



Annual Report of the Independent Monitoring Board at HMP Cardiff

**For reporting year
1 September 2024 to 31 August 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	12
5. Fair and humane treatment	15
6. Health and wellbeing	21
7. Progression and resettlement	26
 The work of the IMB	
Board statistics	30
Applications to the IMB	30
 Annex A	
Service providers	31

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 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 Cardiff is a men's category B local training prison (which holds prisoners who do not require the highest level of security but still present a substantial risk of harm to the public or of escaping), situated in the heart of the Welsh capital city. The prison opened in 1832, and a large part of the accommodation continues to comprise three Georgian wings. In 1996, a major refurbishment project saw three new accommodation wings open. There are now seven wings (A, B, C, D, E, F, and the healthcare centre), with an additional three separate units forming part of those wings (A1, B1 and F1). The prison also has a range of other facilities, including a gym, chaplaincy, a series of workshops and classrooms. A new-build healthcare centre (HCC) opened in May 2008 and provides 20 beds.

The prison largely serves southeast Wales and the south Wales valleys, although an increasing number of prisoners are transferred from English prisons. It provides predominantly for prisoners serving short-term sentences, remand prisoners and those awaiting sentence. The prison has a certified normal accommodation of 534¹ (the number of prisoners a prison can hold without being overcrowded) and an operating 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 around 779. During the reporting year, operating capacity fluctuated and dropped to 774, whilst an ongoing cell refurbishment project took place. Prisoners are overwhelmingly accommodated two to a cell; 40% of which are single cells.

HMP Cardiff has continued to face population pressures over the reporting period. From 1 September 2024 to 31 August 2025, there were 3,783 admissions and 431 transfers in; 2,418 releases; and 1,254 transfers to other establishments. Measures introduced at the UK Government level to help reduce prison pressures has had little impact on HMP Cardiff, with few additional prisoners eligible for release.

During the reporting period, there was a change in senior leadership at HMP Cardiff, with both a new temporary Governor and Deputy Governor appointed in November 2024. The new leadership was, from the outset, welcoming of the role of the IMB and has continued, over the subsequent nine months, to ensure a responsive and productive relationship with the Board. This leadership has been observed by the Board as also having a positive influence on the wider staff and the organisational culture.

Cardiff IMB has also experienced significant changes, with a reduction in membership due to illness, employment and other issues. Whilst the recommended complement is 14 and the number of members at the end of the previous reporting period was 10, this fell further from January 2025, to just five. This has clearly had an impact on the Board's ability to monitor extensively and on the number of visits carried out. Nonetheless, the Board has continued to work effectively and the commitment shown by the remaining members has been exemplary.

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

- The Board welcomes the reduction in self-harm incidents from 595 in the previous reporting year to 295 this year and notes the prison's attribution of this as largely due to the introduction of electric razors.
- The Board wishes to highlight the welcome downward trend in use of force incidents, which fell from 852 to 600, and in the reduction in incidents of violence from 283 to 214.
- Prison population pressures continued during the reporting period.
- The Board reiterates its concern, expressed last year, about the late arrival of out-of-area prisoners arriving at HMP Cardiff, which delays the reception process.

Fair and humane treatment

- The Board reiterates concerns from previous years' reports about prison conditions, including the lack of out-of-cell space for eating; ongoing issues with heating and hot water; and inadequate accessibility for prisoners with mobility issues.
- We acknowledge the progress made on refurbishing and reclaiming cells and particularly welcome the introduction of a 'reduced mobility cell' on F2 landing.
- The Board acknowledges the successful implementation of the Launchpad project (a secure digital platform that gives prisoners access to laptops in their cells), a complex undertaking that required extensive consultation and training. We note the high level of prisoner satisfaction with the system.
- In recognising the significant benefits a well-functioning key worker scheme could bring, the Board reiterates the priority this needs to be given by the prison.

Health and wellbeing

- The Board welcomes the completion of the long-overdue Health and Social Care Needs Analysis (H&SCNA) and also the positive and timely senior management and healthcare response to it.
- The Board acknowledges the positive impact the new GP arrangements have had. We welcome the pragmatic approach taken by GPs working with the prison to ensure prisoners' medication is reviewed and prescribed within 24 hours. The Board believes this has contributed to the reduction in number of applications (prisoners' written representations to the IMB) about prescription/medication issues, from 55 last year to 30 in the reporting year.
- The Board highlights that staffing has remained a major problem, particularly a lack of nursing availability. Despite improvements last year, vetting continued to be an issue in recruiting and in staff starting. Of particular concern to the Board was that nursing staff were not profiled to attend reception until the afternoon, which had a direct impact on incoming prisoners and other members of staff.
- The Board notes the ongoing impact that sending prisoners out to hospital has on prison staffing and, subsequently, on the regime (the structured daily

routine and schedule of activities for prisoners), due to the need for an increased number of escorts.

- The Board wishes to acknowledge the positive recognition of the mental health team, which was peer reviewed by the Quality Network for Prison Mental Health Services. The Board also welcomes the training for all mental health team staff in cognitive behaviour therapy, dialectical behaviour therapy, and trauma informed care, to improve the service to prisoners.
- However, we are concerned about the waiting lists for prisoners to receive mental health services and, in particular, the reduction from seven to six psychiatric sessions a week towards the end of the reporting period. The Board also remains concerned about the length of time it takes for some prisoners to be transferred to a suitable mental health placement.
- The Board wishes to highlight the findings of the H&SCNA, which stated that mental health staffing levels were low in comparison to other, similar prisons.
- The Board welcomes the decision by the prison to retain the Here 2 Help peers programme, following the ending of the pilot funding.

Progression and resettlement

- The Board recognises the overall positive performance in terms of prison learning and skills and members have observed good practice in education and work activities throughout the year.
- The Board welcomes the opening of the wellbeing hub and the proposed developments, which we believe will provide a positive support to prisoners.
- The Board is aware of the poor condition of the estate in some areas and the ongoing closure of buildings marked for demolition, which has impacted the delivery of learning and skills.
- The proposals to bring together all aspects of catering, including the kitchens and serveries roles, with training towards qualifications, is welcomed by the Board.
- The Board commends the prison and Invisible Walls (a not-for-profit organisation that supports families) for working together to repurpose the former Clink restaurant as a bespoke visitors' centre and acknowledges the positive response from visitors now benefiting from this facility.

3.2 Main areas for development

TO THE MINISTER

- What immediate action will the Minister take to address the delays in the vetting process, which are a significant hindrance in the recruitment of prison staff and IMB members?
- When will the Minister raise with the Home Office the need to resolve the right-to-work status of prison staff, so they can remain employed in the Prison Service?

TO THE PRISON SERVICE

- What is the timeline for addressing the poor condition of parts of the prison estate, the continued closure of buildings marked for demolition, and ongoing problems with basic infrastructure such as heating, hot water and phones?

