made decisions about the prison population. Providing these prisoners with a discernibly different regime to Category B prisoners presented challenges.

#### How safe is the prison?

Drawing meaningful generalised conclusions between 2021 and 2022 is difficult without properly factoring in the increase in the prison's population; the move towards a more normal regime; and the influence of a relatively small number of prisoners on overall statistics. That said, in 2022 the data shows:

- a 41% increase in assaults on staff in 2022, reversing the 18% fall seen between 2020 and 2021
- an 11% increase in prisoner-on-prisoner violent incidents, compounding the 43% increase seen between 2020 and 2021
- a 26% reduction in self harm incidents, an improvement on the 79% increase seen between 2020 and 2021
- a 5% increase in use of force incidents.

Overall, these figures suggest the prison became less safe in 2022, particularly in terms of violent incidents, notably against staff. However, we note purposeful efforts taken to make systems and process for managing safety work better.

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

The benefits of loosening of the regime following relaxation of Covid restrictions were often blunted by chronic staff shortages. This resulted in prisoners continuing to be locked up for considerable periods of time. The prison also faced challenges responding to the different entitlements (and expectations) of newly arriving Category C prisoners.

Requirements in terms of accommodation were generally met, although we had concerns about the cleanliness of outside areas (particularly in Albany). These are being addressed. The standard of food prepared by the kitchens was good and met all requirements. However, we saw problems in its transfer from the kitchens to the wings (inadequate numbers of functional insulated trollies) and in its distribution on the wings. We observed that not all servery staff held hygiene certificates and equipment, including temperature probes, serving utensils and clothing (such as beard guards) were not always available, or used.

Equality issues continued to be dealt with thoughtfully. The number of DIRFs submitted in 2022 remained largely unchanged in terms of the prison's population. The complaints system worked well. Adjudications were fairly conducted, but we did observe a number of adjournments which could have been avoided with more attention to process details, e.g. unsigned paperwork, inappropriate charges unavailability of witnesses and reporting officers. We were however satisfied that

steps were being taken to address this, including through the Confidence and Competence Strategy.

Objectives on the key worker/prisoner relationship were not consistently met. There were delays in allocating key workers to newly arriving prisoners and established prisoners reported limited contact with key workers.

A significant amount of refurbishment took place and there is a clean plan and processes to prioritise available funding and bids to the MoJ for capital support. Many buildings on both sites, however, remain in a poor condition with consequences for outcomes. The Laundry remained out of action for yet another year.

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

The general standard of healthcare provided meets the requirement to match that available to the wider public. However, access to health care was detrimentally affected by staff absences, both in respect of health professionals and of officers needed to escort prisoners to appointments. This led to numerous appointments being cancelled, often at short notice.

We are however concerned about the prison's ability to provide the necessary care for prisoners with mental health issues. The Mental Health Department was and remains chronically below strength. The inward transfer from secure hospitals of prisoners with complex mental issues – and consequently needs – greatly compounds this problem.

Efforts to improve prisoners' general wellbeing and assist them in making better lifestyle choices were made and assisted by the relaxation of Covid restrictions. However, addressing high and unhealthy levels of obesity in a generally older population require more attention, including increasing exercising opportunities.

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

The relaxation of Covid measures saw a welcome return to some education and work activities. Staffing shortages (both instructors and escorting staff) however, significantly restricted these opportunities. This frustrated prisoners, particularly the large number of new Category C prisoners with limited work opportunities.

While accepting HMP loW is not a resettlement prison, we had concerns about three issues which are important for prisoners' progression and eventual successful resettlement:

- access to education, particularly basic literacy, was limited. Meeting Ofsted's requirements will require a fundamental shift in the scale of effort. The continued closure of the library compounded this
- the provision of programmes was limited with sessions continuing to be delivered on a one-to-one basis rather than in group format

• limited contact between prisoners and their POMs.

We also note steps taken in early 2023 to begin to address these.

#### 3.3 Main areas for development

#### TO THE MINISTER

This was another difficult year with the prison continuing to face Covid challenges while managing an increasing population of Category C prisoners. Welcome progress was made towards a more normal regime as Covid restrictions were relaxed. However, the anticipated benefits of this were severely limited by chronic staff shortages. This resulted in prisoners remaining locked up for considerable periods of time limiting their access to association, work, education, opportunities for progression, exercise and health care, including mental health services.

Outcomes for prisoners (and their successful resettlement) are unlikely to improve significantly without addressing this issue matched by steps to improve the confidence and competence of many new staff replacing the more experienced who have left the prison service.

#### TO THE PRISON SERVICE

Looking beyond the need to address staff shortages we note:

- the importance of an early decision on whether the prison will continue to hold a significant number of Category C prisoners. Time and resources are being put into making the necessary adjustments to support the accommodation of these prisoners which may prove nugatory should the prison revert to primarily holding Category B prisoners
- the urgent need to strengthen mental health provision and to carefully consider decisions about the relocation of individuals with complex mental health conditions from secure locations to mainstream prisons
- the importance of early funding decisions to support key infrastructure work.

