

Annual Report of the Independent Monitoring Board at HMP Bristol

For reporting year 1 August 2024 to 31 July 2025

Published December 2025



Contents

Introduct	ory sections 1 - 3	3
	Statutory role of the IMB	
	Description of the establishment	
3. ł	Key points	5
3.1	Main findings	
3.2	Main areas for development	
3.3	Response to last report	
Evidence	e sections 4 – 7	
	Safety	
4.1	Reception and induction	10
4.2	Suicide and self-harm, deaths in custody	
4.3	Violence and violence reduction, self-isolation	
4.4	Use of force	
5. I	Fair and humane treatment	13
5.1	Accommodation, clothing, food	13
5.2	Segregation	
5.3	Staff and prisoner relationships, keyworkers	
5.4	Equality and diversity	
5.5	Faith and pastoral support	
5.6	Incentives schemes	
6. I	Health and wellbeing	18
6.1	Healthcare general	
6.2	Physical healthcare	18
6.3	Mental health	19
6.4	Social care	19
6.5	Time out of cell, regime	20
6.6	Drug and alcohol rehabilitation	
6.7	Soft skills	
7. I	Progression and resettlement	21
7.1	Education and library	
7.2	Vocational training, work	
7.3	Offender management, progression	
7.4	Family contact	22
7.5	Resettlement planning	22
8. The w	ork of the IMB	
Board	statistics	24
Applica	ations to the IMB	25
Service	e providers	26

All IMB annual reports are published on www.imb.org.uk

Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

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

2. Description of the establishment

HMP Bristol is a category B public sector local and resettlement prison holding adult and young adult male offenders.

The baseline certified capacity of the prison is 426 prisoners. However, 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 580¹adult men. The prison has continued with an average of 561 prisoners throughout the reporting year, very similar to last year. Due to the nature of the prison, there was no real change in prisoner numbers as a result of the national early release schemes.

HMP Bristol was first opened in 1883 and is mainly a Victorian prison, built with cells designed for one prisoner but now the majority house 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 and wings. The majority of prisoners share a cell.

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. An average of 153 prisoners a month were released during the year.

At end of July 2025, 52% of prisoners were on remand compared to 39% in the previous year. A total of 63 were foreign national prisoners, slightly lower than the 82 prisoners in the year before. Four prisoners were in the category of imprisonment for public protection (IPP). The percentage of prisoners from a black and minority ethnic background remained at 21% of the prison population, which is slightly higher than in the City of Bristol population (19% in the 2021 census). The youngest prisoners were 18 years old and the oldest was 84 years old. 19% of prisoners were under the age of 26 years, and 3% were over the age of 65 years. It has been estimated by the prison that up to 80% of prisoners could be neurodiverse, although not all are formally diagnosed.

HM Inspectorate of Prisons (HMIP) issued an Urgent Notification (UN) for HMP Bristol on 26 July 2023, following an unannounced inspection and previously issued an Urgent Notification in 2019. In June 2024 HMIP carried out an Independent Review of Progress and reported improvements in most areas except safety. There have been no further HMIP inspections in the last year.

Last year the IMB reported that these improvements were still in their early stages and the situation remained fragile, because of prison staffing levels and the demands of the prison population.

A new prison Governor started at the end of May 2025, replacing the previous Governor who retired.

4

¹ Figures included in this report are local management information. They reflect the prison's position at the time of reporting but may be subject to change following further validation and therefore may not always tally with Official Statistics later published by the Ministry of Justice.

3. Key points

3.1 Main findings

The experience for prisoners at HMP Bristol has improved over the last two years since the Urgent Notification was issued by HMIP in July 2023. The initial improvements made in most areas have been sustained, although the situation remains fragile especially when staff numbers are at minimum levels. On these days prisoners have a reduced regime, less key working and spend longer time in their cells. There has been some investment in the physical estate of the prison. However, more investment is still required to address the environment for prisoners.

Safety

- There were three deaths in custody one apparently self-inflicted and two
 prisoners with existing health conditions who died in local hospitals. This a
 reduction on recent years.
- A significant reduction in self-harm by prisoners has been seen, with 455 incidents compared to 906 incidents in the previous year.
- Violent incidents have also reduced, both for prisoner-on-staff and prisoner-onprisoner, with 232 incidents compared to 340 incidents in the previous year.

Fair and humane treatment

- There is still a lack of in-cell sanitation on B wing (99 prisoners) with no concrete, funded plan to resolve this.
- The average number of prisoners in segregation has increased. Between August 2024 and July 2025, 24 prisoners were discharged to specialist mental health units. A total of 20% were discharged from the segregation unit.
- Prisoners waiting specialist mental health units are nearly always held in segregation prior to transfer.
- The daily regime for prisoners is still inconsistent due to variable staffing levels and additional demands such as constant supervisions and bed watches. As a result, key working is only provided for the most vulnerable prisoners.
- The IMB has observed the handling of some incidents requiring use of force. In these cases, the staff have been professional and acted with due care for the welfare of the prisoner/s and the staff.
- Food for prisoners has improved, with more healthy menus. Over 70% is freshly
 prepared and cooked on site, with this proportion expected to rise to 100% from
 September 2025. HMP Bristol has been recognised by HMPPS as best-in-class in
 providing homemade food.

Health and wellbeing

- The highest number of applications to the IMB are from prisoners with concerns about healthcare and medication issues.
- Waits for specialist mental health units have improved but are often still longer than the national guidance. There is still no specialist support for general mental health issues for the majority of prisoners.
- The prison provides good support for neurodiverse prisoners, with a dedicated neurodiversity lead.
- The healthcare department is still on the first floor, and this limits access for disabled and low mobility prisoners.