TO THE HEALTH BOARD

- How can Cardiff and Vale University Health Board work with HMP Cardiff and the healthcare department to mitigate the impact that sending prisoners out to hospital has on prison staffing and the regime, given the increased need for escorts?
- How will the Health Board ensure that prescribing checks at HMP Cardiff are resolved quickly, given that the pharmacists' job-sharing arrangement prevents in-prison checks?
- What steps will the Health Board take to address the delay in prisoners receiving mental health services, including psychiatric sessions, which are lower in comparison to other facilities, as highlighted in the H&SCNA?

TO THE GOVERNOR

- How will the prison ensure lockable storage is provided for prisoners with 'in possession' medication to help reduce the risk of other prisoners accessing unprescribed medication?
- How will the prison work with Cardiff council to establish a formal and robust social care process, given that none exists, as highlighted in the H&SCNA?
- The Board acknowledges the attempts made to introduce a revised staffing profile during the reporting period. How will these negotiations be resolved early in 2026 to support an improved key worker system in HMP Cardiff.
- How does the prison plan to make visits more inclusive for neurodivergent prisoners and visitors?

3.3 Response to the last report

Issue raised	Response given	Progress
To the Minister The Minister will be fully aware of the issues of overcrowding across the prison estate. The Board wishes to reiterate these concerns and, in particular, the position in HMP Cardiff. How – and when – does the Minister plan to address this serious issue?	Cardiff 2023-24 annual report - ministerial response - Independent Monitoring Boards [please click on the link to see the response]	Though no progress specific to HMP Cardiff, the Minister outlined his plans in the 10 year Prison Capacity Strategy to address overcrowding across the estate.
To the Prison Service		

<p>Whilst the Board welcomes the ongoing cell refurbishment programme, what solutions can be introduced, or investment made, to overcome the continuing problems with the heating and water systems?</p> <p>Whilst acknowledging the age of the prison, the Board, again, highlights the unsuitability of the premises for disabled and/or less mobile prisoners and the need for all prisoners to eat in their cells, sharing the space with toilet facilities.</p> <p>In view of the poor compliance with projected key worker sessions and a reduction of 63% in actual sessions on the previous reporting year, could the Prison Service provide an update on progress achieved on a revised staffing profile and its success in providing more dedicated time and continuity for key working?</p> <p>What alternatives is the Prison Service considering in view of the number of</p>	<p>Cardiff 2023-24 annual report - ministerial response - Independent Monitoring Boards</p>	<p>Capital funding bids have been submitted for extra water tanks and proposals to fit pumps and a direct feed.</p> <p>The annual servicing of the heating systems has been moved to July/August to allow time for the servicing and any potential remedial works to be completed before the autumn/winter.</p> <p>There are plans to convert a cell on F2 landing to a reduced mobility cell in the next financial year, including full in-cell sanitation with shower facilities.</p> <p>Ramped access and non-stepped access have been installed where possible.</p> <p>In-cell screens toilet facilities are being upgraded as part of the rolling cell refurbishment programme.</p> <p>Key work is one of the core priorities for HMPPS in 2025-2026. The national target is now focused on the quality of key work, for which HMP Cardiff has scored a green rating.</p> <p>The Mental Health Bill sets out vital reforms to support people with severe mental</p>
--	---	--

<p>prisoners with mental health problems continuing to be housed in the CSU.</p> <p>The Board is disappointed to find that the funding for the Here 2 Help peers and the emotional resilience training for the prisoners' pilot project is ending in March 2025. Could this decision be reconsidered?</p> <p>The Board recommends that the Prison Service works with HMP Cardiff to explore opportunities to</p>		<p>illness in the criminal justice system, with the aim of speeding up access to specialist in-patient care and ensuring that offenders with severe mental health needs are able to access appropriate and timely support in the most appropriate setting.</p> <p>HMP Cardiff now has a neurodiversity support manager post to work with multi-disciplinary teams within HMP Cardiff to support prisoners across the whole prison establishment with neurodiversity challenges, which may include mental health.</p> <p>The Governor will be highlighting, through the health needs assessment, the lack of mental health provision at the prison and will be using the partnership board meetings to highlight the support needed in the prison for prisoners with mental health needs.</p> <p>The Here 2 Help peers supporters and the emotional resilience training for new prisoners was a fixed-term pilot project, with no funding beyond March 2025. HMP Cardiff has, however, continued to offer the peer support service.</p> <p>The proportion of staff from minority ethnic groups increased from 3.95% at the end of August 2024 to</p>
--	--	---

<p>promote to, and recruit from, local minority ethnic communities in the surrounding area, to better reflect the prison population, which comprises 19% ethnic minorities.</p>		<p>7.8% by the end of September 2025. However, there are no minority ethnic officers above custodial officer grade.</p>
<p>To the Health Board</p> <p>The IMB trusts the overdue health needs analysis will be undertaken in 2024-2025?</p> <p>The Board recommends the Health Board review the level of weekend cover in the mental health team, in view of the significant demand for mental health support within the prison.</p> <p>The Board again wishes to highlight applications about medication/prescriptions continue to be received at a very high level and recommends further consideration be given to addressing this.</p> <p>The Board suggests the newly introduced practice of triaging only those individuals who ask to see the mental health team during their reception or secondary health screening process be kept under review to ensure other</p>	<p>Cardiff 2023-24 annual report - ministerial response - Independent Monitoring Boards</p>	<p>The Health and Social Care needs assessment has been completed. The prison's senior leadership team responded quickly and is committed to prioritising the actions recommended.</p> <p>The whole workforce model will be reviewed in conjunction with the health needs' analysis report.</p> <p>The head of healthcare will continue to monitor applications for medications and prescriptions. GPs have taken the pragmatic approach that what the men are prescribed in the community will continue in HMP Cardiff, including medication for mental health conditions.</p> <p>The newly introduced practice of triaging only those individuals who ask to see the mental health team during their reception or secondary health screening process will be kept under review.</p>

prisoners are not inadvertently overlooked.		
To the Governor The Board believes the process for provision of specific dietary needs should be reviewed and improvements made where possible. A thematic review into food provision will be undertaken by the Board in 2025.	No response received, however the prison noted the Board's intention to carry out a thematic review of dietary provision during the 2023-24 reporting period.	Due to the reduced membership of the Board during the reporting period, the proposed thematic review was not undertaken. No further concerns were raised by prisoners, so the Board considers this matter closed.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

4.1.1 HMP Cardiff reception has been observed to be often busy but well managed. Staff have been observed to be supportive and clear in their instructions to prisoners. In September 2024, 608 receptions recorded whilst, in the last month of reporting, in August 2025, there were 691 receptions. These figures indicate the high level of population turnover in HMP Cardiff.