#### **TO THE GOVERNOR**

Safety - we acknowledge efforts to improve systems and process key to safety but note the need to ensure timely and full compliance with requirements of ACCTs, CSIPs and Use of Force reviews.

Fair and humane treatment - an early decision on the location of Category C and B prisoners in the establishment would benefit both prisoners and staff. Key Worker targets in terms of their frequency need to be met and their quality assured.

Health and wellbeing – recognising the staffing challenges, the Mental Health Department needs to be brought up to establishment strength. Efforts should also be made to prioritise staffing to escort prisoners for health care appointments.

Progression – there is need for a new focus on meeting literacy targets and improving the availability of programmes. Restoring regular library access is key.

## 3.4 Progress since the last report

We note that:

- preparation for the arrival of Category C prisoners was slow
- access to education remains limited
- full access to the library services was restored but only in February 2023.
- the laundry remains closed but recognise that work to reinstate it is in hand.

## Evidence sections 4 – 7

## 4. Safety

#### Safety Intervention Meetings (SIMs)

Safety Intervention Meetings (SIM) and Safety Reviews are key mechanisms for the management and reduction in violence. Participation at both meetings is multidisciplinary.

The SIM occurs weekly and addresses week-to-week issues (and associated prisoners) to promptly put in place actions to support prisoners and their safety. It considers incidents of violence (including self-harm and UoF), CSIP management progress, one-page plans, prisoner location management, security and ACCT assurance monitoring. The SIM also monitors incidents of social-isolation and prisoners of concern.

Safety Reviews occur monthly. Like the SIM, this tracks cases of violence and self-harm, along with the effectiveness of the CSIP and ACCT processes. An important part of this meeting is the examination of data accumulated over a rolling 12-month period to assist in identifying trends and introducing process improvements, including to the CSIP and ACCT assurance processes.

We observed most SIM meetings and a sample of Safety Reviews. All minutes and action plans were circulated to us. We observed that the use of MS-Teams (introduced due to Covid but now retained) has proved effective in involving all parties. We also observed an improvement in meeting format and conduct towards being action driven, with attendees held responsible for allocated actions and supporting individual prisoners.

#### 4.1 Reception and Induction

We regularly monitored arrivals and departures. The process is efficient and well managed with officers, orderlies, prisoner representatives and health care staff working well together and demonstrating empathy in managing initial arrivals.

The increase in the Category C population resulted in a corresponding increase in arrivals. Over 2022, reception handled an average of 13.8 prisoner movements a week with regular peaks up to 22 per week. The prison's location meant prisoners often had long journeys (including stopovers) and frequently arrived tired. Many arrived late in the day giving limited time to fully process property. In these cases, prisoners were given the essentials for their first night - including shower access and a personal phone call – with their property processed over the following days.

All new arrivals are screened for immediate health needs, drug or alcohol abuse issues and the risk of self-harm. A dedicated nurse checks all paperwork and the prisoner's own account of their health and medication needs. Previously observed delays in sending and receiving medical histories have been largely addressed. The medical needs of all arriving prisoners are reviewed by the doctor within 72 hours of arrival.

The absence of health care staff to meet prisoners arriving late is a concern. While reception is required to be open until 19.30, healthcare staff are not available outside the core day. The prison has yet to resolve this issue.

On arrival existing ACCTs are reviewed, and a new one opened if deemed necessary. Problems observed earlier in obtaining handover documentation - including complete self-harm and Challenge, Support and Intervention Plans (CSIP) from previous establishments - appears to have been resolved.

After initial processing new arrivals move to a dedicated induction wing. They normally spend two or three weeks there before moving to a regular location. Induction seminars are held for new arrivals normally within the first week of arrival. We observed these, and believe they are of value.

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

During 2022 there were 967 self-harm incidents, 341 fewer (26% less) than the 1,308 in 2021. These incidents were in relation to 95 prisoners, around 8.5% of the total population.

The ACCT process is used to monitor and support prisoners deemed to be at risk of self-harm. The ACCT allows the prisoner to be observed and records any issues of concern, including changes in behaviour. The regularity of ACCT reviews is event driven to match the needs of each prisoner. Any member of staff can raise an ACCT, and all staff are obliged to flag any concerns they may have regarding potential self-harm tendencies.

The recently updated ACCT process presented some problems with a challenging timescale for implementation. This was both in terms of moving to a new system, and – importantly – applying, clarifying and implementing the objectives of the change in terms of improving prisoner management. These challenges (and any shortcomings) were regularly monitored at the weekly SIM and process improvements put in place. Consequently, and with increased familiarity, we observed that implementation of the ACCT process and its monitoring improved.

We regularly attended ACCT reviews and monitored the ACCT assurance process, including the level of completion of ACCT assurance records. We note the steps taken by the prison to monitor its performance in completing these records but observe that performance was patchy with some remaining outstanding, sometimes for a lengthy period.

Relaxation of the regime post Covid saw the removal of wing "cohorting" and an increase in activities, work and association. This resulted in a reduction in terms of prisoner lock-in and hence social-isolation, which helped reduce consequential anxiety driven by those factors. However, this same relaxation, with more activity and a consequential increase in peer pressure on the wings, appears to have had a detrimental effect in terms of anxieties for some more vulnerable prisoners.

