Report on an independent review of progress at

HMP & YOI Foston Hall

by HM Chief Inspector of Prisons

8–10 December 2025

Contents

Section 1 Chief Inspector's summary

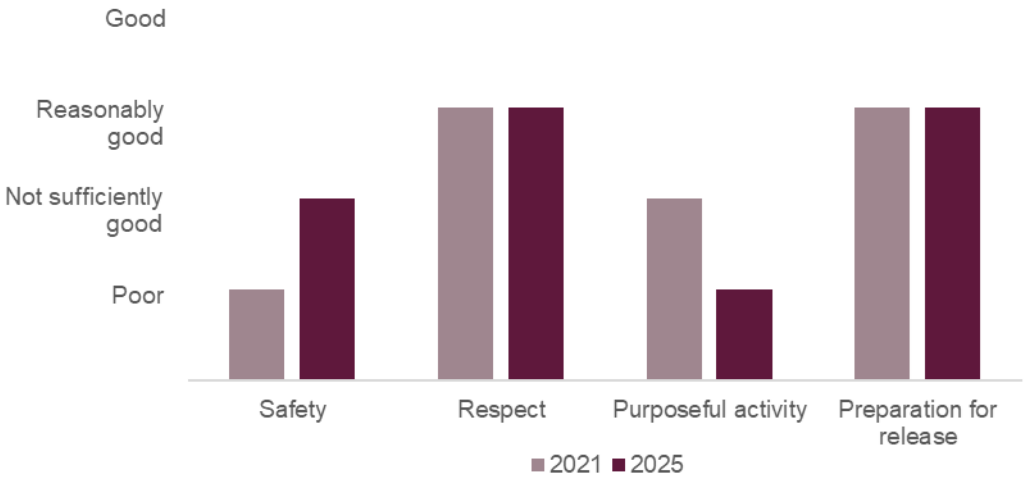
1.1 Foston Hall opened as a women's prison in 1997. It is set in the grounds of an old country house and contains a mix of accommodation types, with a capacity for just over 300 prisoners. It has many functions, from the management of those remanded into custody to some serving very long sentences, including life.

1.2 This review visit followed up on 11 of the concerns we raised at our inspection in January 2025.

What we found at our last inspection

1.3 At our previous inspections in 2021 and 2025, we made the following judgements about outcomes for prisoners.

Figure 1: HMP & YOI Foston Hall healthy prison outcomes in 2021 and 2025
Note: rehabilitation and release planning became 'preparation for release' in October 2023.



1.4 Over the two inspections, outcomes remained reasonably good in respect and preparation for release, but by 2025 had deteriorated to poor in purposeful activity, and although we found some improvements in safety, outcomes were not sufficiently good.

1.5 At the inspection in January 2025, relationships between staff and prisoners were inconsistent, with some appearing uncaring and dismissive, and women could not yet fully rely on them to get some basic requests addressed. Illicit drugs were readily available, and the prison lacked vital tools to prevent their ingress. Often linked to debt and acute mental health issues, the rate of violence between prisoners was the highest in the women's estate. Our colleagues in Ofsted judged overall provision to be 'inadequate', their lowest assessment, with a curriculum that did not meet the needs of the population. Leaders (see Glossary) had not adapted their services to meet the needs of the increased number of women on remand or recalled, and they often had little to occupy their time.

What we found during this review visit

1.6 Good progress had been made in developing the confidence and competence of officers. Many women were now complimentary about the level of decency and respect they were shown by staff, and many said that officers were better at helping them get simple, day-to-day things done, which was a sign of an improving culture. Leaders had begun to develop a range of initiatives to reduce violence, including introducing peer workers to resolve conflict and giving more meaningful rewards to those who behaved well. Despite this, the level of violent incidents between prisoners remained high, but, as we have found previously, almost all were not serious.

1.7 The average level of positive drug tests remained high in comparison with similar prisons, so the installation of a body scanner in the next few of months would be an important step forward. Support for women with drug addictions had improved through an effective incentivised substance-free living (ISFL) unit, which could now accommodate almost twice as many women as at the time of the inspection.

