



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

**For reporting year
1 May 2023 to 30 April 2024**

Published September 2024



Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Key points	6
 Evidence sections 4 – 7	
4. Safety	11
5. Fair and humane treatment	14
6. Health and wellbeing	18
7. Progression and resettlement	22
 The work of the IMB	
Board statistics	24
Applications to the IMB	24

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

HMP/YOI Styal is the only women's prison in the northwest of England and has an operational capacity (the maximum number of prisoners that can be held without serious risk to safety, security, good order and the proper running of the planned regime) of 454¹ prisoners, aged 18 years and over, who may be on remand, immigration detention or serving sentences ranging from five days to life. As a local prison, it receives prisoners directly from court and has a large catchment area covering the northwest of England and north Wales.

The prison population is a complex mix of offenders, encompassing individuals serving short sentences of less than 12 months, as well as long-term prisoners, including those serving life sentences. As the reporting period drew to a close, the data revealed that Styal held approximately 26% of individuals who were on remand, with the remaining 74% being sentenced prisoners. The prison also held a substantial number of recalled prisoners, a significant proportion of whom grapple with issues related to substance misuse and mental health.

The prison consists of 17 standalone houses, each accommodating approximately 20 prisoners, including a community house (Bollinwood), situated outside the fence, for up to 25 prisoners categorised as suitable to live in open conditions; incentivised substance free living house, which is the first in the women's estate; a mother and baby unit (MBU), which accommodates up to nine prisoners and 10 babies; and a further house, which has been adapted to accommodate prisoners with disabilities.

The prison also has a cell block (Waite wing), used for remand, detoxing and prisoners who are not suitable to be located on a house. New prisoners are now located in the induction centre (IC) on Waite wing. There is a ten-bed care and separation unit (CSU), used to house some prisoners with poor behaviour, as well as those in temporary cellular confinement, and occasionally for their own protection. The Valentina unit (a time-out, short-stay facility) accommodates up to ten prisoners in single rooms.

Spectrum Community Health (Spectrum), a community interest company, continues to have the contract for primary healthcare, drug and alcohol recovery services (DARS) and social care. Mental health care is provided by Greater Manchester Mental Health NHS Foundation Trust (GMMH). Spectrum also provides substance misuse treatment.

The prison education framework provider is Novus. GeoAmey holds the contract for works within the prison and for escort services.

Community resettlement services (CRS) providers are Ingeus, Lancashire Women, Greater Manchester Women's Support Alliance and PSS Women's Turnaround. PSS subcontracts services for Cumbria to Women's Community Matters.

Since April 2022, the Prison Advice and Care Trust (Pact) has held the family services contract and Action for Children has run the mother and baby unit.

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.

The establishment has a number of workshops and opportunities on site for training and rehabilitation into a working life in the community. These include laundry, maintenance, decorating, catering and gardens. Outside agencies operate Recycling Lives, Remade with Hope and The Clink restaurant, all of which have provided work opportunities for prisoners during their sentence and job opportunities on release.

The prison has seen another change in leadership, with the interim Governing Governor leaving post in November 2023, replaced by an experienced Deputy Governor until January 2024, when a new permanent Governing Governor took up post.

3. Key points

3.1 Main findings

Safety

- The Board has observed a committed, multi-disciplinary and thoughtful approach to safety. This has been demonstrated through strong leadership, effective analysis of data, extensive knowledge of prisoner needs and a high level of care and compassion.
- Styal had the highest rates in the female estate for both prisoner-on-prisoner and prisoner-on-staff assaults during the reporting period. The prison also recorded the third highest level of self-harm in the women's estate, the majority of which was committed by a very small number of prolific self-harmers.
- The Board noted that the prison's approach to safety has been compromised throughout the reporting year by the increasing number of prisoners with very complex needs, including significant mental health issues, admitted to the prison. These prisoners had a disproportionate effect on the number of incidents of self-harm, violence and assaults.

Fair and humane treatment

- The Board has observed positive relationships and work between staff and prisoners. In particular, the continuing use of laptops has enabled improved and more direct communication from prisoners to internal service providers and agencies.
- Accommodation, particularly in the 17 houses, remains a key concern. The Board has observed longstanding maintenance and repair delays, including lack of a proactive programme of repairs to leaking roofs and gutters, poorly fitting windows and broken paving stones. The limited number of toilets and bathrooms has impacted on decency standards and the furniture in communal areas is insufficient for the number of prisoners on each house.
- The care and separation unit (CSU) has been used sparingly, and weekly monitoring showed the provision of a fair and safe regime. However, concerns are increasing about the use of segregation for those with complex and severe mental health needs, when appropriate mental health facilities in the community are not available.

Health and wellbeing

- The Board has observed that Spectrum have been unable to consistently provide safe and timely administration of medicines. Prisoners' ability to access health services remained adversely affected by shortages of both prison and healthcare staff and the demands of the regime.
- Regular monitoring has indicated that pregnant prisoners, and mothers and babies are well cared for by the well-staffed peri-natal team. Recent thematic monitoring demonstrated very good safeguarding procedures in the mother and baby unit, where the mothers described the positive support they were given by staff.
- The Board has observed that the Drug and Alcohol Recovery Services (DARs) has broadly met the needs of prisoners on arrival and release.

