



Annual Report of the Independent Monitoring Board at HMP/YOI Peterborough (Women)

**For reporting year
01 April 2022 – 31 March 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 IMB is part of the United Kingdom's National Preventive Mechanism.

2. Description of the establishment

Her Majesty's Prison (HMP) and Young Offenders Institution (YOI) Peterborough is a private prison on a brownfield site in the city centre, made up of two separate establishments, one for women and one for men, which share the same staff and management. It opened in March 2005 and is run by Sodexo Justice Services under contract to the Ministry of Justice. There is a performance delivery unit headed by a manager reporting to the Director, which tracks the contractor's adherence to the terms of the contract and also the actions arising from HM Inspectorate of Prisons inspections, Prisons and Probation Ombudsman investigations, audits and reviews. There is also a controller team on site employed by HM Prison and Probation Service (HMPPS), which monitors the contractor's performance on behalf of the Ministry of Justice.

HMP/YOI Peterborough women's prison serves the east midlands, east of England and Essex. The operating capacity is 372. There are two modern house blocks containing 10 wings including a young adults unit for women aged 18–25, a life and long sentence unit and a foreign national unit for prisoners awaiting deportation. There is also a 12-bed, 13-cot mother and baby unit (MBU). Facilities include classrooms, workshops, a gym, a chapel, library and gardens.

Each wing has an electronic kiosk on which prisoners may for example order their meals, book visits and appointments, communicate with prison departments and review their finances.

The prison manages its staff recruitment and training needs locally. Recruitment has continued through the reporting year.

3. Key points

3.1 Main findings

The Board has found HMP Peterborough to be generally well led and managed. The regime is disciplined, structured and fair. Prisoners have been observed to be treated with respect, care and compassion. The Board is very concerned at the number of prisoners showing extreme symptoms of mental illness.

Safety

There has been a maintained focus on safety, with much improved multi-disciplinary working (paragraph 4.2.2). The Board commends the vigilance and compassion demonstrated by the staff of the Healthcare Unit in maintaining the safety of women with prolific self harming behaviour (paragraph 4.2.1). There has been an increase in prisoner assaults on both staff and other prisoners; however the Board notes that these have not risen to the levels seen before Covid-19 (paragraph 4.3.1). There has been a welcome decrease in positive results from mandatory drug tests (paragraph 4.5.1).

Fair and humane treatment

Accommodation and facilities are generally good, as is food and canteen (paragraph 5.1). Segregation is well managed (paragraph 5.2). Prisoners' relationships with staff have been observed to be good in the main, though there are some concerns with keywork, which is meant to provide certain groups of prisoners with support from a nominated individual member of staff (paragraph 5.3). Few diversity and inclusion concerns have been raised (paragraph 5.4).

Health and wellbeing

Health services are generally on-par with the community. Delivery is via several different contracts, with too often are poorly integrated (paragraph 6.1.1). Prisoners are often critical of health services; when the Board investigated it was found that communication about health matters was weak, which led to misunderstandings and unrealistic expectations (paragraph 6.1.2).

The Board is extremely concerned about the number of prisoners who have been sent to HMP Peterborough while showing symptoms of severe mental illness (paragraph 6.3.2). If these individuals, as should be the case, had been diverted from court and Sectioned for assessment, their treatment would have been considerably more humane than a prison can provide. The prison management and staff have been observed to have done their absolute best, despite the toll that constant observation and forceful intervention has taken on officers.

Progression and resettlement

Education attendance has increased post-Covid-19, and special educational needs (SEND) are now well embedded (paragraph 7.1.2). Work attendance is inconsistent, and the prison is reviewing the offering to improve future employability. The offender management unit has experienced staff but has prioritised public protection and safeguarding work; however there have been delays to consideration of Home Detention Curfew (HDC) and Release on Temporary Licence (ROTL) applications.

Priority is given to maintaining family links (paragraph 7.4) and resettling prisoners into accommodation (paragraph 7.5.5).

3.2 Main areas for development

TO THE MINISTER

Can the Minister work with the Department of Health and Social Care to ensure women with serious mental health issues in the criminal justice system are directed to an appropriate pathway?