1.8 The education, skills and work curriculum, including personal development, had improved, as had the promotion of the reading strategy. However, the delivery of careers information, advice and guidance had not shown enough improvement. Progress had been made to address both concerns we raised about health care. However, women with acute mental health problems were still arriving at the prison instead of being diverted to a hospital.

1.9 Leaders had worked hard to adapt services to meet the needs of the large population of remanded or recalled women. The new officer role to support recalled women was a positive addition, among other improvements. However, there was still an absence of in-cell technology or wing-based kiosks to help prisoners manage their day-to-day lives. The paper-based application system, although revised, was not yet fully effective. However, good progress had been made in enabling women to get numbers added to their telephone account and increase their credit. This helped to overcome delays in contacting family and friends.

1.10 The governor and her deputy worked well together, and the leadership team was committed to making improvements. They remained focused on developing a competent and confident staff group, based on a culture of care and compassion. However, there were two self-inflicted deaths a month after our visit. The governor and her team will need to maintain a strong focus on sustaining the progress they have made, which includes support for women in crisis, as well as tackling problems with violence and drugs.

Charlie Taylor
HM Chief Inspector of Prisons
December 2025

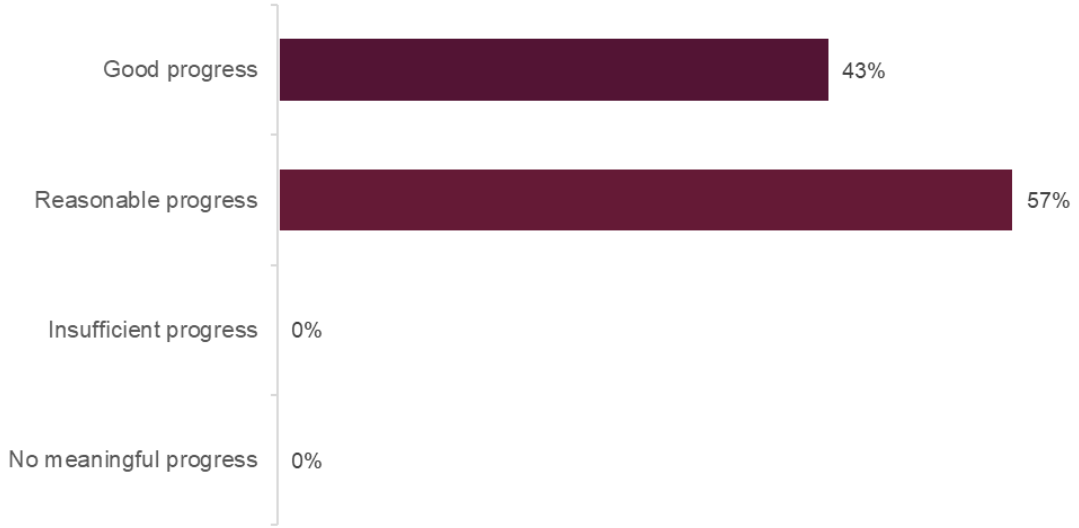
Section 2 Key findings

2.1 At this IRP visit, we followed up seven concerns from our most recent inspection, in January 2025, and Ofsted followed up four themes based on their latest inspection or progress monitoring visit to the prison, whichever was most recent.

