



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

**For reporting year  
1 April 2022 – 31 March 2023**

**Published October 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.

## Section 2: Description of the establishment

### 2.1 Overview

HMP Preston is a predominantly Victorian radial prison, constructed between 1840 and 1895. It operates as a category B male reception prison, servicing courts across northwest of England. It holds male prisoners aged 18+ who have been remanded in custody, are awaiting trial, serving sentences of 12 months or less, or are awaiting transfer to another prison after sentencing. It is situated on a very confined site near to Preston city centre, and experiences all of the difficulties typical of this style and age of establishment. Its location, however, allows good transportation links for visitors.

### 2.2 Prison roll

The prison roll averages around 670 with an operational capacity (the maximum number of prisoners that can be held without risk to safety, security, good order and the proper running of the planned regime) of 680 against certified normal

accommodation (the number of prisoners a prison can hold without being crowded) of 433<sup>1</sup>. Being a local prison serving the courts requires the prison to release and/or transfer out approximately fifty prisoners per week in order to create spaces for those remanded to custody by the courts. This entails a consistent administration workload.

### **2.3 Prison facilities**

In addition to the core residential accommodation and prison facilities, the following are available to the prisoners:

- 30-bed healthcare centre with regional beds for northwest prisons.
- 28-bed recovery wing for those with addiction problems.
- dental surgery meeting current NHS guidelines.
- a well-stocked and managed library and a resettlement area.
- an education department which includes an IT centre with 48 computers and an art suite.
- well-equipped PE facilities inconveniently on three sites, but well managed and delivered.
- a textile workshop.
- a horticulture centre.
- a new laundry that allows prisoner's clothes to be laundered on a personal basis.

## **Section 3: Key points**

### **3.1 Background**

This year the prison has operated free from the Covid-19 restrictions and has tried to re-establish a more unrestricted regime. The regime has not been as unrestricted as before due to the lessons learnt from that period. During Covid-19 bullying and self-harm reduced, partly as a result of restricted association between prisoners. The intention has been to increase time out of cell and association, but in a controlled manner with purposeful activity to help maintain these improvements.

The recent pay rise given to the prison service has helped recruitment, particularly in the north of England. HMP Preston has been allowed to recruit staff above its target establishment level. The numbers recruited have varied through the year so there has been no constant level of over staffing. There have been times when there was a waiting period for the new recruits to be sent away for their training. During this period a number were cross deployed as operational support staff or administration staff in order not to lose them. This cross deployment and other factors lead the prison having a full time equivalent of +17 operational staff. However, with sickness and detached deployment of staff to other prisons accounting for an equivalent of 45 operational staff, this has led the prison to be effectively understaffed. The situation has been made worse by between 20 and 30 new staff being absent from the prison on their initial training at any one time.

This has resulted in not all functions in the prison running this year. Key workers have been drastically reduced, and the Time4Change (T4C) programme has had to stop. This will be referred to later in the report.

### **3.2 Main findings**

#### **Safety**

- Four deaths occurred in prison this reporting period. Three were apparently natural causes and one was apparently self-inflicted. All are subject to a Prison and Probation Office inquiry.
- Self-harm was the lowest in the past four years.
- Violence was slightly higher than the last couple of years due to more prisoner association following ending of lockdown due to Covid-19.
- The use of force had slightly reduced compared to last year, but had started to increase towards, the end of the reporting period.
- Illicit items were still entering the prison.

#### **Fair and humane treatment**

- Improvements to the showers has continued.
- The key worker programme was much reduced and that coupled with the closure of the T4C programme did not help the 18-24 age group cope with prison.
- The prison continues to pay more money in equipment rental for broken items in the kitchen than their replacement cost. That and the difficulty in repairing the food trolleys hinders the presentation of food.

## **Health and wellbeing**

- Mental health care is provided seven days a week.
- Half the prisoners are in work or education, meaning time out of cell far exceeds that during Covid-19.
- All prisoners are screened for drug and alcohol addiction on arrival. Those testing positive can apply for the Inside Out Programme, a psycho-educational group work programme.

## **Progression and resettlement**

- As a reception a large portion of education is presented in bite size courses to improve key skills level.
- AS a reception prison vocational training is limited to painting and decorating and industrial cleaning.
- The number of probation officers in the prison is well below the required number. This results in almost no face-to-face contact with the prisoners.
- Family contact is through social visits and specific family days.
- An employment hub is based in the library and is well attended by the prisoners.

### **3.3 Main areas for development**

#### ***TO THE MINISTER***

- The inadequacies of reception remain a concern. The purchase of the adjacent museum remains the only viable option to remedy to this situation, and to relocate the Offender Management Unit from its dilapidated temporary building.
- The property of prisoners is not always treated with the respect it deserves. Those prisoners who move about the prison estate do not necessarily have their property moved with them the same day. This leaves to prisoner's distress, and loss of property. More investment is needed particularly in the transport facilities.

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

- To adjust the prisons' budget, so that minor capital items could be purchased during the year to ensure that more money is not spent on hiring essential items than the cost of purchasing them.

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

- Time out of cell for those prisoners not in work or education should be increased.
- To provide more family engagement in preparation for prisoner's release.
- The key worker programme should be increased so as to operate at its designed level.

