



# **Annual Report of the Independent Monitoring Board at HMP/YOI Foston Hall**

**For reporting year  
1 December 2023 to 30 November 2024**

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## Introductory sections 1 – 3

### 1. Statutory role of the IMB

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

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

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

To enable the Board to carry out these duties effectively, its members have right of access to every prisoner and every part of the prison, and to the prison's records.

The Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that States designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detainees and to make recommendations for the prevention of ill-treatment. The Independent Monitoring Board (IMB) is part of the United Kingdom's National Preventive Mechanism.

## 2. Description of the establishment

HMP/YOI Foston Hall, situated in south Derbyshire, was designated as a women's prison and young offender institution in 1997. The prison accommodates several categories of women. These range from those remanded (held in prison until the time of their trial or subsequent sentence hearing), to short-sentence prisoners and those recalled for breach of licence conditions. It also includes those serving indeterminate sentences (this means there is no set release date, but there will be a minimum time that must be served in prison, which is set by the court), including life, for serious crimes.

Its 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) is 324<sup>1</sup>. This represents an increase of 40 places in the reporting year, following the opening of the newly built A wing in March 2024. The number of prisoners unlocked during the reporting year has typically ranged between 270 and 310.

There has been a significant shift in the prison population over the last year. Prisoners serving short sentences, a high number of prisoners returned to prison on licence recall (many of whom are subject to a 14-day fixed term recall) and a striking rise in the remand population are key features, creating noteworthy pressures. At the end of November, 21% of the population had been recalled, and 63% were serving six months or less. The percentage of prisoners who were remanded stood at 33%, compared with 12% a year ago.

The establishment has seven wings, A, B, C, D, E, F, T, and a first night centre (FNC). There is also a care and separation unit (CSU), where prisoners are segregated. The prison itself comprises an old stately home, which accommodates the Governor's office, board room, education department, library, employment hub and one of the two residential wings (E wing) designated for enhanced-status prisoners (those on the highest level of the prison's incentives scheme). The second wing designated for enhanced prisoners is A wing. This is surrounded by a mix of accommodation types, which have been added to over the years. The exterior environment is pleasant, with well-kept gardens, an animal sanctuary, a textile workshop, a gym and a large playing field.

The healthcare, mental health, pharmacy, dentistry and substance misuse departments are located across the overall site. A resettlement team and offender management unit (OMU) are located separately, while a coffee shop, served by prisoners employed in the kitchens, provides light meals for staff.

A, B and C wings have only single cells. C wing endeavours to provide an enabling environment for women with complex needs, some of whom attend the Cameo Personality Disorder programme. There is limited single-cell accommodation in other wings. Prisoners who are assessed as being low or medium risk are accommodated in

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<sup>1</sup> Figures included in this report are local management information. They reflect the prison's/YOI'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.

shared cells. B wing is designated as a wing for women who demonstrate a commitment to stay off drugs, with support from the substance misuse service (SMS).

In-cell telephony is available throughout all wings, other than the CSU.

During the reporting year, there have been a number of changes of functional heads (heads of operations, residence, security, activities and perinatal care) in the senior leadership team. The serving Governor was appointed in October 2023 and was helped in her leadership role by the Deputy Governor, until she was promoted to another establishment in November. A significant number of new entrants to the broader staff group have been welcomed to the establishment, and their training, mentoring and induction has, therefore, been prioritised.

### **3. Key points**

#### **3.1 Main findings**

To aid its understanding of prisoners' experiences of life at HMP Foston Hall, the Board has carried out a number of surveys, which are detailed in Annex A.

##### **Safety**

- The Board considers Foston Hall to be a prison in which staff work to ensure the safety of prisoners. The number of self-harm incidents has decreased significantly in this reporting year. There has been a coordinated approach, with strong leadership and teamwork in managing highly complex prisoners, particularly those who prolifically self-harm.
- Whilst the prison is seen by the Board as a reasonably safe environment for prisoners and staff, prisoner-on-prisoner violence has increased.
- Foston Hall has seen a rise in illicit items entering the prison, due to increased levels of prisoners on remand and recall.
- The opening of the incentivised substance free living (ISFL) wing earlier this year has been a successful initiative by the prison.

##### **Fair and humane treatment**

- The efforts made to ensure an ongoing full regime, with priority accorded to maintaining activities such as work and education during times of staff pressure, reflect a firm commitment to a key element of a fair and humane regime.
- The Board has observed much work by managers and individual staff to provide a supportive environment for prisoners. This is, at times, hampered by staffing pressures, which has, for example, limited the amount of key work undertaken.
- Ongoing problems with practical matters, such as prisoners' applications (written representations to the IMB) and access to property, can cause distress and frustration with considerable negative impacts for prisoners.

##### **Health and wellbeing**

- Although there are still too many prisoners missing internal health appointments, given that all the patients are on site, the Board has observed that the healthcare service is well managed and provides prisoners with healthcare that is comparable with the service they would receive in the community.
- The mental health team has carried a number of vacancies during the year and, at times, the service has been thinly stretched. There is a high level of mental health need amongst prisoners and there is little support for the many women who experience low-level anxiety, depression and grief. The Board considers that too many prisoners with complex mental health needs remained in prison longer than they should have because of delayed transfers to secure hospitals.
- There have been improvements in the way prisoners' social care needs are met, with better arrangements for the provision of carers and the timely supply of aids

for daily living. However, there are no social care ‘buddies’, fellow prisoner volunteers who offer regular support to prisoners with care needs.

### **Progression and release**

- Ongoing staffing issues have reduced employment opportunities for prisoners over the reporting year, and have also limited access to the library.
- The Board has observed much effort to encourage participation in education and to make the education environment welcoming and inclusive.
- Coordinated and proactive work across relevant departments to put in place satisfactory release arrangements has been observed, with additional efforts to assist prisoners who are sentenced or recalled for very short amounts of time. However, these prisoners frequently fail to engage with staff and are released without settled accommodation as a result.

### **3.2 Main areas for development**

#### ***TO THE MINISTER***

- Prisoners with complex and severe mental health needs are frequently received, or remain too long, at HMP Foston Hall, rather than being accommodated and cared for in hospital or in the community in line with the ambitions of the female offender strategy. When will this be addressed?
- A significant rise in remand prisoners, short-sentence prisoners, and prisoners recalled for 14 days has led to an increase in drugs and illicit items entering the establishment. As a consequence, prisoners get into debt and are subject to bullying and violence. When will this shift be reversed?
- There is no evidence that the recent decision to identify pregnancy as a specific mitigating factor in sentencing decisions has had any impact on the increasing number of pregnant prisoners passing through Foston Hall. When will this have an impact?

#### ***TO HMPPS***

- The accommodation provided in the CSU and D wing remains inadequate, despite the improvements made within the constraints of the building. When will funding be provided to improve their quality and decency?
- Many prisoners experience problems in relation to their property when transferring between establishments, with property going missing or being delayed. When will this be addressed?
- Without a body scanner at reception, staff are hampered from detecting drugs concealed by prisoners on arrival. When will this equipment be provided, which will go towards creating a safer environment for prisoners?

#### ***TO THE GOVERNOR***

- The Board is concerned about the rise in prisoner-on-prisoner violence. What further action could be taken by Foston Hall to reverse this trend?

- Whilst the increase in remand and recall prisoners has led to a rise in illicit items coming into Foston Hall, what increased measures to disrupt the supply and trading of illicit items will be taken by the prison?
- What action will be taken to improve the working of the prisoner application system to ensure they are all responded to, and within an acceptable time frame?
- Prisoners often experience considerable difficulties and lengthy delays in accessing their property. When will this be addressed?
- Prisoners often have problems washing and drying their clothes due to the frequency of machines breaking down and laundry arrangements. How will this be addressed?
- Prisoners continue to queue outside the medication dispensing hatch, whatever the weather, with no shelter. When will shelter be provided for them?
- What else can be done to reduce the number of missed internal healthcare appointments?
- What support can be provided for prisoners with low-level mental health needs, such as anxiety and depression?
- When will the Access service (a multi-disciplinary team supporting prisoners with highly complex needs and behaviours) be staffed and operational?
- There are no social care buddies for prisoners with care and support needs. How will this be addressed?