However, there have been shortcomings in the service offered to prisoners during their sentence to maximise the number of women on recovery pathways.

- There has been a notable increase in the number of prisoners entering the prison with existing health needs and complex and enduring mental health conditions, which has led to an increased demand for healthcare services. There has also been a rising demand for social care, especially for prisoners with learning difficulties, which has added to the pressure on an already stretched service.

Progression and resettlement

- The prison has demonstrated a continued failure to provide all prisoners with their statutory entitlement of 30 minutes per week in the library.
- Attendance at work and education has not been sufficient and needs improvement. Reasons for non-attendance recorded by the Board are multi-factorial, including clashes with healthcare and other appointments and medication timings.
- The prison has not provided sufficient activity spaces to enable every eligible prisoner to have the opportunity to attend work and/or education full-time.
- There has been significant recent pressure in relation to finding accommodation on release for prisoners, despite the positive working observed between the pre-release team and Commissioned Rehabilitative Services (CRS) providers.

3.2 Main areas for development

TO THE MINISTER

- What plans are there to address the decency and safety issues raised by the poor standard of accommodation at Styal?
- Will the Minister speak to colleagues in the Department for Health and Social Care to improve prisoners' timely access to specialist mental health facilities in the community, where required?
- What additional resource will be made available to enable Styal to provide a safe environment for the most vulnerable and mentally unwell individuals?
- What progress has been made with the categorisation review referred to in the response to the Board's previous annual report?
- What specific consideration has been given to the impact of the recent changes to the recall system on female prisoners, in particular those with family ties and post-release accommodation challenges and how do these changes fit with the national Female Offender Strategy?

To HMPPS

- What further support can be provided so that the important activity of key work is delivered consistently and to a high standard for all prisoners?
- When will the RECONNECT service (care after custody service) be available for prisoners leaving Styal?

- The cost-of-living crisis has disproportionately impacted prisoners. What plans are in place to consider an increase in budget available for prisoner wages to offset this increase?
- Funding for a new healthcare building has been agreed for Styal, but we understand building work has been delayed until 2025. What guarantees are there to ensure that this happens?
- The Board understands further workshops are planned, or are due, to start imminently in 2024-25. What further HMPPS support and assistance can be provided to increase the number of workshop places and employment opportunities for the prisoners?
- The use of laptops in the prison has been effective in providing prisoners with more independence and better management of their own affairs. The laptops have also provided very good opportunities for therapy, private reflection and education. When will new content, including a word processing facility be made available for prisoners to access?

TO THE GOVERNOR

- What action can be taken to address the ongoing problems with accommodation standards to ensure decency and humane treatment at Styal?
- The Board have observed recent improvements in key work allocation and completion. What more is planned to ensure that timely and high-quality key work sessions are delivered to every eligible prisoner, in line with national targets?
- How does the prison intend to ensure that all prisoners have access to the library for at least 30 minutes per week?
- How and when will the Spectrum contract be reviewed to support the changing healthcare needs of prisoners?
- What progress is being made in reducing non-attendance at healthcare, education and activities, caused by scheduling conflicts.

3.3 Response to the last report

To the Minister:	
Financial support for pre-release planning for remand prisoners.	Response: Indicates that HMPPS intends to extend support to unsentenced women.
	Progress: Embedded pre-release team resource improved; access to new contracts and funds by external CRS providers is still ongoing at end of the reporting period, so not yet available in all areas.
To the Prison Service:	
Long-term strategies for categorisation.	Response: A review is taking place to ensure categorisation and risk management is appropriately balanced with population management.
	Progress: Unclear
	Response: All large-scale maintenance and refurbishment projects are through the

Competitive tendering to enable a more timely solution to concerns around accommodation?	Ministry of Justice; £85,000 committed to replace boilers, with a focus on essential fire upgrades; funding for decency proposals to be presented to the assurance panel.
	Progress: Refurbishment has done little to address the issues of decency, and furnishings in the houses are inadequate for the number of residents; some improvements on Waite wing noted.
Inadequate accommodation for the pharmacy service, including the way in which medicines, including methadone, are transported?	Response: New healthcare centre proposed, with works due to start in 2024. Staffing requirements under discussion.
	Progress: No work has started on the new health centre, and the planned temporary pharmacy building has not materialised; adequate healthcare staffing remains an issue.
Review of staffing budgets in the coming year?	Response: The staffing position has improved, and since January 23 a good regime has been delivered
	Progress: Ad hoc staffing issues remain, due to short-term urgent medical escorts needed (see below).
Support for key work to be delivered consistently and to a high standard for all prisoners, even with the current staffing levels?	Response: Staffing shortages are now largely due to temporary staff absences. Key work delivery is monitored daily and is improving in quality - assurance processes are now in place to assess this.
	Progress: Key work remains a concern; some recent improvement but national targets not yet met.
What additional support can be provided to female prisons to help them meet the demand for escorts.	Response: HMP Styal is providing three staffed escorts per day for non-urgent medical appointments, and always endeavours to meet the need for urgent escorts
	Progress: Ad hoc staffing issues remain, due to urgent medical escorts needed.
When will the proposed female clothing issue be rolled out to all female prisons?	Response: A new range of female clothing scheduled to begin in autumn 2023 and available to order from December 2023.
	Progress: Clothing rolled out
Increase wages in line with inflationary pressures?	Response: 10% uplift in private cash allowances in September 2022; value lines added to 'canteen' in November 2022; wage structures in the women's estate under review.
	Progress: The prison's allocated budget for wages does not appear to have been increased this year.

