



Annual Report of the Independent Monitoring Board at HMP/YOI Stoke Heath

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

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Introductory sections 1 – 3

1. Statutory role of the IMB

The Prison Act 1952 requires every prison to be monitored by an independent board appointed by the Secretary of State from members of the community in which the prison is situated.

Under the National Monitoring Framework agreed with ministers, the Board is required to:

- satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release
- inform promptly the Secretary of State, or any official to whom authority has been delegated as it judges appropriate, any concern it has
- report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively, its members have right of access to every prisoner and every part of the prison and 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 Stoke Heath, in Market Drayton, Shropshire, is a closed, category C adult male and young adult training and resettlement prison. It holds adults aged 21 and over and sentenced young adults aged 18 to 21. The prison has a baseline certified normal accommodation (the number of prisoners a prison can hold without being overcrowded) of 662¹, with 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 782 adult men. The prison is operating at maximum capacity.

The prison has a variety of accommodation, much of it added over the years to the older original prison, which was built in the early 1960s. There are eight residential wings, which include one designated for drug treatment, one for induction and longer-term prisoners, and one as a progression unit for release on temporary licence (ROTL).

Each wing has in-cell sanitation and a shower block. Single-cell accommodation is provided in 446 cells, and two-prisoner accommodation in 168 cells. The segregation and reintegration unit has 16 cells and an additional two holding cells.

This prison prepares offenders for release, offering them a basic education in maths and English and the skills for future employment.

The Clive unit, with capacity for 16 prisoners, sits just outside the prison and offers resettlement opportunities for category D prisoners (eligible for open conditions), who are allowed full-time employment or can attend further education.

There are several service providers supporting the work of HMP/YOI Stoke Heath and many are referred to in detailed sections of this report. Their skills provide access to physical and mental healthcare, education, substance misuse treatment, family visits and advice when leaving prison.

Approximately 34% of the population are prisoners on recall, having breached the terms of their licence whilst on probation.

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

3.1 Main findings

The Board appreciates the many improvements made by the leadership team in the reporting year, and prisoners have also recognised and appreciated the changes. Prisoners are now getting better education and employment opportunities; they see their key worker frequently; and there is opportunity for those wanting to progress. However, the Board is concerned that there has been a rise in self-harm, assaults by prisoners and the use of drugs.

Safety

- There has been a 40% increase in positive results from random drug testing and there have been daily reports of prisoners 'under the influence'.
- Incidents of self-harm have nearly doubled since last year, with a noticeable increase in ligatures.
- The monitoring of prisoners on assessment, care in custody and teamwork (ACCT) plans has improved after comments from the coroner at an inquest.
- The level of violent assaults has increased by 50%, as has the use of force.

Fair and humane treatment

- Living space is cramped, especially for two people in a cell, with a lack of privacy for personal hygiene.
- Accommodation is showing signs of ageing. The main kitchen floor is a health and safety issue, and the healthcare building needs updating.
- The key worker scheme is now adequately resourced and is achieving a score of around 48%.
- The largest area of complaint, again, is prison property, particularly whilst being transferred from prison to prison.
- IPP prisoners (those given indeterminate sentences for public protection) should have either a regime tailored to their needs for a determinate sentence or a speedy release.

Health and wellbeing

- The new secondary mental health contract is providing only limited therapy, and a wider range of interventions needs to be developed.
- Complaints about healthcare have increased in the reporting year, mainly with regard to waiting times for dental care, opiate medication and external hospital appointments.
- Recruitment of paramedics has impacted prisoners directly, as they are significantly more capable when dealing with acute medical emergencies.
- Health and welfare champions (HAWCs) have an expanded role and have proved to be a real asset to prisoner health and wellbeing.

Progression and resettlement

- The increased focus on education, skills and work and purposeful activity across the prison is leading to more activity, better attendance and improved prisoner satisfaction.

- There have been many new initiatives that use in-cell laptops. Activity places have increased significantly and unemployment has fallen.
- A rising prisoner population is putting a strain on staffing and course provision and making it harder for prisoners to fulfil sentence plan requirements.
- There is a lack of convenient times for prisoners to contact their families via a social video call.

3.2 Main areas for development

TO THE MINISTER

- The pressure on prisons has been a challenge. When will the Minister arrange for appropriate resourcing to prevent overcrowding and allow the means to educate and provide skills to reduce reoffending?
- When will the Minister urgently look at the plight of IPP prisoners and how they can progress out of prison?

TO THE PRISON SERVICE

- Property is, by far, the area with the largest number of complaints from prisoners (as was the case in last year's report). When will the Prison Service review its policy on the transference of property between prisons and ensure that it is enacted?
- As the safety at HMP/YOI Stoke Heath has deteriorated over the reporting year, how will the Prison Service ensure that all prisoners are not carrying drugs/illicit items before being transferred to another prison?
- Prison offender managers have been under immense pressure over the last year and prisoners complain about a lack of contact. When will the Prison Service adequately resource the offender management unit?

TO THE GOVERNOR

- When will the Governor review the strategy for violence reduction to make the prison a safer place?
- When will the Governor improve the system to inform the IMB about deaths in custody, so that we know as soon as possible?
- When will the Governor prioritise the need for more social video calls during weekends and evenings, for example, to allow prisoners to have contact with their families.

3.3 Response to the last report

TO THE MINISTER

3.3.1 Issue raised in last year's report: It would be encouraging if men in resettlement prisons could be actively engaged in resettlement activities, i.e. they should spend less time in their cells and more in purposeful work and training for vocational qualifications.

Response given: As there is no central requirement governing the amount of time prisoners should spend out of their cells, Governors are instead afforded the flexibility to deliver balanced regimes that maintain an appropriate level of time out of cell for purposeful activities. Prisons are currently operating to individually agreed Regime Progression Plans (RPP), which are based on the resources available.

Progress: Primarily due to the actions of the new Governor, there are more employment opportunities for prisoners and staffing levels are at target levels. Prisoners have greater opportunity to spend more time out of their cells.

3.3.2 Issue raised in last year's report

Can the Minister provide a clear statement of what society expects from resettlement prisons, together with a list of clear, challenging, measurable targets?

Response given: Regional Probation Directors (RPDs) are responsible for delivery of resettlement services, with key interventions delivered by Commissioned Service Providers

Progress: No clear answer was given to measure progress

3.3.3 Issue raised in last year's report

Can prisoner wages rise in line with inflation so that they can afford everyday essentials and have less chance of getting into debt?

Response: Inflationary pressures affecting prisoners are under constant review and are being managed across several areas. In September 2022, a national approach to the rising cost of living was agreed and a 10% uplift in private cash allowances (money that can be sent in by family and friends of prisoners) was introduced to help mitigate against price increases. The national prisoners' pay policy sets out the national minimum rate of pay for employed activity; however, Governors have the discretion to set pay to reflect their population needs, the type of prison and the jobs and educational/vocational training available.