### 3.3 Response to the last report

Issue raised	Progress
<b>To the Minister</b>	
1. Delays in notifying prisoners of parole decisions, arising from a backlog of cases.	This is no longer a concern.
2. The 28-day target for transfer from prison to secure hospital was not met locally in five out of 29 cases.	This year, the 28-day target for transfer from prison to secure hospital was not met locally in 14 out of 23 cases. This is worse than last year by 42%.

Issue raised	Progress
<b>To the Prison Service</b>	
1. Continued inadequacy of accommodation in D wing and the CSU.	Despite improvements made, within the constraints of the building, the accommodation remains inadequate.



Issue raised	Progress
<b>To the Governor</b>	
1. Continued high level of self-harm.	Self-harm has significantly reduced by 42.7%. This reporting year has seen improved management of complex women with senior leadership team leads, including regular multidisciplinary meetings.
2. Listener [Samaritans-trained prisoners who offer peer confidential emotional support] retention rates.	Three Listeners provide support three evenings a week. However, as Foston Hall has a high turnover of short-term prisoners, there are a limited number of suitable prisoners who can undertake the Samaritans training.
3 CSIPs [challenge, support and intervention plans, used to manage prisoners who pose an increased risk of violence and who are vulnerable to bullying] are underused; high rate of no further action; and investigations not completed within 72 hours.	Use of CSIPs has significantly improved, with an increase of 86.4% during the reporting year. No further actions; and investigations not completed within 72 hours are not routinely reported on in the monthly safer custody meetings.
4. Increased levels of use of force, and disproportionate towards young adults.	Use of force, overall, for the reporting year has decreased by 12.6%, compared with the previous year. At the beginning of the reporting year, in December 2023, 43.3% of interventions were used on the 18-25 year old group; by October 2024, it had fallen to 11.1%.
5. Impact of staffing levels on implementation of key working.	Staffing levels have improved, but there are pressures due to factors such as sickness, maternity leave and temporary promotions. The compliance rate, i.e. ratio of actual against planned key work sessions, reached 57% in March. By June, the figure had dropped to 23% - and bar October, when it rose to 36% - it has remained in the low to mid 20s. It is noted that when there is staffing pressure,

	priority is given to maintaining a full regime and activities.
6. Delays in prisoners accessing property.	Prisoners still frequently experience problems and delays in accessing property.
7. Prisoners do not receive responses to applications.	Problems continue with the general application system; responses frequently do not arrive or are delayed.
8. Ongoing problems with heating and hot water, and delays in repairs.	Major work to address the underlying problem of the oil lines is yet to start. Temporary arrangements have been made for most areas, where necessary. The textiles workshop has no integral heating and the Fosta coffee shop has no heating, although it does have hot water. The family bonding unit awaits a new boiler.
9. Lack of analysis regarding the impact of protected characteristics [which include age, gender reassignment, pregnancy, relationship status, disability, religion, sex and sexual orientation] on prisoners and access to incentives, services and activities.	Only some equality strand meetings take place on a regular basis and not all undertake analysis, although those that do are comprehensive and useful. The forum for prisoners with protected characteristics to review the incentives scheme met only once. However, there were some positive responses from a diverse range of prisoners regarding what they felt was an absence of unfair discrimination.
10. Quality and timeliness of discrimination incident reporting forms (DIRFs).	Quality of DIRF investigations and responses has improved considerably, although not all responses have been quality assured by the Deputy Governor.
11. Significant number of healthcare appointments are missed.	There continue to be a significant number of missed healthcare appointments. The average number of missed appointments in the reporting year was 162 per month, ranging from a low of 86 in September 2024 to a high of 298 in April 2024.
12. The medication hatch remains unfit for purpose, with prisoners queuing outside in	Prisoners still have to queue outside the medication hatch in all weathers. A

all weathers and not being assured of privacy.	proposal to install a canopy or shelter to provide some protection from poor weather has not yet been implemented.
13. Clinical and group-work space is very limited.	An additional healthcare portacabin, housing managers and administrative staff, has freed up two rooms in one healthcare location. The rooms are still undergoing refurbishment, but it is hoped they will soon be available for use as clinical, one-to-one or small group work spaces.
14. Carers for people with support needs have long waits for escorts and can be turned away at the gate if a serious incident is in progress.	Carers for people with support needs are now designated as an essential service, and there have been no reports of refused or delayed entry.
15. The healthcare service does not collect equalities data and cannot monitor disproportionate outcomes.	The healthcare commitment to equalities is acknowledged, but it remains the case that the healthcare service does not collect equalities data and, therefore, cannot monitor disproportionate incidence or outcomes.
16. The prison has failed to monitor equalities in education.	Information about the age, race and ethnicity of prisoners in work and education is now presented and analysed at the monthly reducing reoffending meeting. The information is shared with the equality team to ensure no disproportionate outcomes.
17. Disabled prisoners have not been able to access upper floor classrooms.	Still no access, and the nature of the building will not facilitate this.
18. Lack of staff to run reliable library sessions.	Staffing continues to be a serious problem. Whilst the librarian has continued in post throughout the reporting year, there have been frequent changes of personnel and the library is understaffed.
19. Problem of prisoners being released homeless.	Data for the year shows little change in the number of prisoners released homeless each month, standing at 20%.

	<p>The high number of short sentence prisoners, 14-day fixed term recalls and remand prisoners makes for a challenging and unstable population, some of whom refuse to engage with the pre-release team, despite additional efforts to offer help with accommodation.</p>
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## **Evidence sections 4 – 7**

### **4. Safety**

#### **4.1 Reception and induction**

The volume of new receptions has remained at approximately 100 per month throughout the reporting year, while the number of people leaving or transferring stands at approximately 65 each month. The IMB has observed that reception has, from time to time, appeared short staffed, resulting in a backlog of prisoner applications to access stored property.

A group of up to five early days peer supporters work on a rota to provide support, information, advice and clothing packs to every person arriving in reception and the IMB has observed that prisoners find this very helpful. There is a rolling induction programme, which is attended by all prisoners who have not returned to prison during the previous six months, and IMB members who have monitored this observe that it is working well.

A 'safety support' booklet for all prisoner arrivals has been introduced. From week two, the safer custody peer supporters work through the booklet with prisoners and identify, for example, family support and prison employment and education opportunities, or if there is a need for Listeners. This booklet informs the safer custody team if any additional early intervention or support is required.

The Board has seen a renewed focus on improving the experience and safety of newly arrived prisoners this year. The reception area has been redesigned to make it more welcoming to prisoners and to provide privacy for one-to-one screening and assessments on arrival.

All individuals arriving in custody are referred to the women's estate psychology service (WEPS) by the early days senior officers within one week of arrival. All referrals are triaged by WEPS, and those considered the highest priority are considered for the HOPE programme, consisting of four sessions. This is a brief, psychologically informed course that helps prisoners work with difficult emotions. They develop a 'my experiences' (ME) summary document, which aims to help staff better understand what matters to the person and provide options that are realistic to them and could be protective for them. The ME can also be completed on a one- to- one basis for individuals who may not be assessed as suitable for group work.

From the Board's observations, healthcare staff proactively support prisoners who are on a detoxification regime on the first night centre.

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

The Board has observed the safer custody team demonstrating a committed, proactive and multi-disciplinary approach in the reduction of self-harm. This has been illustrated through leadership, improved data analysis and extensive knowledge of prisoners with complex needs.

The reporting year has seen enhanced and coordinated support of vulnerable prisoners, and self-harm has decreased by 42.6%. There were 1423 incidents of self-harm, compared with 2482 in the same period in the previous reporting year (December 2022-November 2023; see Table 1 in Annex B, below).

The figures are significantly increased by a few prisoners with complex needs, who prolifically self-harm, whose actions impact the number of incidents. A prolific self-harmer is a prisoner who has self-harmed five times or more in a single month. For example, two prisoners during October were responsible for 45% of self-harm incidents while, in November, three individuals accounted for 62% of the self-harm incidents.

The assessment, care in custody and teamwork (ACCT) documents are multidisciplinary support plans for prisoners who are at risk of self-harm or suicide. The number of ACCTs opened from January to November 2024 was 226, compared with 230 in the same period last year.

