



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

**For reporting year
1 May 2024 to 30 April 2025**

Published January 2026



Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Key points	5
 Evidence sections 4 – 7	
4. Safety	8
5. Fair and humane treatment	12
6. Health and wellbeing	14
7. Progression and resettlement	18
 The work of the IMB	
Board statistics	22
Applications to the IMB	22

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Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

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

2. Description of the establishment

HMP/YOI Stoke Heath, in Market Drayton, Shropshire, is a closed, category C (for prisoners who cannot be trusted in an open prison but are unlikely to escape) adult and young adult training and resettlement prison for men. It holds adults aged 21 years and over and sentenced young adults aged 18 to 21. 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 782¹ adult men. The prison is operating slightly below its maximum capacity, as 20 cells are being refurbished.

The prison has a variety of accommodation, much of it added over the years to the older original prison, which was built in the early 1960s. There are eight residential wings, which include one designated for drug treatment, one for induction and longer-term prisoners, and one as a progression unit for prisoners who are on the enhanced level of the prison's incentives scheme and may move on to category D status, which means they are eligible for transfer to an open prison.

Each wing has in-cell sanitation and a shower block. Single-cell accommodation is provided for 430 prisoners, and two-prisoner, or dormitory accommodation, for 336 prisoners. The segregation and reintegration unit (SRU) has 16 cells, plus an additional two holding cells.

The prison remit is to prepare men for release, offering them a basic education in maths and English, as well as the skills for future employment.

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

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

The makeup of the prison population can vary across the year. The following figures were for April 2025:

- Approximately a quarter of prisoners have been recalled, having breached the terms of their licence whilst on probation.
- About 20% of the population is serving less than six months.
- Longer-term prisoners, including those on life sentences and IPP prisoners (imprisoned for public protection) make up 10% of the population.
- There are around 47 young offenders (young adults aged 18 to 21), who share the same accommodation as adult prisoners.

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

Safety

- Drugs are still readily available inside the prison, with many reports of prisoners being under the influence (UTI). However, the prison seems to have robust policies in place and has installed new technology to help combat the drugs problem.
- The Board is concerned about the number of deaths in the prison, which includes four over the reporting year (following three reported in the previous year).
- There has been an increase in the instances of serious self-harm. Some prisoners are transferred from other prisons with a history of serious self-harm.
- The number of assaults has increased by 10%, to 157, and the use of force on prisoners is 7% higher than last year.

Fair and humane treatment

- Living space is cramped, especially for two people in a cell, with a lack of privacy for personal hygiene.
- The Board is concerned that prisoners have repeatedly reported difficulties contacting their prison offender managers (POMS) about transfer applications, sentence plans, progression and preparing for release.
- From the Board's observations, food is inadequate and lacks imagination and there is too much waste.
- Accommodation has been showing signs of ageing for some years, especially the flooring in healthcare and the kitchen, and there is damp on E wing.
- The largest area of complaint, again, is prisoners' property, particularly whilst being transferred from prison to prison.

Health and wellbeing

- Healthcare is underfunded in some areas and struggles to recruit good staff, relying on agency staff and locums to fill the gaps.
- In the Board's view, the new secondary mental health contract is not providing the therapy needed.
- From the Board's observations, healthcare provision is generally good, but waiting times for a dental appointment is 16 weeks.
- There is some excellent work from Forward Trust (a charity providing services to help prisoners with substance misuse) and the health and wellbeing champion (HAWC) initiative, which helps prisoners lead healthier lives.

Progression and resettlement

- The prison still seems to under-performs in its role to train and resettle prisoners back into the community.
- Education and training are showing a slow improvement.
- The Board is concerned that 30% of prisoners are inactive and, too often, spend an unreasonable amount of time in their cells.
- Employers have been attracted into the prison and provide useful skills for prisoners as part of their future resettlement.

- Not all activities in the prison benefit the prisoners. For example: sewing T-shirts may be useful arrangement for the Prison Service, but the Board is of the view that it is not a career prisoners would choose on their release.

3.2 Main areas for development

TO THE MINISTER

- Stoke Heath has many prisoners serving less than six months, as well as a high proportion of prisoners recalled from the community. This puts pressure on the prison's ability to train and resettle prisoners. How does the Minister plan to address this issue?

TO THE PRISON SERVICE

- Prisoners in double cells do not have adequate space or ventilation. When will the Prison Service implement an urgent review to set minimum standards that are fair and humane for prisoners?
- Accommodation and service areas, such as the kitchen and boilers, are all showing their age. Refurbishment has been postponed, year after year, which means much higher maintenance costs. When can we expect the funding that is required to make accommodation decent and safe?
- The IMB receives many complaints about the food, especially the lunchtime options. The budget per capita is well below that provided for schools. Will the Prison Service provide resource to improve the food options available to prisoners?
- Will the Prison Service act on findings by the IMB and the Prisons and Probation Ombudsman (PPO) to improve the transfer of property between prisons?
- Why does the Prison Service transfer prisoners with a history of serious self-harm to Stoke Heath, where their needs may not be adequately met?

