



Report on an unannounced inspection of

## **HMP Usk and HMP/YOI Prescoed**

by HM Chief Inspector of Prisons

12–22 May 2025



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## Introduction

Usk, a small traditional looking prison dating from the 19<sup>th</sup> century, is a category C resettlement prison in Monmouthshire for up to 276 adult men. Under the same operational management, but located a few miles away, is Prescoed, a category D open prison for up to 260 adult men.

When we inspected Usk and Prescoed in 2021, we reported very positively, and at this inspection, we were pleased to find that outcomes for prisoners had got even better. Other than purposeful activity at Prescoed, which we judged to be reasonably good, all other healthy prison tests at both establishments were good, our highest assessment.

Both prisons were safe and stable and new arrivals were well received, with any risks presented by prisoners correctly addressed. Similarly, safeguarding arrangements were multidisciplinary and effective. There was little violence and evidence of drug use, hardly any use of force and no use of segregation. At Prescoed, prisoners were engaged with and motivated by the regime. However, some were frustrated by the time it took for them to gain access to release on temporary licence and there was evidence of underemployment in work and activities.

Relationships between staff and prisoners were overwhelmingly positive, which was at the heart of the prisons' success. Living conditions were generally good, which prisoners appreciated. However, older facilities at both establishments, particularly at Prescoed, showed inevitable signs of wear and tear. Other aspects of daily living, including systems to support redress, consultation, health care and the promotion of equality and inclusivity, were good.

Time out of cell was much better than we normally see and access to education, skills and work was, for the most part, encouraging, with one weakness at Prescoed being that some prisoners were underoccupied. There was also good work to support family ties, which was well managed despite the inherent safeguarding challenges faced by Usk's population. Work to help prisoners progress through their sentence, reduce their risk and confront their offending behaviour were good, and supported by interventions that met both their resettlement needs and public protection needs.

At Usk and Prescoed, most surveyed prisoners said their experiences would make them less likely to reoffend. Both establishments were clear about their role in rehabilitating those in their care and had a focus on delivering good outcomes through a positive culture and effective staff-prisoner relationships. The governor and his staff should be congratulated for what they are achieving.

**Charlie Taylor**

HM Chief Inspector of Prisons

August 2025

# What needs to improve at HMP Usk and HMP/YOI Prescoed

During this inspection we identified eight key concerns, of which two should be treated as priorities. Priority concerns are those that are most important to improving outcomes for prisoners. They require immediate attention by leaders and managers.

Leaders should make sure that all concerns identified here are addressed and that progress is tracked through a plan which sets out how and when the concerns will be resolved. The plan should be provided to HMI Prisons.

## Priority concerns

- 1. Education, skills and work provision did not consistently support all learners to make good progress, and it was not responsive enough to changes in the population at Prescoed, leaving some prisoners underoccupied.**
- 2. Delays in release on temporary licence (ROTL) approvals meant that many prisoners at Prescoed did not have the opportunity to attain prompt ROTL to help them prepare for a safe and constructive release.**

## Key concerns

- 3. At Prescoed, some communal and outside areas were not cleaned properly, and staff were not sufficiently visible on the wings to enforce standards or support prisoners.**
- 4. Self-catering facilities at Prescoed were too limited to support prisoners to prepare for independent living.**
- 5. There were some weaknesses in clinical health care governance: incident reporting was low and there was insufficient monitoring of areas such as attendance at outpatient appointments and clinics.**
- 6. Patients were unable to receive, or be prescribed, the equivalent range of medication that was available in the community.**
- 7. Education, skills and work self-evaluation did not consistently focus on the quality of teaching or consider all relevant data to inform improvement priorities.**
- 8. There were insufficient telephones for prisoners at Prescoed and many could not be used in privacy.**

# About HMP Usk and HMP/YOI Prescoed

## Task of the prison

Usk is an adult men's category C national sex offender treatment provider and resettlement prison. Prescoed is an adult and young adult men's open resettlement prison.

## Certified normal accommodation and operational capacity (see Glossary) as reported by the prison during the inspection

### Usk

Prisoners held at the time of inspection: 274

Baseline certified normal capacity: 159

In-use certified normal capacity: 159

Operational capacity: 276

### Prescoed

Prisoners held at the time of inspection: 249

Baseline certified normal capacity: 220

In-use certified normal capacity: 220

Operational capacity: 260

## Population of the prison

### Usk

- 156 new prisoners received each year (around 13 per month).
- 7% of prisoners from black and minority ethnic backgrounds.
- 82 prisoners released into the community in the last 12 months.
- 40 prisoners receiving support for substance misuse.
- Seven prisoners referred for mental health assessment each month.

### Prescoed

- 390 new prisoners received each year (around 33 per month).
- 48.6% of prisoners receiving some form of release on temporary licence (ROTL).
- 12% of prisoners from black and minority ethnic backgrounds.
- 24 prisoners released into the community each month.
- 65 prisoners receiving support for substance misuse.
- Nine prisoners referred for mental health assessment each month.

## Prison status and key providers

Public

Physical health provider: Aneurin Bevan University Health Board

Mental health provider: Aneurin Bevan University Health Board

Substance misuse treatment provider: Dyfodol

Dental health provider: as directed by Aneurin Bevan University Health Board

Prison education framework provider: HMPPS

Escort contractor: GEOAmey

**Prison group**  
HMPPS Wales

**Prison Group Director**  
Giles Mason

**Brief history**

Usk opened in 1844 as a house of correction. In 1870, it became the county gaol for Monmouthshire and remained in that role until 1922, when it closed. It reopened in 1939 as a closed borstal until 1964, when it became a detention centre. In 1983, it became a youth custody centre, and from 1988 to 1990 a young offender institution. Since May 1990, it has been an adult category C establishment largely holding men convicted of sexual offences. Usk became a resettlement prison in 2019.

Prescoed opened in 1939 as an open borstal. It became a detention centre in 1964 and an open youth custody centre in 1983. In 1988 it became a young offender institution, also taking category D adult males some years later. Since 2004, it has been exclusively an open prison for adult males, including young adults aged 18 to 21.

**Short description of residential units**

**Usk**

A, B and C wings – two-storey landings; new receptions located on C wing  
D wing – single-storey with an enhanced unit for life-sentenced prisoners and those serving indeterminate sentence for public protection (IPP), long termers and incentivised substance free living (ISFL) prisoners.

**Prescoed**

12 residential units with a mix of single and double cells, two semi-detached houses accommodating up to eight longer-term prisoners preparing for release and 40 'pods' with single, en-suite accommodation. Specific areas include:  
Pugh unit – prisoners on induction  
Mitchell unit – larger single room accommodation for those over 50 and prisoners working in the community.  
Gates unit – designated substance free unit.

**Name of governor and date in post**

Rob Denman, July 2021

**Changes of governor since the last inspection**

Giles Mason to July 2021.

**Independent Monitoring Board chair**

Roberta Morris

**Date of last inspection**

14–25 June 2021

# Section 1 Summary of key findings

## Outcomes for prisoners

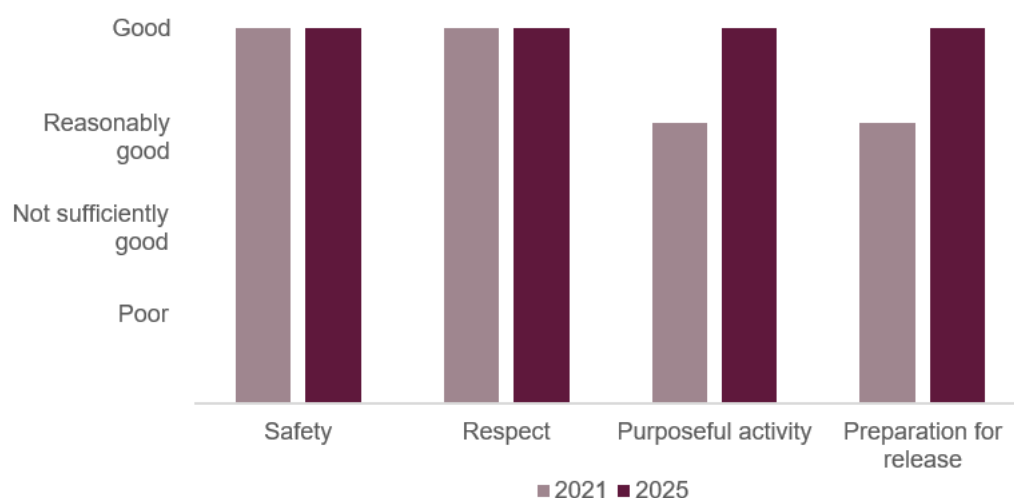
1.1 We assess outcomes for prisoners against four healthy prison tests: safety, respect, purposeful activity, and preparation for release (see Appendix I for more information about the tests). We also include a commentary on leadership in the prison (see Section 2).

1.2 At this inspection of HMP Usk, we found that outcomes for prisoners were:

- good for safety
- good for respect
- good for purposeful activity
- good for preparation for release.

1.3 We last inspected HMP Usk in 2021. Figure 1 shows how outcomes for prisoners have changed since the last inspection.

**Figure 1: HMP Usk healthy prison outcomes 2021 and 2025**

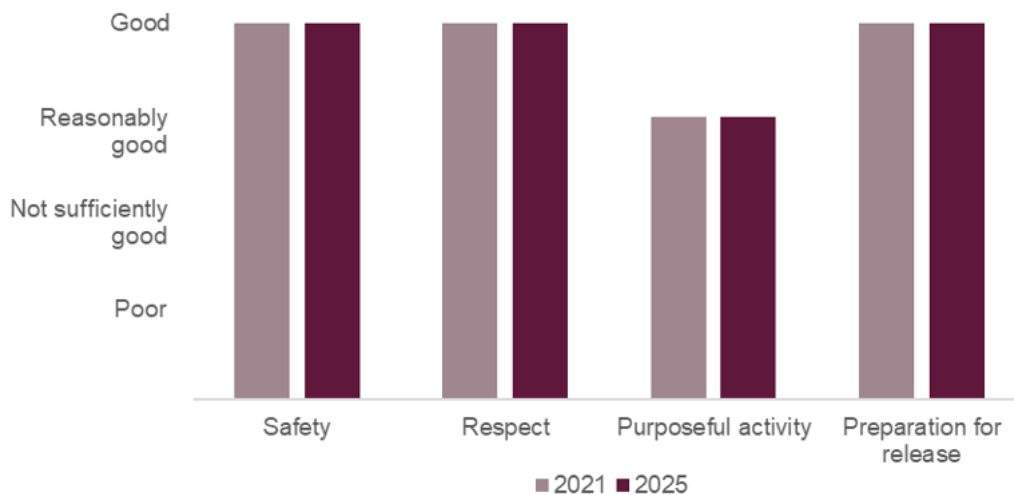


1.4 At this inspection of HMP/YOI Prescoed, we found that outcomes for prisoners were:

- good for safety
- good for respect
- reasonably good for purposeful activity
- good for preparation for release.