Staff aim to provide the right level of support to traumatised, complex and prolific self-harmers on ACCTs, often in challenging circumstances, as occasionally observed by the IMB. Such prisoners are assigned a member of staff from the senior leadership team to be involved in managing their ACCT, with regular ACCT reviews. There are assurance checks to ensure the quality of ACCT plans and multi-disciplinary information sharing, either in the weekly safety intervention meeting (SIM), Governor-led daily morning briefing or ACCT reviews.

Again, the Board is concerned about the lack of Listeners in the reporting year. The service was suspended at the end of December 2023, reinstated briefly in March 2024, then, shortly after, suspended again. The scheme restarted in September, with three Listeners offering support three evenings a week. A barrier to recruiting Listeners (and peer mentors) is the impact of the high number of prisoners on short sentences, remand, or 14-day recalls. This reduces the pool of potentially suitable people with a sufficient length of sentence, who could be recruited by Samaritans (who oversee them).

Sadly, there was one death after release, which is classed as a 'death in custody'. As of December 2024, there are four outstanding inquests.

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

The safer custody team coordinates actions to address and reduce violence, including any assaults or fights in the establishment, whether they are prisoner on prisoner or prisoner on staff. At a monthly meeting, data performance is shared with the relevant managers. In the weekly safety intervention meeting (SIM) and daily safety triage sessions, prisoners' needs, and how best to challenge or support them, are reviewed. Reducing violence at Foston Hall appears to be a key objective and the establishment aims to take a zero-tolerance approach. A new anti-violence policy, 'promoting peace', for staff has recently been introduced.

There were 84 prisoner assaults on staff, representing a slight increase of nearly 4% compared with the last reporting year (see Table 2 in Annex B). The Board is particularly concerned about prisoner-on-prisoner assaults (including fights), which

increased from 81 in the last reporting year to 136 incidents in this reporting period, a rise of 68% (see Table 3 in Annex B). Several prisoners can also be involved in a single incident.

The rise in prisoner-on-prisoner violence has largely been attributed to bullying, debt and illicit substances. In the Board's November general survey (see Annex A), prisoners (except those on first night unit) were asked, 'Have you ever felt bullied by any of the other prisoners?', 40% of prisoners recorded 'yes'.

Challenge, support and intervention plans (CSIPs) are an important resource in helping to manage behaviour and violence and in supporting vulnerable prisoners. The safer custody team continues to proactively encourage staff to submit CSIP referrals for every violent incident or for prisoners who are experiencing bullying from other prisoners.

The work on increasing CSIPs appears to be having an impact as, from January 2024 to November 2024, 138 CSIPs were opened, compared with 74 in the same period last year, a 86% increase. Wing staff are expected to input daily CSIP entries on the prison digital record. The IMB, when sampling entries, has observed that some are, on occasion, missing, and whilst the quality may be erratic, entries can be meaningful. The Board is concerned that, despite progress in the management and implementation of CSIPs, prisoner-on-prisoner assaults have continued to rise.

#### **4.4 Use of force**

The use of force management committee convenes monthly and there is a weekly meeting to review body worn video camera (BWVC) usage. During the reporting year, there have been no IMB applications (prisoners' written representations) relating to the use of force.

There were 367 use of force (UoF) incidents, a 12.6% decrease compared with last year (see Table 4 in Annex B). From August to October, the most used type of intervention was the control-and-restraint technique, at 56.3%, closely followed by rigid-bar handcuffs, at 52.5%.

From January to September, 'refusing to relocate' to a cell was the most common reason for an intervention, followed by 'to prevent harm' (often to avert self-harm) or 'assault on others'. A rise in self-harm and assaults in October saw 36.1% of interventions used in order to help avoid both.

Body worn video camera (BWVC) footage, reviewed weekly, is, in part, a learning and development exercise to improve practice, and it appears to have had an impact, with the proactive use of body worn video cameras increasing. When used effectively, proactive activation can help with de-escalation techniques, as staff capture behaviour on camera before an intervention. In February, 46% of activations were proactive, compared with 88% in September. Overall, BWVC activations have increased over the reporting year, with 82% in January, 92% in May and 100% in October.

The force management committee presents good equality data analysis of religion, ethnicity, age, pregnant individuals (there have been no interventions used on this group) and gender, which includes prisoners who do not identify as female.

Overwhelmingly, most interventions are used on white British (W1)) prisoners. Occasionally, another minority ethnic group will appear to have disproportionate use of force against them. For example, in March, two individuals with self-defined Caribbean heritage (B1) accounted for six incidents - 20.6% of all UoF incidents - despite this minority ethnic group accounting for 5.3% of the total prison population.

Having monitored the data, the Board has no concerns about any possible disproportionate UoF towards the small number of prisoners who do not identify as female.

#### **4.5 Preventing illicit items**

The drugs strategy meeting convenes monthly, with a focus to restrict supply, reduce demand and build recovery. There were 341 mandatory drug tests (MDTs) during the reporting year (see Table 5 in Annex B). Every month, the establishment has a target of testing 10% of the population and it met its targets in the reporting year. A random list of prisoners is electronically generated every month. Of the 341 MDTs, 61 were positive over the reporting period, which represents an average, over the year, of 17.8%. The availability of illicit drugs in the prison, with increased levels of prisoner-on-prisoner violence, is of concern to the Board.

In addition to the MDTs, other testing has been carried out. For example, prisoners who have two proven drug-related adjudications (disciplinary hearings) will be subject to frequent testing every seven days. At the time of writing this report, in December 2024, 13 prisoners are frequently tested.

Intelligence-led target searches of cells are undertaken and healthcare staff also carry out in-possession medication spot checks. During the reporting year, there were 388 spot checks, with just 15 finds. The number of caught concealments at the medication hatch for the reporting year was 46. Medication operational guidance was recently reissued to all staff and, as a deterrent, prisoners who are caught concealing or diverting medications at the hatch are now put on restricted moves. Whilst medication does continue to be concealed or diverted, drug strategy data illustrates a reduction in caught concealments since September.

Rapiscan X-ray screening is used daily, which enables incoming mail to be tested for illicit substances. The dedicated search team with sniffer dogs has also been to the establishment.

Intelligence reports suggest that drug and illicit items are mostly entering the prison via reception, and, to a lesser degree, through social visits. While searches are carried out - if there is intelligence or reasonable suspicion that a prisoner is bringing in drugs or illicit items internally in their body cavities - the establishment does not have a body scanner, thereby limiting the opportunity to detect and intercept.

The prison is seeing an increase in the illicit use of cannabis, synthetic cannabinoids, pregabalin and Subutex. There is growing concern around the trading and tampering of vapes, and a new vape policy has been introduced. Less of an issue are mobile phones, with few finds most months.



## **5. Fair and humane treatment**

### **5.1 Accommodation, clothing, food**

Accommodation at the prison expanded by 40 places with the opening of A wing in March. The Board continues to be concerned about the shortcomings of D wing accommodation, despite the improvements made within the constraints of the building. Issues include the dormitory-style accommodation, inadequate toilet facilities and problems providing heating in winter. The situation has been compounded by the ground floor showers being out of action for some months due to legionella. F wing has serious problems with the piping under its floors, causing it to be uneven and to bend when walked on. This has been patched as faults appear, while options are explored to address the underlying issue.

Leaks from the underground oil pipes providing heating and hot water were discovered in the middle of 2023. Subsequently a number of temporary arrangements were put in place for different parts of the prison. Further major work is still required for a long-term solution. In the meantime, there have been problems with some of the interim solutions, such as, for example, periods when wings lacked heating or hot water. At the end of the reporting period, neither the textiles workshop nor the Fosta coffee shop have heating. The family bonding unit is awaiting a new boiler.

The improvements to the site during the year include:

- reconfiguration of the reception areas, providing more privacy and making it more welcoming;
- a new conservatory for the visits' room, increasing the space and creating a more pleasant environment;
- a new floor for the kitchen; and
- attractive murals on many walls, as well as coloured benches outside.

During monitoring visits, the IMB has noted washing machines and/or dryers not working on wings on a fairly regular basis. In the IMB general surveys in November (see Annex A), 49% of respondents said they had problems washing their clothes (up from 37% in an earlier survey, dated November 2023). Themes in the comments were:

- dryers/washers being out of action, awaiting repair;
- running out of washing materials, such as powder and bleach;
- restricted times for washing, so not being able to wash work clothes at the weekend; and
- clothes not being returned in reasonable time and/or coming back damp or going missing.

