Annual Report of the Independent Monitoring Board at HMP Fosse Way

For reporting year
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Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

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

2. Description of the establishment[1]

HMP Fosse Way was opened on 29 May 2023 as a category C resettlement prison, with an initial capacity of 1715 prisoners. A further house block was opened in October 2025, increasing the prison's capacity to 1960 prisoners. HMP Fosse Way delivers an integrated regime, meaning all off-wing activities are openly available to all prisoners regardless of offence type. To achieve this, the on-site management teams provide guidance to different cohorts, including prisoners convicted of sexual offences (PCoSOs), young offenders and those with disabilities or cognitive impairments.

HMP Fosse Way is a privately managed prison in Leicester, operated by Serco. The catchment area was originally intended to be predominantly the East Midlands, but now covers the wider Midlands region. The resettlement criteria has also changed and is now between 28 days and 24 months before release. PCoSOs were originally expected to be fully integrated within the general prison population. However, as the catchment area has widened, they are now accommodated separately, while remaining integrated with other prisoners for purposeful activities.

[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

This report will look at the third year since opening. During the first year, the IMB operated with an average of just one or two experienced members. During the second year, the IMB membership increased to five members: three experienced and two who successfully completed training and integrated very quickly into the running of the IMB operation. This, the third year, has seen one of the experienced members transfer to another prison and the new trainee member leave before the year end. The IMB is now operating with just four members.

3.1 Main findings

In its third year of operation, Fosse Way has continued to make positive progress in a number of areas, particularly purposeful activity, the cleanliness of residential areas, the recruitment, training and development of staff and managers, and efforts to reduce both MDT rates and the availability of illicit drugs.

Safety

- Although the Board remains concerned about mandatory drug test (MDT) results, action has been taken during the reporting year to reduce the availability and use of drugs. Increased drug finds through targeted security initiatives, very low numbers of drone sightings and finds (13 during the reporting year) and improved staff awareness and training all appear to have contributed to a reduction in drug-related issues. A drug rehabilitation unit (DRU) has also been established and is operational on one of the wings. (See Annex A for data.)
- There were a further ten deaths in custody during the reporting year.

Fair and humane treatment

- Following last year's negative report on standards of cleanliness and hygiene in the house blocks and wings, the IMB can report significant improvements this year across all areas, particularly in the kitchen serveries.
- Two areas of ongoing concern during this reporting year have been bed bugs and heating. Bed bugs have been found in a number of house blocks, a problem exacerbated by the extensive use of MDF furniture, including beds, which provides a favourable environment for infestation.[2] External contractors were engaged and an internal team has also been established to tackle the issue, but it remains an ongoing challenge.
- Heating was problematic during the winter, with a number of prisoners requiring additional duvets and hot water bottles.

Health and wellbeing

- Mental health continues to be a major concern for the Board. A number of prisoners have severe mental health conditions that require secure treatment under the Mental Health Act, yet continue to face significant delays in transfer to appropriate hospital accommodation. Some prisoners have waited many months for an appropriate placement. During these delays, prisoners are almost always

[2] The MDF furniture referenced has been manufactured in accordance with MoJ technical standards and certified/supplied by MoJ for in cell use.

managed in the segregation unit, placing additional pressure on the staff and facilities. The statutory 28-day transfer limit under the Mental Health Act 2025 bears little resemblance to the reality experienced in practice.

Progression and resettlement

- As at the end of the reporting year, prisoners were engaged in an average of 23.5 hours of purposeful activity per week, representing a significant increase on the previous year. Only 286 prisoners were not engaged in employment or education; of these, 65 were retired or unwell and 71 had declined to participate.
- The offender management unit (OMU) continues to face significant pressures because of the high turnover of prisoners, a situation made more challenging by changes to government sentencing criteria.

3.2 Main areas for development

TO THE MINISTER/PRISON SERVICE/FOSSE WAY DIRECTOR

We see little point in making any recommendations to the Minister or the Prison Service.

