



ANNUAL REPORT 2011

INDEPENDENT MONITORING BOARD,
HMP ISLE OF WIGHT

Reporting period: 1 January – 31 December 2011

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INTRODUCTION

The statutory role of the IMB

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and IRC to be monitored by an independent Board appointed by the Justice Secretary from members of the community in which the prison or centre is situated.

The Board is specifically charged to:

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

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

Diversity Statement

HMP Isle of Wight Independent Monitoring Board is committed to an inclusive approach to diversity which encompasses and promotes greater interaction and understanding between people of different backgrounds including race, religion, gender, nationality, sexuality, marital status, disability and age. We also recognize that a fully inclusive approach to diversity must also respond to differences that cut across social and cultural categories such as mental health and literacy.

All members of HMP Isle of Wight IMB will undertake their duties in a manner that is accessible to everyone within the establishment regardless of their background or social situation. The Board will monitor to establish that the experiences and interaction between staff, prisoners, detainees and visitors is fair and without prejudice. Where this is not the case, the Board will alert appropriate authorities.

Reporting period

1 January 2011-31 December 2011

HMP Isle of Wight

1. HMP Isle of Wight was officially launched on 1 April 2009 and is the organisational amalgamation of the former HMPs Albany, Camp Hill and Parkhurst. The prison holds approximately 1700 prisoners on the three sites with a central administration. The current populations remain unaltered:
 - Camp Hill category C training, with a younger population. Around 1200 prisoners pass through per year and population at any one time is around 600;
 - Albany category B sex offenders (and a small number of category C prisoners): population is just under 600;
 - and Parkhurst category B training: population is around 520 (comprising 50% category B lifer and 50% VP).
2. The Governor appointed to oversee the merger left the prison – and the public sector – in October 2010 (though interestingly is still shown as Governor in the ‘prisons information’ section of the MoJ website; the overall prison information is badly out of date). His deputy ‘held the fort’ until the arrival in late 2011 of the present Governor, who is pressing ahead robustly with organisational changes. These are not always met with approval by the staff but he is committed to securing the future of the prison in the wider context of public sector contraction and budgetary challenges.

EXECUTIVE SUMMARY

It is now more than two and a half years since the three Island prisons became HMP Isle of Wight, and it still a long way from being 'one jail'.

The original Governor tasked with uniting the three sites left suddenly in October 2010 and it took about eight months for NOMS to appoint a new Governing Governor. During this time, the Prison was very ably led by the then Deputy Governor, but it was difficult for him to implement real changes that could very soon be undone by a new Governor.

When the new Governor, James Shanley, finally arrived from Birmingham, he immediately set about continuing the drive towards full integration of the three sites. One of the biggest issues discussed during the year was the possibility of turning the three sites over to managing sex offenders only. This made sense, as the Albany site has been dedicated to this type of offending for many years, successfully providing the Sex Offender Treatment Programme. Such a change in role would enable prisoners to continue and complete programmes and progress through their sentence plan without having to move away to a prison where there is a waiting list for continuing treatment programmes. The prospect of this happening created much local publicity and concern during the year, but the Board is confident that such a move would not give cause for alarm to the local community. Very few prisoners complete their sentence on the Island; those who do can only stay on the Island after release if that is where they were sentenced and where their home is. Those released are carefully monitored by the Probation Service after their release.

The underlying theme for a number of years now has been budget management. It has also been a strong theme of previous reports from the Board. There is no doubt that continuing budget cuts impact directly on prisoners working to reducing their offending behaviour and their progression to eventual release. Cuts during this year have meant that a significant number of staff, including senior staff, are no longer in post. As far as staff are concerned, this has been managed well within the service: two former senior members of staff have been appointed to senior posts in the Seychelles and Somalia prison services as part of a United Nations initiative, while others have opted to take early retirement. However, as far as prisoners are concerned, the effect has been less out-of-cell time and workshops and education classes not being able to function because of staff shortages. More responsibility is now placed on the shoulders of middle management which has a detrimental effect on the time they have to engage with prisoners.