TO THE GOVERNOR

- We are aware of the enormous resource pressure on the prison, but will the Governor make resettlement a priority for the next 12 months?
- We welcome the work achieved in the prison to try to reduce the entry of drugs into the prison. Is the current drug strategy achieving the results to maintain a safe environment for prisoners and staff?
- Unfortunately, deaths and cases of serious self-harm have significantly increased. Is there more opportunity for staff to actively engage with prisoners who are at risk to help reduce self-harm?
- How does the Prison Service plan to improve the service level in reception, so that prisoners can view and receive their property in a timely fashion?
- Prisoners complain to the IMB about the quality and quantity of food they receive. Will the Governor make a concerted effort to reduce food waste by improving food quality?

3.3 Progress made from the previous annual report of 2023-2024

IMB concerns	Progress over the year
High prison numbers and the impact this having on prisoner	Despite assurances from the Minister to reduce the population pressure in prisons, prisons are still full and causing immense strain on staff and prisoners alike.
Prisoner accommodation	Prisoners are still living in double cells designed for one, with limited ventilation and privacy.
Ability to educate and provide skills to reduce reoffending	Education achievement has remained at a similar rate to last year. The lack of training, employment and purposeful activity at Stoke Heath remains low. The introduction of the Building Choices course, which will allow some prisoners to progress, has yet to be rolled out.
The plight of IPP (imprisonment for public protection) prisoners and their need for specialist rehabilitation	We are pleased that many IPP prisoners have had their sentences reviewed. However, the remaining IPP prisoners need an appropriate progression model to follow.

Missing property during transfers from other prisons	Despite reviews from the IMB and independent Prisons and Probation Ombudsman, property still receives the most complaints and applications to the IMB.
Safety in the prison and the increase in illicit items coming in from other prisons	The number of assaults has increased, with illicit substances freely available. Despite a new baggage scanner and detection of in-body materials, the prison has struggled to reduce other routes of illicit material reaching prisoners. Levels of self-harm have also increased by 20%.
Prisoner offender managers being over-stretched	The number of early release scheme initiatives has put a large burden on prison probation managers, who are still over-stretched and can still only give limited time to prisoners.

Review strategy for violence reduction	Violence and self-harm have increased during the year.
Informing the IMB about deaths in custody	The IMB is informed of all deaths in custody.
Social video calls in evenings and weekends for better family contact	Whilst there are many more opportunities for social video calls during the week, the regime does not allow the resource for these visits in the evenings and at weekends.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

Last year, the IMB reported that prisoners were arriving late in the day, which caused difficulties in providing appropriate induction. This has been addressed, and an officer is detailed until the evening, which allows the necessary duties to be undertaken and prisoners to receive the proper and full induction.

On arrival, each prisoner has a full body scan, which helps to reduce the quantity of drugs and illicit items entering the prison. The introduction of a baggage scanner also helps with this aim. Nevertheless, the problem with drugs making their way into the prison is ongoing and prisoners tell us that drugs are readily available if they want them.

Prisoners who show a positive indication on the body scanner go directly to the segregation and reintegration unit (SRU). Healthcare is not always able to make timely assessments for these prisoners, as IT systems are not compatible there.

Officers and red band prisoners (those who have earned a privileged working role) give new prisoners induction in their first few days at the prison. The induction process also covers the work of the IMB. The Board has produced a leaflet, which is included in the induction brochure given to each prisoner.

4.2 Suicide and self-harm, deaths in custody

Deaths and suicide

There have been four deaths in custody during the year. Two deaths occurred in the prison (pending inquest outcomes): one occurred in hospital (of suspected natural causes) and one occurred within 14 days of leaving custody (also of suspected natural causes).

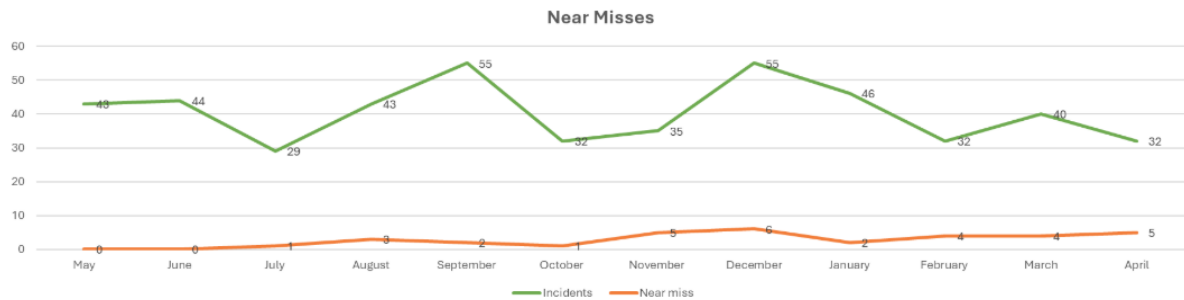
Self-harm

During the year, there were 486 incidents of harm. There were 33 instances that resulted in 'near-miss investigations'² being completed. This compared with 11 in 2023-2024.