Progress: Wages for employment remain the same as in 2021. High inflation of canteen items continues in 2023, making items such as food and vapes less affordable. The uplift in private cash allowances benefits only those prisoners with the private means to do so. Many prisoners do not have such luxury.

TO THE PRISON SERVICE

3.3.4 Issue raised in last year's report

There appears to be a casual, cavalier attitude to prisoners' property when they are transferred between prisons. Property is by far the largest complaint from prisoners in 2022-23. Can the prison service provide a clear policy on transference of property between prisons and ensure that it is enacted?

Response: HMPPS notes the Board's concerns about the transfer of prisoners' property, despite the implementation of the new Prisoners' Property Policy Framework. This places an emphasis on ensuring compliance with volumetric controls, since anything within these limits will be transferred with the prisoner. Volumetric control limits apply to all prisons. The Framework introduced a new requirement that prisons must transfer excess property within four weeks unless there are exceptional circumstances which makes this impossible.

Progress: Property transferred from one prison to another continues to be a major source of complaint.

3.3.5 Issue raised in last year's report

Can the process for prisoners to rejoin their community upon release be reviewed to ensure all prisoners are offered accommodation upon release?

Response: The embedded Pre-Release Team at HMP/YOI Stoke Heath is responsible for identifying and addressing immediate resettlement needs and is involved in work to remove barriers to resettlement and reviewing the basic screening tool 12 weeks before release. The current target is for 90% of individuals to be housed on release from prison.

Progress: The provision of accommodation on the day of release is between 88-96% housed. The Board is concerned that early release schemes may lead to vulnerable prisons being without accommodation.

TO THE GOVERNOR

Note: The current Governor was appointed shortly after this report was published and no responses were received.

3.3.6 Issue raised in last year's report

Can the key worker role to support offender managers in their work for all prisoners be made a priority in the future?

Progress: The Governor has been committed to the key worker scheme and around 48% of prisoners are seen every week.

3.3.7 Issue raised in last year's report

Can the prison be creative in finding more places for prisoners to be trained or employed and less time in their cells?

Progress: The Governor has created many more places for prisoners employed and prisoners are spending less time in their cells. Unemployment has fallen from 39% to 11% at the end of the year.

3.3.8 Issue raised in last year's report

Can there be a clear plan of action to address the poor performance of education and training to rehabilitate prisoners back into the community?

Progress: Progress in prisoners' maths and English has improved over the year. 73% of prisoners gain a maths and/or English qualification.

3.3.9 Issue raised in last year's report

Can prison complaints be answered clearly in a timely manner, by the right person and at the appropriate level?

Progress: The Board still has seen instances where answers to complaints are returned late, especially if made to other prisons. However, at Stoke Heath, it is pleasing to note that internal processes to address late responses have been improved.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

The late arrival of prisoners from other establishments continues to be an issue for reception, healthcare staff and for the prisoners themselves. Prison staff need time to assess the needs of each prisoner and prisoners need to be able to settle into the wing regime. There are concerns that too many men are arriving with undisclosed needs and, when put through the body scanner on arrival, an increasing number of men prove positive for drugs.

The full body scanner continues to provide a helpful means of identifying illicit items. Nevertheless, the problem is ongoing, suggesting that other routes for supply are in use.

Induction on the wing is undertaken by designated red band prisoners and staff. The times for these sessions are variable. The Board has now established a means to inform new prisoners about how and when to contact the IMB. The induction sessions that the IMB have witnessed have been informative and positive.

4.2 Suicide and self-harm, deaths in custody

Deaths and suicide

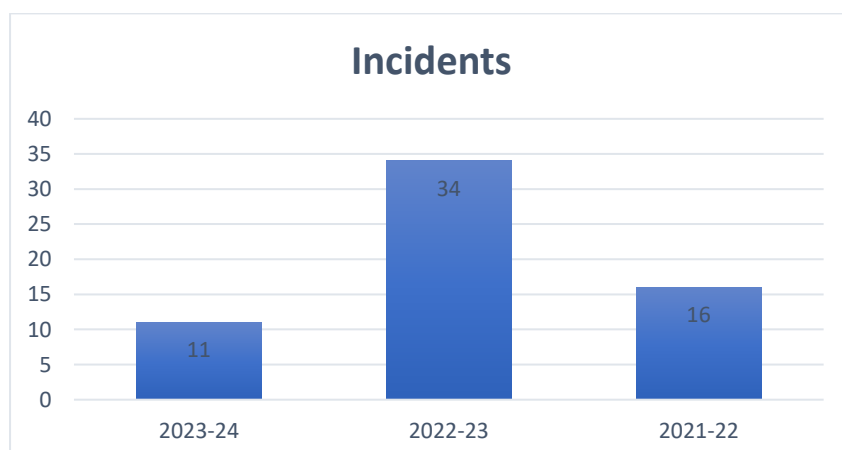
There have been three deaths in custody during the reporting period. One man died whilst at Stoke Heath, with the cause, apparently, self-inflicted. The other two deaths occurred within 14 days of release, one of which was, apparently, also self-inflicted. As the inquests have not all been completed, it is not appropriate to comment further.

The process for informing the IMB about deaths in custody, whether in the prison or following release, could be improved. The IMB is not always informed in a timely manner, which may impact our ability to report fully and independently.

‘Near misses’

‘Near misses’ – incidents where there was a real risk of serious injury or death – fell to 11 in 2023-2024 (see Figure 1).