Drugs and mobile phones continue to be a major concern in the prison. Both can cause major disruption to the good order or discipline of the prison. Drug problems do not arise from illegal or banned substances as there is an increase in the amount of prescription drugs that are traded. The Governor meets regularly with healthcare officials in an effort to manage the problem; however,

the Board is very disappointed that following last year's report there is still only one dog handler in the prison. The Board were told by the Minister that if further dog handlers were to be provided, savings would have to be made in other areas. There is no doubt that considerable savings have been made, yet the situation has still not been addressed. The Board again asks that more dog cover is provided to assist the staff in controlling such an important part of the security of the jail.

Similarly, the Board have in the past expressed concern at the amount of prisoners' property that goes missing when a prisoner is transferred. Prisoner transport is now contracted out to private companies, and they should be required to provide a system where a prisoner's property travels with him on transfer. Surely when new fleets of vehicles are ordered, a separate compartment could be built in to accommodate property. It is accepted that some prisoners, particularly life sentenced prisoners, possess large amounts of property, some of which may be stored for the long term in a separate site, but the present system is flawed. The Board would point out that this is a national problem and not just restricted to the Isle of Wight prisons.

The Board has special responsibility in segregation units and is extremely concerned about the length of time some prisoners are kept in these conditions. At the moment, they are moved around the units within the Isle of Wight prisons. This is a most unsatisfactory method of managing such prisoners and a more stable way of moving prisoners on should be provided. At the moment, it seems that a prisoner can only be transferred if a Governor does a 'deal' or 'swap' with another prison where he knows staff. Too often, we are told that a man cannot be transferred because of his poor record of behaviour, yet the whole principle of prison is dealing with people with poor behaviour records. The Board recommends that the present system be scrapped and a proper structured way of dealing with transfers of all prisoners should be introduced.

In relation to the clustering, or merging, of the three sites, the Board feel there is still a long way to go. The merging of administration services has gone well, but the physical merge is proving very difficult. Plans are in hand to provide just one segregation unit and one reception for the three sites, which will have the effect of increasing movement of prisoners between the sites. Similarly, many members of staff still only work within one site and are rarely asked to provide cover either temporarily or permanently on other sites. The most obvious remedy to some of these problems would be to provide a fixed, secure link between the three prisons. This may not be a popular decision, given the budget constraints, but over a period would save considerable spending on movement which requires specialised vehicles and untold staffing hours.

Any Board is only as good as its members. At HMP Isle of Wight there is a very proactive, experienced and conscientious group of people operating a system that prevails nowhere else in the country and it is a tribute to my colleagues that their work is undertaken in a very professional manner, despite all being unpaid

volunteers. One part of budget cutting that impacts directly on the Board is that advertising for new members has been stopped for cost reasons. The Board, however, is operating under strength and we would invite anybody with a genuine interest in what we do to contact the Clerk to the IMB at HMP Isle of Wight.

Particular issues requiring a response.

I invite the minister to comment on the following matters of concern to the Board:

- (a) dog handlers;
- (b) prisoners' property;
- (c) a more efficient and professional way of moving prisoners from one prison to another.

Other issues of concern or excellence not requiring a response

Our role would be almost impossible without the co-operation of the Governor and staff who show members courtesy and openness as we go about our duties.

It is not for me to single out individuals for praise, but I could not end without offering the Board's congratulations to the catering staff for turning out about 3,500 hot meals every day of the year.

As in previous years, and on behalf of the Board, I would like to express our gratitude to the staff in the three segregation units. They deal on a day to day basis with some of the most difficult and dangerous men in prison, as well as those with serious mental health issues as they wait for places in secure hospital units. Their professionalism and dedication is very much appreciated by the Board.

This is my final report as Board chair and I offer my successors my best wishes as they continue to take the Board forward.

