



Annual Report of the Independent Monitoring Board at HMP and YOI Bedford

**For reporting year
1 July 2022 to 30 June 2023**

Published December 2023



Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Key points	5
Evidence sections 4 – 7	
4. Safety	12
5. Fair and humane treatment	16
6. Health and wellbeing	22
7. Progression and resettlement	26
The work of the IMB	
Board statistics	31
Applications to the IMB	31
Appendix A	
IMB surveys	32
Appendix B	
Graphs and charts	36

All IMB annual reports are published on www.imb.org.uk

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

2.1 Purpose

HMP and Young Offender Institution (YOI) Bedford (to be referred to subsequently as 'HMP Bedford') is a category B reception and resettlement prison that has the following functions:

- to receive prisoners from court, on remand and following sentencing
- to keep remand prisoners until the outcome of their court case
- to risk assess, categorise and allocate sentenced prisoners to a suitable prison to serve their sentence
- to manage and keep safe prisoners serving their sentence in HMP Bedford and to prepare them for release
- to receive prisoners from other prisons to prepare them for release into the local community

2.2 Accommodation and facilities

HMP Bedford has an operational capacity of 487 (310 being the certified normal accommodation)¹. However, one wing is predominantly out of use, with the result that the current operational capacity is 400.

As a busy reception prison, Bedford takes both sentenced and remanded prisoners, mainly from courts in Bedfordshire and Hertfordshire.

It is important to recognise that the prison, in its current guise, was designed for a capacity of 310. It is therefore overcrowded and has been for many years.

2.3 Prisoner characteristics and lengths of stay

HMP Bedford is classified as a category B reception and resettlement prison. This means that it receives category B prisoners who have been sentenced at Luton Crown Court for a sentence of less than a year.

Prisoners are remanded to HMP Bedford mainly from both St Albans and Luton Crown Courts. These remand prisoners account for 75% to 85% of the inmates in the jail.

Whether sentenced or on remand, it remains the case that there is a sustained and relatively rapid movement ('churn') of prisoners. This poses particular problems for the prison, in terms of being able to offer meaningful interventions and build the productive relationships between prisoners and staff which are necessary to maintain a safe and orderly prison.

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

3. Key points

Context to this report

This is the first report written since 2019 where there has been a full operational year. In the reports of 2020-2022, it was difficult to distinguish between the impact of Covid-19 restrictions and the impact of prison operations, but there are now no such issues. The following points of context are important precursors to the report:

- Between 75%-85% of the prisoners at HMP Bedford were remanded, which has significant implications for the services provided and required.
- Whilst the prison is nominally fully staffed (or thereabouts), up to 35% are 'non-effective' due to sickness, training, secondment or restricted duties, which means the prison does not provide the intended level of service (the regime).
- Most prisoners spend most of their time locked in their cells.

The IMB undertook a prisoner survey in April 2023, which received 72 responses. The survey form is shown in Appendix A and the results of the survey are referred to throughout the report.

3.1 Main findings

Safety

- Whilst the reception process is effective, the induction arrangements are not consistent, with a fifth of prisoners telling us that they had not had an induction.
- Self-harm and violence levels are too high in comparison: HMP Bedford has, proportionally, the highest number of assaults on staff of the 29 reception prisons.
- Young adults are generally involved in more than half the violent incidents and we are concerned that the funding for specially trained staff on the young adults' wing has been reduced or removed.

Fair and humane treatment

- The prison remains overcrowded, with two prisoners sharing cells designed for one.
- The infrastructure is ancient, vermin abound and the plumbing regularly breaks down.
- The kitchen has continued to struggle with basic facilities and a lack of workers.
- The segregation unit remains in its dire underground location, although relocation is expected by the spring of 2024.
- It is a great shame that the prison has not been able to reintroduce the 'key worker' scheme in its entirety.
- Inter-prison property transfers remain an issue, with a lack of protocols, standards, clarity of responsiveness and measurement systems.

Health and wellbeing

- Prisoners spend far too long in their cells, which is not good for their mental health, does nothing to reduce violence and self-harm and, in our view, is not a humane way to treat individuals.
- The gym has not been open for much of the reporting period.
- The mental health team still struggles, with very limited resources, to provide an effective service.
- The prison continues to provide effective drug treatment services.

Progression and resettlement

- The education department has shown steady improvement with particularly good teaching of English and mathematics.
- Most of the skills workshops have not been available for much of the year.
- The arrangements for visits have been much improved, with most prisoners reporting that they had been able to keep up family contact.

3.2 Main areas for development

TO THE PRISON SERVICE

- It is disappointing that funding to support staffing in the young adults' unit has been removed.
- The system for managing prisoners' property is not fit for purpose and, in particular, there are no protocols or standards for inter-prison property issues.
- It is disappointing that HM Prison and Probation Service (HMPPS) does not measure time out of cell (or perhaps time locked in cell) or appear to give any importance to it, when purposeful activities are not available.
- The early identification of release areas by the probation service would be helpful where prisoners, because of the length of time served on remand, have only a week or so before release – better coordination in this area would be really useful.

TO THE GOVERNOR

- The induction process is not consistent and there is no process for assessing quality.
- The lack of a suitable computer in the healthcare rooms in reception means that healthcare staff cannot access the personal escort records.
- We hope that there will be a strong and continued focus on making the young adults wing a success.
- Prisoners have regularly reported issues about pigeon droppings, cockroaches, showers not working and broken tumble dryers.
- The provision of applications and other forms on the wings is inconsistent.
- We look forward to the segregation unit being relocated early in 2024.
- We hope that the 'key worker' scheme can soon be fully implemented.
- We are pleased that the prison has developed a remand prisoners' strategy. and hope that it will put a strong focus on implementing its recommendations.
- Prisoners spend far too long locked in their cells.
- We are disappointed that the mental health steering group, which seemed to offer the promise of an effective and integrated approach, has not met for some months and appears to have fallen into abeyance.

- We hope that the prison will take note of the findings of our mental health survey and see what improvements can be made.
- The availability and distribution of written material about mental health issues and problems would appear to be an easy win.
- We hope that the prison will be able to offer a much fuller provision of skills workshops.
- Prisoners need to attend the pre-release board and we hope that the prison can facilitate this.

3.3 Response to last report

From the minister

Issue raised	Response given	Progress
<p>Mental health services in the prison are poor. This is mainly due to staff shortages. We request that the minister review budgets for mental health staff, especially in local prisons.</p>	<p>Acknowledged 28-day transfer time was often not met.</p>	<p>The issue of mentally ill prisoners being transferred to suitable mental health facilities remains, although we have been told that there has been some improvement recently.</p>
<p>We have also seen many prisoners at HMP Bedford with such severe mental health issues that effective treatment by the local mental health team has not been possible. These men do not belong in prison: they get no better and take up an enormous amount of officer time. Transfer to an appropriate mental health facility is hugely difficult and the target time for transfer (28 days) is seldom met. We feel that there should be better cooperation between the Ministry of Justice and the Department of Health and Social Care to enable prisoners who are assessed as requiring mental health care in the NHS to be placed earlier in the appropriate facility.</p>		

From HMPPS

Issue raised	Response given	Progress
As far as we are aware there have been no attempts to evaluate the effectiveness of the assessment, care in custody and teamwork (ACCT) process to understand whether it has achieved (or failed) its stated objective of reducing the risk of serious self-harm.	An evaluation of ACCTv5 was carried out prior to the development of version 6.	It would be interesting to see the evaluation of version 6.
The layout of the ACCT form does not facilitate care coordinators to summarise the prisoner's story to bring together a description of triggers, coping strategies and other relevant factors into an individual 'formulation'. We believe this remains a fundamental flaw in the ACCT process.	HMPPS believes that the form is suitable. It is developing a safety support skills package which will include modules on risks, triggers and protective factors.	Layout of the ACCT form has not changed.
The prison remains overcrowded with two prisoners in cells designed for one.	Overcrowding is never desirable but continues to be necessary. HMPPS is investing £3.8bn in 20,000 new prison spaces.	The prison remains overcrowded.
Facilities for disabled people in HMP Bedford are woefully lacking. and as it deals with an ageing prison population, more cells will need to be adapted for disabilities.	Capital investment is needed to adapt more cells, install lifts and ramps, and this is unlikely to be available in the current environment.	Woeful facilities for disabled people remain.
The digitising of the personal escort records (PERs) has made it harder for healthcare staff to access them.	Healthcare providers can access PERs.	Despite the response, healthcare staff at Bedford still cannot access PERs.