Pre-release team vacant posts	Response: Assured that the team will be fully staffed by early 2024
	Progress: Team currently has one vacancy; recruitment is under way
To the Governor:	
Increased number of releases on temporary licences (ROTL).	Response: None received
	Progress: No longer relevant, due to non-expansion of open places; community ROTL placements have diversified.
Reduced number of personal development programmes.	Response: None received
	Progress: Two Thinking Skills programmes and a Working with Anger course have been put in place.
Library access	Response: None received
	Progress: Some improvements since Novus took over, but still issues due to overall timetabling/regime.

Evidence sections 4 – 7

4. Safety

The Board has observed a committed, multi-disciplinary and thoughtful approach to safety. This has been demonstrated through strong leadership, effective analysis of data, extensive knowledge of prisoner needs and a high level of care and compassion. The development of a trauma-informed environment and the increased focus on psychological support for prisoners has helped to promote positive early interventions and provide staff with more appropriate de-escalation techniques. However, the Safer Custody meetings have not always taken place on a regular basis, which has occasionally impacted on the ability of the Board to carry out timely monitoring as recent data cannot be considered to supplement rota visits and reports.

4.1 Reception and induction

The new induction process introduced in 2023 provided a much-improved transition into prison life. All the relevant checks, processes and assessments were in place, and the Board saw a high level of professionalism and care from staff and peer mentors.

There has been an improvement in the quality of food available for new prisoners, although appropriate clothing, especially nightwear and underwear, has remained a key issue. However, the Board has noted that the prison has continued to receive prisoners late in the evening, some of whom arrive without appropriate paperwork. This affects the ease of their transfer and their initial access to services and advice.

4.2 Suicide and self-harm, deaths in custody

On average, the prison admitted 6-7 prisoners with severe mental health conditions every month over the reporting year. The Board has observed that these prisoners have frequently required special accommodation, constant watches and repeated visits from healthcare staff as a result of prolific self-harm, refusal to take medications and non-compliance. The impact on resources, staff and other prisoners has been hugely disproportionate and drained attention and time from others in need of care.

The Board has monitored those prisoners who are mentally unwell or are a significant risk to themselves, to the point of likely needing a secure mental health placement to address their support needs. It has been incredibly difficult securing the appropriate placements needed for these individuals and, despite its best efforts, the prison is not resourced to provide the required level of support. This was highlighted by the fact that seven prisoners this year were sectioned on release at the gate.

The number of Assessment, Care in Custody and Teamwork (ACCT) plans (used to support prisoners who are at risk of self-harm and suicide) has remained relatively stable, although they increased over the reporting year from a daily average of 29 in May 2023 to a high of 44 in December 2023 and 34 in April 2024. The Board has seen evidence through its monitoring that suggests the ACCT process is secure, properly documented and tracked and regularly reviewed.

The Board has noted that self-harm incidents have increased over the year. The majority of self-harm continued to be from a small number of prisoners. In October 2023, there were 234 acts of self-harm by 34 individuals, with 195 of these carried out by 10 prolific self-harmers. In February 2024, 15 prolific self-harmers were responsible for 93% of all incidents. Regular monitoring has, however, indicated that the majority of prisoners do not self-harm, as evidenced in March 2024, when 390 (93%) of prisoners, including 85 with a history of self-harm, had no incidents.

The main type of self-harm has been recorded as non-weight bearing ligature, followed by cutting. The prison has a high level of recording every self-harm incident, of which very few lead to active and continuing intervention by healthcare staff. The primary triggers identified by the prison are drug and 'vape' debt; the breakup of relationships; access to medications and lack of activity. The Board has recognised a growing proportion of self-harm incidents emanating from the 18-24 age group. Of the 426 incidents in February 2024, 279 were attributed to young adults, five of whom were prolific self-harmers.

There has been positive peer support through the Listeners scheme (prisoners trained by the Samaritans to provide peer support) for all prisoners, and the 'Early days' programme has identified those most vulnerable to self-harm on entry to the prison. The 'Stepping Stones' programme also continued to provide therapeutic support for other vulnerable women, with a range of art, music, meditation and reflection programmes.

The Valentina unit, which offers short-term respite care for vulnerable prisoners, continued to provide excellent care. The unit has been refurbished and redecorated and the Board has recorded the actions of a committed and professional team of staff who understood the complex needs of the prisoners and consistently responded with patience, good humour and understanding.

