



Annual Report of the Independent Monitoring Board at HMP Birmingham

**For reporting year
1 July 2023 to 30 June 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 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 Birmingham is a busy, inner city reception prison, housing adult men, both convicted and on remand. It serves the courts in Birmingham and Wolverhampton.

In June 2024, it had a ratio of 63% sentenced prisoners vs 37% on remand.

In 2018, three Victorian wings were closed for refurbishment, reducing the 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) from 1,450 to 997¹.

Prisoners are housed in nine residential wings, some of which are modern, while others are fully refurbished Victorian wings. These include a first night centre, a wing for vulnerable prisoners (VPs), a social care wing, an enhanced wing (for prisoners on the top level of the prison's incentives scheme) and a healthcare wing, which has inpatient facilities for prisoners with mental and physical health problems, alongside primary care and dental services.

Other areas include workshops, a multi-faith centre, an education department and library, an employment hub and a gym. A recent addition has been the reordering of a workshop into a staff wellbeing centre, the Workshop 8 Café. This has provided a pleasant environment for staff to have a meal or take a break.

HMP Birmingham has also, for the last few years, been a building site, involving the major refurbishment of three Victorian wings and the boiler room. This has meant hundreds of construction workers on site, with the attendant security risks, which, in the Board's view, the prison has handled well.

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

This annual report is written against the background of overwhelming pressure on the prison estate, with capacity at 99% across the prison estate. HMP Birmingham, as a busy local prison, is bearing the brunt of this. That it continues to run a relatively smooth and safe regime is testament to the senior leadership team (SLT) and staff, but there is no room for complacency.

The Board is very concerned about future leadership at the prison. Under the leadership of the most recent Governing Governor, the prison has moved from being 'rife with drugs and violence', according to an HM Inspector of Prisons (HMIP) inspection in 2018, to being 'much safer and more decent' when HMIP undertook a full unannounced inspection in 2023. At the time of writing this report, the prison has a Acting Governing Governor and a Deputy. The Board is pleased that a permanent appointment has been announced. Without high-calibre leadership, there is a risk that all the progress made over the last five years will be lost.

One cannot overstate the effect that poor prison fabric has on the lives of individual prisoners and their morale. Birmingham has had more than its fair share of leaking roofs, failed heating systems, broken lifts and showers long overdue for refurbishment. It is not acceptable that prisoners who use wheelchairs cannot see their family for weeks on end because the lift to the visits' centre is out of order and complicated to repair.

However, not all of the prison is in a poor state and once the refurbishment of three Victorian wings is complete, this will provide decent single-cell accommodation for hundreds of prisoners.

Safety

- There has been disproportionate use of force against black prisoners and those with mixed ethnic background.
- Use of force remains high, in relation to comparator prisons, and this is a concern for the Board. However this is recognised by prison management and a lot of work is being done to reduce the trend. There have been small signs that this might be improving.
- When members of the Board have visited the prison for monitoring purposes, which is three or four times a week, it appears to be a safe and well-ordered environment. The Board is aware, however, that there have been several staff and prisoner assaults in the reporting year, some of which have been serious. The Board is also aware that senior management is making efforts to address self-harm, although levels remain too high, in the Board's opinion. There were five deaths in custody during the reporting year and any learning from these tragic events will need to be put into practice.
- Body worn video camera (BWVC) activation rates during incidents have greatly improved since last year and need continued improvement.

Fair and humane treatment

- There are too few single cells available in the prison; cell sharing, coupled with little time out of cell, is both inhumane and a risk to prisoner safety. Cell sharing risk assessments (CSRA) are not foolproof and led, apparently, to an unexplained death in the previous reporting year, which was mentioned in last year's report. It

is salutary to reflect that when HMP Birmingham was built in 1849, all cells were for single occupancy.

- There continue to be problems with the fabric causing poor living conditions. These include leaking roofs, failed heating systems, lifts that don't work and showers long overdue for refurbishment. Cells can be too hot in summer and too cold in winter. The prison does not have the budget to repair all these problems.
- Prisoners have told the Board they have experienced ongoing challenges in securing adequate provision of kit (such as clothes, bedding and towels).
- The Board has observed senior managers and other staff taking time to try to achieve the best outcomes for very prisoners with complex needs, especially those who find themselves in the care and separation Unit (CSU). Unfortunately, the CSU ends up housing vulnerable people, who should not really be there but for whom no practicable alternative exists in this prison. This includes a significant number of people whose neurodiverse needs make life very difficult on a large, busy wing.

Health and wellbeing

- Following changes to the core day, time out of cell has increased from 90 minutes to 135 minutes per day as a minimum, excluding the CSU. Over 500 prisoners go to work, education or training and these men get 6-7 hours each day. For prisoners who work as cleaners (about 150 men), this extends to 8-9 hours per day. Remand prisoners can opt into any of these activities. The minimum time out of cell is better than it was but still not enough.
- Staffing has improved over the last year, which has meant more prisoners being able to attend purposeful activity and fewer hospital escorts cancelled. Hospital escorts have also been helped by the prison having their own taxi for appointments.
- In the last few months of the reporting year, there has been extreme pressure on secure mental health beds in the region. This has meant that prisoners have had to wait longer for transfers to secure units. Furthermore, Birmingham has been unable to accept prisoners with mental health problems from other establishments that do not have an inpatient facility.
- Primary care has experienced ongoing staffing problems, with an over-reliance on agency staff.

Progress and resettlement

- Too many prisoners are still spending too long on remand. In June 2024, one prisoner had been on remand for more than four years. A further six prisoners have been remanded since 2021; 13 since 2022; and 107 since 2023. Years spent on remand are a missed opportunity to do rehabilitative work and are very damaging to family relationships. This is especially true for prisoners whose families live far from Birmingham.
- The prison still holds too many sentenced prisoners who should have progressed on to another establishment.
- At the end of the reporting period, there were 17 Imprisonment for Public Protection (IPP) prisoners in the establishment, including those who have been recalled.
- Prisoners should receive one key working session per week, but this is not the case: on average, only 38% of men are receiving a weekly key work session.

3.2 Main areas for development

TO THE MINISTER

- Fully cognisant of the current population pressures, the Board still believes that, for most prisoners, single cells are the only safe and humane option in the 21st century. What plans does the Minister have to increase the ratio of single to double cells?
- Again, the Board asks what the Minister intends to do to reduce the amount of time men spend on remand and asks what resettlement support they will receive?
- Bearing in mind the number of elderly prisoners with reduced mobility on the inpatient wards at Birmingham (and in many other establishments), what plans does the Minister have to introduce secure nursing homes to provide alternative - and more appropriate - accommodation for such prisoners?