### 3.4 Response to Last report

Issues Raised	Response given	Progress
<p><b>Minister</b></p> <p>Preston is a well-run prison but valiant attempts to improve conditions in this Victorian edifice have only ameliorated conditions and regional investment has been piece-meal. HMP Preston requires a significant injection of funding. In particular major investment is required to purchase the county museum which forms the boundary to the prison. This would allow the totally inadequate space in reception to be resolved.</p>	<p>The relevant bodies have been working together to develop a medium- and long-term projects to improve the condition of the prison. These include the expansion and refurbishment of the reception area, and the replacement of the Offender Management Unit. Negotiations are continuing regarding the purchase or leasing the old museum adjacent to the prison, which forms one of the options for the above.</p>	
<p><b>Prison Service</b></p> <p>1. Prisons face a growing problem with shortage of administrative staff at bands 2 and 3. This leads to vital areas such as the administration of complaints, visits, prisoner's finances falling behind what is acceptable. The backlogs in these important areas directly impact on prisoner's welfare. The Board is informed that these particular administrative grades have low pay scales and poor working conditions. This need addressing at national level.</p> <p>2. Preston recently received a prisoner from HMP Kirkham who was subject under the imprisonment for public</p>	<p>1. The latest pay award for 2022/23 reflects a significant investment to uplift the prison pay. This along with exploring further flexible working aims to support recruitment.</p> <p>2. Whilst the main priority is to protect the community, HMPPS remains committed to doing all it can to support</p>	<p>1. The visits booking system has finally been moved to the national provider.</p> <p>2. In practice, not much appears to have changed.</p>

<p>protection order (IPP). He was sentenced over seventeen years ago. He was presumably being readied for release when he was sent to an open prison but was so institutionalised, he was unable to cope and his behaviour deteriorated. The IMB believe that we have reached a point where special arrangements should be introduced to assist the release planning of IPP prisoners who are way beyond their tariff dates.</p>	<p>prisoners serving IPP sentences</p>	
<p><b>Governor</b></p> <p>1.Backlog of Comp 1 forms needs addressing.</p> <p>2.In-cell technology is now available in some prisons. The provision of laptops to prisoners provides prisoners with a form of communication that greatly enhances their lives and dignity. The IMB are hoping for governor to ensure that HMP Preston is in the forefront of this bold new initiative.</p> <p>3. The use of laptops operated by OMU and Through the Gate staff, on the Wings, would also greatly improve and speed up prisoner assessments and sentence planning.</p>	<p>1.The Governor commissioned a formal review of the complaints process to ensure that the process is running as required by the PSI.</p> <p>2.This is a centrally funded initiative, similar to in cell telephony.</p> <p>3.This is under consideration by the Governor.</p>	<p>1.There is currently no backlog of complaints. QA checks completed and reported a reasonable response drafting with more work to do on procedural justice language.</p> <p>2.HMP Preston is awaiting further details on funding.</p>



<p>4. The waiting list for dental treatment has become excessive and this has become a barrier for prisoners receiving timely treatment for even serious and painful conditions.</p>	<p>4.The dentist waiting times are in line with those in the community.</p>	<p>4.The Governor is looking for improvements.</p>
<p>5. The prison should return to a full regime including education/occupational training/exercise</p>	<p>5.On the ending of the Covid-19 restrictions, HMP Preston tried to revert as quickly as possible to a regime similar to before Covid.</p>	<p>5.This aim was achieved quickly. In an inspection carried out by His Majesty's Inspector of Prisons (HMIP) after this reporting period this regime was complimented.</p>
<p>6. There should be integrated and improved resettlement service, including housing/financial advice/drug counselling/family liaison.</p>	<p>6.The Governor is hoping to recruit more Probation Officer posts so that the prison can improve the service.</p>	
<p>7. Cell should be improved and upgrade, including better toilet screening.</p>	<p>7.The clean, rehabilitative, enabling and decent(CRED) programme continues on A wing and is programmed to work through all cells in the prison.-</p>	<p>7.There is an establishment improvement plan in place to refurbish all of the residential accommodation and this is subject to budget considerations and budget approval by MOJ property services.</p>
<p>8. A return to qualification opportunities in horticulture and the gymnasium.</p>	<p>8.This was achieved this year.</p>	

## **Evidence sections 4 – 7**

### **4. Safety**

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

HMP Preston operates as a reception prison taking remand and convicted prisoners from both magistrates' and crown courts in the northwest of England. However, it regularly received prisoners from outside its designated catchment area from courts in Merseyside, Carlisle and Durham. This can delay the arrival of the last prisoner and it is a credit to the staff in reception and the first night centres that the prisoners are processed efficiently.

The physical layout of reception has been a concern of ours over a number of years and has been mentioned in previous reports. The introduction of the body scanner has been a welcomed addition in the fight against the bringing of contraband into prison, but has also reduced the usable footprint

The current situation in reception is a continuing concern.

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

There have been four deaths in custody this year. One was apparently self-inflicted and three were apparently of natural causes. Of the latter three, one died in Royal Preston Hospital and the other two died in the prison's regional hospital unit. One of these latter prisoners had been sent to the regional hospital from HMP Lancaster Farms because they could not offer the treatment required. All are the subject to a Prison and Probation Ombudsman's inquiry.

The prison offers support to the families of prisoners who die in prison, and prisoners who may have been affected. The prison also has an established network of support for staff who may have been affected by the death in custody.

