



HMP ISLE OF WIGHT

INDEPENDENT MONITORING BOARD

ANNUAL REPORT

2013

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SECTION 2

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 center 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 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 records.

IMB 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 the 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 the appropriate authorities.

REPORTING PERIOD

1ST JANUARY 2013 – 31ST DECEMBER 2013

SECTION 3

HMP ISLE OF WIGHT

3. Description of the Prison

3.1.1. On the 1st April 2009, HMP's Albany, Camp Hill and Parkhurst were merged to form HMP Isle of Wight and on 19 April 2013 HMP Camp Hill was de-commissioned and closed with the loss of 204 posts and 23.5 staff transferring. No staff took early retirement and there were no forced redundancies. 467 prisoners were transferred to fifteen different establishments in 40 days.

3.1.2. HMP Isle of Wight is a Category B training prison with a population in November 2013 of 1118 with in excess of 90% being sex offenders. The average age of the prisoners is 47.5 years with 240 over 60 years, 49 over 70 years and 5 in the 80 -89 years bracket.

3.1.3. The establishment lies to the north of Newport, the Isle of Wight county town and is opposite the Island's Accident & Emergency Unit (A & E) and only hospital. This is the only prison in the country where the Governor's and administration offices are not inside the perimeter walls. There is only one Separation and Reintegration Unit (SARU), which is based in the Parkhurst site which means any prisoners requiring to be segregated from Albany have to be transported under escort. Both sites have a Healthcare Centre and there is one inpatient Health Care Unit (IHU) based in Albany, this unit has two end of life suites.

3.1.4. A significant number of prisoners do not receive any visits this could be because of the nature of their offences or the location is prohibitive for travel.

3.1.5. The prison's strategic management team consists of: -

Governing Governor

Reporting to him: -

Deputy Governor
Head of Reducing Reoffending
Head of Corporate Services
Head of Estates
Head of Performance Management

Deputy Governor

Reporting to him:-

2 x Head of Residence (Albany/Parkhurst sites)
Head of Drug Strategy and Healthcare Provision
Head of Safer Custody and Equalities
2 x Head of Operations
Head of Security Intelligence
Head of Public Protection
Head of Offender Management

3.1. 6. There are many agencies and outside organisations working within the prison and they are listed as follows:-

PARTNER	Partnership Objectives and obligations for the provider and or Establishment
National Probation Service	Community Punishment
UK Border Agency	Safe and Secure custody of prisoners subject to deportation
Job Centre Plus	Benefit Closure. Referral to work programme on release
Offender Learning and Skills Level 4 (OLAS4) provider as agreed with skills funding	Provision of learning and skills
CARE UK (June 2013)	Provision of Health Services
The Samaritans	Suicide Prevention and Self Harm management
Law Centres	Advice and Guidance
Prison Fellowship	Reducing offending strategy
Age UK	Community Cohesion and Equality groups
Changing Tunes	Provision of additional rehabilitation services
CRUSE	Bereavement Advice
Fine Cell Work	Arts and Craft
SAFFA	Provision of support services for Prisoners in need
CARATS (Counseling Assessment Referral and Through Care Service)	Drug and Alcohol Service, South Stafford and Shropshire NHS until March 2013
Inclusion DART (Drug, Alcohol Recovery Team)	Drug and Alcohol Services from April 2013 South Stafford and Shropshire NHS from April 2013
IOW Library	Provision of Library services IOW Council
Tribal	Employment Advisor

SECTION 4

4. EXECUTIVE SUMMARY

A new Governor joined HMP Isle of Wight at the beginning of 2013 but 7 days later and unbeknown to him, the MOJ announced the closure of Camp Hill the category C site. Due to lack of employment on the Island and the fact that the nearest prison was too far for commuting caused considerable anxiety amongst staff regarding the future of HMP Isle of Wight. However despite this everyone cooperated and pulled together to enable the 467 prisoners to be transferred within 40 days and many to establishments of their choice. On 19th April 2013 the Camp Hill site was de-commissioned leaving 1018 prisoners between the remaining two sites who are predominantly sex offenders with an average age of 47.5 years.

With a population of older prisoners many of who have physical disabilities, there have been a number of concerns raised by Board members due to the inadequate facilities for this type of population. These can be problems such as the lack of wheel chair ramps or lavatories [5.3 (a) and (b)] but because of the age of the sites, in particular Parkhurst, the number of issues requiring attention from the Estate workers can cause considerable delays in rectifying them.

Attention has also been drawn to the lack of training for staff working with such a diverse group of prisoners, such as transgender prisoners 5.1(c) and 5.4(b), for running Sex Offender Treatment Programmes [SOTP] 5.5.(a) and evidenced based programmes for the large number in denial of their index offence. 5.5(b).