There were seven deaths in custody in 2022 – one in January, one in February, one in April, two in September and two in October. Two initial PPO reports (for the

January and February cases) have issued. Both deaths were due to natural causes. Recommendations from the February report have been accepted and adopted by Safer Custody. Discussions are ongoing with respect to the January case. PPO reports for the other five cases are in progress

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

145 violent incidents were recorded in 2022 - 30 more than in 2021(a 26% increase). These included:

- 79 assaults on staff up by 23 (41%) compared with 2021
- eight assaults on SARU staff six (300%) more than 2021
- 66 prisoner-on-prisoner violent incidents seven (11%) more than 2021.

As with self-harm, these figures are skewed by a few more prolific individuals several responsible for multiple assaults including on SARU staff. An adult safeguarding policy is now in place for the large number of vulnerable prisoners. Partnership working with the local adult safeguarding board is good, but as most prisoners were not from the Isle of Wight, prison leaders must make referrals to other regions for concerns about vulnerability on release. Some officers have little expertise or training in the safeguarding risks vulnerable prisoners may face.

Prisoners have access to in-cell telephones to help maintain contact with family, an important support for many prisoners. Prisoners can also access the Samaritans through this means. Prisoner Listeners (trained by the Samaritans) are available to support those in crisis. Meetings with Listeners can be through the in-cell phone network, or in-person if requested. This service was available throughout the year but not always fully used throughout the restricted regime.

The Listener Service is benefiting from the ending of Covid restrictions. Support meetings with the Samaritans resumed in May. In August additional Listeners were recruited and trained giving a large team across both sites. Listeners were well supported by the prison and the local Samaritans coordinator meets them regularly. The prison has responded to HMIP's observation that many (44%) prisoners found it easy to speak to a Listener and is addressing difficulties preventing prisoners accessing them.

#### 4.4 Use of Force

Use of Force (UoF) can arise from either: (a) planned enforced transfer of a reluctant prisoner intended to de-escalate an existing situation; or (b) as an immediate and urgent response to an incident in the prison. In 2022, there were 230 UoF incidents - 28 were pre-planned and 202 spontaneous incidents for self-defence. In SARU there were 27 incidents – 9 pre-planned and 18 spontaneous.

All UoF incidents must be followed by a mandatory debrief meeting to review actions taken and identify any learning. Since the last review, these debriefs must now include the prisoner's input. This takes the form of a discussion and feedback to/from an officer not involved in the original incident.

All UoF incidents must be fully recorded in an on-line database. This requires all participants in the incident to record their individual statements and must be completed within 72 hours. While steps taken to monitor and improve compliance with this requirement have yielded some improvement, we still observed a significant number of outstanding reports.

The use of pelargonic acid vanillyamide (PAVA) was rolled out in the establishment during 2022. Any use of PAVA must trigger the attendance of medical support along with a specific PAVA-related report. PAVA was drawn once by staff during the year but not used.

In 2002, the prison re-established its monthly UoF meetings. These review all UoF incidents including: reasons for the use of force; injuries; baton draws and strikes; use of handcuffs/body belt and of PAVA. Other factors including age, ethnicity, religion and disability are also considered to help identify and understand apparent trends and improve processes.

#### 5. Fair and humane treatment

## 5.1 Accommodation, clothing and food

Relaxation of COVID restrictions allowed the resumption of MQPL meetings in the latter half of the year. This is welcome, but we note these meetings are not yet occurring on a regular monthly basis

Prisoners had the basic requirements of a bed, storage locker and chair, but the provision of curtains remained irregular. The formal system for prisoners (through staff) making repair requests (Planet FM) functioned reasonably well - provided requests were properly logged and followed up.

A consistent complaint raised was oppressive heat in cells over the summer and the reverse in winter. Breakdowns in heating and hot water plant also arose during the year but were dealt with promptly.

The most frequent accommodation issue raised with us related to the expectations of newly arrived Category C prisoners. In addition to their disappointment about the wider regime, including movement within the wing and association, many felt they were being denied facilities – specifically the means to cook and items like microwaves – to which they believed they were entitled.

Houseblocks on both sites – while often drab and showing their age in some areas - were generally regularly cleaned. We sometimes heard complaints from wing cleaners about shortages of cleaning materials. Follow up indicated this was usually caused by wing staff not ordering supplies in good time rather than any genuine shortage, or and purposeful decision to limit supply.

The same was not always true of the grounds, particularly in Albany. Throughout the first part of 2022, we regularly raised concerns about litter and accumulated and seemingly abandoned waste behind houseblocks. This included a significant amount of bio-waste. We note the steps take to address this which led to a welcome improvement.

Numerous buildings – along with plant and electrical infrastructure - on both sites need repair reflecting their age and a lack of consistent investment. The condition of some buildings limits their use and hence opportunities for prisoners:

- leaking workshop roofs in Albany reduced the working area and hence space for workers
- lack of wheelchair usable emergency exits denied work opportunities for disabled prisoners.