The number of prisoners who self-harm generally runs at a maximum of 3% of the prison population. The main reasons given for self-harm include family issues, such as bereavement or family members not speaking to them because they are back in prison. Frustration also plays a part. Frustration of again being back in prison, of not having a job in prison and a feeling they are not being listened to and lack of support. They can also feel under threat from an impending sentence and transfer. The numbers of actual self-harm incidents this year has been the lowest in the last four years. In only two months have the figures been higher than the figures for the average figures for the comparator group of prisons. The exact reason can never be fully understood from figures for a single year, but a strong contender must be the ending of lockdown due to Covid-19.

The prison's first line of defence against self-harm is the assessment care in custody teamwork (ACCT) procedure. This is a procedure used to support prisoners who are, or who are thinking about self-harming. These prisoners are reported to the Safer Custody Team by any member of staff who has concerns about a prisoner. This is a dedicated team of officers who within an hour of being informed will initiate a meeting with the prisoner and agree a course of action with him. Within 24 hours a more detailed plan of support is developed. This can include mental health nurses and

family members. The prisoner will meet with his care team once a week to review his progress. In between these meetings the prisoner will have been monitored once an hour, or more frequently if thought necessary. In extreme cases a prisoner could be placed under constant watch. A total of 580 ACCT documents were opened this year with up to 35 being open at any one time.

This year a trial took place where new razor control measure were introduced. The prisoners had to request a razor when collecting their lunch. Prisoners would be given a razor at set times and collected again at set times. A log was kept and any prisoner not returning a razor was given an incentive scheme warning. As this was staff intensive it only ran for the first nine months of the year.

Prisoners also have access to Listeners. These are prisoners trained by the Samaritans to help prisoners who need someone to talk to and listen. Due to lack of training due to Covid-19 and the Samaritans not entering the prison the number of Listeners fell. The numbers are now steadily increasing.

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

The incidents of violence in this reporting period is slightly more than the two previous reporting periods. This is not surprising as those two periods covered the Covid lockdown. In the two years prior to lockdown the figures were slightly higher. The incidents of violence started relatively high, decreased and then rose to a high at the end of the reporting period. The main type of incidents was prisoner on prisoner assault, followed by assaults on staff. Prisoner on prisoner assaults have only been below the rates at Preston's comparator group of prisons for four months of the reporting year. The assaults on staff by prisoners has only been above the rate shown by Preston's comparator prisons for one month. The Board considers this shows a relatively good relationship between staff and prisoners.

Violence has observed to be influenced by the age of a prisoner. For eight months the 18-24 year olds have the largest number of violent incidents logged against them, even though they only represent psy% of the prison population. This is the only consistent disproportionalities in age, religion, ethnicity or race that cannot be explained by an extreme re-offender.

The main drivers of violence are retaliation escalating into violence. Arguing over loans of vapes, having items removed from cells and play fighting escalating into an assault. The debt caused by owing vapes is also an issue.

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

There has been a slight reduction in the use of force in this reporting period compared to the last one. The end of the reporting period, however, showed a steady increase. This was partly due to the disproportionality in the number of 18-24 year olds requiring force to be used upon themselves. When asked at a young person's forum to explain this situation, they said that they had the same issues as other prisoners: bullying, debt, gangs, but due their immaturity they had less skills to resolve the issues by talking. The severe reduction in the availability of key workers

and the suspension of the T4C programme in December has removed a support and guidance network for these young people.

HMP Preston has a comparable number of incidents as its comparator prisons and other local category B prisons. It has, however, a very low number of planned incidents.

There have been four complaints made by prisoners over the use of force. Three were investigated by the prison who decided that the complaints could not be substantiated. Due to the injuries sustained on the fourth incident, the prison referred the complaint to the police. The police inquiries concluded that the complaint could not be substantiated.

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

The prevention of illicit items primarily refers to drugs and mobile phones entering the prison. It can also refer to the trading or selling of medication in prison. To help prevent the latter, almost all cells now have a lockable medicine cabinet. The re-introduction of mandatory drug test has shown that the most popular drug used in prison is either new psychoactive substances (NPS) or cannabis. The choice reflects the relevant availability.

The introduction of the body scanner into reception has proved its worth with a regular stream of prisoners going straight from reception to the segregation unit, where they stay until they are shown to be clear of a concealed item. The netting on the exercise yards has been raised, so that prisoners are not able to reach any packages that having been thrown over, rest on the netting.

Photocopying prisoners mail and the “email a prisoner scheme” also reduces impregnated paper reaching prisoners. Mail, including unopened legal mail from solicitors, is regularly presented to the drug detection dogs. If the dogs give a positive indication, then the mail can be swabbed and the swab is inserted in an atomiser which will indicate whether or not drugs are present. If R39 mail is found to test positive, then this is recorded and the mail is then photocopied and the copy is given to the prisoner.

The atomiser in general is only used where intelligence reports indicate a suspicion of drugs.

Drones are now becoming an increasing problem. They can be piloted directly to a specific cell window, hoping that the drugs can be collected by a prisoner. Hence the need for daily cell fabric checks to look for any evidence of damage to the windows of the cell to enable drugs to be taken off a drone. Drones are also used to drop drugs into areas of the prison hoping that they will first be spotted and collected by prisoners before staff see the package. These packages can large enough for it to be difficult for a prisoner to conceal. Again, vigilance by staff is important.

Phone detectors are regularly used at night to detect the use of mobile phone. All positive indications lead to a cell search the following day. There have been successful searches.