4.1.2 The Board is particularly concerned about out-of-area prisoners who have been in court during much of the day and have then been transported to Cardiff, often arriving after 7.30pm, when they then start the reception process. This was highlighted in last year's report and continues to be the case. These late arrivals impact prison and healthcare staff, as, if there is no cover, they agree to work longer hours to process the new arrivals.

4.1.3 Prisoners transfer from reception to the induction wing; following completion of their induction process, they then move to a main wing. Board members have observed the induction process, led by peers and supported by officers, providing prisoners with laptops and an accessible level of information. Healthcare, chaplaincy, Dyfodol (the substance misuse intervention service) and the resettlement team conduct follow-up assessments on wings.

4.2 Suicide and self-harm, deaths in custody

4.2.1 Sadly, there were two deaths in custody in the reporting year which were, apparently, self-inflicted; inquests are awaited. The Board has been impressed by the support offered to families by HMP Cardiff, particularly the family liaison officer team.

4.2.2 The Board also noted the findings of five Prisons and Probation Ombudsman (PPO) investigations relating to two deaths in custody in HMP Cardiff and three post-release deaths which, although having occurred prior to the reporting period, were published during this time. In one report, recommendations included a review of the reception process, to improve handovers and risk assessments between prison escort and reception staff. In a second report, recommendations included upskilling healthcare staff to ensure they carry out assessments of prisoners in segregation confidently and competently, and a review of the use of in-cell CCTV at HMP Cardiff. The Board notes these recommendations address serious concerns and welcomes the prison's actions in response.

4.2.3 The level of self-harm in the reporting year was recorded as 295 incidents, a **significant decrease of 50% on the 595 incidents the previous year**. During the reporting period, 649 ACCTs (assessment, care in custody and teamwork) plans were opened (which are used to support prisoners who are at risk of self-harm and suicide), compared with 629 the previous year. **The Board welcomes the reduction in self-harm incidents during the reporting year and, notably, the 57% fall over the period February to August 2025, compared with the same period in 2024, which the prison has attributed to the introduction of electric razors.**

4.2.4 As part of the removal of wet-shave razors from all adult male closed prisons, HMP Cardiff introduced electric razors on 27 January 2025. Alternatives to wet-shave razors in prisons were proposed, in view of their use in serious assaults against both staff and prisoners and in self-harming. Implementation was handled well, with an amnesty period provided for prisoners to hand in their wet-shave razors; all prisoners now receive an electric razor during their induction.

4.2.5 The family liaison officer (FLO) team has played an important part in the support of prisoners and their families. Their contribution was recognised in December 2024, when the team won the High Sheriff's Award in the HMP Cardiff annual awards ceremony and, again, in winning at the Welsh national awards in 2025.

4.3 Violence and violence reduction, self-isolation

4.3.1 The number of reported incidents of violence in the reporting period decreased from 283 to 214, a decrease of 23%. Several of these incidents have been observed by Board members and it has been noted staff dealt with them calmly and professionally.

4.3.2 All incidents were investigated by the safer custody team and, if necessary, referrals made to the challenge, support and intervention plan (CSIP) team, which employs a violence reduction case management model to manage prisoners exhibiting, or likely to use, challenging or violent behaviour. In such cases, HMP Cardiff's safer custody team holds a weekly CSIP safety intervention meeting (SIM). If the multi-disciplinary team decides a prisoner needs CSIP support, a case manager is assigned to them. This is a custodial manager and will be the residential manager of the unit where the prisoner is located.

4.4 Vulnerable prisoners, safeguarding

4.4.1 Prisoners assessed as vulnerable were placed on B1, a smaller wing, where there is access to education or work on the wing, plus work in the garden and access to the gym. The Board has not observed any issues of concern in relation to vulnerable prisoners and safeguarding.

4.5 Use of force

4.5.1 The Board is pleased to note a reduction in use of force (UoF) incidents. There were 641 incidents where force was used during the year, a reduction of 25% on the 852 in the previous reporting period. These ranged from full control and restraint to very minimal force. Of these, about 30% were guiding holds only. There have been nine planned interventions, with no incidents of officers using Pava incapacitant spray or drawing batons during this time.

4.5.2 There has been an increase, to 93%, in the use of body worn video cameras (BWVCs) during UoF incidents. This is a notable increase since August 2024, when only 80% were activated.

4.6 Preventing illicit items

4.6.1 Illicit items continue to be a problem across the estate. HMP Cardiff has increased the frequency and level of searches of staff and visitors during the reporting year. Cell searches, targeted or general, including overnight, are carried

out by a dedicated search team, sometimes supported by regional and national resources. During the later part of the reporting year, it was noted that, as more drugs were found and confiscated, the number of 'throw-overs' (where people from outside the prison throw parcels containing illicit items over the walls, to be picked up by prisoners) increased.

4.6.2 A sample of body scans undertaken in June, July and August 2025 identified positive scans in, respectively, 8%, 5.2%, and 26% of cases, suggesting a welcome reduction in the number of prisoners attempting to bring in illicit substances; of these, 21 out of 44 were new receptions. The Board spoke to a number of prisoners situated in the care and separation unit (CSU), who increasingly claimed they were not secreting items, even though scans had identified an item in their body. The issue was raised with the Governor in August 2025, who was clear these results were not due to an increase in secreting but to the improved training and upskilling of staff operating the body scanner to identify such items. He advised that an excellent assurance process had been put in place, where scans were checked by several staff if there was any doubt; scans could also be sent to the national team for verification, if necessary.

4.6.3 The Board observed adjudications (disciplinary hearings held by a Governor if a prisoner is suspected to have broken prison rules) on an ad-hoc basis. There were 2,611 adjudications in the reporting year, compared with 2,216 in the previous year, an increase of almost 18%. Of the 2,611, 1,282 were proven and 80 sent to the independent adjudicator. This increase in the reporting year could be attributed to an increase in proactive strategies to reduce the supply and demand of illicit items. The Board had no concerns about the process when observed.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 HMP Cardiff has experienced population pressures for the majority of the reporting period, although operational capacity reduced toward the end of the period. This was possibly due to the measures taken on an estate-wide basis regarding early release, despite HMP Cardiff itself releasing very few prisoners under these schemes.

5.1.2 The year has seen the cell refurbishment project continue, with 25 further cells being completed on A4, which has completed this landing. A further 13 cells were completed on A3, with work on that landing continuing. The prison has requested further finance to complete the cell refurbishment on E wing, which was cancelled when the pandemic arose, leaving around 20 cells still to be completed.

