



Annual Report of the Independent Monitoring Board at HMP/YOI Lewes

**For reporting year
1 February 2025 to 31 January 2026**

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Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

The Optional Protocol to the UN 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 Lewes is a reception and resettlement category B local prison for male adult and young adult prisoners (aged 18 to 21). It mostly serves the courts of East and West Sussex and holds sentenced and unsentenced prisoners and prisoners on remand (being held until their trial or subsequent sentence hearing) in categories B and C. It also takes some category D prisoners returned from open conditions and holds foreign national prisoners whose prison sentences have been completed but who are then detained under Home Office powers prior to deportation.

The prison's operational capacity (maximum accommodated without risk of disruption due to overcrowding) at the end of January 2026 was 624¹. At that time, the prison held 603 prisoners.

The prison is located in Lewes, the county town of East Sussex. It has seven residential wings, plus an inpatient healthcare unit and a care and separation unit used to segregate prisoners. The main buildings, with five residential wings, have been in use since 1853. A modern block, with two residential wings, opened in 2008. Details of the accommodation are as follows:

- A wing: a general wing for drug recovery, housing up to 125 prisoners.
- B wing: the care and separation unit (CSU) for segregating prisoners, with 16 cells, including two where a prisoner can be kept under constant supervision by a member of staff to reduce the risk of suicide or self-harm, and two special accommodation cells where items such as furniture, bedding and sanitation are removed in the interests of prisoner safety.
- C wing: a general wing, housing up to 150 prisoners.
- F wing: for vulnerable prisoners, housing up to 147 prisoners; also used occasionally to house low numbers of newly arrived prisoners when the early days centre (L wing) is full.
- G wing, also known as Minerva wing, an incentivised drug free living unit housing up to 23 prisoners.
- K wing: a designated neurodiverse wing housing up to 22 prisoners.
- L wing: the early days centre (EDC) for newly arrived prisoners, with single cells housing up to 80 prisoners.
- M wing: a general wing of single cells housing up to 94 prisoners.
- Healthcare centre (HCC), an acute inpatient care unit for up to nine prisoners.

There is a large, well-equipped gym and a second sports hall for prisoner use, an outdoor sports pitch, a multi-faith centre, two education areas, a library, various workshops and a visits hall.

The main providers of services to the prison were: Serco (transport to courts and local prisons); Gov Facility Services Ltd/GFSL (facilities' management in prisons across southern England); DHL (ordering and delivering prisoners' purchases); Bidfood (kitchen supplies); East Sussex County Council (library services and social care); Milton Keynes College (education); HM Prison and Probation Service;

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.

Southdown Housing; Jobcentre Plus; and Pact (Prison Advice and Care Trust), providing family support services

There are three contracted providers of health and social care:

- Practice Plus Group (PPG) is contracted via NHS commissioners to deliver primary care, including GP, inpatient, substance misuse, mental health, pharmacy and crisis response services. Subcontractors provide dental, optician, podiatry and physiotherapy services.
- East Sussex Healthcare NHS Trust, in partnership with PPG, provides sexual health clinics and screening programmes, such as for abdominal aortic aneurysm, bowel cancer and diabetic retinopathy.
- Agincare is contracted through East Sussex County Council to deliver social care services to a low number of prisoners.

A number of voluntary and other organisations provide services. These include:

- Samaritans
- SSAFA (the Soldiers', Sailors' & Airmen's Families Association)
- National Association of Official Prison Visitors
- Prison Family Support (local charity that works to reduce the impact imprisonment has on children of offenders in custody at HMP Lewes)
- Sussex Pathways (charity that works in prisons and communities to help reduce offending behaviour)
- Prison Fellowship (Christian-based charity supporting prisoners)
- Advocacy People (charity that supports prisoners with healthcare complaints)
- LOSRAS (Lewes Organisation in Support of Refugees and Asylum Seekers)
- Change, Grow, Live/CGL (charity that helps people change the direction of their lives, grow as individuals, and live life to its full potential)
- Reconnect (care after custody service that seeks to improve continuity of care for people with an identified health need)
- Interventions Alliance (supports people to overcome barriers and foster personal wellbeing)
- Stone Pillow (homeless charity)
- The Accommodation for ex-Offenders (AfEO) programme (supporting ex-offenders to access private rented housing)
- Seetec (Commissioned Rehabilitative Services contracted to provide careers advice and prepare learning plans).

3. Key points

3.1 Main findings

Safety

The Board considers that the prison's reception and induction processes work well but is concerned that the requirement at times to accept prisoners arriving late in the evening can present safety risks and cause stress to prisoners and staff alike.

Prisoner self-harm has reduced by around one third, a welcome reversal of the upward trend of recent years, but the Board still monitors unsatisfactory practice with regard to ACCT processes, designed to better support at-risk prisoners.

The level of violence is generally stable and given the improved regime shows a significant decline in incidents per unlock hour. Prisoner on prisoner assaults rose by 7% and assaults on staff by one case, to 80 incidents. The fall of 13% in the number of recorded use of force incidents is welcome.

The Board recognises the efforts made by the prison to prevent the entry of illicit items, but is concerned that illicit drugs remain too readily available on the wings.

Fair and humane treatment

The Board recognises the prison's efforts to maintain an effective heating and hot water supply, but the current arrangements are unsatisfactory, unreliable and costly.

The Board notes the increase in the number of recorded key working sessions but also the slow progress to deliver key work in line with national standards.

Prisoners submitted 1,343 formal complaints to the prison in 2025, and the Board notes that complaints have increased by around 50% in just two years.

Health and wellbeing

The Board welcomes the increase in the number of hours that prisoners are out of cell on weekdays, and notes how this helps to promote a better atmosphere overall.

The Board welcomes the reduction in healthcare waiting times, notably for psychiatry, but remains concerned that prisoners with acute mental health needs who need to move to a secure mental health facility can face long delays because of limited provision of such facilities nationally.

The Board notes that healthcare concerns made up the largest proportion of applications for support made by prisoners to the IMB, 25% (107) of the total.

Progression and resettlement

The Board is disappointed to note the 60% budget reduction for the education service made last year and the negative impact this has had on the range of provision for prisoners.

The prison's offender management unit (OMU) continues to perform well in the face of sustained legislative change and of increasingly complex release arrangements.

The Board is concerned about the impact that releasing prisoners to no fixed abode can have on the wellbeing of the prisoners involved and on the wider community.

3.2 Main areas for development

TO THE MINISTER

- The Board is concerned that illicit drugs are too readily available in the prison. What additional measures might the Minister consider to help reinforce and strengthen the prison’s responses to this ongoing problem?
- The Board is concerned that too many prisoners are released to no fixed abode. Will the Minister work with colleagues across government to help improve community provision and support for such prisoners?

TO THE PRISON SERVICE

- The Board is concerned that the prison at times is required to accept prisoners arriving late in the evening and about the safety risks and stress that this can cause. What new measures might the service consider to help alleviate this ongoing problem?

TO THE GOVERNOR

- The Board considers that practice with regard to ACCT processes, designed to better support at-risk prisoners, could be strengthened. Will the Governor consider new measures to help improve practice in this area?