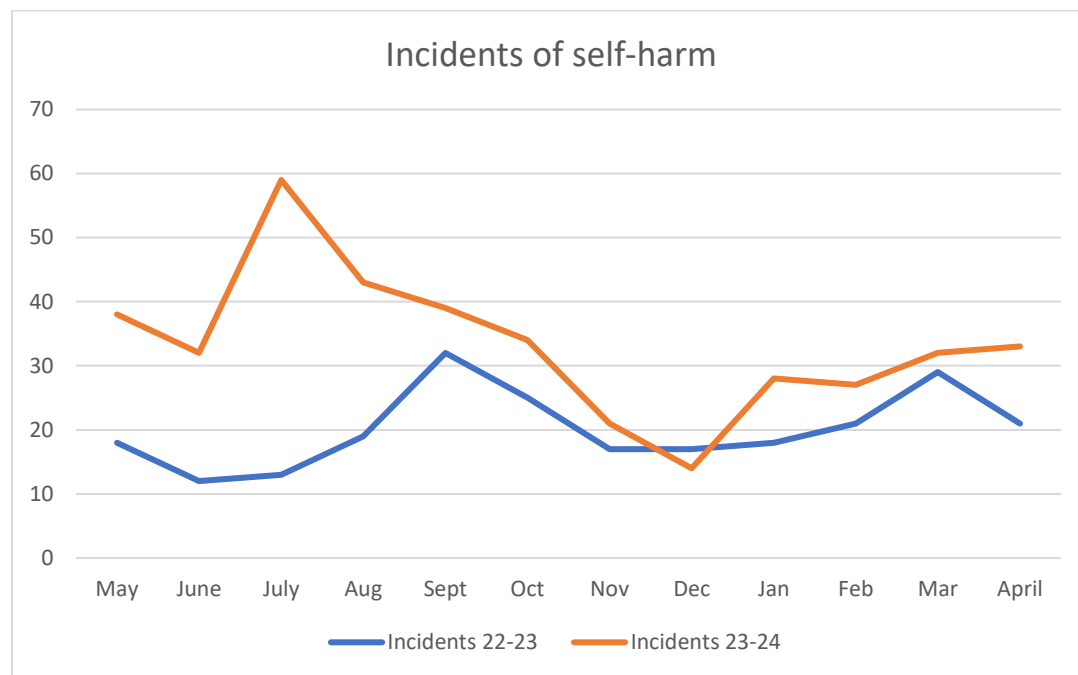
Figure 1: Incidents where there was a real risk of injury or death



However, self-harm has, overall, shown a pronounced increase, to 400 incidents, up from 242 the previous year. There was a peak in the summer of 2023, since when the figures have been consistent with the previous year. It is also concerning to see a noticeable increase in the use of ligatures.

A policy has been drawn up to reduce the availability of razors. However, this is not implemented consistently across the wings and vulnerable men continue to harm themselves with bladed items.

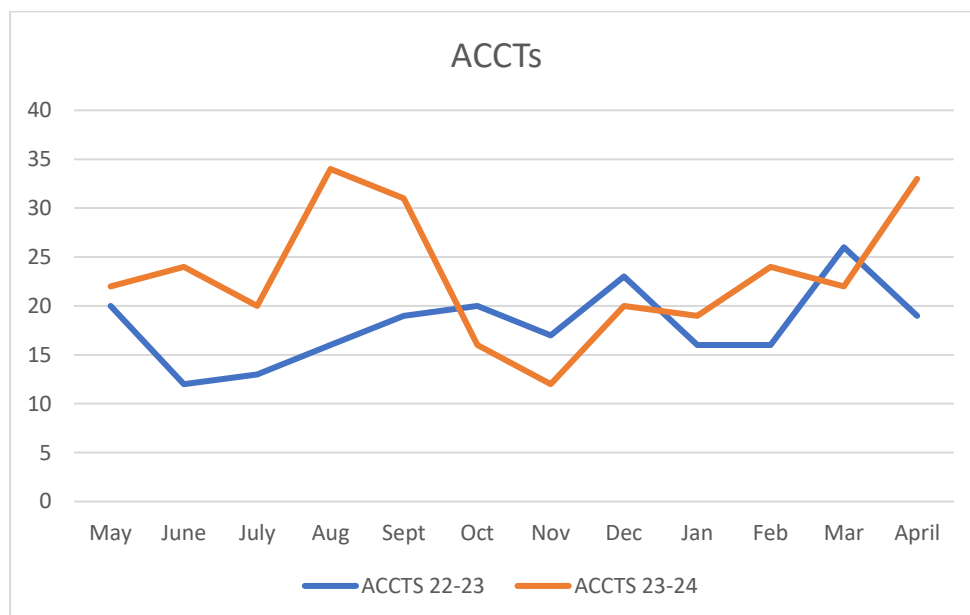
Figure 2: Incidents of self-harm, 2022-2023 and 2023-2024



Assessment, care in custody and teamwork (ACCT) documents

At a death-in-custody inquest (held in November 2023, following the death in September 2022), the prison was criticised for the quality of observations of men on ACCT plans. The Governor has revised the process and the reporting of meaningful observations has improved. The number of ACCT plans opened has increased by 21%, to 277 (see Figure 3). The Board has reflected on this and revised its own monitoring procedures of this vulnerable group and has increased its monitoring of ACCT documentation.

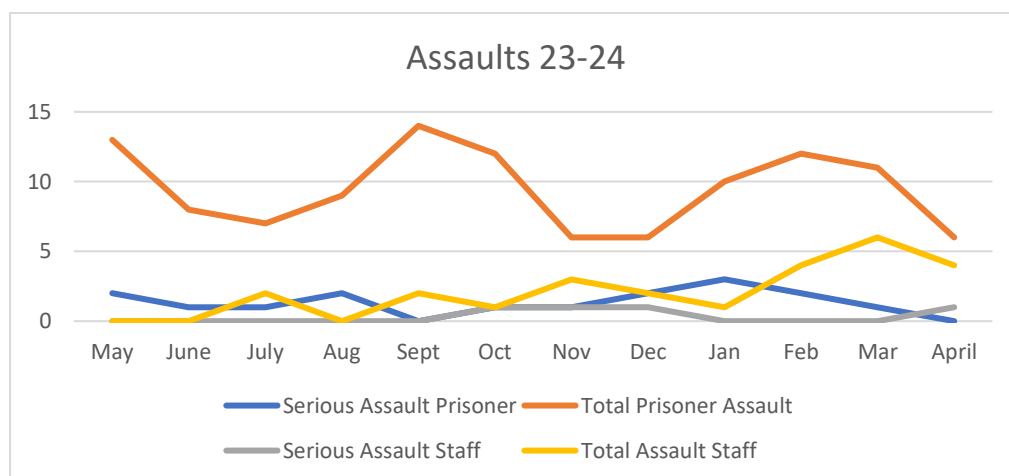
Figure 3: ACCTs documented 2022-2023 and 2023-2024



4.3 Violence and violence reduction, self-isolation

There were 20 serious assaults in the reporting year, a small increase (plus three) compared with the previous 12 months. However, the total number of assaults by prisoners increased from 95 to 139, a very significant rise (see Figure 4).