The Board were pleased that standards were not compromised with the transition from the Isle of Wight National Health Service Trust to Care UK in June 2013. It is also impressed with the handling and arrangements for the considerable number of prisoners with terminal illnesses and following their deaths in custody, but it continues to deplore the delays in the Coroners Court, which has been raised by the Board in previous reports. 5.6(a). The Board also continues to raise concern about the insufficient effective supervision of the medication queues leading to bullying or the selling of prescribed medication. 5.3 (c)

The length of time spent by prisoners in the Separation and Reintegration Unit (SARU) due to inadequate response from some departments and the unwillingness of other establishments to accept prisoners from Parkhurst SARU has been raised by the Board over a number of years. 5.7(a) (b).

Finally, this 2013 Annual Report from the Independent Monitoring Board in HMP Isle of Wight cannot be completed without reference to the Vice Chair, Paul Drayton who was diagnosed with a fatal illness in December. Paul died while still a Board member having joined firstly the Board of Visitors which subsequently became the IMB and spent the last 25 years of his life monitoring fairness and respect for people in custody.

Rosemary Montero
Chair

Particular issues requiring a response:

Questions on Policy to the Minister

Is the Minister aware of the effect on any further rationalization of the prison estate on the Isle of Wight. There has already been an impact due to the closure of Camp Hill, which has caused a blow to the economic, social wellbeing and community. In the “South East Region Local Authority Indices of Deprivation – 2013/2014 the Isle of Wight” is listed 56 out of 67 Local Authority areas with regard to deprivation.

Questions to the Minister

The Common Assessment Framework (CAF) IoW: Older Prisoners Health and Well-Being Project (2010-12) contract was not renewed for 2013. In 2015 the Local Authority takes over the social care of prisoners. Can the Minister explain why there has been a two year gap in this provision, in view of the particular ageing population in the IOW estate.

Despite your assurances that there would be improvements in the delays in Coroner Inquests, we are again having to raise in this report of continued problems (5.6a)

For the Prison Service

The Board is concerned about the following issues,

- 1) In our annual report 2012 we drew attention to wheelchair access. We are raising this issue again in this report (5.1(a))
- 2) Will there be any formal training introduced for staff working with Transgender prisoners.
- 3) We are again reporting on the lack of supervision on the medication queue at Albany (5.3(c))
- 4) The Board is concerned at the length of time some prisoners are held in SARU (5.3(c))

Previous years concerns

- (a) Dog handlers – this matter is now resolved.
- (b) Prisoners property, is an ongoing problem

(c) Moving prisoners from one prison to another is now resolved

SECTION 5

5.1 EQUALITY AND INCLUSION

5.1.1. As HMP Isle of Wight moves towards accommodating almost 100% sex offenders apart from a few remand prisoners, these prisoners in other establishments would be classified as vulnerable prisoners due to the offence and their age. At present there are 240 prisoners over the age of 60 (21.16%), 49 of whom are over 70 and 5 are in the 80-89 age bracket. The average age of all prisoners is 47.5 years. 11% are foreign national prisoners. The total population of 1118 as of November 2013.

5.1.2. The Common Assessment Framework (CAF) IoW: Older Prisoner Health and Well-being Project (2010-2012), which was reported on in last year report ceased as the contract was not renewed. In 2015 the Local Authority (LA) the Isle of Wight Council (IWC) takes over the social care of prisoners and work in partnership with the LA and NHS locally is being developed in preparation for this event. An NHS Occupational Therapist visits the establishment regularly to advise staff on dealing with the elderly. Age Concern also advises on exercises for the elderly. It is accepted that a prisoner will have aged ten years above his chronological age. Personal Plans and Personal Emergency Evacuation Plans (PEEP) are being developed and a pilot scheme will start early in 2014 with feed back being given by both staff and prisoners.

5.1.3. The following forums take place on a regular basis; Age and Disability, Gypsy and Travellers, Black and Ethnic Minorities (BME), Lesbian Gay Bi and Transgender (LGBT), Faith and Foreign Nationals and prisoner representatives attend Equality and Diversity meetings held alternately in each site. In addition during the year an LBGT Awareness Day was held in Albany site and the Annual Regional Respect meeting was held in HMP IoW this year. Faith Music was celebrated in both sites, as was Black Awareness month. A Local Transgender Policy was developed and introduced during the year to support the national Prison Service Instructions (PSI); the change in prisoner population also assisted the LGBT group. Trans-sexual prisoners continue to be allowed to wear clothes of their choice and the necessary toiletries are available for purchase through the canteen. An Equalities Policy and First Night Induction Policies are in draft form and First Night Prisoner Representative Training is in progress. A survey to study the needs of foreign nationals is also being developed.

5.1.4. Senior staff absences through illness in the early and middle parts of the year meant there was no consistency of management and this had a marked and detrimental effect on the development of equalities within the establishment. The post of Equalities Officer was made temporary in March in 2013 and confirmed permanent in September however under a "Benchmarking" proposition this post could be lost.

