



**Independent Monitoring Board
HMP Lewes**

Annual Report

1st February 2013 – 31st January 2014

Monitoring fairness and respect for people in custody

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STATUTORY ROLE OF THE IMB

The Prison Act 1952 and the Immigration and Asylum Act 1999 require every prison and IRC to be monitored by an independent Board appointed by the Secretary of State 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 Secretary of State, 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 right of access to every prisoner and every part of the prison and also to the prison's records.

Section 1

DESCRIPTION OF THE PRISON

1. HMP Lewes is a local prison, in Category B, serving Sussex courts. It holds adult males, both remanded and convicted, and a small number of younger prisoners aged 18 to 21. The prison's oldest buildings are Victorian, and it was built on a radial design.
2. The total population in Her Majesty's Prison Service (HMPS) at the end of December 2013 was 85,953 (83,837 in 2012). At the same time HMP Lewes held 658 prisoners (590 in 2012). The baseline number for Certified Normal Accommodation was 627 (664) and the Operational Capacity (crowded conditions) was 729. The average length of stay in 2012 was ten weeks.
3. During 2013 the population at the prison increased primarily as a result of the doubling up of the cells in F wing after decency screens were installed. The role changed only in that Young Offenders can now be returned to Lewes after conviction, whereas in 2012 the only YOs were on remand.
4. The prison's residential areas consist of:
 - A wing Drug Recovery unit, holding 134
 - B wing Segregation unit, holding 16
 - C wing Vulnerable prisoners, mostly sex offenders, holding 164
 - F wing Adult & Young Offender convicted and remand prisoners, holding 163
 - F 1 First Night Centre (FNC), holding 30
 - G wing Care and Support unit (CAS), holding 23
 - K wing Integrated Drug Treatment System (IDTS), holding 22
 - L wing Resettlement category C unit, holding 80
 - M wing Resettlement category C unit, holding 94
 - Health Care Centre (HCC), with clinics and an inpatient facility, holding 17
5. The main contractors to the prison are:
 - GEOAmev (transport to and from the courts and other prisons)
 - DHL (ordering and delivery of prisoners' purchases from earnings)
 - 3663 (supply of frozen, fresh and dry foods for prisoners' meals)
 - Sussex Partnership NHS Foundation Trust
 - The Manchester College (education, learning and skills)
 - Sussex Downs College (stewarding course)
 - Tribal (careers advice) and National Careers Service (advice)
 - East Sussex County Council Library Service
 - Drug and Alcohol Recovery Team (DART), interventions delivered in partnership between the NHS Trust and the Crime Reduction Initiative (CRI)
6. In addition, an exceptionally large number of Voluntary and other organisations provide significant services. These include:
 - The Prison Fellowship (runs Sycamore Tree, a six week victim awareness course for prisoners)
 - The Samaritans (runs the Listener scheme, whereby prisoners can call on a rota of trained prisoner Listeners at any time and speak of their concerns, in confidence. The

Samaritans visit the prison twice a week to train new Listeners and to speak to prisoners on request).

- Sussex Pathways (provides a ‘through the gate’ mentoring scheme)
- Citizens’ Advice Bureau (staff advise prisoners eg on debt problems)
- Action for Change (psycho-social and medical treatment for alcohol misusers)
- The Mothers’ Union (supervision of the crèche during visits)
- National Association of Official Prison Visitors
- Brighton Housing Trust (Lewes2Brighton mental health project for discharged prisoners)
- The Prince’s Trust (peer mentoring by ex-offenders for prisoners leaving prison)
- KeepOut (a crime diversion scheme delivered by serving prisoners)
- The Shannon Trust (The ‘Toe by Toe’ self-help reading scheme)
- UKresettlement (support for prisoners)
- Local faith groups and churches (support for released prisoners)
- Life Coaching (consultancy)
- Storybook Dads (prisoners record bedtime stories to send home; run by Library)
- Fathers Inside (parenting skills course run by DART)
- Enterprise Exchange (help to set up a business)
- National Association for the Care and Rehabilitation of Offenders (Job Deal advice for those with no work record)
- Job Centre Plus (DWP employment and benefits advice)
- POAL (Brighton, Lewes and Hastings authorities help to find housing for those released)
- Alcoholics Anonymous (weekly support group)

7. This is a very wide range of external groups to be involved with a local prison, and HMP Lewes is to be congratulated on maintaining all these close relationships with the community.