2.2 HMI Prisons judged that there was good progress in three concerns and reasonable progress in four concerns.

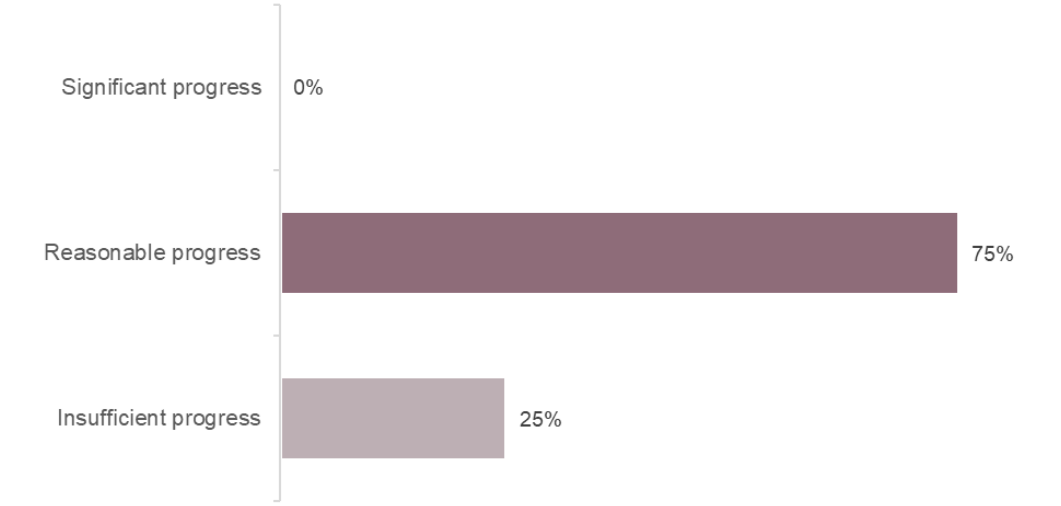
Figure 2: Progress on HMI Prisons concerns from January 2025 inspection (n=7)

This bar chart excludes any concerns that were followed up as part of a theme within Ofsted's concurrent prison monitoring visit.



2.3 Ofsted judged that there was reasonable progress in three themes and insufficient progress in one theme.

Figure 3: Progress on Ofsted themes from January 2025 inspection (n=4)



Notable positive practice

2.4 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.

2.5 Inspectors found two examples of notable positive practice during this IRP visit, 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)	Women aged 25 and under had the opportunity to complete the Duke of Edinburgh Bronze Award. This helped them build confidence in teamwork, social responsibility and physical endurance.	See paragraph 3.54
b)	A dedicated officer role had been introduced to provide recalled women with extra support. She interviewed all new arrivals to identify immediate needs and held forums with them to understand the biggest challenges facing those who were returning to prison repeatedly.	See paragraph 3.60

Section 3 Progress against our concerns and Ofsted themes

The following provides a brief description of our findings in relation to each concern followed up from the full inspection in 2025.

Staff prisoner relationships

Concern: Relationships between staff and women were too inconsistent, a feature of the considerable inexperience among the staff group.

3.1 Leaders were visible and approachable and many women we spoke to were now positive about the level of decency and respect shown to them by staff and said that they had someone to turn to if they had a problem.

3.2 Almost all officers now had over two years in post and there was more stability among the middle management team. Leaders had made good progress in developing a more caring, confident and competent group of staff. For example, since the inspection, 75% of officers had completed mental health awareness training. An additional course, aimed at helping staff understand and respond to women in distress, was also rolling out at pace.

3.3 The support and care given to women with the most complex needs were good and included effective use of positive reinforcement and rewards. There had been reductions in some types of negative behaviour, such as self-harm and assaults on staff. Leaders had also promoted the use of positive communication with prisoners, rather than highly restrictive measures such as using anti-tear clothing.

3.4 There had been some improvements in the delivery of key work (see Glossary) which included an initial session completed by a senior officer soon after arrival. However, more needed to be done to improve quality and make sure that women received regular sessions. Quality assurance had been introduced and was starting to identify some of these problems.

3.5 We considered that the prison had made good progress in this area.

Promoting positive behaviour

Concern: The rate of violence and anti-social behaviour was high.

3.6 The head of safety was an impressive leader who was working hard to reduce levels of violence. Good progress had been made in implementing new initiatives to encourage positive behaviour, including

monthly rewards for the wing with the lowest levels of violence and the introduction of peer workers to help resolve low level disagreements or other issues that could lead to physical violence. Despite this progress, the recorded rate of violence between prisoners remained high in comparison with similar prisons, although hardly any incidents were serious. Around 40% involved women who had mental health problems and most centred around verbal arguments, often related to debts, relationships or the sharing of a cell.

3.7 Members of the safety team were more involved in the day-to-day care of women than at the time of the inspection. For example, they now held regular safety forums on the wings and completed most of the investigations into violent incidents, to drive up quality. However, the use of CSIPs (see glossary) was weak as many lacked achievable targets and very few officers know about them.

3.8 We considered that the prison had made reasonable progress in this area.

Security

Concern: Drugs were too easily available, and the prison lacked a body scanner and enhanced gate security to prevent illicit substances from being smuggled into the prison.