Despite HMP Fosse Way being, until HMP Millsike opened, the newest, and one of the largest, prisons in the UK, the Minister has still not visited the establishment[3]. In his response to last year's report, he stated: '*I note the Board's disappointment that I have not yet visited HMP Fosse Way. I fully recognise the importance of seeing, first hand, both the challenges and the successes at one of the newest, and largest, prisons, in the estate. I am committed to arranging a visit at the earliest opportunity and welcome the chance to meet with you and hear directly from staff and prisoners about the work being done, including GRAVITY, a prisoner-led initiative that provides advice, guidance and peer support.*'

The Minister also commented on our concerns about prisoners with severe mental health issues and quoted the Mental Health Act 2025, which has a statutory 28-day transfer limit. As noted in section 3.1, Main Findings, Fosse Way, along with many other prisons, has a number of prisoners with severe mental health issues, who have been sectioned but have far exceeded the 28-day limit. During the reporting year, a mental health hospital facility actually closed, reducing further the number of mental health beds available.

The Board is concerned that prisoners with severe mental illness continue to experience excessive delays in being transferred to secure mental health facilities, with some remaining in prison and in segregated accommodation for prolonged periods despite clearly requiring specialist treatment. The Board questions whether the current arrangements for securing mental health beds are fit for purpose and seeks a clear explanation from the Minister of the causes of these delays, the expected timescales for transfer and the actions being taken to address them urgently.

With regard to the Prison Service, we will not identify any further issues with them, as all we have previously got, in response, is a repeat of what we have identified should

[3] Since the year end, Lord Timpson, the Prisons Minister, has resigned and it is to be hoped that his successor, Catherine McKinnon, will find time to visit Fosse Way.

happen (for example, prisoner property moves between prisons) or have just ignored the issue (for example, mental health). No positive action has followed.

As the IMB has regular meetings with the Director, his management team and staff, any issues and concerns we have had have been dealt with or are in the process of being dealt with, by the time the annual report is published. The points raised last year on health, safety and hygiene, communications and hospital appointments have all been actioned and have shown significant improvements.

Evidence sections 4 – 7

4. Safety

4.1 Vulnerability of PCoSOs

Houseblocks E, F, G and H run as 'Integrated' Houseblocks, with Houseblocks E and F being heavily populated by PCoSOs, in response to the PCoSO population increasing to approximately 35% at the time of writing the report. The regime and purposeful activity opportunities continue to be Integrated, accessible to prisoners of all sentence types.

4.2 Deaths in custody

There have been 10 deaths in custody during the reporting year. Six deaths occurred in custody, four were apparently due to natural causes, one was considered to be drug-related and one resulted in a manslaughter investigation. The other four deaths occurred post-release in the community. As the relevant investigations and inquests had not been completed at the time of writing, any categorisation remains provisional.

4.3 Suicide and self-harm

Subject to the findings of the Coroner's inquests, there were no apparent self-inflicted deaths during the reporting year. Self-harm incidents averaged 87 per month, which represents a 15% reduction against the previous reporting year.

4.4 Violence and violence reduction

Violence at Fosse Way has seen totals per month vary between 27 and 56 incidents during the reporting year, with consistently lower levels recorded since February. Since January, there have only been two serious assaults on staff. The numbers for prisoner-on-prisoner and prisoner-on-staff assaults have been identified in the annexe.

4.5 Use of force

Use of force instances continue to be generally low and comparable with other, similar prisons. As officers have become more experienced in de-escalation, restraint, rather than use of force, is occurring more frequently. Pava incapacitant spray was drawn 24 times in the reporting year compared with 42 times in the previous year - a significant year-on-year reduction.

4.6 Preventing Illicit Items

Although drugs continue to be a concern, actions taken during the reporting year have helped to reduce the problem. Throwovers over the perimeter fence are still occurring but continue to be small in number. There were 13 drone sightings or finds during the reporting year, and the in-cell mobile phone detection system continues to result in regular seizures and a significant reduction in illicit mobile phone use. Drugs continue to enter the prison through the mail, visits, follow-on property and, on occasion, staff. However, a number of initiatives in place have helped control and reduce their impact.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

As Fosse Way has only been open for three years, the accommodation is modern, with most prisoners living in single cells with their own shower. During the reporting year, there were 96 double-occupancy cells. Each cell is equipped with an in-cell CMS computer, enabling prisoners to place orders for food; book medical and dental appointments; order canteen; and receive messages and information from prison departments through the prison's digital communication system (GRAVITY). However, as noted in the two previous reports, many of the fixtures and fittings in the cells are, in the main, made from MDF, and are getting easily damaged and/or broken.[4] This trend will only continue. In addition, the MDF can make it difficult to eradicate bed bugs and this has become an issue at Fosse Way.