TO THE PRISON SERVICE

- The built environment that people live and work in has a huge effect on their physical and emotional wellbeing. What will the Prison Service do to improve the failing infrastructure at HMP Birmingham to make it safer and more decent for staff and prisoners, especially those with disabilities?
- The recruitment process for prison officers is not fit for purpose. This is evidenced by the high attrition rate. (See Graph 1.) Although local efforts at Birmingham, including mentoring and exit interviews, have reduced the number of officers leaving in their first year of service, a significant number of unsuitable appointments are still being made. A more effective interview process, involving local Governors, would, in the Board's view, yield benefits for everyone concerned. Could the Prison Service please review their recruitment and retention processes?

TO THE GOVERNOR

- Despite being better staffed in the last few months of the reporting period, the percentage of prisoners receiving the locally agreed weekly key working session is still low. How will the Governor ensure that the delivery of key working sessions is improved?
- How will the Governor ensure that prisoners, especially those new to the establishment, have enough kit to meet their needs?
- What will the Governor do to reduce the disproportionate use of force against black prisoners and those with a mixed ethnic background?

3.3 Response to the last report

Issue raised	Response given	Progress
To the Minister What will the Minister do to reduce the amount of time that prisoners spend on remand?	The Government has introduced a 'raft of measures' to improve the justice system, including the recruitment of more judges and the refurbishment of court buildings.	No noticeable impact on prison remand population at Birmingham or on custody time limits.
Single cells are not available for most prisoners.	Double cells are never desirable, but population pressures mean that this is	No progress; population pressures are worse than last year.

	inevitable in the shorter term.	
What will the Minister do to provide resettlement support to remand prisoners?	The Government is working to extend resettlement support to remand prisoners. The probation team has been increased and works with all prisoners.	Prison does work with all prisoners, pre-release, but the early release scheme has had an impact on the effectiveness of this, as will recent changes to standard determinate sentences.
To the Prison Service		
What will be done to ensure there are enough staff to run a full regime and reduce missed appointments?	Improved regime planning, cross-deployment and support of new officers has increased staff availability.	Staffing has improved and is now at 84% availability. This has had a positive effect on the regime.
Will the Prison Service review the appointments process to reduce attrition?	The Prison Service claims that a centralised recruitment process is necessary to cope with high demand.	Mentoring and improved support for new staff has reduced attrition, but it is still too high. Involving local Governors in recruitment would be optimal.

Evidence sections 4 – 7

4. Safety

Leaders take a positive, analytical and progressive stance in respect of safety. The IMB has observed three safer custody meetings during the year and has noted the attention paid to data, particularly data of concern. Analytical methods have been modified to make data more fit for purpose and practices have been modified (some modifications based on professional development opportunities undertaken by the head of safer custody).

The Board has noted, however, that attendance at safer custody meetings could be improved, with better representation from residential managers and operational wing staff. At the end of the reporting year, figures for self-harm and, particularly, violence remain uncomfortably high.

The Board's overall impression is that senior management have a good awareness of the situation in the prison through appropriate collection and analysis of data. They also have a desire to address the issues, although the resulting actions are not having the necessary impact in terms of improving safety for prisoners.

4.1 Reception and induction

The Board has observed that, for a very busy prison, reception runs remarkably smoothly, due to good oversight by the staff there. There have been a few occasions recently when court presentations have been late because prisoners have not been brought over to reception in a timely fashion.

Reception and induction procedures are covered by an early days in custody policy, which, at the end of the reporting period, is being updated to ensure greater accountability. Induction for new prisoners usually takes place over five days and starts in reception. Prisoners will be searched and a body scan will be carried out. They will be seen by a nurse and screened for health problems and substance misuse issues. Cell-sharing risk assessments are also carried out in reception.

Once in the first night centre (Papa wing), they will be assessed for education and work. Resettlement staff are available to help with practical issues such as access to PIN (this is the personal identification number that allows prisoners to make calls) phones. Most prisoners will remain on Papa wing until space becomes available on another wing. The exception is for those who need opiate substitution such as methadone, who will go to Mike Wing to continue their induction there. Prisoners are supposed to have a key working session within 72 hours of arrival, but this does not always happen.

Community information leader (CIL) workers are on every wing and are invaluable in providing support to new prisoners who need extra help.

A recurring issue on P wing over the whole year has been the serious shortage of kit, in the form of cell equipment such as bedding, kettles, curtains and clothing.

4.2 Suicide and self-harm, deaths in custody

There have been five deaths in custody in the reporting year. Three men died in hospital, while one man, who had only been in the prison for a few days, apparently took his own life (the coroner's report is pending) and one man was found dead in his cell, with the cause as yet unknown. Two of the hospital deaths have been reported on by the Prisons and Probation Ombudsman (PPO), with no recommendations for the prison. The remaining three deaths have yet to be reported on and inquests held.

Deaths in custody are, clearly, traumatic for the families of the deceased, but also upsetting for staff and prisoners close to the event. The Board has observed that the procedures for supporting staff and prisoners in the aftermath of a death are very comprehensive.

The ACCT process appears to be well managed and members of the board check ACCT books when doing monitoring visits.

4.3 Violence and violence reduction, self-isolation

Although the number of violent incidents varies from month to month, there has been a clear upward trend in the number during the reporting year (35 per month, up to 58). Data show that this is now one of the most violent prisons when compared to similar prisons. Data for May 2024, for example, show assaults against staff much higher than in any other comparator prison. (In HMP Birmingham, it was over 20 per 1,000 prisoners, followed by HMP Norwich, with just over 15 per 1,000.) In the same month, Birmingham was third highest for 'prisoner-on-prisoner' assaults. The most common reason given for assaults was 'retaliation'. At the safer custody meeting in June 2024, four main drivers were identified by the prison:

- capacity and overcrowding;
- staffing levels and lack of experienced staff;
- gang affiliations and pre-existing inter-prisoner conflicts; and
- lack of collaboration between safety, security, drug strategy and psychology teams.

Senior staff demonstrate in meetings that they are very well aware of the issues and as stated above, take the situation very seriously and intervene as they see as appropriate. Unfortunately, interventions have not had a significant impact and bullet point four, above, raises questions of managerial capacity.

4.4 Use of force

Use of force (UoF) figures are judged to be too high by senior staff in the prison and are high against comparator prisons. Whilst it is worrying to see high figures, that this issue is raised by the appropriate Governor at safety meetings and by the Governor at an IMB meeting and that action is being taken to reduce instances are all positive signs. The prison says that all UoF incidents are recorded: as an example, of 93 incidents recorded in January 2024, 43% only required the use of a 'guiding' or 'escorting' hold. There is a body worn video camera (BWVC) meeting every week, which the Board observes; the Board also regularly speaks to the UoF coordinator. One of the actions from such meetings includes the UoF coordinator working with individual officers to help them reflect on their practice. Feedback of good practice and that which needs improving are given to all custodial managers. In June 2024, a special event 'Use of Force Week' was held to provide professional development for staff and included input from external agencies.