Can the Minister take action to prevent prisons being deemed a place of safety for women with serious mental health issues?

TO THE PRISON SERVICE

What steps is the Service taking to ensure that the Probation Service is adequately staffed, especially in respect of Community Offender Managers?

TO THE DIRECTOR

Can the Director take steps to ensure women's regime is not curtailed because of staff shortages?

Can the Director continue to focus on embedding quality key work?

3.3 Response to last report

Issue raised	Response given	Progress
Minister The Board remains concerned at the number of women serving very short sentences.	Additional funding for community based support services (£24 million over 3 years). New Problem-Solving Courts Making the female estate more trauma informed.	Limited availability in local area. Problem-Solving Courts not yet implemented in this region.
Prison Service Board is concerned that the handover from Community Rehabilitation Companies (CRCs) to the National Probation Service (NPS) left gaps in provision of resettlement services, and that NPS will be restricting their activities further. The Board would expect to see the full range of resettlement support provided.	Providers of Accommodation services contracted. Development of Finance, Benefit and Debt service. Pre-Release teams embedded in all resettlement prisons.	In progress.

<p>Director</p> <p>The Board would like to see the restitution of a robust key work system whereby women are aware of this support and know their assigned key worker.</p> <p>The Board would like to see further progress on adapting the prison's regime and practice to suit the needs of women better.</p>	<p>Post Covid-19 priority to improve both coverage and quality of key work.</p> <p>A Deputy Director has been appointed to each prison so that management focus is equivalent in each.</p>	<p>Coverage improved and refresher training delivered to key workers. Further work needed to embed.</p>
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Evidence sections 4 – 7

4. Safety

The prison has continued to keep safety as a strategic priority and has maintained the required investment in time and resources, as shown in the implementation of the new format of multi-disciplinary Safety Interventions Meeting (SIM). This has been effective at bringing more of a “team” approach to managing individuals and the Board sees this as a positive step forward.

The continued development of safety in the women’s prison, considering the specific needs of female prisoners rather than the one prison model used previously is welcomed.

4.1 Reception and induction

4.1.1 The Board has observed that reception processes continue to run smoothly despite increases in the prison population.

4.1.2 Full body searches take place only when authorised by management on the basis of intelligence. There is currently no legal framework under which a body scanner may be used for women.

4.1.3 Prisoners can be left without their prescribed medications for days and in some cases weeks without discussion or communication. This arises because the reception/medical team can be late processing prescribed medication that comes in with prisoners either when new to custody, transferring to the prison, returning from medical appointments or on recall. Prisoners then have to find help to resolve the problem through their key worker, wing officers and via applications (written representations from prisoners) to the Board. Missing medication or delays in receiving it is a factor in prisoners threatening to self-harm and self-harming.

4.1.5 The reception area and the early days in custody (EDIC) wing have a good supply of clothing for women to choose from although the Board has noted that there is not always sufficient smaller/petite size clothing available. Prisoners may therefore have to wear oversized clothing, which is not good for self-esteem and well-being.

4.1.6 Written materials are displayed and, in some cases, available for prisoners in foreign languages which the Board would like to see extended further. The benefit to prisoner safety and the ability to settle into prison life quickly should reduce prisoners’ chances of anxiety and potential for self-harm.

4.2 Suicide and self-harm, deaths in custody

4.2.1 The Board has noted a decrease in the number of self-harm incidents for another year which is positive and may reflect prisoners feeling less stressed as the Covid-19 pandemic recedes.

	2022/23 Post-Covid-19	2021/22 Covid-19	2020/21 Covid-19	2019/20 Pre- Covid-19
No. Incidents of Self Harm	2,882* <i>Of which 2,559, 90.2% were by prolific self harmers</i> ↑150% on previous year	1,154 ↑14% on previous year	1,014 ↓39% on previous year	1,676
UoF to prevent incidents of Self Harm	216 ↑184% on previous year	76 ↑61% on previous year	47 ↓33% on previous year	71

* The arrival of one particularly prolific self-harmer in the second quarter of the reporting period skewed results dramatically, and the Board noted that this prisoner's behaviour affected the self-harming rates of other prisoners held in the Female Healthcare Unit negatively. The prisoner in question was transferred to a different setting around the end of the reporting year. The Board acknowledges the great care, compassion and patience shown by the staff in the Healthcare Unit during a long and very stressful period with constant observations ongoing for many months. The Female Healthcare Unit has now returned to a calmer environment following her transfer, and the Board expects to see a significant reduction in self-harm statistics for 2023/24. The Board notes that the introduction of cuffs has led to an increase in recorded use of force.