Of continued concern, the laundry remained out of service throughout 2022 creating inconvenience, lost work for prisoners and increased cost to the establishment. This

issue was highlighted in the Board's last two reports and work on it seems unlikely to start until towards the end of 2023.

The prison is aware of these issues and is working to address then within the financial constraints, with larger projects requiring the need to bid for funds from the MoJ. Regular meetings between the Area Property Operations Manager, the Governor and GFSL provide an important mechanism to prioritise available funding and bids for additional funding from the MoJ.

During the year substantial refurbishments took place on both sites. Priority was given to fire protection and security (including the installation of CCTV cameras) but important infrastructure work (electricals and heating and hot water plant) was also undertaken. A clear list of priority works exists but the pace at which these can be undertaken fundamentally depends upon the availability of funds which lies with the MoJ not the prison.

Food for both sites, is centrally prepared and distributed to houseblocks. Key requirements were consistently met:

- prisoners were provided with a minimum of five choices, including at least one hot meal per day on a menu cycle of four weeks
- vegetarian, vegan, halal and kosher food were provided. The kitchens also provided special meals for 30 religious festivals including a Ramadan menu approved by the Iman. The kitchens also provided specific offering to mark cultural events, e.g. Appleby Fair and Black History Month
- information was provided to help prisoners make informed decisions including on allergens. We note the introduction of a healthy eating folder giving advice on options, including their calorific content and nutritional breakdown. These folders are available on each House Block, in Reception and the Gym
- surveys seeking prisoners' views/suggestions were undertaken although response levels were poor.

The absence of dietician following the departure of the sole qualified members of staff during the year is a cause of concern.

While the quality of food was good, we saw a number of shortcomings in its physical distribution on houseblocks, specifically:

- servery staff working without hygiene certificates which might indicate they had not received the required training
- a large number of the insulated trolleys used to hold food in transit from the kitchens to houseblocks being unserviceable or badly damaged

- absence of functioning temperature probes across the establishment. There
  should be two probes at each servery, one for the exclusive use of Halal
  meals. This absence is compounded by their apparent infrequent use
- in some cases, a lack of soap in servery areas.

Catering committee meetings resumed in the second half of the year. This should give a forum for these issues to be properly raised and worked through.

## 5.2 Segregation

A single segregation unit (SARU) serves both sites. This has 15 standard cells, one special accommodation cell and two dirty protest cells. Prisoners are segregated for a number of reasons - cellular confinement as a punishment; awaiting the outcome of an adjudication; for good order and discipline or own Interest.

In 2022 most prisoners stayed in segregation stayed between 11 and 16 days. However, there were a number of long stay residents – the longest was 206 days in 2022 compared with 135 days in 2021. All segregated prisoners are seen daily by a governor, healthcare and chaplaincy. They are given a segregation radio and access to the telephone, offered a daily shower, exercise and purple visits. They do not have access to religious services. Staffing shortages across the prison did not impact on segregation.

All segregated prisoners are reviewed after their initial 72 hours and after every 14 days. Detention beyond 42 days must be authorised by the Deputy Director of Custody. We saw every prisoner in segregation weekly and attended all 14-day reviews. Generally, we observed review processes being properly followed. However, we observed – and noted to the prison – occasions when mental health was not represented at 14 days reviews contrary to the requirement. Remedial action was taken.

#### 5.3 Staff-prisoner/detainee relationships, key workers

Every prisoner should have a named key worker and meet with them for 45 minutes at least twice each month. Throughout 2022 this objective was not consistently met. We saw:

- delays in allocating key workers to newly arriving prisoners
- established prisoners reporting limited contact with key workers and, in some cases, a failure to appoint a replacement when their key workers moved wing
- staff telling us they did not have time to undertake this function.

Staffing shortages appear to underlie this problem, but it has been aggravated by the inexperience of new recruits in this critical role. We however note the remedial action taken and the attention given to this issue in the monthly Residential, Equality and Safety (RES) meetings. These include:

- the specific inclusion of key worker sessions within the new profile
- work to improve the confidence and competence of key workers, including the Growth Project, the Competence and Confidence Toolkit and Custody Manager Upskilling Training Programme

## 5.4 Equality and diversity

During 2022 the Equalities Team continued to work with established groups and supported the establishment of three more for: Transgender prisoners; 20-25 years old; and those serving IPPs. All groups meet quarterly giving staff time to investigate and, if required, respond to issues raised.

The rationale for the 20-to-25 forum was to address specific concerns for this group, including UoF and negative adjudication outcomes. While a good idea, progress was limited with prisoners not engaging, but efforts are being made to rework it. The decision to establish the Transgender forum was similarly welcome. Trans issues had previously come under the existing LGBTQ forum, but the concerns for the two groups are different and so merited the separation.

Continuing Covid restrictions and staffing shortages made facilitating these fora difficult. But we observed every effort being made. We also saw the importance the prison gave to them recognising their role in enabling full self-expression and in resolving issues. By necessity, specific events have been celebrated in a reduced manner but none the less recognised.