Last year's report identified catering operations at house block level as an area of major concern. The IMB can now report that there have been significant improvements in all the areas previously identified as in need of urgent action. Full credit must be given to management, staff and prisoners for actioning and implementing the recommendations made for improvements.

5.2 Care and separation units (CASUs)

Along with the CASU, the prison operates with a CC spur on Houseblock G, with a group size of 14 PCOs that work within these locations signed off by the Director. Staff usually work on the units for two years, which can be extended to three years by the Director if circumstances require. During the reporting period, two staff left the units to take up new roles in the prison.

All staff have a one-to-one session with a member of the psychology team at least every three months. If a serious incident takes place, staff are offered extra support from the psychology and the care teams.

Our observations of staff in both units are positive. They engage well with prisoners held in the units and are enthusiastic about their work, treating prisoners with respect and dignity.

Observations by the IMB and speaking with managers and staff would indicate that there is a need for staff to be offered mental health awareness training, with updates regularly due to the number of prisoners presenting with mental health issues on the units.

Accommodation

The main CASU block has 17 beds and provides the accommodation and facilities required to deliver the CASU regime, supporting positive and humane engagement between staff and prisoners. The second CASU unit is located on G Block Level 1 (gated). It operates as an overflow CASU unit due to the size of the prison population at HMP Fosse Way (maximum capacity 2,000). This unit has 13 beds and a staff office.

[4] This furniture is defined as 25mm flame retardant MDF, compliant with EN 13501-1.

Rule 45 boards (formal reviews for prisoners held in segregation for their own protection) cannot take place in this unit, so prisoners must be escorted to the main CASU block for these reviews.

Prisoners on this unit have to be seen at their door for all other purposes and, from the Board's observations, the unit is not fit for purpose as an operational CASU block.

Management of the units attempt to use the second unit for prisoners given cellular confinement awards following adjudications (disciplinary hearings held when prisoners are alleged to have broken prison rules) rather than for those held under Rule 45. However, this is not always possible due to the number of prisoners being held in these units.

During the reporting period, the average length of stay for prisoners on the units was between five and seven days, which is good to see from an IMB perspective. There were four prisoners with extended stays on the main CASU unit during the reporting period, all of whom had mental health concerns.

There are two 'dry' cells (specially designed cells used to monitor prisoners who are suspected of concealing contraband internally) on the main unit that have never been used and are unlikely ever to be used, as they are not humane or decent for prisoners on any level. In the Board's view, these would be better used as possible repurposed storage areas rather than not used at all.

Cells are modern and generally kept clean by prisoners. However, the Board observed that one prisoner with significant mental health needs remained on the unit for an extended period whilst awaiting transfer to appropriate mental health accommodation. This situation had continued for several months at the end of the reporting period.

Mental health

This remains a challenge for the CASU accommodation, and there should be a mental health nurse on the unit each day. However, this provision has been inconsistent due to shortages of nursing staff following changes to staffing levels by Practice Plus Group, which has been unable to fully deliver this aspect of the service.

Mental Health nurses attend the Rule 45 reviews

The main observations of the IMB regarding prisoners presenting with severe mental health issues are, firstly, that the gatekeeping process is not as fast as it should be and, secondly, that following this, the Commissioners for Secure Mental Health Beds is not fit for purpose and takes an inordinate amount of time to take place.

A prime example, and the worst case observed by the Board, is a prisoner who remained in segregated conditions for a total of 14 months (the final nine months prior to discharge to hospital being at HMP Fosse Way). However, during the reporting period, at least another three severely mentally ill prisoners have been in a similar position. They have deteriorated, due to what the IMB observe as a failing service of decency and humane treatment for those prisoners requiring appropriate mental health care.

It is important to note that staff have supported these prisoners as best they can, given they cannot be given appropriate mandatory treatment as they can in a mental health facility. The IMB is aware that this is a national crisis across the prison estate in England and Wales.

5.3 Staff and prisoner relationships, key workers

There were 257 prison custody officers against a target of 309 (including 28 in training), 44 custodial operations managers (at full target) and 73 operational support officers against a target of 101 (including a number awaiting vetting).