1.5 We last inspected HMP/YOI Prescoed in 2021. Figure 2 shows how outcomes for prisoners have changed since the last inspection.

**Figure 2: HMP/YOI Prescoed healthy prison outcomes 2021 and 2025**



## Progress on key concerns and recommendations

- 1.6 At our last inspection in 2021, we made 20 recommendations, two of which were about areas of key concern. The prison fully accepted 17 of the recommendations and partially (or subject to resources) accepted one. It rejected two of the recommendations.
- 1.7 At this inspection we found that both of our recommendations about areas of key concern for respect had been achieved. All other recommendations, with the exception of one in respect and one in preparation for release, had been achieved or partially achieved. For a full list of the progress against the recommendations, please see Section 7.

## Notable positive practice

- 1.8 We define notable positive practice as:

Evidence of our expectations being met to deliver particularly good outcomes for prisoners, and/or particularly original or creative approaches to problem solving.

- 1.9 Inspectors found six examples of notable positive practice during this inspection, which other prisons may be able to learn from or replicate. Unless otherwise specified, these examples are not formally evaluated, are a snapshot in time and may not be suitable for other establishments. They show some of the ways our expectations might be met, but are by no means the only way.

### Examples of notable positive practice

- a) At Usk, a welcoming and accessible outdoor sensory garden was open to all prisoners and much valued. See paragraph 4.8

b)	The neurodiversity team made sure that prisoners received targeted support from induction through to release. 'Passports' for neurodiverse prisoners gave staff a better understanding of their expected anxieties when in stressful situations, such as adjudications.	See paragraphs 4.23, 5.31
c)	The chaplaincy coordinated a large number of volunteer prison visitors who received regular training and supported many prisoners who would not otherwise have received visits.	See paragraph 4.30
d)	At Prescoed, prisoners benefited from working in a fully commercial working farm where they could develop a range of vocational skills and qualifications to support transition into post-release work.	See paragraph 5.19
e)	At Usk, some prisoners and their children benefited from parent-teacher meetings following risk assessment. Teachers were also offered a tour and introduction to the prison, which informed them about the prison context and the visiting experience for the child, thereby helping them to provide better support.	See paragraph 6.4
f)	The family services provider had made connections with local law firms, and free legal advice clinics on family issues were now available at Usk.	See paragraph 6.4

## Section 2 Leadership

**Leaders provide the direction, encouragement and resources to enable good outcomes for prisoners.** (For definition of leaders, see Glossary.)

- 2.1 Good leadership helps to drive improvement and should result in better outcomes for prisoners. This narrative is based on our assessment of the quality of leadership with evidence drawn from sources including the self-assessment report, discussions with stakeholders, and observations made during the inspection. It does not result in a score.
- 2.2 Leaders were approachable and experienced, and staff at both prisons were positive about their morale and commitment. Staffing levels, experience and retention were all good.
- 2.3 Leaders had sustained a positive culture at both sites and most prisoners felt their prison experience had made them less likely to reoffend. This was despite an increase in short-stay prisoners at Prescoed because of national population pressures, and fewer releases on temporary licence (ROTL). Experienced offender management unit (OMU) leaders had built strong teams at both prisons, and prison offender managers (POMs, see Glossary) were sustaining good contact with prisoners.
- 2.4 Leaders had developed a clear vision for education, training and work, which took account of labour market information and had led to above-average employment outcomes for prisoners. HMPPS leaders had invested in the prison farm, an excellent resource, providing employment and skills for some otherwise hard-to-place prisoners at Prescoed. However, the employment, training and education provision at Prescoed was not responsive enough to the changing prison population and many prisoners working in the prison were underoccupied. There had been no recent employment, training and education needs analysis.
- 2.5 Family services and prison leaders worked together well, and the former were supported to deliver excellent and innovative provision despite limited funding.
- 2.6 At Prescoed, leaders had been slow to invest in making improvements in important areas, such as the ageing accommodation and insufficient phones. A lack of leadership imagination had also resulted in cooking facilities that were too limited for an open prison population.
- 2.7 At both prisons, health care leaders had cultivated a high level of commitment in the staff group and a positive culture, which prisoners described as non-judgemental and caring. However, some aspects of health care governance were weak, including incident reporting. Leaders across safety were passionate about delivering good outcomes for prisoners, who reported positively on the support they were given by the safer custody team.

2.8 Despite generally good outcomes, in a range of areas, data were not collected or used well enough to promote continuous improvement, including in ROTL, education and health care.

## Section 3 Safety

**Prisoners, particularly the most vulnerable, are held safely.**

### Early days in custody

Expected outcomes: Prisoners transferring to and from the prison are safe and treated decently. On arrival prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.

- 3.1 Both prisons had a steady stream of new arrivals, at around 13 a month at Usk and 33 a month at Prescoed. Support for prisoners in their early days was generally good, and in our survey 94% of prisoners at both sites said they were treated well in reception.
- 3.2 The reception areas were basic but clean. All new arrivals were met by peer supporters who talked to them about prison life, but little written information was available.



**Reception at HMP Usk (left) and Reception at HMP Prescoed**

- 3.3 Custodial managers conducted initial safety interviews in private in reception with new arrivals, identifying risks and vulnerabilities. Any identified concerns were shared with staff in the induction unit. The reception process was reasonably quick, prisoners' property was processed immediately on arrival, and they were allowed to take all in-possession items with them to the induction unit.
- 3.4 All prisoners received a first night interview with induction staff, but they were not always offered a free telephone call. The vast majority of prisoners (93% at Usk and 91% at Prescoed) said they felt safe on their first night, and additional safety checks were undertaken during their first 24 hours.

- 3.5 The two-week induction process was well structured and involved considerable input from peer supporters, as well as key departments in the prisons. In our surveys, most prisoners who had been on induction (87% at Usk, 72% at Prescoed) said it told them what they needed to know.

## Promoting positive behaviour

Expected outcomes: Prisoners live in a safe, well ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.

## Encouraging positive behaviour

- 3.6 Levels of violence were extremely low: in the previous 12 months, there had been five recorded assaults at Usk, none of which were against staff. They were all relatively low-level incidents that did not result in significant physical injury. There had been no assaults at Prescoed.
- 3.7 Positive behaviour by prisoners was supported by a strong community ethos at both prisons, especially at Usk. This was underpinned by generally good staff-prisoner relationships, a wide range of peer support roles and highly valued time out of cell. In our survey at Usk, 59% of prisoners said that the culture in the prison encouraged them to behave well, against the comparator of 38%.
- 3.8 At Prescoed, many prisoners said they valued the open environment and did not want to risk a return to closed conditions. Release on temporary licence (ROTL) and the chance to live in the pods or houses were also key motivators; although longer waiting times for ROTL assessments had increased frustration among recent arrivals (see paragraph 6.16). Prisoners in the houses had access to a kitchen, washing machine, living room and garden, and told us that they could lead a more normalised lifestyle.



**Prescoed: front of houses (left) and pods**

- 3.9 More respondents to our survey at Prescoed than at other open prisons reported feeling unsafe currently (12% against 4%). A minority of prisoners had been convicted of sexual offences and there was

evidence that some of them had been bullied. While this concern was investigated reasonably well, actions, ongoing support and monitoring had not been good enough to resolve the problem. Nevertheless, there had been just eight absconds in the four years since the last inspection, suggesting that most prisoners felt reasonably secure.

- 3.10 Prisoners exhibiting poor behaviour received an individualised response at both sites. Anyone returned to closed conditions from Prescoed (see paragraph 3.24) was first subject to a thorough review. Seven prisoners had been transferred from Usk in the year to date for justifiable reasons involving violent or disruptive behaviour.
- 3.11 Referrals of prisoners to challenge, support and intervention plans (CSIPs, see Glossary) were made appropriately in response to reports of violence and bullying at both sites and were managed through the weekly safety intervention meeting (SIM). Two plans had recently been opened for prisoners at Prescoed following reports of victimisation, and they recorded good support. At Usk, some plans were closed before the identified actions had been completed.
- 3.12 Most prisoners were on the enhanced level of the incentives policy (86% at Usk and 98% at Prescoed). At Usk, a multidisciplinary monthly incentives review meeting actively addressed poor behaviour and recognised good behaviour. It considered prisoners who had received two warnings and any who were not already on enhanced status. Prisoners were given individual feedback on how they needed to improve their behaviour or were issued with certificates if they had reached the requirements for enhanced level.
- 3.13 At Prescoed, a key benefit of being on enhanced was the opportunity to have longer overnight ROTL. The fact that fewer prisoners were now able to achieve ROTL (see paragraph 6.16) affected their views of the value of the incentives scheme, and many told us they felt there was now little difference between the incentive levels.

## **Adjudications**

- 3.14 There were few adjudications at either prison, with 37 at Usk and 65 at Prescoed in the previous six months. There were a few outstanding adjudications at Prescoed, which had usually been started at sending establishments and then not identified or resolved following transfer. At Usk, there were some weaknesses in investigation and too many adjudications were not proceeded with as a result of staff error. Leaders had identified both issues through quality assurance, and were taking action. The deputy governor quality assured adjudication records and provided feedback, and there was a standardisation meeting to monitor adjudication awards.
- 3.15 Leaders generally took a rehabilitative approach by using cautions and suspended awards to give prisoners opportunities to change, but there was no use of community payback. Neurodiversity support passports (see paragraphs 4.22 and 5.31) were available in the adjudication room

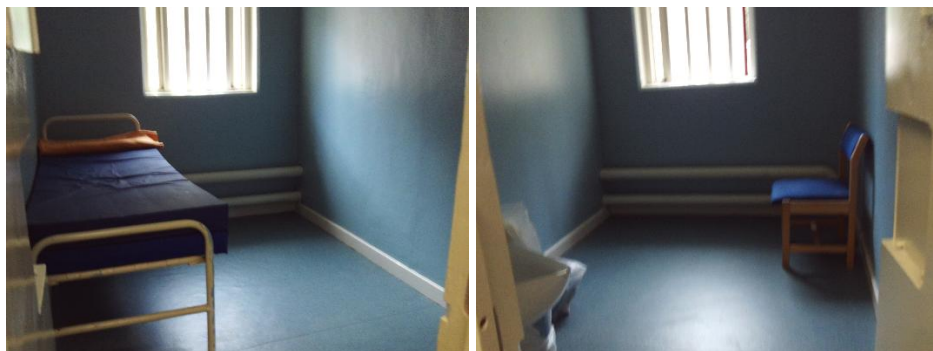
at Usk to help governors communicate more effectively with relevant prisoners.