The Board notes with sadness that there were three deaths in custody during the reporting year, all of which were apparently self-inflicted and one which occurred after release from prison. HMP/YOI Styal is now designated as a 'cluster site' as a result. The Prisons and Probation Ombudsman (PPO) reports have focused on the use of code red (an emergency response to indicate that a prisoner is bleeding) and code blue (to indicate that a prisoner has breathing difficulties) alarms, and the appropriate use of resuscitation. There have been three inquests over the year which date back to previous years.

4.3 Violence and violence reduction, self-isolation

The data available to the Board revealed that prisoner-on-prisoner assaults peaked in July 2023 but had fallen by April 2024 to slightly below the figures for the same period in the previous year. Key triggers were linked to drug and vape debt, offence-related bullying and insufficient supervision on the houses as a result of staffing shortages. Prisoner-on-staff assaults had a similar pattern, peaking in November 2023 and by April 2024 were below same period for last year. In January 2024, 11% of assaults were committed by women, who were then transferred to secure mental health placements.

As with self-harm, the Board noted that the majority of assaults on staff were carried out by a very small number of repeat perpetrators, with 56% of all assaults against staff in February 24 attributed to just one prisoner. In January 2024, 47% of the

assaults against staff resulted from the use of force or through prevention of self-harm.

Offence-related violence remained a key area of focus for the prison, and a poster campaign and training programme were made available to improve recognition and promote a more consistent approach to staff responses and the application of sanctions. The prison has expanded provision for staff-reflective sessions with the psychology team, which the Board believes has had a positive impact on helping staff cope with the traumatic incidents they deal with on a daily basis.

4.4 Use of force

Figures available to the Board showed that Styal had the highest level of use of force (UoF) in the women's estate, with the number of incidents increasing from 71 in May 2023 to 99 in April 2024. As with self-harm, the majority of incidents involved a small number of prisoners who had to be repeatedly restrained as a result of their behaviour and non-compliance. In April 2024, there were 28 incidents of UoF to prevent self-harm, with four prisoners responsible for 89% of all incidents.

The minutes from the weekly UoF meetings were analysed and monitored by the Board. Issues around the wrong use of holds, inaccurate paperwork and an inconsistent use of body worn video cameras (BWVCs) have been raised and discussed. Many of these issues have been addressed through training and awareness raising, and de-escalation techniques were being used more regularly as a consequence. However, staff continued to need reminders to turn on their BWVCs to record de-escalation in practice.

4.5 Preventing illicit items

Despite the enhanced security measures introduced for scanning all prisoners, staff, visitors and mail, there remained ongoing issues with illicit substances in the prison. There was an increase of 48% in drug reporting and the main ingress appeared to be through mail (including legal letters), recall prisoners and social visits. The Board noted a clearly evident link between the level of illicit substances in the prison and the incidence of bullying behaviour, drug debt and violence.

The medication queues have not always been adequately supervised and this has been noted to increase the potential for illicit trade in prescription drugs amongst prisoners.

There was an increase in mandatory drug testing, although targets have still not been completely met. The security team were effective in raising awareness about the drugs entering the prison, and all staff were vigilant around the financial activities of 'prominent nominals' (those suspected of criminal activity in the prison and under surveillance) and organised crime group (OCG) prisoners. More recent concerns have focused on the increased availability of synthetic opioids.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

Accommodation across the prison has deteriorated over the reporting year, despite some improvements to the prison wing. The Board has observed longstanding maintenance and repair delays, including a lack of an ongoing programme of repairs to leaking roofs and gutters, poorly fitting windows and broken paving stones.

Both sides of the wing have been decorated, with new flooring and new soft furnishings in the communal areas. However, the Board continues to raise concerns about the 17 houses and carried out a thematic monitoring exercise in 2023, which was revisited in January 2024.

This revealed that communal lounge and dining areas did not provide enough seating for everyone residing within each house. At worst, four houses, with an average of 20 occupants, provided sofa space for just six people. Dining room seating was equally compromised, with three houses having no seating at all and only two houses where the prisoners felt that seating was adequate.

Most houses had on average, three toilets and three bathrooms, for an average of 20 prisoners. This lack of decency has remained a concern for the Board, as does the number of multi-occupancy bedrooms, with only 40 single occupancy rooms across the 141 bedrooms, which also included 31 rooms for three, 16 rooms for four, and one room for five occupants,

A similar monitoring exercise by the Board in November 2023 looked at the quality of food in the prison. In three areas, the food looked appetising, although negative comments were made about the pre-portioned bags of salad containing a lot of water and some of the portion sizes were questionably small, mainly for those newly arrived prisoners on a default menu. The choices and portion sizes for this menu have now improved.

The servery areas on the wing were generally clean and tidy and queues of prisoners were well managed and orderly. The ordering system through the laptops was made as easy as possible through the use of symbols and colour codes, with sufficient choice, although about half of the prisoners raised concerns about access to fresh fruit and vegetables. Regular monthly surveys were available on the prisoner laptops and comments and suggestions appeared to be considered carefully by staff.

The Board has raised issues in previous reports about the poor provision of suitable clothing for the women's estate. Whilst there are still some concerns about the range of clothing provided by HM Prison and Probation Service (HMPPS), the supply of clothing for women is now much improved, although there was still a dependence on external appeals and campaigns for suitable outdoor clothes, nightwear and underwear.