Progression and resettlement

- There has been an increase in prisoners undertaking purposeful activity. More prisoners are now attending education and work on a daily basis.
- A new pay policy for prisoners at HMP Bristol was introduced in October 2024 to align with national guidance. Rates of pay increased for attendance at education and work. Prisoners now get paid for five days a week, rather than seven days as before. As a side effect, overall wages for some prisoners have fallen.
- The number of short stay prisoners and the impact of the early release schemes have meant that these prisoners do not always get sufficient support from the resettlement team in advance of release.
- Approximately 20% of prisoners released from HMP Bristol do not have housing on their first night of release.

3.2 Main areas for development

TO THE MINISTER

- What actions are being taken to reduce the number of prisoners on remand and the time that a prisoner is on remand?
- What are the plans to ensure probation services are sufficiently resourced to successfully reintegrate prisoners back into the community, and to reduce reoffending rates?
- What action is the Minister taking to mitigate the impact of the Home Office's proposed changes to the visa system that is likely to adversely affect the recruitment of new prison officers?

TO THE PRISON SERVICE

- What is the timescale to deliver a fully funded programme for the agreed improvements to create in-cell sanitation on B wing.
- When will Launchpad (a digital programme designed to enhance communications by providing prisoners with access to in-cell laptops and a range of digital services) be installed in HMP Bristol, as the IMB believes this will significantly reduce prisoner frustration and free up staff time to deliver an effective regime?
- Are there plans to review the lengths of contract given to prison food providers that would allow for more flexibility in securing best value and quality, and thereby better use of the public purse?

TO THE GOVERNOR

- Please can you ensure that the IMB will consistently receive regular information reports and updates to support our monitoring duties?
- What are the plans and timeframes to ensure all relevant prisoners are supported through regular key working sessions to develop and progress their plans to rehabilitate and plan for their future whilst in HMP Bristol?
- What is the plan to reduce the ongoing incidences of lost and missing property within the prison?

3.3 Response to the previous report

Issue raised	Response given	Current situation (July 2025)		
For the Minister				
What actions are being taken to reduce overcrowding and the physical environment at HMP Bristol?	No plans to reduce capacity at HMP Bristol. 10-year prison capacity strategy published, along with SDS40 to create flexibility. Cells are shared where they are assessed to be of adequate size and condition. Programme of work – fire safety, removal of night sanitation and install toilets, showers on B1 wing, roof, cell windows and CCTV.	The number of prisoners has not changed, and no beneficial impact has been seen with the early national early release schemes. Some progress has been made on the programme of works; new showers have been installed on three wings. Work on the windows and CCTV has not yet started. There is no concrete, funded plan to address the lack of in cell sanitation in B Wing.		
How is the Minister planning to address insufficient support on release to prevent returns to prison for short periods of time and/or recalls for minor licence breaches?	Individuals are only being recalled when they present a risk of harm to the public, and the controls are not enough to keep the public safe. The prison will continue to work with partners to support prisoners for release using all available pathways.	The IMB continues to see prisoners arriving for only a few weeks before they are released. Occasionally prisoners are not in long enough for releasing planning and support to be put in place. Additional capacity has been provided in the community, although prisoners still tell the IMB they are being released homeless.		
Will mental health services be expanded so that all prisoners can have some level of support?	The prison and Oxleas NHS Foundation Trust work closely together to review the service model to meet the needs of prisoners. Clinic appointments are prioritised. Additional support is available through group work led by the psychology team and the neurodiversity manager.	The mental health service focuses on those prisoners with acute and severe mental health problems. Other prisoners continue to inform the IMB that they are not able to access any form of mental health support. Some additional resources have been provided to support early day services, and other service developments are planned.		

For the Prison Service				
Will there be regular support for HMP Bristol to help them retain staff and regular recruitment, so that they do not fall below	The prison service introduced new exit interviews in 2021 and a new retention strategy in 2022 targeting support at priority sites. The prison officer population has stabilised with continuing signs of a more positive position.	At times, the number of staff or duty is at the minimum level and only a basic regime is provided. Staffing numbers have been helped by temporary overtime.		
establishment in future?		The prison is not directly involved in the recruitment of new staff and the IMB is aware that some new staff resigned due to the unexpected type of work involved.		
		The IMB is concerned that the recent Home Office changes to the visa system will directly impact onto the retention and recruitment of prison staff at Bristol.		
When will HMP Bristol have the information technology so that prisoners can make	There are no current plans yet to introduce Launchpad IT at HMP Bristol. Processes have been reviewed to improve the managerial oversight and timeliness of responses.	A feasibility assessment for Launchpad was carried out in June 2025. Currently there is no date for implementation.		
applications online?		Prisoners regularly raise issues with the IMB about delays and lack of responses to applications made.		
Will the prison get any additional resources and support to tackle	Number of resources in place already to reduce demand along with consideration of new and innovate ways to reduce demand for illicit items.	Additional overhead netting has been installed at various places across the site.		
the prevalence of illicit items?		New windows are planned for 2027.		
	Through the workforce delivery project, new operational models with optimum across all areas including search and security are being developed for approval in April 2025 with implementation in 2026/27	Work continues to support prisoners to reduce demand for illicit items and to help prisoners in debt.		
		New operational models for the workforce have not yet happened.		

For the Governor				
Please can the IMB consistently receive	No formal response	Information has been received when requested.		
regular and timely reports and information		Many reports have been inconsistent throughout the year.		
Are you satisfied that the healthcare contract with Oxleas NHS Foundation Trust meets the needs of prisoners?	No formal response	Healthcare issues remain the highest category of applications from prisoners to the IMB		
Will key working be available for all prisoners in the coming year?	No formal response	There has been an increased focus on the number and quality of key working sessions, although the majority of prisoners have not received key working session.		