Asked about the quality of the food in the IMB general survey, nearly 70% of respondents said it was good or reasonable. Asked if they got enough to eat, 42% said always or mostly, 39% answered sometimes and 19% said never. This is an improvement on the findings of the survey conducted in 2023, when 42% said they

never had enough to eat. The IMB has visited the kitchen and observed a good selection of meals, which looked appetising.

## **5.2 Segregation**

Foston Hall's care and separation unit (CSU), where prisoners are segregated, is a seven-bed unit, one of which can be used for constant supervision. The segregation monitoring and review group (SMARG) convenes quarterly to present segregation and adjudication data.

A total of 162 prisoners were segregated during the reporting year, an increase on the previous reporting year of 13% (see Table 6 in Annex B). The number of prisoners who were segregated on an open care in custody and teamwork (ACCT) plan, or with one in post-closure, has risen from 73 in the previous reporting year to 86 this year. Most prisoners stay on CSU for short periods, and there were just two prisoners in the reporting year who were segregated for more than 42 days (the limit allowed without external authorisation).

The Board makes weekly monitoring visits to the CSU. On those visits, in addition to talking to prisoners and CSU staff, the IMB monitors documentation to include defensible segregation decisions for prisoners on an ACCT. Based on entries, the Board has noted that justification for relocation is often detailed and always completed. Moreover, all defensible decision logs had their daily summary reviews recorded and signed by the Duty Governor, who will have seen the prisoner that day.

The Board has monitored 15 good order or discipline (GOoD) segregation reviews, which consider authorising continued segregation. During the reporting year, all were recorded by the Board as having been dealt with fairly. Prison, healthcare and mental health staff have been observed communicating with prisoners in an empathic and patient manner in sometimes difficult segregation reviews. Prisoners are encouraged to contribute to the reviews. Prisoners with more complex needs will also be routinely supported by a reintegration plan back to a residential wing.

As there has been a rise in violence, drugs and illicit items, it is unsurprising that adjudications (disciplinary hearings) have also risen. There were 1496 adjudications during the reporting year, a 30.4% increase compared with the same period last year. The Board attended 16 adjudications and, with one exception, all prisoners were present. During the reporting year, there were 44 referrals to the independent adjudicator, an increase of 13 on the same period last year. A total of 42 referrals were made to the police between January and November, with one prisoner in April having five referrals and another individual having three.

When a prisoner is segregated, the IMB is to be notified within 24 hours. Missed segregation notifications to the Board from the CSU have been an ongoing concern every month in the reporting year. At the time of writing the report, in December 2024, the establishment has introduced a new notification system, which is welcomed by the Board. From our observations, we would like to note the professionalism, patience and compassion with which prisoners are treated in the CSU.

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

During monitoring visits, the IMB has frequently noted positive interactions between prisoners and prison staff. The Board has observed many instances of staff responding to prisoners with considerable care and sensitivity. This has encompassed some particularly challenging situations, which have been handled very effectively.

In the IMB general survey, prisoners were asked if they felt supported by staff. Of the 81 who answered, 52% said 'yes' and 16% said 'sometimes'. There were some very positive comments, sometimes with reference to particular staff or wings. There were some comments about staff inconsistency and of some being more supportive than others. There were also references to staff being busy, not having time to talk much to prisoners or follow up requests. Then there were some negative comments, with prisoners saying they felt ignored and disrespected and that staff were too busy.

At the beginning of the reporting year, performance in relation to delivery of key work was improving. However, after March, the number of key work sessions taking place (as a percentage of the target) fell considerably (see Table 7 in Annex B), due to staffing pressures (see 6.5). It is noted that, faced with such pressures, the priority has been to maintain the full regime, particularly with regard to work and education.

The quality of key work is monitored locally and centrally. The ratings given centrally were in the 'red' (i.e. below good) for the seven months from April to October, but the scores did show an improvement from September.

### **5.4 Equality and diversity**

The Board has observed significant improvements in the timeliness and quality of the discrimination incident reporting form (DIRF) process, with the vast majority of responses being made within the required time frame and investigations demonstrating detail and thoroughness. The majority of DIRF documentation has been quality assured by the Deputy Governor and the comments indicated a close attention to the requirements of the process. There is also a plan to initiate a prisoner quality assurance forum, with redacted DIRF documentation for scrutiny.

A face-to-face questionnaire (see Annex A), which was undertaken with a random sample of 12 prisoners, indicated that 100% of those who had completed a DIRF form found it easy to fill in. Of those who had not completed one previously, 75% who were shown one said that they would find it easy; and 75% said that they would complete a form in future, if they felt that they were being discriminated against.

The majority of managers leading on one of the equality protected characteristic strands have contributed to the ongoing monitoring, meeting and feedback sessions and a significant amount of useful data has been provided. However, some areas of equality remain unrepresented in these meetings.

A new neurodiversity support manager (NSM) has been appointed. The IMB observed the NSM providing support and input to segregation reviews involving neurodivergent prisoners, as well as regular written guidance and training for staff.

## **5.5 Faith and pastoral support**

The chaplaincy team of just under three-and-a-half posts comprises full- and part-time staff. The team has carried vacancies for much of the reporting year, ranging from half to one-and-a-half full-time equivalent posts. The shortfalls have been, in part, covered by other chaplains working flexibly and undertaking overtime, but have limited the informal pastoral support the chaplaincy has usually been able to provide.

Despite pressures, the chaplaincy team has consistently undertaken its statutory duties, as well as providing a high level of pastoral care. The chaplaincy team monitors the number of significant pastoral conversations, which are not linked to their work with prisoners on ACCTs or on a bereavement journey: the figures for August, September and October were 117, 116 and 141 respectively. As well as faith worship, the chaplaincy team provides a range of classes and activities, adapting their programme in response to the needs of prisoners. These include multi-faith events, choirs and drama and meditation sessions.

The team's staffing is broad, reflecting the faith communities of the prison population. Efforts to find a pagan chaplain were finally successful, with the new person starting in May. A free church chaplain started in September. A Catholic priest and a Sikh chaplain work on a sessional basis. The Sikh chaplain also covers the Hindu faith by agreement with each prisoner. There is also a volunteer Jehovah's Witness chaplain and a Christian chaplain on a work placement, undergoing training. It is hoped that a Buddhist chaplain will start soon.

## **5.6 Incentives scheme**

In the IMB general survey, prisoners were asked if the incentives framework encouraged them to behave well. In November, 66% of those who answered said 'yes', an increase on the 54% recorded in the March survey. Asked if they had been treated fairly, 65% of those who answered said 'yes', while 35% said 'no'. One theme in the comments was that prisoner who consistently behaved well got missed: *'Those who are quiet, shy, behave are forgotten about.'*; *'We don't get noticed to even get enhanced.'* Another theme in the responses was the view that enhancement did not mean a great deal: *'There isn't much difference between the levels to be honest, apart from basic.'* Another theme was that if a prisoner did not have visitors or friends or family who could send in money, being on the enhanced (top) level of the incentives scheme did not provide much for them.

The Board has been concerned that the forum with prisoners to review the operation of incentives, in particular in relation to protected characteristics, did not meet for much of the reporting year. The first meeting was held in October and was reported as being very positive. Data in relation to incentives and protected characteristics were reviewed and no disproportionate outcomes were identified. It seemed that participating prisoners were able to raise and discuss issues about the operation of incentives.

## **5.7 Complaints and applications**

Despite the introduction of a new system for the operation of general applications, there continue to be significant problems. In the IMB general survey, prisoners were asked if,

when they had made a general application, they were usually dealt with within seven days. A total of 68% of those who answered said 'no'. One prisoner's comment was typical: *'We seem to get apps back late, if we get them back at all.'*

For the first 10 months of the reporting year, an average of 90% of complaints were answered within the expected time limit. However, this includes complaints that were answered by an interim response. Complaints with interim responses averaged approximately 14% (ranging between 11% and 24%) between December 2023 and June 2024.

## **5.8 Property**

Prisoners continued to experience problems in relation to their property within and between establishments. In the IMB general survey in November, when prisoners were asked if they had problems accessing their property, 50% of those who answered said 'yes'. During monitoring visits, Board members noted intermittent backlogs in property applications. In an IMB visit to the prison in November, there was a backlog of 53, some dating back to June.