3.9 Since the inspection, the average number of random positive drug tests had fallen from 15% to 11%, although was still high in comparison with similar prisons. Leaders were taking steps, such as the searching of incoming mail addressed to prisoners, to stop drugs from getting into the prison, and HM Prison and Probation Service (HMPPS) was about to install a body scanner. However, there was still no enhanced gate security to search staff when entering the prison.

3.10 More drug tests were now being completed and there was a high positive rate from suspicion tests, which suggested that the intelligence submitted was reasonably reliable. The capacity of the ISFL unit had been doubled and it could now accommodate around 40 prisoners. Over the last six months there had been few positive drug test results from prisoners living on the unit. They were helped by weekly drug recovery groups as well as improved links to rehabilitation centres in the community for support after release.

3.11 We considered that the prison had made reasonable progress in this area.

Living in the prison community

Concern: The paper-based applications system did not work. It was needlessly difficult for women to get simple things done.

3.12 Prisoners we spoke to said that officers were now better at helping them to get things done, without the need to make a formal application.

3.13 A new digital system for approving requests from prisoners to add money or telephone numbers to their telephone accounts was much quicker and removed delays in contacting their family members. However, HMPPS had not provided any in-cell technology or kiosks on the wings to enable women to make applications and complete other day-to-day tasks electronically.

3.14 Leaders had reviewed the paper-based application system and introduced a centralised logging process to monitor the timeliness of responses. The system used peer workers to collect and record applications and responses, but not all staff followed the procedures correctly, for example, not always sending responses back to them. This meant that the log was incomplete, and therefore that the data generated from this were unreliable. In addition, some women lacked confidence in the revised system as they were concerned that peers had access to the content of their applications.

3.15 We considered that the prison had made reasonable progress in this area.

Health and social care

Concern: Clinical governance arrangements had not identified weaknesses in primary health care and medicines management, which created a risk to patient safety.

3.16 Leaders were identifying risks more effectively through improved governance structures, and this was used to inform improvement plans. Progress had been made in increasing clinical space, with the planned refurbishment of offices.

3.17 Patient engagement had improved considerably with the recruitment of a lead and two health champion peer workers. The patient engagement lead was now sharing emerging issues and good practice. New opportunities for prisoners to learn about good health choices and provide feedback about the services were now in place.

3.18 There was now an effective clinical manager for the primary care team, and this had improved access for prisoners, including reducing waiting times. Long-term conditions were managed well, and the care plans we reviewed were comprehensive.

3.19 Applications were now triaged by clinical staff, which removed the risks identified at the inspection. Complaints were managed more effectively and staff who responded had been given additional training, to make sure that concerns were addressed.

3.20 Oversight of medicines management continued to have weaknesses due to the lack of an on-site pharmacist. This meant that medicines management meetings lacked information on local recorded incidents, audits and prescribing. However, a new post had been agreed by NHS England (NHSE) commissioners, and a recruit was currently going through security vetting. Medicines administration was good and supported well by prison staff, but it took too long to complete. Refrigerator temperature monitoring was still inconsistent for cold chain medicines (which must be stored at a particular temperature), but action was being taken to rectify this.

3.21 Emergency response bags were fully equipped, and all medicines were in date. Audits to prepare for emergencies now took place and deficits were addressed immediately.

3.22 We considered that the prison had made good progress in this area.

Concern: More than half of patients requiring transfer to hospital under the Mental Health Act waited over 28 days. These acutely unwell women were usually held in the segregation unit, which was not fair on them or the staff. A few experienced degrading conditions.

3.23 Women were still being remanded into custody with acute mental health problems that needed assessment and treatment under the Mental Health Act. Not all of these received an assessment of their needs, which meant that they were not diverted from prison to a hospital.

3.24 Staff worked hard to treat and stabilise women who arrived in acute mental health crisis. Some were held in the segregation unit, but leaders focused on reintegrating them into the main population whenever possible.

3.25 Good progress had been made by the health provider, NHSE commissioners and prison leaders to make sure that unwell patients were escalated for an assessment and transfer. More of these women were now being transferred to a mental health hospital within the expected timescale of 28 days. We were told that additional beds in community hospitals may have helped with this.

