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Rt Hon Robert Buckland QC MP Secretary of State for Justice 102 Petty France London SW1H 9AJ

Dear Secretary of State

HM Inspectorate of Prisons – Scrutiny Visit to HMP Erlestoke

I am writing to bring to your attention our findings from the recent Scrutiny Visit to HMP Erlestoke, which took place on 11, 18 and 19 August. At the end of July, I wrote to you explaining that the programme of Short Scrutiny Visits (SSVs), which we had been using since April, was to be replaced with a programme of Scrutiny Visits (SVs) which allow for more breadth and depth of inspection than had been possible with the SSVs. These Scrutiny Visits will act as an interim form of inspection until such time as our full inspection programme can be resumed.

The findings of Scrutiny Visits will, as with all HMI Prisons inspections, be published and it is our intention to do so within a period of about four weeks from the time of the visit. The published methodology also allows for me as Chief Inspector to "write to the Secretary of State to bring to their attention serious concerns that in their judgement require immediate attention". We have decided that the Urgent Notification process, which was specifically designed to be invoked after a full inspection, will not be used following Scrutiny Visits.

Had the inspection of HMP Erlestoke been a full inspection and not a Scrutiny Visit, I would have had to give very serious consideration as to whether the Urgent Notification process should be invoked. However, I have no doubt that the criteria for writing to you to set out my concerns following a Scrutiny Visit are satisfied, and that immediate action is required.

We last inspected Erlestoke in July 2017. On that occasion, deterioration was clearly evident and outcomes in three of our four healthy prison tests were judged to be

insufficiently good. Violence had increased, more of it was serious and linked to a significant drug problem. Incidents of self-harm had doubled since the previous inspection in 2013. Although we found staff-prisoner relationships to be superficially positive, staff did not supervise rules and boundaries with sufficient rigour. Standards of accommodation varied greatly, with much in disrepair or dirty. The main purpose of the category C training prison, which holds around 500 adult men, is to address the offending behaviour and reduce the risk presented by long-term offenders. At that time, we found access to offending behaviour work to be reasonably good. The management team was relatively new and were enthusiastic to make improvements. At this Scrutiny Visit in August 2020, we found that our optimism of three years ago had been misplaced. There was clear evidence of a further decline in the treatment and conditions for prisoners and a deterioration in safety. I should emphasise that my concerns stem not only from clear evidence of long-term issues that have not been addressed, but also from a response to the COVID pandemic that has been too inflexible and failed to respond adequately to local needs. My findings are set out in broad terms in the attached summary document but the following are key areas of concern.

Key Findings

- A lack of leadership and oversight of the segregation unit was of serious concern.
 We saw evidence of treatment that can only be described as degrading and was
 completely unacceptable. We found three prisoners who had been without
 toilets, running water and a cell call bell system for approximately two weeks.
 They had been given buckets while waiting for cell toilets to be repaired.
- There were also serious safeguarding concerns about the lack of social care provision for some very vulnerable prisoners with disabilities, who had been left unable to complete basic tasks, such as cleaning themselves, their cells or collecting food. At the time of our visit, the social care needs for these prisoners had been neither assessed nor met. The prison had taken limited steps to help them, but this was woefully inadequate. One disabled man had resorted to paying prisoners to clean his cell and had to position himself in bed in such a manner as to not fall out, due to the lack of any bed rail. He was unable to wash properly as he had not been provided with a chair for his shower despite numerous requests. He had acquired a piece of wood to help support his back when in bed due to the lack of a supportive mattress, and he struggled to stand following any use of the toilet as it was too low. Another man, who was prescribed morphine for postsurgery lower back pain, spent most of his time in bed. He could clean himself as he had a shower chair, but he was unable to clean his dirty cell and bedding. During the pandemic these men were not treated by the prison as vulnerable and so additional welfare checks had not been conducted on them during the long periods of lockdown.
- The lack of care for prisoners at risk of suicide and self-harm was also troubling.
 Incidences of self-harm had almost doubled since the start of lockdown and were
 on an upward trajectory. There were deficiencies in the assessment, care in
 custody and teamwork (ACCT) processes to support those at risk. In our survey,

only 45% of prisoners being supported through the ACCT process felt cared for by staff.