Approximately 18% of prisoner complaints related to property and reception. This included some relating to property moved between establishments, which had, for example, gone missing or were delayed or damaged, as well as issues within the prison. Approximately 9% of applications (prisoners' written representations) to the IMB related to property. These give an insight into the impact of problems with property, which include the loss of, or inability to access, legal documents, as well as the loss of suitable clothing and/or items of great personal significance.

## **6. Health and wellbeing**

### **6.1 Healthcare general**

The healthcare service at Foston Hall is provided by Practice Plus Group (PPG). The service includes GP clinics; advanced nurse practitioner clinics; a mental health team; clinical and psychosocial substance misuse support; optometry; dentistry; podiatry; physiotherapy; NHS health checks and screening; chronic disease management; and immunisations. The service appears to be well-managed locally and healthcare managers seem to work collaboratively with prison colleagues.

A total of 81 (24%) of concerns raised in applications to the IMB this reporting year were about healthcare. Twenty-nine were 'chasing' applications from prisoners waiting either for appointments (hospital and internal) or other health follow-ups. There were 29 concerns about medication, the majority being about prescribing decisions and, therefore, not within the remit of the IMB. Other issues raised included prisoners' concerns about special dietary requirements and complaints about the way the healthcare team had responded to prisoners' applications. Prisoners tell the IMB that when they have submitted applications, or are waiting for an appointment or feedback, they find the lack of communication from the healthcare team very frustrating.

There is no pharmacist based at the prison. Dispensing is the responsibility of pharmacy technicians under the supervision of a senior technician. Two applications to the IMB raised concerns about errors in dispensing. Records of the PPG bi-monthly quality assurance and improvement meeting show evidence of discussion about dispensing errors and of learning from this.

Accommodation for healthcare services has improved. A new portacabin office now houses healthcare managers and administrators, freeing up accommodation for much-needed clinical, one-to-one or group-work space (once refurbishment work is completed). The proposal to install a canopy alongside the medication hatch, to provide prisoners with shelter in poor weather, has not been implemented and prisoners still have to queue outside, sometimes in the rain.

### **6.2 Physical healthcare**

Staff turnover/vacancies appear to have been managed effectively. However, there were two nights in the reporting year when there was no qualified clinical practitioner cover.

There are a high number of missed healthcare appointments. Prisoners say lack of organisation on the wing or poor communication from wing staff means they miss appointments (although sometimes prisoners choose not to attend). The average number of missed internal appointments per month in the reporting year was 162, ranging between 86 and 298. A total of 46 prisoners missed hospital appointments: 13 were cancelled by the prison, six were cancelled by the hospital and 27 prisoners refused to attend. Waiting times for routine appointments were comparable with those in the community.

There are an increasing number of pregnant prisoners - 27 in the reporting year – some of whom have multiple/complex needs, which are a challenge to meet in a custodial setting. On 30 November, there were seven pregnant prisoners, making up 2.4% of Foston's population on that day. There is a perinatal team in the prison and pregnant prisoners have told the IMB they feel supported by them.

The healthcare team does not collect equalities data so cannot monitor disproportionate outcomes. They, nonetheless, take account of the diverse prison population, e.g. transgender prisoners were supported to participate in the smear test initiative.

In response to an IMB survey in March 2024, 46% said they were not getting the care they needed for their physical health. In a repeat survey, in November 2024, this figure was 44%. Prisoners complained of long waits for appointments. The lack of communication from healthcare was a recurring theme. Some respondents said once they did get an appointment, the GP was 'really good'.

### **6.3 Mental healthcare**

The mental health team (MHT) at Foston Hall is like a community MHT, in that its focus is on prisoners with severe and enduring mental health conditions. The IMB is concerned that many other prisoners who experience low-level anxiety, depression and grief receive little support for their mental health.

Since May 2024, there has been no access service, a multidisciplinary team supporting prisoners with highly complex needs and behaviours. This is a significant gap in the offender personality disorder pathway.

At times during this reporting year, the mental health service has been thinly stretched because of staff vacancies. There was no team manager in post until May 2024, and there have been a number of mental health nurse vacancies. Triaged prisoners waited, on average, 14 days for a second appointment. Referrals averaged 70 per month (54-83 range) and assessments averaged 86 (74-102 range). The total number of patients on the MHT caseload averaged 37 per month (26-54 range). Three psychiatrists provided 2.5 prison clinics each week and saw 30-40 patients a month. The Board has no concerns about waiting times for a routine or urgent appointment with a psychiatrist.

A total of 25 assessments for transfer to a secure hospital were recommended in the 12 months to 31 October 2024, two of which were declined. The 28-day transfer target was not met in 14 cases (61%) out of 23. The IMB is concerned that prisoners with complex mental health needs spend long periods in a custodial setting when they should be in secure hospital. Prison officers are not resourced, nor trained, to provide the specialist mental health care these prisoners need.

Of the 81 health concerns in applications to the IMB in the reporting year, 16 were about mental health, while nine related to medication, with seven prisoners wanting more support. In the IMB March 2024 survey, 63% of prisoners who responded said they were not getting the mental health care they needed; in the November 2024 survey, this figure was 46%. Some prisoners said there were long waits to see a mental health worker, as well as no follow-up, and that they felt unsupported. Others reported that the psychiatrist was 'very good' and they felt listened to and supported by the team.

## **6.4 Social care**

The adult social care team assesses and arranges support for prisoners who meet Care Act 2014 criteria. The team supports release planning for complex cases, signposts to community services and links with the perinatal team, as well as making referrals to children's services.

The social care team has a 'hot desk' in the perinatal office. The IMB understands that the team has developed a good working relationship with the first night centre, so prisoners with care needs are identified early in their prison stay. Prisoners can also self-refer. The team receives four to five referrals per month.

Since Derbyshire County Council agreed a block contract for the prison with the Caring Links agency, prisoners' care needs have been met more efficiently, in the Board's view. In November 2024, five prisoners were receiving 2-4 support calls per day, morning and evening. Carers are now identified as an essential service; there have been no instances of carers being refused entry when the prison is in patrol state (when the prison is locked) or a serious incident is underway.

There are no social care buddies, which leaves a gap in the support system for prisoners with care needs. Eight prisoners have been trained in moving and handling and can act as wheelchair buddies.

Three rooms have been adapted for prisoners with complex care needs, although the social care team considers one adapted shower unfit for purpose. There are also two larger rooms on a wing, with level access showers that can be used for prisoners with care needs. However, the toilets are not disabled-friendly. None of the wings for prisoners on the enhanced level of the incentives scheme has wheelchair-accessible accommodation.

The social care team now has an aids and equipment store room in the prison. Daily living aids, such as commodes, raised toilet seats and pressure cushions, are available on site and can be provided quickly for prisoners with care needs.

## **6.5 Time out of cell, regime**

For the first half of the year, staffing levels were high enough to ensure the continuation of work, education and activities within the regime. Pressures increased in the summer, when prisoner numbers were rising and staffing was more limited due, in particular, to annual leave and long-term sickness. In July, out of an establishment of 114 band three officers, only 90 were available for full duties.

In the face of staffing pressures, priority was given to maintaining the regime, particularly in relation to education and work. Where pressures led to reduced staffing on some wings, the prison staggered or partially reduced exercise and association for prisoners not in work or education. Pressures were greatest at the weekend.

By November, the staffing situation had improved. The target for band three officers was 117, and the number of staff in post was 123.6. However, the number available for duty was reduced by 13, due to factors such as sick leave and temporary promotions, while a further five were on restricted duties.



## 6.6 Drug and alcohol rehabilitation

The substance misuse service (SMS) at Foston Hall, which is sub-contracted by PPG to the Midlands Partnership NHS Foundation Trust, is provided by the inclusion team and involves both clinical staff and recovery practitioners. The service offers psychosocial interventions, support and recovery advice, with the clinical service providing alcohol and drug detox, and opioid substitution treatment (OST). In February, 95 prisoners were prescribed OST, while this figure was 105 in October, which was around 35% of the establishment's population.