Figure 4: assaults on prisoners and on staff, by prisoners 2023-2024



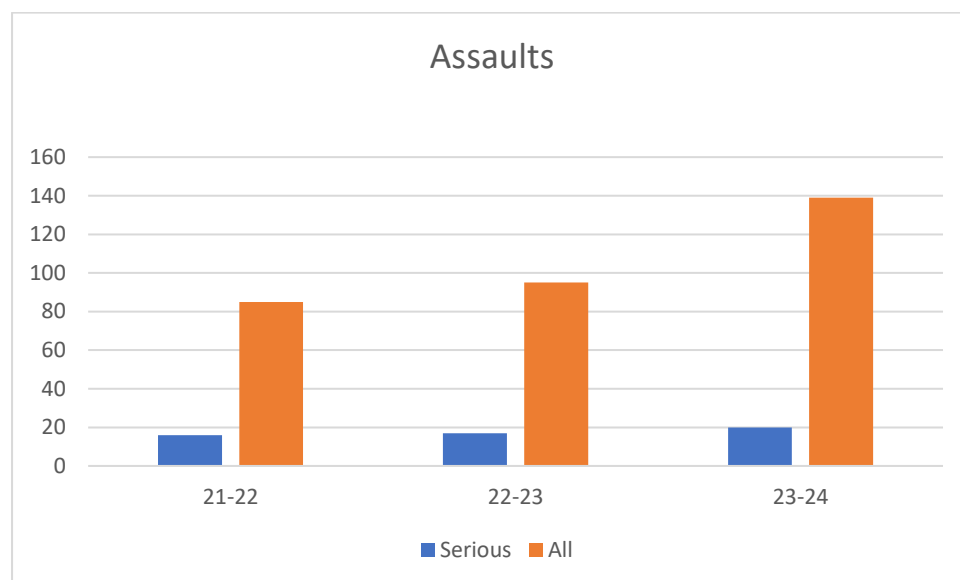
Source: Performance Hub, July 2024

There had been a gently rising trend in assaults in the previous year and, sadly, this has continued. The influx of prisoners from outside the area, due to prison population pressures, may have had a significant impact on violence. This deterioration is disappointing when you consider the improvements that the leadership team have implemented. But, clearly, violence reduction needs attention. Nevertheless, the Board's view is that, overall, the level of violence is relatively low compared with similar prisons.

Figure 5 shows the total rise in the last year when compared to the two previous years, broadly post-Covid, whilst serious incidents have not risen at the same rate.

Regular reviews of incidents, trends and action plans are undertaken through the monthly safer prisons meeting which the Board monitors, where possible.

Figure 5: Assaults on prisoners and on staff, by prisoners 2021-2024

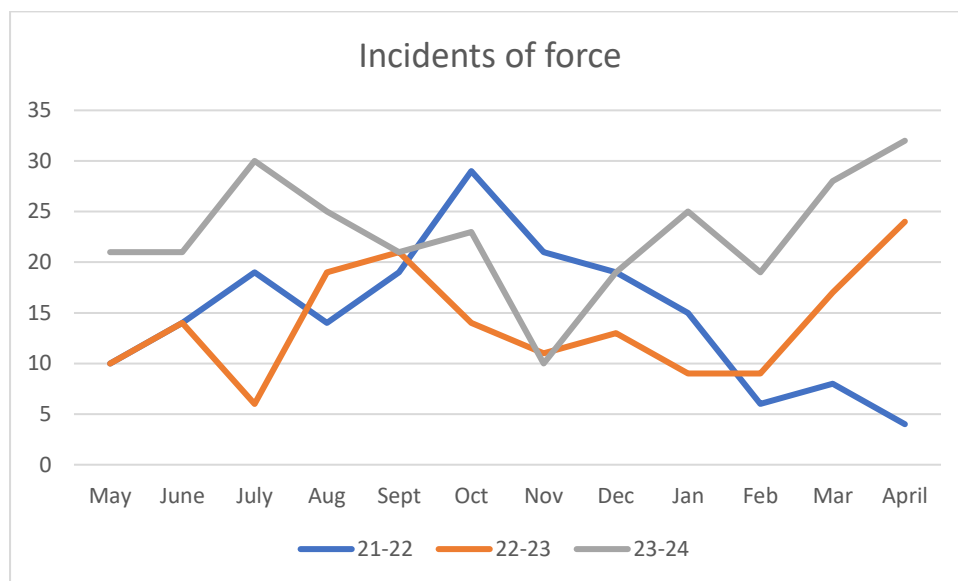


Source: Performance Hub, July 2024

4.4 Use of force

Overall, the number of use of force (UoF) incidents has increased by 64%, to 274, over the reporting year (see Figure 6). The rise has been associated with a significant influx of prisoners from other parts of the country. It has also been linked to the restraint of prisoners under the influence and the use of personal protective equipment, e.g. cuffing prisoners to de-escalate incidents. The prison has been operating at near capacity, which has made it more difficult to separate disruptive men by dispersing them across different wings.

Figure 6: Incidents of force, 2021-2024



Source: Performance Hub, July 2024

The use of batons and PAVA (incapacitant spray) remains minimal. There were no instances of drawing a baton. PAVA was drawn on two occasions, but used in only one instance.

The use of body worn video cameras (BWVCs) has levelled off over the reporting year, at an average of 80%, falling short of that desired by the Governor. The Board finds this concerning, as officers generally accept that using BWVCs can help de-escalate incidents and protect staff if they are maliciously accused of misconduct following a confrontation. The Board has been able to view recordings when necessary.

4.5 Preventing illicit items

Daily reports made available to the Board continue to demonstrate a noticeable increase in the use of illicit items, especially the range and strength of drugs and intoxicating substances with harmful and poorly understood effects. These drugs can be smuggled into the prison in small but highly concentrated amounts, which means they are more difficult to detect using traditional methods.

Mandatory drug tests during the reporting period have shown an increase in the percentage of positive results, to over 40% in March 2024. This is significantly above the average for category C training and resettlement prisons across the country.

The prison is conscious that illicit substances have a major effect on the quality of prison life. The men taking drugs risk long-term and, sometimes, life-threatening harm, as well as incurring debts they cannot pay back, which results in threats and assaults.

A Governor with specific responsibility for combating drug abuse and mitigating its effects has been appointed, and a comprehensive strategy has been developed.

There have been many initiatives put in place to restrict the supply of drugs and illicit substances: searches have doubled and, in some cases, tripled in number, compared with last year's figures. All prisoners coming into Stoke Heath must pass through the X-ray body scanner (XBS) and there is a baggage scanner to check prisoners' property on arrival at the prison. It is surprising how many prisoners are found with illicit items when being transferred to this prison. There are regular quality checks to ensure that staff are compliant with body-search procedures.

The Governor has introduced new furniture to improve the social visits' experience, and this has also seemed to assist in the prevention of contraband being passed to prisoners. The security team has run multiple exercises to educate the staff dealing with 'throw-over' packages.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

The prison works hard at maintaining a decent living space. However, it is often hampered by the age of the accommodation and available finances to maintain the estate to an acceptable standard. There is a good working system to request repairs, and a constant effort to improve the decoration and tackle water ingress in some wings.

Conditions in some of the 168 double cells remain very basic, with a bunk bed, washbasin and toilet, which is screened only by a curtain. Some double cells are only six feet by four feet. There is little room for manoeuvre in these cells, which can be very warm in the summer months and cold in the winter. The Board believes that this could be regarded as inhumane treatment for these prisoners. There is no means to control the temperature on the wings. The heating is either on full or off.