From the prison

Issue raised	Response given	Progress
We feel that the focus of the prison should be reviewed to see if it is providing the appropriate services for a prison that now houses predominantly unsentenced prisoners.	No formal response.	Remand prisoner strategy developed.
We have made several suggestions in relation to suicide and self-harm. This includes considering whether the number of meetings to review these individual's care could be streamlined to improve the quality and consistency of decision-making.	No formal response.	Mental health steering group established in Oct 2022, but has not met since March 2023 and no clear actions have yet resulted.
We believe that the formulation of ACCT care plans should begin by asking prisoners about their coping strategies and preferred sources of help. The care plan should proceed from there.	No formal response.	As above.
We have made several suggestions in relation to violence and violence reduction including exploring if there is a link between the remand prisoners and violence, and reviewing how prisoners with serious mental health problems are assessed and the process for moving them to specialist psychiatric facilities.	No formal response.	As above.

Issue raised	Response given	Progress
We made some suggestions about how the mental health service might become more effective including spending less time on the procedures for new referrals and more training of officers 'on the job' so that prisoners with mental health problems could be identified earlier.	No formal response.	As above.
We believe that there would be significant benefits in the co-location of healthcare and mental health services and are disappointed that this has not yet happened.	No formal response.	Healthcare and mental health services remain in different buildings.
We echo the view of HMIP that the reallocation of gym staff should be a last resort.	No formal response.	The gym has been closed during much of the reporting period due to a lack of available staff.
Forms are not easily and regularly available on all wings; indeed, on D-wing there have been occasions where no forms were available at all.	No formal response.	Problem still remains.
We have been made aware of numerous issues with catalogue buys, particularly with items going missing after purchase.	No formal response.	This does not appear to be the problem that it was.

Issue raised	Response given	Progress
We hope that this year the segregation unit will finally be moved from its underground location.	No formal response.	While progress has been made in constructing the new unit, segregation remains in its underground location.
We are concerned that, on occasions, prisoners have been kept in segregation without the proper process being completed.	No formal response.	We are not aware of these instances still occurring.
We hope that the key worker scheme can be returned to full implementation.	No formal response.	The key worker scheme is still not fully implemented.
Performance on complaints has got worse and prisoners tell us that they have little confidence in the system.	No formal response.	Numbers of complaints are reducing but are still the highest of the comparable prisons.

Evidence sections 4 – 7

4 Safety

4.1 Reception and induction

The physical environment within reception is cramped, cluttered and uninviting. However, to a large extent the officers compensate for this by creating an atmosphere of calm in the respectful and caring way they have been observed to deal with prisoners as individuals. During our monitoring of reception, we saw new arrivals being medically assessed and administrative procedures followed effectively. Everyone received their ID card, hot food and drink and a bed-pack, and had the opportunity to make a phone call. Prisoners have not raised concerns with us about reception and our view is that it is working well.

The same cannot be said for the induction process – because of comments by prisoners, we included a question on the induction process in our prisoner survey (see Appendix A). The results showed that 21% of prisoners had not had an induction at all. Of those who, 68% said that it was useful, which is encouraging. Nonetheless, 46% of prisoners either did not have an induction or did not think it was helpful.

The induction process is important because it should provide a platform for prisoners' understanding of how the system in the prison works and what is expected of them. We are concerned that the induction process has, on occasions, failed. As far as we are aware, the prison does not have any systematic process for assessing the quality of the induction process or how many prisoners have received it. We do recognise, however, that some prisoners refuse to have an induction and that this may skew the figures.

We stated in our last report that the digitising of the personal escort records (PERs) has made it harder for healthcare staff to access them. This remains the case. We are told that this is because there is not a suitable computer in the healthcare rooms, which would seem to be easily resolveable.

4.2 Suicide and self-harm, deaths in custody

HMP Bedford has high levels of self-harm, in comparison with other similar prisons. Whilst there was a comparative reduction between September 2022 – January 2023, the figure rose significantly after that. This trend has continued: for the period April 22 – May 23, HMP Bedford had the highest annualised rate for self-harm incidents when compared to other reception prisons - see graph at appendix B.

The primary methods of self-harm were cutting and by ligature. Whilst the main reasons were related to mental health issues, quite a number were due to frustration at the system or (actual or perceived) procedural injustice.

The high level of self-harm continues a theme that has been consistent in recent reports. However, care needs to be taken with the figures, as they can be distorted by a few individuals: for example, in June, 70% of incidents were attributable to five prisoners.

The prison does have a strategy to reduce self-harm, including 'active listening' and knowing individual prisoner's risk factors. However, given the figures, it is difficult to

assess how effective it is. What we do not know, as this is not information the prison collects, is the relationship between high levels of self-harm and numbers of remand prisoners.

Sadly, there was a death in custody, which was apparently self-inflicted, in March 2023. The prisoner was found unresponsive with a ligature in the healthcare unit. He subsequently died in Bedford Hospital. The death is still subject to an inquest and a report from the Prison and Probation Ombudsman.

4.3 Violence and violence reduction

We have reported in previous annual reports that HMP Bedford has high levels of violence towards staff and prisoner-on-prisoner violence in comparison with similar prisons (see graphs in Appendix B), and this remains broadly the same. For the period April 2022-May 2023, HMP Bedford had the highest annualised assaults on staff rate when compared to all reception prisons.

However, there may be some indications of improvement. Prisoner-on-prisoner assaults have been on a downward trend for the last few months and are now about average for similar establishments.

Most assaults occur during times of heavy movement across the residential units and around the site, where prisoners are more likely to encounter one another, particularly those who should be kept separated. This is a particular challenge in a prison such as Bedford, where space is very tight.

One of the most prominent categories in terms of assaults is young adults (YAs), who may not have learnt how to respond to other people or deflect difficult situations. In 2022 the prison established a young adults' unit with the intention of ensuring that YAs were better prepared when they moved to the main wings. It was led by a dedicated custodial manager (CM) and staffed with 14 officers who had received specialist Trauma Informed Practices' training. There was a focused programme aimed at managing conflict and reducing reoffending. The initial signs were encouraging.

However, the initial impetus has been lost because:

- The custodial manager who led the team has moved to other duties.
- For much of the year the wing did not have a dedicated CM, so it was led by officers who had to share their time with other commitments.
- Most of the specially trained officers have moved on and, at one stage, the most experienced officer on the wing had only been in post for three months.

The programme is still running and we are told that it is considered a success, but generally the majority of assaults still involve young adults. The graph in appendix B shows that when the YA wing opened in March 2022 there was a reduction in violent incidents for the first few months. However, it has since returned to previous levels.

We very much hope that the YA wing will be properly resourced with trained staff and that the initial optimism will be delivered through results.

4.4 Use of force (UoF)

UoF is the term used to describe incidents where officers must use force on prisoners to resolve a situation. This is difficult and unpleasant for both officers and prisoners and something that, ideally, should happen quite rarely.

Not surprisingly, the UoF figures are in line with the violence figures set out above – HMP Bedford has had more UoF incidents (as a proportion of its prisoner numbers) than all but one of the other 31 reception prisons. Nearly half of the incidents involved young adults, even though they represent only about a quarter of the population. This speaks strongly to the need to deliver an effective programme during the early days of young adults in custody.

4.5 Preventing illicit items

The prison has strengthened its entrance procedures with airport-style bag checks and pat-downs. This is an improvement to be welcomed, although it is very difficult to say what impact it has had on illicit items entering the establishment.

From the daily briefing sheets the prison produces it appears that, on average, there is one 'find' a day. Typically, this will be cannabis, tobacco or mobile phones and equipment. The prison has not consistently carried out random drugs tests during the last 12 months, so there is no clear information about the extent that they might be available. However, it is not the experience of the IMB members (who generally visit two or three times a week) that drugs are apparent through smell or prisoners' behaviour.

There was one serious incident where credible intelligence suggested that a gun (in the form of a pen) had been smuggled into the prison. This necessitated the establishment of local and national command suites being opened, police being called and national and regional specialist teams being deployed. From our subsequent discussions with prisoners, we found that:

- All strip-down searches were conducted in the style of 'top half' then 'bottom half'. No prisoners I spoke to were stripped completely naked.
- Despite having to squat (which is degrading), most prisoners seemed to accept the necessity of the search procedure.
- Searching was always done by only two officers at a time and they were wearing epaulettes so that their ID numbers were visible.
- Staff were generally not aggressive.
- Body cameras were worn and appeared to be running.

However, there were issues with the provision of food and medicine during the searches, as individual wings were closed for normal operations for up to 24 hours. Some prisoners were removed temporarily to B-wing, essentially a building site with no running water or sanitation. Prisoners also reported that their possessions (such as religious objects) were not respected during searches.

In the event, a gun was not found, either because it did not exist, or it had been taken apart and disposed of.

4.6 Conclusions on safety

Whilst the figures suggest that HMP Bedford is a violent and dangerous place, that is not the experience of IMB members visiting the prison. Neither is safety a concern that prisoners regularly raise with us, although it does happen on occasions.

The prison is rigorous in collecting and analysing information in relation to violence - the reports to the monthly safety group are excellent. In addition, there are clear areas of focus each month to try and make the prison a safer place. So, it is not immediately apparent why HMP Bedford has such high levels of violence and self-harm in comparison with similar jails.