NIGEL HAWLEY
IMB Chair, year ending 31 December 2011

CONCERNS

	RAISED IN PREVIOUS REPORTS?
CCE	
<ul style="list-style-type: none"> time taken from the role of the CCE site managers to be used for 'other duties'; 	Y
<ul style="list-style-type: none"> foreign nationals serving time beyond their release date. 	Y
LEARNING & SKILLS and LIBRARY	
<ul style="list-style-type: none"> Albany: to have a virtual campus installed; Parkhurst: concerns include continued improvement of library visits; improvement of waiting lists; broadening of the curriculum; improvement of target setting on ILPs; continued improvement of progression routes for learners; greater support for less mobile learners; Camp Hill: learners are very often unaware who their personal officer is; insufficiently developed accredited Esol opportunities; recruitment to family learning course; difficulty getting prisoners to Parkhurst Library, leading to little time available to spend there; late arrival of books ordered and paid for out of special prison library funds. 	
HEALTHCARE	
<ul style="list-style-type: none"> ongoing problem at Albany with communication between the healthcare and segregation staff; 	Y
<ul style="list-style-type: none"> poor communication between St Mary's, the healthcare centre and IHU in relation to prisoner appointments at St Mary's; 	Y
<ul style="list-style-type: none"> split management of healthcare services as between the PCT and St Mary's hospital; 	Y
<ul style="list-style-type: none"> Parkhurst healthcare unit continues to offer no access for disabled prisoners with mobility problems (there are three stairs into the unit) and no provision of a disabled toilet, only a urinal. These issues are of concern for two reasons: there is an ever-increasing population in the prison, and the prison is in danger of contravention of the DDA through lack of access for prisoners with a disability. This matter has been raised on previous occasions. 	Y
CHAPLAINCY	
Budgetary pressure has led to significant reduction in staff with a knock-on effect on the services provided by the chaplaincy.	
CATERING & KITCHENS	
<ul style="list-style-type: none"> The kitchen is seriously understaffed and this has limited some choice on the menus; the IMB has already commented on inadequate portion size and 	Y

- the issue remains;
- the IMB has in the past commented about food cooling and the issue remains; Y
- the IMB has concern about the lack of trays and receptacles for food.

COMMUNITY, COHESION, EQUALITY

1. As stated in previous reports, there continues to be no complacency in HMP Isle of Wight in matters concerning diversity. Prison policy and attitude to racism is prominently displayed throughout the establishment. The mission statement of HMP Isle of Wight summarises the aim: ***'to build an environment that treats others in a manner in which we would like to be treated ourselves'***.
2. The title of this element of prison life was changed from 'Diversity, Race, Equality' to 'Community Cohesion and Equality' in July 2011. The new Governor considered that this title was more in keeping with similar work in the wider community, and better reflected the role of the committee.
3. There is a clearly identified manager of CCE on each of the three sites, with a Governor co-ordinating their roles.
4. Until recently CCE meetings were held monthly on each site on a rota basis. This entailed three CCE meetings per month, with almost identical matters being discussed. Unfortunately this allowed only prisoner-reps from one specific site to attend the meeting, although HMP Isle of Wight matters were on the agenda. Now there is just one CCE meeting per month, rotating across the three sites, with CCE prisoner reps being transported to the one meeting, plus site-based monthly meeting for the prisoner reps. This has created a much more efficient use of staff and prisoner time.
5. The CCE prisoner reps wear specific coloured (purple) sweat-shirts to make them easily identifiable by other prisoners. They are treated as equals at CCE meetings and their contributions, coming from 'grass roots', and reflecting prisoners' concerns, is valued by other committee members.
6. All RIFs (Race Incident Form), now called DIRFs (Diversity Incident Report Form), are dealt with by the Diversity Managers. They are signed off by a Governor and are subject to any requested follow-up. The Area Manager also monitors the process. However, DIRFs are not dealt with as quickly as they could be, due to the CCE Site Managers being deployed elsewhere. This can cause frustration for prisoners as well as staff. The former may gain the impression that no attention has been paid to a complaint.
7. The monthly meetings monitor SMART data in matters such as work, adjudications, requests and complaints, segregation, HDC (Home Detention Curfew), temporary release, etc. This process allows managers to identify trends which are out of range for the prison population. Any area which has been out of range, for a period of three months, is investigated. For example, there was a high number of complaints from one sector of the

prison community. On investigating, this proved to be the result of many, repetitive complaints from one specific prisoner. Often the small numbers involved make it difficult to realistically look at statistically identified trends. There has been a reduction in the numbers of complaints relevant to CCE. It is felt that this is may be due to a combination of three issues:

- the higher profile of prisoner representatives;
- prison councils; and
- focus groups.

8. All the above have regular access to senior management and any matters which cannot be resolved at lower levels are worked through before they become greater problems. This confirms the earlier comment concerning 'no complacency' in matters relating to CCE.

9. Focus groups continue to be developed. Groups include:

- over-40s;
- disability;
- diet;
- foreign nationals;
- faith and religion;
- gypsies and travellers;
- LGBT.

10. Confusion over times and place of some meetings seems to have been overcome through a six-week programme. The 'foreign nationals' wing on each site continues to be available for prisoners who choose to be on those wings.