The Board continues to be concerned about the inadequacy of the prison's facilities for people with mobility issues. For example, there is restricted access in healthcare and education. This was highlighted in last year's report, but nothing has changed.

The overall condition of the healthcare building needs updating. It has not been redecorated for five years. A number of rooms have carpets and floors that are not cleanable, the kitchen is reported as an infection control hazard and cleaning is not up to standard for a healthcare building.

The main kitchen at HMP/YOI Stoke Heath has retained its five-star rating from Shropshire Council's environmental health inspection for the last four years. However, the floor is a patchwork of minor repairs, with some attempts at repair with masking tape to hold the flooring down. The poor condition of the floor has implications for hygiene and has potential to be a trip/safety hazard.

The kitchen does an admirable job of providing food for religious festivals, and all dietary needs are catered for, despite the mean per capita allowance of £3.03 per prisoner, per day. Prisoners have commented that evening meals are generally good, but breakfast and lunches are inadequate. There was praise for hot soup served at lunchtime in cold weather. The description of some menu items might need adjusting. For example, grilled beef on the menu for Christmas day was not a steak or burger, as some had expected, but was more like a stew. The food produced is adequate but unexciting. There are constant complaints to the IMB of poor portion size and menu choice. Food is often tasted by IMB members, who generally agree with the prisoner population but realise the daily rate allowed and lack of on-wing facilities make any resolution difficult. Pies are an option at lunchtime, but the lack of warming ovens on the wings means these are served cold.

5.2 Segregation

There continues to be an increase in referrals to the segregation and reintegration unit (SRU), following body scans that reveal items in the body that cannot be accounted for. These are usually found to be mobile phone parts or drugs.

There have been many cases of prisoners 'under the influence' (UTI) in the prison - 662 cases in the last 12 months - where a prisoner needs to be monitored/controlled away from the temptation of more drugs on a wing.

SRU staff at all levels share a commitment to the reintegration of prisoners to their normal location and the IMB has witnessed several examples of good practice. These include friendly, respectful and helpful interactions between staff and prisoners, as well as courteous and effective responses to challenging behaviour.

5.3 Staff and prisoner relationships, key workers

The Board has observed many instances of good practice and constructive contact between members of staff and prisoners. Wings staffed by experienced, skilled officers show a calm, purposeful regime, where men know where they stand and conflicts are promptly and effectively de-escalated.

The Board is concerned that prisoners have repeatedly reported difficulties contacting their prison offender managers (POMS) about transfer applications, sentence plans, progression and preparing for release. The offender management unit (OMU) has been operating with a shortage of staff all year. This may be because of the large increase in staff workload and the many changes to the early release scheme, home detention curfew (HDC) and the temporary presumptive re-categorisation scheme (TPRS), which is causing confusion to both staff and prisoners about which scheme to follow for the best outcome.

Prisoners prefer early release to HDC because it places fewer restrictive measures on them. Again, this leads to a big increase in staff workload and a lack of precedence about which scheme to follow. The recent introduction of a new scheme (HDC+4), whereby prisoners with four years or more to serve have to be screened for their eligibility for HDC (around 200 in Stoke Heath), which then means a new HDC date has to be recalculated and input into the system, has created the extra workload.

The role of the key worker is vital in addressing prisoner concerns about their time and progression in prison and supporting offender managers with sentence planning. The Board is pleased that the key worker scheme now seems to be adequately resourced and 48% of prisoners are seen weekly, compared with last year, when only 5% of prisoners were being seen.

HMP/YOI Stoke Heath is fortunate to have its full quota of officers. However, 24% are regarded as non-effective, being on detached duty to other prisons or absent because of sickness, etc. There have been 24 new officers appointed, against nine leaving in the last 12 months.

The plight of prisoners with an indeterminate prison sentence is beyond comprehension. There is no meaningful plan to lower their risk to the public or to determine their release. However, in the Board's view, it would be in the interest of the Prison Service and the public if there was a regime tailored to allow these prisoners either to be given a determinate sentence or a speedy release.

5.4 Equality and diversity

The awarding of rewards and sanctions appears to correspond broadly with the ethnic composition of the prison population. There are instances of very good practice, such as with the Gypsy, Roma and Traveller communities, for example, in identifying and addressing problems, including literacy and access to services and support. For example, by having specialist study days to highlight these

communities, reading classes with the Shannon Trust and additional numeracy classes to help improve basic skills.

5.5 Faith and pastoral support

The chaplaincy at HMP/YOI Stoke Heath is very busy with worship, meetings and pastoral work. It has been noted by the IMB that all religious festivals and events appear to be well advertised and well catered for.

Pastoral and bereavement support is given to prisoners of all denominations. Where possible, prisoners are allowed to attend outside funerals or to attend virtually. The chaplaincy also helps to facilitate calls with terminally ill family members.

A six-week bereavement course has been running for approximately one year, with ten courses completed for 90 prisoners, which is appreciated by the prisoners taking part. The head of chaplaincy training for prisons has approached HMP/YOI Stoke Heath to make use of this course and to make it available to prisons throughout the UK.

5.6 Incentives schemes

Prisoners are incentivised to progress through good behaviour and improving their employability when their sentence finishes. Prisoners are broadly 50% on the standard level and 50% on the enhanced level of the incentives scheme, the latter getting many more privileges. Only a small group of prisoners (generally 50 or less) is on the basic level.

5.7 Complaints

Applications (prisoners' written representations) to the IMB rose by 12% compared with the last reporting period. As in previous years, most of the applications concerned property.

The Board remains concerned about the quality and timeliness of some of the prison's replies to complaints. In some cases, prisoners have waited for many weeks before receiving answers which, when received, were incomplete and/or unhelpful.

5.8 Property

This continues to be a major cause of concern and frustration to prisoners. Men serving longer sentences build up possessions, which cannot be stored in their cells safely and must be kept in storage. Prisoners have reported finding it challenging to visit reception to sort out what they can keep, store or send home.

By far the greatest number of property complaints result from loss of property following transfers from other prisons. Prisoners have few possessions allowed in their cells and these are highly valued. Where property cannot be moved with the prisoner, it should be sent on within a few days, not weeks or even months later.

6. Health and wellbeing

6.1 Healthcare general

Healthcare provision comprises a range of services commissioned to meet the needs of those detained in HMP/YOI Stoke Heath. The healthcare contract with Shropshire Community Health NHS Trust is valid until April 2026. Following contract performance issues, the secondary mental health and substance misuse services were transferred from the North Staffordshire Combined Healthcare Trust to the Midlands Partnership University NHS Foundation Trust in November 2023.