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

All prisoners entering and leaving HMP Bristol go through the reception unit. The staff in the unit are supported by reception orderlies, who provide peer mentoring support to the new arrivals. The number of new arrivals can be up to 20 prisoners a day plus returns from court cases, hospital visits and prison transfers. Arrivals now come from a wider area, due to capacity pressures in the prison system and the courts. A total of 23% of prisoners arrive after 6pm, meaning they may get limited support for their first night.

All arrivals, including returns from court and external hospital visits, undergo a full search plus are scanned in the body scanner. Any prisoners found with illicit items are offered an amnesty. If they scan positive and refuse the amnesty, they are taken directly to the segregation unit. When the IMB speaks with these prisoners in segregation, they raise concerns about delays to their induction and lack of certain medications (for safety reasons). Once they no longer scan positive, they move to a wing and induction takes place.

A comprehensive induction takes place within the first two days. The average wait for induction has decreased from three days in July 2024 to one day in July 2025. A small minority of prisoners refuse induction.

New arrivals requiring detoxification from drugs or alcohol go to a separate detox wing. These prisoners complete their induction and move onto the general wings when they are ready. The IMB continues to hear positive feedback from prisoners about this wing.

4.2 Suicide and self-harm, deaths in custody

The number of deaths in custody has continued to reduce at HMP Bristol. In this reporting year there were three deaths in custody. One death was in prison and was apparently self-inflicted, and two prisoners died in local hospitals with an underlying health condition. All deaths in custody are investigated by the Prison and Probation Ombudsman (PPO). The PPO has reported on the two deaths in custody from the reporting year 2023/24. There have been no prisoners who have been supported to die in their preferred place of care in this reporting year.

Incidents of self-harm by prisoners has reduced significantly in this reporting year. 455 incidents were recorded compared to 906 incidents in the previous year. The prison has taken a range of actions to achieve this including: Talk Clubs on the wings (trained prisoners on each wing host meetings where prisoners can talk about their mental health and wellbeing in the absence of staff), Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), floor walking staff to support prisoners, red band prisoners providing distraction packs to prisoners. Alongside these actions, there are weekly safety incident meetings (SIM) and safety action meeting (SAM) to actively support prisoners who have self-harmed or at risk of self-harming. During the year the prison replaced wet razors with electric shavers. It appears that most self-harm incidents are related to prisoners' frustrations in getting issues resolved.

The number of dedicated specialist cells for constant supervision of those prisoners at the highest level of risk has increased to three. Typically, at least one prisoner is on constant supervision each day. 78 prisoners in the year had constant supervision (with a dedicated

officer 24 hours a day). The IMB speaks with these prisoners, and they are generally positive about the extra care and intervention they receive.

Prisoners at risk of harm are identified and assessment, care in custody and teamwork (ACCT) plans are used. This year 742 ACCTs were opened compared to 783 in the previous year. All prisoners are regularly reviewed in line with their plan, and the prison has a comprehensive audit and review process. During IMB visits members review a sample of these plans to monitor that they are up to date and that meaningful conversations are logged. No significant issues have been observed during the year. In July 2025, there were an average of 27 prisoners on an ACCT each day. Two years ago, there were over 40 prisoners a day on ACCTs.

4.3 Violence and violence reduction, self-isolation

Incidences of violence have continued to fall at HMP Bristol. This reporting year there were a total of 232 incidents compared to 340 incidents in the previous year. 70 were on violence on staff (119 in the previous year) and 162 were prisoner on prisoner (211 in the previous year). 14 incidents were reported as serious.

The national response team was requested seven times in the year to assist prison staff managing serious incidents (which was a reduction of 44% on last year's 11 requests). These incidents included a prisoner on a roof, prisoners who barricaded themselves in a cell, prisoners on the netting between the landings on a wing, and a lost kitchen knife. Those incidents that the IMB observed were managed well.

In the Board's view, this continued reduction of violence may be attributable in part to the focus that the Governor and the prison leadership team have had on increasing purposeful activities for prisoners (see section 7). Regular cell searches reduce the prevalence of illicit items.

Vulnerable prisoners are located in a dedicated wing, which is the largest wing in the prison. This wing makes the highest number of applications across all categories to the IMB, which may reflect the type of prisoners on this wing combined with not all having key working sessions.

Prison staff are aware of the different local community gang members in prison, and they manage cell allocations to reduce the possibility of conflict between rival gangs. The layout of the wings in HMP Bristol and the volume of different gang members in prison presents challenges to always achieve this. It is not known how many of the violent incidents are directly related to gang rivalries.

4.4 Use of force

The prison regularly reviews all use of force incidents. The IMB is invited to observe incidents to monitor and members found that they are proportionate, meet good practice standards and points of learning are identified. Use of force was used on 737 occasions which is a slight increase from the previous year when it was used on 707 times. The number of incidents recorded on body worn cameras during this reporting year were 658. This represents 79% of incidents having body worn camera evidence and is an increase from 74% in the last reporting year.

PAVA spray has not been used in the reporting year.

4.5 Preventing illicit items

The Board has observed that illicit items in the prison contribute to levels of violence, prisoners being under the influence, self-harm, bullying and debt.

The prison continues to have issues with illicit items, which includes drugs, mobile phones, prisoner brewed alcohol and homemade weapons. There is scanning of all staff, visitors, new prisoners, post and deliveries in place, yet these items still enter the prison. Additional overhead netting has been installed in all areas close to the prison walls. Cell windows are due to be replaced in the future, which will further enhance security especially from drones.

Prisoners have told IMB members that they take illicit drugs and alcohol as a coping mechanism when they do not have prescribed medication. The illicit drugs are mainly psychoactive substances and inhaled through vapes.

The IMB understands that a new vape pen is being introduced for prisoners at HMP Bristol in October 2025 as part of a national plan. Based on early use in other prisons, this new device should minimise the opportunity for the inhalation of illicit drugs and prevent the ability to start fires.