5.1.5. In September Discrimination Investigation Reports (DIRF's) there were about 180 outstanding, work in the latter part of the year brought this figure down to 14 as of December 2013, which is an acceptable level. Reporting time for DIRF's was brought in to run in parallel with the complaints system and this too assisted in bringing investigations down to an acceptable level. Race continues to be the

highest area of complaint with approximately seventy complaints of which ten were upheld.

5.1.6. Hearing loops have been introduced in the visits areas and gym/social care groups have been established in both sites. Wheelchair Mobility training continues to be provided for both staff and prisoners. A 'wheelchair experience' through the eyes of prisoners is being developed in both sites to improve access and movement. Staff and prisoners from both sites are being given the opportunity to undertake Mental First Aid Training to give an extra pair of eyes to those whose mental capacities may be deteriorating.

5.1.7. The Board is satisfied that overall the treatment of prisoners is seen to be equal and fair and without discrimination. The views of prisoners are actively sought through prisoners' representative groups and directly on the wings.

5.1.8. Recruitment to the Board in 2013 again failed to recruit anyone with a declared protected characteristic. The Isle of Wight continues to have a very small ethnic minority population and this is reflected in the Board's composition.

CONCERNS

5.1(a) Wheelchair access to some areas of the prison, in particular healthcare on the Parkhurst site is poor and so restricting to those who lack mobility. This position was reported in the 2012 report. The Board has subsequently heard this work is on the agenda, but to date this is still outstanding and there is no fixed date.

5.1(b) Uncertainty of the post of Equalities Officer will devalue the status of Equalities and Inclusion within the prison.

5.1(c) It would, however, be advantageous if a qualified hairdresser could attend a day a week in Albany site to cater for the growing number in the transgender population.

5.2 EDUCATION, LEARNING AND SKILLS

5.2.1 Education is provided in both sites through Offender Learning and Skills 4 (OLAS 4) through a contract delivery with Milton Keynes College. When HMP Camp Hill (HMP CH) closed in April 2013 there was only one trained member of the education team remaining in textiles, as four members of the education team took advantage of the Voluntary Early Departure Scheme (VEDS). This resulted in the lack of facilities to organise workbooks, this situation has now been rectified but there was a significant delay in making the necessary arrangements.

5.2.2. A wide range of educational courses are provided and support mechanisms are in place for all learners. On the wings basic food hygiene and temperature control courses are offered for the servers. Also on the wings an eight to twelve week basic cooking skills course is offered. Many of the courses lead to national qualifications including the British Institute of Cleaning Services (BICS). It is disappointing that

OLAS 4 are not accepting hairdressing as it is deemed unsuitable due to the nature of prisoners offending history.

5.2.3. Historically there were tensions between prisoners working rather than attending education courses, leaving gaps in courses, which then placed education courses under threat of closure due to insufficient numbers. Currently Education staff work well with Activities and Work Placement staff and there appears to be no conflict of interest.

CONCERNS

5.2 (a) The concerns remain the same as those raised in the annual report last year, which is with regard to older/disabled prisoners being unable to access education on the top floors of the education wing in Parkhurst site.

5.2 (b) The number of allocated hours to individual prisoners for reading and writing continues to be insufficient.

5.2 (c) It is disappointing that Toe by Toe is still not running however coordinators and mentors have been recruited plus two liaison officers in readiness for a re-launch.

5.3 HEALTHCARE AND MENTAL HEALTH

5.3.1. The Healthcare service at IOW prisons underwent significant changes in 2013, with a move away from the Isle of Wight NHS Trust and Care UK becoming the provider of services on a three-year contract from 1st June 2013.

5.3.2. The changes however challenging, which were made, were largely achieved without compromising the standards of care to patients. This was made possible at that time, by Care UK Isle of Wight staff having the lowest vacancy turnover and sickness rate within the organization.

5.3.3. There were further changes with the announcement on 10th January 2013 of the closure of Camp Hill prison, and within four days the transfer of prisoners commenced from this establishment to mainland prisons. Camp Hill Healthcare staff managed the massive increase in transfer related clinical work very well in difficult circumstances. Unfortunately Healthcare staff from Camp Hill were unable to transfer to the new provider however all were successfully redeployed elsewhere within the trust.

5.3.4. The Prisons and Probation Ombudsman (PPO) commended the Integrated Drug Treatment Strategy team (IDTS) for prompt action taken following the death of a prisoner in transit to HMP Lewes. A poster warning prisoners considering taking any unauthorized substances on transfer described the risks. The PPO report highlights the quality of the poster and the immediate action taken by the team to prevent a further tragic death.

5.3.5. In March 2013 Healthcare Services were amongst 5 shortlisted individuals/teams in the finals of the 2013 Clinical Commissioning Group Awards. Later in the year HMP Isle of Wight featured in a series of articles on prison health in

the British Medical Journal. IOW Healthcare services work on sexual health was showcased at the “Primary Care 2013” conference in Birmingham.