5.2 Segregation (CSU)

Only two prisoners have spent more than 42 continuous days (the limit allowed without external authorisation) in the CSU and the 10-bed unit is rarely more than half full. An analysis of the available data from the segregation, monitoring and review group (SMARG) clearly showed that the unit has been used sparingly and proportionately, with the number of days spent on the unit averaging out at less than

eight for the year. The two prisoners with extended times had a history of damaging their cells. The unit was staffed by officers with the appropriate aptitude, knowledge of the prisoners and understanding for the challenge nature of the unit. The Board observed that staff remained helpful and maintained a respectful and humane regime often in the face of difficult circumstances.

IMB attendance at good order or discipline (GOoD) reviews for observation purposes, was, again, sporadic due to an inconsistency in review timings, although regular monitoring of documents showed the staff were conscious of the importance of prisoner management and rehabilitation. Figures have shown that the total number of offences requiring adjudication (a disciplinary hearing held when a prisoner is alleged to have broken prison rules) has decreased during the reporting year, with 'disobeying a lawful order' topping the list of offending, followed by the possession of unauthorised articles, including drugs and alcohol. Significantly, Board members have identified some reviews and adjudications as exemplary.

A number of prisoners have recognised mental health problems and have consequently needed alternative accommodation outside the prison. Officers have expressed the need to make the unit seem more welcoming but plans to improve facilities have been thwarted by one prisoner who damaged cells at a prolific level. Some improvements have been noted in the outside area, although the outside exercise area remains bleak. There have been cosmetic changes in the cells and the unit has been freshly decorated.

The use of special accommodation (a cell where the furniture, bedding, sanitation, etc, have been removed in the interest of safety) has been the exception and was observed by the Board to be a last resort when prisoner safety was likely to be compromised by prolific self-harm or dirty protests.

5.3 Staff and prisoner relationships, key workers

Staff numbers have slightly improved over the reporting year, helped by the fact that the prison has had access to external funding, however not all of the externally funded posts are included within the Target Staffing Figure. The posts funded in this way have supported initiatives that benefit prisoners identified as facing specific challenges, such as the young adult programme, and the appointment of a neurodiversity support manager (NSM).

The Board has observed that for the majority of prisoners and staff, relationships were mutually respectful and appropriately friendly. We have witnessed staff being caring, as well as helping in practical ways.

Prisoners have shared their frustrations with the Board, for example, when post has not been collected or they have waited most of the morning to be escorted back from a healthcare appointment. However, this is rarely a complaint against specific officers but about the way things are organised. Prisoners living on the houses have told the Board they would like an officer, preferably the same person, to be based in the house so that they could all get to know them better.

Senior managers are committed to giving prisoners a forum in which to ask about issues and to suggest solutions. The community council was the latest iteration of this forum, which is under review. The meetings we have observed have been

positive. Prisoners have accessed relevant information via their in-cell laptops, although this often needs good literacy skills, which some prisoners do not have.

Key work has remained an issue of concern for the Board, as the national target of 45 minutes per week with a key worker has not been met. There has been some improvement since January 2024 in the number of sessions scheduled, from 300 during the last reporting year to 1686 to date, with a current local target of two sessions per month). Prisoners indicated that these sessions were frequently cancelled when staff shortages occurred and the quality of these interactions was inconsistent. The Board has acknowledged that the centrally imposed target is probably over-ambitious but identifies quality assurance of key work as an important area for improvement.

5.4 Equality and diversity

Equality data has been challenging to access. Meetings focussed on the different equality areas protected by legislation (including race, disability, religion and sexual orientation) remain somewhat sporadic. The disability meetings were run efficiently, with actions raised by the prisoners, which were addressed. A neurodiversity support manager (NSM) was appointed during the year to support neurodivergent prisoners.

Data seen by the Board indicates that discrimination incident reporting forms (DIRFs) were not always addressed in a timely manner. For example, none of the DIRFs raised during April 2024 was progressed within agreed timescales.

The prison had a specific programme of support for transgender prisoners, including a board held on arrival, support assessed and a voluntary agreement put in place around clothing, searches and support workers. Efforts were made to support transitioning and access to medication enabled through the NHS or private providers.

During the reporting year, the Board monitored access issues, especially to the visits' hall, social visits video link and the library, where wheelchair access was found to be challenging but possible. Ease of disability access around the remainder of the prison has been noted as variable. The showers on the wing were recently refurbished but still had a 'step', which impacts access and privacy/dignity for disabled prisoners. Gym classes were adapted, where possible, to meet the needs of all prisoners.

The Board was made aware that one prisoner officer was the target of repeated racial abuse by prisoners. Senior leaders in the prison acted quickly to deal with this. Several prisoners raised DIRFs about this issue because they were upset at the way the officer was spoken to. Of the 158 applications (prisoners' written representations) to the IMB, only three were equality related, covering religious and racial discrimination - down from five the year before.

During the year, education noted a sudden increase in English as a second language (ESOL) students, from the usual 6-8 to over 12, resulting in a waiting list for classes. Pregnant women without English speaking ability were well supported.