Regular cell searching takes place, and any prisoners with illicit items are dealt with through the prison adjudication system. Cell searches observed by the IMB were handled in a professional way by the staff with the prisoners and their property. The IMB has also attended a few adjudications during the year and has no concerns about how they were run.

In July 2025, a knife went missing in the prison kitchen, this resulted in a complete lock down for 48 hours and a detailed cell by cell search. The knife was eventually found hidden in the kitchen. The cell searches revealed a quantity of illicit items, which all resulted in adjudications.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

Bristol prison is mainly a Victorian prison built over 150 years ago, with two additional wing blocks built in the 1960s. The typical situation is that cells are occupied by two prisoners in cells originally designed for one. Single occupancy is only for exceptional cases. The prison Governor has assured the IMB that the double occupancy of these cells is consistent with the national rules in the Prison Service instructions.

Nearly all prisoners spend most of their time in their cell unless at work or education. They eat their meals in the cells, which only have one table fixed to the wall and a chair. Where there is a toilet in the cell, this may or may not be screened off by a curtain.

B wing (built in the 1960s) which holds 99 prisoners still has no in-cell sanitation and there is no concrete, funded plan to resolve this. In the meantime, prisoners have to continue to press their cell call bell to gain access to the toilet via remote monitoring when the prison is in patrol state (this is the 12 hours overnight and during the day when prisoners are not undertaking activities out of their cell). Prisoners tell us this can take some time and on occasions they resort to using bottles and may pour urine out of the windows.

Generally, the prison is clean and tidy. Prisoners carry out a regular programme of painting cells to refresh them. The grounds of the prison are kept clean and maintained by a working party of prisoners, who have told the IMB that they enjoy the work outdoors. There have been issues with pest control, particularly rats, pigeons and cockroaches which the prison has addressed by employing a specialist company that visits regularly.

During the year, there was a focussed programme by the prison to clean and refresh wings and cells. If any prisoner required any additional kit, it is understood by the Board that this was supplied. Prisoners sometimes tell the IMB about shortages of clothing or supplies; however, when checking with staff or the central equipment store, there were supplies available.

Clothing and supplies to prisoners appear to be sufficient, each wing has general supplies of toiletries which are constantly topped up. All the prison laundry is normally washed and dried at HMP Leyhill. This laundry was out of action for over a month during the year. Wing washing machines were used as a contingency in addition to a temporary laundry in the north of the country, which had a longer turnaround time.

The charity 'Food Behind Bars' has been working with the prison since March 2025 to improve nutritional content and create healthy food options. Currently 73% of food is homemade, which will increase to 100% in September 2025 with the launch of new menus containing more fresh fruit and vegetables. The IMB has been informed that HMP Bristol has the highest level of homemade food of all the prisons in the country and now other prisons are visiting to learn from HMP Bristol. Prisoners are supplied with one hot meal, two cold meals and five hot drinks a day. The food budget has increased to £3.20 per prisoner per day from April 2025. Some prisoners tell the IMB that they would still prefer less healthy fried foods.

In the Board's observations, special medical or religious diets are catered for, and there is always a halal food option at every mealtime. The IMB observes meal service during our visits and has seen an improvement in the quality and quantity of food. The level of supervision of serveries at mealtimes has been variable on the wings, and the prison is addressing this.

The catering manager has told the IMB that he is tied to a national contract for food supplies, and he knows that he could buy better locally. The national contract has another eight years to run.

Prisoners can use their funds to buy items from their canteen (snacks, toiletries, vapes etc.) provided by an external company, this appears to work well. New arrivals have an initial supply provided.

Recently, prisoners have complained to the IMB about canteen price increases, which together with the lower wages, means that the prisoners stand of living is decreasing.

5.2 Segregation

The prison has ten cells in the segregation unit (known as care and separation unit or CSU in most other prisons). Each week an IMB member visits the unit and speaks with each prisoner, plus any other prisoners segregated on the general wings. Issues raised by the prisoners are mainly directly related to being in segregation such as property, phone calls and progression out of segregation.

The average numbers of prisoners in segregation increased by 60% from 5 in July 2024 to 8 in July this year.

Prisoners with serious mental health issues are sometimes located on the segregation unit, whilst they are waiting assessment and then transfer to a specialist mental health unit. This places an additional strain on staff in the unit to manage as they are not trained mental health professionals. Prisoners in the nearby cells also complain about the impact on them from these prisoners. The IMB remains concerned about the time it takes for a prisoner to be accepted and transferred to a specialist unit. Transfers should take place within 28 days. This is not often achieved due to specialist capacity across the country with 75% accepted waiting around three months to transfer. From April to June 2025, eight prisoners waited over 30 days to be transferred to a specialist unit

Whilst waiting to transfer prisoners may remain in the segregation unit for their safety and that of other prisoners and staff. For a prisoner experiencing acute and severe mental health issues, the segregation unit whilst being a place of safety it is not always the best environment for their ongoing mental health care. Some referred prisoners are deemed not eligible for specialist treatment following assessment by the provider. They have to be managed in HMP Bristol whilst appeals against the assessment are made or they are referred.

Special accommodation has been used once this year to manage a non-compliant prisoner with behavioural challenges for four hours. The IMB was informed by the Governor at the time. This is the first time in a number of years that special accommodation has been used.

The staff in the segregation are some of the most experienced officers in the prison, and the IMB has found them to be helpful, caring and constructive on our visits to segregation.

5.3 Staff and prisoner relationships, keyworkers

Relationships between staff and prisoners appear generally good most of the time. The IMB has witnessed staff handling difficult situations with violent or vulnerable prisoners with a high degree of professionalism. Effort is made to explain what is happening and why, with due care for both the prisoners and the staff involved.