5.1.3 The cell reclaim project has seen six new cells renovated, which has had a positive impact on overcrowding. Work also commenced on a reduced mobility cell on the F2 landing, which will house one prisoner who has reduced mobility and a buddy who will be able to assist them through their custodial journey. Work was completed on the anti-ligature cells on both C and D wings and these cells are now fitted with state-of-the-art safer custody furniture. **The Board acknowledges the progress made on refurbishing and reclaiming cells and particularly welcomes the introduction of a reduced mobility cell on F2.**

5.1.4 As in previous years, there have been ongoing issues with the heating and water systems in the prison, which are not surprising, given the age and condition of the establishment. The prison has responded within a reasonable time to address these problems but, on occasion, it appears that reports did not make their way from the wing to management, which delayed rectification. At these times, the Board was able to raise specific issues with senior management.

5.1.5 Whilst it is acknowledged that it is not possible to provide out-of-cell eating provision, due to a lack of space on wings, the Board, again, wishes to highlight the lack of decency in prisoners having to eat in shared cells with a shared toilet in the space.

5.1.6 The Board received nine applications (prisoners' written representations to the IMB) overall regarding food, a decrease from the 11 in the previous year. The main issue prisoners raised concerned portion sizes on certain wings, which we escalated to the senior management team and the kitchens' staff.

5.1.7 The meal-ordering system moved to Launchpad in spring 2025. Having previously been operated as an online system, the move to Launchpad went smoothly. The prison and the Board believe this is working well.

5.1.8 From the Board's observations, the kitchens continue to operate efficiently, with good oversight from management and a generally consistent contribution from prisoners working in that area. As in previous years, faulty equipment has caused issues and has, again, taken a considerable amount of time to replace or repair which, in turn, has put pressure on the service and staff. Overall, serveries have been observed as clean and tidy. On numerous occasions, the Board has reported

server workers not being appropriately attired, with head coverings, in particular, not worn consistently on some wings.

5.1.9 In respect of the overall **implementation of Launchpad across the prison, the Board acknowledges that this huge and complex task was managed well**, with staff consulted and trained and on-hand support provided during and after its introduction. We have monitored implementation and operation since its introduction. From a peer forum and a general complaints point of view, there is a high level of satisfaction from prisoners, with very few exceptions. The allocation of PINs (personal identification numbers, which are unique codes assigned to each prisoner so they can make phone calls) via the new system has been highlighted as an issue, resulting in an increase in IMB applications, but the prison's view is this, in the main, relates to policy rather than Launchpad.

5.1.10 Monthly reporting is carried out at Governor level to highlight bottlenecks or areas of concern. The prison is due to work with the benefits realisation team in October 2025 to what is going well and what may need greater scrutiny. The Board will continue to monitor this.

5.2 Segregation

5.2.1 During the reporting year, there were 292 prisoners in the care and separation unit (CSA) compared with 396 in the previous year. There are eight cells in the CSU, including three camera cells, an anti-ligature cell, a special accommodation cell (where items such as furniture, bedding and sanitation are removed in the interests of safety) and a cell allocated specifically for any 'dirty protests', which has been in use several times during the reporting period.

5.2.2 Prisoners were segregated in the CSU as a result of breaching good order rules, failing body scans or due to adjudications. Segregation, over the year, has mostly been short-term stays. However, one prisoner stayed much longer, under Rule 45, which allows for a prisoner to be separated from the rest of the population for reasons of good order or discipline, or for their own protection. Members are not routinely notified of UoF transfers to the CSU, even though this should be standard practice. Staffing in the CSU has changed over the period, but the Board has found them to be helpful and observed them interacting positively with those in the unit, which can be challenging at times with certain prisoners.

5.2.3 Daily visits are undertaken by Governors, the chaplaincy team and healthcare centre staff, while a GP attends three times a week. Board members frequently visit the CSU when they are on monitoring visits to engage with prisoners and help deal with any issues raised. These issues increased somewhat over the summer of 2025, possibly due to the new team in the CSU, and this was brought to the attention of the senior leadership team. The Board received nine applications from prisoners in the CSU during the reporting period which, apart from one, related to lost property and medication. **After highlighting these lost property incidents to the prison, a notice was issued to staff to improve procedures.**

5.2.4 A Board member observes the regular segregation monitoring and review group (SMARG) meetings, whenever possible. In addition, all prisoners segregated for seven days and longer are discussed in the multi-agency safety intervention meeting (SIM).

5.2.5 During the year, seven ACCT documents were opened by the CSU staff, whilst 30 prisoners were already on open ACCT plans before arriving at the unit. Segregation ACCTs were monitored by Board members, with daily records, observations and reviews identified as appropriate.

5.2.6 The ethnic minority population of HMP Cardiff tends to remain static at 18-19%. A total of 31% of the prisoners accommodated in the CSU in the reporting year were from ethnic minority groups, compared with 24% in the previous year in review. As recommended by the Board last year, data collection has been improved and this points to the figures being impacted by a small number of repeat offenders. The number of young adults (aged 18-25) was recorded as 22% of prisoners allocated to segregation, compared with 18% of young adults in the prison overall. Data has identified the impact on these figures due to repeat offenders.

5.2.7 Overall, the Board has not observed any significant concerns in respect of segregation practice at HMP Cardiff.

5.3 Staff and prisoner relationships, key workers

5.3.1 During the reporting year, the Board has seen an improvement in the atmosphere on most wings, as well as officer and prisoner relationships and the resolution of issues. However, applications about staff from prisoners have remained at the same level as last year, falling by just one, to 44, this year. The issues referred to include the general attitude of officers, alleged assaults, discrimination and harassment.

5.3.2 During the reporting period, key worker sessions totalled 4,758, an increase of 448 on the previous year. There were 37,803 projected key worker sessions for this period, giving a compliance rate of 12.59%, an increase of 1.5% on last year. The ratio of prisoners to key worker remains at 6:1.

5.3.3 Work continued throughout the year to develop and negotiate on a revised staffing profile, which would have supported the number of key work sessions, but this has been paused until at least January 2026. The Board will monitor its implementation.

5.3.4 The Board acknowledges that issues such as population pressures and regime changes can impact this service. However, **the benefits a well-functioning key worker scheme could bring are significant and the Board reiterates the priority this needs to be given by the prison.**

5.3.5 Weekly prisoner forum meetings are held, with good and frequent attendance by senior leaders and prisoner representatives. Board members observe the forum on a regular basis and report that they are interactive and positive, with prison officials responding to the issues raised.

5.4 Equality and diversity

5.4.1 Seven applications, categorised as relating to 'equality', were received by the Board during the year, an increase of one on the previous reporting year. These included allegations of institutionalised discrimination by staff, the continuing lack of availability of products for transgender prisoners (although the Board recognises this had been rectified by the prison during the year) and claims about being prevented from attending religious worship.

5.4.2 Equality peers are available on every wing to help and advise prisoners. Monthly meetings are held with the diversity peers to gather feedback, identify concerns and offer support. The prison also holds bi-monthly protected characteristic forums between prisoners and the heads of functions to discuss any issues relating to their protected characteristics (which include age, religion, race, disability, gender and sexual orientation, among others).