HMIP recorded that 44% of prisoners reported a disability. Those with a physical disability receive good support, with some cells adapted to meet their needs. Most prisoners with limited mobility are located placed in ground floor cells. House block 17 is a social care wing which provides a good support and has trained 'buddies', to assist prisoners with tasks. Disability liaison officers had been trained as trusted assessors and could identify and respond to some needs.

#### 5.5 Faith and pastoral support

The chaplaincy team provides support for 25 recorded religions within the prison population. The removal of Covid restrictions has allowed the gradual resumption of services of worship. We observe members of the chaplaincy team undertaking weekly ACCT checks and regularly engaging with prisoners. We observe them frequently visiting segregated prisoners, although participation in the weekly Good reviews is less frequent.

#### 5.6 Discrimination incident reporting Forms DIRFs

A total of 191 Discrimination Incident Reporting forms (DIRFs) were submitted in 2022 across both sites - an increase of 56% over the 122 submitted in 2021. There

was a corresponding and proportional increase in the number upheld or partially upheld – 40 in 2022 compared with 25 in 2021. We note that Parkhurst submitted 60% more DIRFs than Albany although housing (0n average) around 20% fewer prisoners.

The top topic, as in 2021, remained race. We continued to scrutinise DIRFs for the standard of investigation including fairness and timeliness and to identify any themes or hotspots.

#### **ALBANY**

	2021	2022
TOTAL	59	73
UPHELD	12	11
PARTIALLY UPHELD	4	4
NOT UPHELD	17	22
NON DIRFS	25 (42.4%)	36

#### **PARKHURST**

	2021	2022
TOTAL	63	118
UPHELD	5	13
PARTIALLY UPHELD	4	12
NOT UPHELD	26	35
NON DIRFS	28 (43.8%)	58

#### 5.7 Incentives schemes

The distribution of prisoners on basic, standard and enhanced status is set out below. This remained similar in 2022 to that in 2021. We note the high number of enhanced status prisoners. Information on IEP status – cross referenced for ethnicity, sexual orientation and religion – are prepared monthly.

	2022 (year-end)		2021 (year-end)	
	Number   Percentage		Number	Percentage
BASIC	24	2.4%	12	1.8%
STANDARD	156	15.6%	134	19.7%
ENHANCED	817	81.8%	534	78.5%

The loss of Covid related "benefits" (additional telephone allowance, goody bags) means IEP status has become of more relevance to prisoners. A new IEP forum has been established and meets quarterly fulfilling to the fullest extent recommendations from the Lammy Report. A wide cross section of the prisoner community attends and discuss cases (with names redacted) thoroughly examining what occurred and possible outcome. This has proved very successful.

#### 5.8 Complaints

The number of complaints increased from 2,236 in 2021 to 3,392 in 2022 – a 52% increase. This cannot simply be attributed to the increase in the prison's population - unfulfilled expectations after lockdown and disillusionment amongst the new intake of category C prisoners have been significant drivers. The table below sets out the five most significant complaint issues in 2022. These accounted for almost 60% of all complaints raised.

Issue	Total number	% of all complaints
Residential	831	24.4%
Property	377	11.1%
Work	302	8.9%
Staff	237	7.0%
Finance	233	6.9%

Complaints are monitored and randomly audited by the Business Hub Manager and discussed at monthly residential meetings which identifies themes and wing specific issues. Complaints are generally allocated to the Keyworker or if concerning staff to the Custodial Manager. We note that the Gypsy, Romany and Traveller group is reluctant to use this method which they feel is not in their culture.

There is an expectation that complaints will be dealt with within five working days. During the year – as set out in the table below - this objective was not met. In 2022, the percentage of complaints receiving a late response was consistently higher than in 2021 and got progressively worse in the second half of the year. Commendable work to improve the quality of responses to complaints – along with the increasing number of complaints – were no doubt responsible for this.

Month	Total	Completed	% late	% late
	Complaints	on time	2022	2021
January	217	207	5%	3%
February	216	209	4%	1%
March	211	201	5%	3%
April	229	219	5%	5%
May	316	303	5%	5%
June	260	250	4%	4%
July	262	241	8%	5%
August	353	322	9%	5%
September	357	309	13%	5%
October	314	272	14%	3%
November	340	293	14%	5%
December	317	291	8%	4%
TOTAL	3392	3117	8%	4%

## 6. Health and wellbeing

## 6.1 Healthcare - general

Healthcare is provided through:

- a centrally contracted service with Practice Plus. This provides a GP service, dentistry, optometry and audiology services and organises NHS out-patient services. Practice Plus also operate the two primary care units and the inpatient unit
- 'inhouse' specialist services provided by the prison including mental health, physiotherapy and substance misuse.

All healthcare staff are trained in the use of SystemOne recording.

A number of positive steps to improve access and the quality of care were undertaken in the year, including:

- establishing links with the Primary Care Function Trust and a new initiative with the local hospital to improve the Primary Care Pathway
- introduction of 'Tele medicine' allowing remote access to GP, mental health and results service consultations
- the starting of Healthy Lifestyles and Sexual Health Clinics in January 2022.