3.26 We considered that the prison had made reasonable progress in this area.

Education, skills and work

This part of the report is written by Ofsted inspectors. Ofsted's thematic approach reflects the monitoring visit methodology used for further education and skills providers. The themes set out the main areas for improvement in the prison's previous inspection report or progress monitoring visit letter.

Theme 1: The curriculum for education, skills and work did not meet the needs of the population. It did not align with local and national employment opportunities to ensure clear and appropriate pathways into employment or education.

3.27 Leaders had used data well to inform improvements to the curriculum so that it matched well with both employment opportunities available to women after release and employment preferences.

3.28 The vocational provision included pathways with a clear focus on the knowledge, skills and behaviour needed for employment. Education managers rotated the vocational courses they offered, based on the subjects for which there was the greatest need.

3.29 Workshop managers made sure that work activities included a greater focus on skills development than at the time of the inspection. There was an effective system to encourage women to progress towards job roles with greater responsibility.

3.30 In textiles, women completed accredited qualifications relating to the skills they developed. In waste and recycling, they studied subjects such as environmental impact and manual handling, but they could not study for an accredited waste and recycling qualification.

3.31 Employment specialist leads had been proactive in developing employer links to education, skills and work. Employers had visited women in numerous work areas to discuss themes such as self-employment. In a small number of cases, this had led to women getting employment after release. The few women eligible for release on temporary licence had gained work experience with these employers.

3.32 Leaders had also increased the range of English and mathematics qualifications available. Women could study these subjects up to level 2, whereas at the time of the inspection these subjects had only been available at entry level. Many more women had completed qualifications in these subjects.

3.33 A small but significant number of women studied at level 3 and beyond, including on a new mentoring course.

3.34 Ofsted considered that the prison had made reasonable progress against this theme.

Theme 2: Women did not get effective, ongoing information, advice and guidance to direct them to the most appropriate learning and work activities. They did not receive appropriate careers advice and guidance to help them make informed choices and succeed on release.

3.35 Leaders had not been able to provide women with a comprehensive careers information, advice and guidance service. They recognised that the previously available provision was of poor quality and had taken appropriate action, including making changes in the staff team and developing better processes. However, they had not been able to recruit sufficient staff to provide the service to enough women.

3.36 Leaders had recruited a full team of careers advisers, but waits for prison vetting meant that under half of the staffing capacity was available.

3.37 Recently appointed careers specialists had made a positive impact. They set women clear and well-considered targets to support their progression towards work and study goals.

3.38 However, this was a very recent improvement which had not had enough impact. Too many women had not had their career development plans reviewed in a timely manner. Staff responsible for allocations could not use up-to-date information about women's career plans to determine the best work and study activity for them.

3.39 Women who had been at the prison for longer had become disengaged with the careers information, advice and guidance provision because they were used to a sporadic and low-quality service.

3.40 Women benefited from useful support before they attended interviews or applied for jobs, such as to help them produce CVs and disclose their offences appropriately.

3.41 Ofsted considered that the prison had made insufficient progress against this theme.

Theme 3: The reading strategy did not meet the needs of emerging readers.

3.42 Leaders had worked productively across the prison to develop the reading strategy.

3.43 Leaders and managers in education, work and the library collaborated effectively to promote reading for enjoyment; for example, through well-used reading corners situated throughout the prison.

3.44 Many more women than at the time of the inspection read for pleasure. In a few cases, and as a result of leaders' work, those who had previously not read books had become avid readers.

3.45 Women in education valued highly the reading-related competitions and activities that the prison ran, although those in work areas had only a limited knowledge of these.

3.46 Leaders had also made improvements to the support for women with low levels of reading ability, and quickly identified those with a support need.

3.47 Education staff had received appropriate training in an adult-focused reading programme. Teachers and support staff planned the reading curriculum effectively, with incrementally more challenging topics covered. These were tailored well to individual women's needs.

3.48 Leaders and managers tracked women's progress in reading well. As a result of a soundly planned and implemented process, women with low levels of reading ability successfully completed English qualifications, and progressed into work roles and other education courses.

3.49 There was no leader with specific responsibility for the reading strategy, as a previous post had ended. Other leaders had picked up this work well, but rightly recognised that this approach had limitations because it took them away from other aspects of their work.