The reasoning behind this dramatic increase was not due to the seriousness of self-harm increasing significantly, but was down to the leadership team changing and, as such, the process to commission such near-miss investigations. The new processes resulted in being deliberately overzealous in the investigation of any serious self-harm and not necessarily adhering to the national criteria for which incidents were true near-misses to be investigated. The prison has explained that this will allow it to understand the self-harm picture, and the drivers for serious self-harm, in an attempt to address the increased self-harm figures and self-inflicted deaths they have experienced.

² These are incidents where there was a real risk of serious injury or death.

Near Miss Investigations in Comparison to the number of incidents (01/05/24 – 30/04/25)



A relatively large number of prisoners arrived at Stoke Heath with a history of self-harm consistently each month. During the year, there were 602 such prisoners. Every month, there can be ten prisoners who have a minimum of three incidents of low to moderate self-harm incidents. Overall, self-harm incidents have shown an increase of 21.5%, from 400 incidents in 2023-2024 to 486 in 2024-2025.

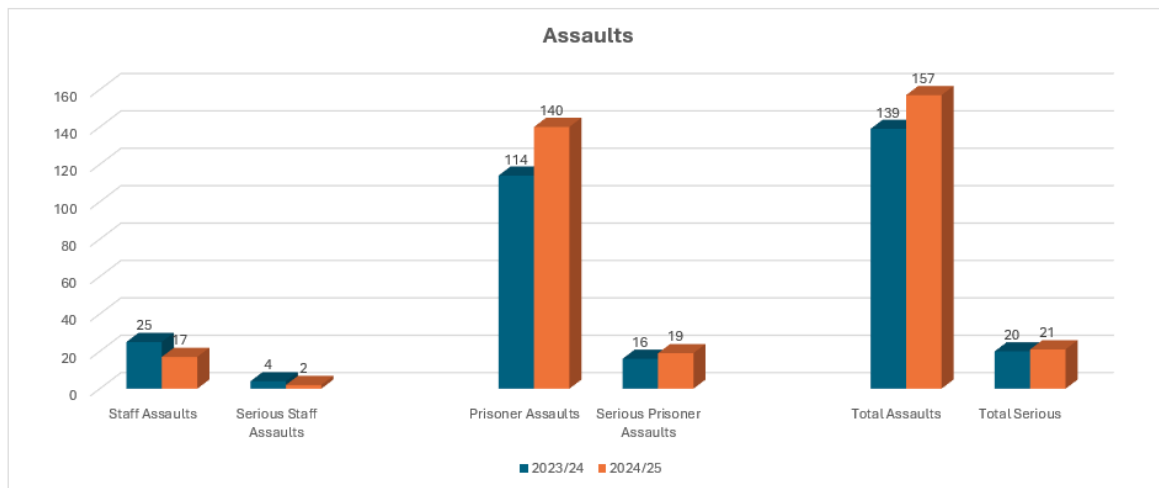
A 'razor policy', was introduced last year. Officers were to only issue a new disposable razor to prisoners in exchange for a used razor. This allowed officers to check if a razor has been tampered with. However, this has not prevented cutting from being the highest method of self-harm, but it has allowed some management of accessibility. The Board believes that staff interaction at this point may prevent some incidents of self-harm. Electric razors have been suggested, but this idea has not gone down well with prisoners.

The Board is satisfied that those at risk are proactively identified and actively supported both through informal contacts and the structured assessment, care in custody and teamwork (ACCTs) plans. There were 253 ACCTs opened during the year, three fewer than last year.

Despite a revised process and the reporting of meaningful observations being emphasised, in some instances the quality of recording (of actions) on ACCT documentation has been observed as poor. This resulted in Stoke Heath being placed quite high up on the CCTV ACCT assurance checks. Following the Board revising its own monitoring procedures of this vulnerable group, members regularly and consistently monitor ACCT documents, ask questions and raise issues when it is felt necessary.

4.3 Violence and violence reduction, self-isolation

The number of assaults fluctuates from month to month. During the reporting year there have been 157 (18 more than last year). There were 19 serious prisoner-on-prisoner assaults (three more than last year) and two serious prisoner-on-staff assaults (two fewer than last year).



Assaults

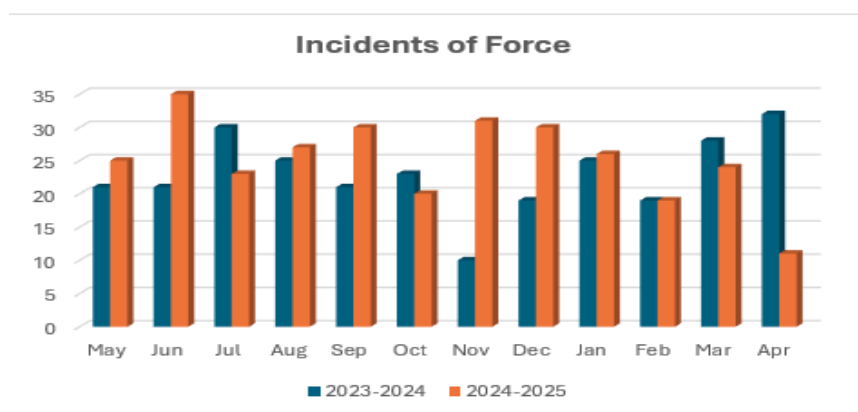
Over the last two reporting years, there has been a shift in the feel and, maybe, the culture of the prison, since prisoners from outside the area have been transferred to Stoke Heath. It has been observed that prisoners from the Liverpool area tend to go around in groups.

