

# Annual Report of the Independent Monitoring Board at HMP Bristol

For reporting year 1 August 2023 to 31 July 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 Bristol is a category B public sector local and resettlement prison holding adult and young adult male offenders. The prison has an operational capacity (the maximum number of prisoners that can be held without serious risk to safety, security, good order and the proper running of the planned regime) of 580<sup>1</sup> adult men. The prison has had a roll of around 560 to 570 prisoners throughout the reporting year.

HMP Bristol was first opened in 1883 and is mainly a Victorian prison, built with cells designed for one prisoner but now mostly housing two prisoners. Two further wing buildings were added in the 1960s and 1970s, with one building having no in-cell sanitation.

The prison is situated on a compact site in the densely populated area of Horfield within the city of Bristol. Prison walls are closely located to exercise areas, enabling banned substances to be thrown over the walls and drones to easily access windows on the residential blocks.

The daily profile of the prison population varies, as many come from the local courts, awaiting trial; have been readmitted following a breach of their licence; or are transferred to HMP Bristol from another prison. Over 100 prisoners are released every month.

At end of July 2024, 226 prisoners were prisoners on remand (39% of the prisoner population at HMP Bristol), which is a similar number to the previous year. A total of 82 were foreign national prisoners (14% of the population at HMP Bristol); and 122 were from a black and minority ethnic background (21% of the prison population), which is slightly higher than in the City of Bristol population (19% in the 2021 census).

HM Inspectorate of Prisons (HMIP) issued an Urgent Notification for HMP Bristol on 26 July 2023, following an unannounced inspection. A previous Urgent Notification was issued in 2019.

This year, HMIP carried out an Independent Review of Progress on 24 to 26 June 2024 and noted that good and reasonable improvements had been made in eight of nine areas of concern from a year ago. The area of insufficient improvement related to safety.

In 2022-2023, the IMB reported that it was seriously concerned about the situation at HMP Bristol and the impact on prisoners and staff. In addition, we raised these concerns with the Director General Operations HMPPS and the local Prison Group Director. Since then, the IMB has seen improvements across the prison, albeit primarily in spring/summer 2024, as it has taken time during the year to deliver the changes. However, these improvements are still in their early stages and the situation remains fragile, both with prison staffing and the demands of the prison population.

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<sup>&</sup>lt;sup>1</sup> 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

#### Safety

- There has been a reduction in the number of deaths in custody, self-harm and violent incidents compared with last year. However, the levels are still higher than other, similar prisons.
- The IMB has seen a lot of focus on improving safety at the prison from the prison leadership team and staff. As a result, purposeful activity and time out of cell has increased, whilst the numbers of prisoners on assessment, care in custody and teamwork (ACCTs) plans, used to support prisoners who are at risk of self-harm and suicide, and constant supervision are lower than last year.
- It appears that many of the adverse safety incidents reported during the year relate to the illicit economy of drugs, prisoner-brewed alcohol, mobile phones and debt.

#### Fair and humane treatment

- The prison is mainly a Victorian building; B wing, which was built in the 1960s (99 prisoners), still has no in-cell sanitation. There is a lack of information technology, and the prisoners must use paper systems for every single transaction.
- Overcrowding continues, with most prisoners sharing a cell originally designed for one prisoner.
- Wing moves took place in February 2024 to create additional capacity for vulnerable prisoners, but this is still insufficient to meet demand.
- Prison staffing levels have increased up to establishment levels and a full regime
  is now being run for much of the time. Most prisoners now spend more time out of
  their cells and some key working is taking place again, depending on staff
  availability and other demands.

#### Health and wellbeing

- There continue to be vacancies in the healthcare team which, although covered by regular bank staff, has resulted in some cancelled clinics and delayed medication dispensing.
- Mental health services have been reorganised and staffing levels are now up to
  establishment figure. The service focuses on prisoners with the greatest need, but
  there is limited support for those with lower-level mental health needs. The number
  of prisoners waiting long periods of time for places in specialist mental health units
  has reduced slightly.
- A stair climber for prisoners with mobility issues is now available to support disabled access to the first floor healthcare department, although the IMB has yet to see it in use.

#### **Progression and resettlement**

 In the summer of 2024, there was a big focus on enabling prisoners to undertake purposeful activity, with close to 80% of prisoners actively engaged in work or education. This has been linked to prisoners receiving positive incentives for participating, and better planning. Education and work are now more consistently delivered and are rarely cancelled on the day due to lack of staff.

- Support for prisoners on release remains an issue, especially the availability of suitable accommodation and ongoing community support services following release.
- Early release schemes have created a reduction in prison occupancy for a short period only. This has created additional workload pressures for the prison offender management and pre-release teams, and reduced engagement with prisoners on more general, sentence-related issues.