11. All faiths have the opportunity to meet together for worship or discussion. There have been opportunities on all sites to set up displays and promote/celebrate the various faith communities in the prison. These events are further supported by a programme of menus reflecting the various festivals and cultures of the community

12. Prison managers are in the process of compiling a list of community groups, outside of the prison, which reflect the local diversity. It is hoped to draw on these external resources to enhance and support prisoner diversity groups.

Concerns These unfortunately remain almost the same as in previous reports:

- *time taken from the role of the CCE site managers to be used for 'other duties';*
- *foreign nationals serving time beyond their release date.*

LEARNING & SKILLS

1. Each site has an education department, library, gym, resettlement department and employment/training facilities. Manchester College holds the contract for education, though this may change as from 2012/13 to a new provider (not yet known at the time of this report). Activities and learning & skills are overseen by the Director of Learning & Skills for HMP Isle of Wight.
2. Albany has a large population of vulnerable prisoners and is a national centre for Offender Programs. *Area for improvement: to have a virtual campus installed.*
3. Camp Hill: *areas for improvement have been highlighted: learners are very often unaware who their personal officer is; insufficiently developed accredited Esol opportunities; and recruitment to family learning course.*
4. Parkhurst: *areas for improvement include continued improvement of library visits; improvement of waiting lists; broadening of the curriculum; improvement of target setting on ILPs; continued improvement of progression routes for learners; greater support for less mobile learners.*
5. *Works have not been completed on two areas of improvement highlighted – IT suite and the construction workshop – and they are not yet operational.*
6. During 2011 there has been progress in the provision of education & activities:
 - increased accreditation in OLASS (1967) and non-OLASS (751) areas in 6 months;
 - regime hours have increased from 21.6 to 25 hours;
 - older persons in Albany: PM Club and additional workshops involved in recycling chairs;
 - virtual campus and radio station started in Camp Hill;
 - partnerships with Hospice and Age Concern;
 - development of PICTA IT Suite at Parkhurst (greeting cards);
 - forklift CSCS H&S Trainer for all three sites;
 - Leopard Studio Parkhurst accredited course;
 - recycling (clothing) in Parkhurst;
 - reduction in the number of unemployed (Albany 19; Camphill 80 and Parkhurst 51);
 - prisoner engagement – ‘Brightsparks’ pilot in Parkhurst;
 - recognised contributors to the community – peer mentor training provided on all sites;
 - ‘Toe by Toe’ at Camp Hill – 9 mentors, 1 co-ordinator, 40 prisoners being tutored;
 - ‘Ready Steady Work’ pre-release courses.

7. A new management structure for Activities and Learning & Skills will be in place from January 2012 as the Director of Learning & Skills left in December 2012.

LIBRARY

1. Library services across HMP Isle of Wight are provided by the local authority, the Isle of Wight Council, and staffed by council employees. The three Library managers meet on a monthly basis to discuss the services they provide.
2. In general, the libraries provide an excellent service. Points of particular note include:
 - the provision of extra services such as 'Toe-by-Toe' across the whole prison;
 - the production of literature for prisoners;
 - the 'Storybook Dads' service, which is mainly handled by Resettlement but was initiated by the library managers;
 - because of Albany's older population, their manager has four Reading Groups to discuss books read by prisoners including an Audio Book Group for the visually impaired.
3. The manager of Camp Hill Library won the Shannon Trust Award for the Facilitator of the year for 2011, and the manager of Parkhurst Library launched their 'Toe-by-Toe' service on 5th December 2011.

IMB CONCERNS

Two issues are of concern to the IMB:

1. *there is difficulty getting prisoners to Parkhurst Library, unlike Albany and Camp Hill, because of its difficult location and because of the shortage of officers to escort prisoners into the library. When they do get there, there is little time available to spend in the library;*
2. *the biggest problem which concerns the library managers is the late arrival of books ordered and paid for out of special prison library funds (eg. from Roehampton Unit). The books arrive at the Somerton depot, run by the council's library service, and often then go out to the ordinary library service and eventually arrive as second-hand books, sometimes dog-eared, weeks or even months later. This matter has been raised with the Councillor responsible for libraries and the Skills and Learning employee in the prison, and these two individuals are taking the matter up with the Council Director responsible for libraries. I understand that an improvement has been noticed in the last few weeks. It is felt that a visit to the prison libraries from council staff responsible for libraries would be helpful.*

The prison library service is a good service with enthusiastic employees but could be much improved if some of these problems were addressed.