Following an NHS Care Quality Commission visit in June, there was a prisoner meeting to gain feedback about healthcare and to give prisoners a voice. There was positive feedback that neurodiversity was promoted effectively and 70% of prisoners felt that the healthcare team treated them well. Suggestions for improvements included shorter waiting times for healthcare appointments, better continuity with medications when released and the need for continuity of care required on transfer or release.

Complaints to the healthcare unit have averaged ten per month compared with five last year. The main themes were excessive dental waiting times and external hospital appointment waiting times, plus issues with opiate medications.

For the first eight months of the year, there were issues regarding low numbers of staff. The wholetime equivalent is 16.6, but this was less than 3.0 in September, so agency staff were being used. However, due to a new staffing model, the healthcare unit was in a much stronger position by the start of January 2024, having recruited two advanced nurse practitioners and four paramedics. Paramedics have impacted prisoners directly by being significantly more capable when dealing with acute medical emergencies, such as under the influence and self-harm management.

Access to healthcare for those with mobility issues is hindered because access is via a lift, which is often broken. When the lift is out of action, prisoners with mobility issues, particularly those in wheelchairs, cannot reach the clinical department, as it is on the first floor of the building. This is a challenge for access to the controlled drugs dispensary and clinical appointments.

The healthcare building, as previously commented in section 5.1, needs updating. Some rooms have carpets and floors that are not cleanable, the kitchen is reported as an infection control hazard and cleaning is not up to standard for a healthcare building.

6.2 Healthcare physical

The Board has not been generally concerned about waiting times for an appointment to see a GP or a nurse. Additional sessions organised for dental appointments meant that the average waiting time had fallen to 12 weeks compared with 20 weeks in 2022-2023. When the dentist is in the prison, patients needing emergency treatment are seen on that day; otherwise, they are sent to A&E on the same day.

The healthcare unit is working to improve performance such as reducing the number of patients who do not attend appointments (DNAs). Prisoners report that they are not always issued with a movement slip and, as a result, they are not aware of their appointment. This wastes clinical time.

A new computer-led medication dispensing system has been installed, which not only helps with dispensing but also with safety and stock control. However, medication hatches on the wings are not always supervised. This slows down the process and some prisoners may use this opportunity to exchange or trade drugs for illicit activities. Also, any disputes with nursing staff may not be managed appropriately by disciplined staff.

Due to the necessity of prison escorts, the healthcare unit is allowed to book a maximum of ten external hospital appointments each week. This results in an average wait time of 12 months, which is probably similar to waiting times for those in the wider community; however, prisoners continue to complain about the wait, despite it being a systemic NHS problem. Wherever possible, phone consultations are being utilised and some visiting services, e.g. ultrasounds and X-rays. The average waiting time for these services is two months.

The early release scheme, initiated due to prison population pressures, has put additional strain on the healthcare unit because of the short time scales imposed. Healthcare still needs appropriate time to liaise with external healthcare providers for the continuity of care and medication.

Following a measles outbreak in the community, measles vaccinations were offered to all prisoners. However, although there was minimal uptake, vaccinations are available should prisoners wish to take up the offer.

An initiative aimed to eliminate hepatitis C in HMP/YOI Stoke Heath was completed successfully in March 2024. Over 96% of the population was tested and only two new cases were found. The testing offer has been expanded. Also, new arrivals are tested to ensure that as many individuals as possible are detected. Subsequently, the prison has been awarded a Micro Elimination Certificate by NHS England.

6.3 Mental health

On average, primary mental healthcare clinics are run three times per week. However, there is only one full-time nurse and one part-time nurse, with an agency nurse employed to help reduce clinic waiting times.

The new secondary mental health contract is not providing therapy for those needing it. There is a forensic psychiatrist and one part-time psychologist, but there is no occupational therapy worker. It is very much an assessment and treatment with medication service, which needs to develop a wider range of interventions, e.g. cognitive behaviour and other group sessions, in the Board's view.

Prisoners with severe mental illness, or those needing a period of assessment, are referred to HMP Birmingham or Dovegate for a regional 24-hour inpatient bed. This system is less than effective, because demand for these beds is so great. Additionally, referrals are made by the visiting psychiatrist, which can also lead to delays.

The lack of available secure mental health beds can lead to individuals spending time in the SRU inappropriately. This setting may cause further deterioration in prisoners' mental health. There are decommissioned healthcare beds at HMP/YOI Stoke Heath which, if re-commissioned, would provide more appropriate care.

There has been a great improvement working with prisoners with a learning disability. The learning disability nurse runs a clinic on most days. Each prisoner has a care plan, which is supported by prison staff and allows them to manage prisoners with learning difficulties and avoid escalating poor behaviour.

6.4 Social care

There has been very little social care referral or need throughout the year. Work is ongoing between the head of the healthcare unit and Shropshire Council to improve the memorandum of understanding between the prison and the Council.

6.5 Time out of cell, regime

The amount of time prisoners spend out of cell has increased gradually and is reported in section 7.2.

Progress is being made to re-profile the prison and to introduce a new core day. This will prove positive for the healthcare unit in that staff will be able to administer medication without interruptions.

6.6 Drug and alcohol rehabilitation

At any one time, up to 300 prisoners receive active intervention around substance misuse. This is a huge undertaking, as it affects nearly half the prison population.

Forward Trust provides psycho-social working, both individually and in structured groups, such as:

- Stepping Stones: designed for those wanting help with alcohol or drug misuse.
- Recovery Support Group: aimed at motivating individuals towards abstinence.
- The Bridge: targeted at medium-to-high risk substance-dependent male offenders.

Alcoholics Anonymous and Narcotics Anonymous run groups alongside Forward Trust, while the incentivised substance-free living (first introduced in December 2022) wing continues to be active for prisoners who wish to live in an environment away from drugs and intoxicating substances.

6.7 Soft skills

Health and welfare champions (HAWCs) – prisoners qualified in the Royal Society for Public Health UK Level 2 Award in Understanding Health Improvement – provide an excellent resource for the healthcare unit and the prison. They cover skills such as:

- Active listening;
- Safeguarding and confidentiality;
- Understanding health inequalities;
- Setting goals and motivation; and
- Promoting health knowledge in areas such as nutrition, exercise, smoking, sexual health, mental health and wellbeing and drugs and alcohol.

This initiative is beneficial for prisoners and the healthcare unit in identifying health risks at an earlier stage.

The healthcare unit has expanded on the success of HAWCs by training them to identify vulnerable individuals and offer routine general healthcare checks where blood pressure, BMI, weight and height are checked. Mental health referrals can also be made. The Lingen Davies Cancer Fund Charity has delivered cancer champion training to staff and to HAWCs to help reduce the stigma around cancer. An active part was played by HAWCs in the completion of the successful HITT carried out with the Hepatitis C Trust (see 6.2).