#### 3.2 Main areas for development

#### TO THE MINISTER

- HMP Bristol continues to be an overcrowded Victorian prison. What actions will the Minister take to reduce the overcrowding at HMP Bristol and improve the physical environment for prisoners?
- There appears to be insufficient support for prisoners on release to prevent them returning to prison for short periods of time and/or being recalled due to relatively minor licence breaches. How will the Minister address this?
- Many prisoners tell us about their mental health struggles, and the mental health services are only able to focus on the most serious individuals. Will the Minister expand the mental health services to enable all prisoners to have some level of support?

#### TO THE PRISON SERVICE

- Staffing levels at HMP Bristol have improved, resulting in a better experience for prisoners. Will there be regular support for HMP Bristol to help retain staff, as well as regular recruitment going forward to prevent the prison falling below establishment in future?
- When will HMP Bristol have the information technology to enable prisoners to make applications online, reduce frustrations with existing paper systems and free up staff time?
- The prevalence of illicit items in HMP Bristol appears to contribute to the issues of prisoner and staff safety. Will the prison be able to get any additional resources and support to tackle this?

#### **TO THE GOVERNOR**

- Please can the IMB consistently receive regular and timely reports and information to support our monitoring activities?
- Healthcare concerns are one of the top issues raised with the IMB by prisoners at HMP Bristol. Are you satisfied that the contract with Oxleas NHS Foundation Trust meets the needs of the prisoners?
- Key working is focused on the high-risk cohorts of prisoners. Will key working be available for all prisoners in the coming year?

## 3.3 Response to last year's report

Question	Response	Current situation (as of July 2024)
For the Minister		
What is being done to reduce overcrowding?	Level of crowding set by PGD, dynamic and reviewed regularly. No prison will be expected to exceed operational capacity. Longer term, more capacity (20,000 places) being built across Prison Service.	No change: the prison remains overcrowded, at same level as last year.
Will you ensure there are sufficient resources to staff and maintain the prison?	Recruitment and retention is challenging; additional support is being provided; staffing projections exceed required staff numbers. Detached duties and incentivised payment plus, a second colleague mentor and staff reprofiling exercise. GFSL, busiest in the south west, shares our concerns about heating and hot water, with heating and hot water repaired, which should last several years.	Staffing is at full establishment. Average length of service has dropped to 1.4 years compared with 2.0 years last year.
When will we see improved access to healthcare, in terms of physical disability access?	Disabled access to be resolved with a motorised staircase. Oxleas is committed to swift and appropriate access.	Stair climber installed in May 2024, and in use, although not suitable for all prisoners with mobility issues.
Increase access to sufficient and appropriate mental healthcare.	New staffing model maximises contact with prisoners. Currently, there are vacancies, which are being filled by temporary staff.	Mental health staffing up to full establishment.
For the Prison Service		
The number of prisoners has increased, along with self-harm, violence, and deaths. Can the prison roll be reduced to enable the prison to address this effectively?	Option to reduce capacity following UN is not available. Pressures across the whole prison estate. Range of actions in place to address safety:  • Build knowledge, confidence, capability and practice for CSIPs and ACCTs.	No change to prison roll throughout the year. Some improvements seen in levels of violence and self-harm, although the figures for these remain higher in HMP than in similar prisons.

What support or increased staffing can be given to enable a full regime to be run?	<ul> <li>Appoint two floorwalkers.</li> <li>Coach and upskill ACCT case workers.</li> <li>Tactical resourcing support in place: 16 detached duty, 10 incentive payment plus to facilitate a fuller regime. January 2024 saw the launch of a national regime model, including regime planning, with delivery commitments against purposeful activity measures.</li> </ul>	Full regime now being run nearly all the time. A full cancellation of regime was made on only two days.
	planning, with delivery commitments against purposeful activity	
For the Governor		
Please can you provide relevant and timely reports to enable monitoring?		Some inconsistency continues.
When will we see improvements in healthcare, disability access, clinic attendance and medication delivery?		Improvements have been seen, although healthcare remains one of the top issues raised by prisoners to the IMB.

### Evidence sections 4 – 7

#### 4. Safety

#### 4.1 Reception and induction

The prison has a high turnover of prisoners, with around 20 arrivals and departures per day, in addition to those attending court or who have an external hospital appointment. The reception staff are busy processing prisoners throughout the day and late into the evening. Occasionally, the reception still has prisoners past midnight. Prisoners who arrive late do not always see a doctor until the following day. The IMB has heard from prisoners who arrived on Friday evening but did not get their medication until Monday.

All new prisoners who arrive at HMP Bristol are supported at reception and in their early days by existing prisoners who are trained to provide peer support. This appears to work well.

In February 2024, wing moves took place, creating a new induction wing and first night area. This has improved induction time and attendance. However, due to capacity pressures, prisoners are occasionally moved to another wing before completing their induction period.

Detox prisoners are still located on C3 wing, which offers specialist support, until their initial treatment is completed. The IMB has heard positive feedback from prisoners about the detox service.

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

The number of deaths in custody fell compared with the previous year. This year, there were five deaths (nine in the previous year), two of which were, apparently, self-inflicted and one was, apparently, of natural causes; there were two deaths following release. All are being investigated by the Prisons and Probation Ombudsman (PPO) and the inquests have yet to be held.