Each month, several prisoners will commence detoxification, although completion rates are low. For instance, in February, 19 prisoners started detox, with four detox completions and another one completed in March. In September, 18 prisoners started detox, with three completions and none in October. Reasons for this vary and include some prisoners not wanting to come off OST, even when they are on a low daily dose. Furthermore, as noted elsewhere, the establishment has high numbers of short-term prisoners on remand and licence recalls, both of which make detoxification difficult to achieve.

At the time of writing the report, in December 2024, 66 staff are trained to deliver naloxone, a medicine that rapidly reverses an opioid overdose. All prisoners are offered the opportunity to take home naloxone when they are released, with training in its use given if they take it up.

Psychosocial SMS offers one-to-one recovery support and group interventions, which are well attended, from the Board's observations. These include Alcoholics Anonymous (AA), self-management and recovery training (SMART), peer mentor-led coffee mornings, SMS gym sessions and the incentivised substance free living (ISFL) support group.

External partners, such as Burton Addiction Centre, come into the establishment to deliver group sessions to prisoners. In a bid to strengthen partnerships, Foston Hall hosted a 'recovery event' in July, which was attended by 40 external partners. The focus was, in part, to improve the support available in the establishment and in the community on a prisoner's release.

In March 2024, Foston Hall opened a 24-bed ISFL unit. The wing has had full capacity since opening and, at the time of writing this report, in December 2024, 12 prisoners suitable for the unit are on the waiting list to be accepted. Another nine are working towards meeting the ISFL wing's criteria.

Since the opening of the ISFL wing, two prisoners have been moved off for drug-related reasons. Notably, there have been no incidents of violence or self-harm. The Board regularly speak to ISFL prisoners and the feedback from them has been consistently positive. As one prisoner stated: *'Changed my life... the wing feels like a community, the group sessions are great, and staff are brilliant and approachable.'* The Board commends the drug strategy leadership team, ISFL wing staff and SMS for the care and support given to ISFL prisoners.

## **6.7 Soft skills**

The gym provides structured activity for all prisoners (each wing has two timetabled sessions per week), together with sessions for particular groups, such as older or disabled prisoners. In addition, there is a small choir, run by a member of the chaplaincy team, and a craft club. Activities and competitions have been organised for specific occasions, such as designing posters or creating short stories for Halloween and Christmas. A drama group, run by a member of the charity, Prison Advice and Care Trust (PACT), has performed a play (written by a prisoner) on family visiting days. IMB members have frequently observed peer mentors working with prisoners in a very supportive manner.

## **7. Progression and resettlement**

### **7.1 Education, library**

Staffing issues impacted on provision early in the year. However, the appointment of a new learning and skills manager and education manager has stabilised the situation, with only one vacancy at the end of the reporting year.

From the Board's observations, considerable efforts have been made to promote education to prisoners. Education peer mentors visit the first night centre weekly to inform prisoners about available courses and promotional materials are displayed prominently on wings. Induction sessions take place in the education department in order to familiarise prisoners with the environment, and are completed online. An updated and simplified prospectus has been produced. A progression course has been introduced to teach prisoners life skills, along with an entry level food safety course (completed by 140 prisoners by the end of November) and greater emphasis has been put on access to entry level maths and English. The department has also divided some courses (e.g. level 2 catering and levels 1 and 2 hairdressing) into modules, which reduces the impact on prisoners who are transferred partway through a course. The department is now achieving its targets for course allocations and achievement in maths, English and vocational courses. Persuading some prisoners to attend education (especially those on remand) remains a challenge.

Considerable effort has also been made to create a welcoming and attractive environment. Some prisoners have told Board members that they feel comfortable and supported. When the IMB has visited classes, the learning environment has been positive, purposeful and enthusiastic.

Library staffing has continued to be an issue, resulting in limited opening hours. However, considerable effort has been made by the library manager and orderlies (trusted prisoners who take on work to provide services that contribute to the running of the prison) to ensure that the library continues to be accessible. On average, 75% of prisoners have been active library users over the reporting year. In addition to books (which are also supplied to each of the wings), DVDs, distraction packs and jigsaws continue to be popular, and a Governor's book club now meets fortnightly.

The library organises competitions and events (e.g. for Black History Month and Halloween) and has also facilitated a prisoner-led weekly craft morning, which has been well-supported. Thirty seven prisoners attended recent Christmas card-making workshops. The library system is now fully digitalised, and the library has been reorganised with a new layout and furniture. Prisoners have told the IMB they find the library a comfortable place to be and the staff helpful and responsive. Following advice from the neurodiversity support manager, shelf labels have been updated to make them more accessible for prisoners with dyslexia. Regular weekly library slots are made available for education and workplace areas, although these are not always well used.

### **7.2 Vocational training, work**

Whilst there are sufficient work opportunities for all prisoners, staff absences during the reporting year have impacted on three key employment areas: waste management,

textiles and gardens. Consequently, the number of places available has been significantly reduced during the reporting year, and there have been insufficient staff who are qualified to carry out assessments. For example, 21 women would usually work in textiles, but the long-term absence of an instructor has reduced this number to 15, and the workshop closed at the end of the reporting period. Numbers in waste management have been reduced from 30 to 20 for the same reason.

However, there has been progress in the use of workshop booklets and a drive to embed maths and English skills in work areas. After a lengthy period of closure, the hair salon is again operational and a new six-week course began in November. The gardens instructor is now qualified to assess the level 2 practical horticulture course, extending progression opportunities in this area. Attendance at work is generally high, and prisoners are sanctioned if they refuse to attend. Suitable career pathways are identified at induction, and the IMB has observed that considerable care is taken to place prisoners in appropriate work environments.

IMB members regularly visit work places and talk to prisoners about their jobs. We find good levels of motivation and very good relationships between prisoners and instructors. The use of incentives, such as 'employee of the month' in textiles is encouraging and supervision in most areas is consistent but with a 'light touch'. In waste management, prisoners have taken great pride in their work in a project involving refurbishing benches, which have been distributed around the prison grounds.

### **7.3 Offender management and progression**

The temporary government measure of allowing eligible prisoners to be released from prison early was planned for thoroughly, and managers state that this was carried out effectively. Of the 72 prisoners released under the scheme, 27 were back in custody, giving a 37.5% recidivism rate.

Despite the population pressures (a high number of short sentences, recalls and remands) creating extra work for the offender management unit (OMU), there appeared to be no backlog in prisoner assessments known as OASys, nor any issues in completion of parole reports and reports for multi-agency public protection panels.

The year-to-date figure for prisoners accessing release on temporary licence (ROTL) for resettlement, maintaining family ties and paid work is six, the same number as in the previous year.

Due to staffing shortages, the accredited offending behaviour programme known as Thinking Skills Programme did not run until October of the reporting year, with seven prisoners starting the course and five completing. The pool of eligible prisoners has decreased as a direct consequence in the growth of the remand/recall/short sentence population.

### **7.4 Family contact**

Prisoners at Foston Hall continue to have access to in-cell phones, enabling them to maintain contact with family and friends. In the past year, the visits' hall has been

refurbished to create a more welcoming environment (especially for children). Social visits continue to be supported by PACT staff, who provide a meet-and-greet service.

The family bonding unit (a house in the grounds in which prisoners can apply to spend time with their families) has been fully operational during the reporting year, although the house has no central heating. In addition, 12 family days (which bring together prisoners and their families outside of their statutory entitlement to social visits, usually in more informal settings) have taken place, including children's days, and are very popular. PACT staff also run bi-monthly sessions for isolated prisoners (those receiving no external visitors), providing afternoon tea, games and activities. These are well attended and received by the prisoners concerned. PACT staff continue to maintain a significant caseload, chiefly supporting prisoners to maintain contact with children in care.

## **7.5 Resettlement planning**

The pre-release team assesses immediate resettlement needs across eight key areas, with a priority focus on attempting to ensure access to accommodation and bank accounts. The team has continued to meet or exceed its target to assess 90% of new prisoners within three days, in spite of the growth in short-term prisoners, fixed 14-day recalls, and remanded prisoners.

The team works in partnership with a range of providers of commissioned rehabilitative services (CRS), delivering resettlement support to prisoners returning to probation areas in different geographical locations. This offer includes meeting vulnerable prisoners who are released at the prison gate and supporting them at a visitor centre outside the prison. The charities, Women's Work and Changing Lives, are two such providers in the East Midlands. From October, a new contract was issued to CRS providers to work with prisoners who are remanded in custody. This service was previously unfunded.