### **Use of force**

- 3.16 There was very little use of force: in the last year, there had been five uses at Usk and three at Prescoed, which were mostly low-level guiding holds or use of handcuffs during escort. The routine use of handcuffs for moving prisoners back to closed conditions that we found at the last inspection had been stopped, and many prisoners attending hospital appointments were not handcuffed following individual risk assessments.
- 3.17 Oversight of force was generally good. Managers reviewed incidents at the weekly SIM (see paragraph 3.11) and all had been recorded on staff body-worn cameras. In the video footage we reviewed, force was appropriate and justified, cameras had been activated quickly, and we saw some good examples of staff caring for prisoners' welfare while trying to de-escalate the situation swiftly. However, not all prisoners were later debriefed to prevent recurrence nor given an explanation of why force had been used on them.

### **Segregation**

- 3.18 There was no segregation unit at either prison and cellular confinement was very rare. At Usk, some prisoners had been segregated in their cells for short periods, but this had not been recorded centrally to enable oversight and monitoring.
- 3.19 At Prescoed, prisoners being returned to closed conditions were held in one of two holding cells, one of which contained a chair and the other a bed; neither had a toilet. There were 16 recorded uses of these holding rooms in the year to date, four of which were overnight, with one exceeding 16 hours. Records lacked detail and most did not detail the justification and authorisation for use. There was no leadership oversight of the use of the facility.



**Prescoed holding cells**

## Security

Expected outcomes: Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance use and effective drug supply reduction measures are in place.

- 3.20 As at our last inspection, the different security needs of the two sites were managed by separate security teams and leaders. This continued to work well, and security measures were proportionate to the risks identified and intelligence received at each site. Prisoners continued to benefit from good freedom of movement.
- 3.21 Each site had a detailed local tactical assessment, which included threats to the security of the prisons and suitable actions to reduce these. Intelligence was well managed, with good links between the prisons, drug services and the police, and security teams were responsive to emerging concerns.
- 3.22 The positive random mandatory drug testing rates (MDT, see Glossary) were low at both prisons (0.61% at Usk and 3.25% for Prescoed). Suspicion testing was undertaken and data analysed to identify trends in drugs of concern. Drug supply reduction remained a security priority, with good attention to the risks of drug misuse. At Prescoed, where risks and intelligence for illicit drug use were higher, there was a drug strategy and supply reduction action plan.
- 3.23 Intelligence-led searching was carried out at both sites in response to reported concerns, and specialist search teams were used as required. At Usk, 10% of prisoners were strip-searched following visits, but the decision was not regularly reviewed in line with intelligence.
- 3.24 At Prescoed, 95 prisoners had been returned to closed conditions in the previous year, including all those found to have used class A or B drugs. Onwards referrals to drug misuse services were now made ahead of transfer to make sure prisoners were identified for support. Six prisoners had remained at the prison in the previous 12 months following rule breaches after individual assessment.

## Safeguarding

Expected outcomes: The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.

## **Suicide and self-harm prevention**

- 3.25 There had been no self-inflicted deaths since the last inspection in 2021. A coroner's report on preventing future deaths published after the last inspection related to a self-inflicted death in 2019. The prison had acted on the report, and it was regularly reviewed.
- 3.26 There was very little reported self-harm, with no incidents at Prescoed and 10 incidents at Usk in the previous year, none of which had been serious.
- 3.27 A regular joint safer custody meeting covered both sites. All prisoners supported through assessment, care in custody and teamwork (ACCT) case management were discussed in detail at the weekly SIM (see paragraph 3.11). Prisoners not on an ACCT who had a high level of need were also given support through a separate multidisciplinary meeting process.
- 3.28 At the time of the inspection, one prisoner at Usk was subject to ACCT monitoring and we saw evidence of good multidisciplinary input at reviews. The process for opening ACCTs for prisoners transferred in from other establishments was inadequate and lacked care planning.
- 3.29 Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) were available at both sites but little used, especially at Prescoed. There had been 11 Listener callouts over the previous 12 months. The scheme was well supported by the Samaritans at both sites.
- 3.30 During our night visits, not all staff were carrying anti-ligature knives. Some, but not all, staff were able to retrieve these from their personal belongings.

## **Protection of adults at risk (see Glossary)**

- 3.31 The governor took an active part in the local safeguarding adults board. A reasonable safeguarding policy was in place and under review. Safeguarding and suicide and self-harm prevention training for many staff had lapsed; leaders had recognised the problem and were now giving more priority to training.

## Section 4 Respect

**Prisoners are treated with respect for their human dignity.**

### Staff-prisoner relationships

Expected outcomes: Prisoners are treated with respect by staff throughout their time in custody and are encouraged to take responsibility for their own actions and decisions.

- 4.1 Staff-prisoner relationships were generally good at both prisons. Prisoners at Usk had a good amount of time out of cell (see paragraph 5.1), which allowed them frequent opportunities to speak with staff, and we saw many positive and friendly interactions. Most Usk staff had a good knowledge about the prisoners, and in our survey 85% of prisoners who had a key worker (see Glossary) said they were helpful, against the comparator of 73%. Key workers allocated to prisoners were consistent and liaised well with the offender management unit (OMU), and most of the case notes we reviewed indicated well-structured interviews. However, not all prisoners at Usk had a key worker and it took an average of 52 days for new arrivals to have their first key work session, which was too long.
- 4.2 We saw mostly friendly and mutually respectful staff-prisoner interactions, although officers were generally not visible on the wings. Prisoners could name their key worker, but contact usually consisted of light-touch check-ins; in our survey, only 64% of respondents at Prescoed said their personal officer was helpful, against the comparator of 77%.
- 4.3 Both prisons had a wide range of peer workers offering support in areas including induction, equality, neurodiversity and support for older prisoners. Most peer workers were trained and properly supervised, and they were positive about the opportunities they were given to do useful work.

### Daily life

Expected outcomes: Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

### Living conditions

- 4.4 Prisoners were generally positive about their living conditions at both sites. Usk was clean, tidy and free of graffiti across all units, and staff

conducted daily decency checks. The biggest complaint from prisoners was having to share small, cramped cells with limited storage space and natural light. This was mitigated by a good amount of time out of cell for everyone during the day, while those living on D wing were not locked in overnight either, giving them constant access to communal areas.

- 4.5 At Prescoed, most cells were more spacious and there were more opportunities for single accommodation. However, many of the units were rundown and dirty, and cleaning was poor. For example, the residue of eggs thrown on a window a couple of weeks before the inspection was still visible. Not enough cleaning materials were readily available, and there was a lack of staff oversight of cleaning.
- 4.6 Some of the pod accommodation we saw was in a grubby state but prisoners who lived there appreciated the private space. There were plans to build more of these in the next year to increase the site's capacity.



**HMP Usk cramped double cell (top, left); HMP Prescoed cell (top, right); Eggs on windows at HMP Prescoed (bottom, left); Mitchell Unit cell at HMP Prescoed (bottom, right)**

- 4.7 Some showers and toilets across both sites were in a poor condition. The showers at Usk lacked privacy, and both showers and toilets at Prescoed were smelly, with some not working. However,

refurbishments had already started at Prescoed and the one unit that had been completed was much improved.

- 4.8 External areas at both sites were very well kept and the open, green environment around Prescoed was much appreciated by prisoners. There was one exercise yard for all prisoners at Usk, with seating and some outdoor exercise equipment and games. An attractive and accessible sensory garden had been created at Usk to increase well-being for prisoners who had limited access to green space.



**HMP Usk sensory garden**

- 4.9 Prisoners at Usk were able to receive a yearly birthday clothing parcel, and onsite laundry arrangements were effective. Staff at Prescoed were flexible about when prisoners received new clothing, especially for those who required clothes for work. However, laundry facilities were limited and the dryers were regularly out of order.

### **Residential services**

- 4.10 The food was reasonable. The same four-week menu was available at both sites with enough choice for different dietary requirements. There was some consultation about the food.
- 4.11 Most food for both sites was supplied from the kitchen at Prescoed, where prisoners could also attain catering qualifications. There were advanced plans for the Prescoed farm to supply fresh dairy produce for both prisons.
- 4.12 A small additional kitchen had been built at Usk for some basic food preparation, and prisoners felt this had improved the quality of meals. There was a lack of staff supervision of this kitchen and the servery, and we saw varying portion sizes served.

- 4.13 The Cameo suites (see paragraph 4.22) at both sites had a small kitchen for prisoners to use. The self-catering facilities at Prescoed were otherwise limited and did not sufficiently promote independent living skills. Prisoners on some units benefited from air fryers and cookers, while others had only a microwave and toaster.
- 4.14 Prisoners could eat out of their cells at both sites. Usk had pull-out dining tables and chairs on the landings, and a communal area on one of the wings. Prescoed had a well-decorated dining hall, and we saw prisoners eating at the tables and chairs provided in the grounds when the weather permitted.
- 4.15 The kitchens and servery areas we saw were clean, but there was some broken equipment, which managers had planned to repair.



**HMP Usk broken kitchen equipment**

- 4.16 Shop arrangements for prisoners at both sites were reasonably effective. Available products included fresh fruit and a selection of crafts and hobby materials.