7. Progression and resettlement

7.1 Education, library

The IMB has noted the increased focus on purposeful activity and education, skills and work (ESW) across the prison. After a very poor Ofsted report last year, a change in leadership and strategy has shown some positive results, with 73% of prisoners achieving maths and English qualifications. The prison gained one of the best results in its comparative group. This is a great achievement.

Staff surveys are also carried out and, from these, professional development of staff has been identified as a key action point.

Every new prisoner is given a curriculum pathway, with entry level 3 in English and maths the starting point. Some prisoners are resistant to completing these core skills and the prison is trying to address this by introducing more English and maths outreach work. Prisoners have the option of completing core skill qualifications in a work area, in their cell, or in a classroom. The Stoke City Football Club twinning project has been expanded and encourages the development of literacy and numeracy as well as football.

Library staff tell us that the library is used by 75% of prisoners and they are monitoring how the introduction of Freeview to the prison affects the use of the library. The Shannon Trust trains prisoner volunteers to assist other prisoners in developing their literacy and numeracy skills.

A neurodiversity spur was established on one wing two years ago. Higher-functioning prisoners support other prisoners in various ways, including a self-help group. Staff are trained to recognise autistic prisoners' reactions to certain triggers and to relate to them in ways that enable prisoners to respond constructively. The prison is considering how this practice should be spread across the prison.

The curriculum is enriched through monthly equality and diversity events, such as Black History Month, Neurodiversity Celebration Week and Deaf Awareness Week, to provide for prisoners' broader development.

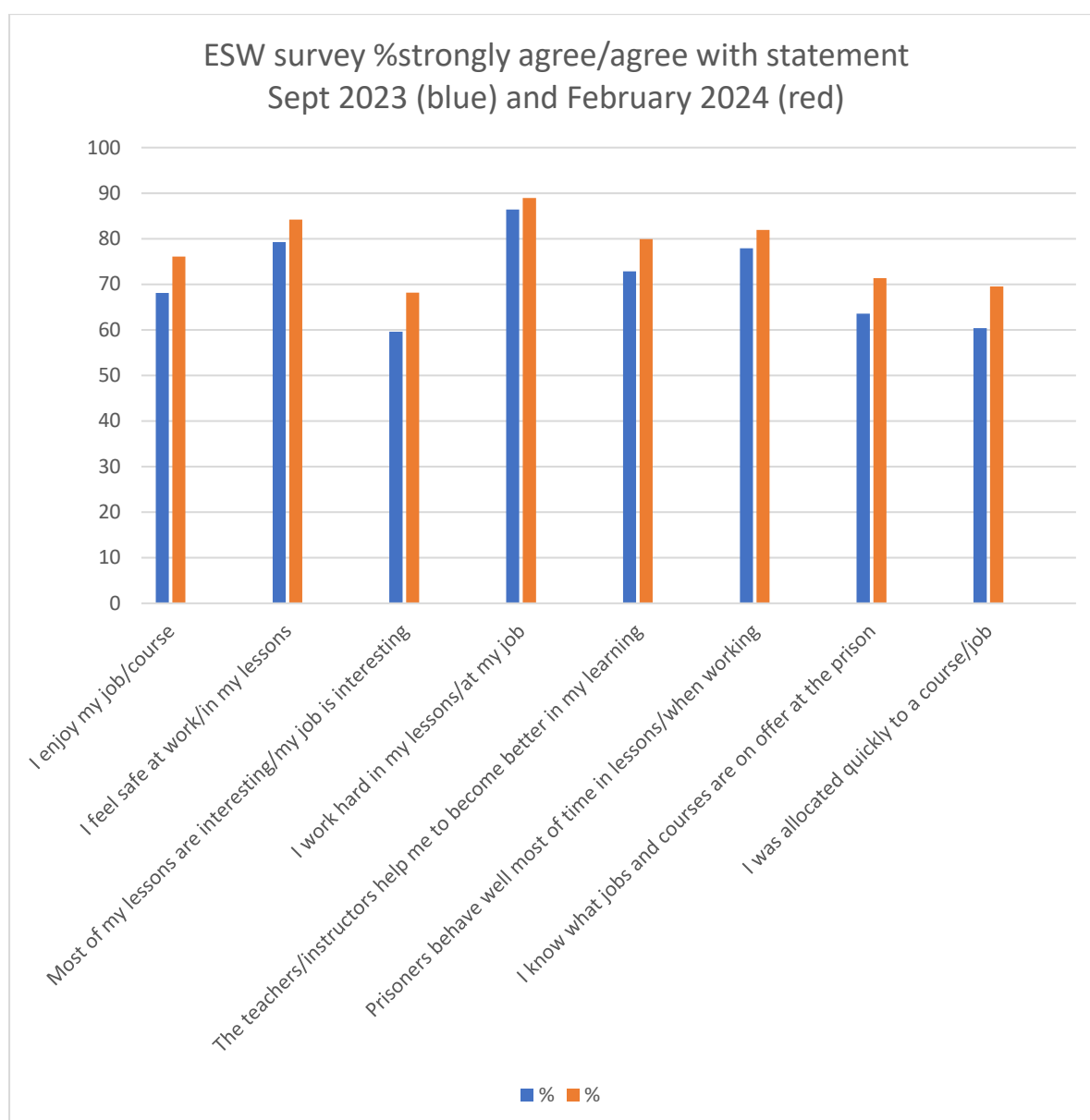
7.2 Vocational training, work

The Board is pleased to report that the percentage of prisoners who are unemployed has fallen from around 39% in May 2023 to 11% in March 2024, and the number of activity spaces per day has risen by 15% over the past 12 months. Attendance at activities is robustly scrutinised at daily leadership meetings and has increased by 12% over the reporting year.

Regular communication with prisoners through the in-cell laptops and in education and work areas has enabled prisoners' views to be collected more easily. This has seen a positive increase in prisoner perceptions of ESW at the prison.

A prisoner survey carried out in August 2023 about ESW was repeated in February 2024 (see Figure 7). It showed that the majority (75-80%) of prisoners enjoyed their jobs and/or courses. Their lessons were interesting and teachers and instructors helped prisoners to improve their skill set. This was a small but significant increase from the 2023 survey.

Figure 7: Prisoner survey, February 2024



The opportunities for work in prison have expanded to include production of fence panelling, wheelbarrow production, fencing and shed assembly, sanding blocks and recycling. There was also a scaffolding workshop and warehousing and fork-lift truck qualifications.

7.3 Offender management, progression

Prisoners in the Clive Unit have category D open conditions. Release on temporary licence (ROTL) is used to enhance prisoners' employment and training skills and prepare them for release.