The Governor holds a weekly Prison Council meeting, where every wing is represented by a prisoner or 'red band' (trusted prisoners who fulfil a variety of roles to support the prison). Every endeavour is made to include specific cohorts of prisoners e.g. those under 26 years. The meeting is consultative and a forum for open two-way sharing.

Staff numbers have fallen in the last year from 179.5 to 156.5, following the peak recruitment activity after the last UN in 2023. That said, the headcount is now in line with the official benchmark of 156.0, so in principle the prison is properly resourced according to HMPPS guidelines.

The surge of recruitment in the past two years has brought some challenges as well as benefits. The proportion of staff with fewer than two years' service rose to 51% in July 2024 but has since fallen to 43% at the end of the current reporting year. This high percentage presents some challenges in terms of relatively inexperienced staff on the wings, albeit the situation is improving. It also means that there is typically a high number of staff absent for training (10.5), which reduces the number available for duty. This problem is compounded by the large number of officers on temporary promotion (15.0) which again reduces the available staff, although we understand that permission has recently been granted to make some of the promotions permanent, so this number should reduce.

Despite these challenges, the prison has managed to run a full regime for most of the year, with only one day where the full regime was not run. There were, however, days when parts of the regime were reduced, and some activities were cancelled. In these situations, priority was given to education, work and healthcare.

The Board is aware that the Home Office's proposed changes to visa system could adversely affect recruitment and retention of prison staff recruited from outside of the UK. If this happens and UK recruitment is not increased, then the ability for the prison to deliver a full regime will be at risk again and prisoners will go back to spending more time in cell.

In addition to a new Governor who started in May 2025, there has been some movement of staff in the senior leadership team. The Board is aware that the prison is struggling to recruit to the role of Custodial Manager on a substantive basis and has had to fill current vacancies through temporary promotion. If the prison is unable to fill all of these middle management posts, this could impact on the day to day running of the prison.

Keywork is an important way that staff can work with prisoners. There has been considerable focus by the senior leadership team to increase the numbers of prisoners having keywork sessions and improve the quality of the session, through the use of a toolkit and pocket cards, so that meaningful actions are agreed and followed up. However, limited resources means that keywork is targeted at high-risk prisoners only. While staff are assigned named individuals for keywork, in practice, meetings with the prisoner are organised at short notice and with whichever member of staff happens to be available. At times not enough dedicated time is allocated to these meetings which means that they are done in staff break times, and often with insufficient preparation and too little time to follow up on actions and to write up a detailed report.

Previously, the IMB has raised the lack of information technology for prisoners as a key issue both for prisoners and staff. The Board now understand that HMP Bristol will be getting Launchpad, a personal tablet-based IT system that allows prisoners to efficiently manage their own applications and requests rather than relying on inefficient paper systems. This system is already in use in some other prisons. However, there is no agreed funding in place yet for Launchpad at Bristol. The IMB believes that is probably

the one of the biggest improvements that could be made in HMP Bristol to improve the day-to-day life of prisoners and staff. It would improve internal communications, free up staff time and reduce frustrations experienced by prisoners. Many of the day-to-day incidents that take place in the prison are as a result of prisoner frustrations with basic issues.

5.4 Equality and diversity

The IMB has seen that the Governor and staff actively promote equality, diversity and inclusion with the prisoner population. There is regular monitoring and reporting in place to ensure that no particular prisoner or group of prisoners with a protected characteristic are adversely affected by actions within the prison.

Over the year, the IMB received nine applications related to equality (one of the lowest numbers for a category and the same number as the previous year); there was no consistent theme to any of these.

76 discrimination incident reporting forms (DIRFs) were submitted by prisoners to the prison in the year. All are investigated by the prison equality and diversity lead, and samples are peer reviewed by a group of prisoners. In July 2025, of the seven submitted, none were upheld. As in the previous year, some prisoners tell the IMB that they do not always submit a DIRF or a complaint as they have little confidence that their paper form will actually reach senior staff. When the IMB asks prisoners for specific examples, they often quote frustrations and experiences that any prisoner could have and therefore the perception by the prisoner is maybe of discrimination, when in fact it seems to be more about general life in prison.

Throughout the year, there have been several transgender prisoners. Regular reviews are held with these prisoners recognising the specific challenges they and the prison have managing prisoners who identify as female in male prison.

In previous years, the IMB has raised concerns about location of the healthcare department. A stair climber (a motorised chair able to crawl upstairs) has been bought and has been seen in use. However, this is not suitable for all prisoners with disability or mobility issues. If these prisoners cannot be managed in a wing treatment room, they must wait longer until they can be transported to and from another prison for any treatment.

5.5 Faith and pastoral support

The multi-faith team provides pastoral care for any prisoner. The team also visits every prisoner in segregation daily and actively support prisoners who have had a bereavement or other domestic/family issues.

All religions and beliefs are supported. Specific religious festivals were well managed, including Christmas and Ramadan, when special meals are provided. Prisoners tell the IMB that they value this time. There were a couple of occasions when religious services were cancelled due to lack of prison staff to escort and supervise prisoners. The IMB understands that this has now been resolved, as religious services are now prioritised.

During the year there has been an issue with the provision of Roman Catholic services for a few months. This was due to the lack of visiting Ministers. The head of the multi-faith team has met with the Bishop, and a new rota has been agreed and services, including Mass, have recommenced.

There have been challenges with keeping the multi-faith team fully staffed.

5.6 Incentives schemes

The prison has an incentives scheme in place, to encourage and reward good behaviour through earned privileges. There are four levels ranging from basic (the lowest level of privileges), standard, enhanced and super enhanced (the highest level). Each level enables the prisoner to earn some additional benefits through good behaviour. All prisoners start on standard and therefore can move up or down the incentive scheme.