### **Prisoner consultation, applications and redress**

- 4.17 Consultation with prisoners at Usk was good, with well-organised monthly meetings and good representation from across all wings. Prisoners we spoke to felt listened to, and the outcomes were communicated well. Community meetings at Prescoed were poorly attended, and it was not always clear if the actions discussed were addressed. Staff had recently increased communication about the meetings through the prison TV channels.
- 4.18 Application and complaints systems were sound. There were few complaints at both prisons. The responses we reviewed were detailed

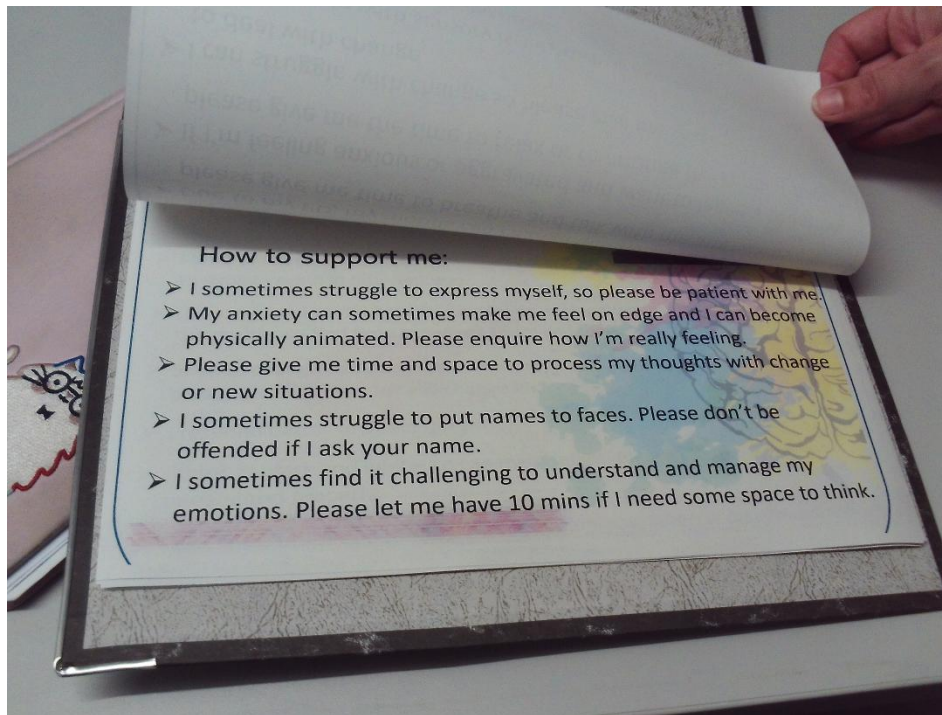
and timely, and quality assurance was in place. Senior leader meetings regularly reviewed trends in complaints but, surprisingly, the number of complaints upheld was not recorded.

- 4.19 Prisoner representatives, 'Chainbreakers', had been introduced on both sites to improve communication with prisoners and signpost them to the correct department before they made a complaint. This was a promising but new initiative, and there was little evidence so far of its impact.
- 4.20 Staff at Usk had opened some legal letters incorrectly in the previous year. Leaders knew this was a concern and had issued guidance, but some staff were clearly still unsure of the process.

## Fair treatment and inclusion

Expected outcomes: There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics (see Glossary), or those who may be at risk of discrimination or unequal treatment, are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

- 4.21 Work to promote fair treatment and inclusion had improved at both prisons since the previous inspection, and Usk had a particularly positive and inclusive culture. Prisoners told us they valued the community ethos of Usk, and we found good attention to meeting individual needs. At both prisons, there was a wide programme of events to provide support and affirmation for prisoners, including neurodiversity celebration week, St David's Day celebrations, coffee mornings to promote good mental health and veterans' coffee mornings.
- 4.22 Forty-two per cent of the population at Usk and 15% at Prescoed were over 50, and they received a good range of activities and support. Both prisons had a well-established 'Cameo' ('come and meet each other') centre, run by the Salvation Army. Events included breakfast, bingo, therapy dogs, healthy living exercise, art and music, sewing and walks. In contrast, little attention was given to understanding the specific needs of younger prisoners who comprised around 10% of the population at Prescoed and 5% at Usk.
- 4.23 Each prison had a neurodiversity support manager who assessed and supported prisoners with a neurodivergent need. Local data showed that 94 prisoners at Usk and 68 at Prescoed needed some form of support, which included workplace adjustments, equipment such as reading pens, fidgets and eye masks. At Usk, prisoners could attend an awareness course that the manager ran and get a 'passport' detailing their individual needs; this was then used to help staff communicate more effectively with prisoners (see paragraphs 3.15 and 5.31).

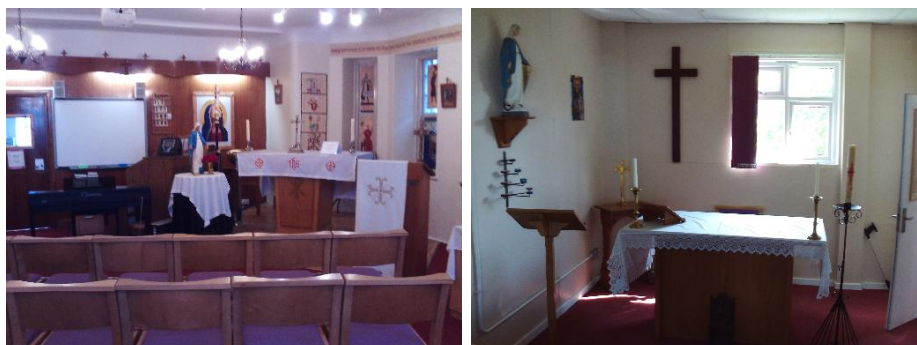


**Example of a Neurodiversity passport at Usk**

- 4.24 Prisoners with disabilities told us they felt safe and supported, and adaptations were provided where needed. However, emergency evacuation plans were not available to wing staff and often had little detail when they were. Some prisoners who had an alert on the prison national offender management information system (Nomis) did not have a written plan.
- 4.25 Minority ethnic prisoners were more negative than white prisoners about their treatment by staff at Prescoed, but this had not been picked up or explored at the prisoner forums. Concerns identified in monitoring data were not consistently followed up (see paragraph 4.27). Support for foreign national prisoners was weak, and telephone interpreting was not used for important meetings with non-English speakers.
- 4.26 There was generally good support for other groups, including three transgender prisoners at Usk who valued the support given to them. Work with veterans was particularly good, with monthly meetings and a range of events, including parades, sports events and a sponsored walk that raised money for local charities. Work to promote the Welsh language was developing and included a regular prisoner forum and Welsh language classes for both staff and prisoners.
- 4.27 Quarterly equality meetings were well attended and used some data to identify potential discrimination. However, while there was evidence of disproportionality in the use of ROTL at Prescoed, this had not been further investigated or addressed. Very few discrimination incident reporting forms (DIRFs) were submitted; they were investigated reasonably well and responses were appropriate. The deputy governor quality assured most of them and this resulted in some improvement actions, such as specific training for staff.

## Faith and religion

- 4.28 The chaplaincy provision met the needs of most faith groups. Faith facilities at Usk were reasonable and included a chapel, reading area and small multifaith room. Friday prayers took place in the Cameo suite. At Prescoed, facilities were smaller and more basic, but adequate.



**HMP Usk Chapel (left) and HMP Prescoed Chapel**

- 4.29 The chaplaincy was well integrated into the prisons and ran a weekly timetable of sessions that offered corporate worship and study groups. The team had built useful links with community faith groups, such as the Salvation Army and Christians against Poverty, which supported some prisoners on release.
- 4.30 The team also offered visits to prisoners who otherwise would not receive them, through a volunteer visitor scheme. Seven visitors who met 15 prisoners were supported by the prison through training and regular meetings with the managing chaplain and governor.

## Health, well-being and social care

Expected outcomes: Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.

- 4.31 The inspection of health services was jointly undertaken by the Health Inspectorate Wales (HIW) and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

## Strategy, clinical governance and partnerships

- 4.32 Patients were very complimentary about the health service across both sites. In Usk, a consistent theme in patient feedback was that health care staff were non-judgemental and caring. Staff knew their patients well, and we observed kind, respectful and thoughtful interactions between patients and staff. In our survey, 99% of Usk patients said that health services were good.

- 4.33 The recently appointed head of health care was supported by experienced clinicians and provided valued leadership. Staff from all clinical disciplines described the managers as very supportive. Health care staff were well trained and enthusiastic about their continuous professional development to improve patient care. Clinical supervision was undertaken and recorded.
- 4.34 The prison and Aneurin Bevan University Health Board worked well together to deliver health services. During a recent outbreak of influenza, they worked with Public Health Wales to manage patient care successfully and minimise spread. However, the prison and health care delivery board lacked robust data and analysis to assist effective oversight of clinical governance. There were very low levels of incident reporting and 'near-miss' incidents were not always reported. The 2023 health needs assessment focused on physical health needs with limited guidance or recommendations for mental health provision.
- 4.35 Clinical records were maintained on SystemOne (the electronic clinical information system). The clinical record-keeping we reviewed was good, but there was a lack of care planning for patients with long-term health conditions.
- 4.36 The health service was offered Monday to Friday, 8am to 4.30pm on both sites, with a late Wednesday evening clinic until 7pm at Prescoed to enable access for prisoners working off site. Health centres at both sites were clean, but Usk had limited clinical and storage space; infection, prevention and control measures were not always adhered to (see paragraph 4.70).
- 4.37 There were regular checks of emergency equipment including automated external defibrillators, which were safe and effective. Although the emergency grab bags were on wheels, they were heavy and difficult to transport.
- 4.38 There were few complaints about health services. Those that we sampled addressed the issues raised respectfully and effectively. However, complaints came through the prison system, which was not sufficiently confidential.

### **Promoting health and well-being**

- 4.39 There was generally good health promotion and relevant information was available in Welsh, but there were no health champions or health trainers. National health screening programmes, such as bowel or aortic aneurysm, were offered and uptake monitored. NHS age-related health screening was offered as part of promoting health and well-being. There had been a recent initiative to improve the uptake of immunisations and vaccinations. This work was ongoing and further work to address vaccine hesitancy was being developed.
- 4.40 Sexual health screening, which included chlamydia and gonorrhoea, was offered with onward referral to special sexual health clinics when

required. The HPV (human papillomavirus) vaccination had also been offered, and uptake had been reasonable with a further campaign due.