However, there are four factors that we think may be particularly relevant:

- i) The high numbers of remand prisoners (75%-85%) in the prison, who present specific challenges that the prison system is not very well designed to meet.
- ii) The relationship to mental health, particularly for those who self-harm, and the resources available to the mental health services.
- iii) The reduced effectiveness of the programmes in the young adults' wing where the enthusiasm and focus of the initial arrangements appears to have been dissipated.
- iv) Being locked in a cell for over 20 hours a day fosters resentment and leads to some prisoners 'coming out fighting'.

Whatever the reasons, levels of violence are too high and remain a concern.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

Accommodation and clothing

The accommodation in HMP Bedford is constrained by two factors: age and occupancy. The original prison on the site was built in 1801, with the main wings' extension completed in 1845. Aside from sanitation, the conditions remain pretty much the same, with one key difference – originally the cells had single person occupancy, but now there are two prisoners to a cell. This means two people sharing the same toilet, with minimal privacy. This hardly seems like progress.

Even D-wing, which was built in the 1990s, has the same template, although the overall communal space is brighter and airier.

Whilst the prison does try and keep on top of things, the main wings suffer terribly from pigeon droppings, cockroaches and, occasionally, rats. There have been ongoing problems with broken tumble dryers and showers not working. Recently we saw a cell where a prisoner was having to flush his toilet by filling his waste bin with water because the flush was broken – it had been like this for over two weeks.

The prison employs a pest control company, which, we are told, visits twice a week. There is also a pest control plan in place, but out of the 11 actions targeted to be completed by June 2023, only three had been completed at the time of writing this report (September 2023).

This is an extract from one of our rota reports 'There has been no washing powder for over a month. Those that can afford to, buy it on canteen, but those that can't wash their clothes in water. Both tumble dryers are broken so they have to hang their wet clothes in their cell, where it can take 2-3 days to dry, often meaning that the clean washing starts to smell'. We have been told that work is ongoing to try and resolve the plumbing issues and we will have to see how effective this is.

This is an extract from a prisoner's application to the IMB: 'The living conditions in Bedford are extremely poor, for example the wings are covered in detritus and pigeon poop. The cells are a nightmare to try and sleep at night due to the windows being tiny, there's no draft. Also, there's a lack of cleaning equipment available as well as sanitary products such as soap and shower gels.'

In summary, the infrastructure is ancient, the cells are overcrowded, vermin abound and the plumbing often breaks down.

The provision and laundering of prison issue clothes and sheets works satisfactorily and is, in fact, a great improvement on what it was a few years ago.

The prison runs on forms, whether it is an application for a job (in the prison), a complaint, an application for a visit, an application to see healthcare or a range of other things. These forms should be available on each wing but, as we have said in previous reports, the provision is very variable. For example, on a recent visit there were almost no forms on A-wing, but on E-wing all forms were both available and easily accessible. This apparently small bit of administration can have a big impact on the lives of prisoners and, unlike some other issues, is easily rectifiable.

Food

The kitchen has continued to struggle with basic facilities and a lack of kitchen workers (due, at least in part, to a very slow vetting and appointment process). A dishwasher was out of use for nearly a year, there is rusty pipework and radiators, damaged and ill-fitting internal glass panels and it is not unusual for staff to have to wash their hands in cool water. Our understanding is that organising the repair of equipment can be complex with long timescales.

The regional catering advisor carried out a detailed assessment of the kitchen last year in July 2022, with generally positive results, but this has not yet been repeated this year. There is no professional assessment of the nutritional content of the food, which seems surprising. However, we get few complaints about the quality and, although there are sometimes suggestions that portion sizes are too small, overall the standard of the food is acceptable.

In addition, the prison must be congratulated for moving the main meal of the day to the evening (except for weekends and the period of Ramadan), despite the Board being told for many years that this could not be done. Most prisoners in our survey felt this was an improvement.

5.2 Segregation

The segregation unit remains in its underground location and is highly unpleasant for both prisoners and staff. It can hold some of the most vulnerable and challenging prisoners. There can be constant yelling, screens in front of doors to prevent spitting and, on occasions, faeces smeared on cell walls during a dirty protest. In these circumstances, we do recognise the work of prison staff who are usually stoic and caring when it would be easy to be otherwise.

The reviews of prisoners in segregation are, in our experience, well carried out and give proper consideration to the needs and welfare of the prisoners, as well as the safety and stability within the prison. Only one prisoner was held in the Care and Separation Unit (CSU), continuously, for over 42 days.

We had expected that the unit would have been moved to a new location above ground in B wing by now. However, we recognise that significant works were needed and that this was complicated by the building's listed status. Although significant progress has been made, we have recently been told that another construction issue has emerged and that the relocated unit is unlikely to be in operation until at least the spring of 2024.

5.3 Staff and prisoner relationships, key workers

Staff relationships

It is fair to say that staff and prisoner relationships are mixed. We have seen numerous examples of good interaction between officers and prisoners. In our prisoner survey, 21 out of 72 responses had good things to say such as 'very helpful' and 'in general Bedford officers are cool'.

However, 22 responses said that officers were not helpful, saying that it depended on the officers and the circumstances – sometimes good, sometimes not.

There is clearly a lack of consistency, and we hope that there will be a way of recognising the good work of many of the staff and raising the standards of others.

Key workers

HMP Bedford was one of the leading lights when the key worker scheme was introduced a few years ago. The idea is that each prisoner has a named key worker who spends at least half an hour a week with them as part of the offender management programme. It should mean that the prison gets a much better knowledge of individual prisoners and can provide targeted support. The prison had a good reputation for this, with a well-managed process and team.

The key worker system stopped during the Covid-19 pandemic and has not returned fully now that things are back to normal. It is only offered to certain prisoners (following a risk and vulnerability assessment). It is not available to the majority of prisoners because, we are told, of staffing issues. This is a great shame and means that most of the good work initially carried out has been lost. The prison tells us that the keyworker scheme has been redesigned to recognise the needs of the remand population and we look forward to this resulting in a positive impact.

It is not clear if there is any link between the loss of the key worker scheme and the high levels of self-harm and violence within the prison, but we suspect that there might be.

5.4 Equality and diversity

Although the IMB has received complaints about discrimination, these are not great in number and the prison's data suggests reasonable proportionality in key areas, such as segregation.

While the diversity of prisoners varies continually in a prison that houses people on short sentences and remand, the following figures give a general approximation of the mix of prisoners in HMP Bedford:

- 20%-25% are young people aged between 18 and 25
- 10% are prisoners over the age of 50
- around 45% are from the black, Asian and minority ethnic community
- the highest declared faiths are Muslim (25%-30%) and Roman Catholic (around 20%)
- about a quarter of prisoners are foreign nationals (in January, for example, there were 34 nationalities in the prison)
- a small number, perhaps around 10, are 'IS91', which means they are foreign national prisoners being held by the Home Office in the prison (rather than a detention centre), even though their full sentence has been completed

This great diversity emphasises the need for the prison to understand if preferential and discriminatory treatment is being used and to have in place appropriate arrangements for faith, language and dietary requirements. Our observations are that, overall, it does this reasonably well.

There is a very effective diversity and inclusion manager in place and the monthly meetings, which bring together a broad range of diversity data, are normally attended by the Governor to emphasise their importance.

The figures presented at these meetings do not suggest any obvious discrimination against people with protected characteristics. For example, in January, 65% of prisoners in employment were from the black, Asian and minority ethnic community, against 45% as a proportion of prisoners overall. In terms of adjudications for offences within the prison and for prisoners put in segregation, these were reasonably evenly spread across the age ranges and by far the largest proportion were white.

We do have some concerns about the ease of access to the language line for non-English speakers, as the facility is not always available or working. The prison does have staff who are able to speak other languages, such as Polish and Arabic, but this is happenstance and not a sustainable solution.

5.5 Remand prisoners

HMP Bedford is a prison that predominantly holds remand prisoners. Between 75% and 85% of the population are either on remand and awaiting a trial, convicted but unsentenced, or civil prisoners (for example, IS91). These individuals have different entitlements to that of sentenced prisoners, such as unlimited visits, different work payments and incentives and more flexibility with clothing. They also have some different needs, particularly in relation to access to legal support and knowing about trial dates.

However, the prison system is focused on managing sentenced prisoners and is not well-structured to work effectively with remand prisoners. For example, when sentenced prisoners leave, the date is known well in advance and a support package is put in place, including housing and, depending on the individual, access to drug management or job interviews. But, in many cases, when a remand prisoner goes to trial he will, if found guilty, have already spent his sentence on remand and be released straight from court without any of the support elements in place.

We are pleased that the prison has developed a remand prisoners' strategy, which acknowledges the issues and which, if delivered, should lead to significant improvements. We think the following actions set out in the strategy are particularly important:

- to have a dedicated manager for induction and a review of the process
- to review how the visits system can accommodate the entitlements of remand prisoners
- to review the incentives policy against the needs of remand prisoners
- to consider dedicated officers in the offender management unit to work with remand cases and support prisoners directly released from court

Hopefully the prison will be able to implement the actions in its strategy so as to make a positive difference.