4.2.2 In the latter half of this reporting period the prison refined its approach to the management of safety, and it has initiated a new weekly Safety Interventions Meeting which:

- now requires those involved to attend in person, and not by remote access
- reviews progress in the management of individuals at risk of self-harm, taking into account input from the mental health teams and the resident psychologist
- reviews potentially violent prisoners who have been put on Challenge, Support and Intervention (CSIP) plans

The Board views this new meeting, and the case management disciplines associated with it, as a positive development.

4.2.3 The Board has continued to monitor the assessment, care in custody and teamwork framework (ACCT) which have been observed to be fairly managed. The appointment of a forensic psychologist has also added to this process for those with complex needs and they are a good addition to the process where needed. The

Safer Custody Team and peer support workers continue to offer strong support for self-harmers through discussion and offering distraction items. Management's focus on peer support resourcing in recent months should result in greater support in the next reporting period. The Board has observed that there continues to be no hesitation to place a woman on constant watch if necessary.

4.2.4 There was 1 death in custody in February 2023 for which the inquest report is still awaited.

4.2.5 The Board has noted raised levels of anxiety and both the potential for and actual self-harm as a result as previously stated in the report due to prisoners waiting excessively long periods for prescribed medication to follow them when they enter the prison system or return from medical appointments.

4.3 Violence and violence reduction, self-isolation

4.3.1

	2022/23 Post-Covid-19	2021/22 Covid-19	2020/21 Covid-19	2019/20 Pre-Covid-19
Prisoner-on-prisoner assaults	23 ↓21% on previous year	29 – 1 serious ↓3% on previous year	30 – 2 serious ↓58% on previous year	71 - 2 serious
Prisoner-on-prisoner fights	21 ↑61% on previous year	13 serious ↑44% On previous year	9 serious ↓65% On previous year	26
Prisoner-on-staff assaults	65 ↑51% on previous year	43 – 3 serious ↓23% On previous year	56 – 3 serious ↓52% On previous year	117 – 17 serious
Use of Force by staff to maintain good order.	270 ↑13% On previous year	238 ↓15% On previous year	279	

Use of force to maintain good order covers action to prevent:

- Fights, and assaults on staff/prisoner
- Damage to prison property and cell fires
- Incidents at height
- Threatening and abusive towards staff/prisoner
- Attempted assaults on staff/prisoner
- Attempts to escape, or obstruct an officer
- Attempts to conceal contraband, or gain access to an unauthorised area
- Action to enforce lawful orders

4.3.2 Segregation continues to be used for bad behaviour and the good order of the prison. Increased focus on key-worker interaction with prisoners, while not a perfect has seen an overall improvement in the numbers of prisoners being located in the Separation and Care Unit. The trend has continued into the present reporting period.

	2022/23	2022/21
Average number of prisoners in Sep & Care per week.	5.1	5.3

4.3.3 The continued use of CSIPs to manage the behaviour of violent individuals is seen as beneficial and while CSIP reviews have been observed during the reporting period, they continue not to receive enough attention by the Board due to difficulties in knowing when they are occurring to be able to attend.

4.4 Use of force

4.4.1 It is encouraging that while the prison has returned to more familiar pre-Covid-19 regimes, the use of force for the good order of the prison continues to decrease year on year. Added to that the recent introduction by the prison of a weekly review by a senior member of staff of all uses of force ensures staff involved receive feedback on their approach, technique and efficacy in their use of force. Full debrief for all uses of force continue to take place and those actions monitored by the IMB have been clear and well-run.

4.5 Preventing illicit items

4.5.1 Mandatory drug testing was re-introduced post-Covid-19 and results are relatively encouraging, with the most recent figures showing failure rates at less than 10%.