The Government imposed early release scheme in spring 2024. This increased the workload in all areas, e.g. prisoner offender managers preparing all appropriate checks and the healthcare unit organising medication and ongoing care for those released into the community, which were already stretched.

7.4 Family contact

The visits' area has been refurbished and throughout the year 12 family days (which bring together prisoners and their families outside of their statutory entitlement to social visits, usually in more informal settings) have been hosted. Prison visitors have expressed frustration that the phone booking system is inefficient, and they are often kept waiting on the phone for an unreasonable amount of time. Although the prison has spoken of increased social video calls (which are particularly vital for those prisoners who do not come from the local area), these have not happened. Prisoners have raised concerns about their lack of access to social video calls and the fact that they take place during school or work hours. This makes maintaining contact with their partners and children difficult.

The limit on prisoners' phone credit has been increased from £50 to £100 and prisoners can now make phone calls until midnight, with calls re-instated at 00:07 hrs. the following morning. This enables prisoners to have better contact with their families.

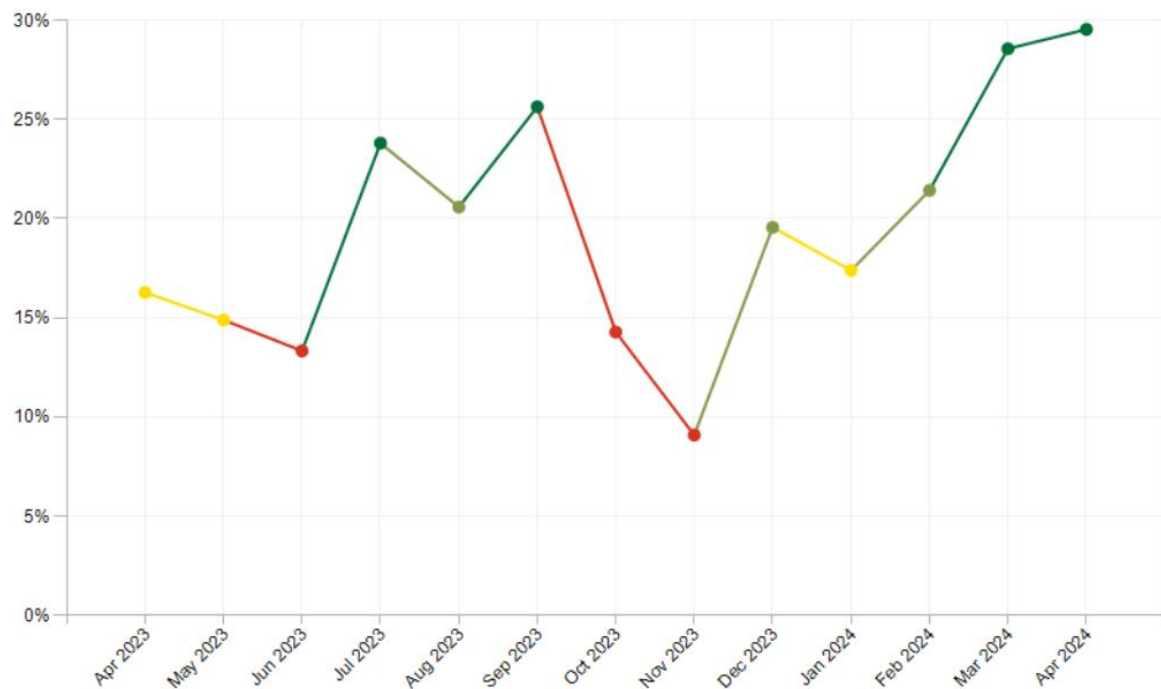
7.5 Resettlement planning

Prisoners told the IMB about waiting lists for courses that they needed as part of their sentence plan and being unable to transfer to other prisons to access those courses, e.g. Kaizen, which are not provided by Stoke Heath. This situation was exacerbated in 2023, when no transfers were available.

Information, advice and guidance (IAG) has been expanded to enable all men to have an IAG interview during education induction, and links to the employment hub and allocations department have been strengthened.

The employment hub continues to host employer events and interviews for work when released. This includes opportunities in manufacturing, recycling, hospitality and warehousing, mirroring some of the work opportunities in the prison. They also provide support with banking, ID and driving licences, CV-writing workshops and interview preparation. This has had a positive impact on the number of prisoners progressing to suitable further education, training and employment on release.

Figure 8: Levels of employment six weeks after release



Source: Performance Hub, July 2024

Figure 8 shows that the levels of employment six weeks after release have doubled in the last 12 months, although there is considerable monthly variation. These levels of employment are about average for prisons of a similar category.

The prison achieves about 90% success in finding accommodation for prisoners on release.

With an increasing number of prisoners who are not from the local area, resettlement of prisoners to an area with which Stoke Heath is not familiar makes the work of resettlement more challenging.

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	11
Number of Board members at the end of the reporting period	10
Total number of visits to the establishment	488

Figure 9: Applications made by prisoners to the IMB

Code	Subject	19-20 Number of apps	%	20-21 Number of apps	%	21-22 Number of apps	%	22-23 Number of apps	%	23-24 Number of apps	%
A	Accommodation, including laundry, clothing, ablutions	12	3%	2	1%	7	2%	19	5%	12	3%
B	Discipline, including adjudications, incentives schemes, sanctions	13	3%	1	0%	10	3%	12	3%	38	8%
C	Equality	10	2%	17	5%	1	0%	5	1%	9	2%
D	Purposeful activity, including education, work, training, library, regime, time out of cell	22	5%	2	1%	11	3%	16	4%	18	4%
E1	Letters, visits, telephones, public protection restrictions	18	4%	10	3%	7	2%	14	3%	10	2%
E2	Finance, including pay, private monies, spends	17	4%	23	7%	20	6%	24	6%	30	7%
F	Food and kitchens	2	0%	4	1%	5	1%	13	3%	2	0%
G	Health, including physical, mental, social care	50	11%	46	15%	54	15%	23	6%	30	7%
H1	Property within this establishment	36	8%	34	11%	25	7%	27	7%	37	8%
H2	Property transfer or in another establishment or location	74	16%	24	8%	36	10%	28	7%	88	19%
H3	Canteen, facility list, catalogue(s)	6	1%	0	0%	2	1%	14	3%	18	4%
I	Sentence management	67	15%	46	15%	57	16%	37	9%	44	10%
J	Staff/prisoner concerns, including bullying	60	13%	50	16%	49	14%	79	20%	66	15%
K	Transfers	31	7%	20	6%	31	9%	54	13%	28	6%
L	Miscellaneous, including complaints system	37	8%	33	11%	33	9%	38	9%	22	5%
	Total number of applications	455		312		358		403		452	



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