The equality, diversity and inclusion action team report that force is still used disproportionately against black prisoners and those with a mixed ethnic background.

At the end of the reporting year, there were some small signs that the situation is improving and Birmingham's position in the UoF 'league tables' has improved, but from a very low base.

See Graph 2

Body worn video cameras: the percentage of BWVCs being activated during UoF incidents has increased greatly since the previous reporting year. This increase is helpful when reviewing incidents when force is used.

See Graph 3

4.5 Preventing illicit items

Over recent years, the use of the X-ray body scanner has significantly reduced the number of drugs and other illicit items being brought into the prison by this route.

See Table 1

Enhanced, airport-style gate security has also helped reduce the number of illicit items being brought into the establishment.

HMP Birmingham continues to be troubled by drones transporting illicit items such as drugs and phones for prisoners. One wing is being fitted with grilles over the windows to prevent prisoners reaching out to get these items.

5. Fair and humane treatment

5.1 Clothing, food, accommodation

Kit: There have been major problems over the reporting year with availability of basic kit, such as bedding, clothing, toiletries, etc, especially in the first night centre. This has led to prisoners spending their first night in prison without bedding. Residential managers are fully aware of this and have put in extra financial resources, but it continues to be an issue. The Board believes that if prisoners were accountable for issued kit and officers were better at checking this, the matter could be largely resolved. More accountable systems need to be in place and planned funding needs to recognise that, in a reception prison such as Birmingham, far more kit will be needed.

Sheets continue to be used as curtains. New curtains have been ordered and once the correct wall fittings are in place, sheets can once again be used for beds. There is insufficient provision of privacy curtains.

Tribute should be paid to the prisoners themselves, who monitor the kit situation closely and provide regular reports to senior managers. This is also an issue that is raised regularly at prison council meetings.

Food: The IMB receives a significant number of formal and informal complaints about the food, mostly relating to portion size. The diet is very carbohydrate heavy and very light on fresh fruit and vegetables. Prisoners seldom complain about the health aspect of the food, which is perhaps just as well, as the £3.04 budget per prisoner, per day, would not allow for the Government's '5-a-day' health advice to be followed.

Prisoners are at particular risk of vitamin D deficiency and are defined as a vulnerable group by the Government. In the Board's view, they should have access to free vitamin D supplements, but this was not provided in Birmingham during the reporting year.

Accommodation: As already highlighted in Main Findings there are too few single cells available in the prison; cell sharing, coupled with little time out of cell, is both inhumane and a serious risk to prisoner safety. Only in prison are adults expected to share a bedroom and toilet with someone they have never met before. The situation will improve somewhat once the three refurbished Victorian wings become available but it is the opinion of the board that the overwhelming majority of accommodation should be single cell.

Throughout the reporting year, the IMB received complaints from prisoners about accommodation. These have included it being too hot in summer, especially on the top landings, and too cold in winter, particularly when exacerbated by leaks in the roof. Lifts being out of operation have made life difficult for prisoners with disabilities. The estates department does its best to respond to these problems, but its efforts have been hampered by shortages of parts for old machinery/ equipment. In short, there are more upgrades required than there is funding available for.

5.2 Segregation

From the Board's observations, the care and separation unit (CSU), where prisoners are segregated, appears to be generally well managed and staffed. Officers seem able to deal with the complex needs and challenging behaviour of some of the prisoners who are segregated.

Segregation reviews are well chaired and attended by relevant participants, including the mental health team, chaplaincy, the neurodiversity support manager and custodial

managers (CMs), with the IMB observing. There are still many occasions when a security representative is not present although this would have been helpful.

The number of prisoners segregated remains broadly the same as in the previous year, with most stays being of short duration. The average length of stay in the CSU is 8-9 days. There have been two occasions in the reporting year when a prisoner has had a stay of more than 42 days (the limit allowed without external authorisation). The reason for the extended stay was that the prisoner concerned, well known to the Board, has complex neurodiversity needs and felt safer in the CSU than elsewhere in the prison. All efforts to locate him to a more suitable environment failed. As with last year and the year before, special accommodation has not been used.

See Graph 4

5.3 Staff and prisoner relationships, key workers

The improvement in staffing levels has contributed to greater stability in the prison. However, one of the best opportunities to improve staff prisoner relationships - key working - is not being taken advantage of.

The core expectations for key work delivery are that prisons must utilise all their allocated resource for this task and that it must be profiled. Every prisoner must receive one key work session every four weeks as a minimum and any remaining resources must be targeted at an enhanced offer for individual prisoners based on an assessment of risk, need and cohort prioritisation.

HMP Birmingham set themselves a more ambitious target for key working than that outlined above; that prisoners should have one key working session per week. They failed to meet this self-imposed target. In the second half of the reporting period, the percentage of completed weekly key working sessions only exceeded 50% on two occasions. The average percentage of prisoners receiving weekly key working sessions was 38%.

There is evidence that many of the key working sessions that do take place are valuable and well recorded, but there are simply not enough of them.

See Graph 5

5.4 Equality and diversity

Race: The Board is seriously concerned about the disproportionate use of force on black and mixed-ethnic heritage prisoners and feels strongly that further work is needed in this area to improve outcomes. In recent years, there has been no change. The Board has raised this issue in previous reports, and, to the prison's credit, it has taken steps to try and address this, with staff training in cultural awareness. However, yet again, no measurable impact is seen in the data. This is, perhaps, doubly disappointing because the ethnic profile of the operational staff at Birmingham is much more diverse than in other prisons in the region.

See Graphs 6 and 7

Data also reveal disproportion in the number of adjudications (disciplinary hearings held when a prisoner is alleged to have broken prison rules) and negative incentives scheme outcomes for black and mixed-ethnic heritage prisoners. The prison explains this as the result of a small number of repeat, serial offending individuals. The Board believes that this requires more work, in the same way as reducing the use of force on this cohort.

The prison holds race forums and black prisoners at these have expressed the following views:

- When all the staff on a wing are white, black prisoners perceive themselves to be less well treated and used the term that they may feel 'provoked'.
- There was a perception that they were the last to be let out of their cells on a wing, as it was easier for staff.
- There was a perception that they were given mandatory drug tests more frequently than white prisoners.

In the January forum, the men attributed disproportion to a 'lack of cultural awareness among staff and to a 'lack of understanding'. The prison responded by providing cultural awareness training but, as staff turnover continues, the matter cannot be considered closed. This is an ongoing, unresolved issue and the prison needs to find a way of reducing the disproportion.