4.5.2 “Traditional” drugs such as cocaine are the prevalent type of drugs detected. To reduce the levels of psychoactive drugs such as spice the prison has now implemented a policy where all photographs and cards for prisoners must come from third-party external providers such as Vistaprint, Photobox or Moonpig yet there is still a problem with drugs coming into prison via passes during visits and counterfeit legal mail. Specialist search dogs continue to be used on mail items and at visits to minimise the drug traffic into the prison.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 General maintenance of the fabric of the buildings continues unhindered following the cessation of Covid-19 countermeasures. In addition, littering in communal areas raised in the previous report has significantly reduced due to face masks no longer being used. The Board is however concerned that several key items of kitchen equipment are unserviceable; this can mean that at times there is significant strain on the kitchen to produce a full menu. The Board has been assured that there is a plan to address this.

5.1.2 Climate control continues to be a concern when the prevailing weather is hot or cold, with inadequate fan provision in the summer and heating issues arising from the boiler in the winter.

5.1.3 Cells continued to have name cards identifying the occupying prisoners, and for those it applies to, the correct personal emergency evacuation plan (PEEP) labelling. However, the Board is concerned that on some occasions the officers on duty did not know how to locate the PEEP plans for the wing. All areas are accessible by wheelchair users.

5.1.4 All prisoners may wear their own clothes and are allowed to have periodic deliveries of additional clothing into the prison, with additional deliveries granted for those prisoners on the enhanced level of the incentives scheme. The Peabees facility continues to provide a service where female prisoners can purchase additional clothing, and a project is in hand to expand the product range to include skincare and haircare products suitable for black, Asian and minority ethnic women.

5.1.5 From Board observations, the food continues to be received on time, meals remain fit for consumption, and servery workers wear appropriate attire during meal service. However, the Board does continue to receive verbal complaints that food is bland and “stodgy”, with requests for more salads and fruit.

5.2 Segregation

5.2.1 The female separation and care unit (FSCU) has 12 cells with a maximum occupancy of 8 at any one time, plus 1 special cell which was not used this reporting year. Women were placed in the unit on 112 occasions compared with 124 last year, with prison rule 45 (being segregated for good order or discipline, or own protection) being used to medically isolate women on normal location 14 times. On 7 occasions women were held beyond 42 days. In addition, there were 21 frequent returners to the unit who demonstrated challenging behaviour. This number shows an increase of 5 over the previous year but the number of dirty protests reduced from 14 to 2. Many of these frequent returners were among the 22 women held on ACCT books.

5.2.2 The Board made every effort to attend as many of the 213 prison rule 45 segregation reviews as possible, although initially notification of the reviews was unreliable; this has since improved since, as far as possible, they are now at a fixed time. The Board also monitored some of the 690 adjudications that took place, of which 188 were not proceeded with. The Board’s general perception was that all

reviews and adjudications were conducted in an appropriate and fair manner with prisoners given every opportunity to offer their voice.

5.2.3 Overall, the Board had no adverse observations to make about the FSCU and considered that many of the staff performed in an exemplary manner in challenging circumstances. It was noted however that staff morale did suffer during a protracted change of leadership in the unit.

5.3 Staff and prisoner relationships, key workers

5.3.1 The key worker allocation and contact has, since the resumption of a normal regime post pandemic, been less than expected. The allocation process works well averaging above 90% and wing staff are assigned as key workers for their prisoners on their respective wings, with senior officers assigned to complex cases. Contacts with prisoners are recorded weekly. From April to September 2022 the weekly average compliance sessions set against target population was 93%. From October 2022 to the beginning of March 2023 this decreased to an average of 58.6% with a noticeable decline in early 2023.

5.3.2 Some prisoners are unaware of the key worker system and its benefits. The time allocated to staff to perform their key worker tasks and complete the necessary documentation on each prisoner is not always sufficient. The Director has now instituted more robust training measures for staff, to ensure key work sessions included rehabilitation topics not merely welfare checks.