5.5 Faith and pastoral support

The prisoners spoke highly of the chaplaincy service. Thematic monitoring of the use of laptops carried out by the IMB found that prisoners were now able to request support from the chaplaincy on their laptops.

Religious and cultural festivals were well supported by the chaplaincy and the kitchen. In addition, halal and kosher food were readily available to prisoners, although the kosher food had to be ordered in advance, as it was ready-made and was reported to the IMB to be fairly limited in choice.

The Board has observed compassionate care being given by chaplaincy staff throughout the year. Many of the women have complex needs and staff have been seen to be patient and kind during difficult circumstances.

5.6 Incentives schemes

The Board has noted a very small number of prisoners on the 'basic' (lowest) level of the incentives scheme. We received 15 applications regarding discipline, including the incentive schemes, and were aware of the ongoing review of the local incentives policy by the prison.

5.7 Complaints

The prison has a well-managed complaints process, which the Board monitors by looking at a monthly 10% sample of complaints (Comp1s, or ordinary complaints) and their replies. Complaints were taken seriously and during the reporting year, the Board observed that more officers were willing to speak to a prisoner to try to resolve the problem, rather than merely writing a reply. The Board was concerned that Comp1 forms and Comp2 envelopes (for confidential complaints) were not always available in some of the residential areas and, therefore, prisoners needed to ask an officer to provide these, which some were reluctant to do.

During the reporting year, 387 prisoners submitted 797 Comp1s, in line with the previous year. The largest number of complaints concerned property and staff. Of the replies the Board monitored, over 90% were answered within the stated timeframe. Most of the staff responses appeared to use the principles of procedural justice to formulate their replies. Some prisoners with very poor literacy skills found the replies used language and sentence structure that was beyond their ability to read and understand. A minority of prisoners told us that they were 'fobbed off' or not listened to, even though they had received a reply.

In addition to reviewing a monthly sample of 10% of all complaints, we have also reviewed complaints from prisoners identifying as black, Asian or other minority ethnic groups. Numbers of such prisoners were small and monitoring has not highlighted any disparities or concerns.

5.8 Property

The Board has received an increased but still relatively small number of applications about property this year, despite the number of transfers and the overall churn of the prison population. Where any losses had been recorded, appropriate compensation was paid to prisoners.

6. Health and wellbeing

6.1 Healthcare general

The Board is of the view, based on monitoring and observation over the reporting period, that better communication between the healthcare providers and the prison would potentially improve outcomes for prisoners.

Between September 2023 and January 2024, 60% of IMB applications concerned healthcare. The local delivery board (LDB) should take place every two months and meetings during the year have been attended by the Governor, the head of healthcare, the commissioner of National Health Service England (NHSE), the head of the mental health team and other service leads. An IMB Board member observed.

The serious concerns that the Board had observed regarding medication administration were escalated in writing to the Governor, who presented it to the LDB in October 2023. The Board continued to have concerns and further escalated the issue by sending our findings to the CEO of Spectrum Community Health in January 2024. These were discussed at a subsequent meeting.

The Board observed on-going problems with staffing, especially in primary healthcare provision. There has been an over reliance on bank and agency staff, as well as difficulties in retaining newly recruited staff.

6.2 Physical healthcare

IMB monitoring has evidenced the consequences of deficiencies in the dispensing of medications. It has been common for the dispensing of morning medications to be particularly lengthy. As a consequence, some prisoners on a prescription of medication three times a day could not take their lunchtime dose because it was too soon after the morning dose.

Delays in afternoon dispensing were also common: one afternoon dispensing session in June 2023 took almost five hours. The 'knock-on' effect of delayed distribution was felt throughout the regime. Sometimes, prisoners did not receive their medications at all. There was an occasion in January 2023 when there were insufficient healthcare staff to dispense anything other than essential medications.

The Board has also noted errors in medications, where the wrong drugs have been dispensed, incorrect dosages provided, medications being stopped without reason and the discharge of prisoners without their necessary medication.

The Board has observed how this caused significant anxiety for the women, who have been agitated and anxiously waiting for their medication. These deficiencies were also liable to cause real harm to the women who needed drugs for epilepsy, diabetes and heart problems. In December 2023, at the LDB, the Acting Governor highlighted a link between the delays in medication dispensing and the increasing number of self-harm incidents.

Prisoners have indicated to the Board that they were too stressed or not fit to attend purposeful activity when their medication was late and, in a small number of cases, were not able to deal with the demands of work or education.

The long-term absence of the staff member responsible for healthcare promotion has had a negative impact on the women. The clinical aspects of her role were covered by existing staff, but the promotional work suffered.

For most of the reporting year, prisoners had long waits to see a GP, dentist and podiatrist. GP appointments were available on three days a week, with an average waiting list of four weeks, which the Board considered was unreasonably long, especially for complex cases. By February 2024, the LDB reported that there was no longer a GP waiting list.

The Board noted that, for a significant period in the year, 122 people waited nine weeks for their first appointment with a dentist, with a further 17 weeks' wait for treatment, although this had fallen to 11 weeks by February 2024. There were three dentistry sessions each week. Prisoners had limited access to podiatry and the waiting list was 115 days in February 2024.