4.4 Use of force

The Board observes the monthly safer custody and use of force meetings, which allows us to monitor incidents, trends and action plans on a regular basis.

This year, use of force incidents increased by 7%, a rise from 274 last year to 294 this year. The two biggest contributing factors to the increase are restraint of prisoners under the influence and handcuffing prisoners to de-escalate incidents.

The prison continued to operate at near capacity, which means it is a challenge to separate disruptive men by dispensing them across different wings.



The use of batons and PAVA (incapacitant spray) remains relatively low. During the year, there were three instances of drawing a baton, but it was never actually used. PAVA was drawn on five occasions and used on five occasions.

Last year, the use of body worn video cameras (BWCVs) levelled off to an average of 80%. Encouraging staff to wear - and switch on - BWVCs is ongoing. This year,

average use was 88%. Board members have been able to view recordings of both CCTV and BWVCs, when necessary.

4.5 Preventing illicit items

During the year, the prison seems to have been robust in strengthening its defences against prohibited and potentially dangerous illicit articles. A combination of enhanced perimeter security, targeted intelligence measures and advanced detection technologies has underpinned efforts to safeguard both prisoners and staff by reducing the risks.

Reflecting a diverse range of illicit substances, the percentage of positive random mandatory drug tests (MDTs) fluctuated throughout the year. In March 2025 (as in March 2024), the percentage was 40%, and it remains around this high level.

Under the influence (UTI) figures also rose and fell throughout the year. There were 706 reported instances of UTI during the period in review. Reassuringly, Forward Trust has continued to engage proactively with prisoners who opt into their substance misuse services, which is vital in helping to reduce demand for illicit drugs and supporting rehabilitation. Joined-up working with the safer custody team in recognising self-harm and debt, often congruent with illicit item usage or conveyance, has actively helped disrupt prisoners of concern.

Earlier this year, Stoke Heath conducted a weapons amnesty, although only two weapons were surrendered. Following an increase in the number of weapons' finds, indications were that they were made in the manufacturing unit. The Board was highly critical of the cursory nature of searching when prisoners were leaving the unit. It is noted that instructors (in the manufacturing unit, for example) are not mandated to wear BWVCs and they choose not to do so to protect their trainer/prisoner trust. A change in policy around searches implemented by the prison has made an improvement.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

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

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

The Board continues to be concerned about the inadequacy of the prison's facilities for people with mobility issues. For example, there is no means of fixing grab handles in showers for disabled prisoners and there is restricted access in healthcare and education. This was highlighted in the previous two reports, but nothing has changed. The overall condition of the healthcare building needs updating. It has not been redecorated for six years. Some rooms have carpets and floors that cannot be cleaned. We believe that cleaning is not up to standard for a healthcare building.

The main kitchen at HMP/YOI Stoke Heath has retained its five-star rating from Shropshire Council's environmental health inspection for the last four years. However, the floor is a patchwork of minor repairs, with some attempts at repair with masking tape to hold the flooring down. The poor condition of the floor has implications for hygiene and has potential to be a trip/safety hazard. This has been commented on in our previous two reports, but no progress has been made towards rectification.

In the Board's view, the kitchen does an admirable job of providing food for religious festivals, and all dietary needs seem to be catered for, despite what the Board believes is a mean per capita allowance of £3.10 per prisoner, per day. In comparison, this is a similar allowance to one child's meal in school.

Prisoners have commented that evening meals are generally good, but breakfast and lunches are inadequate. For example, the salad option often lacks variety and offers insufficient protein and carbohydrate elements. There are constant complaints to the IMB of poor portion size and menu choice. Food is often tasted by IMB members, who generally agree with prisoners, but we realise the daily rate allowed and the lack of on-wing cooking facilities (so prisoners can prepare food themselves) make any resolution difficult.

We noted that, in one week, there were 18 bins of waste food. This could be an indicator of how prisoners regard its quality.

5.2 Segregation

There continues to be an increase in referrals to the segregation and reintegration unit (SRU), where prisoners are separated from the rest of the prison population. This is due to both scans in reception revealing items in the body that cannot be accounted for and prisoners under the influence (UTI) being sent to the SRU for care and support after three warnings.

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

5.3 Staff and prisoner relationships, key workers

The Board has observed many instances of good practice and constructive contact between members of staff and prisoners. Wings that are staffed by experienced, skilled officers show a calm, purposeful regime, where men know where they stand and conflicts are promptly and effectively de-escalated. However, the Board has observed that, on some wings, there is a lack of officer presence at meal times and during association (when prisoners are let out of their cells to take part in activities and to socialise). Complaints made against staff, including allegations of bullying, are broadly similar to last year (see 'Applications to the IMB' in section 8).