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

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

HMP Preston is a Victorian prison and inherent in that statement is the fact that in many ways the prison does not meet modern standards. The cells do not meet the standards laid out in HM Inspectorate of Prisons “Life in Prison: Living Conditions” report. The access around the prison is not mobility friendly, with no disability access to the chapel, for example. The prison has five dedicated disability access (DBA) cells. These are allocated based on an assessment of need and a prioritisation exercise. The prison does, however, accommodate the needs of all the disabled prisoners in its care.

The fact that the structural layout of the prison is dated, does not mean that the fabric of the prison has to be dated. A clean, rehabilitative, enabling and decent (CRED) programme was started last year. This programme replaces the basic re-painting programme carried out by the works contractor with a collaborative programme using prisoners. The aim is not just to re-paint the cells, but to strip out the old furniture, re-paint and fit new furniture.

Continuing the emphasis on decency, this year saw the completion of the project to place a screen around every in-cell toilet. This project had been interrupted by the Covid-19 pandemic. The pandemic also played a part in delaying the shower improvement programme. This year the programme continued and an additional four more shower units were improved.

This year also saw the completion of the installation of in-cell telephones. This has removed a source of conflict. Prisoners were only able to contact their family when they were out of cell. In the pandemic this was for a very limited period, family members may not have been available and it caused a lot of frustration. Also a large number of prisoners were trying to use a limited number of phones. With in cell phones prisoners are not restricted to out of cell times, but can phone when they know family members will be present. It also allows prisoners to phone family when they are having a bad time for some reason, and not having to wait till the next day to discuss the issue. It is not surprising that the month they were introduced saw a steep fall in the number of violent incidents.

The food preparation and delivery this year has been hampered by constant breakdowns of the equipment in the kitchen and the food trolleys. At one period one walk-in fridge, three bratt pans, a boiling pan and an oven were out of action. The oven had been out of action for over a year. The maintenance programme was unacceptable. The food trolleys are designed for internal use only, but in Preston they have to negotiate the external roads in the prison. Consequently, they suffer damage caused by the unevenness of the road surfaces. This year there has been no budget for any new equipment in the kitchen. Out of necessity a bratt pan had to be hired. This year the cost of hiring has been the equivalent to the cost of purchasing new equipment. As there has been no allocation of money to purchase new pans next year, the cost of hiring is going to continue and will exceed the cost of purchasing pans. This is not the first year this has happened at Preston. This seems

illogical. This could be prevented by each Prison Group Director being allocated a yearly contingency fund cover such minor expenditures.

Work was commenced in the laundry to replace the large washing machines and driers which washed all the wing's laundry, with 25 washers and associated driers. Each wing will have a specified day when prisoners can send their own washing over to the laundry in a string bag where it will be washed, dried and returned to them the same day. The bedding and towels will be sent to HMP Wymott, that has a commercial laundry. This will replace the practice of prisoners exchanging clothing, including underwear, on a one to one basis once a week, to one where the prisoner has his own clothing, whether prison issue or private, for the duration of his stay in HMP Preston. A more civilised arrangement. It is due to implemented in April 2023.

## **5.2 Segregation**

The segregation unit is a self-contained unit. It has 15 cells, each holding one prisoner. This includes one constant watch cell. It has its own servery, showers and adjudication room. It has direct access to three exercise yards. Although of limited size, two have fixed exercise equipment. It has two strip search cells which can double up as special cells. This year has seen the introduction of in cells phones.

The prisoners are entitled to a shower and exercise each day, which they request when picking up breakfast. They also have a radio and can request distraction packs and access to the prison's library service. They are visited each day by a governor, chaplain and nurse and by a doctor twice a week. The Board usually visit the unit every week. In addition, they visit every prisoner placed on R45 (segregation for good order and discipline), observe R45 reviews and adjudications.

This year has seen the trial of a mental health nurse being dedicated to and based in the segregation unit. This provided continuity of treatment, especially when complex prisoners were held in the unit.

The average number of prisoners in per week has increased over the year, with a peak of 17 in September. This was mainly due to the number of prisoners coming into prison with secreted items. The average number of days a prisoner has spent in the unit has increased over the year, albeit only by two days, due to a zero tolerance to PS.

Although the unit has been observed to try hard to return the prisoners to normal locations as soon as possible, five prisoners were segregated for more than 42 days.

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

Staff-prisoner relationships are best built up with prolonged interaction. An example of this is the work done in conjunction with Operation Sceptre. Operation Sceptre was a nationwide week of action against knife crime. HMP Preston mirrored some of these initiatives, one of which was holding workshops on the T4C programme. The aim was to demonstrate that there are positive and negative choices to be made in any situation.

A national initiative as part of Operation Sceptre was the surrender box initiative. As its name suggests these are boxes to receive anonymous donations of weapons. The prisoners were asked their ideas for making them a success in prisons. They suggested making them a permanent feature not just a presence for a week and suggested better locations. Other suggestions for making the prison safer included having more education and awareness courses and talks. They also suggested the role of a violence reduction representative on the wings. This has been taken up and a detailed plan has been submitted for consideration. Other ideas such as getting rid of razors and searching all prisoners going onto the exercise yard were considered as they would curtail their own freedoms. The former comment probably reflects the experience when there was an initiative to control the issue and use of razors. During this period self-harm by razors reduced, but the efforts involved to run this programme were not sustainable and it had to be abandoned. They also felt the need for somebody independent to talk about their problems.