5.3.3 The Board generally observes positive relationships between staff and prisoners. The Board particularly highlights the way that complex needs are managed, and adjudications and segregation reviews are dealt with in an open and engaging manner. The Board welcomes the increased management focus on officers' conduct and the refreshed approach to diversity and inclusion in this context, because these efforts help to spread a culture that is more likely to facilitate resettlement.

5.4 Equality and diversity

5.4.1 A permanent Diversity and Inclusion (D&I) manager was appointed in January 2023 following a period of temporary or no post holders, and the framework of monitoring and reporting has been restored since then. The bi-monthly D&I meetings and Decency meetings, senior management sponsors and prisoner focus groups for the 9 protected characteristics are once again in place. There is an actively managed Equality Plan. Some instances of possible disproportionality have been highlighted and are being investigated further.

5.4.2 As of March 2023, there were 54 foreign national (FN) prisoners. All had been seen within 3 days of arrival by a dedicated Foreign National Manager or Immigration Officer. During the year 28 FN women were deported. In reception and the induction workshop written information is available for FN prisoners in 8 languages. Officers and staff have full access to a telephone Interpretation service. Sometimes, staff or residents who are fluent in the relevant language are called upon also, although staff are encouraged to use the telephone service when possible.

Within the library there is also an international book section, although the choice is very limited.

5.4.3 There was a total of 29 discrimination incident reporting forms (DIRFs) raised by prisoners during the reporting year, of which 85% were assessed within the permitted timescale. The D&I manager has been observed to ensure forms are available on each wing. There are 2 diversity representative peer workers, who attend all the prisoner focus groups.

5.4.4 The canteen list offers personal care and dietary products for most needs. The D&I manager has also arranged for specialist hair and skin products to be available via Peabees (paragraph 5.1.4). The kitchen offers appropriate choices for different cultural needs.

5.4.5 There is a programme of celebratory and awareness events, with most religious festivals recognised as well as for example LGBT history week, Holocaust Memorial Day, International Women's week and Black History month.

5.4.6 The SEND team has been expanded and one practitioner is also included in the Safer Custody team. Assessment during induction is now routine, and the team prepares and distributes briefings for staff on individual prisoners when appropriate.

5.4.7 The prison is accessible to disabled women, with adequate lifts available for those in wheelchairs. A limited number of adapted cells and equipment are available for prisoner use, however an increase in elderly and disabled prisoners would stretch resources. Blankets, special chairs, and mattresses are readily available.

5.4.8 The Board notes there is good support for transgender prisoners, who have individual care plans, and considers that transgender prisoners are treated fairly and with decency.

5.5 Faith and pastoral support

5.5.1 The faith needs of prisoners are met by representatives of 11 beliefs including Paganism which was unrepresented for a period. During that period, the Managing Chaplain tried to meet the faith needs of Pagan prisoners as far as was possible. As Covid-19 restrictions were lifted, services resumed with no observed problems with attendance. The chaplaincy is visible within the prison and enjoys a good relationship with the prisoners. The occasional problem with Ramadan food provision was quickly resolved. Bereavement support was provided whenever necessary.

5.6 Incentives schemes

5.6.1 The last 12 months have seen full resumption of an incentive scheme in line with national instructions. The Board continues to receive applications concerning staff behaviour and incentive scheme awards, which often relates to incentive scheme awards being upheld when appealed.

5.7 Complaints

5.7.1 The prison received a total of 659 complaints in the reporting year. This represented a 51% reduction over the previous year, with 83% responded to within

the required timescale. The most significant areas complained about were staff ((15%), property (12.8%) wing issues (9.8%) and canteen (7.2%). There were also 156 healthcare complaints, which were completed 95% on time.

5.8 Property

5.8.1 The Board received 21 applications in the reporting year, 17 related to property issues within HMP Peterborough and 4 concerning property not transferred from elsewhere in the HMP estate or police custody.

5.8.2 Some issues at HMP Peterborough relate to requests to access stored property. Property records are stored on cards, and as noted in our previous report an electronic system would have the advantage of greater protection from loss or damage and be fully auditable. It remains the case that prisoners may request a log number to register for property to be sent in by family or friends every six months (three for those prisoners with enhanced incentive scheme status). There continue to be instances of items delivered to the prison going missing between the gatehouse, the property store and the wing.