Whilst this is an improvement, the number of deaths is still higher than other, similar prisons. The prison has focused considerable effort on staff training for managing prisoners at risk, and targeted extra support at the youngest prisoners, aged 18 years.

As the reporting year progressed, there has been a reduction in the number of prisoners with an assessment, care in custody and teamwork (ACCT) plan in place. The average is around 25 a day compared with around 40 last year. All prisoners are regularly reviewed, in line with their plan. A total of 783 ACCTs were opened in the reporting year. The IMB has seen some improvements in the documentation. There is nearly always at least one prisoner a day on constant watch or on high observation, which adversely impacts on staffing. The prison only has two cells for constant watch and the IMB remains concerned that when regular cells are used for a constant watch, they lack the full visibility required.

The number of self-harm incidents by prisoners has fallen slightly in the reporting year and more so in summer 2024. There were 906 reported incidents of self-harm, of which around 50% related to a small number of specific prisoners. The self-harm rate is still higher at Bristol than at other, similar prisons. The reasons appear to be related to frustrations in getting things sorted quickly, such as canteen, social visits or medication. Additionally, the Board has been told by the prison Governor that the impact of illicit items, drugs and debt are contributing factors. The prison has taken a range of steps to address these, with additional staff members to support prisoners and staff and key

working targeted to the highest-risk prisoners. The emphasis on getting all prisoners into purposeful activity of work or education and increasing the time out of cell is believed to have helped reduce prisoners' frustrations and general boredom, as well as supporting improvements to their general mental health.

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

The levels of violence within the prison are lower than last year. There were 340 reported incidents of violence in total, with the trend reducing during the year. A total of 211 incidents were prisoner-on-prisoner incidents and 119 were prisoner-on-staff incidents. The levels of prisoner-on-prisoner violence are comparable with other, similar prisons and the levels of violence directed towards staff is now lower than other, similar prisons.

Many of the actions taken by the prison to address the levels of self-harm have also reduced the levels of violence. Prisoners are allocated to wings to try and manage associations, particularly rival gang members, which can be challenging due to the historic design of the prison.

The IMB recognises that these improvements have, in part, been achieved by having enough staff to enable a full regime to run. The IMB is concerned that if the levels of staff fall and the regime starts to be reduced again, then there could be an increase in self-harm and violent incidents.

On 1 March 2024, there was a serious disturbance on a side wing of B wing, resulting in the wing being out of use for a week whilst repairs took place. The prisoners reported to the Board that this was due to frustration with the lack of mental health support and a recent death in custody. However, staff thought it was due to prisoners being under the influence of prisoner-made alcohol.

In February 2024, wing moves took place to create a new induction wing and additional spaces for vulnerable prisoners. The new vulnerable prisoners wing now accommodates 125 prisoners, an increase from 83 prisoners. However, this is still insufficient to meet the demand. The new vulnerable prisoners wing is more central in the prison. This means that these prisoners are, therefore, experiencing more verbal abuse from prisoners in other wings, especially when moving across the prison grounds, which happens at separate times to other prisoners.

#### 4.4 Use of force

The prison regularly reviews all use of force incidents. Force was used on 707 occasions, which was a lower figure than in the previous year. The data show that there was no racial disparity in the use of force. The IMB monitors some of the reviews, which include the identification of good practice and points of learning. Body worn video cameras (BWVCs) were used in 74% of all unplanned incidents.

There was one occasion when PAVA incapacitant spray (a synthetic pepper spray) was used on a prisoner who was being non-compliant in segregation. This is the first time it has been used in the prison. An independent investigation was carried out and new and additional training has been provided. The prisoner was not injured in this event.

On the rare occasion when there has been a serious incident, the IMB has been informed at the time and attended to observe the management of the incident and the treatment of the prisoner(s) involved. The Board has no concerns about how serious incidents have been managed.

#### 4.5 Preventing illicit items

Unfortunately, illicit items exist within the prison, specifically illicit drugs, prisoner-brewed alcohol and mobile phones. Nearly every day, there are a couple of prisoners who are under the influence, which can result in an emergency 'code blue' (emergency code for when a prisoner is not breathing) call, requiring healthcare to attend to the prisoner. A few prisoners have reported to the IMB that they resort to using illicit items because they are unable to access prescription medication for their underlying mental health issues. The Board has been told by the prison Governor that the presence of illicit items drives issues of debt, self-harm and violence.

The prison has taken actions to try and reduce the entry of illicit items. These include improved staffing and processes for managing prisoner's social visits and challenging inappropriate behaviour at these visits. The prison is also working with the local police to ensure robust action is taken against any person involved in the conveyance of illicit items.

The prison's drug strategy also has a strong focus on reducing demand and supporting prisoners through the drugs' misuse team. There has been some preliminary thinking about the creation of a drug-free living wing, although final plans for this have yet to be developed. The IMB understands that prisoners would support this initiative.