Prisoners have spoken to the Board about how, on occasion, they had to choose between attending healthcare appointments and going to work or education. The Board was aware that scheduling of appointments did not take account of the individual prisoner's commitments, thereby exacerbating this problem. In addition, appointments were missed, or clinics cancelled, because there were insufficient prison staff to escort the prisoners or problems with reconciling the roll.

The pharmacy building continued to cause concern, with restricted conditions and inadequate storage facilities. In January 2024, pharmacy staff reported finding it challenging getting medication ready for those leaving the prison. The proposed interim temporary pharmacy container has yet to materialise.

Pregnant prisoners and mothers and babies continued to be well cared for by the perinatal team. Prisoners reported very positive interventions with the midwife and pregnancy and mother and baby liaison officer (PMBLO), whose work was supported by a perinatal reception orderly appointed in February 2024. The midwife has advised her on the information to be given to the prisoners.

6.3 Mental health

People in prison are entitled to receive health and social care that is equivalent in range and quality to that they would receive in the community. The mental health team at Styal worked in collaboration with a wider multidisciplinary team to provide a mental healthcare service that was, in effect, superior to that usually found in the community. There was a full complement of staff for much of the reporting year.

The aim was to provide individualised holistic care and treatment for service users who have a wide range of mental health conditions, using an evidence-based, stepped-care-model approach. Care was provided on either a one-to-one basis or a group approach, as appropriate.

The incidence of mental health issues within the prison was significant. The impact of this was that mental health services provided support for an average of 185 prisoners at any one time for a prison population of approximately 420. Indeed, between May 2023 and April 2024, due to severe mental illness, 36 prisoners were referred for in-patient NHS mental health services. The Board observed significant challenges and delays in obtaining mental capacity assessments for a number of

these prisoners. Seven prisoners needed to be sectioned at the gate following their release.

During induction, all prisoners were offered a mental health assessment by a registered mental health nurse (RMN) or registered learning development nurse (RLDN). If they declined, a second appointment was offered. Thereafter, there was relative ease of access to mental health services, as prisoners were able to self-refer or a referral was generated by prison staff or other healthcare personnel.

The Board observed that, due to the lack of escorts, prisoners were often not prioritised for appointments and were left waiting for some time in the mental health department after their appointment had finished. Many were reluctant to wait around this long and, in some cases, refused to attend their appointment.

6.4 Social care

Social care demand continued to rise, especially for prisoners with learning disabilities. In March 2024, the social care specialist reported that she was supporting 10 women, providing physical as well as social care. The Board noted the challenges in finding suitable accommodation on release where social care was required, in particular when the responsible authority (Cheshire East) had to pass responsibility to another local authority.

6.5 Time out of cell, regime

The prison regime enabled regular out of cell sessions for prisoners, including time for association, exercise and purposeful activity, and there were only a small number of occasions when the regime was restricted. The gym instructor informed the IMB that the gym was underused and that the benefits of exercise were not fully accessed or appreciated, particularly for prisoners who were volatile and/or had mental health issues. This was partly due to the delays in the recruitment of qualified staff. A range of activities were available and the staff were well supported by the gym mentors.

6.6 Drug and alcohol recovery services (DARS)

The Board observed that the drug and alcohol recovery services (DARS) broadly met the needs of prisoners on arrival and release. However, shortcomings in the service offered to prisoners during their sentence were noted in terms of the number of prisoners on a formal recovery pathway.

As of September 2023, there were 183 women using the service, with individual caseload sizes of more than 45 women. Prisoners were able to send an application from their laptops to the recovery service requesting an appointment, with no waiting times reported. Escorting prisoners to and from appointments was, however, dependent on the availability of prison staff.

There was no group work, but single sessions, including Building Confidence and Self-Esteem, Managing Cravings, Peer-pressure and Pre-Release, ran during the reporting year. There was a planned harm reduction programme but, as of September 2023, it was unavailable due to staff shortages.

External partners came into the prison to run groups, including Alcoholics Anonymous (AA), Cocaine Anonymous (CA) and Narcotics Anonymous (NA), although vetting delays impacted staff recruitment. Around 8-10 women attended the

weekend sessions and prisoners were often complimentary about the care they received.

There was an incentivised substance free living (ISFL) house (Bruce), but it was a prison- led initiative and there was no clinical link with the DARS team. Admission criteria to the house seemed unclear and were confusing to the residents, and there was no dedicated prison officer on the house to bring stability.

7. Progression and resettlement

7.1 Education, library

There was a slight increase in courses starting during the reporting year, from 722 to 755, and an overall success rate (defined as the % of learners after withdrawals due to release, transfer, ill health who have achieved their learning aim) of 97% was achieved. Over the year, attendance averaged 63% compared with last year's figure of around 70%. Learners were almost universally very complimentary about their experience and the Board witnessed many examples of positive and supportive exchanges between tutors and learners.

The Board noted the efforts to reduce the absence rate by minimising clashing appointments, encouraging and rewarding full attendance and reducing the incentives scheme status of those who repeatedly failed to attend without good reason. The lack of escorts, reported last year, was no longer a significant contributory factor.