5.6 Faith and pastoral support

The chaplaincy team, representing all major denominations, continues to provide a much-valued service in the prison. They are trusted and respected by all members of the prison community. In addition to spiritual support through weekly church services and activities, their mission extends into the everyday life of prisoners.

They are available to all, irrespective of religion, to provide support at times of distress and crisis. A member of the team visits CSU daily and talks to every prisoner. They are often called upon to help negotiate with prisoners who get on the netting. In the absence of a fully operational keyworker scheme, they make an essential contribution to prisoner wellbeing.

5.7 Complaints

While the number of complaints has been reducing, HMP Bedford still has the highest level of complaints in proportion to the number of prisoners of all reception prisons (see graph in Appendix B). In the year to April 2023 the prison received 1400 complaints and met their target response time of five working days on 68% of occasions, which is not very impressive. This, despite the recording and chasing system being well-managed; relies on officers having the time and knowledge to make clear responses within the timescale.

Nearly a quarter of complaints were about property, with many prisoners, now in other prisons, who said that they did not have their property transferred from HMP Bedford. As described below, the property system is hopeless, which causes angst for prisoners and a lot of unnecessary work for officers.

5.8 Property

The prison has got better at managing prisoners' property, with only 6% of applications to the IMB being about property within the prison. However, we still get some prisoners telling us of issues around their property getting lost when they are moved to CSU.

In addition, there remain issues in relation to transfers between prisons, or from court. Here is a typical example of how it works (or does not):

- You are a prisoner who is due to go to court and may be i) released ii) sentenced and sent to another jail or iii) sent back to the jail you are in. In each case, it is your responsibility to take your property with you. You are given no information about how to pack your property up, how many bags you can take or what the weight should be.
- You and your bags go to court.
- When you get there, a court officer will see if you have bags that will be transported on (that is, not too many and not too heavy), as they do not want bags left in court. If there are too many or they are too heavy, then the 'offending' bags are put back on the transport that brought you.

It is unclear what is the responsibility of the prison that gets the bags back but, inevitably, they do not get forwarded or, if they are, it will be some time later, when the person may have moved prisons again. The point is that there is a lack of a clear, consistent process across all prisons and carriers, which can leave prisoners frustrated and angry.

Another area of confusion and angst is the '28-day rule' – this is a prison service rule that clothes and belongings can only be brought in from the outside during the first 28 days in custody. Again, this comes unstuck when prisoners move between prisons. The sort of thing that happens is that a prisoner gets his property sent in within 28 days, but the prison takes time to process it. Until it does, it will not be on his property card. He then gets transferred, either directly or via court to a different prison, with his property still at the first prison. As it is not on his property card, it is hard to prove its existence – ideally, the first prison should send it on but often it does not.

So, the prisoner gives up and decides he will start again to get clothes sent in...but he is now over the 28 days, so he cannot. It is not difficult to imagine the frustration this causes. A governor can overrule this and allow a new parcel to be sent in, and we are pleased that this has happened at HMP Bedford. However, it is often a long and tortuous process to get there.

The key reasons for these problems are:

- a card-based system that is not fit for purpose
- a lack of clear protocols or service standards about communications between prisons
- the lack of any property-based metrics within the national prison performance system

These are HMPPS issues, which we raise every year, with no success. But, while they remain a problem, we will continue raising them.

6. Health and wellbeing

6.1 Physical healthcare

During 2022/23, we received six applications that raised specific concerns about healthcare. Predominantly, prisoners were having difficulties in accessing the service. One prisoner was finding it difficult to arrange an appointment with a doctor, another prisoner complained that there were no staff available to escort him to healthcare and, consequently, he had missed two dental appointments. A further prisoner was waiting up to 10 weeks for an electrocardiogram, while another prisoner had waited for two days for a healthcare appointment after sustaining a broken finger.

In our survey of prisoners, most had not interacted with healthcare, but of those who had, the experience was mainly negative. Comments included: 'Physical injuries before coming into custody. Doctor's appointment that never materialised and next one booked for day after release', and 'I had a shoulder op just before coming into prison, so have had no physio, or no gym for my mental health. This has gone on for three months now.'

Based on these interactions with prisoners, we would have to question whether healthcare is providing a satisfactory and acceptable service. Despite asking, we have not been given access to the monthly performance reports, so cannot make a full assessment.

6.2 Mental health

The mental health (MH) team has struggled, with very limited resources, to provide an effective service. We are pleased to hear that they have recently recruited to three vacant posts, along with a part-time psychologist.

However, one-to-one work is prioritised over other activities, no groups have been organised and there's been no attempt to make use of selected prisoners to help lead groups. As far as we are aware, little use has been made of handouts or other educational materials to help inform prisoners as to the nature of mental health conditions and treatment options. We have recently been told that 'crisis cards' and meaningful literature is being produced and we look forward to these making a difference.

Attendance at ACCT reviews is still patchy. There seems to be reasonably good attendance at the initial reviews, but not much after that. In particular, mental health staff do not seem to be routinely present when the decision is made to take prisoners off the ACCT. The prison tells us that this has now been addressed, so we look forward to effective closer working with the safer custody staff.

We were very encouraged when a mental health steering group, chaired by the Governor, was set up in autumn 2022. It was attended by all the relevant stakeholders from the prison and had the potential to bring an effective and integrated approach to mental health issues across the establishment. However, the group has not met for the since March 2023, and it is unclear if it will be reinstated. This is disappointing.

An example of a more integrated approach would be to increase the knowledge and skills of officers as they go about their practical, everyday work and help them to

think more 'psychologically' about the problems of prisoners, rather than simply 'custodially'. At a recent visit to another prison, one of our members attended a lunchtime session given by a psychiatrist and attended by at least a dozen healthcare staff, some officers and the Governor and his deputy. This type of initiative has not been tried in HMP Bedford.

As in previous years, we have also not received any information regarding prisoner perceptions of the mental health service, so we decided to collect our own data,

We interviewed 42 prisoners on a one-to-one basis, either on the wings, in CSU, in healthcare, or as part of ACCT reviews (a process that attempts to deter vulnerable prisoners from self-harm or suicide). All were given information before the interview regarding the purpose of the survey, what would be done with the data and a guarantee of anonymity. Prisoners then gave verbal or written consent. No prisoners refused to give consent. All the data were based on prisoner self-reporting.

The main findings were:

- Response times following a request to see a member of the healthcare team were very mixed. A total of 50% were very good (less than two weeks) and 50% were slow (more than three weeks). Where high risk of suicide or previous contact with a MH team outside had been identified in the prison reception, this usually resulted in a quick response. Once inside the prison, response times were generally much longer.
- For the people who were seen by the MH team, the initial interview tended to concentrate on questions only (45%), mainly to identify suicidal thinking and some offering general advice. There was very little use of handouts or written information. This seems like a missed opportunity.
- A quarter of the respondents said specific, individual advice was rarely given and, again, there was no use of written materials with to information about common conditions – for example: anxiety, depression, personality disorders, and neurodiversity (autism and ADHD/attention deficit/hyperactivity disorder).
- Follow-up after the initial meeting was limited, with 41% having no follow-up and 59% being followed-up. The follow-up was better with the psychologists.
- Overall satisfaction rating poor. Fewer than one-third (28%) were 'very satisfied' and 'quite satisfied' compared with two-thirds (64%) who were 'a bit dissatisfied' and 'very dissatisfied'. From comments, dissatisfaction seems to be related to perceived poor staff attitudes ('not caring', poor communication, perceived lack of knowledge.). On the other hand, high satisfaction was associated mainly with quick responses.
- Comments also highlighted:
 - Numerous reports of poor communication with the MH team: no acknowledgement of applications or referrals having been received; no explanations of delay.
 - Individual needs generally felt to be poorly addressed, particularly neurodiversity (we have been told that new appointments have been made that will address this).
 - Chaplaincy and the psychology team were repeatedly reported to be helpful.

We hope that the prison will take note of these findings and see what improvements can be made. The availability and distribution of written material about mental health issues and problems would appear to be an easy win.

Prisoners awaiting mental health transfer are now reported at the prison's daily morning meetings and there are now systems in place to manage this and escalate where necessary.

6.3 Time out of cell, regime

Time out of cell

Prisoners spend far too long in their cells. This is not good for their mental health, does nothing to reduce violence and self-harm (as can be seen in the figures in paras 4.2 and 4.3) and, in our view, is not a humane way of treating individuals.

The prison does not collect information about the length of time prisoners spend in their cell, neither is this something that is required by HMPPS to be uploaded into their performance hub. This is surprising.

In our prisoners' survey, all but six (that is 92%) said that they had over 20 hours in their cell each day and 42 (58%) said they spent 22-23 hours per day in their cell. So, most prisoners spend most of their time locked in their cells.