### **Primary care and inpatient services**

- 4.41 All patients at both prisons had to be able to hold their medication in possession. The prison did not accept anyone who was on a controlled drug, including medications to manage opiate dependency and some medication for ADHD. Consequently, the service was unable to support the ongoing rehabilitation of patients within these groups.
- 4.42 Nearly all new arrivals received a health screening on the day they arrived, followed by a secondary comprehensive assessment within three days. However, late arrivals were not always seen promptly and there was no monitoring to identify the extent of this concern. In our survey, only 47% of prisoners at Usk, against 79% at similar prisons, said they were seen by health staff in reception. Patients were quickly referred to other services as required.
- 4.43 Waiting times for clinics were short and access to the GP was good. Anyone who needed to see a GP urgently could do so on the same day and non-urgent appointments were available within a week.
- 4.44 A full range of primary care services was available and waiting times were well managed. The optician had recently held extra clinics to clear a growing waiting list.
- 4.45 In our sample of clinical records, none of the patients with a long-term condition had a care plan to guide their safe and effective care. There was a palliative care suite for patients who wished to remain in the prison at the end of their lives, although it had not been used since the last inspection. This suite was supported by robust partnership with the local hospice and hospital oncology service.
- 4.46 If the prison were unable to facilitate escorts for an outpatient appointment, we were told this was promptly rearranged. However, this was not monitored to make sure that leaders were alert to any prolonged delay.
- 4.47 Health staff reviewed prisoners due for release and gave them a summary letter to take to their GP and any medication to take home.

### **Social care**

- 4.48 The well-trained and experienced social care team consisted of a senior social worker, an occupational therapist and a senior care worker. Services were available five days a week, with availability at weekends if needed. Outcomes for prisoners receiving social care services were very good, and all those we spoke to told us they were happy with the service.
- 4.49 Team members attended regular multidisciplinary meetings to ensure the necessary care for patients. There was a memorandum of

understanding between the prison, health care and social services, but the information-sharing protocol was not always followed.

- 4.50 Six prisoner 'Buddies' were trained and supervised by the team to provide support for prisoners receiving social care, such as collecting meals. The Buddies we spoke to valued their role and felt that they had developed skills that would be useful in the future. A well-attended weekly healthy living group offered social activities and memory-based games.
- 4.51 We saw one adapted cell where a patient with a progressive illness was living with social care and Buddy support. There was sufficient space for mobility aids and appropriate utensils to support independent eating.

### **Mental health**

- 4.52 Mental health services were available four days a week from 8.30am to 4.30pm. There were no waiting lists and patients were very positive about the service. There was good partnership working between mental health services, other health services and the prison to support patients.
- 4.53 Staffing of mental health services was fragile. A 30-hour mental health post was shared between two part-time staff, who did not have any cover for training, annual leave, continuing professional development or sickness. We were told that there had been an options appraisal for the mental health service but the results of this were not known.
- 4.54 Three prisoners were being treated with psychotropic medication and had the required oversight from a consultant psychiatrist. Prescribing reviews and physical health checks took place within national timescales.
- 4.55 Patients were seen regularly by highly experienced practitioners who knew them well. However, there were no formal assessment processes, the practitioners did not hold caseloads and there were no care plans for patients, which was a risk to patient safety and continuity of care. The quality of the clinical records was good with appropriate timescales for patient reviews. The mental health team regularly attended ACCT reviews, which were scheduled to make sure they could attend. Practitioners assured us that they received regular clinical and managerial supervision, but no records were available for us to see.
- 4.56 Discharges were infrequent; as no patients were preparing to leave at the time of inspection, we were unable to assess or make a judgement on discharge planning. There had not been a transfer of a patient to a secure hospital bed under the Mental Health Act in the last two years.

### **Support and treatment for prisoners with addictions and those who misuse substances**

- 4.57 There were 45 prisoners at Usk and 68 at Prescoed receiving substance misuse support, all with appropriate care plans. Patients told us that the support was very good. They were seen within 48 hours and received either one-to-one support or attended a rolling group programme. The substance misuse services, provided by Dyfodol, were managed by a team leader and two caseworkers, who were all full-time.
- 4.58 Dyfodol staff were unable to access the electronic clinical records used by the health care team, which had a potential detrimental impact on information sharing and patient safety.
- 4.59 The two sites ran different programmes, but both were focused on goal-setting and mutual support. At Prescoed, the five-week 'Towards Recovery' group offered two sessions a week, covering mental health issues and substance misuse awareness, plus harm reduction interventions. It was focused on patients due to be released.
- 4.60 It was positive that Dyfodol had introduced training for officers and other prison staff on recognising substance misuse and the effects of intoxication. It also trained staff in the use and administration of nasal naloxone (a drug to reverse the effects of illicit opiate drugs). All patients on the incentivised substance free living unit joined the Towards Recovery group and received training in the use of naloxone. Naloxone was also offered to all patients on release, and those who received it had training to understand how and when to use it.
- 4.61 Patients were given post-release follow-up appointments, and Dyfodol was able to monitor those taken up in Wales.

### **Medicines optimisation and pharmacy services**

- 4.62 A clinical pharmacist worked on site once a week to provide face-to-face support and offered follow-up appointments if necessary. This ensured high-quality care to prisoners receiving medicines.
- 4.63 Patients received medicines either as a seven-day or 28-day supply depending on the medicine risk category. Medicines were supplied safely by a pharmacy technician-led service. There were systems to record, identify and refer patients who did not attend to collect their medicines. Patients being transferred or released were given a minimum of seven-days' supply, or a prescription, for medicine continuity.
- 4.64 Patients unable to keep medicines in possession were given little opportunity to learn to manage them, and when support failed, they were transferred to closed conditions.
- 4.65 The nature of the in-possession policy meant that the health care team did not prescribe several high-risk medicines, such as opiate painkillers. This created an environment where there were few tradeable medicines. Cell compliance checks were completed for 10% of the prison's population each month.

- 4.66 Medicines were delivered to the prison by the external pharmacy on time and with a clear audit trail. The transportation, storage and stock control of medicines were well managed. There were some gaps in governance, which included secondary dispensing and incident reporting. There was some secondary dispensing, which was poor practice. Only simple analgesics were available as over-the-counter medicines, which did not encourage prisoner self-management of acute conditions.
- 4.67 Clinical audits and prescribing review projects were routine. The pharmacist was well integrated with the rest of the health care team in a multidisciplinary approach. Medicine management meetings occurred every three to four months, with attendance by the governor, indicating a close working relationship.

### **Dental services and oral health**

- 4.68 Time for Teeth operated a dental service for approximately 550 prisoners three days a week. All treatment was provided at the Usk dental unit, with patients transferred from Prescoed for two afternoon dental sessions. Patients from Usk benefited from a longer session period, the availability of a therapist one day a week and a free-movement policy that enabled easy access to the health care unit.
- 4.69 Forty-two patients from Prescoed were awaiting an initial dental assessment and waiting times were short, with a longest wait of four weeks. There were no patients on this waiting list from Usk. Patient satisfaction was high.
- 4.70 There was a small surgery with an adjoining decontamination room, in the health care department. The surgery appeared clean and well organised. However, the floor skirting trim was coming loose, hindering effective cleaning. The decontamination room was arranged in accordance with the Welsh national guidelines. Autoclaves and ultrasonic baths were serviced and maintained appropriately. While clean and dirty boxes for instruments were available, these were not labelled appropriately, with a risk of contamination. Non-clinical items were stored in the decontamination room and required immediate removal, which was done during the inspection. Storage space was insufficient.
- 4.71 There was a good scheme of audits, and patient notes were extensive and of good quality. X-ray equipment was well maintained and in good condition. Emergency equipment and medicines were available and in date.

## Section 5 Purposeful activity

**Prisoners are able and expected to engage in activity that is likely to benefit them.**

### Time out of cell

Expected outcomes: All prisoners have sufficient time out of cell (see Glossary) and are encouraged to engage in recreational and social activities which support their well-being and promote effective rehabilitation.

- 5.1 Most prisoners at Usk had more than nine hours a day unlocked, including for evening association, and had far more time out of their cell than at our last inspection. At Prescoed, prisoners had keys to their own rooms and did not have to return to their units until 9pm. At both prisons, almost everyone was allocated to full-time activity, although at Prescoed many prisoners employed on site were under-occupied (see paragraph 5.12).
- 5.2 Residential units at Usk had some recreational equipment, such as pool tables, and many structured activities were offered, including chess club, arts and crafts, band practice and Welsh language classes. At Prescoed, an association room was opened in the evenings and prisoners could congregate socially in various outside areas. Eligible prisoners could also participate in recreational activities outside the prison, such as mountain hikes.



**HMP Usk landing with pool table (left) and HMP Prescoed association room**

- 5.3 Prisoners had very good access to the libraries on both sites seven days a week, including up to 7pm on weekdays. In our survey, 97% of prisoners at Prescoed and 95% at Usk said they had access to the library at least once a week. Prison data showed that the libraries had over 12,000 visits in the three months to March 2025. The librarian, who covered both sites, was employed by Monmouthshire County Council and could order stock from community libraries.

5.4 Gym facilities at both sites included access to weights, cardiovascular training equipment, indoor sports hall and large open sports field, but prisoners at Prescoed did not have free access to the gym. The main gym timetables provided a wide range of activities, including badminton, football, circuit training, and sessions for neurodiverse prisoners and those with limited mobility. Access to the gym at weekends was limited, with availability only on Saturday at Prescoed and on Sunday at Usk.



HMP Usk weights room with cardiovascular equipment (top, left). HMP Usk Sports Hall (top, right), HMP Prescoed weights room (bottom, left), HMP Prescoed Sports Hall (bottom, right)

## Education, skills and work activities



Arolygiaeth Ei Fawrhydi dros Addysg a Hyfforddiant yng Nghymru  
His Majesty's Inspectorate for Education and Training in Wales

This part of the inspection is conducted by Estyn inspectors using Estyn's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

Expected outcomes: All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The learning and skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.

- 5.5 Estyn made the following assessments about the education, skills and work provision:
- The overall judgement for the inspection of HMP Usk was that outcomes for prisoners were good.
  - The overall judgement for the inspection of HMP Prescoed was that outcomes for prisoners were reasonably good.