3.3 Responses to the last report

TO THE MINISTER	
Issue raised	Minister’s response
Will the Minister work with government colleagues to ensure that the forthcoming Mental Health Bill identifies appropriate measures to improve care for prisoners with severe mental illness, including more provision in secure units, and ensure that these measures are resourced and delivered with the minimum of delay?	I acknowledge the Board’s concerns: prisons are not appropriate environments for individuals with severe mental illness. The proposed expansion of mental health services within custodial settings is primarily driven by the increasing number of individuals entering detention with complex mental health needs and comorbid conditions. In response, the Commissioning Team and Health Provider are collaborating to strengthen support, specifically through the Early Days in Custody model. Additionally, the recommendations of the 2024 review by the Centre for Mental Health Studies inform discussions with the Health Provider regarding staff increases. The Mental Health Bill introduces a statutory time limit of 28 days for the transfer of individuals from prison and other places of detention to hospital. To support this, NHS England is implementing measures to overcome barriers, while the Mental Health and Justice Strategic Advisory Group offers clinical leadership, advice and oversight across the pathway to enact this reform. The plan is expected to be rolled out 18-24 months following Royal Assent.
TO THE PRISON SERVICE	
Issue raised	Response
Will the service explore all options to enable the quickest	A study is underway to determine the most effective solution, whether replacing the gas main or installing a centralised boiler plant, based on sustainability, efficiency

possible replacement of the prison's heating and hot water system and ensure, in the interim, that the Governor receives adequate resources to keep prisoners warm in winter?	and speed of delivery. However, maintenance demands significantly exceed the funding available and HMPPS must prioritise works, focusing on risks to life, capacity and decency. In the interim, Government Facilities Services Limited (GFSL) has upgraded the initial emergency installations with more efficient temporary boilers, ensuring a more consistent supply of heating and hot water at HMP/YOI Lewes.
Will the service work with NHS colleagues to boost investment in mental health services in the prison and review the adequacy of psychiatry provision?	The unexpected departure of the previous Consultant Psychiatrist led to a temporary gap in service provision. However, a substantive Consultant Psychiatrist commenced work in October 2024. During the interim, Consultant cover was provided, with urgent cases prioritised to ensure continuity of care. When in post, the newly appointed Consultant undertook a review of the waiting list, which had grown during the interim. This led to a reduction in waiting times, with urgent cases now seen within two working days. Service delivery is now meeting the standards of the service specification. Additionally, NHS commissioners are scheduled to undertake a health needs analysis to assess whether the current mental health provision aligns with the needs of the prison population at HMP/YOI Lewes.
TO THE GOVERNOR	
Issue raised	Response
Will the Governor renew efforts to reduce incidents of self-harm which have gone up by around one third over the past two years?	From 1/2/25 to 31/1/26, the prison reduced self-harm by 221 incidents compared with the previous reporting period (432 incidents compared with 651). This is a 34% reduction in self-harm in 2025/26.
Will the Governor prioritise the development and implementation of the prison's remand strategy to better support the needs of remand prisoners?	The remand strategy is fully implemented at HMP Lewes and was recognised in the HMIP inspection (June 2025) as positive practice: ' <i>...remanded prisoners could now expect help on arrival for their immediate needs, from dedicated oversight by a prisoner offender manager, an initial meeting with a pre-release team representative, assistance from third sector providers and support leading up to their release... these changes marked a clear and positive shift since the previous inspection.</i> '
Will the Governor act to reverse the fall in prisoner attendance at education that's been seen since the improvement in the prison's regime in late 2024?	The new regime introduced in November 2024 created some conflicts in the regime that impacted the attendance into education. These have been reviewed and attendance has steadily improved, averaging to just under 70% for the year against allocation. We have seen proactive work in identifying prisoners' educational needs and a much-improved picture in progressing prisoners in English and maths.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

4.1.1 Prisoners enter and leave the prison through reception. After reception, they spend their first days in the early days centre (EDC), which occupies L wing. A new operational Governor took responsibility for reception and the EDC in 2025, and the Board recognises how the progress of recent years has been maintained. The health assessment process and management of medication for new arrivals have improved. The Board welcomes the appointment by PPG of a new twilight nurse and extra night nurses in reception to help alleviate delays, and also the new healthcare ‘navigator’ role, which helps to support the new prisoner induction process.

4.1.2 The prison’s leaders have raised concerns with the prison service about the pressures faced by reception when prisoners arrive late in the evening. The Board shares these concerns. Such arrivals, often of prisoners remanded from courts beyond HMP Lewes’ main catchment area, can require reception and the EDC to be open late into the night, and at times until the early hours. Parts of the induction process can thus be delayed until the following day. All of this can be tiring and stressful for prisoners and staff, and raises safety concerns. The Board notes the responsible Governor’s efforts to strengthen liaison across the agencies involved, from the courts to the transport provider, and to support better decision-making through improved information management. An additional member of staff has also been detailed to work nights during high-risk court days Monday to Friday to support staff and prisoner safety in processing new receptions and supporting new arrivals.

4.1.3 A group of EDC-based prisoners are trained to support new arrivals through their induction. They are called Insiders, and their work has extended to other wings to help prisoners relocate from the EDC. The Board has monitored their work, including at meetings where they are able to offer insight into how things work, and it commends the approach. Each newly arrived prisoner is also seen by a prison chaplain the day after arrival to review their faith and pastoral care needs.

4.1.4 IMB members heard fewer concerns this reporting year from new arrivals about not getting a first night phone call, essential kit and items such as vapes, tea bags, phone credit and toiletries. These are now provided in a ‘goody bag’, which prisoners pay for. However, once on the EDC, time out of cell can be limited because new arrivals have not yet taken up activities: EDC prisoners are generally in their cell after morning domestics until lunch, unless they have assessments. The Board continues to monitor instances when prisoner identification cards located outside EDC cell doors are missing or incorrect, regarding this as a safety risk.

4.2 Suicide and self-harm, deaths in custody

4.2.1 During the Board’s reporting period, 432 self-harm incidents were recorded, a welcome reduction of around one-third from the previous year (651 incidents), and reversing the upward trend of recent years. The Board notes how a small number of prisoners with complex needs can push up self-harm figures: one prisoner accounted for 21 out of 49 self-harm incidents in November 2025.

4.2.2 The assessment, care in custody and teamwork process (ACCT) is designed to focus care and attention on prisoners at risk of self-harm and suicide. The number of ACCTs opened over the Board's reporting period was 536, a fall of 20% over the last two years. The Board has monitored how the prison has moved to single case management for ACCTs, which helps build relationships between case managers and prisoners and gives greater consistency to ACCT reviews and support plans. A newly-refurbished room is available for off-wing ACCT reviews. The Board welcomes these improvements, but continues to note that ACCT processes are not always managed/recorded in a timely way.

4.2.3 The cases of prisoners at risk of self-harm or suicide are considered at a daily triage meeting of the safety team and the weekly safety intervention meeting (SIM), which focuses on complex cases. The Board has monitored these meetings and found them well supported by wing staff, the offender management team, healthcare, chaplaincy and the safety team. The number of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) has increased to an average of eleven a month, two more than last year.

4.2.4 There were three deaths in custody during the reporting period. One was apparently self-inflicted and one an apparent misadventure. All three are awaiting the conclusions of the coroner's court. The Board considers that the actions of prison management and staff following these deaths in custody were compassionate and sensitive.

4.3 Violence and violence reduction, self-isolation

4.3.1 The number of incidents of prisoner-on-prisoner violence recorded over our reporting period was 207, up by around 7% compared with 2024/25 (194). The number considered as serious fell from 28 to 18. As reported (6.5 below) the Board notes that the improved regime has seen the weekday average for time out of cell more than double over the recent period to around eight hours and so the prison's figures show a significant decline in prisoner-on-prisoner violence per unlock hour.

4.3.2 The number of assaults by a prisoner against staff was 80, one more than the previous year: 18 of these were considered as serious, up from 12. These figures illustrate the difficult and sometimes dangerous situations that prison officers can face, and the Board notes the conscientious and committed ways in which many staff have been observed responding to incidents. The Board recognises how the understanding of what might trigger an assault on staff is evolving from seeing incidents as challenges to staff authority or instruction and instead seeing some as reflecting the poor mental health of a prisoner and neurodiversity-related needs.

4.3.3 The number of violence-free days fell to 165 from 180. The Board notes that all violence reduction investigations were completed and that the challenge support and intervention plan process (CSIP) is being used to help manage the behaviour of prisoners who pose a risk of harming others. The CSIP referral figure was 822, broadly similar to the number in 2024/25. The Board is, however, mindful that the prisoner survey conducted by HM Inspectorate of Prisons (HMIP) in 2025 found that 28% of respondents said they felt unsafe at the time of the inspection.

4.4 Use of force

4.4.1 Prison officers may use force to control a violent or refractory situation or when a prisoner disregards a direct order. Such actions can range from guiding/escorting holds to a full restraint requiring a multi-staff intervention using personal protection equipment (PPE). Officers used force 629 times during the reporting period, a reduction of 13% from the previous period. There were 42 planned incidents, for example to move a prisoner from their cell to the CSU, down 18% over the year. Officers drew batons on two occasions, but did not use them. Incapacitant spray (PAVA) was drawn 13 times but used just once. After the steep rise in use of force in the previous period, the Board welcomes the downward trend.