5.8.3 The prison has not paid compensation for lost or damaged property this reporting year.

5.8.4 The Board received 9 applications relating to canteen, concerning either partial or non-fulfilment of canteen orders, or concerns over the quality and price of the products offered.

6. Health and wellbeing

6.1 Healthcare general

6.1.1 Healthcare services are observed to be delivered professionally, efficiently and in a caring manner, and are generally on-par with what is available in the community. However, services are provided under several different contracts. These organisations have not shown themselves to always work well together; for example, the Board has observed failure to share data or attend coordination or casework meetings. The approach to patient complaints is inconsistent, and not all complaints are monitored. From April 2023 most NHS services will be provided by one NHS Trust in partnership with the prison who will provide custodial management of outpatient appointments and the inpatient unit. It is hoped this will allow a marked improvement in coordination.

6.1.2 The Board undertook an informal survey regarding prisoner beliefs about healthcare, which showed a strong general feeling that services were poor. The Board's monitoring indicated the service was adequate in most respects. The survey highlighted both a general lack of understanding about how to access services, and many instances of unrealistic expectations, for example a same-day face-to-face routine appointment with a GP. There is poor provision of information to prisoners; induction information is lacking, there is little provision of peer support, wing officers are unaware of process, and ongoing communication is minimal. The Board believes that improved communication with prisoners would have a beneficial effect on prisoner morale.

6.2 Physical healthcare

6.2.1 There have been some delays in hospital referrals post-Covid-19 and it has proven challenging to provide effective pharmacy services. This has contributed to the issues with previously prescribed medication at reception (paragraph 4.1.3).

6.3 Mental health

6.3.1 The prison has experienced concerning delays in arranging assessment and admission to hospital for the mentally unwell. There is also a perceived shortfall in psychiatric coverage.

6.3.2 The Board has very strong concerns about the provision of care for those prisoners who show extreme behaviours, and who are remanded or sentenced to custody (this may include those who may have been detained in prison as a place of safety by courts) rather than being diverted into appropriate healthcare provision such as treatment in hospital under the Mental Health Act. The prison has received prisoners who are suffering terribly, and must try to detain them humanely, with staff who have no mental health training. Although support is provided by mental health professionals on site, these lack the treatment options that would be available had these prisoners been Sectioned. The suffering the Board witnesses is inhumane. For example:

- Prisoners on constant 1:1 watch and still making serious attempts to harm themselves, with officers having to use significant force to prevent death or serious injury. Notwithstanding the effect on the prisoner, this takes a toll on

the officers. The Board acknowledges and is grateful for the dedicated care and compassion shown.

- Prisoners who show symptoms of psychosis who are in terror or paranoia about their situation, who scream and bang or foul their cells or refuse food or are violent. These prisoners often have a restricted regime or have to go to the segregation unit to control their violence or for their own protection.

6.3.2 The Board has observed the detrimental effect the presence of these patients sometimes has on the other prisoners in the healthcare unit, as their peace and ability to sleep at night is regularly disturbed.

6.4 Social care

6.4.1 The timely provision of appropriate carer support has improved during the year. There has also been an effort to ensure wing officers and others are aware of how to make a referral for assessment. Appropriate equipment is generally available. The Board notes that pre-release planning now better takes into account any social care needs.

6.5 Time out of cell, regime

6.5.1 Time out of cell for standard and enhanced prisoners averaged 7.48 hours daily. This reflects a shorter time early in the reporting year and some ongoing staff shortages requiring some curtailment of regime, particularly at weekends. The Board notes that the Healthcare Unit provides a limited regime beyond exercise in the open air.

6.6 Drug and alcohol rehabilitation

6.6.1 The Board notes that there were some issues with pharmacy delivery.

6.7 Soft skills

The prison has now restarted delivery of a number of programmes to address behaviour for example key living skills (Road to Success), thinking skills, recovering from trauma (Healing Trauma), True You, Positive Parenting and What are the Odds (gambling dependence support).

7. Progression and resettlement

7.1 Education, library

7.1.1 Education has gradually returned to normal this reporting year, although the education manager left during this time and his permanent replacement has not yet joined the prison. There were some tutor vacancies.