HEALTHCARE

1 Overview

Healthcare is led by a manager from the Isle of Wight Primary Care Trust (PCT), whose main hospital, St Mary's, is located opposite the prison. There are three healthcare units – reflecting the three-site structure – and one in-house hospital unit (IHU).

2 In-house Hospital Unit (IHU)

The IHU was opened in 2009 and has 18 beds for which there is direct funding for 14. During 2011 an average of eight prisoners were in the unit, for reasons ranging from mental health issues to drug detox and convalescence from St Mary's. At present a prisoner who had his leg amputated in August is still in the IHU; medically he is well enough to return to the wing, but is 'bed blocking' through lack of commitment to getting out of bed.

The number of bed watches has been reduced through the ability to offer convalescence on site, and day activities for the patients are being provided. The IHU has in the last year been risk-assessed for open access in the night.

3 Albany Healthcare Unit

The main problem facing Albany is its ageing population, of whom 60 are diabetics, which leads to long waiting times for the optician and chiropodist as these prisoners are checked annually. There are approximately 150 supervised medications every day.

The unit offers the following:

- doctor's attendance 7 times a week;
- dentist twice a week;
- hygienist once a week;
- 1 IDTS assigned nurse (see (8) below);
- optician once a month;
- chiropodist once a month;
- physiotherapist once a month.

4 Camp Hill Healthcare Unit

The unit offers the following:

- doctor's attendance 5 times a week;
- dentist once a week;
- hygienist once a week;
- 1 IDTS assigned nurse (see (8) below);
- optician once a month;
- chiropodist once a month.

5 Parkhurst Healthcare Unit

The unit is now fully staffed; the lead nurse has only been in post since November 2011.

The unit offers the following:

- doctor's attendance 6 times a week;
- dentist once a week;
- optician once a month;
- chiropodist once a month;
- hygienist periodically.

Some negative experiences have been reported this year but this could be to do with the lack of a lead nurse, so we will be reviewing it.

6 Mental Health

In-reach Community Mental Health is made up of four nurses, shared service psychiatrist and one member of administrative staff. They deal with the severe mental illnesses that are present in the prison: some 130 cases at any one time, which represents approximately 11% of the population in HMP Isle of Wight. Since November 2010 a Primary Healthcare team has been established to deal with mild to moderate depression, anxiety and mental illnesses that need short-term intervention (ie no longer than 3 months). This has proved to be extremely successful. In the last year they have found the movement to a secure hospital for prisoners to obtain treatment has improved.

7 Pharmacy

The pharmacy has now relocated to the IHU at Albany. At the present time it is staffed by one pharmacist, two technicians and four assistants, plus a 'rolling' two-month placement from the hospital. The appointment of a pharmacy assistant in the Albany healthcare unit has been successful in reducing the amount of wasted stock, and the PCT hope to implement this at the other two sites. During the last year a new system of issuing monthly medication only on Friday afternoons across all three sites has been implemented, and after some initial teething problems appears to be working well.

8 Integrated Drug Treatment System (IDTS)

In 2000/1 a 'detox nurse' was introduced into the prison to assist the GP. From 2006 a programme, funded by the Ministry of Justice and the Department of Health, was introduced in line with provision within the wider community.

The IDTS department comprises a team leader, six full-time nurses, one part-time nurse and administration support. Both Camp Hill and Albany have one assigned nurse, with the remaining staff (based at Parkhurst) covering all three sites. Over the three sites approximately 80 prisoners are following the programme, half of whom are at Camp Hill. The substance-misuse doctors

attend clinics at Camp Hill twice a week, Parkhurst and Albany once a week, and at other times as required.

9 Bed-watches & escorts

With the opening of the IHU bed-watches have decreased over the year. Prison staff are offered the work on an overtime basis, paid for by the PCT. The transport to and from the hospital has improved over the year, but problems with late arrival to appointments are still being experienced. In the last year 672 appointments were cancelled, of which:

- 9% were attributed to the prison not being able to deliver the prisoner;
- 12% were attributed to the prisoner not wanting to attend;
- the remaining 79% were caused by either the hospital cancelling the appointment, or the prisoner no longer being held at the establishment.