4.4.2 The Deputy Governor chairs a weekly use of force development meeting to scrutinise all use of force incidents. CCTV and body worn video camera (BWVC) footage is considered where available, and a random sample of paperwork is quality assured. The Board has monitored such meetings, and found them to be thorough. Advice and guidance as well as positive feedback is given to members of staff involved in use of force.

4.4.3 The prison additionally holds a monthly use of force meeting to review data and possible trends, such as time of day, location and details of the prisoners and members of staff involved. The Board is concerned about the over-representation of prisoners from a Caribbean, African or other Black backgrounds and of Muslim prisoners in use of force incidents, but has no evidence of systemic prejudice or bias within the establishment behind the figures. This conclusion is supported by the outcomes of post-incident debriefs. Of the 629 incidents, 578 debriefs were completed, and where a debrief did not happen this was generally because the prisoner involved had moved to another location.

4.4.4 The Board is also concerned that nearly half of use of force incidents (47%) involved young adults, and acknowledges the prison's efforts to understand and mitigate the factors involved, and to better engage with young adults. Where possible, the incident debriefs when a young adult was involved is led by a dedicated violence reduction lead, and a use of force forum for young adults explores the key question: 'why did this happen?' The prison is using incentives such as enhanced gym access and opportunities to play sport to help improve the behaviour of young adults in the prison.

4.4.5 The Board remains concerned about the risks posed to staff and prisoners alike by incomplete CCTV coverage, and welcomes the interim efforts the prison is making to extend CCTV coverage.

4.5 Preventing illicit items

4.5.1 There was an increase in the number of intelligence reports recorded during the Board's reporting period. The Board is advised that the increase was in part driven by better engagement between the prison's security team and security officers on the wings. However, the number of intelligence-led cell searches decreased during the same period to 312. Nearly 60% of searches (178) led to finds, which included: 144 weapons, slightly down on last year; 131 mobile phones, again slightly down; and around 60 instances of alcohol brewed illicitly within the prison totalling around 170 litres (400 litres last year). There were 343 finds of unknown substances, up from 255, and 38 USBs (portable storage devices) were seized. Items were found

in cell searches, rub-down searches as prisoners move off a wing, in reception, and in communal areas.

4.5.2 The problem of drones flown from the surrounding area to carry illegal items into the prison remains significant. The prison estimated that the value of the illicit items in these packages was more than £1.3m. The Board recognises the prison continues to work with Sussex Police and the national prison service to develop appropriate counter-drone measures.

4.5.3 The Board welcomed the resumption of random drug testing in March 2025, believing that this helps give a clearer picture of drug-use. To the end of our reporting period, 345 tests were done and 24% (83) were found to be positive. During the reporting period, there were 64 finds identified by the itemiser, a scanner that detects trace amounts of narcotic on items sent or brought into the prison, compared with 41 finds during the Board's previous reporting period.

4.5.4 The Board notes as well that the HM Inspectorate of Prisons report of June 2025 spoke about drugs being 'too readily available' and that the prison's leaders cited drugs and phones as examples of illicit items which pose significant threats to security. In the inspectorate's survey of prisoners, 15% of respondents said they had developed a drug or alcohol problem at the prison, but none said had received help to manage it. The Board recognises the efforts made by the prison to prevent the entry of illicit items and to offered to support prisoners, but is concerned that illicit drugs remain too readily available on the wings.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 The Board acknowledges the difficulties in providing and maintaining a decent environment for prisoners and staff alike in an estate that was mostly built in the mid-Victorian era. It welcomes the investment and effort over the year to refurbish and redecorate a substantial proportion of the estate, as well as greater diligence with regard to cleanliness. HM Inspectorate of Prisons said in June 2025 that some cells were in an unsatisfactory condition, and whilst recognising that more needs to be done, the Board's view is that the prison is in a noticeably better state.

5.1.2 The main gas supply to the prison failed in 2023, and plans are in hand for it to be completely replaced. Until this happens, temporary arrangements are required, and the Board notes measures to improve the effectiveness of these arrangements: the boilers initially installed have been replaced; a single contractor, IBS, has been appointed to maintain these and engineers are more regularly onsite to respond more quickly to faults. Overall, the Board has monitored fewer problems with the heating and hot water, although disgruntlement features consistently in the Board's interactions with prisoners. At certain times, temperatures on some wings can be too low or high. Faults to the automatic fire vents on F and A wings could also bring down ambient temperatures, as do defective window fittings.

5.1.3 The Lewes assurance multi-skills team (LAMS) continues to make an impressive contribution to the improved environment. The team is made up of enhanced prisoners (with the highest level of earned privileges in the incentives scheme), who deploy experience of building trades to refurbish cells and common areas. They have laid new floors, rebuilt items of furniture, redecorated cells, and refurbished the CSU exercise yard and visits area. The team continues to help with internal and external cleaning. From April to November 2025, the work of the LAMS team is said to have resulted in cost-savings to the prison of £220,000.

5.1.4 A welcome improvement was brought about by GFSL, the contracted maintenance service, who brought a damp-proofing plaster solution to the problem of damp on some wings. The defective pharmacy roof was replaced, and asbestos safely removed from the gym and healthcare areas. A new gate-locking system is being introduced in the courtyard area, through which people enter and leave.

5.1.5 The clothing exchange service (CES) has worked well despite the delay in obtaining new prison kit from the suppliers, which has meant just two kit changes for most wings per week, rather than three. As a solution, CES aims to launder more items in-house and send less laundry to HMP Elmley. A new system to retrieve and recycle kit thrown away when a prisoner leaves has reduced the outlay on new kit.

5.1.6 At the end of the Board's reporting period the catering department spent £3.15 per head per day against a budget of £3.12. It provided over 12,000 meals per week with a standardised menu of five options for lunch and dinner, including vegan and lactose intolerant choices. At the end of our reporting period, there were 14 special diets daily, including kosher, gluten-free and medically sealed meals (for allergies). In line with preferences expressed in the 2025 prisoner survey, hot breakfasts are provided weekdays, with cereal and milk at weekends. Also following

the prisoner survey, the lunch offering of sandwiches was replaced by baguettes. The new HMPPS Food in Prisons policy aimed at providing healthier meals came into effect as our reporting period ended: the kitchens at HMP Lewes are already increasing the offer of brown rice, wholemeal pasta and baguettes.

5.1.7 The Board has raised concerns about the failure of prisoners working on food serveries to wear appropriate protective clothing. White t-shirts are provided but soon disappear from use. At the end of our reporting period there were only five prisoners trained in food safety, and the Board welcomes proposals for education and industries to deliver food safety training to servery workers. The Board monitors concerns about defective servery hotplates and lights: the catering team plans to conduct a weekly audit to quickly identify and rectify faults and cleanliness queries.

5.2 Segregation

5.2.1 Segregation involves a prisoner being moved from a residential wing to a care and separation unit (CSU) for disciplinary reasons, for their own protection or for the good order of the prison. The CSU at HMP Lewes has 16 cells, including two that can be used for constant supervision of prisoners at high risk of self-harm, and two special accommodation cells without furniture or sanitation which are not in use for detention: one can be used for searching a prisoner when they first arrive at CSU, the other is used for storage only. Should special accommodation be required to hold a prisoner at severe risk of suicide or self-harm, another cell on the unit will be used, having had relevant furniture, bedding and sanitation removed for safety reasons.

5.2.2 CSU has a servery for daily meals, a small space for one-to-one conversations or education sessions, a holding cell and a room used for adjudication and segregation review board meetings (see below). The unit is generally kept clean and tidy by prisoner orderlies and has benefited from refurbishment over the reporting period, although the condition of the two showers is poor. There has been a consistent staff group, although staff rotation policies ensure staff do not work too long in what can be a difficult environment. Board members have observed that prisoners are treated humanely and fairly by staff in the CSU.

5.2.3 A total of 492 prisoners were admitted to CSU over the reporting period. Of these, 81 arrived on an ACCT and a further 35 ACCTs were opened post-arrival. All arrival algorithms, which show the circumstance leading to a decision to segregate, were completed, but 27 of these were beyond the two-hour requirement. Special accommodation was used four times, down from 11 in the previous reporting period. All were in relation to suicide or self-harm risks and the Board was notified in a timely fashion: paperwork showed each use was appropriately authorised. All segregation review boards (SRBs) were held within the prescribed period although not all were attended by a healthcare team member, mainly due to non-availability. The Board monitors a significant proportion of SRBs. There were 11 prisoners who remained in segregation for more than 42 days, and relevant permissions were obtained on each occasion. The Board monitors appropriate efforts by CSU staff to support the reintegration of such prisoners to a main residential wing.