The prisoners also said that minority ethnic men were more likely to have gang culture 'follow them into custody'.

The Board recognises the work that has taken place to help promote equality within the prison and has observed relationship to generally be good. Nevertheless, the above issues reveal underlying concerns that need to be addressed.

The Board is concerned that discrimination incident report forms (DIRFs) are often unavailable on the wings and staff are not always sure where to find them. These need to be made much more accessible for prisoners.

Neurodiversity: The prison appointed an excellent neurodiversity support manager (NSM) in October 2022, who has made a positive impact on the experience of autistic and other neurodivergent prisoners. Men still speak of problems occurring before their needs have been identified. But, once this has happened, many of these problems, such as being put in unsuitable locations, are rectified. The NSM has identified and supported hundreds of prisoners over the reporting year. Referrals are taken from all parts of the prison, including prisoners themselves. In the reporting year, there were 403 referrals, all of whom appear to have been screened and support given where appropriate. These data show that at least one-third of the prison population has neurodiverse needs. Having a NSM in post has revealed the need for this service, although one member of staff is not enough.

See Table 2

Disability: A survey of prisoners who use wheelchairs identified:

- broken lifts, causing problems accessing medication and social visits;
- a toilet screen in a cell restricting wheelchair movement;
- broken showers and no alternative provided;
- the inability to access certain activities, e.g. library, gym, employment hub;
- praise for healthcare staff and officers and a high level of satisfaction with staff support for those using wheelchairs.

Age: An 'age' forum has been held, and the prisoners on the social care wing are well provided for. They have a garden, a greenhouse and relevant activities.

Sexual orientation or gender reassignment: The Board has observed a transgender prisoner receiving prompt and positive support from the equality team when arriving in prison in some distress. Feedback from other transgender prisoners has been good. An

appropriate pack of supplies is issued on arrival and efforts taken to ensure access to suitable products via the canteen order system (a facility where prisoners can buy snacks, toiletries, stationery and other essentials using their allocated funds).

Care leavers: Although not a formally recognised protected characteristic group, care leavers have been given a forum in the prison. The Board welcomes this recognition of the challenges faced by many care leavers in custody.

5.5 Faith and pastoral support

The chaplaincy team has had significant staffing issues over the reporting year, mainly due to staff leaving. This is largely resolved now, but they are still having difficulties appointing a permanent Roman Catholic chaplain. All the major faiths are represented, with Muslims being the largest group attending regular worship: Friday prayers are held in three different locations in the prison every week. The chaplaincy team works hard and is visible throughout the prison.

5.6 Incentives scheme

The number of prisoners on the basic (bottom) level of the incentives scheme has increased from 48 (5%) in June 2023 to 79 (8%) in June 2024. In the same period, the number of men on an the enhanced (top) regime has fallen from 222 (22%) to 163 (17%). This is a concerning trend.

See Graph 8

5.7 Complaints

A total of 2,402 complaints were recorded in the reporting year (June 2023-May 2024), which is a significant reduction, compared with the same period in the previous year (3,603). The highest number, 614, were related to property; 316 were confidential complaints; 188 concerned canteen; and 187 were about staff.

Canteen-related complaints dropped dramatically in the second half of the reporting year, falling from 175 (July-December 2023) to only 13 (January-June 2024). This was due to improved processes, which have benefitted prisoners while also making it more difficult to make false claims for missing canteen.

5.8 Property

Property is one of the most common reasons for prisoners submitting applications (prisoners' written representations) to the IMB and is the most common issue found in formal complaints to the prison.

These fall into three main categories:

- Property going missing on transfer, especially when a prisoner has a higher volume of property than they are allowed to travel with. Property forwarded post transfer often goes astray and there is no accountable tracking system in place.
- Cell clearance continues to be an issue. Cell clearance should be undertaken within 48 hours. Most complaints result from a failure to safeguard property. It is clear that, unless cell clearance is done immediately and with the correct safeguards, property will go missing.

6. Health and wellbeing

6.1 Healthcare general

The large healthcare team at Birmingham seems well managed and healthcare delivery is overseen by NHS England health and justice commissioners, who visit the prison regularly. From our observations, relationships with prison senior management appear good, with all parties adopting a positive collaborative approach.

HMP Birmingham has a busy inpatient unit with two wards, one for physical health problems and one for mental health. This facility is also a resource for other prisons in the region that do not have 24-hour healthcare or an inpatient unit. Staff on the unit have had to care for some extremely complex cases over the past year.

Staffing has been a significant problem towards the last few months of the reporting period, especially in primary care and the clinical substance misuse team. Recruitment has been successful but time delays, caused mainly by the recruitment and human resource processes in the healthcare trust, mean that new staff will not be in post until the autumn.

In response to staffing problems, prison healthcare staff have been proactive in reaching out to local universities to promote prison healthcare as a possible career move.

Birmingham used to have an in-house X-ray machine, but financially this is not worth replacing. Other options, such as a mobile X-ray machine, are being investigated. Likewise, dialysis is not available on site, with men needing dialysis having to attend the local hospital instead. To restore in-house dialysis is not financially viable.

The pharmacy unit seems to be well managed and fully staffed, with regular medicines management meetings.

6.2 Physical healthcare

Primary care is fortunate to have longstanding GPs, but shortages of nursing staff have been a problem. Several of the medication hatches on the wings are not fit for purpose, being so hot that not only are they uncomfortable for staff but also too hot to store medication at the correct temperature. Funding to install air-conditioning units has been agreed.

Healthcare managers are negotiating with local cardiology and dermatology consultants, with a view to running clinics in the prison.

The general inpatient ward in the healthcare department has a significant number of frail, elderly prisoners with reduced mobility who need nursing care. If they were not in prison, these men would be in a nursing home. Although this department was purpose built, it is still not an ideal environment.

Waiting times are generally comparable to those in the community.

See Table 3

6.3 Mental health

In the Board's view, mental health services in the prison are good. The mental health team has close links with community mental health services and there are regular clinics with consultant psychiatrists.

Referrals to secure mental health units have been difficult over the last few months of the reporting period due to a lack of available beds in the region, but the situation is showing some signs of improvement.

There is a very welcome emphasis on staff wellbeing in the healthcare team.

6.4 Social care

Prisoners who require help with personal care are housed on J wing, where they have regular access to social workers and occupational therapists. J wing residents also have access to a very pleasant garden, where several of them work.

6.5 Time out of cell, regime

During the last reporting period, allocated time out of cell was 90 minutes per day. During this reporting period, it has increased to 135 minutes per day. Although this is an improvement, it is still unfair and inhumane.