5.3.6. The Pre Care Quality Commission (CQC) Audit was 96%, one of the very few prison healthcare services at this level. There were two official visits by the Prison and Probation Ombudsman and the Justice Select Committee of MP’s with particular emphasis on the care and needs of older prisoners. The subsequent report: “Justice Select Committee on Older Prisoners” report mentioned positively the work being undertaken in IOW prisons. The IOW Healthcare work on medicines management was awarded “Highly Commended” in the finals of National Patient Safety Awards, the only prison health service to feature in the finals out of a total entry of 700. The prison health service is the only one in the country to have a “Unidose” robot supporting pharmacy services.

5.3.7. In April 2013 the Substance Misuse services transferred to Inclusion who manage the Drug, Alcohol Recovery Team (DART) and in May the Dental Services were transferred to Solent NHS Trust. In November St Georges’s Physiotherapy commenced weekly physiotherapy services under contract to Care UK.

5.3.8. The IOW has a large elderly population and it is therefore not surprising has the highest number of natural Deaths in Custody of any prison in the UK and the unit’s unique developing work, with end of life care, was acknowledged by NOMS Senior Management.

5.3.9. The nursing staff and prison staff at Parkhurst were commended for their professionalism and teamwork by the Head of Security following a serious assault on a prisoner who received six stab wounds. At another incident in Albany health care nursing staff were able to treat a prisoner suffering from serious assault with boiling water, and thereby preventing him having to attend the Regional Burns unit. Two examples of excellent medical care benefitting prisoners who had been victims of assaults.

5.3.10. This has been a challenging and changing period of time for staff working within the unit however their work continues to reflect their diligence, care and commitment to those in need of care within the IOW prison.

5.3.11. An Occupational Therapist is providing two hours a week strategic advice on social care/occupation therapy.

CONCERNS

5.3 (a) Due to a lack of ramps there are difficulties in accessing Healthcare for those with disabilities in Parkhurst.

5.3 (b) There are only urinal facilities at Parkhurst Healthcare which creates problems for those needing to use a lavatory, particularly wheelchair users and transgender prisoners.

5.3 (c) There has been ongoing concerns raised in the 2012 IMB annual report that there is insufficient effective supervision of the medication queue at Albany when it has been easy for prisoners to exchange and sell personally prescribed medication and persuade others to part with them.

- 5.3 (d) The IMB has continuing concern about the social care of IOW prisoners due to the aging population with 22% over 60 and the average age 47.5
- 5.3 (e) There is only provision for a limited time frame (2 hours per week) for Occupation Health strategic advice.

5.4 PURPOSEFUL ACTIVITY AND WORK

5.4.1. The delivery of Purposeful Activities has improved this year. The initial concerns regarding some activity closures, which catered for the more elderly and less mobile prisoners, were unfounded. All prisoners have been included in all activities so there is no age discrimination and specific roles are given to match abilities.

5.4.2. In general most activities are now full to capacity and more places are being created, this may have been assisted by the “engagement to work policy”.

5.4.3. Bench marking when it is finally agreed and introduced should lead to five-day weeks for the workshops although the Mobility (wheelchairs) Workshop is under threat of closure.

5.4.4. In April 2013 the Board conducted a full thematic review of Gym facilities. Excellent facilities were found, flexible for the vulnerable and ageing population. Healthy lifestyle, nutrition and first aid courses are promoted and mind and body exercise is designed to suit individual’s capabilities. Timetables and classes are advertised on notice boards and by wing representatives. A full time 12-week Physical Education (PE) course includes football, basketball, volleyball, and badminton, understanding fitness, diet, nutrition and personal development.

5.4.5. The two libraries are managed by the Isle of Wight Council and a comprehensive range of benefits are on offer; reference manuals, newspapers, magazines, foreign language learning materials, music, story books for dad and official papers Prison Service Order’s (PSO) and Prison Service Instruction’s (PSI). There is also a monthly book club and braille. During the year an electronic system was introduced.

5.4.6. The library regime has been adapted to facilitate Friday afternoons and workshops have timed slots for prisoners to attend. Senior Officer’s (SO) attend or cover for officer posts while escorting prisoners to the library. There is a much improved library service in Parkhurst since it moved to premises with access for the less mobile. Distance learning is currently under review but installing an electronic system is both on-going and lengthy work.

5.4.7. There has been a welcome increase in new qualification accreditations in Textiles, Concrete Products, Mobility, Gym, Library, Staff Mess and Island Design

CONCERNS

5.4(a) Gym sessions were reduced due to a change in the core day.

5.4(b) Older and transgender social care needs need to be under constant review and there has been a lack of training for staff to date.

5.5. RESETTLEMENT

5.5.1. In August 2013 HMP Isle of Wight requested that the resettlement targets within the Performance Rating System (PRS) targets were withdrawn due to the changing nature of the prison population, resources available to deliver the work, and in addition the population remit was that of a Category B Training Prison.

5.5.2. From October 2013 in event of the prisoner not being allocated to a local prison for release, the Activity Hub was given the responsibility to ensure that required information was collated and inputted in to 'CNOMIS' prior to any discharges. A total of 40 prisoners were released from HMP IOW May 2013 – December 2013 after the closure of Camp Hill Prison.