5.2.4 The Board remains concerned that the CSU continues to be used at times for the constant supervision of prisoners with significant mental health needs: such prisoners should instead be located in the prison's inpatient healthcare unit. The Board recognises the establishment's commitment that the CSU is not intended to provide inpatient mental health care and that this will happen only as a last resort to

manage an immediate and serious risk to an individual's safety or to others. It recognises as well that constant supervision in the CSU is monitored, supported by healthcare input, and overseen by senior managers to ensure compliance with prison service instruction (PSI) requirements and to avoid staff having to operate beyond their role or competence. All prisoners considered for CSU location are assessed by the mental health team to determine suitability. If the team advises that a prisoner is not appropriate for CSU, prompt relocation is undertaken, unless there is an exceptional and immediate risk that cannot be safely managed elsewhere. Any such decision is time-limited and subject to ongoing multidisciplinary review.

5.2.5 Meetings of the segregation monitoring and review group (SMARG) were held quarterly and reviewed data relating to segregated prisoners and their ethnicity, age, religion and any disability. The Board monitors this data and remains concerned about a disproportionate number of prisoners from Caribbean, African or other Black backgrounds located in CSU, also of Muslim prisoners. However, as with the use of force data (see 4.4.3), the Board has no evidence of systemic racism or religious prejudice within the establishment behind these figures, nor do we hear regular complaints that this is the case from prisoners involved, who are seen weekly by a member of the Board and daily by a member of the chaplaincy team.

5.2.6 Prisoners accused of breaking prison rules are dealt with through a process of adjudication. Over the Board's reporting period there were 2,959 adjudications compared with 2,667 the year before: an increase of just over 10%, following a 9% increase the previous year. Ninety-nine (99) of these, mostly involving assaults, fights, and/or possession of weapons, mobile phones and drugs, were judged sufficiently serious to be referred to the independent adjudicator. A number of adjudications were observed on an ad-hoc basis by the Board.

5.3 Staff and prisoner relationships, key working

5.3.1 Staff recruitment and retention have improved, and the staff complement has generally been full. This has enabled the prison's leaders to offer more time out of cell, in turn promoting a better atmosphere on the wings and better relationships. Even if prisoners complain to Board members about staff, they can generally identify at least one officer to whom they can talk. The Board notes that HM Inspectorate of Prisons (HMIP) reported in June 2025 that its survey showed '80% of prisoners said that they felt respected by staff, compared to 65% in similar prisons.'

5.3.2 Meetings and events took place to bring staff and prisoners together. These included five meetings of the prisoner consultation group (PCG), and although it is rare for the same prisoners to attend each meeting because of the population churn, the issues raised were consistent and acted upon by staff. A second HOPE (Hearing Other People's Experiences) event took place, with speakers from Cocaine Anonymous (CA) sharing stories with prisoners and staff. One former prisoner spoke of how he had been drug and alcohol free for three years and was running his own business. Similarly, three prisoners from the incentivised substance free living (ISFL) wing spoke at a training session for staff in August 2025, offering an opportunity to openly discuss drug and alcohol use in prison and prompting conversation between and compassion from both groups. Sport is also used to bring staff and prisoners together: the winning team in a prisoner football tournament in June 2025 went on to play and defeat a staff team.

5.3.3 Whilst the national Policy Framework specifies a weekly 45-minutes key work session for every prisoner, HMP Lewes delivers around just one of quarter this target. The prison leadership acknowledges the need to increase the number of key work sessions and the quality of write-ups, and has plans for a more risk-focused approach, but the Board recognises that operational demands and priorities can see officers diverted from key work to other duties.

5.4 Equality and diversity

5.4.1 The Board welcomes the prison's efforts to meet its obligations under the Equality Act 2010. A proactive diversity and inclusion (D&I) team is in place with representation from senior leadership. Meetings of the D&I steering group are held bi-monthly and are chaired either by the governing Governor or deputy Governor.

5.4.2 The D&I steering group reviews the available data and other information relating to protected characteristics, considers issues of disproportionality, and agrees actions as and where appropriate. As discussed elsewhere in this report, the Board is concerned about issues of disproportionality, but has no evidence of systemic bias or prejudice within the establishment driving the figures. Data collated by HMP Lewes shows that on average in 2025:

- Around 70% of the prison population self-defined as White British, Irish or other White ethnicities; around 10% as Black Caribbean, Africa or other Black ethnicities; less than 5% as Asian; and 5% as Gypsy, Roma or Traveller.
- Well over half declare no disabilities, and around 15% describe a mental health illness, although the healthcare provider, PPG, estimates a true rate to be higher.
- Around one fifth of the prison population is aged 18-25; around one-third is aged 30-39, and adults aged 60 and over account for around 5%.
- The highest recorded religious outcome is 'no faith'. Around 60% of prisoners who professed a faith self-described as Christian, and 25% as Muslim.

5.4.3 The prison's leaders lead and support separate forums at which issues relating to the needs and representation of prisoners with protected characteristics under the Act can raise issues and help shape the prison's decisions and actions. There are also forums for the Gypsy, Romany Traveller (GRT) community, for ex-service personnel and for foreign national prisoners. Issues are also explored at meetings of the Insiders. What might be seen as minor interventions, such getting a service pin for ex-servicemen to wear in prison or advising a non-English speaker they can have a pillow for their bed, can have a strong positive effect on the wellbeing of an individual.

5.4.4 Data shows that the prison population is disproportionately young (around one in five is aged 18-25) and that younger prisoners are more likely to experience poor outcomes in prison. Many of these prisoners self-declare neurodiversity, adding to their anxiety at being in prison, but the numbers are too large for each to be housed on the dedicated neurodiverse wing. The prison has nominated a dedicated officer to lead initiatives to better engage with young adults, and to support them where operationally possible at times of potential stress, for example, during segregation review board meetings in the CSU.

5.4.5 The Big Word telephone translation service can be used to support foreign national prisoners in reception and induction, although the Board has heard of times

when a hands-free, speakerphone-style device to help the process cannot be found. With the exception of legal documents, the prison can arrange translation of most written information. A prisoner can write about a diversity and inclusion concern via a discrimination incident reporting form (DIRF). The Board continues to monitor times when there are no DIRF forms on the wings and is concerned that a prisoner might be reluctant to submit a DIRF if they first have to ask an officer for a form. There were 22 DIRFs submitted over the reporting period compared to 33 the year before.

5.5 Faith and pastoral support

5.5.1 The chaplaincy service at HMP Lewes is often complimented. In June 2025, HM Inspectorate of Prisons wrote: ‘the enthusiastic and motivated chaplaincy team...offered an impressive range of interventions’. The service complies with the requirements of the 2016 faith and pastoral care for prisoners PSI (prison service instruction). In January 2026, it had 31 regularly attending chaplains: four directly employed, 17 sessional, eight volunteers, and two occasionally-visiting chaplains. The service also had 11 official prison visitors available for all prisoners, including those that might rarely, if ever, have social visits.

5.5.2 The number of prisoners professing a faith will change as the population fluctuates, but an upward trend is noted. In January 2026, around 70% of prisoners professed a faith: 256 Christian traditions (Church of England 103, Roman Catholic 97, other 56), 102 Muslim, 11 Buddhist, seven Pagan, six Jewish, five Rastafarian, plus a small number of other faiths. The Board notes the Muslim prisoner population increased by around one-fifth over the year. Chaplains are available from Christian, Muslim, Sikh, Jewish, Hindu, Buddhist, Quaker, Jehovah’s Witness and Pagan faiths. Visits are arranged from the Rastafarian, Spiritualist and Latter-day Saints traditions. In this way, faith support is provided for 98% of prisoners registering a faith by a chaplain of that faith. Weekly corporate worship is available for all faiths, and mid-week faith education groups are arranged: average attendance rates rose over the year. If no chaplain is available for a faith group, occasional visiting chaplains can visit, and a chaplain of another faith can facilitate corporate worship and faith support. The chapel and multi-faith room are well-used, and in-cell faith support is offered. A risk-assessed process can enable prisoners from the CSU and inpatient unit to attend services. Religious festivals are celebrated, and as with previous years the Board notes the good efforts made by the prison’s catering team and staff on the wings to meet religious dietary needs.