Despite the efforts of staff to provide a good service, there were a significant number of complaints regarding healthcare. Where these concern an individual's treatment they are dealt with by Practice Plus, not the regular complaints system. We observed that many of these complaints were not dealt with fully within the required time frame. This was a frustration for many prisoners. Applications to us around health largely concerned two issues:

- appointments the prison is served by a single resident GP with other services (including dentistry and optician) met on a peripatetic basis. This inherently limits the availability of appointments (as it does outside prison), however a lack of escorting staff meant prisoners were often unable to attend scheduled appointments
- medication this appears to be taking longer to issue and supply issues caused medications to be issued especially late on Fridays.

Suspension of the in-house general pharmacy service which prisoners had used to order and purchase non-prescription medication (e.g. contact lens solutions) created difficulties for some prisoners. This was necessitated by a shortage of trained pharmacy staff.

#### 6.2 Physical Healthcare

In 2022, only 25% of prisoners were in the healthy BMI range. The number classified as overweight/obese rose to 76% from 70% in 2020 and 285 prisoners had a BMI over 30 – this is classed as putting their health at risk and needing to lose weight immediately.

Weighing scales have been located on each house block. Unfortunately, we observed that access to them - and to the healthy eating folder - is regularly not made available by the staff on many wings.

The Health Promotion Action Group provides a forum for a whole community strategy to promote health and wellbeing. Representatives from all departments and prisoners' health reps are invited to attend. We saw good attendance with most of the community represented and involved, apart from Learning and Skills and Equalities which was yet to participate.

#### 6.3 Mental Healthcare

A significant number of prisoners have mental health issues, some of which are complex and require long-term health interventions. Covid restrictions aggravated this, with mental health staff reporting a doubling in the number of referrals compared to pre-pandemic levels. Mental health is a significant factor in the level and risk of self-harm. Managing this risk and ensuring prisoners receive appropriate treatment is a significant challenge for the prison which, as discussed below, has become harder.

Frontline healthcare staff have mental health awareness training, and all health staff receive training on how to make a mental health referral and the use of validated assessment tools. Prisoners are encouraged and supported in continuing their medication. Those who have missed medication three times are flagged for attention. There is a plan to improve this system of reporting to make this system more robust and effective.

Throughout 2022 the provision of mental health services was severely constrained. The Mental Health Department was without a head between September 2021 and October 2022 and consistently understaffed. At the end of 2022, it had just four members against a full complement of nine. The absence of leadership and staffing shortages - combined with an increasing number of referrals - hindered full and timely service provision. Currently, the department is only able to provide emergency cover and attend initial ACCT reviews.

Further pressure has come from the arrival of prisoners with several and complex conditions and needs. These prisoners - previously assessed as requiring treatment in a specialist hospital – have been relocated back to normal prisons, including HMP loW. For the most part, these are prisoner patients who have 'not engaged' with hospital treatment or the regime.

This concerns us. These prisoners – who without treatment pose a risk to themselves and others – are being returned to be managed in a prison without the specialist facilities or treatments for their conditions. We have observed these prisoners in both IHU and (because of their behaviour) SARU. IHU is currently housing five mental health patients, three judged sufficiently dangerous to warrant a three man, at least, unlock protocol.

Prisoners requiring hospital admission under the Mental Health Act should be assessed and transferred within 14 days. In 2019 this was a key concern with none of the nine prisoners in question being transferred within the guidelines. This remains an issue.

#### 6.4 Social care

Close links between the prison's Equalities, Disability and Social Care Team, local authority social care providers and voluntary organisations is helping meet the substantive need for social care. Excellent support has been provided by AGE UK which has:

- promoted dementia awareness among relevant staff and peer workers
- directly supported a prisoner with dementia and provided £100 for each person with dementia
- assisted in establishing a dementia friendly cell in IHU.

#### 6.5 Exercise regime

For the first eight months of 2022 Covid restrictions and staff shortages hindered the prison's ability to offer the exercise opportunities it would normally expect to provide. Prisoners were mostly limited to exercising outside in limited cohorts for up to one hour each day. When Covid restrictions and staffing permitted gyms on both sites opened on a rota of cohorts. On these occasions - and when PEIs were supervising or gym orderlies were part of the cohort - advice and guided general fitness group activities were provided.

From September targeted activities were gradually reintroduced, including provision for specific groups with special needs. The Dementia Café afternoons for the more elderly, drug rehabilitation exercise, Walk Your Way to Health and Remedial Gym also resumed in December. These are welcome developments. The Physical Exercise department also provides a comprehensive range of suitable activities for the retired population.

Both gyms are well equipped and well used. In terms of outside exercise, Parkhurst has no outside provision for sports. While this exists in Albany the site is unkempt. Outside general-purpose exercise yards on both sites are bare and uninviting for exercising generally. Some – but not all - had a few permanent fixed exercise

equipment pieces installed in August. The rest of the yard is mainly used for walking around or sitting on the benches.

## 6.6 Drug and alcohol rehabilitation

HMIP's recent inspection reported a reduction in the number of prisoners saying it was easy to get illicit drugs - down to 26% compared to 42% at the last inspection. However, without consistent random mandatory drug testing, accurately assessing the level of drug use is difficult. We note that just four intelligence-led drug tests were undertaken in 2022.