5.4.3 Any reports of discriminatory behaviour are dealt with through the discrimination incident report form (DIRF) process, information on which is provided on the wings. During the reporting period, 1 September 2024 to 31 August 2025, 70 DIRFs were received. The categories were race: 40; gender: 5; disability: 11; religion: 6; and sexual orientation: 8. Of these, six were withdrawn and four were forwarded to a more appropriate department. A total of 49 were not upheld, while 11 were upheld.

5.4.4 Bi-monthly DIRF assurance checks were held with the Governing Governor and a group of staff with protected characteristics to review the consistency and fairness in the responses to DIRFs. Additionally, the equality officer meets those who have submitted a DIRF weekly until they have received their response and for two weeks thereafter to ensure their wellbeing.

5.4.5 Prisoners who require personal emergency evacuation plans (PEEPs), which provide assistance for those who cannot get themselves out of the prison unaided in an emergency, are met by the equality department after their first night in custody to highlight any areas for support and to ascertain their personal details, such as ethnicity, nationality and any care needs. Prisoners who are identified as needing additional support to evacuate are met on a weekly basis to assess their wellbeing and ensure their medical needs are being met, with records noted on the digital prison service system. **The Board, again, expresses its concern about HMP Cardiff being generally unsuitable for prisoners with disability and/or mobility issues.**

5.4.6 Transgender prisoners are offered female products on their arrival in reception. They are met by a member of staff from the equality department soon after, who explains the support available in more depth, including the option to purchase items such as make-up or hair extensions via a catalogue, as well as female clothing. A local transgender case board is conducted within two weeks of their arrival to ensure their safety and decency. Weekly wellbeing meetings are also held with the equality officer to monitor ongoing support and ensure dignity is upheld.

5.4.7 Any new prisoners whose first language is not English will be provided, where possible, with a prisoner who speaks their language as a buddy whilst they are in reception. This is to help them feel less overwhelmed by having contact with someone who speaks their language. These prisoners are not used for translation purposes but merely for reassurance. There are also three foreign national green band prisoners, who speak Arabic, Kurdish and Polish as their native language and offer support to those with limited English proficiency. Bi-monthly meetings take place with these prisoners and the foreign national specialist officer, in the offender management unit (OMU), who liaises with the Home Office and immigration departments.

5.4.8 Staff regularly work with Launchpad to promote diversity and discuss relevant topics, or to engage prisoners in events. Staff have also given presentations to groups of prisoners to highlight under-represented groups and foster understanding, including on Gypsy, Roma and Traveller prisoners and Shavuot (a Jewish holiday).

5.4.9 Although the majority of written information for prisoners is in English, material in other languages is available to some degree and on request. During the reporting period, a Governor's notice was issued, highlighting the support and resources available in respect of the Welsh Language. There is also a 24-hour phone interpreting service, which can be accessed by officers.

5.4.10 Regular events were held to celebrate the diversity of both prisoners and staff, including Pride Month; staff attendance at Cardiff Pride; and the Pride flag being flown outside the establishment.

5.4.11 The proportion of staff from minority ethnic groups increased from 3.95%, at the end of August 2024, to 7.8% by the end of September 2025. This is a welcome development, although it still falls short of the equivalent surrounding community of 20.8%, according to the 2021 UK Census. Also, there are no minority ethnic officers above prison officer level. The Board is aware that some of the staff appointed over the last year may be facing visa problems, which HMPPS is aware of.

5.4.12 In June 2025, the prison issued a notice about a significant rise in homophobic comments aimed at staff. The Governor confirmed this type of behaviour would be challenged by everyone working at HMP Cardiff, to protect and support the staff group. Action taken included consulting with the Crimes in Prison Police liaison officer on how to proceed and report these crimes, reviewing the local incentives scheme policy and holding staff forums.

5.5 Faith and pastoral support

5.5.1 The prison chaplaincy comprises a full-time team, representing Muslim, Protestant, Catholic, Sikh, Jewish, Buddhist, Humanist and Pagan faiths. The chaplaincy provides an important aspect of the family liaison officer function and has been called on to do so during the reporting period, in terms of prisoners who were seriously unwell or who, sadly, died.

5.6 Complaints

5.6.1 The total number of internal complaints received by the prison for the reporting year, excluding healthcare and DIRFs, was 1,842, compared with 1,472 for the previous year, an increase of 25%. The majority of complaints focused on: staff issues, including bullying (232); canteen refunds (165); and incentives schemes/PIN phones (136).

5.7 Property

5.7.1 Complaints about the loss and subsequent handling of prisoner property have increased slightly, compared with the previous reporting period. From 1 September 2024 to 31 August 2025, 28 applications to the Board were received, compared with 22 in 2023-2024. This is not a significant increase, but the Board will monitor over the next year to see if this is an upward trend. It is also noted that of the applications received, a number of them were specifically about lost property when transferring to

or from the CSU. **The Board raised this with the senior leadership team and advice was subsequently provided to officers on this issue.**

6. Health and wellbeing

6.1 Healthcare general

6.1.1 There were 75 healthcare applications to the Board during the reporting year, with 30 focused on medication/prescriptions. This was a marked decrease on the number of applications in the 2023-2024 reporting year, when healthcare applications totalled 97, with 54 focused on medication and prescriptions. This fall may have been due to the **increased number of GP sessions available through the new provider and that GPs were able to review medication for new receptions within 24 hours.**

6.1.2 **Positively, the Board notes that the Health and Social Care Needs Assessment (H&SCNA) has taken place, and small working parties have been looking at the recommendations** and how to implement them. A total of 33 of the 36 actions were prioritised, and work is underway to implement these, with the remaining three to be addressed in phase 2.

6.1.3 The staffing position in healthcare overall was problematic, particularly in relation to nursing staff and the pharmacy. On a few occasions during the reporting year, only three or four nurses were available, instead of seven registered professionals, which include pharmacy technicians. This has been attributed to staff sickness, poor recruitment and retention, and a delay in security vetting. In total, the core nursing staff, including managers and substance misuse nurses, should be 23.5, plus seven healthcare support workers. At the end of August 2025, 16.2 members of the core nursing staff were employed and working, plus six healthcare support workers. An ongoing recruitment plan has increased the nursing workforce by 4.4 FTE (full time equivalent staff).

6.2 Physical healthcare

6.2.1 **Both the Board and the prison are concerned about staffing, already referenced above, which remained a major problem, particularly the lack of nursing availability. Vetting was, again, an issue in recruiting and staff starting.** In March 2025, in conjunction with HMP Cardiff, an 'escalation guide' was developed to ensure prison and nursing staff in HMP Cardiff and Cardiff and the Vale Health Board senior management were aware of the core nursing staffing situation on any day.