5.5.3 Pastoral support makes up the biggest proportion of the chaplaincy team’s work. A chaplain visits a new prisoner within 24 hours of their arrival and speaks daily with prisoners in the CSU and inpatient unit. A chaplain visits a prisoner on an ACCT at least once a week, and conducts pre-release interviews six to eight weeks prior to a prisoner’s release and then on the release day itself. Chaplaincy also runs a Living with Loss course, now an ongoing weekly group, and Facing up to Conflict, a six-week in-cell distance learning course supported by a weekly visit by one of the team, with a steady rise in the number of prisoners engaging over 2025.

5.5.4 Chaplaincy can support prisoners to maintain family and community ties, including family tracing. Young prisoners can benefit from an ongoing young adult support group and get help to thank a supportive adult on Mother’s Day. The Angel Tree scheme approved and enabled 24 prisoners to send 34 gifts to children for Christmas 2025. Support is offered to prisoners, staff and families alike following a

death in custody or following the death or serious illness of a relative, including with the application process for an escorted visit to family at such times. Chaplaincy will offer virtual visits and streaming of funerals when such visits are not possible.

5.6 Incentives schemes

5.6.1 HMP Lewes operates an incentive scheme through which a prisoner who behaves in a positive way gains extra privileges. In line with national practice, the prison has three incentive levels: basic, standard and enhanced. A new arrival enters on standard and after seven weeks can apply to become 'enhanced', the highest level. This is likely to be awarded if they can demonstrate consistently good behaviour, and can mean more social visits, more time out of cell including activities on the wing, more gym sessions, access to better jobs and more money to spend. The lowest incentive level is 'basic', and being on basic can mean the removal of the in-cell TV, fewer gym sessions and less money to spend.

5.6.2 The Board notes that over the year around 5% of prisoners were on basic and around 27% enhanced: slightly lower than the 30% the previous year but above the 20% who were enhanced two years ago. The percentage of White British or White other and Asian prisoners on enhanced rose from 30% to around 36%. The Board also notes that around 30% of prisoners aged 26-45 were enhanced, but only 16% of prisoners aged 18-25 were. The data also shows that Muslim prisoners and prisoners from a Black British, Black Caribbean, Black African or other Black background were more likely to be on basic than other prisoners. The Board is concerned about issues of disproportionality, but has no evidence of systemic bias or prejudice within the establishment driving the figures referred to above.

5.7 Complaints

5.7.1 A prisoner can formally complain about an aspect of their experience in prison in writing using a Comp1 form (or Comp1A, see below) which they post into a locked box on their wing to be collected each night. The prison maintains a live report of prisoner complaints, and across 2025 this showed 1,343 complaints, fewer than the previous year but an increase of around 50% since 2023 (854). The Board notes that a single prisoner might submit numerous complaints: in 2025 around 60 complaints, 5% of the total, came from just one prisoner. Another prisoner submitted the equivalent of one complaint a day in one particular month.

5.7.2 Complaints are allocated to one of 25 categories. In 2025, as with the previous year, property was the largest: 348 complaints (up from 317), 26% of the total. This was followed by 237 residential complaints (18%); and 88 complaints about staff (7%). Both of these latter figures and proportions were lower than in 2024. Each complaint is reviewed by a senior prison officer, and is upheld, not upheld or rejected. In 2025, just under 500 complaints were upheld/partially upheld, and 820 were not upheld. The prison's report shows that 91% were dealt with within the two-week timeframe, an improvement on the previous year. Ninety complaints referred to issues at another prison, and were sent to that location to be dealt with.

5.7.3 Prisoners on F wing, the second largest (around 22%), submitted the most complaints, nearly one quarter. The second largest proportion, just over one fifth, came from M wing. The other two large residential wings, A and C, accounted for 14% and 11% of complaints respectively. Around 1 in 8 complaints did not record a location. Around 10% of the total complaints involved a comp1A, which is an appeal

against the prison's initial response to a complaint. The prison also recorded 15 confidential access complaints (Comp2): these generally allege staff misconduct and are sent directly to the Governor. Five were forwarded for the attention of the prison group director. Healthcare complaints are dealt with separately by the healthcare provider PPG, so do not feature in this section of our report. However, whilst the number of healthcare complaints has been relatively low, in the Board's experience the ambiguity between what PPG defines as a 'concern' or a 'complaint', and its subsequent response, can give rise of dissatisfaction on the part of prisoners.

5.7.4 The prison analyses complaints for themes and patterns, and considers the impact of change in the light of the volume and content of complaints. Questions around risk, poor practice or process can be flagged to senior leaders and, if applicable, to specific teams for review and action. In this way, an example of change in part being made in the light of complaints was the introduction of a parcel tracker log to better manage prisoners' property. An operations 'query channel' is also being implemented to deal with prisoner applications more quickly and ease frustration: this is welcome given that HM Inspectorate of Prisons described the applications system as 'not fit for purpose' in June 2025. The inspectorate noted as well that: 'the complaints process was reasonably good, but prisoners' trust in the system was low.' The Board monitors times when complaint forms cannot be found on the wings, and considers that a prisoner should not have to ask for a form.

5.7.5 The Board welcomes that the complaints report now provides information about complainants in line with the protected characteristics of the Equality Act 2010. Following HM Government's guidance regarding self-defined ethnicity, 77% of complaints came from prisoners in the White British, White other, Irish or Gypsy Irish Traveller categories and 14% came from prisoners in the Black British, Black Caribbean, Black African or other Black background categories. Just over one fifth of complainants (296) came from prisoners stating they had a disability of some kind.

5.8 Property

5.8.1 As noted in section 5.7 above, the biggest category of prisoner complaint in 2025 involved property: 348 complaints (up from 317 in 2024), 26% of the total. Property is consistently the most common complaint category nationally investigated by the Prisons and Probation Ombudsman. However, property was less prevalent in applications made by prisoners to the IMB. There were 24: less than half the number received the year before, and just 6% of total applications to the IMB. The total includes a number of applications about the same issue from the same prisoner.

5.8.2 The Board's review shows that around 100 complaints to the prison referred to property going missing at transfer, and around 40 to property being taken from/stolen from a cell. Similar concerns featured in applications to the IMB. However, concerns about property going missing when a prisoner is moved from a residential wing to the CSU were less prevalent, as were delays in receiving property sent in by family or friends. A new process by which visitors can 'hand in' property for a prisoner seems to have made a difference, although the Board has heard from prisoners that they were frustrated by the time the process could take.

6. Health and wellbeing

6.1 Healthcare general

6.1.1 Practice Plus Group (PPG) is contracted via NHS commissioners to deliver healthcare in the prison, including GP, inpatient, substance misuse, mental health, pharmacy and crisis response services. Subcontractors provide dental, optician, podiatric and physiotherapy services. East Sussex Healthcare NHS Trust, in partnership with PPG, provides sexual health clinics and screening programmes. Despite some vacancies during the reporting period, the Board notes that 82% of PPG's healthcare posts were substantively filled by end of our reporting period, and that a new head of healthcare had been appointed.

6.1.2 The Board has welcomed improvements in healthcare services over recent years and the robust, collaborative and coordinated approach to service improvement between PPG and the prison. Nevertheless, we were disappointed that the joint inspection by the Care Quality Commission (CQC) and HM Inspectorate of Prisons in June 2025 found a breach of regulations, prompting an action plan. This was further reflected in the patient engagement survey commissioned by NHS England in which only 57% of respondents said they found access to healthcare easy to get, a substantial fall from 77% the previous year. Over half of survey respondents (55%) reported difficulties obtaining required medication. Poor communication around appointments and response times were also cited.

6.1.3 Healthcare concerns were by far the largest category of prisoner applications to the IMB during our reporting period, accounting for nearly 25% (107) of the total. Issues raised included access to healthcare, missed appointments, communication and complaints handling. By far the largest proportion, however, involved medication issues, which accounted for over 27% of healthcare related applications to the Board. As reported above (5.7.3) the ambiguity between what PPG defines as a 'concern' or a 'complaint', and its subsequent response, can give rise in the Board's experience to dissatisfaction on the part of prisoners.