### Teaching and learning

- 5.6 Most learners made good progress from their starting points during their time in education, training and work sessions, particularly in developing core literacy, numeracy, and vocational skills. Learners demonstrated sound understanding and application of key concepts in these areas, with many able to produce well-presented workbooks reflecting clear progress.
- 5.7 Practical learning was a strong feature of the provision. Learners developed and applied valuable hands-on skills through activities such as farm work, woodwork, waste management and catering. These experiences were further enhanced through participation in accredited programmes including national vocational qualifications (NVQs), waste management qualifications (WAMITAB), HGV driving, traffic management and forklift operation. A few learners also pursued higher-level qualifications, such as Open University degrees and creative writing courses, which broadened their academic and vocational horizons.
- 5.8 Many learners built well on prior learning and demonstrated awareness of personal targets through tools such as individual targets and progress workbooks. The use of appropriate technical and sector-specific vocabulary was particularly effective in specialist vocational areas. A few learners also supported others as peer mentors, contributing to a positive learning culture, and helping newer or less experienced learners to settle in and make effective progress. However, a few learners, particularly those with previously strong vocational experience, did not make the progress of which they were capable.
- 5.9 Overall success rates were strong and most learners, across ethnic minority groups and including those with additional learning needs, successfully completed their programmes. Many learners at HMP Usk achieved above initial assessment in numeracy and a minority achieved above in literacy.

- 5.10 A few learners engaged in useful opportunities to develop their Welsh language skills. For example, a group of learners and staff attended Welsh for adults lessons together and were well supported in the sessions by a Welsh-speaking peer mentor.
- 5.11 Learners developed their creativity, leadership and social skills through a range of beneficial activities, including the peer-led crafts group, the Eisteddfod and drama.
- 5.12 Overall, learners' attitudes towards learning across both prisons were strong, particularly at HMP Usk. Generally, learners demonstrated high levels of motivation, engagement and positivity across a broad range of activities. Many learners took pride in their achievements and were keen to share their progress with peers, staff and visitors. However, at HMP Prescoed, too often prisoners were inactive for long periods of the day where work placements provided were not suitably challenging.
- 5.13 Many learners made clear links between their education and future employment or personal development goals, demonstrating a strong sense of purpose in the activities they undertook. Most learners recognised and valued the importance of employability skills such as punctuality, communication and teamwork, which they demonstrated strongly across learning and work-based activities.
- 5.14 A few learners displayed a strong ability to learn from setbacks, such as failed assessments or tests, and were keen to reflect and improve. Team working was strong, with most learners working well in pairs and small groups, supporting each other with their skills development. Peer mentors worked very well, collaborating with and supporting learners and instructors, which contributed to purposeful and respectful learning environments.
- 5.15 Overall, the quality of teaching, learning experiences and assessment was strong. Many teaching staff used initial and diagnostic assessments effectively to identify learners' starting points, and tailored provision accordingly. This was particularly evident in the grouping of learners for literacy and numeracy based on ability, and the use of individually tailored activities within sessions. Planning was effective, with many staff using learners' prior learning and interests well to shape and deliver engaging and relevant sessions.
- 5.16 Verbal feedback was a particular strength. Most teaching staff provided positive, supportive feedback that encouraged learners and helped them understand how to improve. However, written feedback often lacked the necessary depth to drive improvement. In many cases, written comments were positive but did not identify specific steps learners could take to enhance their work. In addition, basic errors in spelling, punctuation and grammar were not always corrected in marked work, limiting opportunities for learners to develop accuracy in written communications. The reflective elements of learner workbooks were also used inconsistently, which reduced their overall effectiveness as a tool for learner self-evaluation and progression planning.

- 5.17 Teaching staff used effective questioning strategies and the incorporation of prior learning to support learners and deepen their understanding. In addition, peer mentors and external providers were used well to provide targeted support where appropriate, particularly for learners with additional needs.
- 5.18 Relationships between staff and learners were strong and productive. Teachers and instructors were experienced, knowledgeable, supportive and approachable, which contributed to an overall environment that was conducive to learning and personal growth.

### **Spotlight: Farm**

Learners benefited from opportunities to learn and work in authentic settings in the prisons, notably on the farm at HMP Prescoed. A few learners benefited from working in a fully commercial working farm which included a substantial dairy herd, calving facilities and robotic milking parlour complete with robotic manure scraper. Learners took on important responsibilities and developed a range of vocational skills in this beneficial setting. For example, caring for the dairy herd, maintaining woodland and forestry, building fencing and drystone walling, and a tractor team overseeing fieldwork. Through this work learners gained beneficial vocational qualifications and accreditations to support transition into work post-release.

### **Well-being, care, support and guidance**

- 5.19 The prisons' education, skills and work provision fostered a safe, respectful and purposeful environment in which most learners engaged meaningfully and made clear and valuable progress.
- 5.20 Staff used initial assessments effectively to shape individual learning plans which incorporated neurodiversity screening and sentence planning. As a result, most learners accessed education or work activities well-matched to their needs and aspirations. At both prisons, nearly all prisoners were engaged in purposeful activity, including external employment, reflecting the prisons' strong focus on employability and resettlement. In addition, many learners had good attendance. However, at HMP Prescoed, flexible arrangements for some aspects of purposeful activity meant that a few prisoners were not required to engage in activity for significant periods of the day. This limited how well prepared they were for the normal conditions of working life on release, and had a negative impact on their overall well-being.
- 5.21 Teaching staff created a culture of high expectations and positive behaviour which underpinned the learning environment. During the inspection, nearly all learners described teaching staff as approachable and supportive. Staff modelled respect and trust, and peer mentors contributed to this climate by supporting others and maintaining standards. This ethos encouraged engagement from learners who had

previously struggled in educational settings, and helped them develop a sense of ownership and motivation.

- 5.22 The flexible curriculum structure was a strength, enabling learners to combine education with work placements and other responsibilities. For example, in HMP Usk short courses were used to support learners' progression, well-being and motivation. In contrast, at HMP Prescoed unit-based learning supplemented provision, helping reduce disruption and support progression. Many learners identified skills they wanted to improve, and worked with tutors to adjust goals and learning pathways. For instance, learners preparing for release revisited their chosen pathways to ensure alignment with their resettlement aims.
- 5.23 Learning sessions were generally purposeful, with a few learners engaged in education working toward qualifications linked to mental health, substance awareness, financial awareness, counselling and peer mentoring. These sessions supported both personal growth and future employability effectively.
- 5.24 Structured education-to-employment pathways and beneficial external partnerships resulted in post-release employment rates above national targets at both prisons. At HMP Prescoed this was a 61% positive outcome (compared to a 50% target) and in HMP Usk it was 15% (compared to a 7% target). In addition, at HMP Prescoed, 28.5% of learners were participating in release on temporary licence (ROTL) work placements at the time of the inspection. This represented a reduction since the last inspection. Too often prisoners felt frustrated at long wait times to gain ROTL (see paragraph 6.16).
- 5.25 Education programmes had an underdeveloped structured input on safeguarding topics such as 'Prevent', grooming and radicalisation. Leaders were not fully aware of the content of sessions delivered by the psychology team in line with sentence restrictions, which limited their ability to ensure these important topics were covered appropriately. Further, provision to support independent living skills development was not consistently available across the prisons, which occasionally left learners feeling underprepared for life after release.
- 5.26 The prisons provided effective resettlement support through tailored education and work pathways that linked clearly to their sentence plans and future goals through the employability hub. Staff provided clear signposting to available vacancies. Access to vocational qualifications, ROTL placements and external agency input helped prepare them confidently for release and employment. The prisons had implemented a valuable process for taking stock of a learner's resettlement needs to ensure that support for release was targeted to the individual. However, as careers advice was restricted to the final 12 months of a sentence, a few more able learners or those with longer sentences believed that they had insufficient guidance to plan for employment or further study.
- 5.27 Support for learners with additional learning needs was very strong, with adaptations made regardless of formal diagnoses. Many learners valued the availability of one-to-one support, accessible resources such

as coloured overlays and the opportunity to learn in quiet environments.

- 5.28 Learners benefited from valuable opportunities to take on leadership roles, such as peer mentors, leading sessions or conducting night checks at the farm. These opportunities supported a sense of responsibility and trust. Many learners expressed confidence in their progress and valued the ways in which their views were heard.
- 5.29 Teaching staff took pride in their relationships and responsiveness. The team's commitment to learner welfare and inclusion was a notable strength.

### **Spotlight: Neurodiversity team**

The neurodiversity team played a vital role in promoting inclusive education across both prisons. Their early intervention model ensured learners received targeted support from induction through to parole. The information from assessments on arrival allowed staff to develop helpful personalised learning plans with the support of learner passports, one-to-one interviews and input from the neurodiversity managers. Practical tools such as reading pens, overlays, dyspraxia-friendly pens and sensory spaces were readily available, enabling learners to overcome barriers to participation. The team's involvement at key stages, including sentence planning, review meetings and parole boards, helped learners feel understood and empowered. Staff training led by the neurodiversity team increased confidence and skill among educators, enabling more responsive classroom environments. As a result, learners reported a greater sense of belonging, reduced anxiety and a stronger commitment to their educational journey. The integrated support also contributed to more positive outcomes in behaviour, engagement and progress. In a system where many had previously felt marginalised, this inclusive, proactive support helped neurodivergent learners gain confidence, build resilience and succeed on their own terms. Wider prison initiatives in this area included beneficial group activities which supported prisoners to feel safe and transition into education, for example through prison yoga, neurodiverse exercise and craft sessions.

### **Leading and improving**

- 5.30 Leaders across both HMP Usk and HMP Prescoed had developed a clear vision for education, training and work. They worked diligently towards securing the best possible outcomes for prisoners. They had high expectations of staff and had built a strong team ethos. Staff worked effectively to secure generally strong attitudes and engagement to learning and training across both prisons.
- 5.31 Across both prisons, the curriculum offer was broad and took appropriate account of labour market information. Employability skills and accreditations were embedded meaningfully into vocational activities where appropriate. Learning on Open University and Prisoner Education Trust courses was facilitated effectively, enabling a few

higher level learners to complete GCSEs, A Levels and degrees. Prisoners and staff at both prisons were offered valuable Welsh learning opportunities, working together towards qualifications.