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

The role of key worker is vital in addressing prisoner concerns about their time and progression in prison and supporting prison offender managers with sentence planning. (See section 7.3)

HMP/YOI Stoke Heath is fortunate to have its full quota of officers. An extra 18 officers were recruited during the year, although 24% are regarded as non-effective, as they are either on detached duty to other prisons or absent because of sickness.

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

5.4 Complaints

Athis year, applications (prisoners' written representations) to the IMB remained stable/about the same as the last year. As in previous years, most of the applications concerned property. See 'Applications to the IMB' in section 8.

5.5 Property

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

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

6. Health and wellbeing

6.1 Healthcare general

Healthcare (HC) provision has a range of services commissioned to meet the needs of prisoners in HMP/YOI Stoke Heath. The HC contract with Shropshire Community Health NHS Trust has been extended to run to 30 September 2027. The secondary mental health and clinical substance misuse services are provided by the Midlands Partnership University NHS Foundation Trust. The psychosocial drug services are also subcontracted and are provided by Forward Trust.

HC is only 80% staffed and relies on agency staff. However, NHS Trusts placed a cap on agency spend, which has had a major impact on filling vacancies and the department's ability to deliver a high level of healthcare. The need to employ a locum GP has added to costs. Internal paramedics (paramedics are directly employed and on site and are not visiting paramedics who attend the site in ambulances for emergencies) continue to be a great asset, particularly in dealing with emergency situations.

Access to the clinical area of HC, for those with mobility challenges, is hindered because access is via a lift, which is still unreliable. It can be a challenge for this group to have access to the controlled drugs dispensary and to clinical appointments.

HC does not have access to their NHS data within SRU. A difficulty arises when a prisoner is taken directly to the segregation and rehabilitation unit (SRU) due, for example, to a positive indication on the body scanner. When HC staff have completed the screening of all new arrivals in reception, they must go to the SRU and complete the HC induction manually. The information is then recorded on their IT system in HC. This procedure continues to add to the already limited time available.

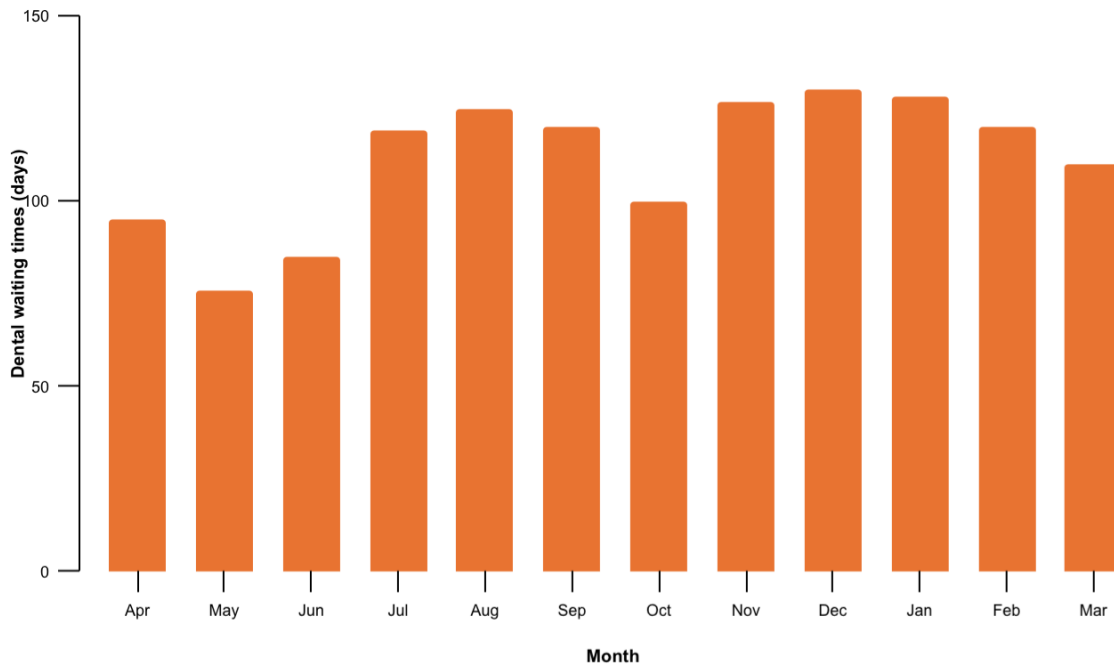
The HC building, as previously referenced in section 5.1, needs updating. Amey, the prison building contractors, have replaced the healthcare kitchen, which is now in far better condition than last year. Amey has also completed a 'deep clean' of the building, including the carpeted areas. Whilst this has helped, the carpets are very worn and need replacing. Skirting boards are coming away from the walls and, in some areas, the flooring is the same. A general review of the building needs to take place.

There were, on average, eight complaints per month to HC in 2024-2025 compared with ten per month in 2023-2024. The main themes were excessive waiting times for dental treatment and external hospital appointments.

6.2 Physical healthcare

The board has no concerns about in-house healthcare or access to a GP. Unfortunately, the dental waiting times have increased to 16 weeks, as shown in the graph below. This is due to clinics being cancelled and an increase in the number of new prisoners, resulting in more patients waiting.