At the end of July 2025 there were 26 prisoners on basic and 77 on super enhanced. All prisoners on basic are regularly reviewed. The IMB understands that this current incentive scheme is likely to be reviewed again as prisoners do not feel there is sufficient differentiation between the levels.

5.7 Complaints

The prison received 1,638 complaints from prisoners, which was a 24% reduction compared to the previous year (2,158 complaints).

The top three categories of complaint were:

- Wing issues
- Cell conditions and equipment
- Incentives scheme

These top issues for complaints are different to the top issues raised with the IMB, which are detailed in section 8.

5.8 Property

The prison has introduced clinics held on each wing every few weeks where prisoners can approach the property team staff and raise any issues with lost or outstanding property. The IMB has observed wing clinics in action, and they do help to address prisoners' concerns. The clinics are additional to the work that wing staff also put into trying to help prisoners be reunited with their property.

Compensation paid by the prison for lost property decreased by 24% from £9,865 last year to £7,542 this year.

Despite these improvements, prisoners' property is the second highest issue raised with the IMB, as last year. Property issues following a transfer from another prison has improved, but lost and missing property within the prison has increased, typically after a cell transfers.

6. Health and wellbeing

6.1 Healthcare general

Healthcare issues were the category with the highest number of applications to the IMB and had increased during the year (81 compared with 71 last year). Issues fall into three main categories: access to physical healthcare; mental health; and medications.

The current healthcare provider is now in its third of seven contractual years. 2024/25 has been challenging, with long term absence amongst the senior leadership team, which is ongoing. Team leads have shown strong resilience in running the services under the leadership of the service manager. Service performance overall has remained steady whilst new initiatives have been tried to improve efficiency and effectiveness within the resources available.

Service efficiency has improved by setting up/re-opening wing based clinical treatment rooms. This has reduced the workload of staff escort and helped improve attendance rates. However, more appointments could be delivered if escort staff numbers were reliable

Physiotherapy, optometry, audiology, dentistry, and podiatry services are provided within the healthcare contract. Prisoner feedback to the Board was that the dentist seemed too keen to extract teeth. This was reviewed and extraction numbers were in line with other prisons. There has been a change in dentist who has shown flexibility in reaching prisoners unable to attend the clinic room. The optician has increased clinic numbers to offset those cancelled by the service helping waiting times. Waiting times for physiotherapy increased towards the end of the reporting year whilst the dental wait times reduced.

Vaccination programmes are run for eligible prisoners, notably respiratory syncytial virus (RSV) vaccines were added to the programme in winter 2024 and will be offered ready for winter 2025.

New initiatives in this reporting year include:

- 'Sorry we missed you' cards, letting a prisoner know they missed a cell visit,
- Use of nasal naloxone (a medication that can reverse the effects of opioids in overdose or withdrawal) by officers,
- Planned care nurse role focussing on e.g. leg ulcer management,
- Proactive communication about medicine changes,
- Use of self-help measures by the physio team, creating more urgent care capacity.

6.2 Physical healthcare

The primary care nursing team sees all prisoners on arrival in reception and at their release or transfer; manage the ongoing needs of those with a long-term condition and deal with urgent primary care needs. A member of the team also responds to any medical emergency incidents, known as code red or blue calls.

Prisoners are screened on arrival and seven days later (secondary screening). Arrival screening performance has remained consistently high throughout the reporting year. There has been an improvement in secondary screening performance to 86% of new admissions in July 2025 up from 28% in August 2024.

There remains scope to improve the number of prisoners seen by a healthcare professional prior to release or transfer. Failure to plan for a prisoner's release or transfer

means they may not have a prescription or their medicines which may have consequences for community services or the receiving prison, and the prisoner.

The healthcare team has a dedicated medicines management team who dispense routine prescribed medicines on each wing to the prisoners under the monitoring of an officer. Around 430 prisoners are on regular medication, which is around 75% of prisoners.

As at the end of the reporting year, 57 prisoners were waiting to have a routine GP appointment the longest wait being 43 days. Urgent appointments are normally seen within one day.

Within the Prison Service bowel cancer screening is provided for those aged 54-75 as per the community model. PSA testing for prostate cancer is undertaken according to reported symptoms. The two-week wait for suspect cancer referrals applies to prisoners.

6.3 Mental health

The number of referrals to the mental health team is approximately 140 per month, which is a challenging workload. Those with low level mental health needs can be supported on the wings by Listeners, Talk Clubs etc. Prisoners with complex mental health referred for community specialist mental health assessment and inpatient service average 47 per month. See section 5.2.

HMP Bristol has a neurodiversity support manager (NSM). The neurodiverse population sits at 50-60% of the overall prison population (compared to 12% in the general population). All those with neurodiversity are identified to staff via a hidden disability alert, which sets out their individual adjustments without disclosing their actual condition. Staff have been trained in strategies to support neurodiverse prisoners. The NSM provides training/information to other groups such as the IMB. HMP Bristol is experiencing an increase of prisoners with an acquired brain injury alongside high numbers with attention deficit hyperactivity disorder (ADHD) and autism.

There is currently a sensory space on one wing (with two further sensory spaces are planned in workshops) where prisoners benefit from a lower stimulus environment. The NSM has a team comprising three specific red bands and two wing peer mentors. This team meets weekly to discuss patterns of need, challenges and success stories from supporting at least 130 new prisoners whilst undertaking 80 regular check ins for those on their caseload each month. The NSM specifically supports those with a higher need who may on an ACCT or challenge, support and intervention plan (CSIP, used to support and manage prisoners who pose an increased risk of violence) and who have complex needs.

Access to ADHD medication by the prison is an issue for newly diagnosed and those who have had a break in their prescription due to supply issues or waiting for a consultation. The Board has been told by prison medical staff (Psychiatrists and GPs) that they are able to diagnose and prescribe for new ADHD cases but are not allowed to do this as this would provide a better service and waiting time than is available in the community. The IMB has seen prisoners very disturbed when they do not have their medication. In these cases, there are no alternatives provided to prisoners.