When asked about the presentation the prisoners thought it was eye opening and made them realise, they were not forced to do anything, but it was their own choice. They liked the fact that they were being listened to, and it was an open non-judgemental discussion. Something that had not happened a lot in their lives.

This desire for communication with staff makes the reduction in the key worker role disappointing. This year over 12 thousand key worker sessions have taken place, but this represents just over 35% of the total scheduled. This is disappointing as last year the compliance was high, in particular it was 100% between November and January. The Board is concerned about this about this low figure.

#### **5.4 Equality and diversity**

The equalities situation in HMP Preston has been monitored by a part-time member of staff for half the year, with assistance of an additional member of staff for the remainder of the year. The analysis of the prisoners with protected characteristics in each meeting concerning prisoners is presented in the minutes. These show that there all groups show some disproportionality at different times in different fields. The only group that is represented in numerous areas is the 18-25 year olds. Their anti-social behaviour is of concern, hence the introduction of the T4C programme. Unfortunately, this programme was suspended for part of the year. In January function heads were appointed as protected characteristic leads. This arrangement has not had time to be implemented fully.

An immigration enforcement officer visits the prison every week, but more support could be provided by the prison to foreign nationals.

The chaplaincy plays a crucial role in making the prison a tolerant establishment.

#### **5.5 Faith and pastoral support**

The chaplaincy consists of a full time the head and 13 other faith leaders who are employed at HMP Preston on a part-time basis from between four days a week and one hour a week. This gives the chaplaincy an onsite presence of the widest number

of faiths as possible. For those faiths not represented above, they are given a weekly faith information packs.

The chaplaincy provide pastoral support to those prisoners who have requested it those with bereavement or serious illness of a loved one. They also attend ACCT and R45 reviews.

The chaplaincy carried out generic duties which consist of daily reception, healthcare rounds, segregation rounds and discharges. Responded to general applications on faith and non-faith related queries.

This year has seen the re-instatement of all services in the multi-faith chapel.

## **5.6 Incentives schemes**

The prison runs an incentive scheme. This is an incentive based behaviour determined regime. It is not based on the crime committed but on the behaviour within prison. The incentive level allocated is reviewed in line with national guidelines.

When prisoners enter the prison they are placed on the middle level, standard. They are informed that with good behaviour they can progress to enhanced level, but with poor behaviour they can be downgraded to basic. Each level has certain privileges covering how much money they can spent, how many family visits they can have and on enhanced prisoners can wear their own clothes.

## **5.7 Complaints**

The main issue with the complaints system is the lack of acknowledgement of the receipt of a complaint. The prisoners are supposed to receive an acknowledgement as soon as the complaint is logged on to the system. This has not been happening. The prisoners feel their complaint has gone into limbo, even when eventually they do get a reply.

## **5.8 Property**

The number of applications (written representations) submitted to the Board concerning property remains constant at approximately 12% of the number of applications received. These figures are slight enhanced by multiple application for the same issue, as the issue was not resolved quickly enough for the prisoner. For example, compensation for lost items.



## **6. Health and wellbeing**

### **6.1 Healthcare general**

Healthcare is provided by Spectrum Community Health CIC (Spectrum). At the end of the reporting period, the staffing levels were approaching full complement. Spectrum have recruited a number of bank nurses and bank healthcare assistants, to fill in days where there are gaps on the rota. New staff (three band 5 registered nurses and one band 7 nurse practitioner) are currently going through organisational recruitment processes and Prison vetting and are due to be in post by October 2023. Since mid-2022 the security team have reverted to face-to-face prison vetting as opposed to the remote vetting pathways that were utilised during Covid-19. Reverting to face-to-face document checks has been noted to make the vetting process longer at times due to appointment availability.

Healthcare staff run a series of prisoner consultative councils (PCC) where prisoners can raise issues. A patient voice action plan has been developed in view of putting the patient at the centre of their process and pathways. Healthcare have a complaints pathway in place and all complaints are logged. This system is where all patient incidents are logged, and head of healthcare has oversight. Any incidents that are of a safeguarding nature are shared with safer custody to ensure multi-disciplinary support.

The Board have observed that prisoners are seen within the same timescale as in the community. All urgent care needs are seen on the same day via the clinician application triage pathway. Emergency calls are responded to immediately, whether physical issues such as self-harming, or medical ones such as heart attacks. Healthcare staff are invited to all ACCT reviews and attend the majority. They also attend all R45 reviews in the segregation unit.

### **6.2 Physical health**

All prisoners have an initial healthcare screening by a nurse on arrival in reception. Those requiring medication for addictions are seen by the clinician and the following day they have a more detailed review in the first night centre.

The patients who are withdrawing from substances are offered appropriate symptomatic medications and are monitored twice throughout the night for the first 3 days in custody. If a patient is located on the segregation unit immediately from reception and are withdrawing from substances, the care pathway and checks remain in place, ensuring safety. If a patient has indicated on the body scanner in reception that he has a secreted item internally it is always assumed that it contains addictive substances. If the prisoner is taking opioid substitutes these have to be refused him due to the possibility of him overdosing if the internal packages burst. In these incidences the segregation staff and healthcare work together to monitor the situation.

The Long-Term Condition (LTC) lead oversees most of the chronic disease. Patients are seen in one of the LTC clinics and have an Individualized care plan created to support their ongoing care and self-management. The health needs analysis 2022 documented that the data showed very good rates of monitoring of LTCs, all the more noteworthy considering pandemic pressures on non-urgent interventions.