Monthly waiting time to see a dentist



HC is working to improve performance by, for example, trying to reduce the number of patients who do not attend appointments (DNAs). Prisoners report that they are not always issued with a movement slip in time, so are not aware of their appointment. HC does not have the technology to input appointments to a prisoner's laptop. However, it is now messaging patients to inform them of their appointments.

The new computer-led medication dispensing system was installed last year. It has not only helped with dispensing but also with safety and stock control. However, medication hatches on the wings are not always supervised. This not only slows down the process but gives prisoners the opportunity to exchange or trade drugs for illicit activities. Any disputes with nursing staff may not be managed appropriately because of a lack of officer presence.

HC is allowed to book a maximum of ten external hospital appointments each week, with an average wait time of 12 months. However, prisoners complain about the wait, despite it being a systemic NHS problem. Wherever possible, phone consultations are being used and some services, such as ultrasounds and X-rays, come to the prison.

Due to the short time scales imposed from the early release schemes, healthcare has been under considerable pressure. It needs appropriate time to liaise with external healthcare providers for the continuity of care and medication. In addition, many prisoners transferring in have outstanding external hospital referrals or appointments, which need to be reorganised locally.

When a prisoner is an in-patient in a hospital, prison staff are required to always be with them, and the healthcare department need to budget for this. In the last year, five bed-watches were planned, although there were 25 in total.

There were 201 accident and emergency attendances and 593 outpatient appointments in the reporting year, whereas the budget is for 184 appointments.

Unfortunately, the current budget for bed watches, constant watches (when prisoners must be under the constant watch of prison officers) and hospital escorts is lower than the actual amount required. This is due to an increased need for hospital escorts because of more complex patients coming through the estate. Work is due to take place in late 2025 between NHS England, HMPPS and prison health providers to collate escort and bed-watch data from prisoners nationally to review need and budget allocation.

6.3 Mental health

Primary mental healthcare clinics are held three times per week. However, there is only one full-time nurse and one part-time nurse, plus an agency nurse employed to help reduce clinic waiting times. During the year, three formal complaints (four last year) and 96 informal complaints (116 last year) were received. The waiting times for an appointment with the mental health team were 2-5 days. This is in line with NHS England policy.

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

Prisoners with severe mental illness are referred to the visiting psychiatrist. Those needing a period of assessment are referred to an appropriate secure setting in the community. However, invariably, there are no places available to provide such assessments and appropriate treatment.

The lack of available secure mental health beds in the community has led to individuals spending inappropriate time in the SRU or in healthcare. These settings may cause further deterioration in prisoners' mental health.

From the Board's observations, the healthcare department has made significant improvements in working with prisoners who have a learning disability. The learning disability nurse runs a clinic on most days. Each prisoner has a care plan, which is supported by prison staff and allows them to manage those with learning difficulties and helps avoid escalating poor behaviour.

6.4 Drug and alcohol rehabilitation

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

- Stepping Stones: designed for those wanting help with alcohol or drug misuse.
- Recovery Support Group: aimed at motivating individuals towards abstinence.
- The Bridge: targeted at medium-to-high risk substance-dependent men and based on the 12-step approach of recovery.
- Relationship Matters: designed to look at the impact substance use has had on relationships and to learn skills to improve these relationships.
- When staffing in the regime allows, there are auricular acupuncture and mindfulness sessions, as well as SMART recovery sessions (self-help programmes for addictive behaviour).

The charity has had a number of successes, which demonstrate what can be achieved if a prisoner is committed to a life without drugs. For example, one prisoner completed

the Bridge programme and was granted parole to go to a rehabilitation prison facility, which he completed, and he is now living drug free in the community.

To support prisoners on release, Forward Trust has also successfully referred to and used other charities, including Release Mates.

6.5 Soft skills

Health and welfare champions, or HAWCs (prisoners qualified in the Royal Society for Public Health UK Level 2 Award in Understanding Health Improvement) are an excellent resource for the HC unit and the prison. They are trained to help prisoners lead healthier lives. They cover topics such as nutrition, exercise, smoking, sexual health, mental health and wellbeing, drugs and alcohol. This initiative is beneficial for prisoners and the healthcare unit in identifying health risks at an earlier stage. HAWCs continue screening prisoners for blood-borne virus (BBV) as part of the continuing project to eliminate hepatitis C in the prison.

7. Progression and resettlement

To meet the strategic objective as a training and resettlement prison, Stoke Heath must provide prisoners with accessible, engaging and purposeful activities in a safe and supportive environment. However, with reoffending rates nationally at 27.4%, training and resettlement has never been more important.

7.1 Education, library

Library

The library has a good selection of books and supports initiatives elsewhere in education such as 'Author of the month'. Library staff tell us that the library is used by 60% of prisoners. Prisoners have been encouraged to read more by being offered bonuses based on the number of books they have read and the number of book reviews they have completed.

The charity, The Shannon Trust, helps prisoners with their first steps in learning numeracy and English. They have helped over 50 prisoners over the year, aided by four red band (trusted prisoners with specific jobs and privileges) volunteers.

A new satellite library has been installed in the education building as part of the new high street initiative, so prisoners have easier access to library facilities whilst in education.