The IMB at Foston Hall has observed that the national model for accessing CRS support from a provider, and for resettlement in general, is complicated and disjointed. The pre-release team locally appears to work effectively in spite of the policy context.

Recalled prisoners are reported to be amongst the most difficult to engage with and are often resistant to any help offered. This explains, in part, why 20% of prisoners released from the establishment have no settled accommodation. For this reason, the team issues a questionnaire to recalled prisoners in order to find out why.

Recent comments from prisoners are as follows:

- *'The place they gave was disgusting. I was better off on the streets.'*
- *'Once we've left here, there's even less of a chance to get anywhere to live, and you never get out of the vicious circle you're in.'*
- *'I ended up shoplifting to fund my drug addiction and ended up homeless, plus street working.'*
- *'I had to attend appointments in too far and many different locations/areas, which blew my head summit rotten.'*

## 8. The work of the IMB

The Board has continued to enjoy a productive relationship with prison management and staff. The chair and Board members have regular updates with the Governor, Deputy Governor and the senior leadership team. The Board acknowledges the prison's co-operation and support, without which its work would not be possible.

### Board statistics

Recommended complement of Board members	12
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	6
Total number of visits to the establishment	209
Total number of segregation reviews observed	15

### Applications to the IMB

MONTH	NUMBER	%
December	37	11%
January	41	13%
February	33	10%
March	21	7%
April	23	7%
May	22	7%
June	7	2%
July	16	5%
August	30	9%
September	14	4%
October	57	18%
November	22	7%

WING	NUMBER	%
A	23	7%
B	10	3%
C	41	13%
D	37	11%
E	11	3%
F	78	24%
FNU	57	18%
T	55	17%
CSU	9	3%
U/K	2	1%

<b>Code</b>	<b>Subject</b>	<b>Current reporting year</b>	<b>% of total</b>	<b>Previous reporting year</b>
A	Accommodation, including laundry, clothing, ablutions	38	11%	51
B	Discipline, including adjudications, incentives scheme, sanctions	18	6%	10
C	Equality	5	2%	13
D	Purposeful activity, including education, work, training, library, regime, time out of cell	18	6%	27
E1	Letters, visits, hones, public protection restrictions	30	9%	59
E2	Finance, including pay, private monies, spends	8	3%	29
F	Food and kitchens	18	6%	23
G	Health, including physical, mental, social care	81	24%	76
H1	Property within this establishment	22	7%	17
H2	Property during transfer or in another establishment or location	8	2%	6
H3	Canteen, facility list, catalogue(s)	8	2%	13
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence, parole, release dates, recategorisation	18	6%	27
J	Staff/prisoner concerns, including bullying	22	7%	35
K	Transfers	0	0%	5
L	Miscellaneous, including complaints system	25	8%	22
U	Unknown	4	1%	3
<b>Total</b>		<b>323</b>		<b>416</b>

\*A total of 298 applications received by the IMB in the 2023-2024 reporting year. Within these applications, there were, sometimes, more than one category of concern for the prisoner and, as such, these have been logged as separate numbers, bringing the total to 323. This is a decrease in applications of 93 from the previous reporting year.

## Annex A

### IMB general surveys

**Nov 2024:** Survey sent to all prisoners, except those in FNC. There were 84 responses, estimated to be a response rate of **34%**.

**Mar 2024:** Survey sent to all prisoners, except those in FNC. There were 57 responses, estimated to be a response rate of **26%**.

The percentages shown below related to the prisoners who answered the question. The number of prisoners who did not answer the question is noted in the end column, where applicable.

	Yes	Sometimes	No	Don't know / did not answer
<b>Do you get cell cleaning materials every week?</b>				Number of prisoners
<i>November 2024 (80 answered)</i>	73%	1%	26%	4
<i>March 2024 (51 answered)</i>	65%	2%	33%	6
<b>Are the communal /shared areas of your wing clean?</b>				
<i>November 2024 (77 answered)</i>	71%	7%	22%	7
<i>March 2023 (51 answered)</i>	67%	4%	29%	6
<b>Do you have any problems washing your clothes?</b>				
<i>November 2024 (84 answered)</i>	49%		51%	
<i>March 2024 (53 answered)</i>	38%	2%	60%	4

What is the quality of the food like?	Good	Reasonable	Not Good	Did not answer
<i>November 2024 (82 answered)</i>	10%	60%	30%	2
<i>March 2024 (57 answered)</i>	12%	37%	51%	

Do you get enough to eat at mealtimes?	Always	Mostly	sometimes	Never	Did not answer
<i>November 2024 (84 answered)</i>	18%	24%	39%	19%	
<i>March 2024 (57 answered)</i>	9%	26%	32%	33%	

Does the canteen sell the things that you need?	Yes	No	Don't know/ Not answered
<i>November 2024 (82 answered)</i>	63%	37%	2
<i>March 2024 (55 answered)</i>	45%	55%	2



<b>Have you had any problems buying things from the canteen?</b>	Yes	No	Not bought anything
<i>November 2024 (81 answered)</i>	46%	54%	4%
<i>March 2024 (57 answered)</i>	67%	33%	

<b>Have you any problems accessing your property?</b>	Yes	No	Not applicable not answered
<i>November 2024 (78 answered)</i>	50%	50%	8
<i>March 2024 (57 answered)</i>	67%	33%	

<b>Is it easy for you to make a general prison application?</b>	Yes	Sometimes	No	Don't know, not made an application, not answered
<i>November 2024 (76 answered)</i>	76%	1%	23%	8
<i>March 2024 (55 answered)</i>	78%		22%	2

<b>If you have made any <b>general applications</b> were they usually dealt with within 7 days?</b>	Yes	Sometimes	No	Don't know, not made an application, not answered
<i>November 2024 (78 answered)</i>	27%	5%	68%	6
<i>March 2024 (54 answered)</i>	17%		83%	3
<b>Do you feel general applications are usually dealt with <b>fairly</b>.</b>				
<i>November 2024 (76 answered)</i>	46%	7%	47%	8
<i>March 2024 (51 answered)</i>	29%		71%	6

<b>Is it easy for you to make a complaint?</b>	Yes	No	Don't know
<i>November 2024 (68 answered)</i>	71%	29%	16
<i>March 2024 (50 answered)</i>	68 %	32%	7

<b>Are complaints usually dealt with fairly?</b>	Yes	Sometimes	No	Not made a complaint, not answered
<i>November 2024 (64 answered)</i>	34%	2%	64%	20
<i>March 2023 (42 answered)</i>	32%		58%	15

<b>Do you feel supported by staff?</b>	Yes	Sometimes	No	Not answered
<i>November 2024 (81 answered)</i>	52%	16%	32%	3
<i>March 2024 (57 answered)</i>	55%	12%	33%	

<b>Do you feel safe in Foston Hall</b>	Yes	Sometimes	No	Not answered
<i>November 2024 (74 answered)</i>	66%	2%	32%	10
<i>March 2024 (53 answered)</i>	60%		40%	4
<b>Have you ever felt bullied by any of the other prisoners?</b>	Yes	No	Not answered	
<i>November 2024 (80 prisoners answered)</i>	40%	60%	4	
<i>March 2024 (57 answered)</i>	47%	53%		
<b>Do you feel you are getting the care you need for your physical health</b>	Yes	sometimes	No	Don't know, not answered
<i>November 2024 (81 prisoners answered)</i>	50%	6%	44%	3
<i>March 2024 (57 answered)</i>	54%		46%	
<b>Do you feel you are getting the care you need for your mental health</b>				
<i>November 2024 (79 prisoners answered)</i>	53%	1%	46%	5
<i>March 2024 (56 answered)</i>	37%		63%	1

<b>Do you think the Incentives scheme (enhanced, standard, basic), encourages you to behave well?</b>	Yes	No	Don't know what it is, not answered
<i>November 2024 (74 prisoners answered)</i>	66%	34%	10
<i>March 2024 (54 answered)</i>	54%	46%	3
<b>Do you think you have been treated fairly in the incentives scheme?</b>			
<i>November 2024 (71 prisoners answered)</i>	65%	35%	13
<i>March 2024 (51 answered)</i>	61%	39%	6