As part of the recovery from the Covid-19 restricted regimes, HMPPS wanted to take the opportunity to 'build back better'. This is included as part of a strategy to encourage rehabilitation, the principle being that prisoners should, predominantly, only be let out of their cells to do purposeful activity. While this might work at many prisons, the issues at HMP Bedford are:

- The education facility only operates four days a week (Monday to Thursday).
- For a great part of the last year the workshops have not been operational.
- Due to staffing issues, the gym has not been available for much of the reporting period, although it has recently reopened.

The principle of prisoners leaving their cells for purposeful activity may seem reasonable, but it does not work if there is no such activity to go to. Perhaps not surprisingly, the most common improvement that prisoners in our survey wanted is more time out of their cells. Others included more gym, more education and a consistent regime.

Regime

'Regime' is a term used to describe the arrangements for daily activities by wing and for the movement of prisoners. For prisoners, this means knowing what is happening when and that there will be officers to escort them, to, for example, education, family visits, legal visits and faith services.

Unfortunately, the prison has not been able to provide a consistently full regime, which means that prisoners cannot always go where they expect to, or a wing may be completely locked down for half a day, which means that no activities take place. This is what prisoners have told us and what we have witnessed. The prison does not have any summary data on how often the regime is provided.

6.4 Prisoner expectations

In our prisoners' survey we asked the question 'How hopeful are you for the future?' The results were both surprising and encouraging, with 58% saying that they felt hopeful for the future. Quotes included: 'Think I have decent future ahead of me and no more prison', 'Very excited to get out and make it up to my children', 'Very hopeful, I certainly won't be coming back to a place like this, just want to get my life back on track and get back to work' and 'Very hopeful as I'm not a bad person and have prospects'.

This does reflect the fact that while prison is a place of punishment, it can also offer opportunities and that a life of crime on release is not inevitable.

6.5 Drug and alcohol rehabilitation

The prison continues to have an effective drug treatment service, although, as in other areas, there are particular challenges around the number of remand prisoners. Sentenced prisoners receive intensive work around how they got into using drugs, how it affects their offending behaviour and how they can plan for a future without drugs. This course can be required as part of a sentence plan.

Although this facility is available for remand prisoners, it cannot be mandated – their focus tends to be more around housing, debt and court appearances. To address this, the drug support team has developed a bespoke course, with a certificate, that can be used in court appearances as evidence of a willingness to change. The key purpose is to encourage remand prisoners to address their drug abuse issues.

The change to the prison taking more unsentenced prisoners means that churn has increased. Prisoners cannot be referred to day programmes, supported housing and rehabilitation units on release, because the drugs team (called Supporting Change) do not know when they are coming out. In addition, the team cannot refer prisoners directly to the housing team (Interventions Alliance) but have to go via the Offender Management Unit (OMU), which can lose five days and, consequently, the opportunity to provide support on release to short-term prisoners.

7. Progression and resettlement

7.1 Education, library

Education

The prison's education college has continued to build on last year's progress. The monthly classroom observations, by both the regional quality lead manager and three quality performance specialists, have assisted in driving up the standards of teaching. As a result, 83% of the teaching staff have reached Grade 2 or above for the quality of their teaching – this exceeds the HMPPS target of 80%.

The evidence from these classroom observations shows that the teaching of English remains strong. In mathematics, the quality of provision has improved significantly over the past 12 months – several prisoners in our survey specifically commented on this. Bedford's work in this subject is now going to be used as an example of best practice.

The inclusion support coordinator focuses on teaching and learning strategies for students identified with neurodiverse needs. Evidence from the visiting observation and assessment team this year shows that some neurodiverse learners are achieving at a higher rate than those with no such difficulties. Last year, specialist staff helped 66% of ESOL (English for speakers of other languages) learners to be successful in their assessments. This year, the success rate reached 73%.

The coordinator's use of data from the rapid screener and the detailed screener (early arrival assessment tools), provides them with information and indicates learning improvement strategies that they then share with class teachers. This is dissemination and a shared approach, as opposed to one person's expertise contained within one 'specialist' classroom. While some progress has been noted, we have yet to see the results of the latest deep-dive exercise, which should give us a much clearer picture of the impact of intervention undertaken so far and how much more focus might still be needed in order to improve and consolidate its effectiveness.

In February, an internal inspection team visited the college. Their focus was on student behaviour. Their evidence showed that standards of behaviour in the college had improved, that the use of vapes had reduced and that incidents observed in the classrooms had been well managed by the teaching staff.

There are clear reasons for this progress. One is that staff moved the 10-minute break time, allocated to both morning and afternoon teaching sessions, into the classrooms and out of the corridors. This significantly reduced the opportunities for any anti-social behaviour and prevented the 'ragged' return of students, from the corridor to the classroom, that sometimes occurred. Another is the behavioural management training that has now been provided to teachers and staff.

Low attendance rates in class had been a major concern to us for many years. It was very pleasing to report a significant improvement in these figures last year. It is gratifying to note that this upward trend has been maintained during the past year and that attendance figures continue to show some improvement as the result of strong leadership and staff stability.

It is important to remember that attendance figures are recorded as a percentage of the numbers allocated to attend each class, not as a percentage of the whole prison population. As the result of sustained hard work and well implemented strategies, the ably led and motivated staff have raised the average attendance figure to 65% this year.

Attendance in F-wing has also improved, from last year's 60.38% to the 77.64% achieved this year.

It was unfortunate that the much-heralded multiskills course, which began last summer and was delivered in part by education, floundered after a few short months due to the long term illness of the appointed tutor. No replacement was able to be appointed and the prison has no plans to re-commission this course.

With much that is positive, it is regrettable that after a very brief flowering three years ago, no courses currently exist for prisoners to experience and enjoy any of the creative arts. The value of art as therapy, its positive impact on self-esteem and on aspects of personal growth and fulfilment, is very well documented. There is the opportunity for prisoners to complete their own art work for submission to Koestler Arts, a prison-arts therapy charity.

Library

The library is now providing a very good service. However, although attendance is very good for prisoners involved in education, access to it is much more difficult for those who remain on the wings. It is particularly difficult for kitchen workers, orderlies and prisoners in healthcare and F-wing.

The librarian and his assistant are very proactive, providing, for instance, Sudoko for the prisoners. They provide a welcoming, non-judgemental and empathetic space for prisoners within the chaos of daily prison life. The wing libraries are kept topped up with fresh stock (discards and donations). There are reading groups in D-wing and F-wing using Penguin readers. However, stock is still being lost through reception.

7.2 Vocational training, work

The industries' manager has described the past 12 months as the 'worst year' in terms of staff shortages and course disruption. What had been a team of 10 staff has been reduced by 50% since last autumn, due to staff departures and unfilled vacant positions.

As a consequence, workshops have only been operative in varying degrees, some more consistently than others. The bicycle repair course has been the most successful for attendance and continuity. Unfortunately, the well regarded and respected instructor sustained an injury in April, which meant the course could not operate for five months.

Contract packing has run consistently, with no periods of closure, although attendance has deteriorated during the reporting period. This course will shortly cease operations – temporarily, it is hoped – because the usual instructor is moving to take over the lapsed industrial cleaning course, which has not been available since December, when the specialist instructor left.

Since December, the Waste Management Industry Training and Advisory Board (WAMITAB) and bio-medical course has been seriously disrupted through staffing

difficulties. Only two groups of prisoners have been able to access the bio-hazard course this year.

The barbering course, very popular in previous years, has only run on one occasion this year, in February.

While definitive figures for workshop attendance are not currently available, we understand that figures are significantly down on last year.

The environmental team, whose numerous initiatives around the site drew so much applause in last year's report, has been limping along this year, due to staff shortages. There have been no new 'Greener Prisons' initiatives undertaken this year. Existing plantings have only survived, we learn, due to the goodwill of some staff members.

Whilst we are pleased that the long-awaited compactor was delivered to help streamline recycling procedures and reduce waste lorry traffic on the site, at the time of writing (September 2023), it is still not in use.

A new post of prison employment lead has been appointed this year, with two main thrusts to the role. Firstly, they are expected to forge links between large local employers and the prison. The second aim is to arrange employment for prison leavers to help reduce the rates of re-offending. This is deliberately ambitious and has the potential to make a lot of difference to the prospects of many prisoners. An early link with Vauxhall Motors has already been made but is still at the embryonic stage. We shall watch these intended developments with great interest.

7.3 Offender management, progression

With less than a quarter of prisoners in HMP Bedford being sentenced, there is less need for offender management and progression systems in the traditional sense. Remand prisoners tend to want support with knowing court dates or getting access to information and documents necessary for their hearings.

A prison environment is not well-suited to facilitating this, because of security concerns. For example, a prisoner recently approached us about the difficulty he was having getting the use of a computer to review his case notes and evidence. It turned out that the prison could authorise it, but there was only one person who could provide the necessary technical IT arrangements and they were on holiday for two weeks.