6.6 Drug and alcohol rehabilitation

Severe staff shortages have had a significant effect of the delivery of drug and alcohol misuse treatment. This has meant that there has been little group work on the main drug treatment wing in the last few months of the reporting period and prisoners are not receiving an appropriate number of key working sessions. The average caseload of men needing interventions for drug and alcohol problems is approximately 300. Of these, an average of 150-160 men are prescribed opiate substitution treatment (OST), usually methadone or Espranor. Where appropriate, prisoners can be prescribed Buvidal, the very expensive, long-acting buprenorphine. The clinical team appointed a second non-medical prescriber (NMP) shortly before the end of the reporting period, which has helped eased the pressure.

The need for alcohol detoxification increased in the last few months of the reporting period. Some staff believe that this may be because prisoners exaggerate their alcohol consumption when screened in reception in order to qualify for a medical detoxification.

For those who wish to continue their recovery, D wing offers a drug-free environment, with access to group work and other activities.

There are regular visits from mutual aid groups, including Narcotics Anonymous, Cocaine Anonymous and, more recently, Alcoholics Anonymous.

The recovery team has trained many men in the use of nasal naloxone, which can help reverse the life-threatening effects of an opiate overdose. It is given to prisoners on their release so that they are equipped to help prevent deaths from opiate overdoses in the community.

Recent recruitment should lead to a fully staffed substance misuse team by autumn of 2024.

6.7 Soft skills

The prison receives regular visits from a pair of therapy dogs, who will sit in on such occasions as assessment, care in custody and teamwork (ACCT) reviews.

There is a regular choir which meets once a week which provides men with a very therapeutic experience.

7. Progression and resettlement

7.1 Education, library

At the beginning of the reporting year, education staff reported similar problems in getting prisoners to attend, as was the case two years ago. The attendance figures for this year are recognised as being poor and are not showing any signs of improving. Attendance against planned capacity averaged 42%, the highest being 47% in April 2024 and lowest being 37% in January 2024. Issues with attendance were reported to be exacerbated by the way in which men are allocated to courses, based on filling places rather than meeting requests from prisoners. The number of men allocated to courses exceeded the available spaces, with the expectation that there will be significant non-attendance. This was not always the case, which led to men attending their session but with no place left for them in the classroom. The allocation of excess participants artificially enhanced attendance figures, as statistics are based on men attending compared with capacity, not the percentage attending compared with allocation.

The Board was pleased to note that by the end of the reporting year, the new head of activities had established a greatly improved working relationship with the education unit and the issues of allocations had greatly diminished.

The issue of poor attendance did not improve significantly during the reporting year. The head of learning and skills has established the practice of asking CMs to account for absences at a morning meeting once a week, but this has not (yet) had an impact.

There has been a slight improvement in men physically attending the library, as one escort is available one morning per week. However, library staff report that the escort is taken for other duties approximately half the time. Education staff regularly take learners to the library and, occasionally, wing staff bring prisoners on their own initiative.

At the start of the reporting year, there was still no clarity about any plan to extend the library into the adjacent room (as was initially planned when the library was relocated) or to move it to a new location to allow for activities such as group reading. We are pleased to report that the library is about to be relocated to a much larger space and become part of the learning hub, a brand new bright and spacious facility.

The report on the work of the Shannon Trust in improving levels of literacy was very positive. Unfortunately, the facility on P wing, which was particularly praised, was taken out of use by the residential manager (to increase medical provision) without consultation. An alternative, but less suitable, space was provided. This is an example of poor communication between areas of the prison, which the IMB comes across on a regular basis.

7.2 Vocational training, work

The prison claims there is work available for all prisoners who want to work. Opportunities include:

- working in DHL, putting canteen packs together;
- working in the kitchen, which includes the chance to gain food hygiene certificates; and
- working in the workshop, making wooden sheds.

Unfortunately, the extensive rebuilding programme in the prison has led to some courses being suspended (see below). The opportunities for work and training are not as diverse as they could be.

7.3 Offender management, progression

As previously stated, there are still too many prisoners who are waiting to be sentenced. Many have been on remand for several years, which is mainly due to the national court backlog. Too many prisoners are still spending too long on remand. Many prisoners want to move to other establishments so that they can get on with serving their sentence and doing the necessary courses on their sentence plan. Many also want to move to a prison nearer their family.

In addition to those not yet sentenced, there are too many sentenced prisoners in Birmingham waiting to be moved, which are not helped by the population pressures.

There are 17 IPP (imprisonment for public protection) prisoners in the establishment, including those who have been recalled. Each one has a dedicated offender manager who supports them.

7.4 Family contact

The contract for family work is held by PACT. The visits' hall is open every day and the Board has observed a good atmosphere in the hall.

There have been ongoing problems for family members trying to book social visits when being put through via the prison switchboard. The line rings out when, in fact, it is engaged. This does not happen when the visitor centre is phoned directly.

The prison has been able to facilitate social video calls wherever necessary, for example, when family who are physically distant cannot visit in person.

7.5 Resettlement planning

Regarding plans for employment in the prison and beyond, the expectations hub (a prisoner-led initiative) has rewritten the induction process. Resettlement staff visit the induction wing twice a day and provide support to those who struggle with the electronic form about employment plans. This form is issued automatically after the compulsory electronic maths and English assessments on the 'virtual campus'. Now the follow up one-to-one support is effective in most cases, although there are still a small number who refuse to engage.

Owing to the extensive rebuilding/refurbishment programme in the prison, some courses have been temporarily removed: barbering, mentoring, car maintenance and retail. This has reduced opportunities for prisoners to train in these areas.

A pre-release course runs twice a week for men on 12 weeks or less of their sentence. This has been negatively impacted by the early release scheme (up to 70 days early release), meaning that men cannot always complete the pre-release course.

Inside Time employs a former prisoner to lead on courses that link with employers and secure worthwhile jobs on release. This is an effective use of the skills, knowledge and understanding of someone with 'lived experience'.

The pre-release team raised concerns about case notes being uploaded late to P-Nomis (an internal computer system), sometimes 24 hours or more after arrival. They visit new arrivals early in the morning and a lack of case notes impedes what they can achieve. There have been occasions when known risks to staff have not been recorded on P-Nomis in a timely manner, thus exposing the team to inappropriate behaviour.

8. The work of the IMB

Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	8
Number of Board members at the end of the reporting period	8
Total number of visits to the establishment	303

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	10	45
B	Discipline, including adjudications, incentives scheme, sanctions	8	12
C	Equality	7	2
D	Purposeful activity, including education, work, training, time out of cell	8	16
E1	Letters, visits, telephones, public protection, restrictions	34	24
E2	Finance, including pay, private monies, spends	21	18
F	Food and kitchens	14	19
G	Health, including physical, mental, social care	39	36
H1	Property within the establishment	39	33
H2	Property during transfer or in another facility	16	3
H3	Canteen, facility list, catalogues	11	5
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	28	21
J	Staff/prisoner concerns, including bullying	56	45
K	Transfers	19	10
L	Miscellaneous	53	42
	Total number of applications	312*	325*

*The totals in the columns above do not 'add up' because, in many cases, prisoners submit a single application form asking for assistance with more than one type of issue such as, for example, canteen and accommodation.