Education

About a third of prisoners (31%) at Stoke Heath have neurodivergent needs. Whilst neurodiversity covers a wide range of needs, the most common is for ADHD (attention deficit hyperactivity disorder) and dyslexia (a learning difficulty that primarily affects reading and writing skills). The neurodiversity support manager reviews the environment that may best assist those with need and enables access to suitable activities within the prison, such as, for example, extra support by red bands (trusted men who support new prisoners and provide initial peer support) or easy-read documents.

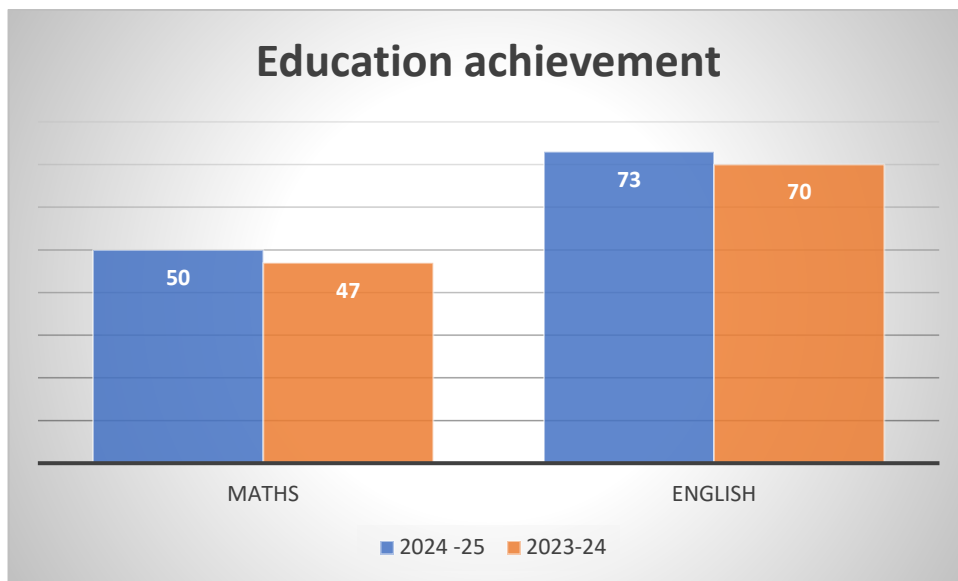
Every new prisoner is given a curriculum pathway, with the aim of achieving Level 3 in English and maths. Prisoners are given the opportunity to extend their education through higher education pathways such as sciences, sports or business studies. There are also opportunities to undertake distance learning: in April 2025, 20 prisoners were undertaking courses with the Open University.

This year, there has been emphasis on digital functional skills. This raises awareness of the need of these skills in modern-day living and, more importantly, the value of digital safety when using online facilities.

The IMB has observed some education classes and has found the instructors knowledgeable and engaging. Prisoners seem to have their full attention. However, attendance in education is still at 74%.

The graph below shows that prisoners reaching Level 1 or 2 in maths and English has risen slightly but is broadly similar to last year. The Board is disappointed that no further progress has been made, especially in numeracy, which is so important for future employment.

Percentage of prisoners enrolled who achieved Level 1 or 2 in maths and English during 2023-2024 and 2024-2025



7.2 Vocational training, work

The opportunities for training and learning would appear to be comprehensive, with several different pathways offered, according to a prisoner's need. For example, qualifications can be gained in horticulture; manufacturing; construction; hospitality and catering; and waste management.

For a training and resettlement prison, the opportunities for prisoners to be employed is woefully short of what is expected, in the Board's view, with 30% of the prison population described as 'inactive'. In the reporting year, only 20% of prisoners were in full-time employment and 50% in part-time employment. The work-based jobs offered are often over-staffed (too many prisoners to a single role) or lacking in meaningful skills. This deprives many prisoners of gaining new skills, having a small remuneration and, crucially, relieving the tedium of prison life.

The prison has encouraged outside employers into the prison. Forest Fencing has been a valuable opportunity for employment in the prison and teaches prisoners a variety of skills in making, moving and stacking panels. Some of the prisoners have reported that they really value the time out of their cells: 'Staff are taking good care of us. It is great for our mental health,'

Employers such as Sandmaster provide employment, although the experience is less useful in terms of skills: it entails counting sandpaper into bundles and packing them into boxes.

Other employers, such as Wates SES, provide skills needed to make making electrical and potentially employ prisoners on release. However, there have been concerns about health and safety in the unit because of the lack of PPE (personal protective equipment) and ventilation.

A major source of employment is in the tailor's workshops. It can employ 28 prisoners. It is an activity and is purposeful for the prison estate, but all prisoners interviewed did not envisage this as a skill that would be useful on release from prison. We were told:

'It's a bit like prisoners of old, sewing mail bags', and we question if this space would be better served in a more creative way.

Whilst it is laudable for the prison to employ as many prisoners as possible, all too frequently we see prisoners 'standing around', with no purposeful activity, such as, for example, in the gardens and waste recycling areas.

We welcome new courses now available to prisoners, such as the fork-lift truck operator course. However, there are still too many jobs, such as powder coating and metal work, which offer new skills but no formal qualification.