Although the current workforce continues to be predominantly young, they now have a year's more experience and this is reflected in the prison operation and positive performance. From our observations, relationships with prisoners continue to be generally more relaxed than longer, established regimes.

By the end of this reporting year, key work quantity was averaging 100% and key work quality was averaging 95.3% (the percentage that met quality standards), a significant improvement on last year.

5.4 Equality and diversity

Although the IMB has not yet had sufficient time to look in depth at equality and diversity, we have not seen any minority group disadvantaged in respect of the range of purposeful activities in facilities that they can access. The culture of the prison appears to be inclusive for prisoners, management and staff. In addition, with the creation of GRAVITY, prisoners have a further outlet to contact, or be contacted, if they have issues.

GRAVITY

- GRAVITY (Getting Real And Vital Information To You) is a prisoner-led initiative that aims to create a more substantial relationship between offenders and the prison internal/external services. It works with the offender management unit (OMU) to help prisoners navigate their time in prison and ultimately their release into the community.
- GRAVITY now has eight phone-line prisoner advisers, who, between them, make 350 calls per day. In addition, there are two GRAVITY prisoner representatives on each house block, who have mental health training.
- Since starting, GRAVITY has made 40,000 calls to prisoners, with 19,000 answered and 8,500 issues, that have been raised by prisoners, resolved. The whole operation is fully auditable and accountable.
- The IMB continues to find GRAVITY a very useful operation and outlet for prisoners to access, which the IMB can use if they have prisoner issues that cannot be resolved in the usual way.

5.5 Faith and pastoral support

The chaplaincy has four full-time members of staff (with one vacancy) and 10 part-time staff and volunteers. Provision is available for all faiths, although there are currently vacancies for a Rastafarian chaplain and a Church of England chaplain, the latter having been vacant for three years. Overall, it has been a successful reporting period,

with only minor staffing issues. The main challenge remains ensuring that prisoners are seen before release. Strong areas of work include community engagement, over-50s coffee mornings, bereavement support, and the consistent provision of worship and study opportunities for all faiths facilitated by a chaplain. In addition, the prison choir won a Koestler Award, a national award recognising artistic achievement by people in the criminal justice system.

The IMB has always found the chaplaincy to be very helpful and very positive in their dealings with prisoners off all faiths.

5.6 Incentives schemes

There are a number of incentive schemes in addition to income paid for prisoner work or education. These are too numerous to list, but appear to be appreciated by the prisoners.

5.7 Complaints

Total number of prisoner complaints was 3541. Key areas of complaints are:-

- Offender management
- Health
- Property (including missing property and compensation claims)
- Purposeful activity

5.8 Property

As with all previous IMB annual reports from Fosse Way and other prisons, property, particularly when prisoners are transferred in, remains a big issue. The Prison Service seems incapable of producing a robust, foolproof system for property to remain with its owner, despite a number of reviews. In our view, this should be very straightforward to achieve, but appears to be beyond the Prison Service management.

6. Health and wellbeing

6.1 Healthcare general

Healthcare services are provided by Practice Plus Group, a private healthcare company, which took over the contract from Nottinghamshire Healthcare NHS Foundation Trust on 1 July 2025. Throughout this reporting year, the healthcare department has been understaffed and, like the previous year, it has relied on a third party to provide agency staff. At the time of writing this report, there were 22 agency staff covering a variety of job roles, but the majority have been working in the prison consistently, which is helpful. There remain certain roles that are more difficult to recruit to and, at the end of May 2026, these included pharmacy technicians (six vacancies) and assistant psychologists (three vacancies). Delays in onboarding due to vetting and in gaining key access have caused some issues for healthcare staff, but these do appear to be improving.

In December 2025, Practice Plus Group implemented an overnight emergency cover arrangement, consisting of two members of staff who provide clinical support and intervention in code blue (emergency code for when a prisoner isn't breathing) and code red situations (when a prisoner is bleeding). There appear to have been no gaps in this service provision, which has been warmly welcomed, and it is definitely a positive service improvement.

The current contract requires Serco to provide five escort slots to facilitate routine hospital appointment attendance. During the last six months, the number of cancellations for pre-booked hospital appointments has fluctuated significantly, with 46 cancellations in January 2026 (42% of appointments completed), 24 in February 2026 (52% completed) and 10 in May 2026 (70% completed). These figures demonstrate a significant improvement in the number of escort slots provided, and the resultant increase in actual hospital appointments attended. It is also clear that when the number of bed watches increases, this has a negative impact on Serco's ability to provide escorts for hospital appointments.