A drug strategy is in place with a multi-disciplinary approach to drug misuse and its effects. The relationship between Healthcare, Mental Health and DARTS is effective with collaboration at all levels and on all aspects. Monthly drug strategy meetings focussed on identifying underlying issues and solutions are scheduled, however, we note these did not regularly take place towards the end of the year.

Drug and Alcohol Recovery Team (DARTS) services were restored following relaxation of Covid restrictions. DARTs staff attend ACCTs, GOOD reviews and one-to-one meetings.

## 7. Progression and resettlement

#### 7.1 Education, Library

#### 7.1.1 Education

Of the 362 prisoners whose literacy was assessed - 43% had functional skills in English at Level 1 or Level 2; 53% are at Entry Level and 4% at Pre-Entry with extremely limited or no ability to read or write.

All Entry Level prisoners should be receiving lessons. This equates to around 580 prisoners. However, Entry Level English is currently offered to just eight to ten prisoners on each site for just a few months. English is currently offered up to L2. Our observation of classes and discussions with participants showed high engagement levels, progress was good and there was a clear beneficial impact on feelings of self-worth. The quality of the teaching was high but needs to be accessible to more prisoners and far sooner in their sentence.

Meeting Ofsted's recommendations will require a major expansion in the reach of classes, and that the number of sessions would need to be increased. This would require more tutors, larger classes (possibly some run by peer mentors under guidance). It would also require creative thinking as to where larger classes could take place and their timetabling. Currently lessons last two and a half hours to suit the ongoing regime - this is too long for prisoners with low ability levels.

The Shannon Trust provides valuable support for Pre-Entry literacy. In December 2022, 69 prisoners in Albany had requested this support which is driven by a proactive prisoner coordinator with sufficient prisoner volunteers to meet demand. However, staffing issues meant that volunteer requests to be unlocked to carry out their work were often refused. Shannon Trust mentors also noted to us a need for the importance of these sessions to be recognised by all staff. There are many books suitable for beginner / low level readers in the library which are currently not accessed. Fundamentally, a new approach is required to ensure that the many prisoners with poor reading and literacy skills receive the support and education they need.

At the start of 2022, continuing Covid restrictions prevented face-to-face education. The Education Department, however continued to offer opportunities through distraction packs, telephone sessions and distance learning with coursework delivered to wings and collected for marking.

Between January and August, face-to face classes resumed, although constrained by the periodic re-introduction of Covid restrictions and staff availability. In August, class sizes for functional skills (maths, English and English for speakers of other languages) returned to pre-Covid levels. By August 123 prisoners were registered for education – around 15% of the prison population. This includes students on a "Complex Needs" course providing structured learning for prisoners with learning difficulties.

City & Guilds examinations resumed in January with exams taken in the prison and scripts marked externally – 13 prisoners received qualifications. Examinations are offered "on demand", i.e. when prisoners attain a sufficient level of competence rather than at set dates. On-line examinations will soon be introduced eliminating the need for external marking.

The increase in the number of Category C prisoners presents particular issues. They have the same education entitlement as Category B prisoners, but education should be focused on resettlement rather than a "career in custody". However, as many have significant periods left to serve, their education should emphasise functional, rather than vocational skills which might be lost by the time of release. Should the prison continue holding a large number of Category C prisoners, planning and delivery of courses for them, including in literacy, will need to be developed.

The training of Information, Advice and Guidance (IAG) mentors is a positive development. Most wings now have had an IAG mentor with more being trained. Mentors are allowed to be unlocked during the core day to answer queries, produce personal learner plans, give information about education and vocational opportunities and signpost prisoners to the appropriate department for their needs. IAG mentors take part in induction sessions.

#### 7.1.2 Library

Lack of library access remained a major concern. With relaxation of the regime the Governor initially committed to reinstating in person library visits for all prisoners. However, shortages of wing staff meant that - apart from a few sessions in September or when instructors brought prisoners during work sessions – the Library remained closed.

Prisoners could still order and borrow books, using the system developed during Covid restriction with books delivered to the wing by library staff. But they were unable to browse. This is a significant problem for prisoners wanting to use the library to progress their learning and in accessing legal reference books. We had many complaints about this.

## 7.2 Vocational training and work

At the start of 2022 Covid restrictions continued to limit work opportunities in workshops due to occupancy limitations. We regularly observed instructors alone, or with a few in workshops carrying out orders. Waste Management and DHL were generally exempted given their importance for the functioning of the prison. Lack of activity (although pay continued) upset some prisoners who expected life inside would mirror that outside.

By May, most workshops began receiving more prisoners. However, relatively few prisoners registered for work were attending. Our check on 8 June showed that only 69 of 250 (28%) of those listed for work were attending. Discussions with instructors

suggest confusion about what was permissible under the regime in terms of mixing cohorts lay behind this.

The final relaxation of Covid restrictions in August/September should have seen a return to more normal numbers attending work. While numbers did increase, access to work remained limited due to shortages of instructors and/or wing staff to perform escort duties. This frustrated many prisoners.