6.2.2 **The Board is particularly concerned about nursing staff not being profiled to attend reception until the afternoon.** This can result in recall or transfer prisoners, who often arrive in the morning, having to remain in reception until nurses are available to do the necessary health checks. In addition, we are also concerned that only one registered nurse and a health care assistant were available during the evening and night, which was also noted in the H&SCNA.

6.2.3 Following the H&SCNA, improvements appeared to have been made to the discharge summary information between HMP Cardiff, the healthcare centre and community GP services. Environmental improvements have also been made in areas to improve treatment rooms in line with infection, prevention and control measures. Some public health screening services have started.

6.2.4 Positively, there are now 17 GP sessions a week and a virtual GP service is provided for two hours each day on a Saturday and Sunday to support the reception process and with prescriptions. The Board is pleased to note the Cardiff and Vale out-of-hours service (CAV 24/7) is available to the nursing team, either for advice or, if required, specific appointments. This started as a pilot project in April 2025 and, following a review, became a permanent service. The Board has been advised that, where appropriate, this service has reduced the length of time prisoners and escort staff are out of the prison and reduced the time to be treated.

6.2.5 During the reporting period, 6,937 GP appointments were provided, with an average waiting time of 17 (working) days for a GP appointment and a did not attend rate (DNA) of 20%. For dental appointments, which remain an emergency service only, a total of 1,775 appointments were offered during this period; waiting times were 15 days, with a DNA rate of 24%. For the optician service, 221 appointments were provided, with an average waiting time of 28 days and a DNA rate of 36%. Appointments can now be made via the Launchpad system and reminders of appointments are sent out via Launchpad. The Board was pleased to note access to a physiotherapist is available on a needs-led basis.

6.2.6 The requirement for prison staff to escort prisoners to hospital has continued to impact the establishment's regime, including a four day 'lockdown' in August 2 when only essential workers were allowed to go to work, due to reduced staff levels. The need for emergency or urgent escorts can also impact on scheduled hospital appointments, which has led to some cancellations. The healthcare management team and the prison have introduced a process whereby, if escorts do need to be cancelled, the decision will be taken jointly to ensure critical appointments are prioritised.

6.2.7 Robust arrangements should be put in place to balance the clinical need for prisoners to be seen at hospital with the ability of the prison to function effectively and ensure the overall population receives adequate time out of cell.

6.2.8 The pharmacy team also remains short staffed. Two part-time pharmacists have been appointed, as a shared post with the prison and the GP surgery. A pharmacy assistant has been appointed, but has not yet taken up the post, due to a delay in security vetting. At times of particular short staffing, the team relies on support from the hospital pharmacy service. The team has no access to administrative support. However, in line with recommendations of the H&SCNA, two pharmacy technicians have been transferred to the pharmacy team from the healthcare team.

6.2.9 The prescribing pharmacists job share so have been unable to prescribe, unless arrangements are made to check the prescribing. This should be addressed when the team is fully staffed and should be seen as a priority.

6.2.10 The Board has been informed that **a low percentage of prisoners have 'in possession' medication, but that they have nowhere lockable to store it.** Lockable cabinets were provided on one wing some time ago, but the Board were told this proved difficult to manage. **The prison and healthcare centre management should review this.**

6.3 Mental health

6.3.1 During the reporting period, the mental health team was also peer reviewed by the Quality Network for Prison Mental Health Services. The review found the team met 71% of standards fully, with practice around discharge and transfers judged as 'gold standard'. Prisoners interviewed spoke positively of the team as being helpful and respectful in their interactions and they stated they felt listened to. **The Board wishes to acknowledge this recognition of the mental health team.**

6.3.2 The mental health team continued to triage only those asking to see a mental health worker during reception and secondary screening new referrals. These, together with those referred later in their custodial stay, led to an average of 203 referrals to the team per month; all are seen within 72 hours. This is supported by the duty worker system, which can see all new receptions and prisoners experiencing crisis, as have someone attend all new ACCT (assessment, care in custody and teamwork) meetings. The Board received 11 applications specifically in relation to mental health, often about the delay in being seen. This concern was echoed by prisoners attending the weekly prisoners' forum: *'The wait time for mental health is too long.'*

6.3.3 In general, staffing in the mental health team is said to be satisfactory, although the Health and Social Care Needs Assessment (H&SCNA) noted it was low compared with other, similar prisons. A major concern of the Assessment was there should be access to seven psychiatric sessions a week; however, towards the end of the reporting year, only six psychiatric sessions a week were available.

6.3.4 The longest wait for a primary care psychiatry appointment was 10 weeks, with a 26-week wait for new assessments of ADHD clients. The team prioritised taking into consideration the churn of prisoners in HMP Cardiff who may have been received and discharged, and received again, within that 26-week waiting period. A total of 12 prisoners were transferred to psychiatric facilities in the reporting year, and the wait for transfer ranged from six days to 184 days, with seven of the transfers being completed within 21 days of the first recommendation being completed. **The Board remains concerned about the length of time it takes for some prisoners to be transferred to a suitable placement.**

6.3.5 **The Board welcomes the information that mental health team staff have all received, or are receiving, training in cognitive behaviour therapy, dialectical behaviour therapy and trauma-informed care to improve the services they can offer to prisoners.**

6.4 Social Care

6.4.1 There is little evidence that social care agencies are working with HMP Cardiff to provide support, although the Board is aware that attempts have been made to involve those agencies. An HM Inspectorate of Prisons (HMIP) report noted there was a lack of understanding among prison staff about the difference between social care needs and healthcare needs, whilst the H&SCNA noted there was no formal process for social care in place between the prison and local authority. **The Board believes this be reviewed and a robust process put in place.**

6.5 Time out of cell, regime

6.5.1 Time out of cell for non-workers who are on the standard (middle) level of the prison's incentives scheme is now 3.5 hours. This includes half an hour of time in the open air (TIOA). The establishment's regime is under review, with a return to an hour of TIOA to be included for all men.

6.5.2 During the reporting period, 530 employment or activity places were available. Those attending an allocated activity placement have 3.5 hours out of their cells in the morning and three hours in the afternoon on most weekdays, which, again, is unchanged from the previous reporting year. All employed men receive 1.25 hours of association in the evening, except for Tuesdays and Fridays.

6.5.3 During the core day (the standard daily timetable that structures a prisoner's routine), prisoners attend gymnasium sessions, participating in a range of activities, including weights, football, a weight-loss club, and a healthy living group. Competitions are run throughout the year, along with inter-wing competitions on the sports field. At weekends, prisoners who are not allocated an activity can attend a 1.25 hour session, morning or afternoon, with each one allowing for 35 prisoners to attend. All men have the opportunity to shower on completion of all gym sessions throughout the week.

6.5.4 At weekends, all prisoners are out of their cells for an hour of association, both morning and afternoon, along with one 30-minutes period of exercise; additional time is available for the collection of meals and any prescribed medication. Enhanced-level prisoners (which means they are on the top level of the incentives scheme) are out of their cells, morning and afternoon, for the full association period, which would equate to around three hours.