The new contract provider has also successfully introduced a once monthly on-site X-ray and ultrasound clinic, which has helped reduce the pressure on the number of escorts required and, in turn, has resulted in reduced delays for men requiring routine X-rays, etc. The provider has also set up an arrangement with local NHS treatment centres, which can see prisoners without a pre-booked appointment where, for example, they may have a suspected fracture. This has also assisted in reducing any delays in accessing X-rays and other treatment services.

The IMB has worked hard to set up a pro-active and regular liaison arrangement with senior healthcare managers, and the new provider has been very helpful in sharing all relevant performance data and information when requested. This in turn makes it much easier for the IMB to proactively monitor trends and performance in healthcare provision.

The volume of IMB applications (prisoners' written representations) related to healthcare complaints and issues has seen a slight increase, accounting for around 18% of all IMB applications. The only category exceeding this figure was sentence management issues. However, on a positive note, when matters have been brought to the attention of healthcare managers, they have generally been very proactive in intervening and dealing with the relevant issues.

Data shared by Practice Plus Group regarding internal prisoner complaints and concerns indicates that the number of complaints is reducing, from 120 in January 2026 to two in May 2026. It also shows continued improvement in the proportion of complaints completed within the required 30-day timescale, with none overdue in May 2026.

Two Prison and Probation Ombudsman (PPO) reports relating to deaths post release during the reporting period have been critical of healthcare services at Fosse Way, particularly in relation to 'ensuring a referral to community substance misuse services is completed when a need for support is identified'. In relation to the second report, although the author made several recommendations regarding the management of patients during an infective disease outbreak, these are being challenged by the healthcare care provider on the basis that staff were following current UKHSA (UK Health Security Agency) guidelines. The provider does, however, recognise that staff may need further guidance on how to place a person into isolation.

6.2 Physical healthcare

From the Board's observations, the local healthcare team constantly strives to provide a high standard of care. In the context of trying to ensure patients access prompt services, the team is still offering regular in-house appointments on a range of services, including infectious diseases, diabetic eye screening, sexual health, dermatology and pre-operation screenings.

Medication arrangements appear to be professionally managed and safer prescribing arrangements are in place. Medicines are issued at 16 medication hatches across the estate twice daily, which does creates challenges in terms of the required staffing levels, hatches not always being able to open on time and the importance of Serco staff improving the level of supervision. Medication is provided by Well Pharmacy, which is external to the prison. This means that, for many prescriptions, there is a delay of up to 48 hours before the medication can be given to the patient (a supply of critical drugs is kept on site). This has caused issues for several mentally unwell men requiring non-routine anti-psychotic medication where, if prescribed just before a weekend, can take several days before the required medication is available on site.

The wait time for a routine GP appointment remains around four weeks, and experience from several IMB applications relating to urgent health issues indicates that urgent matters are dealt with promptly. The provider is proactively seeking to reduce the number of patients who do not attend (DNA) scheduled appointments and those who fail to collect their medication. Measures to reduce DNAs include the use of health champions and GRAVITY, whose representatives now contact prisoners in their cells to remind them of scheduled healthcare appointments. Dental services are subcontracted, with dentists available on site each day. The current wait time for a routine dental appointment is around 11 weeks and six days, and urgent same-day appointments are also available.

6.3 Mental health

Mental health services appear to be reasonably staffed and are generally responsive. A decision in December 2025 to adopt a community-based approach delivering a service from 8am to 4.30pm resulted in a significant change to the working patterns and hours of mental health staff. This, in turn, resulted in a reduction in morale and job satisfaction for this group of staff at Fosse Way. Following a staff support day, a local action plan was developed and a business case was put forward for additional mental health staff

to be resourced. This issue was also picked up in a recent Care Quality Commission (CQC), the independent regulator of health and social care services in England, and a follow-up visit is scheduled for July 2026.

A mental health worker attends all initial ACCT reviews, and they deliver a good range of interventions for men with less complex needs. The mental health triage window is being met for both urgent and routine appointments and, with 208 referrals in May 2026 (including 42 urgent referrals), there is clearly a significant demand for this service. Current caseloads for mental health workers are between 30 and 40 cases.