6.4 Social care

Personal care (which is help with personal hygiene, washing and dressing) is provided by a specialist contractor via Bristol City Council. The contract provider changed during the year. There were 10 prisoners receiving social care in July 2025. The IMB hears from prisoners and staff that there is a good relationship with prisoners and the care provider.

These prisoners will also have other prisoners who act as informal carers, known as buddies, who help with their care needs in the intervals between carers' visits. This system relies on goodwill between prisoners and reflects under-resourcing.

6.5 Time out of cell, regime

Overall, the number of staff on duty has a direct impact on the daily regime provided to prisoners. This year there has only been one full day where the regime was totally cancelled due to lack of staff. There were, however, days when parts of the regime were reduced, and some activities were cancelled. In these situations, priority was given to education, work and healthcare.

The IMB regularly receives comments from prisoners about their lack of association time out of their cells due to staffing. G wing, as the most 'stable prisoner group' is the first to lose staff to cover other areas when staffing numbers are low, and prisoners report that this impacts their regime.

6.6 Drug and alcohol rehabilitation

An incentivised substance free living (ISFL) unit was created within existing resources, which opened in May 2025. Prisoners applied for one of the nine spaces, undergo weekly drug tests, receive support with education and work opportunities, housing and Change, Grow, Live (CGL) services in preparation for their release. A small team of staff were recruited from within the existing establishment to run the unit. Prisoners living on the ISFL unit have access to laptops to support their online learning and participation in therapeutic groups. The IMB has heard feedback from prisoners that the unit is not yet meeting the full expectations of the original concept. It is hoped that a planned relocation will address this.

The substance misuse service provider, CGL, has experienced challenges with resourcing but is now able to offer some regular wing pop-up sessions in addition to typical contractual services i.e. outreach. The CGL caseload fluctuates month by month but is consistently above 230 prisoner; that is at least 40% of HMP Bristol's population.

Drugs, notably psychoactive substances and cannabis, remain readily available in HMP Bristol, and prisoners are regularly reported to be under the influence. Naloxone is available throughout the prison and upon release to prisoners felt to be vulnerable to using again. In this situation, community services are informed. Information is shared between healthcare and HMP Bristol about those under the influence and regular reviews focus on partnership working to promote recovery for prolific users.

Prisoners undergo mandatory drug testing and the number who test positive is higher than target performance level. Once released, there is good uptake of HMP Bristol prisoners in recovery to access ongoing recovery support through community-based services. Uptake is improving towards the national average.

6.7 Soft skills

As well as education and work opportunities, prisoners can participate in other enrichment activities. Young prisoners can participate in the Duke of Edinburgh Award Scheme. Other prisoners play musical instruments with support from the Changing Tunes charity.

7. Progression and resettlement

Overall, prisoners engaged in purposeful activity (e.g. education and work) increased from 62% in July 2024 to 68% in July 2025.

7.1 Education and library

Educational opportunities at the prison are good, if they are taken up. There is currently an average attendance of 67% in education and there is a focused effort to improve that through more effective allocations. There are small number of prisoners (circa 20 to 30) who refuse to engage with education or work. A dedicated custodial manager for regime is now working consistently across the week Monday to Friday, and this has improved engagement by both staff and prisoners, alongside the new pay policy introduced in October 2024.

A range of educational courses including maths and English are provided, many leading to accredited qualifications. The IMB hears positive feedback from prisoners about their education classes. Every month there is an award for 'learner of the month', which is attended by the prisoner's family and is well received. This year there were fewer cancellations of classes due to lack of education staff or prison staff.

Since the UN was issued in 2023, there has been an improvement in the quality and quantity of education provision, and this been acknowledged by OFSTED. The education and skills provider is changing in October 2025 and changes to courses on offer are planned to help further improve attendance.

From April 2025 there was a budget cut of 50% to the dynamic purchasing system for additional education and training opportunities outside of the main education contract. This has forced prison staff to engage more widely with external charitable providers and to redesign and change opportunities on offer, so that the maximum number of prisoners can benefit from these opportunities.

The library is an excellent resource within the purpose-built education centre. Unfortunately, it continues to be little used, often as a result of low staffing numbers which make it challenging to reliably escort prisoners to the centre. Small book collections are established on the wings which offer some reading opportunities and prisoners can request books from the library to be delivered to the wing.

7.2 Vocational training, work

There are ten different workshops providing a range of vocational training opportunities and activities for prisoners.

Currently around 74% of available places in the workshops are allocated. The workshops are well attended but can be vulnerable to short notice cancellations due to staff shortages and illness.

Providing timely education or workshop induction for all new arrivals remains an issue, with currently only 50 induction places available each week; this is insufficient to meet the demand. The prison is aiming to ensure that all prisoners have this induction and are able to attend work and education. Prisoners tell the IMB that sometimes there are delays starting work or education and that they have little to occupy themselves during this time.

7.3 Offender management, progression

The offender management unit (OMU) team at HMP Bristol has a heavy workload. They process over 150 prisoner releases each month on average but remain approachable

and helpful to the IMB. They have faced additional challenges this year with the additional processing required by the early release schemes and also with additional recalls.

The IMB has seen a small increase in applications from prisoners concerning sentence management and release dates.

OMU clinics have been implemented across all wings and operate every two weeks, and the IMB understands that they are well received.

The employment hub has engaged positively with prisoners and established productive relationships with a number of external companies who offer employment to prison leavers. Bristol performs strongly compared with its comparator prisons in securing prisoner employment six weeks after release although the figure for positive outcomes, as opposed to neutral or negative outcomes, remains below 10%.