Intelligence-led searches of cells and prison grounds takes place regularly by staff and with sniffer dogs. This has been increased over the year. The IMB has seen some of these searches take place and staff have worked in a professional manner with the prisoners involved.

In 2023-2024, random drug testing was paused by the prison with the agreement of the Prison Group Director. This was to allow prison staff time to be used to carry out a range of activities to reduce illicit items in the prison.

Due to the location of the prison, it remains vulnerable to illicit items entering by 'throwovers' and drones. Whilst there is some netting covering the most vulnerable areas, there are other areas that would benefit from additional netting, changes to windows and improved CCTV coverage. The prison has submitted an estates investment proposal for this, with the outcome awaited.

#### 5. Fair and humane treatment

#### 5.1 Accommodation, clothing, food

There has been no change in the operational capacity and overcrowding remains the same at HMP Bristol as last year, when HMIP issued the UN in July 2023. Prisoners sharing cells originally designed for one person in Victorian times is the norm, unless there are exceptional reasons for a single occupancy cell.

Nearly all prisoners still eat their meals in the cell, with only one chair, and a table fixed to the wall, plus a toilet that may be screened off by a curtain or, more often, with no screening. Slatted window hardly open and ventilation remains poor.

B wing (99 prisoners) still has no in-cell sanitation, with toilets and showers at the end of each corridor. Prisoners must use their call bell to ask staff to remotely unlock their cell door to go to the bathroom. Only one prisoner at a time is unlocked, so it can take some minutes before a prisoner is unlocked. Prisoners have told the IMB that they urinate in bottles overnight due to the time it takes to get to the toilet.

Generally, the prison is clean and tidy, with an ongoing painting programme across the wings. There has been a focus on cleanliness and decency and there have been refurbishments of the showers, stairwells and the visits' hall. There were no issues with heating or hot water this winter, following boiler repairs in early 2023, and all prisoners have the opportunity for a daily hot shower.

Grounds are well maintained by the prisoner works party. However, despite additional investment in pest control, there remain ongoing issues with rats, which have been seen by the IMB and the prisoners outside the wings and with pigeons inside the wing blocks.

Prisoner supplies seem to be good, with reasonable stock levels of clothing, bedding and toiletries on the wings. When there any reports of shortages from prisoners, the IMB has followed up with staff and supplies have been found.

Most of the food is prepared fresh in the prison kitchen, including bread rolls. There are choices for each meal and portion sizes appear adequate. Special diets are catered for. The improvements made in the previous year have been maintained, although some prisoners remain unhappy about the quality and quantity of food. Many prisoners use their canteen (a facility where prisoners can buy snacks, toiletries, stationery and other essentials using their allocated funds) to supplement their meals. In May 2024, the prison retained its five-star food hygiene rating from Bristol City Council.

A new policy was introduced and enforced to limit where vapes could be used by prisoners across the prison. Vaping now should only take place in cells or in the exercise yard. Prisoners seemed to accept this and there is a good level of compliance.

#### 5.2 Segregation

An IMB member visits the segregation unit in HMP Bristol (known as the care and separation unit, or CSU, in most other prisons), where prisoners are segregated, every week and speaks to every prisoner to find out how they are being treated. Generally, the prisoners have no major issues, although many are concerned about their property, canteen, access to phone calls and their immediate future. The number of prisoners in segregation has fallen over the reporting year.

The IMB remains concerned about the length of time that a few prisoners spend in segregation whilst awaiting transfer out to a specialist mental health unit.

All prisoners in segregation get a basic regime of a shower, exercise, meals and medication rounds daily. Distraction packs are available, as are books. Some prisoners can request a radio.

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

During the reporting year, following an intensive recruitment programme, there has been an increase in the number of permanent staff. The prison is now up to full establishment and is no longer relying on detached duty staff from other prisons. As a result of this intensive recruitment programme, the average length of service for wing staff has fallen to 1.4 years compared with 2.0 years last year.

With this lower level of experience staff, the IMB have been aware of some inconsistency in the treatment of prisoners. The prison addressed this in early 2024, with the national standards coaching team spending 16 weeks in the prison supporting and mentoring staff. Further training and mentoring are ongoing, as the prison looks to improve the retention of these recent starters.

The IMB has seen an increase in the number of applications to the Board relating to staff/prisoner concerns over the year, the majority of which are resolved by speaking to the prisoner and staff.

The high number of new recruits has shown that some are not as well suited to the prison environment as might be hoped. This has resulted in an increase in the level of sickness and restricted duties, reducing the actual number of staff available for duty. Hopefully, this will resolve itself as the staff gain experience.

Overall, the new staff have enabled more consistent delivery of a full prison regime. The full regime has only been cancelled on two occasions in the reporting year and prisoners are experiencing fewer on-the-day cancellations of appointments, education or work or any significant changes to regime.