6.5.5 Enrichment activities are facilitated on some units, including a games or chess club and smaller units supporting substance misuse; those with more complex needs complete these activities in addition to the association periods (when prisoners are unlocked from their cells and allowed to mix with others in a communal areas).

6.6 Drug and alcohol rehabilitation

6.6.1 The drug rehabilitation service continues to be managed by Dyfodol, a charity that supports prisoners with substance misuse issues. The caseload is around 180, but another 400 other interventions take place, including specific groups to address alcohol misuse. Staffing is problematic. The team should consist of one team leader, seven case workers and one brief intervention worker. However, it actually consists of one team leader and four case workers, which has been the situation for much of the reporting year. This has reduced their ability to see referrals and the duty worker system has had to be suspended, although staff continue to attend all ACCT meetings and reviews. Prisoners are able to refer themselves for support via the electronic Launchpad system. The team receives around 35-40 self-referrals a month, with most seen within four or five days.

6.6.2 HMP Cardiff can use rehabilitative interventions during adjudications (disciplinary hearings held by a Governor if a prisoner is suspected to have broken prison rules) to offer additional support to those found to have misused drugs or alcohol illicitly. This is, on average, around four per month. The Board has been informed that only one prisoner refused to engage with the intervention. Not all

Governors have used the option of a rehabilitative adjudication, and **the Board welcomes the work being undertaken to inform those Governors of the support available to prevent further reoffending.**

6.6.3 From the Board's observations, the incentivised substance free living wing (ISFL) continues to provide positive outcomes. An extra landing has been added for graduates and for prisoners waiting to join the programme, with the added support of a peer who has already completed the programme. Staff's skills have been developed to assess men with more complex needs, including a significant history of substance misuse and other potential vulnerabilities. These assessments for ISFL are carried out with support from multiple agencies to ensure informed decision making, with the belief the individuals are likely to succeed.

6.6.4 A naloxone kit, which is a medication that can quickly reverse the effects of an opioid overdose, was offered to all prisoners on the Dyfodol caseload prior to release. One-to-one peer work was carried out beforehand, with the aim of encouraging those individuals to take the kit on release. This has increased the number of kits taken.

6.6.5 Use of drugs continues to be problematic, with levels fluctuating over the reporting period. The majority of drugs found are synthetic cannabinoid receptor agonists, or SCRA (which mimic the effects of cannabis but are usually much stronger and more unpredictable), previously referred to as Spice. The number of instances of prisoners found to have been under the influence of drugs has ranged from two in October 2024 to 11 in May 2025. These prisoners were offered support from Dyfodol.

6.7 Soft skills

6.7.1 The Samaritans' Listener scheme (where trained prisoners can offer confidential emotional support to other prisoners) has continued to provide an important resource to men at HMP Cardiff who may be struggling with thoughts of suicide and/or self-harm. The prison's daily reports confirm that Listeners are regularly offering support, often late into the evening or early hours of the morning.

6.7.2 In 2024, HMP Cardiff became a pilot site for the Here 2 Help peers, whereby trained peer mentors aim to support the emotional resilience of prisoners throughout the prison. In our previous report, we expressed disappointment that the central funding for this project was curtailed after March 2025. **The Board wishes to acknowledge the decision taken by the prison to retain this valuable support.**

7. Progression and resettlement

7.1 Education, library

7.1.1 Prison learning and skills in HMP Cardiff is provided through funding from the Welsh Government and is delivered following the policy 'Better Learning, Better Chances' (August 2024). A local education, skills and work (ESW) strategy has been produced, with a needs' analysis.

7.1.2 Progress is monitored through a quality framework, which records performance against key performance indicators. The dashboard below (Fig. 1) shows performance against the key indicators and shows good progress across the indicators. **The Board welcomes the overall positive performance and members have observed good practice in education and work activities throughout the year.**



Fig 1

7.1.3 During the previous reporting period, there was an external inspection by HM Inspectorate of Prisons (HMIP), plus two internal reviews of education and training by HM Prison and Probation Service (HMPPS), based on Estyn² expectations. An action plan was produced to address the findings of weaknesses in teaching and the curriculum in some areas and in the reporting processes that monitor the impact of the curriculum changes for some learners. Progress is monitored via a quality development plan and the majority of the areas identified in the plan (68%) show

² Estyn is Wales' equivalent of HM Inspectorate of Education in England.

progress against the objectives. Staff shortfalls have been identified as a factor delaying progress in some sub-sections.

7.1.4 During the reporting year, it was reported that 76% of prisoners were in purposeful activity, on average, each week, with 68% in at least half-time activity. In an average week, 127 prisoners were in education, 188 in prison jobs, 75 in industries, and an average 20 in interventions or other activities. The dashboard (Fig. 1, above) shows that an overall success rate of 81.6% was achieved in the reporting year for the Welsh Government target of 5,000 course starts.

7.1.5 The Librarian retired during the reporting year, and a replacement has been appointed by the Council Library Service, although they are not yet in post. The service has been maintained by the library officer, and orderlies (trusted prisoners who take on work to provide services that contribute to the running of the prison) have been maintaining the mobile library service. A major move of the library from the existing location to a larger workshop is planned.

7.2 Vocational training, work

7.2.1 The employment hub has been realigned and moved to resettlement. It covers all employment pathway staff, including the employment lead, Career Wales, Department for Work and Pensions (DWP), job coaches, JobCentre, Work Ready, and the ESW assessment hub. The aim is to ensure that all employability aspects are under one umbrella and to minimise a previously fragmented approach. An employment, training and allocation (ETA) board has been established to ensure prisoners are allocated to the relevant ESW pathways and vocational training and support required where identified.

7.2.2 Essential services are carried out by prisoners in supporting the daily operation of the prison, including the kitchen, laundry and waste management. Other work areas include cleaners, painters, decency champions and wing peers. There were also employment opportunities in printing and canteen stores. Qualifications were available in the basic IT/print workshop in poster design and the use of Microsoft programmes. The hospitality workshop closed in May 2025, due to staff retirement, but is due to re-open following successful recruitment. This includes a planned development to include all aspects of catering, including the kitchens and serveries roles, with training towards qualifications. **The Board welcomes this proposal and will monitor it when it is implemented.**

7.2.3 Employment links were maintained with Balfour Beatty, Wilmot Dixon, Future Skills Programme and Fulcrum Scaffolding, with funded training continuing in partnership with the DWP, People Plus, React, plus funding from the Welsh Government for warehousing, traffic management, rail, roofing, basic construction skills and the CSCS (construction skills certification scheme) cards, which prove that an individual has the appropriate training and qualifications to work on a construction site. A construction fair was held in May 2025, which attracted over 20 construction employers, as well as Iceland and Greene King. To ensure appropriate employment links are develop, a survey of prisoners' employment needs was carried out to develop a needs' analysis report. Employment links are developed via an employment advisory board, which includes the head of ESW, regional employment broker, Careers Wales and the DWP.