Patients requiring secure mental health treatment under the Mental Health Act continue to face significant delays in accessing this resource, which is a national commissioning issue. In one case, the person has been waiting more than 400 days and, with local community provision closing, such delays are only likely to increase further.

Many such patients are accommodated in the segregation unit whilst awaiting transfer to such facilities. Whilst the segregation unit can provide a quieter, safe space where staff have closer oversight of their medication and behaviour, this is not the most suitable environment for a person with complex mental health needs. These ongoing delays need to be addressed at a national level. Linked to this is the issue of logistical issues, further delaying transfer to secure mental health facilities, e.g. the provision of suitable transport facilities.

6.4 Social care

From our observations, the prison environment caters well for people with low mobility and disability issues. There are dedicated larger disabled cells that include handrails, a drop-down chair in the shower, a commode where required and a central bed to enable maneuverability. Where required, end-of-life care can be provided and the team has strong links with Marie Curie (a charity that provides specialist end-of-life care and support), which provides a dedicated nurse who has access to the unit and all local health care systems. The additional provision of overnight nurses for emergency cover also means that, if required, they can deliver relevant palliative medication 24/7.

6.5 Drug and alcohol rehabilitation

Ongoing staff shortages and recruitment issues in the substance misuse services has had an impact on the level of relevant service provision. On a positive note, a new drug recovery unit has now opened in house block A and the substance misuse team is also located in the same building. The team also provide a range of services including group work, psychological-social therapy, one-to-one sessions, access to a range of prescription medication and generic recovery services. Facilities are also now in place for relevant men in recovery to be released with up to 28 days medication and referrals are also made to community substance misuse services when a need has been identified.

7. Progression and Resettlement

7.1 Education and Library Services

Summary

As a resettlement prison, HMP Fosse Way focuses on preparing prisoners for release by providing education and vocational training, access to workshops and employment opportunities, and a range of rehabilitation programmes aimed at reducing reoffending.

Due to the government early release initiatives, Fosse Way's population now differs from the originally planned demographic, which has created additional pressures and challenges for those delivering academic and vocational programmes. The prison population has also increased this reporting year by more than 200 prisoners following the opening of a new house block in late 2025. There has been significant progress in the provision of education and vocational training in last 12 months, and the IMB has been engaged with the Fosse Way leadership team as these improvements have been implemented.

These improvements, including attendance and achievement, appear to have been accelerated in part by the appointment of a new head of education, skills and work in December 2025, who has made significant changes to the way these activities are delivered. Her key focus from January to March was to address the 51 PA (performance assurance) actions arising from a Performance Improvement Notice issued by senior leaders, all of which have now been closed. She also identified two key areas for improvement, firstly to ensure that all prisoners who need a support plan have one and, secondly, to improve inclusion by breaking down barriers to providing the ability of prisoners to work or take part in education.

Education is a cornerstone of purposeful activity at Fosse Way, and Milton Keynes College (MKC) is still the provider of the majority of both academic and vocational courses, receiving over 90% of Serco's education funding. Whilst education budgets in some prisons sector are being reduced, the budget at Fosse Way remains untouched. There are 400 education places available, and the curriculum includes both Tier 1 courses (focused on progressive education and work) and Tier 2 courses (offering therapeutic and enrichment experiences), all of which lead to either credited or non-credited qualifications upon completion.

HMP Fosse Way works in partnership with employers to help ensure that education and training provide realistic pathways into employment, taking into account both prisoners' needs and the demands of local and regional labour markets:

- West Midlands: 50%
- East Midlands: 30%
- Rest of the country: 20%

To ensure the curriculum remains relevant and diverse, the prison conducts a strategic needs analysis annually, the latest of which was completed in January 2026.

In terms of prisoner engagement, all prisoners should undertake an initial education assessment as part of their induction. A digital personal development plan (DPLP) is created that includes relevant information for each prisoner to progress their education, skills and work experience during their time at Fosse Way.

Ofsted Inspection

The March 2025 Ofsted inspection rated Fosse Way's provision of education as 'Good'. However, it highlighted three areas requiring improvement, two of which were related to education. Attendance at education wasn't good enough and pass rates in English and Maths qualifications were too low. A plan was put in place in late 2025 to address these issues and attendance has improved; however, pass rates remain too low and are the subject of continued focus.