Work is currently underway to refocus education and skills training opportunities inside the prison to more appropriately match demand from prisoners and employment opportunities outside.

This year has seen the opening of the Keys Café, an innovative coffee shop initiative organised through the Restore Trust in a previously disused prison building. The café serves the public with food and drinks and employs two former prisoners at a time for two months, providing valuable support in reintegrating them into the community.

7.4 Family contact

The prison appears to appreciate the importance of family contact for prisoners at HMP Bristol, subject to any public protection conditions.

Nearly every cell has an in-cell telephone, except segregation. The IMB often hears that the time to approval of telephone numbers can take a lot longer than prisoners would like. The prison has been working to resolve this issue, and the average wait has reduced from 2.5 days in May 2025 to 1.8 in July 2025. There are opportunities for all prisoners to have visits, and the IMB is no longer hearing about issues with the national booking service, unlike previous years.

The visits hall is well run by the prison and a team of red bands with the Prison Advice and Care Trust (PACT) and provides pleasant facilities for families and friends. The red bands run the 'tuck shop' and any profit is used to improve the visit hall experience. Specific facilities like the soft play centre cater for children and are well used on dedicated family days. Additional visits are facilitated for specific times such as Father's Day or school holidays.

Through the 'Every Family' charity, HMP Bristol continues to offer some prisoners the opportunity to meet with their family inside the prison to prepare and share a meal together.

7.5 Resettlement planning

The prison has had staffing challenges in the pre-release team. They have not been able to meet with all prisoners after arrival and before release. As few as 20% of prisoners have been seen within the required five-day period. Improvements have been made, and this has risen to 70% but prisoners still remain unseen before release. This is particularly evident for prisoners on short sentences under 12 weeks or recalls who often enter and leave prison without any engagement with the prison resettlement team.

With prisoners now coming from a wider area, many do not have any connection with the local community of Bristol and releases back to their home area can take longer to organise.

Prisoners on remand do not get a formal resettlement plan. Release direct from prison or the court can be sudden and unexpected, and support is limited to resources at the PACT centre on the day of release, should they choose or be able to access it.

In the period April to June 2025, 20% of prisoners were released with no accommodation on their first night.

Prisoners do tell the IMB that they have concerns about the lack of preparation for release especially when they know that they have no accommodation or employment sorted.

Once released, prisoners are able to go to the PACT centre (across the car park outside the prison) to meet with support charities and the Department for Work and Pensions who can help with applications for Universal Credit which cannot be applied for while in prison. The PACT centre can also help with arrangements for healthcare, accommodation and banking facilities. They have limited supplies of clothes that can be given out and vouchers that can be exchanged at local food banks.

HMP Bristol appears to have better rates of employment for released and supervised exprisoners after six weeks and six months than most other similar prisons.

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	9
Number of Board members at the end of the reporting period	12
Total number of visits to the establishment	327

The number of visits made increased by 25% to the previous reporting year. This rise was due to additional members recruited to the Board.

Members of the Bristol IMB also undertook a visit to HMP Cardiff and to HMP Exeter, which are both similar prisons, to compare experiences for prisoners.

Applications received by the IMB

The total number of applications (prisoners' written representations to the IMB) received was 342, largely unchanged from last year (340). The detailed breakdown for the categories received are shown in the table overleaf.

Overall, concerns about healthcare remained the largest category, as has been the case for several years.

Significant improvements (i.e. reductions in applications) were seen for:

- Staff/prisoner concerns (J) which were down by 38%.
- Handling of letters, visits, telephones etc (E1) were down by 28%

Significant increases in applications were seen for:

- Concerns about finances, including pay, private monies etc (E2) were up by 108%
- Lost property within the establishment e.g. during cell moves (H1) were up by 58%

Applications to the IMB

The Applications received in the year are summarised in the table below:

Code	Subject	Prior reporting year	Current reporting year	Diff	% vs Prior Year
Α	Accommodation, including laundry, clothing, ablutions	15	16	+1	+7%
В	Discipline, including adjudications, incentives scheme, sanctions	10	3	-7	-70%
С	Equality	9	9	0	0%
D	Purposeful activity, including education, work, training, time out of cell	13	19	+6	+46%
E1	Letters, visits, telephones, public protection, restrictions	36	26	-10	-28%
E2	Finance, including pay, private monies, spends	12	25	+13	+108%
F	Food and kitchens	14	14	0	0%
G	Health, including physical, mental, social care	71	81	+10	+14%
H1	Property within the establishment	19	30	+11	+58%%
H2	Property during transfer or in another facility	29	20	-9	-31%
H3	Canteen facility list, catalogues	15	14	-1	-7%
I	Sentence management, incl. home detention curfew, release on temporary licence, parole, release dates, recategorisation	39	40	+1	+3%
J	Staff/prisoner concerns, including bullying	48	30	-18	-38%
K	Transfers	6	3	-3	-50%
L	Miscellaneous	6	10	+4	+67%
	Total number of applications	342	340	-2	-1%

Annex A

Service providers

Education	Weston College	
Healthcare – primary care, substance misuse, mental health and administration	Oxleas NHS Foundation Trust	
Healthcare – pharmacy, medicines management	Oxleas Pharmacy Services Ltd	
Healthcare - psychological substance misuse	Change Grow Live	
Healthcare – general practice	DrPA Secure	
Healthcare – dentistry	Time For Teeth	
Healthcare – optician	The Prisons Optician Trust	
Healthcare – physiotherapy, podiatry	Total Planned Care	
Maintenance	Government Facilities Services Limited	
Resettlement support	The Probation Service (CRS)	
Social Care	Agincare (till April 2025)	
	Eleanor Healthgroup (from April 2025)	
Escort contractor	Serco	



This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at https://www.gov.uk/government/publications

Any enquiries regarding this publication should be sent to us at imb@justice.gov.uk