Annex A

Service providers

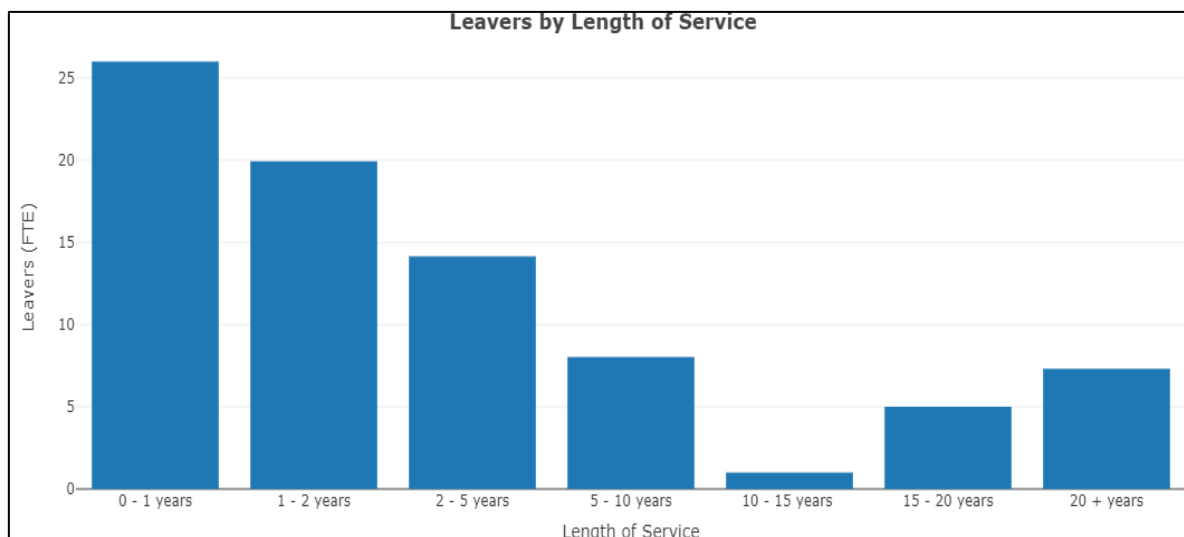
- Buildings and maintenance: Amey
- Catering: Aramark
- Education: Novus
- Healthcare (physical and mental health): Birmingham and Solihull NHS Foundation Trust
- Psychology: HM Prison and Probation Service (HMPPS)
- Substance misuse psychosocial services: Cranstoun
- Social care: Aspect Care, commissioned by Birmingham City Council
- Visits and family contact: Prison Advice and Care Trust (PACT)