7.2.4 The Board is aware of the poor condition of the estate in some areas used for ESW activities and the closure of buildings marked for demolition. It is also aware of the difficulties in maintaining staff levels, due to retirements and the protracted periods to recruit and security check replacements for staff. The Board has noted that this is a factor in maintaining continuity of service and delaying developments.

7.2.5 A reading strategy is in place to support prisoners with literacy issues. A reading event is held monthly in the visits hall, linked with Bang Up Books (a not-for-profit company that provides free, brand-new books to prisons), Prison Reading Group (a charity that promotes reading for pleasure in prisons) and Raising Readers (a prison-run initiative to help prisoners stay connected to their children through books). There are also links with Cardiff University, which is working in partnership to enhance the reading events. The Shannon Trust charity services are available to support low-level readers, although the Board notes there are challenges to retain trained peer mentors, due to transfers. To address neurodiversity needs in the strategy, books are provided regularly to the CSU, as well as to the vulnerable prisoner wing and the first night wing.

7.2.6 Two additional English for speakers of other languages (ESOL) classes have been delivered to cope with the demand of international prisoners. Literacy and numeracy is embedded in all courses and the increase in ESOL classes has resulted in it being the main provider for literacy and numeracy courses.

7.2.7 A wellbeing hub was opened that includes art and music activities. A wellbeing course is in development, which will include mental health, stress management, emotional intelligence, resilience and mindfulness. These will be provided alongside physical health strategies covering physical activity, nutrition and healthy sleep. The hub will also incorporate financial wellbeing, social connection, building positive relationships and an understanding of the broader social determinants of health and managing workloads. Aspects of wellbeing will also be incorporated into wider education and training activities. **The Board welcomes the opening of the wellbeing hub and the proposed developments and will monitor it.**

7.3 Offender management, progression

7.3.1 Resettlement services are provided by a range of providers, in addition to HMPPS. These include St Giles Trust, Forward Trust, Dyfodol, DWP and Invisible Walls (Family Services). Vacancies identified in last year's report have been addressed and have not had an impact on delivering key functions.

7.3.2 Over the reporting period, there were 2,418 releases from HMP Cardiff. The demand for resettlement support was, therefore, high. HMP Cardiff's prisoner demographic means that around 50% of the population are un-convicted and are not assigned an offender manager. Whilst sentenced prisoners are routinely transferred to HMP Parc, the well-documented national population pressures at that establishment significantly impacted HMP Cardiff. High numbers of prisoners, from the southwest and Midlands, were also displaced to HMP Cardiff. This, as well as temporary early release schemes to help reduce overcrowding, such as SDS40 (which allows eligible prisoners serving standard determinate sentences to be released at 40% of their term instead of 50%) and HDC365 (an extended home

detention curfew scheme, allowing eligible prisoners to be released up to 12 months early under electronic tagging and curfew conditions to ease overcrowding) became part of the usual resettlement processes and added more pressure to the delivery of resettlement services.

7.3.3 Most prisoners have a resettlement plan and many prisoners benefit from joint meetings with their POM/COM and resettlement worker prior to release via videolink. All prisoners have appointments with DWP prior to release, with advice given and appointments made with appropriate Job Centres. The metric for recording these handover meetings, however, applies to prisoners between 8.5 and 7.5 months prior to release. During the reporting year, 10 meetings were recorded, although additional, untracked support was also offered to prisoners.

7.3.4 Through the employment hub, the prison employment lead manages securing ID and bank accounts for prisoners, whilst CV writing and work-ready training are provided by ESW staff. 'Through the gate support' services are also provided, with appropriate community referrals/appointments made by Dyfodol, Invisible Walls and the mental health/neurodiversity support teams, prior to release.

7.3.5 During the reporting period, 79% of the prisoners released had accommodation on the first night of release (84% in previous year). Also during this time, 21% of prisoners released, subject to supervision, were in employment six weeks after release (24% in the previous year) and 39% after six months. However, these aggregate figures mask a significant range across the reporting period. For employment six weeks after release, the range is 11%-29%, and for employment after six months, it is 20%-63%. This may indicate the national volatility of the job market.

7.4 Family contact

7.4.1 Invisible Walls is contracted to deliver family support at HMP Cardiff. In addition to running the regular social visits arrangements, this-not-for profit organisation arranges and hosts additional family days (which bring together prisoners and their families outside of their statutory entitlement to social visits, usually in more informal settings). It also organises community wellbeing days for those who do not receive family contact and specific events such as 'School Zone', bringing together prisoners, their children and their teachers. Board members observe these events and activities and consider them to be well supported and a positive experience for prisoners and their families.

7.4.2 The most significant development in terms of family contact during the reporting period has been the repurposing of the former Clink restaurant, outside the prison gates, as a bespoke visitors centre. Whilst this redevelopment has taken a considerable period of time to realise, due to practical and staffing issues, the Board commends the prison and Invisible Walls for taking the initiative to establish this facility, which has been very much welcomed by visitors.

7.4.3 Following representations made by an IMB member to the responsible Governor, the prison advised that they and Invisible Wales were looking to make social visits more inclusive for neurodivergent prisoners and visitors. This could include introducing a sensory visits room next year, which the Board recognises as a positive development.

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	5
Total number of visits to the establishment	288

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	33	28
B	Discipline, including adjudications, incentives scheme, sanctions	18	40
C	Equality and diversity (including religion)	6	7
D	Purposeful activity, including education, work, training, time out of cell	27	24
E1	Letters, visits, mail, telephones, public protection, restrictions	34	53
E2	Finance, including pay, private monies, spends	23	16
F	Food and kitchens	11	9
G1	Health, including physical, mental, social care	42	45
G2	Health (prescriptions/medication)	55	30
H1	Property within the establishment	15	20
H2	Property during transfer or in another facility	7	8
H3	Canteen, facility list, catalogues	15	18
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	24	35
J	Staff/prisoner concerns, including bullying	45	44
K	Transfers	9	9
L	Miscellaneous	22	20
L1	Complaints system	8	12
	Total number of applications	394	418

Annex A

Service providers

A range of public and commercial providers are responsible for delivering services within the prison:

- Health services: Cardiff and Vale University Health Board
- Learning and skills: HM Prison and Probation Service in Wales, funded by the Welsh Government
- Escort services: GeoAmey
- Site maintenance: Amey
- Substance misuse service: Dyfodol
- Bereavement counselling: City Hospice
- Visitors' centre/family support: Invisible Walls
- Resettlement support: St Giles, Forward Trust and HMPPS Wales Probation Resettlement Team
- Listeners' scheme: Samaritans
- Literacy support: Shannon Trust



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