7.1.2 SEND capability is now embedded in all practice and the team has been expanded, which is reportedly appreciated by prisoners.

7.1.3 Induction is generally completed in a timely way, although there are concerns about privacy during the assessment. In general there is sufficient capacity, although there has been a waiting list for ESOL education. The Board notes that no health or social education was available in the gym for most of the reporting year.

7.1.4 Improving attendance has been a management priority and has been successful, with attendance at over 80% consistently for several months.

7.1.5 More peer support workers were being sought at the end of the reporting year, although Shannon Trust mentors are back up to full strength.

7.1.6 The library is well used, with popular activities including a reading club. However, this remains among the first aspects of regime closed when there are staff shortages.

7.2 Vocational training, work

7.2.1 The industries manager left part way through the reporting year and was not replaced for several months. Improving attendance has been a management priority; An Employment Advisory Board with a Chair from the local business community has been established to improve links with local employees and help to tailor the prison's work offering to their requirements. This has already led to the planning and development of a new workshop (go-kart repair and maintenance) which will be implemented in the next reporting year. The prison intends further development of more employment related options in cooperation with potential employers.

7.3 Offender management, progression

7.3.1 The Board has seen an increase of almost 40% in applications regarding sentence management and associated matters. Anecdotally prisoners are experiencing delays with completion of risk assessments for ROTL and HDC applications and for release, and the Board has been told this is largely due to delays in Community Offender Management (COM) input.

7.3.2 Assessments targeted at the 'most in need' were conducted for all prisoners who had been in prison 15 times or more, which included six women by the end of the reporting period. The numbers of assessments per month between January 2023 and end March 2023 was 5-10. The in-house programme specifically designed for the 'most in need' has not resumed.

7.3.3 Support for women who have experienced trauma related to issues such as trafficking, sexual abuse, sex work, and domestic violence is provided by peer workers and prison staff. Before any prisoner's release, a safeguarding plan is

implemented by the prison and all pertinent partner agencies are duly notified. By the end of the reporting year, the total caseload stood at 51. A group meeting takes place each week with good attendance.

7.3.4 Prison rehabilitation personnel assist homeless prisoners remanded into custody by aiding them in applying for bail, as suitable. This process is carried out in partnership with Nacro to secure appropriate housing. There were 28 bail applications: eleven were approved and seventeen turned down. Officers expressed some frustration at the risk aversion underpinning these numbers.

7.4 Family contact

7.4.1 Covid-19 restrictions were lifted during the year, greatly improving prisoners' ability to sustain contact with their families. Family day events resumed in October 2022. Social video calls remained popular throughout, although now that face-to-face visits are the norm, there are insufficient staff resources to process applications consistently and promptly. The Board has drawn this to management's attention.

7.4.2 The family matters team has continued to see all new arrivals throughout the year including any new arrivals under 25 who were in care prior to custody. The Link was used to see these prisoners, which is a designated space where prison and agency workers, together with Connexions peer staff, offer resettlement services. The team works with responsible authorities to identify a personal care adviser for each care leaver, enabling re-engagement and providing signposting.

7.4.3 It remains the case, however, that more appointments are missed because of short-staffing or cross-deployment of prison officers than would be ideal. The prison's management has accepted the importance of increasing the proportion of prisoner appointments that are fulfilled. While safety properly remains the overriding factor, the Board welcomes the increased attention being paid to this.

7.4.4 The 'restorative families' project which applied a form of structured mediation to try and build bridges between prisoners and families with whom relationships were strained has not re-started since Covid-19.

7.4.5 An ever-increasing number of prisoners have court orders of some kind prohibiting or constraining contact between the prisoner and his children, which can only be addressed by formal applications to the court. This obviously inhibits family contact and affects the male prison population more than the female one.

7.4.6 The Board received 21 applications (8% of the total) relating to letters, telephone calls, visits etc. There have been several occasions when postal delays have been a significant feature of the applications received by the Board, which can cause distress or frustration. This appears to be caused by staff shortages.

7.5 Resettlement planning

7.5.1 Prisoners have continued to meet with resettlement personnel face-to-face in the Link. The Probation Service has continued to manage its appointments over the phone, a method that continues to prolong the process.