6.1.4 Through the combination of Local Delivery and Partnership Board meetings, which are well-attended, the qualitative aspects of service delivery are regularly appraised, together with a rigorous approach to incident management. Although the number of incidents has increased, the total remains relatively low and should be seen against a trend of increasing appointment numbers.

6.1.5 The Board welcomes that arrangements when a prisoner needs to attend a hospital appointment outside the prison have largely been well-managed, as this has been a concern in the past. However, as reported elsewhere, patients with serious mental health needs who need to be cared for in secure accommodation under the Mental Health Act continue to wait far too long for a place. Despite the care and diligence of healthcare and prison staff alike, HMP Lewes is an inappropriate setting for such prisoners.

6.2 Physical healthcare

6.2.1 Short-term fluctuation in waiting times is inevitable, but as the Board's reporting period ended, healthcare waiting times were at their shortest. Dental waits had come down to acceptable levels having lengthened over the year because of staff vacancies. Clinical oversight to prioritise appointments has helped deliver this

improvement, and a new 'navigator' role has been created by PPG to augment the work of the patient engagement lead and improve communication and enablement. The navigator works to encourage attendance at GP and dental appointments and reduce the DNA (did not attend) rate, reported to be around 45% at the end of 2025. PPG will no longer automatically rebook a non-urgent appointment if the prisoner does not attend without good reason, requiring them to submit a further application to be seen.

6.2.2 As reported previously, the Board continued to monitor instances of medication being dispensed from pharmacy hatches on the wings without an officer to supervise the waiting prisoners. The Board regards this as a safety risk for prisoners and staff alike. As reported earlier (4.1.1) the Board is also concerned about the increased number of new out of area prisoners often arriving late at night, creating bottlenecks and putting greater pressure on the initial healthcare screening in reception. This in turn has put pressure on the delivery of next day services, which is of concern to the Board, particularly with regard to potential patient safety and medication issues, with no immediate end in sight to the present churn of new arrivals. The Board does, however, acknowledge the hard work of the prison's leaders, reception and healthcare staff in responding to the challenges.

6.2.3 The Board welcomes the completion of a new care suite for patients with long-term conditions and of the healthcare sensory room. It welcomes changes to patient waiting areas, although the latter could be further improved. The energy walls purchased by PPG are also welcomed and in view of the critical importance of the pharmacy unit, the Board is pleased that repairs to the roof have been completed. It also commends the manner in which the Health in Justice programme is delivered.

6.3 Mental health

6.3.1 Caring for prisoners with a mental health need is one of the biggest challenges for healthcare delivery within the prison system. Self-assessment data collected by HMP Lewes shows up to 20% of prisoners declare a mental health need, but the healthcare provider PPG has suggested that twice as many prisoners may have such needs. Prisoners experiencing mental health distress can present challenging behaviours and pose a risk to themselves, through self-harm for example, or to others. The Board both monitors and commends the professionalism, kindness and diligence shown by staff in such responding to these challenges.

6.3.2 A PPG nurse conducts an initial health screening when a prisoner arrives at reception. If appropriate, they refer a prisoner for assessment by the integrated mental health team. The Board welcomes that urgent referrals can be seen within one day and routine assessments within five days: until relatively recently, waits could be lengthy. In the same way, the Board welcomes the reduction in psychiatry waiting times, having been highly concerned about gaps in provision. A psychiatrist is now employed three days a week, and waiting times start to fall when they took up their role near the start of the Board's reporting period. Given the extent and complexities of mental health needs in the prison, the Board has called for greater service provision, and we welcome that as our reporting period ends an additional psychiatrist is due to provide a further day's consulting in the prison.

6.3.3 Prisoners with mental health needs are generally managed on the wings, and it is not uncommon for such prisoners to complain to the IMB about delays to see a clinician or to receive medication. They can also be unhappy with differences

between the medication they get in prison and what they say they used (including self-medication) in the community. The Board has at times monitored medication delays experienced by acutely unwell prisoners, for example, in the CSU. A more appropriate location for these prisoners is the prison's inpatient care unit, which has nine cells. An additional cell is being prepared. Concerns about delays faced by such prisoners in moving to a secure mental health facility are noted above (6.1.5).

6.4 Social care

6.4.1 A small number of prisoners receive support with daily tasks such as showering or getting dressed, mostly because of a disability or long-term illness. Most prisoners requiring such care at HMP Lewes are on F wing, where older prisoners are generally located. Referrals for social care are made from the prison to East Sussex County Council, who will assess need and where appropriate commission services to meet this need from Agincare, an independent provider of care nationwide. The prison healthcare provider PPG employs two occupational therapists who will also support such prisoners.

6.5 Time out of cell, regime

6.5.1 The amount of time that prisoners can be out of cell has continued to increase over the Board's reporting period. This improved regime, together with better living conditions, helps to promote better behaviour on the wings and a better atmosphere overall. The Board acknowledges the hard work on the part of the prison's leaders and staff that has brought about these significant changes.

6.5.2 At the start of 2025, average time out of cell Monday to Thursday was around seven hours a day, including an hour a day of open-air exercise. A year earlier, it would be five hours for prisoners in work or education, less than two hours for those who were not. Better staff recruitment and retention as 2025 progressed meant the prison was able to offer additional regime to enhanced prisoners four evenings a week for what is called structured on wing activities (SOWA), plus extra gym sessions. By November 2025, average time out of cell Monday to Thursday had grown to eight hours a day. This has been maintained since, and the Governor advises the Board that the HMP Lewes regime is the best within its comparator prison group. There is no plan to increase this weekday regime.

6.5.3 The Friday regime is less favourable, with no work or education off-wing after lunch. The weekend and holiday period regime, including bank holidays, is also less expansive, and can be subject to additional restrictions, at times falling to just two to three hours a day. Prisoners on the early days centre (EDC) also spend less time out of cell because, as new arrivals, they have not yet been allocated a role. However, IMB members hear far fewer negative comments about regime than in previous years, and the issue rarely featured negatively in prisoner consultation group (PCG) meetings. The Board has noted that weekend regime restrictions seemed to become more frequent as our reporting period ended.

6.5.4 The gym provides a good timetable for all wings and some prisoners in the CSU. Access reflects the incentives scheme system: prisoners on basic have a one-hour session per week, those on standard have up to four sessions, and enhanced prisoners have up to three additional sessions, which might be in the evenings or at weekends. There are tailored sessions for older prisoners. Beyond the gym, Brighton & Hove Albion football club ran football coaching courses with 16 prisoners on each

course, and an inter-wing football tournament was held in June 2025, with the winning team going on to play and beat a staff team. Table tennis sessions were overseen by the Brighton table tennis club, and there were yoga sessions, circuit clubs and volleyball clubs. HMPSS runs a first aid qualification course from the gym. Staffing for the gym is good with one allocated custodial manager (CM), and five full-time equivalent physical education instructors (PEIs).

6.6 Drug and alcohol rehabilitation

6.6.1 PPG provides substance misuse services (SMS), offering clinical and psychosocial support to prisoners with experience of drug and alcohol addiction. This can involve stabilisation, crisis intervention or recovery from dependence. Increasing numbers of prisoners have been referred for substance misuse support, and the 14-day recall policy could mean some prisoners with substance misuse needs might be referred twice in the same month.

6.6.2 The psychosocial staffing arrangement at the end of the Board's reporting period was 3.9 recovery workers, one administrative worker, one psychosocial lead and one SMS manager. Clinical staffing was three nurses and one healthcare assistant (HCA). A business case was submitted for two extra recovery workers to help manage the increasing caseload. The team assesses new prisoners the day after arrival, screening for alcohol and drug use, particularly class A drugs, and identifying support needs. Referrals to SMS are also made by the mental health team and by wing officers: equally where appropriate, SMS will refer a prisoner to mental health. The SMS team says that the multidisciplinary approach works well.

6.6.3 The prison's drug strategy focuses on recovery-focused interventions rather than punishment, and works to disrupt the supply of illicit substances. It is led by a non-operational governor. An incentivised substance free living wing (Minerva wing) opened in February 2025 for prisoners who commit to be drug-free. There is regular random drug testing for the prisoners on the wing and zero tolerance of supply.