3.50 Peer mentors had also received training to support women with their reading skills, but there were very few of these available.

3.51 Ofsted considered that the prison had made reasonable progress against this theme.

Theme 4: There was not a personal development curriculum that ensured women could keep themselves mentally and physically healthy and protect themselves from radicalisation and extremist views.

3.52 Since the inspection, leaders in education had introduced a thoroughly planned personal development curriculum which prepared women well for life in modern Britain.

3.53 Women who studied on education courses covered important topics such as mental health, Black History Month and personal finance. Women valued the opportunity to discuss and debate topics linked to physical and mental health, such as personal hygiene, emotional regulation and men's mental health. There was only limited coverage of these topics in workshops and, as a result, the experiences and knowledge of them among the women there were limited in their scope.

3.54 A small number of women aged 25 and under had completed the Duke of Edinburgh Bronze Award, which gave them a broad range of new experiences. They built valuable skills in teamwork, social responsibility

and physical endurance, which they used positively in the prison environment and planned to use after release.

3.55 In workshops, women engaged in activities such as upcycling, which helped to improve their working environment as well as the lives of others. In waste and recycling, they engaged in a project to produce sleeping bags for the homeless. They valued highly the benefits that this activity brought to a disadvantaged group outside the prison.

3.56 Although leaders had carried out training with staff to help them have a better understanding of the threats of radicalisation and extremism, in too many cases women's knowledge of these topics, such as spotting the signs that an individual may have been radicalised, was underdeveloped.

3.57 Staff focused on fundamental British values through the curriculum. This was an improvement compared with the situation at the time of the inspection, although, in a large number of cases, women's knowledge of British values was too limited.

3.58 Ofsted considered that the prison had made reasonable progress against this theme.

Preparation for release

Concern: There was not enough support for the increasing number of women who were remanded or recalled. They often had nothing constructive to do.

3.59 Leaders had worked hard to adapt the range and delivery of their services to meet the needs of the large proportion of remanded or recalled women.

3.60 A dedicated officer role had been introduced to provide recalled women with support. All new arrivals were interviewed to identify immediate needs, and forums were held to understand the biggest challenges facing women who were repeatedly returning to prison. A monthly senior management team meeting discussed issues raised, including the reasons for recall and barriers to effective resettlement.

3.61 Peer workers met recalled and remanded women to speed up their allocation to education, training and work, and more short, modular courses had been added to the curriculum. The proportion of remanded women in prison jobs had more than doubled since the inspection, which meant that they were kept busy and had something meaningful to do each day.

3.62 All remanded women had their needs assessed on arrival and there had been over 400 referrals for resettlement help in the last six months, demonstrating the level of need among this group and an improved use of the support available.

3.63 We considered that the prison had made good progress in this area.

Section 4 Summary of judgements

A list of the HMI Prisons concerns and Ofsted themes followed up at this visit and the judgements made.

HMI Prisons concerns

Relationships between staff and women were too inconsistent, a feature of the considerable inexperience among the staff group.
Good progress

The rate of violence and anti-social behaviour was high.
Reasonable progress

Drugs were too easily available, and the prison lacked a body scanner and enhanced gate security to prevent illicit substances from being smuggled into the prison.
Reasonable progress

The paper-based applications system did not work. It was needlessly difficult for women to get simple things done.
Reasonable progress

Clinical governance arrangements had not identified weaknesses in primary health care and medicines management, which created a risk to patient safety.
Good progress

More than half of patients requiring transfer to hospital under the Mental Health Act waited over 28 days. These acutely unwell women were usually held in the segregation unit, which was not fair on them or the staff. A few experienced degrading conditions.
Reasonable progress

There was not enough support for the increasing number of women who were remanded or recalled. They often had nothing constructive to do.
Good progress

Ofsted themes

The curriculum for education, skills and work did not meet the needs of the population. It did not align with local and national employment opportunities to ensure clear and appropriate pathways into employment or education.
Reasonable progress

Women did not get effective, ongoing information, advice and guidance to direct them to the most appropriate learning and work activities. They did not receive appropriate careers advice and guidance to help them make informed choices and succeed on release.
Insufficient progress

The reading strategy did not meet the needs of emerging readers.
Reasonable progress

There was not a personal development curriculum that ensured women could keep themselves mentally and physically healthy and protect themselves from radicalisation and extremist views.
Reasonable progress

Appendix I About this report

HM Inspectorate of Prisons (HMI 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 visits 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.