Our contact with the OMU has generally been positive and we have found the staff helpful and efficient. However, to improve the interaction with remand prisoners, we would support the two recommendations in the prison's remand strategy, namely:

- i) to consider allocating an OMU worker(s) to work with the remand cases within the establishment
- ii) to consider placing an OMU resettlement worker within the court to support prisoners released directly from court with any outstanding resettlement/accommodation concerns

7.4 Family contact

The new contractual arrangements for visits seem to have been successful, with 63% of prisoners in our survey saying that they had been able to keep in contact with their family. However, the remand population is entitled to receive at least three social visits per week, including weekends, which is not currently provided by the prison. We have been told the prison has made organisational changes that will increase visit opportunities for remand prisoners.

We are very pleased to recognise the improvements that have been made by the new provider of 'Invisible Walls' (an initiative that offers support to prisoners and their partners and children), as well as the provision of hot meals. Staff have shown a positive and imaginative attitude. For example, there was a very well-organised family day, as described in this extract from one of our rota reports: 'I attended a delightful family day event in the visits hall with 'Safari Stu', who brought along a selection of small animals (including cockroaches, snakes, a tortoise, chameleon, fluffy tarantula and tenrec), which children could handle safely. Ten families were present and (14) children, ranging from the ages of around 2 to 14 years, were all totally engaged with the presentation. Stu is used to visiting schools and all sorts of different venues and was not fazed by the restrictions of a prison. The atmosphere was relaxed and informal and officers were not wearing uniform. Several had come in on overtime. The café was serving drinks and snacks as usual and for the first time since Covid-19 a prisoner was working in the café under supervision.'

However, there are still problems that need addressing:

- there are terrible damp problems in the visits centre office
- the clearance of prisoners to work in the café takes ages
- there are not enough social video calls

7.5 Resettlement planning

The pre-release board is a key element to planning the release of a prisoner, by coordinating all the various elements, such as housing, job, drug-abuse support and finance. The board meets every two weeks and should include the prisoner – that is one of the key parts, so that they know what is happening. However, the prison has not managed to facilitate this, so the meetings take place without the prisoner. From our observations, this is not due to the core team (who work hard and are very conscientious with little support), but is the result of operational arrangements and priorities. Another victim of the inability to provide a full regime.

As in so much of this report, the high proportion of remand prisoners has a clear impact. There is a need for speed. The way the system works is that a prisoner is released into a probation area, such as Luton, Bedford or Hertford, for example. The released prisoner has to make regular visits to see his probation officer, so for practical purposes housing, doctors, drug-abuse support and other arrangements also need to be provided in that area. All that takes time, but the area of release is often not identified by the external probation team until, perhaps, a week before release. It is then too late to arrange things and the released prisoner must present himself as homeless to the local authority. Not a great start. There is a need for greater coordination in this area.

Official figures are collected by the prison, as required by HMPPS, for the number of prisoners who are released and have housing for the first night and the number of prisoners who are in employment three months after release. However, these apply to sentenced prisoners only and so are not applicable to the (around) three-quarters of prisoners who are on remand.

The figures are:

- On average, over the reporting period, 71% of sentenced prisoners had housing on their first night of release.
- On average, over the reporting period, 13% of sentenced prisoners were in work six weeks after their release.

The work of the IMB

Board statistics

Recommended complement of Board members	12
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	9
Total number of visits to the establishment	We visited between two and three times a week.

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	5	10
B	Discipline, including adjudications, incentives scheme, sanctions	1	10
C	Equality	4	8
D	Purposeful activity, including education, work, training, time out of cell	4	10
E1	Letters, visits, telephones, public protection, restrictions	5	10
E2	Finance, including pay, private monies, spends	8	6
F	Food and kitchens	2	8
G	Health, including physical, mental, social care	23	10
H1	Property within the establishment	12	10
H2	Property during transfer or in another facility	24	10
H3	Canteen, facility list, catalogues	4	4
I	Sentence management, including HDC, ROTL, parole, release dates, re-categorisation	10	11
J	Staff/prisoner concerns, including bullying	14	10
K	Transfers	1	1
L	Miscellaneous	7	2
	Total number of applications	108	182

Note: the total number of applications is less than the sum of the subject areas as some applications included more than one issue.

Appendix A IMB surveys



1 GENERAL SURVEY

WE WOULD LIKE TO KNOW WHAT YOU THINK.

PLEASE WILL YOU HELP?

The IMB (Independent Monitoring Board) monitors conditions in the prison. Throughout the year, during our visits to the prison and our talks with you, we are able to collect a lot of facts and figures, so we do have a pretty good picture of how the prison is operating.

This questionnaire gives many more of you an opportunity to share your views with us, in writing.

WE SHALL BE VERY GRATEFUL IF YOU WOULD KINDLY SPEND A FEW MINUTES TO TELL US ABOUT YOUR EXPERIENCES IN BEDFORD PRISON

ALL VIEWS AND COMMENTS YOU MAY MAKE WILL BE ANONYMOUS AND WILL NOT AFFECT HOW YOU ARE TREATED IN PRISON, IN ANY WAY.

HOWEVER, WE MAY USE QUOTATIONS FROM YOUR ANSWERS TO OUR QUESTIONS IN OUR ANNUAL REPORT.

Did you find the Induction procedure helpful?
How many hours, on average per day, do you spend locked in your cell?
How hopeful are you about your future?
Do you have any health or mental health worries? If so, was it easy to get help with these?
Do you like the way that your day is currently arranged for you?
What could the prison do differently to make life better for you?
Have you been able to make regular contact with your family?
How easy is it to find out things you need to know?

Was the change of serving your main meal, from lunch time to the evening, an improvement?
What do you think the prison does well?
How helpful are wing officers?
Anything else you want to let us know about?

Analysis of prisoner survey:

Was the induction helpful?

15 out of 72 had no induction = 21%; 39 out of the 57 prisoners who had an induction said it was useful = 68%. Looked at another way, 46% of prisoners either did not have an induction or did not think it was helpful.

How many hours on average do you spend in your cell?

All but 6 said that they had 20+ hours in their cell = 92%; 42 said they spent 22-23 hours per day in their cell = 58%

How hopeful for the future?

42 said they are hopeful for the future = 58%

Any health or MH worries? If so, was it easy to get help with these?

32 have not had any health issues = 45%

The picture with the remainder is mixed, with some saying they have received a good service from healthcare and mental health services, whilst others say there has been a long wait.

Do you like how your day is arranged?

Most don't like the way the day is arranged – too much time in cell.

What could the prison do differently to make life better?

Not surprisingly, the most common improvement wanted is more time out of cell. Others included 'more gym', 'more education' and a 'consistent regime'.

Have you been able to make regular contact with your family?

This seems to be a success area, with 45 (63%) saying they have been able to make regular contact with their family. However, there are issues with the cost of phone calls and the cut-off time.

How easy is it to find things out

A mixed picture here, with half saying it was easy, but a substantial number saying it wasn't easy. However, they indicated it was through other prisoners rather than officers.

Was the change of main meal to the evening an improvement?

There was a clear view that the change was an improvement, although some thought it did not make any difference.

What does the prison do well?

A mixed response here, and mostly negative, with 'locking doors' and 'nothing' the most popular answers. However, 11 said education was good and that the mathematics teacher was 'brilliant'. Best quote: 'Annoying people. Very good at that. Giving us slop food. Good at that. Making the jail seem good when it's really rubbish... very good at that.'

How helpful are wing officers?

Typically, a mixed response depending on the officers. However, it was more negative than positive.

Anything else?

Very much a mixed bag but including: '15 minutes' more exercise', 'cockroaches', 'pigeons and rats', 'gym not being open', 'be let out more and no regime, but apart from that it's really good, understaffed and education good.' Top quote: 'Dead rats in the shower power it's all the time, pigeons pooing on the servers, no regime but apart from that its really good.'

2 MENTAL HEALTH SURVEY

IMB Mental Health Consumer Satisfaction Survey - Summary

- A total of 42 prisoners were interviewed one-to-one, either on the wings (n=12), in CSU (n=8) or healthcare (n=4), or as part of ACCT reviews (n=18)².
- All were given information before the interview regarding the purpose of the survey, what would be done with the data and a guarantee of anonymity. Prisoners then gave verbal or written consent. No prisoners refused to give consent.
- All the data were based on prisoner self-reporting. It was not possible to make any checks on the validity of the information given.
- The data obtained are summarised in the table below.