We note instances of prisoners who are willing to change their behaviour and, generally, staff and officers go out of their way to help. For example, one prisoner had been in and out of the SRU. Determined to change, he received help from wing staff and was very grateful for the encouragement, support and practical help. He said: 'What really helped was holding down a full-time job.' He is looking forward to a new life outside prison.

7.3 Offender management, progression

Each prisoner coming to Stoke Heath is assigned a prison offender manager (POM), who is their link to sentence progression and eventual release. The POM is supported by key workers. These are prison officers who help prisoners with any issues in the prison and provide a link to their POM. Prisoners should be seen once a fortnight, but the IMB has noted instances where prisoners tell us that they have either never seen their key worker or have not seen one in six months. The role of the key worker is an important bridge between prisoner and prison and they can often pick up issues at an early stage.

Prisoners have often reported to the IMB the difficulty of having contact with their POM. This is not surprising, as prison offender managers have been under immense pressure to facilitate the many prisoners from early release schemes and prisoners who are not from the West Midlands region, as well as managing with a shortage of POMs.

Prisoners will often need to complete courses (such as anger management) as part of their sentence progression. Not all these courses are available at Stoke Heath, so a transfer to another prison is required. These transfers have been difficult to arrange because of the population pressure. There needs to be a better process that allows these temporary transfers to take place. The new 'Building Choices' course will not be available in Stoke Heath until December 2025, and it is telling that there are no figures available to understand how many prisoners are in this progression bottleneck.

The Clive unit accommodates eight prisoners in open conditions, although there is room for more. Prisoners have been released to the Clive unit at short notice, without the usual resettlement provision. Too often we have visited this unit, where prisoners speak of a lack of support, money and employment. There are no laptops or internet connection to help prisoners find a job and they must walk to the local town to use the facilities in the library. The open unit lacks the planning and co-ordination that demonstrates where it fits into resettlement and release.

We note that 25% of the prison population are from recalls. In the Board's view, this is an area of justice that must be reviewed.

7.4 Family contact

Family contact is valued by the prison and research has found that prisoners who maintain family ties are 40% less likely to commit further crime. Only about half the prisoners receive social visits. Stoke Heath is receiving more prisoners from the north-west, and it has been difficult for some families to visit because of the distance. However, prisoners are able to stay in touch with their families in three ways:

By phone: some privacy at least is now provided by phones in every cell. However, a fault in the BT system, which lasted several months, cut off calls during peak times in the evening. The issue is ongoing and has been a major source of irritation amongst prisoners.

By video link: the IMB has long campaigned for more video links to improve contact with families. New video facilities have been installed in the visits hall, which now allow two social video call sessions per prisoner, per month. Unfortunately, these calls cannot be facilitated outside the prison regime core hours, when children and working partners are more likely to be available.

Through social visits: the Prison Advice and Care Trust (PACT) charity is instrumental in arranging a themed family day (which brings together prisoners and their families outside of their statutory entitlement to social visits, usually in more informal settings) every month. At Christmas, the family had a disco with Santa and his elves. Those we have observed were well organised, with PACT providing entertainment for the whole family, such as bingo. The prison listened to feedback from families about the poor provision of food during visits and we were pleased that this has now improved.

7.5 Resettlement planning

The prison population of Stoke Heath has changed, with measures to reduce overcrowding; more prisoners with fewer than six months to serve are increasing; and there is little new resource to invest in schemes to prepare prisoners for release.

There has been some great work from the employment hub, which has been successful in attracting new employers into the prison and with firms taking on prisoners on release. For example, in August, the NHS gave two presentations to prisoners, with a view of offering employment for those who are eligible.

As previously set out, purposeful activity amongst prisoners remains low. The prison is substantially below its target and, when compared with other West Midlands prisons, has been in the red and amber risk score all year.

8. The work of the IMB

Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	10
Number of Board members at the end of the reporting period	7
Total number of visits to the establishment	425

Applications to the IMB

Cod e	Subject	Number of apps 2023-2024		Number of apps 2024-2025	
A	Accommodation, including laundry, clothing, ablutions	12	3%	10	3%
B	Discipline, including adjudications, incentives schemes, sanctions	38	8%	11	3%
C	Equality	9	2%	4	1%
D	Purposeful activity, including education, work, training, library, regime, time out of cell	18	4%	10	3%
E1	Letters, visits, phones, public protection restrictions	10	2%	8	2%
E2	Finance, including pay, private monies, spends	30	7%	20	6%
F	Food and kitchens	2	0%	9	3%
G	Health, including physical, mental, social care	30	7%	59	16%
H1	Property within this establishment	37	8%	33	9%
H2	Property transfer or in another establishment or location	88	19%	58	16%
H3	Canteen, facility list, catalogue(s)	18	4%	2	<1%
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	44	10%	44	12%
J1	Staff/prisoner concerns, including bullying	66	15%	40	11%
J2	Allegations of bullying from staff	N/A	N/A	5	2%
K	Transfers	28	6%	19	5%
L	Miscellaneous, including complaints system	22	5%	15	4%
	Total number of applications	452		347	



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