## Profile of respondents: November 2024

		Please Tick			
British	W1	55	Bangladeshi	A3	1
Irish	W2	2	Chinese	A4	3
Gypsy or Irish Traveller	W3	1	Any other Asian background	A9	
Any other white background	W9	5	Caribbean	B1	2
White and Black Caribbean	M1	2	African	B2	1
White and Black African	M2		Any other Black background	B9	
White and Asian	M3	2	Arab	02	
Any other mixed	M9		Any other	09	
Indian	A1	3	Do not wish to answer	NS	5
Pakistani	A2	2			

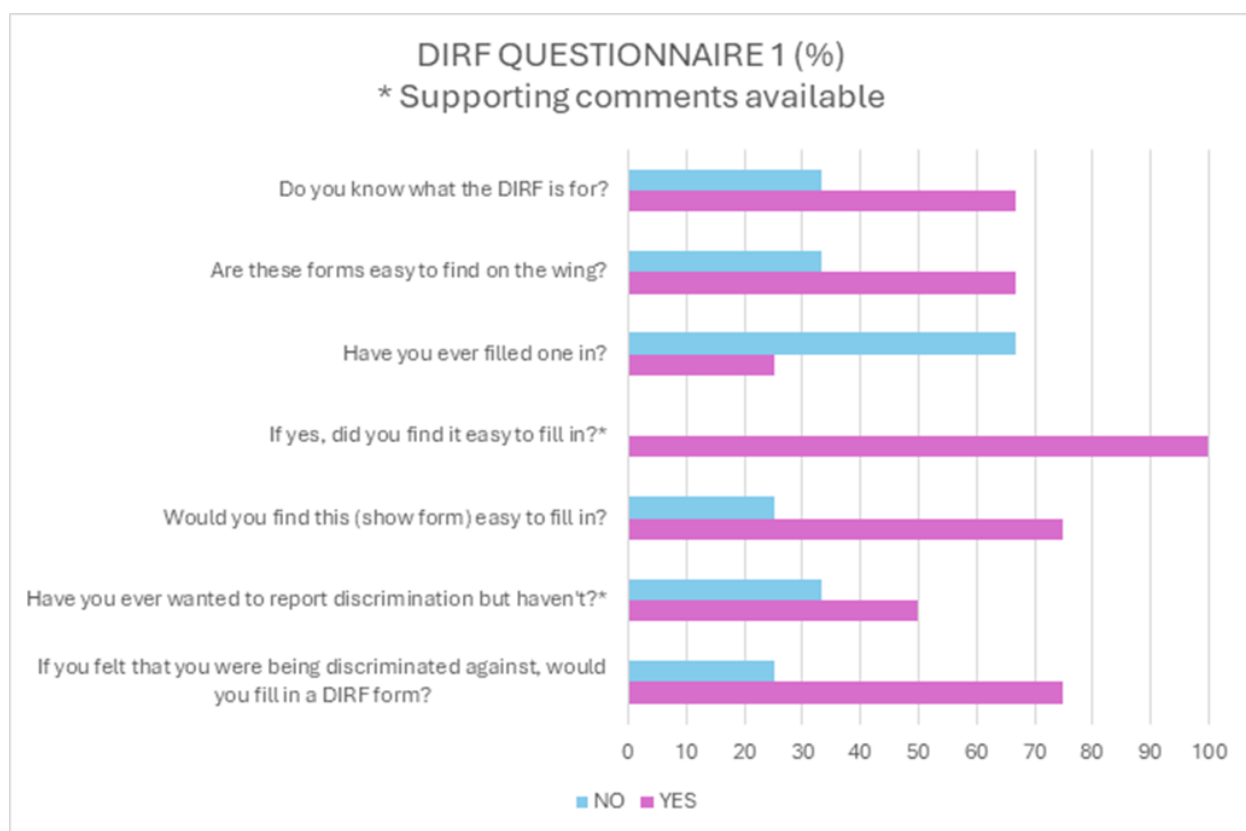
What is your nationality?	40 British 10 English 1 British French 1 British Asian 1 Bangladeshi 1 Indian 1 Irish 1 Latvian 1 Malaysian 1 Nigerian 1 Pakistani 4 Romanian 1 Welsh 21 Not answered
---------------------------	--

How old are you?						
Under 21	21-30	31-40	41 - 50	51-60	61 +	Not answered
1	18	27	23	6	4	5

## DIRF Questionnaire: 25 May 2024

- Fourteen individual prisoners were randomly selected by taking the 15th and 30th listed prisoners from the roll of each wing (excluding the FNC).
- The wings were visited on a Saturday in order to have the best chance of finding the prisoners able and willing to speak.
- C wing was not visited as, by the time 12 prisoners had been engaged, it was lunchtime and it was felt inappropriate to disturb them while they were eating.
- The prisoners were found to be mostly very prepared to engage and to offer unsolicited comments, as well as to answer all of the questions freely.
- The comments are included at the end of the document.

## Findings



### **Additional comments made by prisoners**

If you found the DIRF hard to fill in, why was that?

- 'I can't read.'

If you have wanted to report discrimination but haven't, why was that?

- 'I have put in around ten but only got two responses and these weren't satisfying. The change of Governor is improving things.'
- 'The last time I reported things at another prison and nothing happened so I'm not inclined.'
- 'Yes, an officer referred to (another prisoner having her food) as 'feeding time at the zoo'.'
- 'Officers wouldn't listen - they haven't! I've talked to officers and nothing has been done.'
- 'Yes, because nothing gets done.'
- 'It seems that 'if your face fits... with those in power....and reputation is hard to shake off.'
- 'There is too much crap on the wing already and I don't want any more so I'd bottle it up.'

### **Any other comments offered?**

- 'The system is broken - no-one ever gets "what should happen", for example, an apology.'
- 'The DIRF system should be highlighted very early on.'
- 'There's no discrimination here but a lot on the outside.'
- 'The ISFL staff are handpicked and you can go to them about anything!'
- 'Younger and pregnant prisoners are exploited by staff.'

## Annex B

### Tables<sup>2</sup>

**Table 1: Self-harm incidents**

	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Total
Dec 23-Nov 24	112	94	106	103	131	156	122	148	77	95	125	154	1423
Dec 22-Nov 23	134	178	270	243	125	292	238	285	236	225	154	102	2482

**Table 2: Prisoner-on-staff assaults**

	Dec	Jan	Feb	Mar	April	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Dec 23-Nov 24	8	10	5	8	7	4	6	9	6	5	8	8	84
Dec 22-Nov 23	1	5	3	3	3	11	9	13	9	11	9	4	81

**Table 3: Prisoner-on-prisoner assaults (includes fights)**

	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Total
Dec 23-Nov 24	8	5	8	9	9	8	13	16	11	13	19	17	136
Dec 22-Nov 23	9	4	7	4	3	12	5	10	8	4	8	7	81

**Table 4: Use of force interventions**

	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Dec 23-Nov 24	31	28	25	29	20	27	22	43	32	34	36	40	367
Dec 22-Nov 23	31	26	33	38	29	49	31	43	33	35	50	22	420

**Table 5: Mandatory drug tests**

	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Tests	27	28	27	28	27	27	29	29	29	30	31	29	341
Positive	4	3	7	9	5	5	6	3	6	3	6	4	61

<sup>2</sup> Tables 1, 2, 3 and 4: December 2023-November 2024 data from the safety diagnostic tool (6 December 2024).

**Table 6: Prisoners located on CSU**

	Dec	Jan	Feb	Mar	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Total
Dec 23-Nov 24	12	10	10	9	10	13	20	18	10	15	17	18	162
Dec 22-Nov 23	10	10	12	15	9	13	12	17	10	11	14	10	143

**Table 7: Key work**

Month	Prisoners allocated a key worker (target 95%)	Time from reception to allocation of key worker (target 2 days)	Reception to first session in days (target 14 days)	Compliance, i.e. number of sessions taking place compared to policy of 1 session per month (target 70%-80%)
Dec 2023	77.74	18	41	43.65
Mar 2024	99.6	0	7	57.41
June 2024	97.18	1	15	23.89
Sep 2024	94.87	1	22	25.46
Nov 2024	95.61	1	17	24.32



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