Annex B

Tables and graphs

Graph 1

Operational staff leaving by length of service



Graph 2

Incidents of Use of Force: July 2023-June 2024

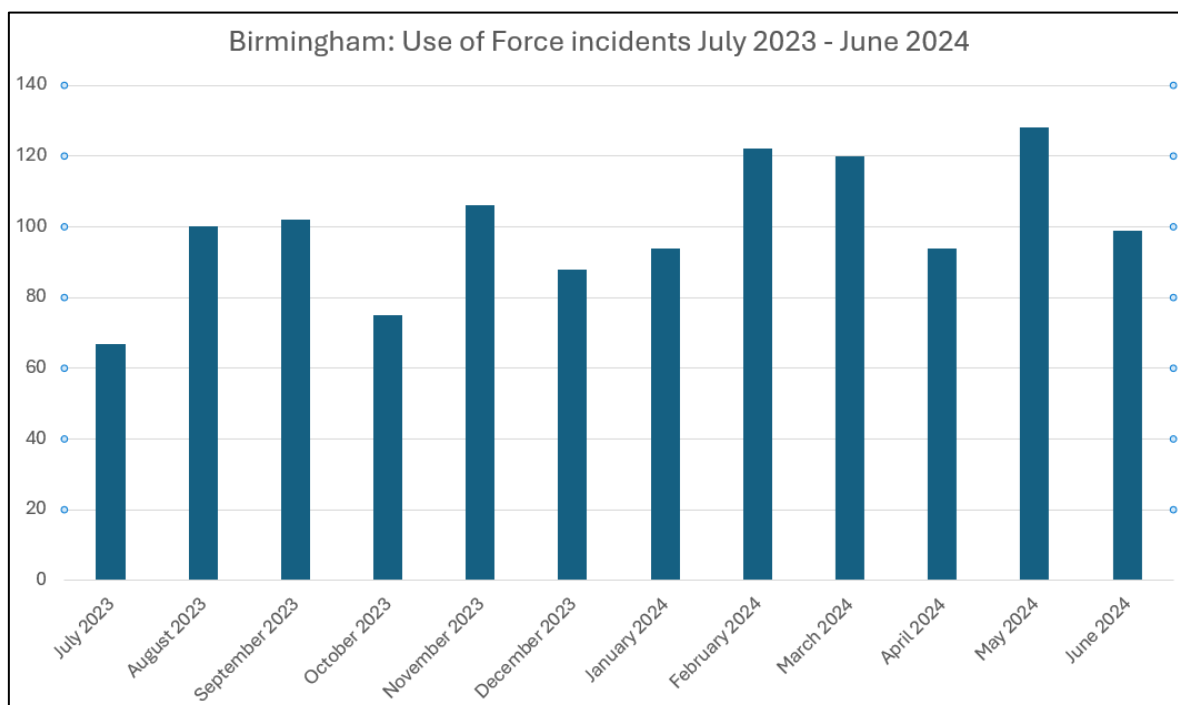


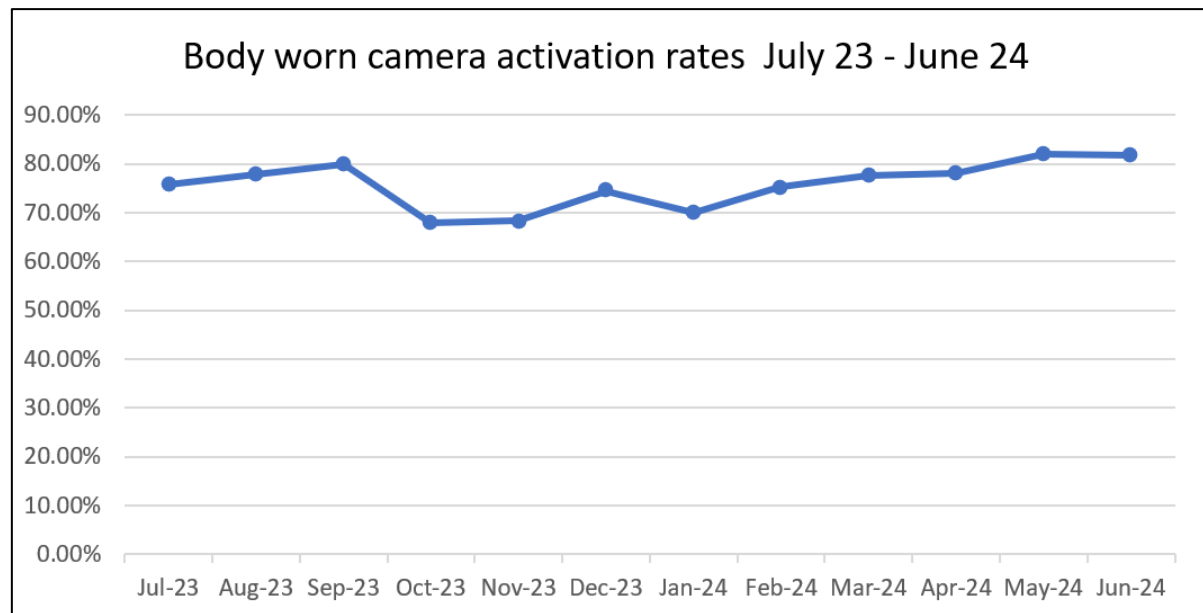
Table 1

X-ray body scanner: number of tests and number of positive readings

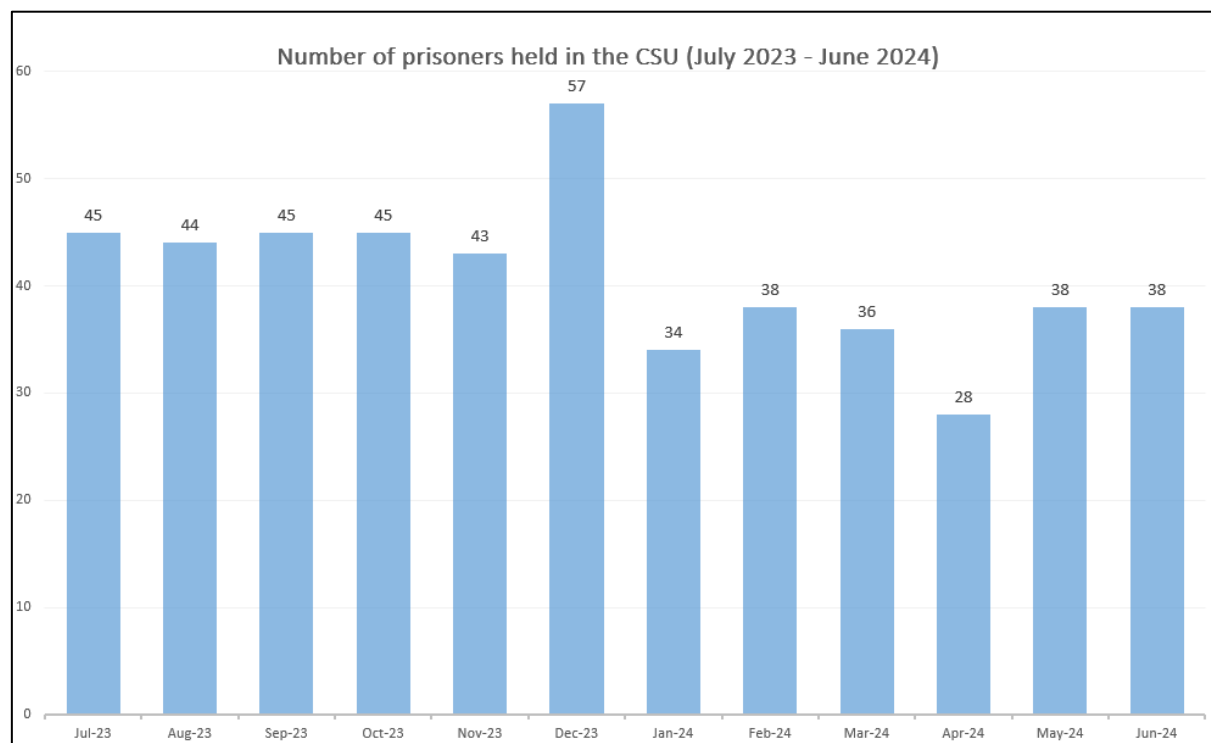
Period	Jul 2023	Aug 2023	Sep 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024
Tested	645	699	764	859	872	724	724	626	666	736	812	777
Positive	2	7	4	3	1	1	1	1	2	1	1	3

Graph 3

Body worn video camera activation rates, July 2023-June 2024



Graph 4: Number of prisoners held in the CSU, July 2023-June 2024



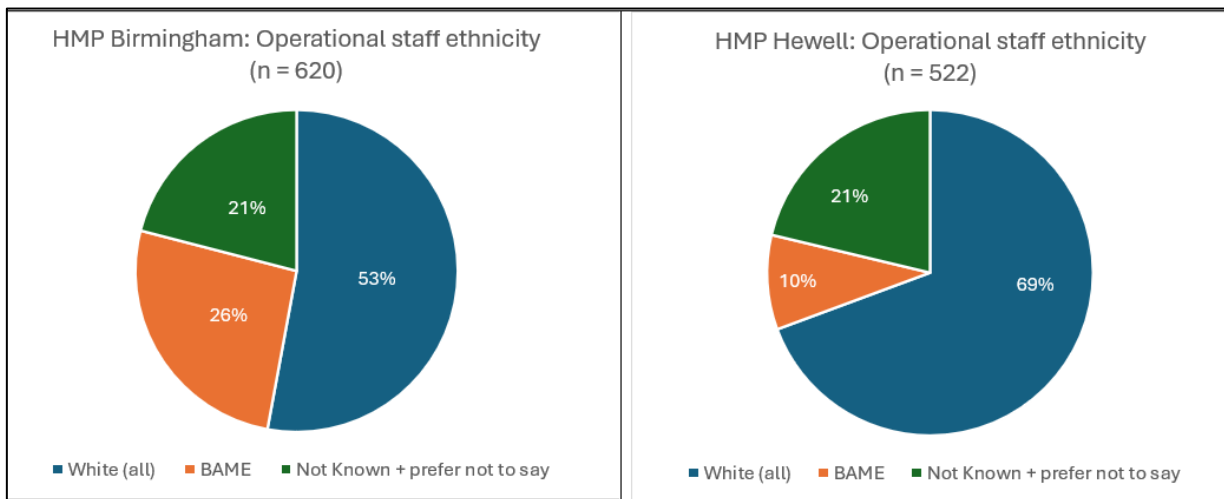
Graph 5

Percentage of projected weekly key work sessions completed, Jan-June 2024



Graph 6

Ethnicity of operational staff at HMP Birmingham compared with the nearest local prison (June 2024)