Reducing Re-offending

5.5.3. A new reducing re-offending meeting has been held monthly since August 2013. This meeting is attended by the Heads and/or Managers of Learning and Skills; Public Protection, Chaplaincy, Activities, Offender Management and Education. The meeting gives a shared overview of the issues, problems and successes of all areas of the prison working towards reducing re-offending.

Offender Management Unit

5.5.4. The Offender Management Unit (OMU) for both sites is now located in Parkhurst along with the Public Protection Unit (PPU) and Probation Services. A specific Offender Supervisor has been allocated to each House Unit and holds regular wing surgeries for prisoners.

5.5.5. Attendance at Segregation Reviews by a representative of the OMU has greatly improved with weekly attendance from April to November 2013.

Sentence Plans

5.5.6. There are a large number of prisoners who have Sex Offender Treatment Programme (SOTP) as part of their sentence plan, but are in denial of their index offence and are therefore deemed unsuitable for the course. This now affects their IEPS status if they are non-compliant with their sentence plan. Prisoners with long determinate sentences of up to 30 years are also ineligible for SOTP programmes as the recommendation is that they are completed in the final seven years of sentence. This may not affect their IEPS status until such time when they become eligible for the programme.

Programmes

5.5.7. HMP IOW Interventions delivers Core and Extended Sex Offender Treatment Programmes along with Thinking Skills Programme (TSP) to medium and very high risk offenders. Interventions Facilitator Teams work on allocated wings in conjunction with the OMU surgeries to discuss the various courses with prisoners. The department prides itself on the quality of the outcomes and has an audit history,

which reflects this. There are concerns regarding the lack of trained staff within the department with only 52% in post during 2013. This lack of trained staff poses a significant risk in terms of volume and quality for those units delivered. Additional facilitators are currently being recruited. SOTP commenced in Parkhurst site in late 2013.

5.5.8. In partnership with South Central Psychological Service (SCPS) - HMP IOW Interventions is developing a new pilot course 'Coping and Changing in Prison' (CoACh) to enable staff to engage with those prisoners who are in denial of their index offence with a view to enabling future engagement in mainstream Offender Behaviour Programmes (OBPs). The initial pilot course ran from October to December 2013 but there was insufficient evidence to enable a decision on its value. A further four courses are planned for 2014 to monitor and examine costs, resources and outcomes.

Family Days

5.5.9. Four Family Days were arranged over the reporting year to coincide with the long school holidays or half term holidays. The Family Days without children had an average attendance of 12 families and days with children averaged three families.

5.5.10. The Board were pleased to note that the visitors center has been refurbished and new volunteers appointed.

CONCERNS

5.5 (a) The lack of trained staff to undertake the required programmes

5.5 (b) Lack of evidence based programmes to deal with those in denial

5.6 SAFER CUSTODY

5.6.1. The practices and procedures regarding Safer Custody are set down in Prison Policy, which is reviewed annually. Copies are available in all wings and relevant departments and the policy is followed in detail. The policy is used to form strategies to put in place to ensure/monitor the well being of prisoners at risk from harm to themselves and/or others.

5.6.2. Monthly meetings are held in alternate sites and are usually chaired by the Head of Safer Custody and Equalities to bring together Mental Health, Residency managers and staff, Chaplaincy, Drug, Alcohol Recovery Team (DART), Custodial Managers, PPU, Performance, Samaritans, Prisoner Safer Custody and Listener Representatives. The agenda includes power point reports, which are available on-line and detailed minutes are published. The Board is invited to attend and contribute to the meeting.

5.6.3. Albany reception continues to be the reception for both sites, there is now a fairly static prisoner population as the prison moves towards being a majority of sentenced sex offenders but continues to accept those remanded in custody by the local courts. Listeners play an important role in helping new prisoners to the establishment to adjust to their first night.

5.6.4. The Board is satisfied that all due consideration is given before placing a prisoner on an Assessment Care in Custody Team (ACCT). The prisoner is involved from the outset and the review process is thorough with the prisoner being invited to attend to enable their agreement with the frequency and length of monitoring, post ACCT reviews are also commonplace. For those prisoners in need of constant watch are placed in IHU or in a gated cell on a wing. Board members have access to the ACCT documents and check the procedures regularly. Members often attend ACCT reviews. There were 135 ACCT's opened in 2013.

5.6.5. Prisoners on ACCT's have immediate access to the Chaplaincy and Listeners and telephone access to the Samaritans and Listeners Suites are available. As of December 2013 there were 12 active Listeners in Albany site and 11 in Parkhurst. Staff and prisoners involved in serious incidents of self-harm and deaths in custody are offered support and counseling.

5.6.6. There continues to be a strong anti-bullying policy with warning posters on every wing and throughout the prison. Personal alarms are provided for the more vulnerable and frail prisoners. Staff frequently resolve issues on the wing or by a site transfer, complaints made to the Board concerning bullying by staff are referred with consent to the Governor.