7.5.2 Partner agencies maintained their supportive role on site, providing help in areas like securing accommodation. New ID and banking positions have been filled, helping prisoners acquire reliable identity documents and bank accounts to enable them to function normally once released.

7.5.3 Four Connections workers offer support in the Link and on the wings, including conducting exit surveys.

7.5.4 All new admissions undergo pre-custody screening assessments to ascertain their needs. The pre-release interview process for all medium and low-risk prisoners starts twelve weeks before their release. Those prisoners identified as having a higher risk come under the purview of the external COM, and for these individuals, the process starts fifteen weeks prior to release.

7.5.5 The prison maintains effective cooperation with specialist providers, probation teams, local authorities, and regional third-party housing agencies. However, securing ample post-release accommodation remains a significant challenge, with observed discrepancies between local data and probation records. Between May 2022 and end March 2023, of the 734 prisoners released, 523 (or 71%) secured accommodation, exceeding the target of 66%.

7.5.6 Community Probation Practitioners (CPP) in the East of England have the added advantage of referring women to the Community Accommodation Service Tier 3 (CAS3) program. This scheme provides furnished accommodation—either single occupancy or shared—for a maximum of 84 nights, allowing prisoners to continue collaborating with professionals to find suitable long-term housing. The initiative has seen significant success.

7.5.7 The total recalls during the final quarter of the year, from January to March 2022, amounted to 56.

7.5.8 The Outside Link facility continued to offer support to women upon their release. The services include probation assistance, guidance from external agencies, housing and benefit advice, in addition to practical aid like showers, hair care, and phone calls. The total number of drop-in sessions for both women and men has risen to 40-60 per day. New premises are being sourced by management as the unit has been given notice to quit at the end of August 2023.

8. The work of the IMB

Board statistics

Recommended complement of Board members	18
Number of Board members at the start of the reporting period	12
Number of Board members at the end of the reporting period	10
Total number of visits to the establishment	502

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	12	21
B	Discipline, including adjudications, incentives scheme, sanctions	4	0
C	Equality	15	5
D	Purposeful activity, including education, work, training, time out of cell	7	14
E1	Letters, visits, telephones, public protection, restrictions	23	21
E2	Finance, including pay, private monies, spends	6	19
F	Food and kitchens	3	2
G	Health, including physical, mental, social care	92	54
H1	Property within the establishment	29	17
H2	Property during transfer or in another facility	3	4
H3	Canteen, facility list, catalogues	10	9
I	Sentence management, including HDC, ROTL, parole, release dates, re-categorisation	15	24
J	Staff/prisoner concerns, including bullying	39	48
K	Transfers	0	4
L	Miscellaneous	4	24
	Total number of applications	262	266

Annex A Service Providers

Key services were provided during the reporting year as follows:

- Physical healthcare by Sodexo Justice Services, with the GP service contracted to Medco
- Primary mental healthcare services by Cambridgeshire and Peterborough NHS Foundation Trust.
- Secondary mental healthcare services by Northamptonshire Healthcare NHS Foundation Trust.
- Learning and skills provision by Sodexo Justice Services.
- Integrated substance misuse service by Northamptonshire Healthcare NHS Foundation Trust.

The prison has worked with the National Probation Service as provider of probation services, together with contracted service providers and volunteer organisations including the following:

- MIND (mental health support)
- St. Giles Trust (core resettlement to Cambridgeshire and Norwich)
- Changing Lives (core resettlement to Leicestershire)
- Advance Charity (core resettlement to Bedfordshire, Essex and Hertfordshire)
- Hibiscus (support for foreign national women)
- Alcoholics Anonymous
- Job Centre Plus
- Bail Accommodation and Support Services (BASS) (supported housing for those on HDC or bail)
- Shaw Trust (skills and employability support)
- Not Beyond Redemption (support for mother and child relationships)
- Reeds Solicitors (legal advice)
- Change Grow Live (CGL) Cambridgeshire (substance misuse, for prisoners from Cambridgeshire)
- Seetec (accommodation support for sentenced prisoners)

There are also a number of third sector organisations providing specific services locally.



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