Preston has a GP and two advanced clinical practitioner who are supported further by a nurse practitioner. This allows effective delivery of clinics and also prescribing for patient's medication needs. GP and clinician appointments are offered from Monday to Friday.

Other appointments offered include podiatry, substance misuse, opticians, 12-week substance misuse reviews, sexual health clinics, smoking cessation, vaccination clinics, abdominal aortic aneurysm (AAA) screening clinics and X ray clinics and primary care clinics including leg dressings and wound reviews.

All patients are offered a dry blood spot test on arrival to HMP Preston on an opt out basis. The cephid machine is also used to test for hepatitis C in patients who have a history of substance misuse. The cephid machine gives results of the test within 10 minutes and if positive for hepatitis C the patient can commence treatment within days.

Attendance at appointments is not 100% and collaborative working and problem solving continues to tackle the enablement issues at HMP Preston, this collaboration has seen the development of a healthcare clinic rota and also increased enabling officer oversight.

The prison has a regional enhanced care unit, known colloquially as the hospital wing. One landing is for physically ill patients and one is for mentally ill patients.

The mental health service was available seven days a week and comprises of psychiatry, psychology, and mental health nurses. A duty worker responds to urgent needs and attended all initial ACCT reviews. The team operates a stepped care model, ranging from self-directed care through to complex case management. All new referrals are triaged, and an assessment completed within five days. Cases are discussed at the multidisciplinary team meeting and, if accepted onto the caseload, the patient is allocated an assigned practitioner.

### **6.3 Mental health**

The in-house mental health team (IMHT) is fully staffed, with a range of professionals including a psychiatrist, nurses, counsellors, senior counsellors, psychological wellbeing practitioners, a higher assisted psychologist and clinical psychology. They provide a service seven days a week. This year they have received 2184 referrals for mental health support and attended 1967 ACCT reviews.

Although there is a waiting list for the mental health team, this is not long in comparison to the services in the community.

The waiting times for mental health beds in a secure unit under the mental health act are variable and can change at any time, as access is based on a priority need. If the prison has a prisoner who is deemed urgent, they will take the next bed that is available. The required level of security of the hospital, be it a psychiatric intensive care unit, a low, medium or high security unit, is made on the basis of current presentation, history of violence, risks to others and previous convictions. On occasions, the Ministry of Justice does not agree with the level of security so will not provide the prison with a movement order. The prison will then have to refer to another setting. There were no prisoners waiting an excessive time to be allocated a bed this year.

Prisoners are often recalled to prison on a 28-day recall. Some prisoners are coming into prison who remain acutely psychotic and due to no beds in the community, the courts see the prison as a place of safety. This gives the mental health team little time to prepare them for release. When this is not achievable, the prisoner may have to be subject to a gate section. This is when, on the day of release, they are stopped at the gate, transferred to hospital in a secure ambulance for assessment and treatment and held under the Mental Health Act. To accomplish this, a referral is made and the prisoner is assessed either the day before or on the day of release by a psychiatrist and an approved social worker. If they deem the prisoner to be appropriate for admission then they have to find a bed in a mental health hospital and arrange transport to get there. This is a very time-consuming process, and if no bed can be found then the prisoner will be released into the community.

In terms of rehabilitation, the release arrangements are crucial for vulnerable prisoners with mental health issues. The IMHT care team does have regular contact with the community mental health teams (CMHT). It is sometimes difficult, however, to hand over the care to CMHT, as they will not acknowledge the clinical diagnosis of the IMHT. A lot of the time, these patients are homeless and, without an address, the CMHTs will also not accept them. If they have to go to approved premises this is identified at the last minute, delaying the referral to a CMHT.

Reconnect is an initiative set up by the National Health Service to provide wraparound support for a patient. The prison refers prisoners to Reconnect upon release. Some prisoners who have returned on remand may already be under the CMHT. Upon release, Reconnect will not accept these prisoners, who then miss out on its support.

#### **6.4 Time out of cell, regime**

The end of the Covid-19 pandemic restrictions allowed the prison to move quickly into a regime that allowed more time out of cell.

The prison consists of three main areas; wings A, B, C and D, the main prison; F wing, a residential area for workers; and G wing, an addiction reduction unit. G wing has 28 prisoners who participate in mentoring groups and workshops, so are out of their cell most of the core day. F wing consists of 22 prisoners who are part-time and fulltime workers. As it is difficult to coordinate an exercise time for them, they are compensated by being left out of their cells when they return to the wing. The low number of prisoners on both these wings meant that they were ideal wings to be placed on lockdown when staff shortages occurred, rather than lockdown down a large wing with over 100 prisoners. This was a frequent event. The gym was allocated to both wings on a Saturday and Sunday afternoon. Due to a lack of gym staff, these again were frequently cancelled. Life for prisoners on these wings was a mixed blessing.

The new regime, therefore, primarily applies to wings A, B, C and D. The prison tries to achieve as many as possible of the population in work or education to maximise the number of prisoners out of cell (7.2). For those prisoners who are not in either, they receive an hour's domestic or exercise in the morning, and the reverse in the afternoon. This is not as good as it should be and efforts should be made to improve it. This rotates daily. For those in work or education half time they have the relevant

hour's item of activity. Those in work full time have evening gym and showers. All prisoners on basic received one gym session per week, those on standard received two sessions per week, those on enhanced received three.