During the reporting year, the availability of a reading tutor increased from two days a week to four days a week. The reading room in the education building, which was stocked with donated books, was well used by prisoners. Sessions involving reading aloud were particularly successful.

The emphasis on reading for pleasure was facilitated when Novus took over management of the library in February 2024 and a new student support worker – library services was appointed. More groups started to use the library and were proving popular. However, some timetabling issues remained, and escorts were frequently not available, so prisoners did not consistently receive their entitlement to access the library for at least 30 minutes per week.

7.2 Vocational training, work

The prison has been consistently providing the 15 prisoners needed to run The Clink as a commercial restaurant open to the public. The offender management unit (OMU) and The Clink have co-operated to address the prisoners' weekend entitlements to family resettlement and managed these commitments alongside resource requirements in The Clink.

In terms of community release on temporary licence (ROTL) placements, the prison significantly diversified the employment offer with a number of warehousing and construction placements being made available over the reporting year. A process was agreed with OMU to maximise the efficiency of upcoming re-categorisations.

7.3 Offender management, progression

With the improvement in staffing across the prison, staffing within the OMU was more stable, as operational staff from the unit were called on less frequently to fill gaps elsewhere. There were 2972 instances of ROTL which was on a par with the previous reporting year. Qualified staff for accredited programmes were in place. There were two Thinking Skills programmes and one Working with Anger courses.

7.4 Family contact

Opportunities for family contact have reduced and weekend social video calls stopped due to prison staffing issues. There were only four time slots in the early

evening of each weekday when it was possible for prisoners to have social video calls with their school-age children. In-person social visits took place four days a week but were not always full. Monthly family days (which bring together women and their families outside of their statutory entitlement, usually in more informal settings) and fortnightly Saturday themed sessions for five families at a time, proved popular, often with waiting lists. Storybook Mums was a new initiative in which recordings were made of prisoners reading books, which were sent to their children,

7.5 Resettlement planning

The Board noted that, for the reporting period, the prison exceeded their target of 10% for prisoner employment within six weeks of release to 10.84%, recorded on the prison performance tool. In addition, the prison was noted to have the highest number in the female estate for job outcomes and job offers both for ROTL and release.

The Board recognised the success of the pathway for construction for female prison leavers. Positive relationships were forged with various construction employers, which offered training and taster days that led to numerous success stories on ROTL and release. It also resulted in the prison obtaining funding to run construction 'boot camps' to increase activity spaces and qualifications leading to paid employment.

The prison also sourced funding to pilot a mentoring initiative run by the Chartered Institute of Personnel and Development (CIPD) Trust to provide career coaching and confidence building support both prior to and post release, scheduled to start in May 2024.

The Board noted that the staffing situation in the pre-release team and Commissioned Rehabilitative Services (CRS) improved over the reporting year, so that a fuller service was provided to prisoners in the weeks leading up to their release. The figure for accommodation on the first night of release for 2023-2024, from 834 releases, was 85.21%.

Over the reporting period, there was an increase in the proportion of prisoners who needed to ask for help with finding accommodation on release, and it was increasingly challenging to meet all these requests. Around 60-70% of releases every month required some form of assistance from the pre-release team and CRS providers.

On 2 April 2024, the rules changed on recalls for breach of licence conditions by prisoners with a sentence of less than 12 months where they meet the eligibility criteria, so that all such recalls are automatically released after 14 days. Typically, a prisoner in this position could lose their accommodation, so this change added greatly to the workload of the CRS providers and agencies, while reducing the options available to them. Every breakdown of this type made it increasingly likely that a subsequent placement would break down and the prisoner recalled. Some prisoners were recalled to HMP Styal two or even three times in one month.

Lancashire Women obtained funding for the temporary appointment of a recall officer to work with frequently recalled prisoners and try to ensure that they remain in the community. This was a new post and it was likely to take some time for it to show significant results. However, there were some encouraging early signs.

8. The work of the IMB

Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	10
Number of Board members at the end of the reporting period	12
Total number of visits to the establishment	403

Applications to the IMB

Code/subject	This reporting year	Last reporting year	% change
A – Accommodation, including laundry, clothing, ablutions	5	21	↓ 76%
B – Discipline, including adjudications, incentives scheme, sanctions	15	5	↑ 200%
C – Equality	3	5	↓ 40%
D – Purposeful activity, including education, work, training, library, regime, time out of cell	8	5	↑ 60%
E1 – Letters, visits, telephones, public protection restrictions	6	10	↓ 40%
E2 – Finance, including pay, private monies, spends	10	7	↑ 43%
F – Food and kitchens	4	2	↑ 100%
G – Health, including physical, mental, social care	43	40	↑ 7.5%
H1 – Property within this establishment	21	18	↑ 17%
H2 – Property during transfer or in another establishment or location	3	2	↑ 50%
H3 – Canteen, facility list, catalogue(s)	2	3	↓ 33%
I – Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	11	9	↑ 22%
J – Staff/prisoner concerns, including bullying	15	14	↓ 7%
K – Transfers	4	4	→ 0%
L – Miscellaneous, including complaints system	8	6	↑ 33%
Total number of applications	158	151	↑ 5%



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