All applications and requests by prisoners are made by paper, using a variety of different forms. A few years ago, there were plans to introduce prisoner digital self-service kiosks, which would speed up the processes for prisoners and significantly reduce staff time dealing with issues. These kiosks are already in use in other prisons. The Board now understands that, due to the lack of IT infrastructure and resources, an IT solution is not going to happen soon at HMP Bristol. The IMB think this is a missed opportunity as it could reduce prisoner's frustration of the current paper systems and reduce time spent on administration by staff.

Key working has been re-introduced for the high-risk cohort of prisoners. During the year, this cohort was expanded to include young prisoners. Not all prisoners have a key worker or key working sessions. The IMB still hears of issues and concerns from prisoners that could have been addressed through key working.

In July 2024, nine prisoners in HMP Bristol were serving an Imprisonment for Public Protection (IPP) sentence. Senior staff in the prison actively engage with these prisoners to help them manage their situation and provide support, as required, for this specific group of prisoners.

#### 5.4 Equality and diversity

The Governor and the senior leadership team appear to promote equality and inclusion across the prison for any prisoners with a protected characteristic (including, among others, race, religion, disability, age, sex and sexual orientation, which it is unlawful to

discriminate against). The IMB has seen evidence of staff working with specific groups, especially disabled prisoners, to help reduce any barriers they may have to participation in the daily regime.

To enable prisoners with mobility issues to access the healthcare department on the first floor, a stair climber was installed and in use from May 2024. However, this is still not suitable for all prisoners.

There is an equality and diversity group, led by the prison equality and diversity lead, with prisoner representatives from the wings. This group has started anonymously reviewing the outcomes from discrimination incident reporting forms (DIRFs) to learn from them. There have also been some workshops for prisoners and staff to share their experiences and improve understanding of each other's positions.

The number of DIRFs submitted each month by prisoners varies (usually between 1 and ten). The IMB is not aware of any significant equality and diversity issues; of the nine applications (prisoners' written representations) to the IMB about equality issues, they were mainly about disability access to the healthcare department. Some prisoners do tell the IMB that they have little confidence in the DIRF process, but they are unable to provide specific examples.

There are a very small number (up to five at any one time) of prisoners who identify and present as female. This presents challenges to the staff in how best to manage them whilst looking after the needs of the other prisoners on the wing. Case meetings are held regularly, which the prisoner attends so that the most suitable arrangements are put in place. These prisoners tell the IMB that their basic care needs are generally met, although it sometimes takes longer to provide suitable adjustments than for other prisoners. Some staff and other prisoners are perceived by these prisoners as negative towards them. The Board believes the Prison Service should review how prisoners who present as female are managed within the male prison estate.

In May 2024, a new neurodiversity support manager (NSM) started, who coordinates support for prisoners with any form of neurodiversity. It is estimated that up to 80% of prisoners at Bristol have some form of neurodiversity, although not all have been formally diagnosed. The IMB has seen examples of reasonable adjustments put in place to support prisoners, such as managing noise and light, food service and personal space.

#### 5.5 Faith and pastoral support

The multi-faith team is fully staffed and provides appropriate support to prisoners. The IMB regularly sees pastoral support on the wings and the daily visits by a member of the multi-faith team to the segregation unit. The multi-faith team also support prisoners with external family issues, such as a bereavement.

Prisoners have told the IMB that their religious and cultural beliefs are being met. Religious services, including Friday prayers for Muslim prisoners, are well attended, and prisoners value this dedicated time. Special diets on religious grounds are catered for. All religious festivals are celebrated in the prison and engagement seems good.

#### 5.6 Incentives schemes

A revised incentives scheme was introduced in early 2024. This scheme encourages and rewards good behaviour of prisoners. It reintroduced a new, basic level, in addition to the existing standard, enhanced and super-enhanced levels. Prisoners start on standard level and can move up, or down, according to how they engage with the regime. Feedback from the prisoners has been largely positive to this and they appreciate the

opportunity to earn enhanced canteen and extra time out of cells in the early evenings, when staffing levels allow.

There is regular engagement from staff with prisoners on basic regime to support prisoners to enable them to return to the standard status.

#### 5.7 Complaints

The number of prisoner complaints received by the prison (excluding those regarding healthcare) increased, from 1,981 last year to 2,158 this year, a rise of 9%.

The top three complaint categories were cell or wing issues, property and wages. Property also features as a top issue in the number of applications to the IMB. Part of this relates to the time it can take to resolve issues, especially regarding transfers from other prisons or from police cells.

The IMB has been aware that, at some times during the year, there have been some staffing issues in the prison business hub, which resulted in a delay in prisoners getting applications processed. All activities undertaken in the business hub for prisoners rely on paper systems, which adds delay, as well as increasing the potential for application forms to be mislaid or lost. Other prisons using self-service kiosks have reported that they have delivered an improvement in administration systems for prisoners and staff.

Key working has increased during the year, which offers an opportunity for prisoners to raise issues in key work sessions before they escalate into a complaint. However, not all prisoners have key working sessions.