## **6.5 Drug and alcohol rehabilitation**

This process commences on the arrival of the prisoner at Preston. At the prisoner's initial healthcare screening in reception the prisoner's substance use is explored and a national scoring system is used for determining withdrawal systems and the level of clinical intervention needed. At this point they are transferred over to see a GP who will prescribe an appropriate opiate substitute or relevant clinical interventions. The drug and alcohol service complete an initial assessment with these service users on day 2 in the residential care unit (RCU) to explore initial needs. A comprehensive assessment is then completed within a further 15 days to explore more detail into a service user's recovery capital and set individual goals.

Referrals can be received from all other sources such as self-referrals, healthcare, OMU and probation. The same service is offered to service users as above, this will simply commence once the referral has been received rather than on day 2 in custody.

There is a range of interventions offered to service users at Preston. This can include development journals, one to one sessions, psychosocial group sessions, mutual aids and Breaking Free Online (an online treatment and recovery programme for anyone addicted to alcohol or drugs). Referrals are sent to community support services, and ongoing support needs identified. Release planning is commenced within the last 10 weeks in custody depending on their time in Preston. Release appointments are provided to services users and prescribing arrangements are made for all release and provisional court dates.

In addition to the main service there is also a drug and alcohol throughcare service. It offers support to men on the main caseload who have less than 12 weeks left to serve and will also continue support for a further 12 weeks after release. Support for on the day of release is offered in the Preston Support Hub which offers a clothing bank, food bank and access to other services. Gate pick-ups can also be provided if needed for access to recovery and abstinence housing.

Naloxone training is completed with all relevant service users and offered at point of discharge. Naloxone is an opiate overdose reversal treatment.

Overdose awareness, harm reduction and tolerance levels is completed at the initial assessment and again prior to release.

In recent years the drug and alcohol service in partnership with the prison have facilitated a recovery wing, G wing, to offer a more intense level of support whilst at Preston.

Last year Spectrum submitted a proposal for 5 additional members of staff to form a dedicated recovery wing team. This bid was successful. Although the new programme started at the end of January 2022, the staffing was not at full compliment until May. The programme on the wing is founded upon the CHIME

conceptual framework (Leamy et al, 2011), consisting of 5 recovery processes of connectedness; hope and optimism; identity; meaning and empowerment. It consists of group and individual work. It has links to agencies that provide lived experiences to give the prisoners hope and optimism that they can reach their recovery goals. The programme can only be run for 8 weeks due to the fact that Preston is a reception prison with many short stay prisoners. Although those on the course are put on hold, to prevent transfer out of prison whilst on the course.

Places on this course are restricted to 28 due to the size of the wing. Initially only convicted prisoners were allowed, but recently remand prisoners have been accepted. Not all prisoners complete the course. They are reported to the Board to confuse the freedom given for self-analysis with freedom and are not ready for it. Since the relaunch of the wing in January, 53 prisoners have completed exit questionnaires and all have shown a significant improvement on their wellbeing and scaling questionnaires score.

One prisoner graduate from G wing, wrote an open letter to the wing a year after his release and said, "G wing will not cure anyone's addiction. It will not enable you to walk through the gate and never worry about using again. But if you give it a go, it will teach you tools that will help forever".

## **7. Progression and resettlement**

### **7.1 Education, library**

The library has returned to normal after the restricted regime of lockdown. There has been a steady increase in the number of library visits over the year and the number of books borrowed. In the last three months of the year the number of visits to the library has increased by 27%, and the number of books borrowed has increased by 42%. The nationality of the foreign nationals in prison has been monitored and books have been purchased in the relevant languages.

The library promotes various initiatives. The Turning Pages initiative is a programme where fellow prisoners act as mentor to help prisoners with their reading skills. Story Book Dads is a programme where prisoners can record themselves reading a bedtime story for their child. This is sent to the child, and sometimes this is the first time a child has heard their father read to them. It also promotes the Reading Ahead programme. A national programme where a dictionary is given as a reward for people who have read six books.

The library also liaises with other sections of the prisons. It works with IMHT to provide books for prisoners with mental health problems. It provides books to the education provider for those prisoners with low level of reading skills. A new initiative has been introduced to allow ten minutes of reading time in every education class.

New prisoners undertake screening for both maths and English during their induction process. If they screen below level 2 for functional skills, where possible they are allocated to a functional skills class to raise their level.

The curriculum has been designed for the type of population at HMP Preston, which is a reception prison. Most courses are delivered in bite-size sections, which most prisoners can complete during their stay. This gives a prisoner the satisfaction of having completed a course which is recognised at their next prison, rather than leaving with no qualification and having to start the course from the beginning again!

The functional skills strategy aims to help all prisoners screened under level 2 to move up a level. Bespoke functional skill classes are available alongside functional skill classes embedded within the horticulture and gym provision.

There are a range of accredited IT qualifications available to prisoners on a bite-sized basis but can also gain the full award. These consist of one full-time IT class, one full-time graphics class and one full-time interactive-media class.

From over 260 questionnaires returned to the education department there was a 96% satisfaction rating with the courses provided.

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

Work is seen as an essential part of prison life. It provides social contact, which was severely limited during the covid pandemic, and gives prisoners an experience of a working environment. It also allows prisoners to earn money.