Graph 7: Ethnicity of prisoners at HMP Birmingham (June 2024)

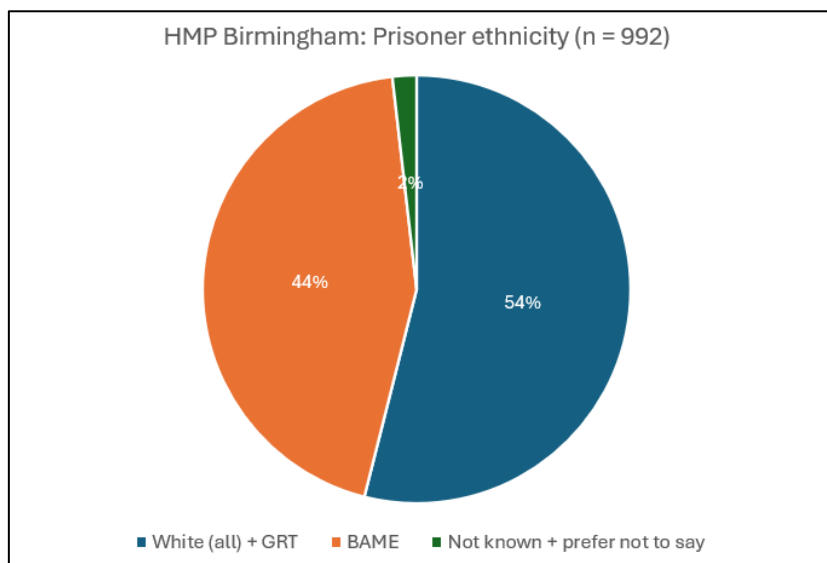


Table 2

Neurodiversity: Two snapshots of monthly data from October 2023 and April 2024

Condition	October 2023	April 2024
Autism spectrum condition – identified & supported	40	34
Dyslexia identified (of above, number supported by ND lead)	161 (9)	124 (16)
Social & emotional needs (of above, those with significant ADHD & receiving input)	235 (33)	126 (52)
Learning Difficulties identified on rapid screening (of above, those with significant LDs & receiving input)	95 (21)	72 (16)
Traumatic Brain Injury – identified and supported	6	9

Graph 8:

Incentives scheme: percentage of prisoners on the basic, standard or enhanced regimes

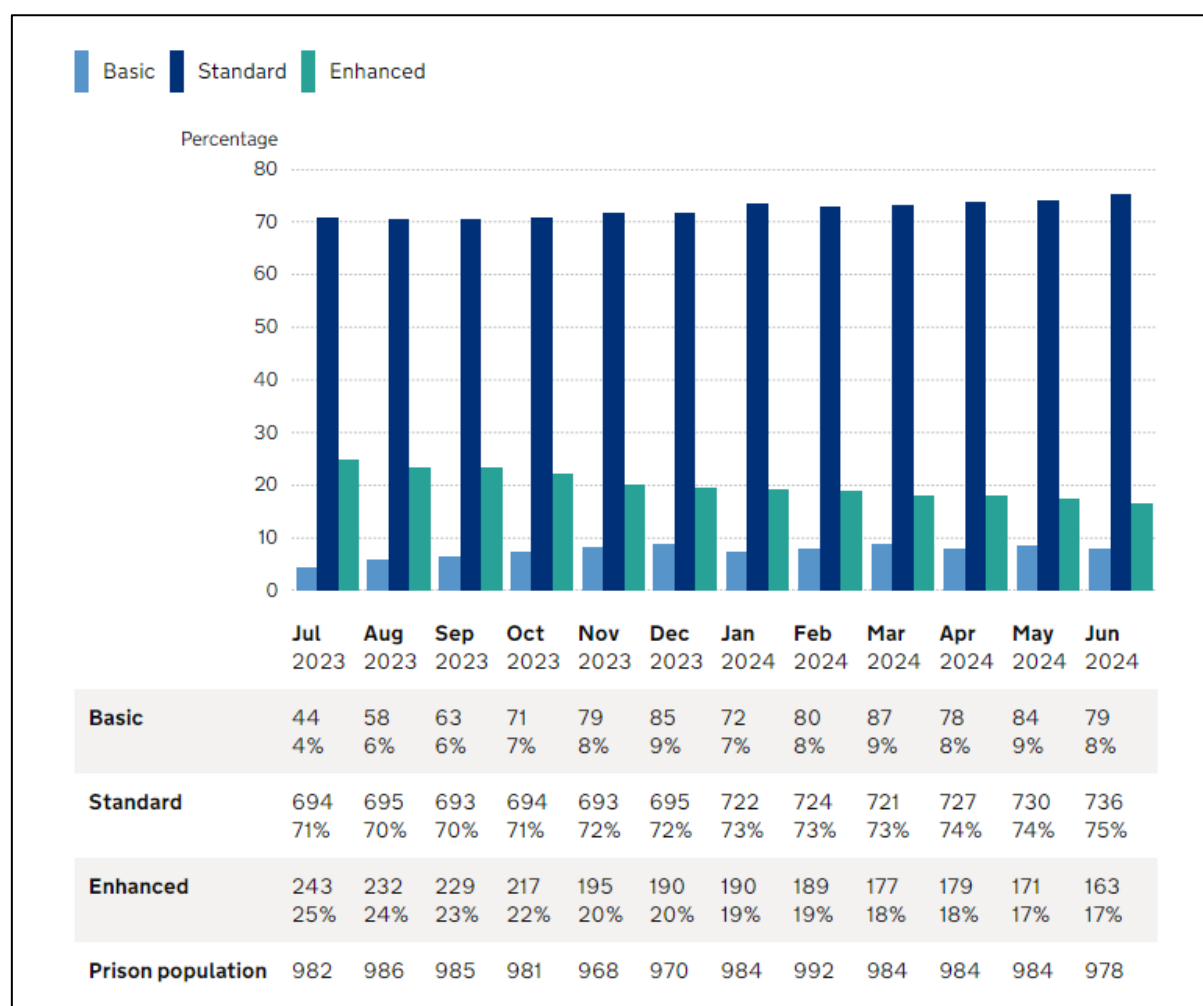


Table 3

Clinic waiting times: June 2024

Clinic	Waiting time for appointment: June 2024
GP	2 weeks 2 days
Physiotherapy	3 weeks 2 days
Chiropody	1 week 2 days
Dental (First assessment)	6 weeks



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