#### 5.8 Property

There has been a fall in the number of applications to the IMB relating to property issues within the prison (19 this year compared with 26 last year). However, the number of applications concerning property issues from transfer, or another prison, has increased (29 this year compared with 25 last year).

The prison has had a focus on addressing property issues both within the prison and following a transfer. Staff continue to run regular property clinics on the wings, which are well attended by prisoners highlighting their issues.

There are still long delays for some prisoners receiving their property (including personal legal papers) following transfer from another prison or from police cells. Prisoners who are moved at short notice, out of hours, have multiple short stays in different prisons or have large volumes of property are most affected.

All property arriving at the prison is subject to a search, which additionally takes time, before it reunited with the prisoner. All electrical items are also safety tested, which also delays the time before reaching a prisoner due to the limited amount of safety testers time.

#### 6. Health and wellbeing

#### 6.1 Healthcare general

The healthcare service was affected by staff vacancies during most of the year. Recent recruitment has been successful, and vacancies are being filled. Temporary staff have been employed to cover in the interim. As a result, some clinics were cancelled, and medication dispensing to prisoners delayed to later in the day.

There is a good urgent care service and prisoners who self-harm, or who are under the influence, are seen and treated quickly.

Healthcare issues were the category with the highest number of applications to the IMB and had increased during the year (71 compared with 60 last year). Issues fall into three main categories: access to physical healthcare; mental health; and medications. The IMB follows up each issue raised by prisoners with the head of healthcare. We noted that the number of healthcare complaints reported by the healthcare team was much lower than the number of health-related IMB applications. It appears that issues raised by prisoners with the healthcare team are more likely to be classified as general feedback rather than a formal complaint.

The healthcare department is still on the first floor. A stair climber has been purchased and staff trained in its use. It has been operational since May 2024, although the IMB has yet to see it in action. The IMB is aware of two prisoners in wheelchairs who have had long waits for dental treatment because of access issues. Both waited months longer than abled bodied prisoners requiring dental treatment eventually, they had to go to another prison specifically for their treatment.

Waiting times for healthcare services improved slightly and the Board has been told by the head of healthcare that they are similar to those in the local community. There has been a reduction in the cancellation of clinics due to lack of staff for prisoner escorts. However, some prisoners still miss their appointment due to communication issues, as prisoners are notified about their appointment on slips of paper, which can get mislaid. This is another area where digital self-service kiosks might help.

A winter flu vaccine programme was run for eligible prisoners and no Covid-related issues were reported.

#### 6.2 Physical healthcare

During November and December 2023, there was a lack of GPs at the evening clinics for new receptions. This has since improved, with the prioritisation of face-to-face clinics rather than remote phone appointments.

Lack of staff also resulted in secondary health screening being suspended. This has now been re-introduced. A few prisoners had delays being seen and no overall adverse healthcare issues were reported.

On 31July 2024, a total of 416 prisoners were on prescribed medication (72% of all prisoners). This is an increase on previous years.

Prisoners continue to raise issues about medication, as they do not always get the same medication in prison as they had in the community. There have been some delays in new receptions arriving late on Friday evening, or at the weekend, not getting timely medication. With the staffing shortages in the medicines management team, priority was given to the larger wings and prisoners in education and work. This meant that prisoners

on Brunel wing and in the segregation unit received their medication later in the day. The IMB heard from a diabetic prisoner that this impacted on his insulin times in relation to meals.

The healthcare service is aware of the medication issues and is reviewing some practices, including looking to reduce nighttime dispensing for safety reasons.

When the IMB has observed medication rounds, they appear well managed, especially in the segregation unit.

Availability of the supply of medication is now becoming an issue, following a similar pattern in the wider community. In June and July 2024, up to 30 prisoners were unable to have medication to manage their attention deficit hyperactivity disorder (ADHD) condition, as the healthcare service could not obtain stock. Prisoners were very anxious about this, and no alternatives were provided.

Very occasionally, a prisoner will have a diagnosis of cancer. There is good access for them to be seen by a hospital specialist for their clinical care. However, they cannot get the same level of psychological and emotional support as in the wider community. The IMB is aware of one prisoner who has been unable to contact the Macmillan cancer helpline from their in cell phone due to restrictions on the prison phone system.

#### 6.3 Mental health

Mental health services have been reorganised during the year within the same total resources, to increase the hours of coverage. During this time, there was a turnover of staff, but the team is now back to full establishment. Mental health staff are involved and have been seen at ACCT reviews and segregation reviews.

Over the year, 13 prisoners were transferred to a specialist mental health facility. Nine of these were transferred within 28 days and four exceeded this, at 33, 36, 48 and 50 days respectively. This is a slight improvement on the previous year, when over 50% of prisoners waited more than 28 days. However, access to specialist mental health care remains an ongoing challenge for the service. Whilst these prisoners are awaiting transfer to a specialist facility, they are mainly located on the segregation unit, which does not have suitable facilities or specialist trained staff to look after the needs of this very specific type of prisoner. The IMB has seen many good examples of staff working with, and looking after, prisoners with severe mental health issues in the difficult and challenging situations that are being presented.