As a reception prison with a turnover of 50 prisoners a week, it only offers two vocational training courses, painting and decorating and industrial cleaning. The former is provided by the educational provider, Novus, the latter by the prison. The prisoners completing these courses obtain a City and Guilds qualification.

The prison offers approximately 400 places in employment and education per day. It aims for an occupancy of 80%, but achieves on average just over 60%. This figure increased sharply after the lockdowns as covid finished. For a local prison with prisoners on social visits, court visits, solicitor's interviews, located in the regional hospital or the segregation unit, with prisoners on remand who do not have to work, those undergoing security clearance and those who do not clear the security screening, the Board deems this to be a good figure.

Some posts can lead to externally recognised qualifications. Posts in horticulture can obtain a City and Guilds in Horticulture and those in waste management could obtain the waste management Training and Advisory Board's qualification. This is not available at the moment as the certifying officer retired and the new replacement officer has to qualify as an instructor before qualifications can be issued. This qualification will be obtained primarily in the officer's own time. The kitchens experimented with the CLINK qualification for chiefs, but discovered it was not a suitable qualification to try to teach in a local prison. In certain posts prisoners have to have training before they can commence. A Listener has to be trained by the Samaritans to their national standards before they can commence work and are monitored by the Samaritans whilst practicing.

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

Whilst the OMU has a good completion rate for risk assessments and offender assessment system (OASys) reviews, staffing difficulties have led to lack of contact between prison offender managers (POMS) and prisoners. The probation contingent of the POMS pool has reduced from six or seven officers to two (one of whom is on extended leave).

This obviously adversely effects the efficacy of the offender management in custody (OMiC) system. The IMB believe that when fully staffed the system is highly effective but the symbiotic relationship between probation and prison officer POMS has not been achieved in HMP Preston. It is a credit OMU management that despite these pressures the overall offender management service is managing to keep its head above water.

The Support Hub has been successfully launched during this period and provides a place to go to immediately after release. The IMB has received positive feed-back and are pleased with the prison's partnership with ACE Project, who provide volunteers.

Weekly Reducing Reoffending meetings are now well established.

### **7.4 Family contact**

HMP Preston is a town centre prison in a city that is a transport hub. Regular family visits should be one of the advantages of a prisoner located here. The booking of these visits has been unsatisfactory due to staff shortages. On the 31<sup>st</sup> January,

2023, the bookings were transferred to the national booking system. This did not improve the service, with families waiting over an hour for the phone to be answered.

Some of the families that used the email facility mistook the automatic email reply as a confirmation of the visit. When they arrived at the prison they were annoyed when they were not allowed entry. HMP Preston has two visiting sessions in the afternoon. If the family arrived at the first session and were refused entry for the above reason, staff made an effort to facilitate a visit in the latter session. If they arrived for a visit in the latter session, then this was not possible.

There has been six family days since the pandemic. In the Visitors Centre POPs provide a family support service, which includes assisting with the 'meeting and greeting' of prisoners' families and assisting with child care during visits.

There is partnership working with a local neighbouring church, which provides parking and visitor centre facilities, including refreshments.

It is acknowledged that family support is a vital positive factor for prisoner's release but there appears to be a need for more family engagement by the OMU.

## **7.5 Resettlement planning**

The Employment Hub is based in the library and is well attended by prisoners. The IMB has visited the Hub on several occasions and have been impressed by the enthusiasm of the staff. The Hub is supported by a multi- agency monthly forum, attended by a number of key partnership agencies. IAG advisers are now fully staffed and continue to oversee the employment hub.

HMP Preston has been involved in the Future Skills Programme and HMP Academies through New Futures Networks, which may lead to some funding awarded to deliver industry recognised training with jobs on release.



## 8. The work of the IMB

### Board statistics

Recommended complement of Board members	15
Number of Board members at the start of the reporting period	6
Number of Board members at the end of the reporting period	6
Total number of visits to the establishment	265

### Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	9	12
B	Discipline, including adjudications, incentives scheme, sanctions	3	3
C	Equality	1	4
D	Purposeful activity, including education, work, training, time out of cell	4	15
E1	Letters, visits, telephones, public protection, restrictions	19	38
E2	Finance, including pay, private monies, spends	9	12
F	Food and kitchens	0	9
G	Health, including physical, mental, social care	17	30
H1	Property within the establishment	13	22
H2	Property during transfer or in another facility	5	4
H3	Canteen, facility list, catalogues	5	5
I	Sentence management, including HDC, ROTL, parole, release dates, re-categorisation	9	17
J	Staff/prisoner concerns, including bullying	17	21
K	Transfers	1	7
L	Miscellaneous	27	37
	Total number of applications	139	236

## **Annex A**

### **Key Providers**

Healthcare is provided by Spectrum Community Health CIC (Spectrum).

Spectrum provides primary care services, including integrated substance misuse services, pharmacy services and GP sessions. Spectrum is also responsible for the provision of the following services:

- mental health services (with its partner Tees, Esk and Wear Valleys NHS Foundation Trust)
- non-clinical substance misuse services
- optical services
- a range of therapies (including physiotherapy and podiatry)

Dental services are commissioned directly by NHS England

Prison education framework provider: NOVUS

Escort contractor: GEOAmey

Works contractor: Amey

### **Partner Agencies**

Organisation supporting families of prisoners: Partners of Prisoners (POPS)

Library Services: Lancashire County Council

Employment Hub: Career Connect; Through the Gate; Prison Employment Lead  
Department of Work and Pensions



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