No	Weeks to initial contact (from referral)				Content first interview			Follow-up		Overall satisfaction				
	<1	1-2	3-4	> 4	Q only	Q + general	Q + specific	Yes	No	Very Sat	Quite Sat	Don't know	Bit Diss	Very Diss
Wings, SSU and Healthcare														
24	3 (14%)	8 (36%)	4 (19%)	7 (31%)	11 (58%)	4 (21%)	4 (21%)	8 (40%)	12 (60%)	2 (10%)	4 (20%)	2 (10%)	3 (15 %)	9 (45%)
ACCT Reviews														
18	7 (39%)	2 (11%)	2 (11%)	7 (39%)	4 (28%)	6 (44%)	4 (28%)	6 (44%)	8 (66%)	4 (23%)	0 (0%)	1 (6%)	3 (18 %)	9 (54%)
COMBINED TOTALS														
42	10 (25%)	10 (25%)	6 (15%)	14 (35%)	15 (45%)	10 (30%)	8 (25%)	14 (41%)	20 (59%)	6 (16%)	4 (12%)	3 (8%)	6 (16 %)	18 (48%)

² We are very much indebted to the Chaplaincy team who conducted the ACCT interviews.

Key findings

- 1) Reported response times from the date of the application submission or verbal referral were mixed. A total of 50% were very good (less than two weeks), while 50% were slow (more than three weeks). Where high risk of suicide or previous contact with a MH team outside were identified in Reception, this usually resulted in a quick response. Once inside the prison, response times were generally longer.
- 2) The initial interviews tended to concentrate on questions only (45%), mainly to identify the risk of suicide. In about a third of cases (35%), some general information about mental health conditions was given verbally, but very little use was made of handouts or written information from reputable sources (e.g. Royal College of Psychiatrists, the mental health charity, MIND, etc.).
- 3) Specific advice regarding individual problems was rarely given (25%). Again, there was almost no use of written materials to give information about common conditions such as anxiety, depression, personality disorder, neurodiversity (autism, ADHD, etc).
- 4) Following the first interview, there was limited follow-up (41% No/59% Yes). Psychologists were mentioned on several occasions as providing good follow-up.
- 5) Overall satisfaction ratings were poor. Less than a third (28%) were 'very satisfied' or 'quite satisfied', whilst two-thirds (64%) were 'a bit dissatisfied'/'very dissatisfied'. This compares with national data from mental health services in the month of June where 88% of respondents were positive about their contact and less than 5% were negative or indifferent. From the comments, dissatisfaction seemed to be related to poor staff attitudes ('not caring', 'poor communication', 'perceived lack of knowledge'). High satisfaction appeared to be associated mainly with a quick response.

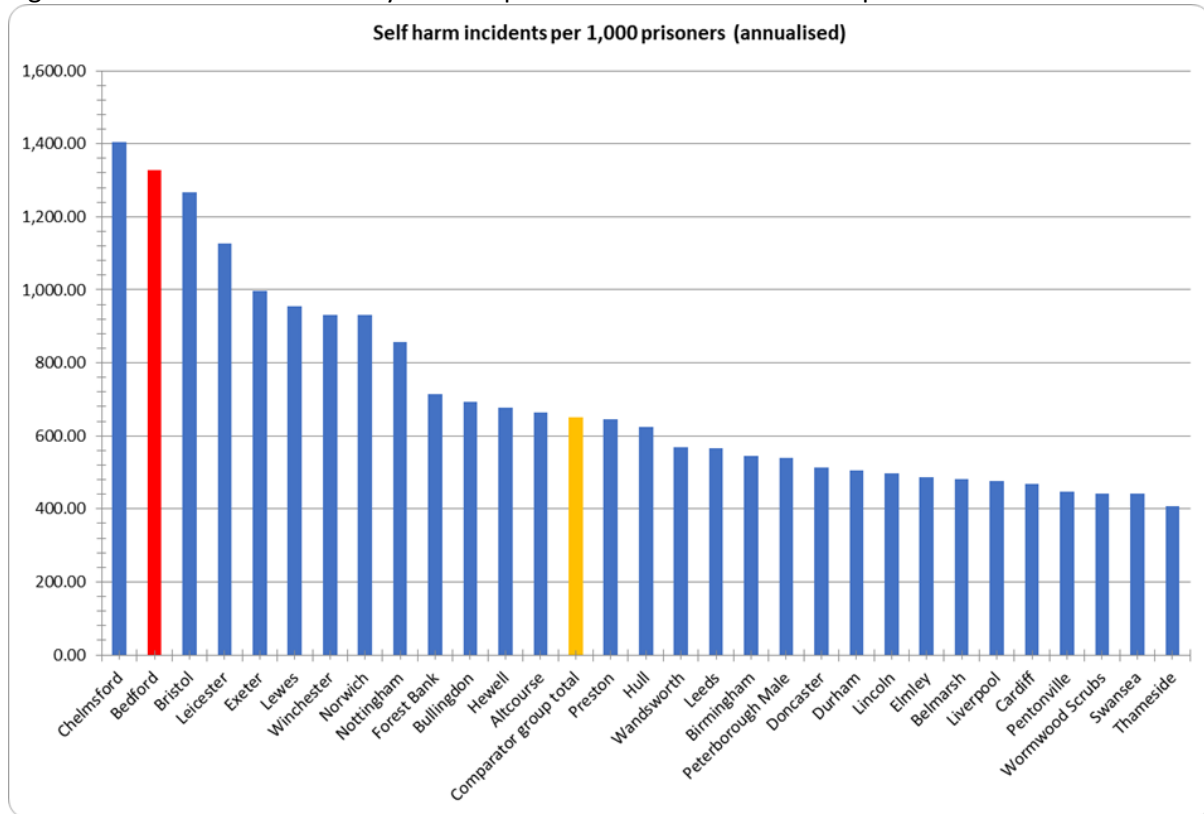
Further comments: On three occasions prisoners claimed that medication regimes which had been established in the community were stopped on entry to prison for up to three to four days before seeing a doctor (and generally having them re-established).

- Although a member of the mental health team was generally present at the first ACCT review, they were often not present when the decision was taken to stop the ACCT. This meant that the decision was usually taken by prison officers alone.
- Individual needs were generally felt to be poorly addressed, particularly personality disorders and neuro-diversity (autism, ADHD).
- There were numerous reports of poor communication with MH team: no acknowledgement that applications or referrals had been received and no explanations for delays.
- The chaplaincy and the psychology team were reported to be most helpful in providing consistent counselling and individually tailored support.

Appendix B: graphs and charts

Self-harm

Figure 1 self-harm incidents May 2022 - April 2023 in relation to similar prisons