6.6.4 With a capacity of 23, Minerva's facilities and activities help nurture a community to support prisoners through recovery and occasional relapse. Minerva has books and DVDs, a communal space for meals and discussion and a communal television. Minerva prisoners have good access to the gym, a weekly yoga class, a philosophy discussion session and a breathing course. A cooking course before Christmas 2025 enabled prisoners to prepare Christmas dinner together under the guidance of a chef. There is a community group meeting on Sundays. Two Minerva wing prisoners deliver a peer support programme for the wider prison and speak daily with new prisoners in reception and the early days centre.

6.6.5 People from Cocaine Anonymous (CA) and Alcoholics Anonymous (AA) come into HMP Lewes to hold meetings for prisoners. Anonymity is undermined by the fact that a prisoner must be listed in order to be taken to the meeting: the prison is considering more flexible ways for prisoners to contact such support. Meetings were also held for staff and prisoners under the label Hearing Other Peoples' Experiences (HOPE): attendees said they gained new insights by listening to each other. Challenges to rehabilitation include the availability of drugs on wings, and limits on mental health and substance misuse support to help maintain abstinence. The prison is training staff to offer cognitive behavioural therapy (CBT) therapies, and working with Sussex police and others to disrupt illicit supplies. The service can also face problems engaging with external agencies to plan care on release for prisoners not usually resident in the prison's main catchment area.

6.7 Soft skills

6.7.1 Prisoners with neurodiversity needs can struggle on a main residential wing and so HMP Lewes has created a dedicated neurodiversity wing (K wing) as a smaller, quieter and calmer wing. K wing has a range of distractions and activities including a sensory room,

books, DVDs, a fish tank, community eating and education. K wing prisoners are offered two gym sessions a week, and holds a Wednesday group activity. As the Board's reporting period ended, the Governor described how visitors from other prisons have been impressed by K wing and that a review of outcomes was underway. A number of staff across the prison have also had neurodiversity awareness training to help support neurodiversity needs and triggers and improve ways of working with individuals on the main residential wings and around the prison.

6.7.2 Table tennis is available for prisoners on all wings. Liberty Choir volunteers come into HMP Lewes once a week and can be joined by prisoners to sing and make music, though attendance has been low. Billiard tables are available for enhanced prisoners and for prisoners on the incentivised substance free living (ISFL) wing (Minerva).

6.7.3 The Listener scheme run by the safer custody team is a peer support process through which up to 17 prisoners are trained by the Samaritans to support a fellow prisoner on any wing who feels the need to talk confidentially to help manage anxiety and stress. Resident across all the main wings, the Listeners work in pairs on a rota system and are debriefed by Samaritans weekly.

7. Progression and resettlement

7.1 Education, Library

7.1.1 Milton Keynes College has provided education services at HMP Lewes since 2023. In October 2025, the prison education framework (PEF) under which it operated was revised to become the prison education service (PES) and the budget was reduced by about 60%. Working hours for tutors were amended and the equivalent of four full-time posts removed. Although the breadth of the curriculum was retained, the priority placed on English, maths and English as a second language has reduced the overall depth of provision to prisoners. Art classes continue, as does the newsletter group. The in-house records music class is to be reinstated. The Board heard reports that the switch from the PEF to the PES was inevitably difficult and stressful.

7.1.2 A prisoner's abilities in English and maths are assessed as part of their induction, and the results shape their learning and work personal plan. Somewhere between two thirds and three quarters of Lewes prisoners record low levels of literacy and numeracy, and are likely to be disadvantaged in their engagement with the prison's operations. The Board was disappointed that at the end of the reporting period the Shannon Trust was not providing its reading programme in the prison to develop literacy. However, the Board is pleased to note that the education service is delivering good progression in English and maths, scoring 8.42% against a target of 3.36%, and placing HMP Lewes second within its comparator group of nine prisons.

7.1.3 Getting prisoners to attend education can be a challenge given the rapid population turnover, the number of remanded prisoners (who are not required to work or attend education) and of prisoners on short-term recall who cannot be engaged because their stay was short. Attendance tends to be around 60-65% of allocated spaces, and the prison has striven to increase attendance, developing a 'education is everyone's business' approach. Courses operate on a roll-on, roll-off basis, which suits the rapid population churn, and education outreach is offered in CSU and inpatients, and on the neurodiversity and Minerva wings.

7.1.4 The prison library run by East Sussex County Council continues to be popular. The Board was pleased to learn that following a one-year interim contract, a three-year contract was agreed. Activities included book clubs (part of the reading strategy), a philosophy workshop, author visits, and poetry slams. The library supports family days to promote reading for families, with book bags for children, and Storybook Dads, where prisoners record stories on CD or DVD for their children. Library staff have arranged an imaginative and appealing programme of guest speakers for 2026, including published writers and a former professional footballer.

7.2 Vocational training, work

7.2.1 Providing work or training helps increase a prisoner's time out of cell, gives a small income, and can support a prisoner's progress through the prison system. It can additionally help save the prison money. Across the Board's reporting period, the prison was offering over 450 work or training places. To maximise numbers within the budget available, most roles are part-time. In January 2026 there were 168 education places (82% filled, 137 prisoners engaged), 118 wing-based workspaces (92% filled, 109 prisoners engaged) and 168 workspaces off the wings (67% filled,

113 prisoners engaged). The Board has previously noted insufficient work or education places, so welcomes the increase the prison has achieved more recently.

7.2.2 A prisoner should have a learning and work personal plan and be allocated a role that reflects their literacy and numeracy skills and preferences. Spaces are taken relatively quickly and securing one of the more appealing roles might take a while: prisoners can join a waiting list. Sentenced prisoners are required to work or do a course unless there is reason why they cannot: fewer than 3% of prisoners at HMP Lewes are regarded as unemployable or to have passed retirement age. Prisoners remanded are encouraged to work or do a course by activity reps on the wings and via inter-wing competitions that incentivise allocation and attendance rates. The phasing out of 14-day recall scheme under which prisoners are in prison because they broke their licence agreement after release is reducing the proportion of prisoners who leave before they have been allocated a role.

7.2.3 The prison successfully dealt with a number of challenges that arose during the year with regard to work and training. Reductions to the education budget and changes with tutor contracts reduced the range of education opportunities. New processes meant that some prisoners with MEAs (maths and English assessments) needed to undertake their screeners for additional needs or reading, increasing the average completion time from eight to 28 days: a significant issue in a prison where the average stay is now 6-7 weeks. And new waste recycling regulations that apply across England and Wales disrupted the routines and capacity of the waste management workshop.

7.2.4 Wing-based work includes cleaning, food service, laundry, activity and safety reps and Insiders peer support work. Off-wing work includes kitchens and staff canteen, industrial and bio-hazard cleaning, waste management, recycling life jackets, and printing and packing prison forms & information packs. A workshop to clean and package airline in-flight headphones was closed because the airline industry has less need for this service. Land-based work includes outdoor cleaning, grounds maintenance and growing herbs for the kitchen. The LAMS team discussed elsewhere is a notable success. To deal with vetting time for education staffing, the food safety qualification was being done online via secure laptops as the Board's reporting period was closing, and tutors offered other eLearning as appropriate.

7.2.5 Attendance as a percentage of allocated sessions for off-wing work and education was 66% in January 2026: attendance for on-wing work remains near 100%. The prison's activities team provided numbers and percentages of prisoners engaged on 3/2/2026, just after the Board's reporting period ended. The population on that day was 601: of these 342 (57%) were employed. Across 2025, the employment opportunities available increased by 4.4% against 2024. Allocation to these roles increased by a smaller amount. More than one third of jobs require a prisoner to have enhanced status which helps to encourage better behaviour. Less than 2% of complaints submitted by prisoners to the prison related to work or education, and just 11 out of 409 applications sent by a prisoner to the IMB to highlight a concern related to education, work, training, or time out of cell.

7.3 Offender management and progression

7.3.1 The prison's offender management unit (OMU) has continued to operate under sustained pressure driven by legislative change, a persistently high population of remanded prisoners, and increasing complexity in release arrangements. Despite

these challenges, the unit benefits from strong leadership and maintains high performance in its core functions. Staffing remained a concern as the Board's reporting period ended, with vacancies in administrative posts and morale affected by workload and the additional scrutiny and adverse media coverage around early releases.