5.6.7. Violence Reduction reports are discussed at the monthly Safer Custody meetings with all assaults being recorded and investigated, those of a very serious nature are reported to the police. In the year December 2012 to November 2013 there were :-

- 53 assaults on prisoners
- 16 assaults on staff which is lower than last year
- 170 incidents of self-harm
- 53 serious acts of self-harm
- 103 incidents of violence (19 being serious assaults)

5.6.8. Under the new National Incentives and Earned Privileges Scheme (IEPS) in the year December 2012 to November 2013 on average 75% of prisoners were enhanced, 23% standard and 2% basic with an average role of 1192. With the changes to the scheme announced earlier this year which became operational in November 2013 a comparative next year of IEPS status will be interesting.

5.6.9. Staff training during 2013 has included:-

- First Aid at Work (75)
- Emergency First Aid (78)
- Defibrillator training (35)
- Cell Sharing Risk Assessment (317)
- Respiratory Protective Equipment (191)
- Introduction to Safer Custody (399)

Health and Safety are content with this level of training.

5.6.10. With an ageing prison population deaths in custody from natural causes are likely to increase. Weekly contact is now made by the Safer Custody team to IHU to determine the number of terminally ill prisoners to consider if a Family Liaison Officer

(FLO) should be appointed and if compassionate release is appropriate. A two-day Bereavement workshop for FLO's is planned for early in 2014.

5.6.11. Following a death in custody the duty IMB member is informed as are the Chaplains and a FLO appointed. The deceased family may initially be informed of the death by staff of a prison nearer to their home but this is invariably followed by a visit from HMP IOW staff. The FLO and other staff take great care and every assistance is given to meet the needs of the family.

5.6.12. From January to December 2013 there were eleven deaths in custody, nine were caused from natural causes or terminal illness. One cause is unknown as it concerned a prisoner being transferred to another establishment and one unexplained, currently awaiting an inquest. At the time of writing 5 inquests have been carried out in 2013. In total there are 23 outstanding inquests dating back to January 2012.

CONCERNS

5.6. (a) The Board continues to deplore the long delays before inquests are brought before the Coroners Court so preventing closure for family and next of kin. Some families have been waiting since January 2012 with still no date being listed, this is despite the Board being advised earlier in the year that changes to the way Coroners could organise their Courts would/could alleviate some of these problems.

5.7 SEGREGATION, CARE AND SEPARATION CLOSE SUPERVISION

5.7.1. HMP Isle of Wight has one Separation and Reintegration Unit (SARU) known locally as the Segregation Unit, which is based in Parkhurst. It consists of 26 single cells, 1 unfurnished back cell and 2 dirty protest cells, Of the 26 cells 7 of these are used to house cleaners. The staffing profile for the unit is:

- One Senior Officer and four officers Monday to Thursday and Friday mornings.
- One Senior Officer and two Officers Friday afternoon.
- One Senior Officer and two Officers Saturday mornings.
- One Senior Officer and two Officers Saturday and Sunday mornings and afternoons.

5.7.2. During 2013:

- 184 prisoners were located in the Segregation Unit with the average length of stay being 28 days.
- 22 prisoners were placed in Special Accommodation.
- 16 prisoners were placed on open ACCTS.
- 98 prisoners required Use of Force.
- There were a total of 1157 Adjudications heard – 827 newly opened.
- 47 prisoners appeared before the Independent Judge.
- Average daily population in the Segregation Unit was 14 prisoners.

5.7.3. Informing the Board of the initial transfer to the Segregation Unit was considerably better than the previous year and the Board was again appropriately notified of moves to Special Accommodation. Use of such cells was kept to a minimum, with prisoners monitored regularly throughout and once assurance had been given of improved behaviour, usually within a matter of a few hours, prisoners were relocated back in furnished cells. If a Board member is on site they would attend and prisoners were offered the opportunity to speak to a Board member out of hearing of staff.

5.7.4. Segregation reviews are held weekly at the same time and Board members give this high priority and always attend. Attendance by a member of the Mental Health Team has been consistent as has a Supervising Officer from the Offender Management Unit, but this cannot be said of the Prisoners Movement Unit. Their information is often relayed via email, but this does not allow for discussion and the Board has been concerned by the number of times there is no report or progress on issues requiring action and so prolonging the length of stay in SARU.

5.7.5. Prisoners are encouraged to attend their reviews and on occasion when they have refused the Governor covering it will go and speak to the prisoner in his cell. In the course of these prisoners are given adequate time to express their views and considerable emphasis is placed, where appropriate, to encourage a prisoner back on to ordinary location. However, for those prisoners who have to remain segregated due to behaviour or an inappropriate allocation to HMP Isle of Wight, transfer to another establishment can take a considerable length of time. This is due to other establishments being unwilling to take a prisoner from the Segregation Unit. However in 2013 there were 20 prisoners who were housed in SARU for more than 90 days and a number of these were raised with the Deputy Director, Custody by the Board.