Over 100 prisoners a month are referred for a mental health assessment. However, for most prisoners, there is no mental health support at all. The IMB has heard from the Prison Advice and Care Trust (PACT) that the biggest thing that family members raise are about issues relating to the general mental health of prisoners.

#### 6.4 Social care

The number of prisoners receiving social care support has remained constant, at around ten at any one time. Prisoners who have social care are very appreciative of the care provided and there is a good working relationship with prison, healthcare and social care staff.

The IMB is aware of one prisoner who had dementia and needed more consistent care than social care provided. In this situation, other prisoners stepped in and provided 24-hour supervision and personal care, including help with eating and drinking. This prisoner

also had an alarm in case of a fall, which was turned off at times, as it would constantly alarm every time the prisoner moved.

#### 6.5 Time out of cell, regime

The prison regime is now much more consistently applied compared with a year ago.

Prisoners are spending more time outside of their cell. In July 2024, a prisoner could spend between 22 and 72 hours a week out of his cell, which is about 50% more time than a year ago. Prisoners who refuse to engage with the regime have the lowest time out of cell. There are also fewer frustrations reported to the IMB with on-the-day cancellations or changes.

Whilst the number of hospital bed-watches and constant watches in the prison have fallen, the availability of staff and the impact of short-term staff sickness can still affect the regime and time out of cell.

In the event of insufficient staff, priority is given to maintaining purposeful activity of education and work for most prisoners. However, staffing has been reduced on the segregation unit and the Brunel unit. In this situation, prisoners on the Brunel unit are locked in their cells all afternoon, when usually they are unlocked.

The IMB has been told by the prison Governor that there are opportunities for all prisoners to undertake purposeful activity in education or work, with around 80% of the prison population engaged in purposeful activity. Prisoners who engage with the regime also benefit from the opportunity to have additional time out of cell in the early evening, which is popular, subject to sufficient staffing being available.

#### 6.6 Drug and alcohol rehabilitation

The prison has had additional support from the HMPPS substance misuse support team to support prisoners with rehabilitation. New initiatives have been put in place and any prisoner can access the support. There has been an increase in psychosocial interactions and a few prisoners have been trained to support the delivery of this.

The number of prisoners on the caseload of the substance misuse support team has increased over the year, from 180 in October 2023 to 270 in June and July 2024.

There is a dedicated detox service for new receptions on C3, and the IMB hears positive feedback from prisoners about the treatment they receive. However, unfortunately, illicit items are still obtained and used by prisoners. On most days, there is at least one incident of a prisoner being under the influence reported somewhere in the prison.

Alcoholics Anonymous runs meetings in the prison, and there is also support for those with gambling issues. These services are valued by the prisoners who attend.

#### 6.7 Soft skills

All prisoners have allocated time in the gym and the take up of this is high. Prisoners tell the IMB that the facilities are good and better than many other prisons they have experienced. The IMB has seen prisoners on constant watch having dedicated time in the gym as well to support their situation.

In addition to vocational skills training, some prisoners participate in group activities, such as Changing Tunes, Storybook Dads and chess club. Prisoners' engagement with these programmes appears high.

#### 7. Progression and resettlement

#### 7.1 Education, library

The Ofsted inspection in July 2023 highlighted that too few prisoners were attending education, skills and work. Even when allocated, prisoners were often not attending, as there were too few staff to escort them. There was an insufficient range of accredited courses, including English and maths, and little support for prisoners with additional learning needs.

Over the last year, improvements have been made in all areas highlighted. There has been a strong focus and commitment from the Governor and staff to increase the number of prisoners attending work, education and workshops. The aim is for 80% of prisoners to do so, and this is close to being achieved most days.

Most new prisoners start purposeful activity within seven days of arriving. There has been an increase in the number of accredited courses and courses specifically designed for vulnerable prisoners. The incentives scheme policy has been updated to encourage engagement in activities, particularly in maths and English and evening activities.

Neurodiversity toolkits are available on all the wings and in workshops, and a neurodiversity champion has been identified for each wing. A total of 109 learners have been identified with neurodiversity needs. There is now a more consistent, whole-prison approach to neurodiversity.

The library is available at weekends. As weekend opening is outside of the Weston College contract, it is run by 'red band' prisoners, with a good uptake by prisoners. However, when prison staffing levels are low, the library is one of the first parts of the regime to be reduced.

#### 7.2 Vocational training, work

The prison provides some vocational training and workshops. This year, improvements have been made so that prisoners with disabilities can now attend workshops, as there are now suitable facilities. Alternatively, some prisoners carry out work activities in the limited mobility wing or in their cells.

Tours of the education centre (known as 'learning walks') have been introduced for all prisoners which are proving to be well attended. They give prisoners an introduction to the many courses and workshops available to them.

From June 2024, induction sessions for all new prisoners now covers a whole day.