Independent reviews of progress (IRPs) are designed to improve accountability to ministers about the progress prisons make in addressing HM Inspectorate of Prisons' concerns in between inspections. IRPs take place at the discretion of the Chief Inspector when a full inspection suggests the prison would benefit from additional scrutiny and focus on a limited number of the concerns raised at the inspection. IRPs do not therefore result in assessments against our healthy prison tests. HM Inspectorate of Prisons' healthy prison tests are safety, respect, purposeful activity and rehabilitation and release planning. For more information see our website: Expectations – HM Inspectorate of Prisons (justiceinspectorates.gov.uk)

The aims of IRPs are to:

- assess progress against selected priority and key concerns
- support improvement
- identify any emerging difficulties or lack of progress at an early stage
- assess the sufficiency of the leadership and management response to our concerns at the full inspection.

This report contains a summary from the Chief Inspector and a brief record of our findings in relation to each concern we have followed up. The reader may find it helpful to refer to the report of the full inspection, carried out in January 2025 for further detail on the original findings (available on our website at Our reports – HM Inspectorate of Prisons (justiceinspectorates.gov.uk)).

IRP methodology

IRPs are announced at least three months in advance and take place eight to 12 months after a full inspection. When we announce an IRP, we identify which concerns we intend to follow up (usually no more than 15). Depending on the concerns to be followed up, IRP visits may be conducted jointly with Ofsted (England), Estyn (Wales), the Care Quality Commission and the General Pharmaceutical Council. This joint work ensures expert knowledge is deployed and avoids multiple inspection visits.

During our three-day visit, we collect a range of evidence about the progress in implementing each selected concern. Sources of evidence include observation, discussions with prisoners, staff and relevant third parties, documentation and data.

Each concern followed up by HMI Prisons during an IRP is given one of four progress judgements:

No meaningful progress
Leaders had not yet formulated, resourced or begun to implement a realistic improvement plan to address this concern.

Insufficient progress
Leaders had begun to implement a realistic improvement strategy (for example, with better and embedded systems and processes), but prisoner outcomes were improving too slowly or had not improved at all.

Reasonable progress
Leaders were implementing a realistic improvement strategy, with evidence of sustainable progress and some early improvement in outcomes for prisoners.

Good progress
Leaders had already implemented a realistic improvement strategy to address this concern and had delivered a clear improvement in outcomes for prisoners.

When Ofsted attends an IRP its methodology replicates the monitoring visits conducted in further education and skills provision. Each theme followed up by Ofsted is given one of three progress judgements.

Insufficient progress
Progress has been either slow or insubstantial or both, and the demonstrable impact on learners has been negligible.

Reasonable progress
Action taken by the provider is already having a beneficial impact on learners and improvements are sustainable and are based on the provider's thorough quality assurance procedures.

Significant progress
Progress has been rapid and is already having considerable beneficial impact on learners.

Ofsted's approach to undertaking monitoring visits and the inspection methodology involved are set out in the *Further education and skills inspection handbook*, available at https://www.gov.uk/government/publications/education-inspection-framework.

Inspection team

This independent review of progress was carried out by:

Martin Lomas	Deputy Chief Inspector
Sandra Fieldhouse	Team leader
Rebecca Stanbury	Inspector
Jessie Wilson	Inspector
Tania Osborne	Health and social care inspector
Saul Pope	Ofsted 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.

Care Quality Commission (CQC)
CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: http://www.cqc.org.uk

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.

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.

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.

Any enquiries regarding this publication should be sent to us at the address below or: hmiprisons.enquiries@hmiprisons.gsi.gov.uk

This publication is available for download at: Our reports – HM Inspectorate of Prisons (justiceinspectorates.gov.uk)

Printed and published by:
HM Inspectorate of Prisons
3rd floor
10 South Colonnade
Canary Wharf
London
E14 4PU
England