5.7.6. ACCT reviews take place at the end of the weekly Segregation reviews and again prisoners are given every encouragement to attend their review.

5.7.7. There were three Segregation Monitoring and Review Group (SMARG) in 2013 and in October it was noted that the number of prisoners in the SARU had decreased considerably in light of the change in population to predominately sex offenders. Apart from those on punishment, the whole focus of attention would be on integration from the moment of arrival in the Unit and there was a big improvement in the comments written in a prisoner's Integration Folder, which resulted in far more consistency.

5.7.8. Adjudications in Parkhurst take place in the SARU, but in Albany there is no special area identified to hold them and in April 2013 both the Board and staff members agreed that this was far from ideal. An appropriate alternative was to be sought and although a specific place for adjudications to take place has now been decided on but at the time of preparation of this report this is still unable to be used due to the lack of appropriate facilities such as an alarm bell.

5.7.9. In July the Board raised concerns about showers following complaints from prisoners over poor drainage and flaking walls. Again in October the state of the showers was raised after prison officers informed the Board that no action had been taken. At that time to Board was informed that it was hoped work would commence in 4 weeks time. This work has not been completed by December 2013.

CONCERNS

5.7 (a) The Board is concerned by the number of prisoners held in SARU for what is considered to be an unreasonable length of time due to issues identified not being addressed by other departments.

5.7 (b) The Board considers it wholly unacceptable for a prisoner to have spent more than 3 months continuously in care and separation due to either the length of time taken by other establishments to make a decision, or because they are not prepared to accept them when they clearly need a transfer.

5.8 RESIDENTIAL SERVICES (including accommodation, food and kitchens)

Food and Food Hygiene

5.8.1. The serveries in both sites were monitored weekly and the kitchens at least once per month. It was noted that high standards of hygiene complied with the hygiene instructions posted on server walls. Splash guards were used and the correct sequence of serving was adhered to i.e. vegetarian and vegan options served first followed by the meat options.

5.8.2. Prior to the closure of HMP Camp Hill Category C prisoners were allowed under Release on Temporary Licence (ROTL) in the kitchens. Following the closure agency workers took their place and in the early days it was suggested that Category C prisoners from Parkhurst site might be employed in this role. This did not happen and the opportunities for ROTL were then not available.

5.8.3. Most observers tasted the food and there was a good variety. The food was often bland but it is difficult to accommodate for all tastes when catering for some 1200 prisoners, salt is available to prisoner's in their cells.

5.8.4. Comments sheets are freely available to prisoners but not all staff are aware of their availability. Where comments are made by prisoners both positive and negative these are responded to by kitchen managers.

5.8.5. Prisoners choose their meals in advance and menus are changed and published monthly. Religious festivals are recognized and appropriate food is prepared. Where dietary needs are required on medical grounds kitchen staff respond quickly.

5.8.6. On occasions some prisoners express concerns about the temperature of the food. Daily checks are made and records of temperatures kept, however there is some inconsistency in complying with this requirement. Some prisoners also express concern on portion sizes and again kitchen managers are proactive and advise servers on the utensils and measures to be used.

5.8.7. The Board was impressed with the good relationship between prisoners serving and the prisoners being served.

5.8.8. Concern has been expressed about the condition of the C, D, and E wing serveries in Albany, peeling paint and non-closing windows make it difficult to keep clean. This has now had a 'makeover', which has improved the condition of the unit.

It is still planned to install hotplates on each wing rather than have prisoners from three wings all queuing at one. This will avoid the cost of major refurbishment and a more efficient procedure is anticipated.

5.8.9. Kitchen managers are always welcoming and cooperate fully with concerns raised by the Board. They welcome the Board's objective, independent observations. The Regional Catering manager affirmed the Board's observations and views, in an inspection in December 2013.

Accommodation

5.8.10. In July 2013 the Board's attention was drawn to the safety and design of the ladders to bunk beds in Albany. All ladders had and still do, a solid fixed backboard, which prevents a good foothold to climb the ladder. The Board was advised the backboards were to prevent ligature points. In some cells the ladder rungs are being used for shelving, there is neither a handrail or grip on or near the ladder to assist a user to climb the ladder safely.

5.8.11. Access to the top bunk is made via other pieces of furniture in the cell and some user say they will not use the ladder as they are concerned the ladder will not carry their weight. The bunk beds however are reserved for the more physically able men.

CONCERNS

5. 8 (a) There is a lack of consistency in staff supervision on the serveries. This has the potential to:-

- allow prisoners to bully servers into giving larger than normal portions (at the expense of other prisoners)
- allow servers to steal/conceal food for their own use or to 'sell', again at the expense of other prisoners
- allow monitoring of food temperatures to be neglected.

SECTION 6

OTHER AREAS OF THE PRISON

6.1. CHAPLAINCY

6.6.1. The Chaplaincy has struggled with staffing issues through the year but clearance has been given to employ an additional full time Chaplin early in 2014.