- 5.32 At HMP Usk, the provision was varied, and met many learners' vocational, academic and personal development needs well. It catered well for learners with different starting points, including those with skills deficits and advanced learners. There was strong provision to support learners' personal development needs, particularly for learners who were neurodiverse. There was valuable provision for developing learners' reading skills and enjoyment of reading, for example through book clubs and a drama workshop. There was valuable provision to celebrate Welsh culture.
- 5.33 At HMP Usk, in a few instances, learners did not benefit from access to higher level vocational learning or accreditation, or support to develop their independent living skills. Literacy and numeracy were embedded inconsistently into vocational areas. Further, the opportunities for learners to safely develop their wider digital skills were underdeveloped. The lean staffing structure meant that there was little capacity to enhance provision and risked its continuity.
- 5.34 The curriculum at HMP Prescoed had a strong focus on providing opportunities for developing vocational skills, securing meaningful accreditations and preparing learners for release on temporary licence. Literacy and numeracy skills were embedded suitably into vocational learning. There was particularly innovative provision that supported services in the wider secure estate, as well as providing valuable work-based opportunities. The farm training facility was a notable strength, using state-of-the-art technology to provide a strong training environment for learners engaged in this provision. However, due to the early release of prisoners and delays in securing clearance for ROTL in a few cases, this hindered some learners' ability to access release on temporary licence. In addition, there was insufficient provision for emergent and non-readers.
- 5.35 Leaders gathered a range of beneficial first-hand evidence to inform their self-evaluation. For example, learning walks and lesson observations focused suitably on learner engagement, resources and the learning environment. This was further informed by data analysis, including around the success of different groups of learners and current learner needs. The quality and timeliness of this evaluation were variable. Leaders took suitable account of the views of learners as part of this process, such as through group activities with peer mentors. Leaders also took account of staff feedback during these processes, although this was completed informally and as a result staff did not consistently understand their input into self-evaluation processes. Overall, there was an inconsistent approach to self-evaluation across both prisons and, as a result, there were missed opportunities for joined-up working and the sharing of best practice in this area.
- 5.36 Leaders had developed an ambitious quality development plan to drive improvements at the prison. The plan was suitably informed by self-

evaluation and had clear timescales for improvement, allocation of responsibility and was reviewed regularly. However, the plan contained a large number of operational actions which hindered leaders' ability to focus fully on strategic improvement priorities.

- 5.37 Leaders completed a suitable range of regular quality assurance activities. However, these did not consistently evaluate the impact of teaching on learning.
- 5.38 Leaders had developed a committed staff team who were suitably skilled for their roles. They brought a range of experience to the prison, including in education and the prison system, as well as recent experience in industry. Staff benefited from a suitable range of professional learning opportunities to meet curriculum delivery plans. Further, there were positive examples of targeted visits to other prisons to observe and share best practice. However, there was not a clear systematic approach to planning for professional learning at an individual or prison-wide level, particularly relating to teaching and learning.
- 5.39 Education, training and work leaders had generally secured strong prisoner engagement in the learning and training provision on offer. Wider prison regime and procedures, such as the incentives policy, placed appropriate emphasis on positive engagement in education, training and work in its rewards structures. While engagement in education, training and work was strong, a few prisoners were not allocated to their chosen pathways in a timely manner.
- 5.40 Staff in education and skills worked well with other prison departments and, as a consequence, most staff across the prison worked collaboratively towards a shared vision of securing positive outcomes. They also worked well with prison staff to ensure that they had a strong understanding of prisoners' neurodivergent needs and how best to support them. Links with employers through the employment advisory board and other organisations were strong and used effectively to broaden the learning, training and release offer for prisoners. This supported both prisons to secure strong employability and employment outcomes for prisoners.

## Section 6 Rehabilitation and release planning

**Preparation for release is understood as a core function of the prison. Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.**

### Children and families and contact with the outside world

Expected outcomes: The prison understands the importance of family ties to resettlement and reducing the risk of reoffending. The prison promotes and supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 6.1 There was very good support to prisoners to maintain family ties in both sites. The family services provider, Invisible Walls, received strong support from the governor and other senior prison leaders, and went well beyond the terms of its contract. At each site there was a committed and energetic custodial manager responsible for strengthening family ties work. Both sites had a wide and imaginative variety of family visit days, and both the reception areas for visitors had been made more welcoming, with information appropriately presented.
- 6.2 Our survey showed especially positive responses to visits provision at Usk. Almost half of prisoners said that they had received more than one visit in the last month (48% against the 27% comparator), and they were similarly more positive than the comparators about a punctual start to visits, the attitudes of staff and ease of visitor access to the prison. Monthly peer-to-peer 'visit' sessions for those not receiving domestic visits were well-established and popular, with 20 prisoners involved each time. Prescoed provided hot food on visits for families and friends to purchase.
- 6.3 At Prescoed, leaders had improved further the exceptional range of facilities and activities in use during the family days. Resources such as the farm and the sports field, which was accessed by a family walk through the woods, were used to the full.
- 6.4 Quarterly family forums and biannual visitor surveys helped leaders to keep in touch with changing needs, and they had started some important initiatives at both sites in the previous year. These included the equivalent of a parent's evening meeting, whereby the prisoner's child attended the prison with the teacher. This involved the father in his child's school life, while also helping teachers to learn about the prison context and better support children. Invisible Walls had also established free family legal advice clinics using local legal firms.

- 6.5 Communication with family and friends worked well across the two sites, except for inadequate telephone provision at Prescoed. Prisoners there had to rely on a single phone in a public area on their residential unit, which were often in busy areas, sometimes directly under a public address speaker. There was no organised system to make sure that everyone had fair access to their unit telephone, and this had caused some arguments and tensions.

## Reducing reoffending

Expected outcomes: Prisoners are helped to change behaviours that contribute to offending. Staff help prisoners to demonstrate their progress.

- 6.6 Under the governor's leadership and on the basis of a comprehensive reducing reoffending strategy, both prisons were focused on being places of rehabilitation. The key leaders in the two offender management units (OMUs) were experienced and committed, worked collaboratively and were well respected by their teams. In contrast to our previous inspection and to several other prisons, the OMUs were very nearly at full strength, with staff who knew their roles well and worked closely together. We looked in depth at the cases of 20 prisoners across both sites: all felt their prison to be a positive rehabilitative environment.
- 6.7 At Prescoed, the core task was to prepare prisoners in practical ways to live a positive and constructive life after release, making full use of the onsite facilities and the opportunities out in the community. Although there had been a reduction in the number working in the community (see paragraph 5.25), Prescoed staff were working hard on those aspects that were within their control. Delays were often the result of problems in completing community checks.
- 6.8 In our survey of prisoners at Usk, 71% said that there were staff who were supporting them to achieve the objectives in their sentence plan, against the comparator of 53%. All those we interviewed knew their prison offender manager (POM, see Glossary) and spoke highly of them. Many key workers (see Glossary) liaised well with the OMU, and prisoners described their POM very positively (see also paragraph 4.1).
- 6.9 In our sample of cases, most prisoners at Prescoed and all at Usk could name their POM and spoke positively about them, while all but three in our sample of 20 had been allocated to their POM within 24 hours of arrival. There was good contact between POMs and prisoners in almost all cases. OMU drop-in sessions, weekly at Prescoed and monthly at Usk, continued to be valued by prisoners.
- 6.10 In our sample of cases, all of the prisoners at Usk and most of those at Prescoed had had an OASys (offender assessment system) assessment within the last 12 months, which meant that recategorisation or ROTL opportunities were not unduly delayed because of an out-of-date risk assessment. This represented sustained

work by POMs, since more prisoners now arrived with no OASys or an outdated one. The quality of the assessments, sentence plans and risk management plans were consistently better than we generally see. Progress made by prisoners in achieving their targets was good at Usk and reasonably good at Prescoed. Some POMs at Usk found time for one-to-one work with individuals. At Prescoed, the pressures associated with ROTL risk assessment and release planning made this impossible.

- 6.11 There was a monthly support meeting for those serving indeterminate sentences. This was well facilitated by two officers, with a range of speakers in senior positions who could offer helpful insights. There were a few serving indeterminate sentences for public protection (IPP), who each had a pathway to make progress towards possible parole.

## Public protection

Expected outcomes: Prisoners' risk of serious harm to others is managed effectively. Prisoners are helped to reduce high risk of harm behaviours.

- 6.12 Experienced and capable managers and staff handled public protection screening effectively, and made sure that child contact restrictions were strictly observed. There were now interdepartmental risk management (IRMT) meetings at both prisons, as well as ad hoc multidisciplinary meetings to consider, for example, whether an individual should be returned to closed conditions from Prescoed.
- 6.13 There was good oversight of the monitoring of prisoner communications in the interest of protecting the public. A few prisoners were subject to telephone monitoring on the basis of their offence or intelligence about their behaviours, and it was carried out effectively.
- 6.14 OMU staff were fully involved in pre-release risk management processes, with online attendance at multi-agency public protection arrangements (MAPPA) meetings for those on the higher risk levels. Written contributions to MAPPA meetings were good, giving a thorough and analytical description of each prisoner's risk profile. At Usk, these were supplemented with a range of helpful material, including reports from the key worker, security, health care, the mental health and substance misuse teams, and psychology.

## Interventions and support

Expected outcomes: Prisoners are able to access support and interventions designed to reduce reoffending and promote effective resettlement.

- 6.15 At Usk, the psychology service was well staffed and very active. The accredited programmes Horizon (for sex offenders), Kaizen (for high or very high-risk prisoners), Becoming New Me Plus, and the Healthy Sex Programme, were delivered. Many of the prisoners going through these

courses or who had graduated from them spoke about their intensity, the demands they made, and the learning and personal change that was involved. They also expressed their appreciation of the consistent support which facilitators had given to them personally. In addition to the accredited programmes, psychologists were engaged in supporting day-to-day management of prisoners, in training of staff and in practical research.

- 6.16 At Prescoed, many prisoners were frustrated at the long waits for approval of their ROTL application. Sixteen weeks was not unusual, and in a sample of recent cases, a quarter took longer than this (the average for our sample was just under 15 weeks). OMU staff and managers made efforts to speed up the process and to structure prisoners' expectations, but, in common with other open prisons, they were finding persistent delays in responses to requests to probation and/or police for approval of release addresses. A further recent challenge was the large turnover of prisoners owing to the national population reduction measures, especially the early release of prisoners on standard determinate sentences, and the bringing forward of eligibility for home detention curfew (HDC). A further 40 prisoners were due to be released under the latest HDC change. An additional difficulty, in common with other open prisons, was the number of prisoners now arriving with relatively short periods still to serve.
- 6.17 The percentage of the Prescoed population working in the community, 28.5%, had reduced in recent months (see paragraph 5.25). At the time of the inspection, 48.6% prisoners were receiving ROTL, for family contact or for work in the community, a reduction from the 60% at the previous inspection. However, employment outcomes after release from Prescoed were comparatively good (see paragraph 5.40). HMPPS figures showed that in the current year, 61% of those released had gone into employment and that 71% were in employment six months after release, figures that exceeded the targets set by the Prison Service.
- 6.18 Both prisons provided support to meet prisoner needs in finance, benefits and debt: many had opened bank accounts with Halifax; 200 ID documents had been sourced in the last year; and there was specialist debt advice from Christians Against Poverty, whose worker visited both prisons regularly. A full-time Department for Work and Pensions (DWP) staff member helped prisoners with universal credit applications and other aspects of preparation for release.