The hospital is literally a stone's throw away from the prison site.

10 New clinics established in 2010

- Retinal screening
- Minor surgery
- Pre-assessment for a day hospital appointment
- Chronic diseases
- 'Well man' clinic
- Hep B/blood clinic
- Chlamydia

IMB CONCERNS

1. *Healthcare provides regular statutory attendance at segregation reviews on two out of the three sites; there has been an ongoing problem at Albany with communication between the healthcare and segregation staff.*
2. *Management of the IHU and healthcare centres come under the PCT Healthcare manager. All other services – e.g. optician, dentist and mental health – come under the administration of St Mary's hospital.*
3. *There is often a lack of communication between St Mary's, the Healthcare Centre and IHU, and a lot of time and money is wasted by both the prison and PCT when prisoners are taken to appointments at St Mary's which are then cancelled.*
4. *Parkhurst healthcare unit:*
 1. *no access for disabled prisoners with mobility problems (there are three stairs into the unit);*
 2. *no provision of a disabled toilet, only a urinal.*

These issues are of concern for two reasons: there is an ever-increasing population in the prison, and the prison is in danger of contravention of the DDA through lack of access for prisoners with a disability.

CHAPLAINCY

1. The Chaplaincy team remain central to the smooth running and wellbeing of prison life.
2. They are a team who carry out their duties with real and genuine felt concerns for all prisoners, and regularly pre-handle volatile, critical or vulnerable situations, avoiding more major incidents.
3. In the current financial year, the Chaplaincy were required to reduce their budget for sessional chaplains by two-thirds: from over £75,000 to £25,000. As a result they no longer have substitute chaplains to cover for the employed chaplains' rest days and leave and now cover for each other, with the effect that on some days one chaplain can be carrying out his or her duties on more than one site.
4. The pressure will be further increased in 2012, as the full-time chaplain has retired and permission to recruit his successor has yet to be received. The team have had to sacrifice many of the 'nice to do' things, to ensure that the essentials get covered.
5. The pressure to meet budget targets has meant that the sessional hours for the Muslim chaplains have been reduced. This has also impacted on the number of times some of the other sessional faith chaplains can visit the Isle of Wight: suitable candidates for the position of Faith Chaplain are located on the mainland and the increased cost of travel, plus the cost of travel time (for which the chaplains are entitled to claim), place a significant strain on the budget.
6. In spite of these pressures the team have maintained and in some cases increased the provision for faith meetings for prisoners, by using prisoners to lead groups.
7. The regular Faith Forums on each site have had a positive impact on the way in which some of the faith groups have been able to encourage one another and deal with various issues which previously might have led to complaints. The Parkhurst Faith Forum reps put together a Festival of Faith Music in September which was well received.
8. The impact of an ageing prison population is putting a strain on the Chaplaincy team, as a number of prisoners are terminally ill and the team support not only the prisoners but also their families and their colleagues on the Wings.

CATERING & KITCHENS

1. The quality of food is satisfactory. All produce is centrally sourced with no local purchase and procurement reflects the very low budget. The most frequent complaint about food is portion size with meat slices, chips, rice and pasta and most vegetables satisfactory, but poultry and fish is variable. **The IMB has already commented on inadequate portion size.**
2. Menus are varied and provide reasonable choice. They are changed half yearly from winter to summer but this year summer menus persisted into the winter months. Inmates did complain about the lack of hot food in cold weather. The reason given was cost. Records as regards food requested are good as this is often ordered months in advance. The chefs and nutritionists arrange menus that meet both medical and religious requirements.
3. The kitchen is well managed, modern and well equipped with good storage and freezer areas. Hygiene inspections are regular and all requirements met. No evidence of food-related health issues have been reported among inmates. IMB board members also sample food and have survived. The kitchen is sensibly organised **however it is seriously understaffed and this has limited some choice on the menus.** Reasons given are orderlies are usually at the end of their sentence and their work in the kitchen is limited. As the kitchen is outside the confines of the prison, risk assessments have to be carried out and this limits numbers suitable for work in the kitchen. All staff are suitably trained and adhere to the requirement of health and hygiene.
4. As the kitchen is outside the prison the transfer of food to prison is by heated trolleys, one for each wing. These are kept at the required temperature until loading onto vans destined for the three sites. On average the transfer of food takes a few minutes and the food is quickly transferred to the pre-heated servery on arrival. Every effort is made to keep food at the required temperature but inevitably some cooling takes place. **The IMB has in the past commented about food cooling.**
5. Serveries are efficiently organised. Orderlies are well trained and food is served quickly. Menus are checked by wing officers and there are minimal disputes/ complaints – other than about portion size. Orderlies observe the rules of health and hygiene. The servery areas all appear clean and all equipment in the correct places.
6. In the interest of rehabilitation the **IMB also commented on the lack of trays and receptacles for food.** Each inmate has a plastic plate, bowl and plastic cutlery. The plate has to take the meal and act as a tray for bread, fruit, and drinks. The bowl has to be used for desserts or soup and if both