The arrival of more Category C prisoners during the year created an additional challenge beyond those examined above. Newly arriving Category C prisoners were often frustrated at the lack of immediate access to work, particularly when they saw Category B prisoners working.

## 7.3 Offender Management, Progression

The Offender Management Unit (OMU) experienced severe staff shortages during 2022. At the end of the year, OMU was operating with:

- 2 Senior Probation Officers against an establishment requirement of 2.5
- 6.5 Prison Offender Managers (POMs) against an establishment requirement of 16.5
- 2 HMP Prison Offender Managers against an establishment of 4.

The ratio of POMs to prisoners should be 1 to 50-60 prisoners. In 2022 that ratio was 1 to 140 prisoners, resulting in:

- delays in the preparation of Parole Reports (could also have been affected by external agencies being unable to process the report on time).
- delays in the transfer of Category C prisoners (could also have been impacted by national directives and constraints due to population pressures).
- a reduction in POMs regular contact with prisoners leading to a sharp increase in Comp 1 complaints relating to Sentence Planning.

OMU is also responsible for sentence calculations. However, only three team members licensed to practise sentence calculations Consequently, this workload was distributed amongst relatively few people and this important function was left vulnerable to staff absence or departure.

During 2022, 32 Programmes Needs Assessments were completed, and the following courses offered:

Horizon – 15 starts with 14 completions

- Kaizen 18 starts with six completions
- Becoming New Me 10 starts with five completions
- Healthy Sex Programme 4 starts with two completions
- Motivation and Engagement 3 starts with three completions
- Foundation with 10 starts with nine completions

Programmes were delivered by 17 Programme Facilitators, drawn from across the Psychology and Programmes Department. We note that throughout the year the department operated with just four qualified psychologists working in Programmes against an establishment figure of nine.

As a response to Covid, group delivery of courses was halted and replaced with one-to-one sessions. Staffing shortages (particularly of officers to escort prisoners to sessions) meant this practice continued. Ostensibly this limited prisoner's access to programmes, but its impact on parole applications was mitigated by prioritising Programme Needs Assessments (and programmes) for those with a parole hearings due within the next three years. Steps to re-establish groups sessions are being taken. Unfortunately, the arrival of a significant number of category C prisoners - many of whom are relatively close to their release date - has pushed back the date when programmes can start for Category B prisoners already in the establishment. This is a cause of frustration for a number of prisoners.

#### 7.4 Family contact

Face to face visits resumed in 2022 although numbers were well below pre-Covid levels. The prison's location makes visits difficult. Many prisoners consequently chose to continue with video link "purple visits". Early difficulties in terms of connection drop-outs - mainly for calls outside the UK – appear to have been resolved with updated equipment.

The Visitors Area outside the prison provides a place for visitors to spend time if they arrive early providing light refreshments and toys for young children. The refurbishment of the Albany visits area was welcome.

#### 7.5 Resettlement planning

At the end of 2022, 61 prisoners were within two years of their release date. Following the launch of the Offender Management in the Community (OMIC) programme in October 2019, Community Offender Managers (COM) are responsible for preparing a release, risk management and resettlement plan. As HMP IOW is a training, not a resettlement prison, resettlement needs would not normally be addressed until the prisoner is within six months of release date.

## The work of the IMB

The IMB maintained a physical presence in the establishment throughout the year, making a total of 552 visits. Members have regularly observed important process including segregation reviews, adjudications, ACCT reviews and wider prison management meetings, including those dealing with safety, health care, equalities and residential issues. They have enjoyed unrestricted access to the prison, prisoners and staff including senior management. We acknowledge this with appreciation.

At the end of 2022 the board comprised nine members (including one who also acts as a Regional Representative) against a full approved quota of 17. In the course of the year, three new members were recruited.

Board members dealt with a total of 463 applications compared to 336 in 2021 – a 38% increase. Some of this increase can be attributed to the higher population. However – and a basic examination of the subject' making up the applications supports this assessment – a large proportion of the increased number of applications has probably been driven by the unfilled expectations of arriving Category C prisoners.

#### **Board statistics**

Recommended complement of Board members	17
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	12
Total number of visits to the establishment	552
Total number of shifts on the 0800 telephone line*	13
Total number of segregation reviews attended	52

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

Code	Subject	Previous reporting year	Current reporting year
А	Accommodation, including laundry, clothing, ablutions	10	62
В	Discipline, including adjudications, IEP, sanctions	2	6
С	Equality	8	13
D	Purposeful activity, including education, work, training, library, regime, time out of cell	11	29
E1	Letters, visits, telephones, public protection restrictions	28	29
E2	Finance, including pay, private monies, spends	20	11
F	Food and kitchens	4	11
G	Health, including physical, mental, social care	38	54
H1	Property within this establishment	13	24
H2	Property during transfer or in another establishment or location	17	13
H3	Canteen, facility list, catalogue(s)	14	3
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	20	42
J	Staff/prisoner concerns, including bullying	53	62
K	Transfers	10	44
L	Miscellaneous, including complaints system	57	66
	Total number of applications	336	463



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