This year, five young prisoners are taking part in the Duke of Edinburgh award. Two have already completed many elements of the award.

#### 7.3 Offender management, progression

The offender management team (OMU) has had a busy year, due to the high turnover of prisoners through the prison and the impact of the early release schemes. The IMB thinks there is insufficient capacity in the OMU to continually update prisoners on their personal situations. There has been a rise in applications by prisoners to the IMB about sentence management issues, which could have been addressed by staff in the prison. The OMU staff are always ready and able to address any issues that the IMB brings to their attention.

Prisoners are notified of a transfer to another prison on the day of transfer. The IMB has seen incidences of prisoners protesting to the move, often by climbing onto the landing netting. In these situations, the Board has observed prison staff handling the situation professionally and, in most cases, the transfer takes place as planned.

Action has been taken by the prison to prepare prisoners for release, as part of a new reducing re-offending strategy. Most of these actions came to fruition in June and July 2024, with targeted support for English, maths and vocational skills. There is evidence of engagement with community partners and local employers. Some prisoners prior to release have told the IMB that they have jobs lined up.

#### 7.4 Family contact

The Governor and the senior leadership team have a strong philosophy of family engagement for prisoners.

The visits' hall is family friendly and the IMB has had positive feedback from prisoners and PACT. Visits are increased around school holidays and special times such as Father's Day. The prison shop sells cards and children's toys that prisoners can give to their children.

Family days have been run and the Storybook dads reading programme is up and running again.

The 'learner of the month' ceremonies continue. The Governor attends these happy occasions, as do the friends and relatives of the learner of the month. The IMB has seen the great pride that the prisoner and their family get from this event.

#### 7.5 Resettlement planning

Over 100 prisoners a month are released from HMP Bristol. All prisoners should have support to prepare them for release, although the IMB is contacted by some prisoners who are concerned that they are not ready for release, especially with housing and community support needs.

Additionally, prisoners on short sentences and those released at short notice or directly from the court do not always get resettlement planning. The resettlement team has been stretched during the year, with the additional work due to the early release schemes to free up prison capacity.

In July 2024, 23% of prisoners released did not have housing on the first night after release. This percentage was similar all year. The IMB is aware that the Governor has been working with Bristol City Council to address this.

# 8. The work of the IMB

#### **Board statistics**

Recommended complement of Board members	13
Number of Board members at the start of the reporting period	10
Number of Board members at the end of the reporting period	9
Total number of visits to the establishment	248

## Applications to the IMB are shown on the next page.

The top four reasons for applications are shown below:

	Current year	Prior year	
	% of total	% of total	
<ul><li>Health (G)</li></ul>	21%	24%	
<ul> <li>Staff/Prisoner concerns (J)</li> </ul>	14%	17%	
<ul> <li>Sentence Management (I)</li> </ul>	11%	10%	
<ul> <li>Letters, visits, phones, etc (</li> </ul>	E2) 11%	4%	

The number of apps has increased in all categories apart, from 'property within the establishment (H1)'.

## Applications to the IMB

The applications received in the year are summarised in the table below.

Code	Subject	Previous reporting year	Current reporting year	Diff	% vs prior year
A	Accommodation, including laundry, clothing, ablutions	5	15	+10	+200%
В	Discipline, including adjudications, incentives schemes, sanctions	4	10	+6	+150%
С	Equality	4	9	+5	+125%
D	Purposeful activity, including education, work, training, time out of cell	7	13	+6	+86%
E1	Letters, visits, telephones, public protection, restrictions	11	36	+25	+227%
E2	Finance, including pay, private monies, spends	9	12	+3	+33%
F	Food and kitchens	11	14	+3	+27%
G	Health, including physical, mental, social care	60	71	+11	+18%
H1	Property within the establishment	26	19	-7	-27%%
H2	Property during transfer or in another facility	25	29	+4	+16%
H3	Canteen facility list, catalogues	10	15	+5	+50%
I	Sentence management, including home detention curfew, release on temporary licence, parole, release dates, recategorisation	24	39	+15	+63%
J	Staff/prisoner concerns, including bullying	42	48	+6	+14%
K	Transfers	3	6	+3	+100%
L	Miscellaneous	10	6	-4	-40%
	Total number of applications	251	342	+91	+36%

The total increased by +36% compared with the prior reporting year.

## **Annex A**

# Service providers

Education	Weston College
Healthcare: primary care, substance	Oxleas NHS Foundation Trust
misuse, mental health and	
administration	
Healthcare: pharmacy, medicines	Oxleas Pharmacy Services
management	
Healthcare: psychological substance	Change Grow Live
misuse	
Healthcare: general practice	DrPA Secure
Healthcare: dentistry	Time For Teeth
Healthcare: optician	The Prisons Optician Trust
Healthcare: physiotherapy, podiatry	Total Planned Care
Maintenance	Gov Facilities Services Limited
Resettlement support	The Probation Service (CRS)
Social care	Agincare



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