In March 2026, Ofsted undertook a further 'dummy' inspection at Fosse Way, to stress test their new framework, which will be rolled out across the prison estate in the coming months. Fosse Way was able to provide feedback, which Ofsted incorporated into their framework prior to running pilots at several other prisons. The overall assessment from Ofsted was still 'Good'.

Statistics

The target for Tier 1 (education & work) and Tier 2 (enrichment) purposeful activity has been reduced to 26.2 hours per prisoner per week, removing travel time to focus on activities only, with a 95% achievement target, which is consistently being hit. This has been achieved by moving from a cohort-based approach to a 'roll on, roll off' approach across all purposeful activity. This has meant that, if a learner leaves part way through a programme, their place can be taken up by someone else. They have also introduced several short on-line courses, and we understand that both initiatives have significantly improved attendance and attainment rates.

English attainment improved from 73%, with 50 learner starts between January and May 2025, to 87%, with 70 learner starts during the same period in 2026. Improvement in mathematics was even greater, increasing from 75%, with 51 learner starts, to 86%, with 101 learner starts.

MKC classroom efficiency has improved from 61% in September 2025 to 100% by the end of May 2026. The target for attendance and attainment for this year was 85%, which has been achieved, and exceeded, for most of this calendar year. Whilst this percentage has remained constant, prisoner participation has increased significantly.

Library accessibility

Although relatively small for a population of 1,900+ prisoners, the library is accessible to all and plays a central role in promoting literacy and supporting learners' engagement with reading. It now loans over 2,300 books per month, as well as DVDs and audio books, to prisoners who can book library sessions through their in-cell technology. All house blocks are allocated weekly library slots and prisoners can also book library sessions when they participate in English classroom lessons. As well as supporting formal learning, the library contributes to evening enrichment programmes and hosts regular 'events' focused on topical themes, such as Black History Month.

Responsibility for managing the Shannon Trust, a charity that supports prisoners with reading difficulties through peer mentoring, has moved from MKC back to Serco and now sits within the Equality and Diversity team. Historically, the Shannon Trust had not been particularly well established within the prison for a number of reasons, including a lack of suitable space for mentoring and training sessions. However, dedicated space has now been made available in the new Industries building, providing a more appropriate learning environment. Feedback from learners has been extremely positive and the numbers of learners taking part improved by over 100% in May alone. Serco

anticipates that this positive trend will continue. Serco anticipates that this positive trend will continue.

7.2 Vocational training, work

Fosse Way has adopted an employer-led approach to education, skills and work provision and engages with outside partners to ensure that education and training lead to realistic employment opportunities after release.

Workshops continued to be visited regularly during the reporting year, and there have been frequent interactions with relevant prison staff. An ancillary facility has been built next to the new house block to provide further skills and vocational training for the additional Fosse Way prisoner intake. This has enabled the prison to diversify and extend the industry-relevant skills and training courses it is able to offer. Fosse Way has also introduced prisoner led training initiatives such as an accredited PT training course.

There have been several changes this year to industry partner engagement. Contracts have been reviewed and new industry partners appointed to further support the rehabilitation of prisoners after release. The focus has been on working with partners that can offer employment opportunities to prisoners on release from Fosse Way. One example is Overclean Ltd, which provides on-site training and employment-focused opportunities. Fosse Way is also developing relationships with other industry partners that support this approach.

Feedback

We have observed that learners generally have a highly positive attitude towards the work and training they undertake and this enthusiasm also seems to be shared by the staff.

From our observations, relationships between learners and staff appear to be generally very good, and learners articulate a range of positive attributes about both the staff and their learning. This positive learner feedback is demonstrated in survey results earlier this year:

- 100% of learners report that they enjoy their course and rate their tutor’s subject knowledge highly.
- 98% believe that their knowledge and skills have improved significantly.
- 90% intend to enrol on further learning programmes.

From the Board’s conversations with managers, they generally seem pleased with the progress made with all aspects of purposeful activity. Whilst the increase in prisoner population following the opening of house block H initially caused concern about the lack of work and training places, the actions taken during the reporting year seem to have largely addressed these concerns. There are still empty workshops, but there are several initiatives taking place which should address this.

The 2025 Ofsted report highlighted a third area requiring improvement: too many prisoners employed as wing workers were underutilised. This has since been addressed by reducing the number of wing worker roles to better align staffing levels with meaningful activity and operational demand.