## Returning to the community

Expected outcomes: Prisoners' specific reintegration needs are met through good multi-agency working to maximise the likelihood of successful resettlement on release.

- 6.19 Pre-release support was good at both prisons. All prisoners attended a multidisciplinary review two to three months before release. Staff from

DWP, Forward Trust and Careers Wales attended these meetings, which were held monthly at Usk and weekly at Prescoed. OMU staff were keeping up well with the current changes to home detention curfew; in 2025 to date, about 87% of prisoners had been released within seven days of their HDC eligibility date.

- 6.20 Although access to housing on release was becoming more difficult, positive accommodation outcomes for the first night after release were well over 90% at both prisons. Forward Trust provided a responsive service to help prisoners find accommodation, and a probation resettlement practitioner worked closely with them.
- 6.21 Practical needs on the day of release were ascertained in advance from each prisoner, and clothing was available from the onsite charity shop or a small stock of clean clothes in reception. Toiletries (donated by the Mothers' Union), phone charging and a lift to a transport hub were available to those who needed them.

## Section 7 Progress on recommendations from the last full inspection report

### Recommendations from the last full inspection

The following is a summary of the main findings from the last full inspection report and a list of all the recommendations made, organised under the four tests of a healthy prison.

#### Safety

**Prisoners, particularly the most vulnerable, are held safely.**

At the last inspection, in 2021, we found that outcomes for prisoners against this healthy prison test were good in both Usk and Prescoed.

#### Recommendations

All new arrivals should be able to make a telephone call on their first night.

**Partially achieved**

Prisoners should only be strip-searched on the basis of intelligence or a specific suspicion.

**Achieved**

Safety management meetings should be fully integrated into both prisons and have an effective action plan to drive continuous improvement.

**Achieved**

#### Respect

**Prisoners are treated with respect for their human dignity.**

At the last inspection, in 2021, we found that outcomes for prisoners against this healthy prison test were good in both Usk and Prescoed.

#### Key recommendations

Prisoners should only be returned to closed conditions following an appropriate recategorisation review that fully considers all the circumstances and ensures that the decision is always a proportionate response.

**Achieved**

There should be more pharmacist involvement to oversee the service's professional standards, protocols and procedures to make sure the supply of medicines is safe.

**Achieved**

## **Recommendations**

Prisoners should not be held in multi-occupancy cells that are too small for them to have sufficient personal space, furniture and privacy.

**Not achieved**

Newly arrived prisoners at Prescoed should be offered early access to a range of grocery goods until they receive their first full shop order.

**Achieved**

Leaders and managers should consolidate action raised at protected characteristic forums and equality committee meetings into an equality action plan.

**Achieved**

Prison leaders should make sure that there is a multi-faith room that is suitable for practising faith and providing one-to-one support.

**Achieved**

Prison leaders should ensure faith forums are introduced to address the needs of prisoners with faith-related concerns.

**Achieved**

## **Purposeful activity**

**Prisoners are able, and expected, to engage in activity that is likely to benefit them.**

At the last inspection, in 2021, we found that outcomes for prisoners against this healthy prison test were reasonably good in both Usk and Prescoed.

## **Recommendations**

Leaders should make sure there are librarians on both sites to provide prisoners working there with support, see that stocks are replenished and reinstate links with Monmouthshire library.

**Achieved**

Leaders should fill PE instructor vacancies and provide all prisoners with more access to the gym.

**Achieved**

Managers should improve prisoners' access to IT-based learning and interactive resources to strengthen their literacy and numeracy skills.

**Achieved**

The prison's adherence to its Welsh language strategy should be strengthened further.

**Achieved**

## Rehabilitation and release planning

**Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.**

At the last inspection, in 2021, we found that outcomes for prisoners against this healthy prison test were reasonably good in Usk and good in Prescoed.

### Recommendations

Leaders should make sure that prisoners can make phone calls in private.

**Not achieved**

In-cell telephony should be installed.

**Partially achieved**

Leaders should increase access to secure video calling to maximise prisoners' opportunities to keep in contact with their children and families.

**Achieved**

Probation offender manager staffing levels at Usk should be increased sufficiently to provide manageable caseloads which support effective case management of prisoners' sentence planning and progression.

**Achieved**

An IRMT should be established at Prescoed to make sure prison-wide collaborative governance and oversight of risk management arrangements are in place.

**Achieved**

The criteria for accepting prisoners with sexual convictions at Prescoed should be reviewed to ensure prisoners can progress as planned.

**Achieved**

## Appendix I About our inspections and reports

HM Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, court custody and military detention.

All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this Inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. For men's prisons the tests are:

### **Safety**

Prisoners, particularly the most vulnerable, are held safely.

### **Respect**

Prisoners are treated with respect for their human dignity.

### **Purposeful activity**

Prisoners are able, and expected, to engage in activity that is likely to benefit them.

### **Preparation for release**

Preparation for release is understood as a core function of the prison. Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: in some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by HM Prison and Probation Service (HMPPS).

### **Outcomes for prisoners are good.**

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

### **Outcomes for prisoners are reasonably good.**

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant

concerns. Procedures to safeguard outcomes are in place.

**Outcomes for prisoners are not sufficiently good.**

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

**Outcomes for prisoners are poor.**

There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

Our assessments might result in identification of **areas of concern**. Key concerns identify the areas where there are significant weaknesses in the treatment of and conditions for prisoners. To be addressed they will require a change in practice and/or new or redirected resources. Priority concerns are those that inspectors believe are the most urgent and important and which should be attended to immediately. Key concerns and priority concerns are summarised at the beginning of inspection reports and the body of the report sets out the issues in more detail.

We also provide examples of **notable positive practice** in our reports. These list innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for prisoners; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.

Five key sources of evidence are used by inspectors: observation; prisoner and staff surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.

Inspections of prisons in Wales are conducted jointly with Estyn and Healthcare Inspectorate Wales. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## **This report**

This report outlines the priority and key concerns from the inspection and our judgements against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations*. *Criteria for assessing the treatment of and conditions for men in prisons* (Version 6, 2023) (available on our website at [Expectations – HM Inspectorate of Prisons \(justiceinspectorates.gov.uk\)](https://www.justiceinspectorates.gov.uk/expectations)). Section 7 lists the recommendations

from the previous full inspection (and scrutiny visit where relevant), and our assessment of whether they have been achieved.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found on our website (see Further resources). Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant. The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

## **Inspection team**

This inspection was carried out by:

Martin Lomas	Deputy Chief inspector
Hindpal Singh Bhui	Team leader
Rachel Badman	Inspector
Martyn Griffiths	Inspector
Martin Kettle	Inspector
Dawn Mauldon	Inspector
Chelsey Pattison	Inspector
Fiona Shearlaw	Inspector
Tareek Deacon	Researcher
Phoebe Dobson	Researcher
Alicia Grassom	Researcher
Adeoluwa Okufuwa	Researcher
Helen Ranns	Researcher
Joe Simmonds	Researcher
Sarah Goodwin	Lead health and social care inspector
Sarah Campbell	Health and social care inspector
Craig Whitelock-Wainwright	General Pharmaceutical Council inspector
Mark Cull	Health in Wales inspector
Dr Ali Jahanfar	Health in Wales inspector
Rachel Hackling	Estyn reporting inspector
Manta Arnott	Estyn deputy reporting inspector
Ian Dickson	Estyn inspector
Mary Hughes	Estyn inspector
Matthew Williams	Estyn inspector

## Appendix II Glossary

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find.

### **Certified normal accommodation (CNA) and operational capacity**

Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

### **Challenge, support and intervention plan (CSIP)**

Used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Not everyone who is violent is case managed on CSIP. Some prisons also use the CSIP framework to support victims of violence.

### **Family days**

Many prisons, in addition to social visits, arrange 'family days' throughout the year. These are usually open to all prisoners who have small children, grandchildren, or other young relatives.

### **Healthcare Inspectorate Wales**

The independent inspectorate and regulator of health care in Wales. It inspects NHS services and regulates independent health care providers against a range of standards, policies, guidance and regulations to highlight areas requiring improvement.

### **Key worker scheme**

The key worker scheme operates across the closed male estate and is one element of the Offender Management in Custody (OMiC) model. All prison officers have a caseload of around six prisoners. The aim is to enable staff to develop constructive, motivational relationships with prisoners, which can support and encourage them to work towards positive rehabilitative goals.

### **Leader**

In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. We will direct our narrative at the level of leadership which has the most capacity to influence a particular outcome.

### **MAPPA**

Multi-Agency Public Protection Arrangements: the set of arrangements through which the police, probation and prison services work together with other agencies to manage the risks posed by violent, sexual and terrorism offenders living in the community, to protect the public.

### **Mandatory drug testing (MDT)**

Enables prison officers to require a prisoner to supply a urine sample to determine if they have used drugs.

### **Offender management in custody (OMiC)**

The Offender Management in Custody (OMiC) model, which has been rolled out in all adult prisons, entails prison officers undertaking key work sessions with prisoners (implemented during 2018–19) and case management, which established the role of the prison offender manager (POM) from 1 October 2019. On 31 March 2021, a specific OMiC model for male open prisons, which does not include key work, was rolled out.

### **Protected characteristics**

The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

### **Protection of adults at risk**

Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

### **Secure video calls**

A system commissioned by HM Prison and Probation Service (HMPPS) that requires users to download an app to their phone or computer. Before a call can be booked, users must upload valid ID.

### **Social care package**

A level of personal care to address needs identified following a social needs assessment undertaken by the local authority (i.e. assistance with washing, bathing, toileting, activities of daily living, etc, but not medical care).

### **Time out of cell**

Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

## **Appendix III Further resources**

Some further resources that should be read alongside this report are published on the HMI Prisons website (they also appear in the printed reports distributed to the prison). For this report, these are:

### **Prison population profile**

We request a population profile from each prison as part of the information we gather during our inspection. We have published this breakdown on our website.

### **Prisoner survey methodology and results**

A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection. A document with information about the methodology and the survey, and comparator documents showing the results of the survey, are published alongside the report on our website.

### **Prison staff survey**

Prison staff are invited to complete a staff survey. The results are published alongside the report on our website.

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