6.6.2 . The Bishop of Portsmouth visited both sites in October. The choir and music at Parkhurst continued to improve.

6.2. RECEPTION

6.2.1. A problem developed in Spring 2013 when prisoners were being transferred without their property due to lack of space in GeoAmy's vans. The Board were lead to believe this was in breach of GeoAmy's contract and as a result a large quantity of property was left in the reception area and prisoners incurred lengthy delays in receiving their possessions.

6.2.2. The Board receives a considerable number of applications concerning missing property and these increased during this time. Also IMB members at the receiving establishments were asked to assist and this Board was frequently contacted regarding this problem. The prison acted to resolve the issue which now appears to have been addressed.

6.3. COMPLAINTS

6.3.1. In June 2013 following feedback received at wing community meetings the complaints procedure was reviewed and a number of complaints came to light that had not had a response from the Secretariat. It transpired that due to pressure of work, one member of the Secretariat over a considerable length of time, had not been answering some 400 complaints.

6.3.2. Prisoners did receive an apology and in order to ascertain whether they still needed a response administrative staff from the Secretariat visited each wing to make themselves available to those with unresolved issues.

6.3.3. The Board was never officially made aware of this despite all prisoners needing to go through the prison complaints procedure prior to putting in an application to the IMB. During that time many Board members had telephoned the person responsible for this to enquire about unanswered complaints, only to be told that they had never put in a complaint, which was subsequently fed back to prisoners. The Board felt that as a result their role and relationship with prisoners was compromised and that this should have been brought to the Boards attention at the earliest opportunity.

6.3.4. The Board have been advised that appropriate disciplinary action was taken.

6.4. SECURITY

6.4.1. At the beginning of 2013 HMP Audit Inspectorate visited the department, the outcome being that the department improved its score by 2% to 93%, this is to be commended. However, in May there were significant changes in security personnel, leaving only two administrative staff and the Head of Security who had only been in post since December 2012. During the year the team have struggled to keep up with all the correspondence and intelligence received and this pressure has contributed to staff being absent on long-term sick leave. Another consequence was that it took a year for three new Board members to receive their photographic prison security passes.

6.4.2. The structure and layout of the Albany site is such that five wings and their serveries spur from a single corridor in the accommodation block. This leads, when prisoners are congregating or moving, to opportunities for medication exchange/trafficking and/or bullying.

6.4.3. The checking area in Albany for prisoners visits is very small and creates difficulties for the staff and dog handler to perform the necessary security processes. Since Albany now receives all remand prisoners there has been a significant rise from nine to twenty plus in the number of visitors wishing to make visits. In Parkhurst the trend is in the opposite direction.

6.4.4. Towards the end of the year a number of incidents occurred where gates were left unlocked and as a result a further investigations took place.

6.4.5. An incident was discovered in Parkhurst when a prisoner attempted to damage his cell, identified a ventilation shaft that could have been used for an escape attempt.

6.4.6. A new computer system being introduced in 2014, which is designed to simplify and streamline the way information and intelligence, are received by security staff Security Information Report (SIRs).

6.4.7. The Head of Security reports to the Board at the monthly Board meetings and in between members of the Board feel able to approach him regarding any matters of concern.

6.4.8. On a positive note the prison has a very low illegal drug use, which is evidenced by the MDT rates.

SECTION 7

THE WORK OF THE INDEPENDENT MONITORING BOARD

BOARD STATISTICS	
Recommended Complement of Board Members	24
Number of Board members at the start of the reporting period	17
Number of Board members at the end of the reporting period	18
Number of new members joining within the reporting period	6
Number of members leaving within the reporting period	6
Total number of Board meetings held during the reporting period	12
Total number of visit to the Establishment	1143 including 16 (SIRs)
Total number of segregation reviews attended	52
Date of Annual Team Performance Review	15 th November 2013

Applications Received

Code	Subject	2010	2011	2012	2013
A	Accommodation	19	21	6	14
B	Adjudications	6	5	26	9
C	Equality & Diversion (including Religion)	27	24	32	15
D	Education/employment/training including IEP	45	32	62	51
E1	Family/visits including mail and phone	20	22	18	43
E2	Finance and Pay	-	-	-	6
F	Food and Kitchen	10	7	8	13
G	Health Related	38	54	45	24
H1	Property (within current establishment)	107}	137}	95	63
H2	Property (during transfer in another establishment)	}	}	24	28
H3	Canteen, facilities, catalogue shopping Argos	-	-	4	6
I	Sentence related (including HDC, ROTL parole re-categorization etc.,	83	112	116	25
J	Staff/prisoner/detainees concerns including bullying	34	36	17	58
K	Transfers	60	81	63	23
L	Miscellaneous	115	142	136	90
	Total number of IMB Applications	564	673	652	468*
	Total number of confidential access	N/A	N/A	57	39

*reduced number reflects the closure of Camp Hill in April 2013