Summary

The Board's observations indicate that the quality of education, work and training provision remains high. There is scope for developing the range of the offer and this is recognised by prisoners and staff at all levels and is being worked on.

8. The work of the IMB

The Board started the reporting year with five members and one member in training, who joined at the end of May 2025. One member transferred to another prison in March 2026 and, by the end of the reporting year, the member in training had resigned.

The prison opened a new house block in October 2025, accommodating a further 260 prisoners, adding to the demands on the Board. Despite the further increased workload and reduced number of members, the Board continued to observe the vast majority of Rule 45 reviews, carry out full monitoring of the prison, process all IMB applications on time and further increase our visibility in the prison. Management, staff and prisoners appear to remain fully aware of the role and responsibilities of the IMB, and the Board continues to maintain positive relationship with all departments and prisoners.

Recruitment of new members continues to take far too long with the three new potential members still not in place. The recruitment of them started in January, so eight months have passed since the start of the recruitment. With our recommended complement of members being 17 before the new block opened and, assuming this would increase the number by a least two, this means that the IMB at Fosse Way is 15 members or 75% below the potential Board optimum!

Board statistics

Recommended complement of Board members	17 (?+2 for new house block)
Number of Board members at the start of the reporting period	5
Number of Board members at the end of the reporting period	4
Total number of visits to the establishment	331

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	17	21
B	Discipline, including adjudications, incentives scheme, sanctions	12	15
C	Equality	4	12
D	Purposeful activity, including education, work, training, time out of cell	19	25
E1	Letters, visits, telephones, public protection, restrictions	9	17
E2	Finance, including pay, private monies, spends	14	20
F	Food and kitchens	11	5
G	Health, including physical, mental, social care	37	50
H1	Property within the establishment	20	14
H2	Property during transfer or in another facility	38	23
H3	Canteen, facility list, catalogues	15	18
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	46	73
J	Staff/prisoner concerns, including bullying	11	7
K	Transfers	0	5
L	Miscellaneous	9	7
	Total number of applications	**262**	**312**

Sentence management accounted for the highest number of applications at Fosse Way, reflecting the pressures on the OMU relating to staffing levels and the number of prisoners seeking recategorisation, parole hearings and release date information.

Healthcare was also a significant area of concern. Since the end of the reporting period, Nottinghamshire Healthcare NHS Foundation Trust, the healthcare provider, has stepped down from the contract and has been replaced by Practice Plus Group, a private healthcare provider.

Annex A

The following are statistics on a number of key areas:

- MDT: mandatory drug testing
- IRS: incident reporting system
- Summary of complaints
- Industries
- Violence in Fosse Way

MDTS: monthly number of drug tests

JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	TOTAL
89	88	86	87	85	85	85	89	89	96	97	95	1071

Number of positive drug tests per month

JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	TOTAL
34	33	30	29	35	31	23	22	24	28	18	16	323
38%	44%	35%	33%	41%	36%	27%	25%	27%	29%	18%	16%	33%

Incident reporting system

	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
Assaults	48	56	71	37	49	37	53	47	26	41	27	38
Deliberate Self-harm	102	124	100	73	72	62	90	87	78	76	91	89
Finds	88	104	67	76	100	140	61	91	64	62	82	74
Fire	2	4	9	5	2	1	2	1	2	4	5	4
Key Lock Incidents	6	2	7	17	4	5	5	10	7	8	13	5
Drone Sighting	0	1	1	0	4	1	2	1	2	0	0	1
Total	246	291	296	208	231	246	213	237	179	191	218	201

Total IRS for the reporting year: 2757

Summary of complaints

Complaint type: Comp1 (ordinary complaint); Comp 1A (appeal), Comp 2 (confidential complaint)

Total number of complaints for the reporting year:

JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	TOTAL
252	240	220	307	269	279	272	314	288	425	374	301	3541

Violence

	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total
Prisoner on prisoner	32	45	39	25	34	24	43	35	16	32	20	23	368
Prisoner on staff	9	8	20	7	7	7	6	8	7	4	2	6	91
Serious Prisoner on Prisoner	6	2	8	3	7	5	2	4	3	5	5	7	57
Serious Prisoner on Staff	1	1	4	2	1	1	2	0	0	0	0	2	14

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