7.3.2 Across our reporting period, the proportion of the prison population remanded by the courts was consistently around two-thirds of the total. The implementation of a remand strategy (February 2025) has significantly improved support for these prisoners, amongst other things, providing access to dedicated prisoner offender managers (POMs) and to prerelease planning, subject to needs and priorities. The appointment of two full-time bail officers during the year has augmented such support.

7.3.3 The OMU has faced a substantial increase in workload due to rapid and overlapping changes to recall for standard determinate sentences, home detention curfew (HDC), and the early release scheme for foreign national prisoners. These changes in many cases required retrospective application, adding complexity and administrative burden. The Board commends the OMU's efforts, particularly following the changes introduced in 2025 aimed at alleviating pressure on the prison population and ahead of further changes in the 2026.

7.3.4 Whilst court documentation has improved, historic issues around unclear or inconsistent sentencing information remain. This was in many cases exacerbated by the need for manual intervention to avoid release-date errors, leading to extensive rechecking of cases. The Board applauds the dedication and conscientiousness demonstrated by the prison's staff during this difficult period.

7.3.5 Transfers to other locations remain high, in excess of 800 during the year. Towards the end of the Board's reporting period, postponements and cancellations had increased as a result of transport unavailability because of the increasing requirement for vehicles to serve out of area courts. Delays and cancellations cause operational disruption for the system and can be stressful to prisoners.

7.3.6 As highlighted in previous reports, the Board deplores that prisoners serving imprisonment for public protection (IPP) sentences continue to be detained beyond tariff dates. As at the end of 2025 there were five such prisoners at HMP Lewes, unchanged on the previous period.

7.3.7 Overall, the OMU has demonstrated resilience and professionalism in a year marked by unprecedented legislative flux and operational pressure. Staff have maintained high standards in both offender and risk management and in sentence administration, despite significant systemic challenges.

7.4 Family contact

7.4.1 In-cell phones are the main way a prisoner can maintain contact with family, friends and legal advisors. Each prisoner is allocated a personal identification number (PIN), can buy phone credit and apply for outside numbers to be added to their PIN, unless restrictions apply, for example, because of the nature of an offence. The vetting process has been revised and is now risk-focused, so PIN delays have reduced. A further change was the removal of the midnight to 6am 'curfew': now a prisoner can phone around the clock up to the maximum of two hours per day. The

phone repair contractor will only attend to repair faulty in-cell phones when a number of faults have been reported, which can mean delay and frustration for prisoners with a faulty phone, although they can call from phones located on the wing landings. Prisoners may also send and receive emails through an email service managed by a contractor, but the service can be slow, and the Board hears of delays, some extending for weeks.

7.4.2 Social visits can be made on five afternoons per week. The capacity of the visits hall increased last year when the layout and furniture was changed and now offers a weekly maximum of 126 unrestricted and 42 restricted visit opportunities. If every session is full, the average prisoner would have access to 14 social visits in a year. The ongoing delay in replacing the visitor centre to offer shelter, refreshments and toilets opposite the visitor entrance into the prison remains a disappointment and the Board is relieved that work should begin in spring 2026. Since the old centre was closed in 2023 because it was structurally unsafe, visitors (some with children) arriving before the doors are open have to wait outside in all weathers and without toilet access. Problems with the online booking system introduced nationally in 2024 could present difficulties in make a booking, especially to see new prisoners, and the Board is pleased to monitor that such difficulties seem largely to have been resolved.

7.4.3 Prison-based family support is provided by a national charity Pact (Prison Advice and Care Trust), and by Prison Family Support, a local charity that works to reduce the impact imprisonment has on children of offenders at Lewes. Prison Family Support can support prisoners through the family courts, put them in touch with family solicitors and support them with social visits, even taking photos of families and prisoners together. PACT services include the visits hall creche and the provision of family days where families connect in a less formal manner. Family days were split into two sessions, so that each visit was shorter, but more families were accommodated. The prison's chaplaincy service also runs initiatives to help maintain family relationships, provide support to prisoners in times of family crisis, and offer support visits to prisoners who might not be having social visitors (See 5.5.7).

7.4.4 Prisoner complaints to the prison and applications to the IMB regarding family and legal contact were fewer over our reporting period than in 2024/5, and the majority concerned delays in approving social telephone numbers. The Board received a small number of applications about the length of time taken to repair a computer used for secure social video calling, and about the poor responsiveness of another establishment in arranging prison-to-prison social video calling.

7.5 Resettlement planning

7.5.1 Members of the prison's induction and pre-release (IPR) team will speak with a prisoner within 24 hours of their arrival at the prison to complete a basic custody screening tool (BCST1). This gathers information that can later be used to help shape the prisoner's resettlement plan in areas such as accommodation, family links, employment, and health and care services. IPR can help prisoners deal with banking issues and liaise with the Department for Work and Pensions (DWP) with regard to benefits. They can connect with staff in the OMU regarding sentencing.

7.5.2 Some prisoners will return to their own home on release, and/or live with family and friends. Others may need help to find suitable accommodation. Some remanded prisoners can be helped to maintain a tenancy for up to six months in prison or until they are sentenced, and can get help from IPR to recover and arrange

storage for personal property. If a housing need is identified, IPR can refer a prisoner to the local housing authority where they usually live. Some released prisoners may get basic accommodation under the CAS3 scheme for up to 84 nights so that they can then connect with a key worker in the community to secure more permanent accommodation. A housing specialist based in the prison's OMU gives additional support, and some accommodation plans need to be approved by the parole board.

7.5.3 Yet despite hard work and diligence, some prisoners are released from prison to no fixed abode (NFA) because of the shortage of suitable places in the community or because they don't want to engage with the process. HM Inspectorate of Prisons reported in June 2025 that approximately 20% of prisoners were released homeless from Lewes, more than half of whom were from a different resettlement area. The Board is one of many bodies and agencies who are concerned about the impact of NFA releases on the wellbeing of the released prisoner, and of the wider community.

7.5.4 The IPR team is made up of seven staff, and is located in a single space alongside the prison's employment hub, Jobcentre and others. This helps strengthen working relationships to better support prisoners, who in turn receive a one-stop service. IPR hosts a pre-release 'café' within a two-week period prior to release to offer advice and support and provide donated clothes, blankets, and vouchers for charity shops and food banks, and works with prison offender managers (POMs) and community offender managers (COMs) to support the process. The introduction of standard 56-day recalls will give IPR more time to work on the resettlement process.

7.5.5 IPR staff chair a fortnightly multi-agency meeting to review the resettlement needs of prisoners. Attendees include the prison's OMU; DWP; Change, Grow, Live (CGL), offering advice about continuity of care around drug and alcohol misuse; the prison's diversity manager and neurodiversity lead; staff from the employment hub; Reconnect, who seek to improve continuity of care for people with an identified health need; and PPG, the prison's healthcare provider.

7.5.5 The employment hub works to support prisoners due for release to find and retain a job. It can help them to produce a CV and disclosure letters, set up a bank account and order a replacement birth certificate and driving licence. It also hosts SeeTec, contracted by HMPPS to give careers advice and prepare learning plans.

8. The work of the IMB

Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the IMB's annual reporting period	11, plus one on sabbatical
Number of Board members at the end of the IMB's annual reporting period	12, includes three going through new member induction
Total number of visits to the establishment	360

Applications to the IMB

Code	Subject	2024-25	2025-26
A	Accommodation, including laundry, clothing, ablutions	126	70
B	Discipline, including adjudications, incentives scheme, sanctions	20	17
C	Equality	5	7
D	Purposeful activity, including education, work, training, time out of cell	18	11
E1	Letters, visits, telephones, public protection, restrictions	60	51
E2	Finance, including pay, private monies, spends	20	16
F	Food and kitchens	23	9
G	Health, including physical, mental, social care	106	107
H1	Property within the establishment	35	16
H2	Property during transfer or in another facility	16	8
H3	Canteen, facility list, catalogues	10	9
I	Sentence management, including home detention curfew (HDC), release on temporary licence (ROTL), parole, release dates, re-categorisation	56	23
J	Staff/prisoner concerns, including bullying	42	38
K	Transfers	13	10
L	Miscellaneous	41	13
U	Unknown		4
	Total number of applications	591	409



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