- We were extremely concerned to find that the safer custody support line designed for family and friends to raise concerns about prisoners was poorly advertised. It was not available on the prison's website or on display in the visits room. Worryingly, we also found the dedicated support line for prisoners to use was not working.
- Further indicators of an overall deterioration in safety since restrictions were put into place in response to the pandemic included a significant increase in the use of force. This had more than doubled since the beginning of lockdown and was often used to enforce the restricted regime. Despite prisoners being locked up for most of the day, the level of assaults had remained similar to the period before lockdown. There had been a recent spike in serious incidents of indiscipline, including a barricade and incidents at height.
- In the light of our findings around safety, we were concerned to find that
 managerial oversight of use of force had inexplicably ceased at the beginning of
 the pandemic and strategic meetings to identify, address and manage violence
 and safety had only recommenced the week of our visit.
- Living conditions were poor for many. Most residential units were badly maintained, and some were dilapidated. The facilities management provider had a significant backlog of repairs. The management team had no clear picture of how many jobs were outstanding, but some had still not been fixed since last year. We found broken cell windows with sharp shards of glass, damaged observation panels, blocked toilets and showers that were not working. The older units required painting, and graffiti, including racist symbols, was seen by inspectors. Communal areas were dirty, especially on the older units, and cleaning regimes designed to help infection control had ceased.
- The management of behaviour and the relationships between staff and prisoners also raised concerns. Whilst our survey suggested that staff treated prisoners with respect, 39% of prisoners also felt victimised by staff. Relationships did not appear to be purposeful, and prisoners reported difficulty in getting day-to-day issues resolved. The key worker scheme was no longer effective. We witnessed failures to challenge poor behaviour or enforce rules. Most prisoners we spoke to told us that the incentives scheme was ineffective, with anti-social behaviour rewarded and often resorted to by prisoners to get their needs met.
- The promotion of equality was poor. Equality and diversity meetings were too infrequent to be instructive or useful. In our survey, a quarter of prisoners identified as being from a black or minority ethnic background. They reported much poorer perceptions of treatment. Young people under the age of 25 also reported less favourably, and only 36% in our survey felt staff treated them with respect.

- The support in place for prisoners to maintain family contact was very disappointing. Social visits had only resumed two weeks before our visit and the take up was very low. On the first day of our scrutiny visit only two out of a possible 28 places were filled. Many prisoners' families lived far away from the prison. The short duration of visits, together with restrictions, such as the prohibition of physical contact, meant that for many families, visits were not a realistic or worthwhile option. Three visitors, who had visited their loved ones for the first time in over five months, had been banned from visiting for three months for breaching the prohibition on physical contact. Prisoners did not have access to in-cell telephony and some complained of poor access to landing telephones during their limited time out of cell. It had taken far too long to introduce video calls, which would have mitigated these problems, with the Purple Visits facility not due for full implementation until the beginning of September.
- There was little opportunity to progress for most prisoners. In fact, the prison appeared unable to fulfil its purpose as a training prison. At the time of our visit, the prison had just resumed some programme work, but unduly restrictive national directives (which, bizarrely, only allowed prisoners from the same regime cohort to access groupwork) meant this could mostly only be delivered one-to-one. Such restrictions were inconsistent with access to other activities where prisoners from different cohorts were able to mix. The withdrawal of HMPPS training for programmes facilitators compounded the problem, as half the facilitators were awaiting training and unable to practise. There appeared to be little realistic prospect of the prison being able to address the substantial backlog of programme work, given current restrictions. Since the prison was a national resource for programmes work, these problems would be felt upstream by prisoners waiting to transfer to Erlestoke for their needs to be addressed.
- The amount of time prisoners had out of their cells was severely restricted. Most prisoners still only received 45-minute sessions in the morning and the afternoon and an additional half an hour one evening a week. Some prisoners who were self-isolating received only 45 minutes unlocked each day and did not get any time in the open air. Prisoners reported frustration at delays each day in the delivery of this limited regime, and at the lack of activity. A batch of recovery plans had received national approval, but these were overly restrictive and offered little in the way of additional activities or more time out of cell. Workshops and face-to-face education had stopped and only around 30 prisoners were employed in non-wing-based activity. We were not satisfied that all the restrictions, almost five months after the lockdown, were consistent, still necessary and proportionate. The negative impact on prisoners, many of whom were enduring poor living conditions, was evident in the worrying deterioration in safety.

Conclusion

The Urgent Notification process, you will recall, specifies that the letter to the Secretary of State from HM Chief Inspector will be published. The Scrutiny Visit methodology is slightly different in that the Chief Inspector reserves the right to publish, but is not

obligated to do so. On this occasion I have decided not to publish this letter immediately but it will be incorporated as an addendum into the final visit report.

I am aware that the Prison Group Director has already established an enquiry into some specific incidents and we have made six safeguarding referrals to the Wiltshire Adult Services, but as I hope this letter has made clear, there are a wide range of serious concerns that need to be addressed as a matter of urgency. Some of those issues should be amenable to local resolution, if effective leadership can be brought to bear. Others appear to be systemic, arising from the apparent inflexibility of the recovery programme. I am writing in the hope that you can bring your personal authority to bear so that the restrictions to regime, programmes and facilities at HMP Erlestoke are thoroughly reviewed to ensure their continuing proportionality and necessity, and that the longer-term decline in standards and performance can be arrested.

The response to the COVID pandemic at HMP Erlestoke has led to a less safe, less decent and less purposeful prison. I am in no doubt that well led and properly supported local innovation and flexibility is now urgently needed to restore acceptable treatment and conditions for the prisoners held there.

Yours sincerely

PETER CLARKE

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