Assaults

Figure 2: assaults on staff May 2022 - April 2023 in relation to similar prisons

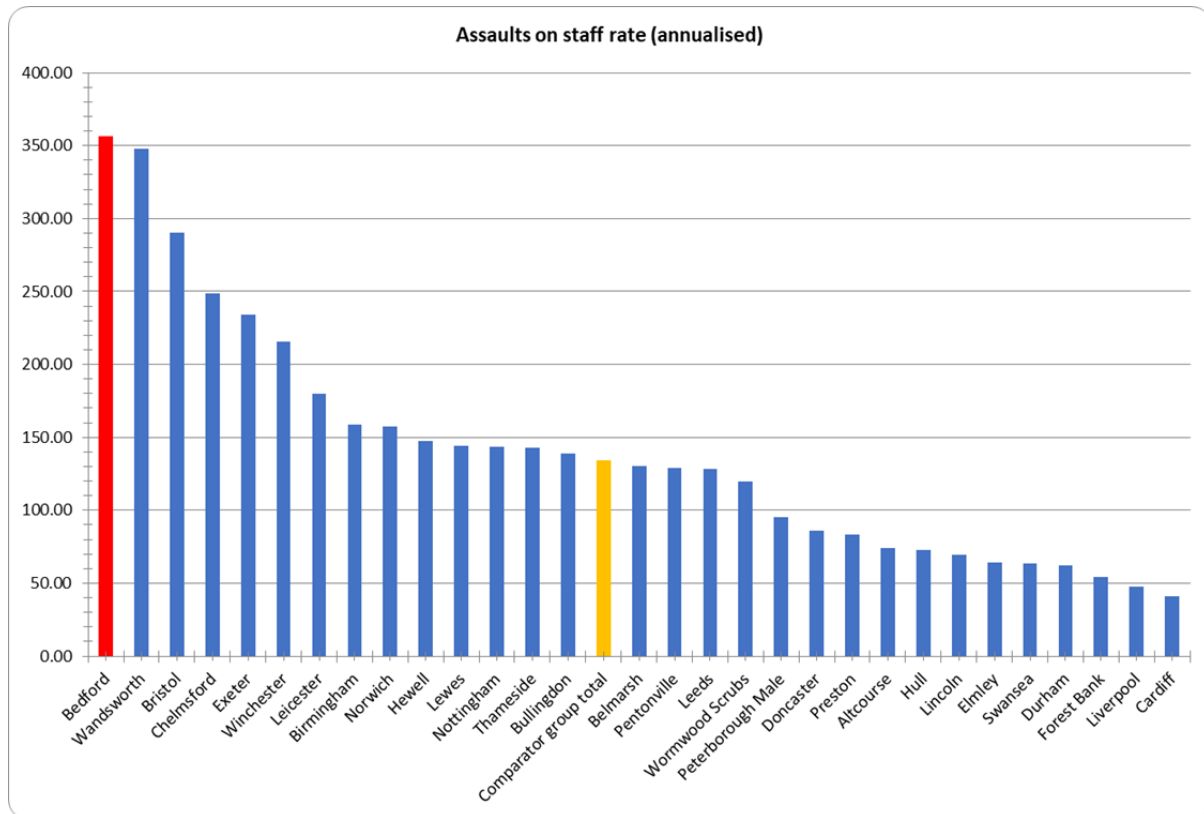
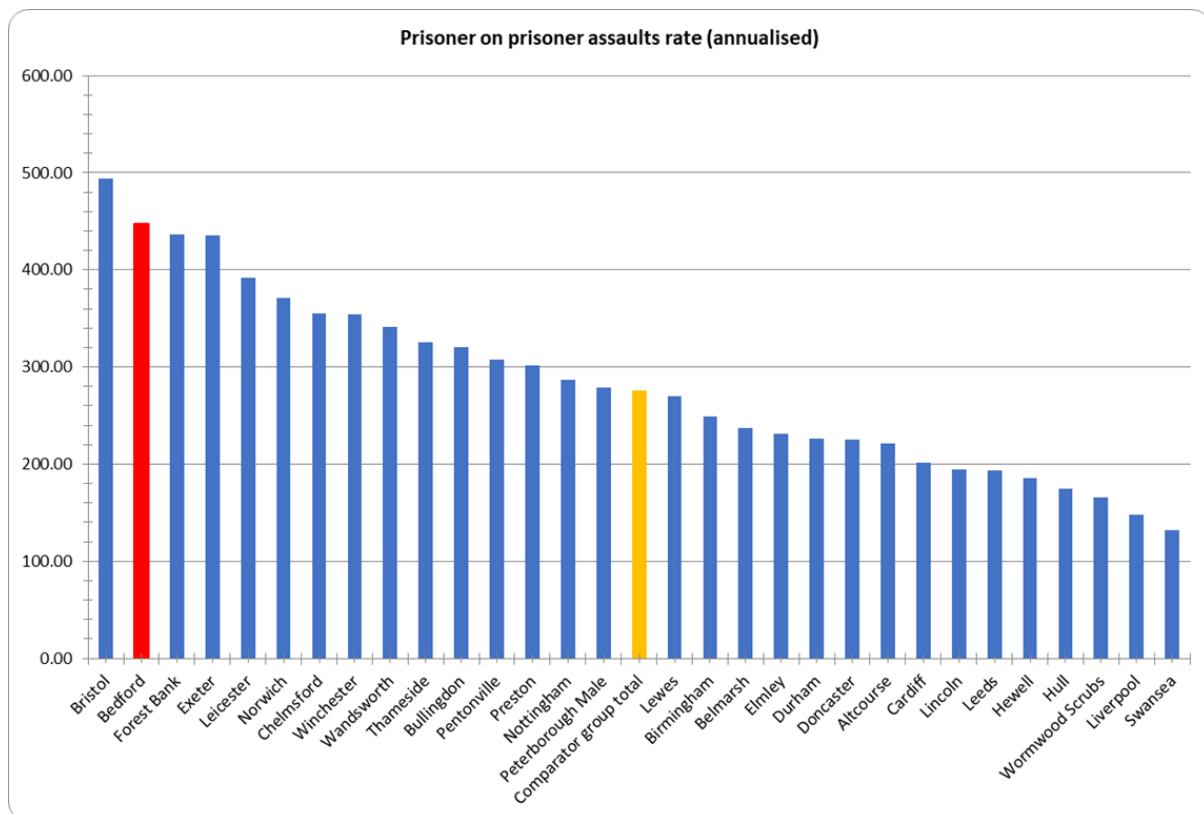
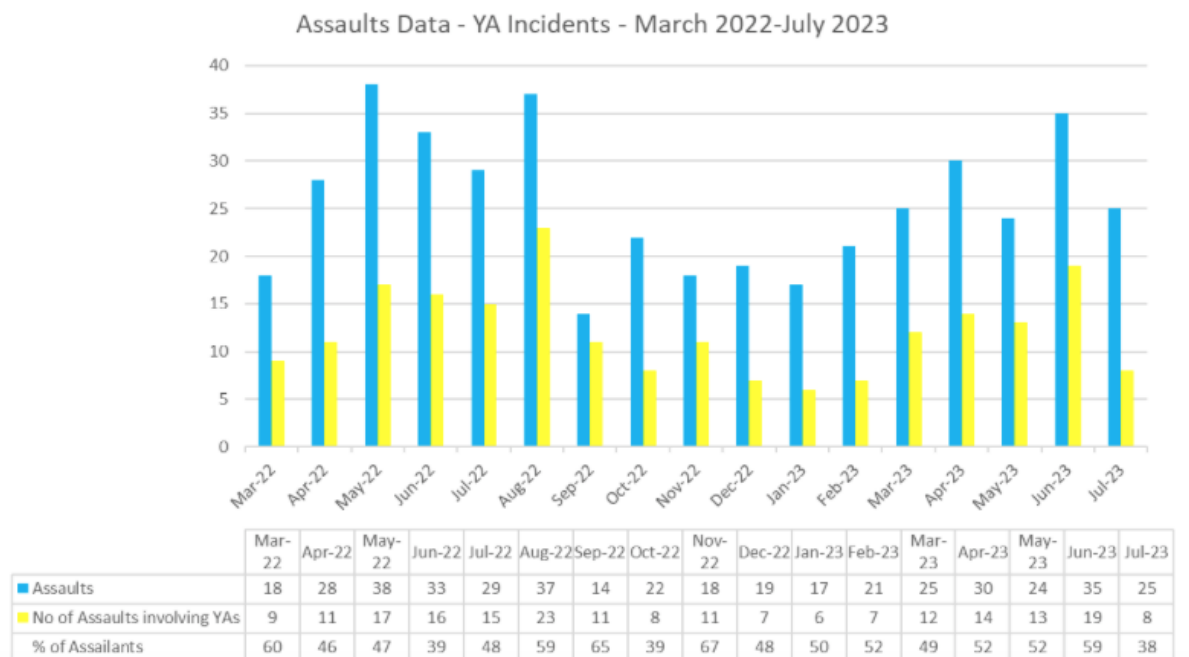


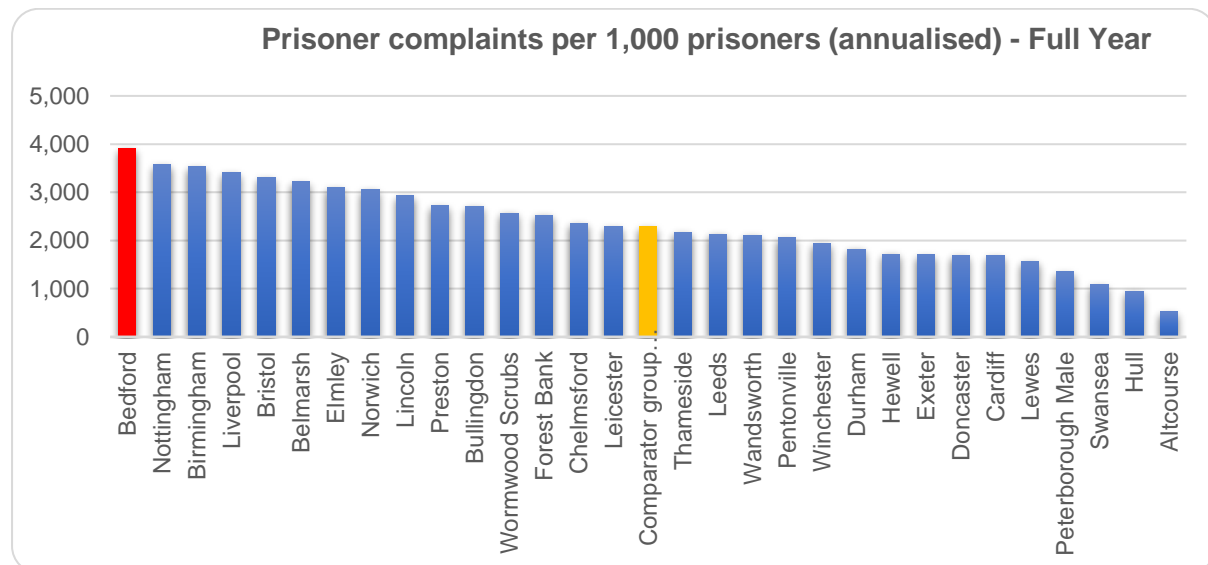
Figure 3: prisoner on prisoner assaults May 2022 - April 2023 in relation to similar prisons



Young adults' assaults



Complaints





This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at <https://www.gov.uk/government/publications>

Any enquiries regarding this publication should be sent to us at imb@justice.gov.uk