have been requested another receptacle such as an ice cream container/ cup has to be used.

7. There are also no opportunities for inmates to eat together other than with a cellmate. **The IMB appreciates** the security issues arising from canteen provision and also the lack of space for communal meals in some wings. It also recognises the need for staff to be able to take a meal break while inmates are locked in their cells eating their meal.

DRUG STRATEGY

1. Drug Strategy services within the prison are now funded by a combination of the Primary Care Trust and the Isle of Wight Council's Drug & Alcohol Action Team.

2. Services are delivered by:

- **CARATS** (Counselling, Assessment, Referral, Advice and Through care) whose work was praised in the HMP Inspection Team's Report published in 2011;
- **IDTS** (Integrated Drug Treatment Strategy), which now operates on all three sites. Three types of treatment are given using liquid methadone or occasionally Subutex tablets:
 - Short detoxification;
 - Stabilisation for 3 months then detoxification;
 - Stabilisation for 3 months then wean off.

Camp Hill, with a greater proportion of prisoners with Class A drug problems, has the largest number being treated by IDTS at any one time. During the year there was a problem with dispensing methadone at the weekends in Camp Hill as there was not always an officer present, but this has now been resolved;

- **PASRO** (Prisons Addressing Substance-Related Offending) delivers group courses mainly in Camp Hill.

Camp Hill continues to have problems with the amount of illegal drugs in the prison. There is a problem in Albany with the diversion of prescribed medication.

Drug Supply Reduction is covered by the Security section of this report.

RECEPTION/INDUCTION

1. HMP Isle of Wight continues to have separate reception and induction wings on each site.
2. All three receptions have experienced problems with prisoners arriving late in the afternoon, which can result in the prisoners not receiving their property until the following day or, if they arrive on a Friday evening, sometimes even until Monday. Transport is provided by the prison transport company GEOAmey.
3. The requirement to have bedding (duvets, sheets and pillowcases) conforming to a higher fire retardant standard caused a number of problems during the reporting year. The IMB had a number of applications from prisoners who had had their bedding, they had previously purchased, put into storage in Reception as not conforming to the new standards. Prisoners then needed to purchase new bedding if they wanted continue to have duvets rather than prison issue bedding, we were told that prison issue bedding does not conform to the new fire regulations.
4. Parkhurst receives prisoners on remand from the local court who are then located on the induction wing. If these prisoners have drug or alcohol problems they may need be moved to the IHU on the Albany site.
5. Most of the induction presentations are delivered by trained Induction Orderlies across all three sites which works well.
6. Staff working in receptions and on induction wings consider they are not being sufficiently informed about proposals to have one reception and induction for the whole prison located on one site. This gives rise to uncertainty.

SAFER CUSTODY

Until recently, Safer Custody meetings were held on each site, but during this year this has changed to just one meeting covering all three sites. The main logistical problem with this is that the Prison Council representatives from each site have to be transported to the location of the meeting. This is proving very difficult, largely because staff are often unavailable to escort these prisoners. It is hoped that this position can be resolved as the attendance of prisoners at these meetings is extremely important. A Board member attends and monitors the meetings.

SECURITY

- 1 Security is managed by a Head of Security based on the Parkhurst site and local heads in each site. It is understood that plans are under way to manage all security issues from one site.
- 2 There have been several serious security incidents during the year, all of which have been well managed and brought to a satisfactory conclusion.
- 3 As stated elsewhere, the Board are disappointed that one of the main points raised in last year's report - regarding the use of dogs for drug searches - has not been addressed by the Prison Service or the Minister to whom the Board expressed its concerns. As a result, unacceptable amounts of drugs and mobile phones are find their way in to the jail, creating considerable instability, tension, fear and bullying.

SEGREGATION, SEPARATION AND CARE UNITS

- 1 As has been mentioned in this and previous reports, the Board congratulates the staff who manage these units (one on each site). The Board has a special responsibility in these units to monitor the treatment and progress of prisoners placed in segregation for any number of reasons but in particular to maintain the good order or discipline in the main part of the prisons, where the presence of a prisoner can be seen as prejudicial to the smooth running and safety of the jail. Prisoners are also held in these units as punishment for breach of prison rules.
- 2 However, there are a small number of prisoners who have spent far too long in these units for a number of different reasons, including, in particular, mental health. The Board deplores this situation, which arises largely from the fact that there are so few available places in secure mental health units throughout the country. These prisoners are often violent, demanding and dangerous, and their behaviour indicates that they are in many cases seriously mentally ill. However, as mental health is covered by patient confidentiality, there is little that the Board can do. The result is that there are too many 'bed-blockers' in these units, preventing them from being used for their proper purpose.
- 3 It is intended that the prison will be closing the segregation units in Albany and Camp Hill in the near future. The Board has many concerns over this move and will be monitoring the situation closely. I am sure there will be plenty to say in our next Annual Report.

ADJUDICATIONS

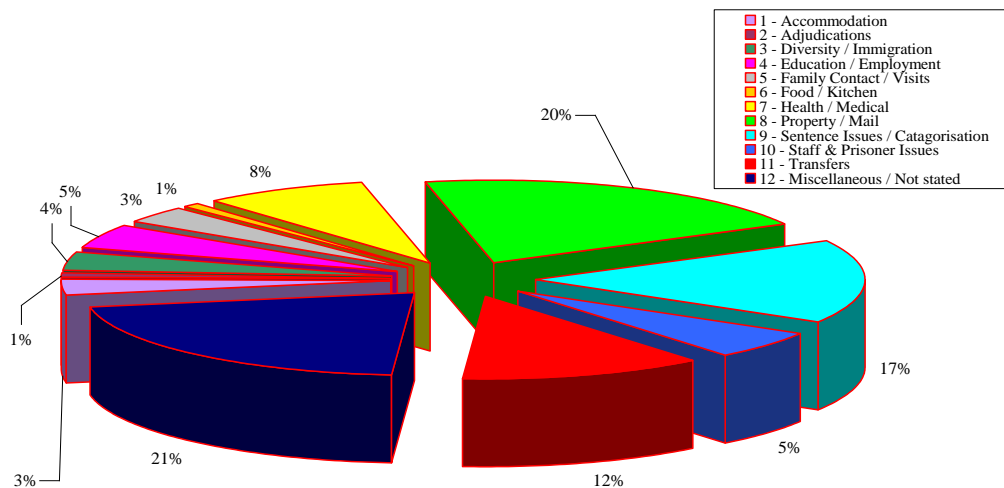
- 1 The Board continues to monitor adjudications of prisoners who have committed offences against the Prison rules: not only the conduct of these hearings, but also the different areas in which rules are breached.

- 2 Board members also attend adjudications held by an independent adjudicator, usually a Crown Court judge, in cases where offences are too serious to be dealt with by the Governor or will not be referred to an outside court. These cases can attract penalties of additional days on an existing sentence.

BOARD STATISTICS: APPLICATIONS RECEIVED 2011

APPLICATIONS RECEIVED 2011	NO.
Accommodation	21
Adjudications	5
Diversity / Immigration	24
Education / Employment	32
Family Contact / Visits	22
Food / Kitchen	7
Health / Medical	54
Property / Mail	137
Sentence Issues / Categorisation	112
Staff & Prisoner Issues	36
Transfers	81
Miscellaneous / Not stated	142
Total	673

Annual Report 2011 - Applications received



BOARD STATISTICS 2011: BOARD ACTIVITY

Recommended complement of the board	24
Number at start of reporting year	16
Number at end of reporting year	17
New members	3
Members leaving	2
Number of board meetings	12
Average attendance at board meetings	13
Attendances at other meetings	78
Total visits to the prison (including all meetings)	624
Total number of applications	673
Total number of segregation reviews	558
Total number of segregation reviews attended	550
Total number of deaths in custody	6