Section 2

EXECUTIVE SUMMARY

(References, in parentheses, are to paragraph numbers)

8. The IMB believes that HMP Lewes is a well-run prison. Relationships between staff and prisoners are good (83), and considerable thought goes in to making the regime as calm, humane and rehabilitative as possible. These factors have meant that the two major changes (termed Fair and Sustainable, and New Ways of Working) introduced during the year have been implemented smoothly, and have not led to instability. The prison is to be congratulated on this significant success. It remains, in the Board’s view, safe, decent and secure.
9. However, prisoners are locked in their cells for too long (60-66). This is for three reasons. Not enough activities are offered. Prisoners’ attendance at those activities provided is too low. The high staff sickness rate leads to lockdowns on wings and closures of activities. These factors mean that the gap between what was planned as a decent regime for prisoners, and what often happens, is too wide.
10. The IMB feels that the cells in F wing should not be certified as decent accommodation for two prisoners living together (94). Some are particularly small, and all have in-cell lavatories. This long-running issue has been a great concern to the Board for several years, and it becomes more urgent as the prison population continues to increase.
11. Poor hygiene (92-3) in the Kitchen has been a concern at several points during the past year. The Board is not convinced that every one of up to 30 prisoners employed there

washes his hands thoroughly in the toilet area before preparing food. Too often the changing room and toilet areas are not clean, and poor hygiene practice has been seen in the kitchen as a whole.

ISSUES REQUIRING A RESPONSE

12. IMB observations are that about 40% of prisoners are usually locked in their cells during the core day (60-66). When there are lockdowns, this figure increases. What are the Minister's plans to ensure that enough work is provided to occupy prisoners, as required by the policy 'Our New Way'? What guidance can be given to help prisons improve prisoner work attendance rates? What plans are there to make HMPS staff attendance policies more effective? Would outcomes be better if there were more local control (delegation) of personnel policies?
13. What plans does the Minister have to review the cell certification rules (94) that apply to F wing?
14. Can The Manchester College take lead responsibility for achieving acceptable class attendance (41, 65) by prisoners?
15. Why was there a record number of complaints (48, 109) to the IMB about the Sussex Partnership NHS Trust in 2013? Was there the same rise in complaints from prisoners made direct to the Trust?
16. Will the National Health Service (NHS) Trusts working in prisons review their target (49) for an initial response to a complaint (20 working days) as it contrasts markedly with Her Majesty's Prison Service (HMPS) target of 5 working days? The IMB is pleased that Lewes's Sussex Partnership Trust has already made this change.

ISSUES FOR INFORMATION

17. The new policy on the Incentives and Earned Privileges Scheme (PSI 04/13) has been introduced without difficulty and the IMB have not received complaints.
18. The new policy on payments by prisoners for damaged prison property (PSI 31/13) also seems to have been implemented smoothly.

PREVIOUS YEARS' CONCERNS

F Wing cells (94)

19. The IMB report for the year ending January 2013 drew attention to the non-compliant (PSI 17/2012) doubled-up cells in F wing. The unscreened WC was not decent. Each cell now has a translucent fabric curtain to obscure it.
20. However, the two prisoners are still in effect sleeping, eating and living in a large lavatory. These conditions are uncivilised, and the IMB deplores them.
21. Moreover, the Board remains concerned that cells as small as 1800x3500 mm (6.3 sqm) can be used in any case to accommodate two prisoners. There is very little room for two beds, basin, kettle, small TV, WC, two chairs and prisoners' property. At Lewes all meals are eaten in-cell. These particularly small Victorian cells are below modern

standards and should not be certified as appropriate for two prisoners, even under the 'crowded conditions' rule.

Budget savings concerns

22. These savings have come fully into force this year. The IMB has observed a reduction in vocational training courses (45), which may be related. The budget for a prisoner's food each day, at less than £2, is tight, but food served appears sufficient and nutritious. Lower staffing levels have contributed to prisoners' in-cell inactivity, but if prisoner and staff attendance rates were as they should be, the reduced staffing might be workable.

Absence Management

23. As last year, the staff sick rate remains very high, despite the considerable efforts made to reduce it. Now that staffing levels are lower, an absence rate of about 14% leads to prisoners quite often being locked in cells when they should be at work or education. This is not right, and it impedes the prison's rehabilitation efforts. During a lockdown, prisoners cannot phone home, or receive advice about their drug use or sentence plan. Lockdowns are a continuing concern to the Board (60-66).

Initial literacy testing

24. Last year the IMB commented on the fact that new prisoners did not have their literacy and numeracy assessed, so that learning difficulties would be missed. The IMB is pleased that this has now been put right, as it considers that all prisoners should be assessed on induction for their basic skill needs. Otherwise those with learning disabilities may not be spotted, and might suffer discrimination.

Section 3

REPORTS ON ASPECTS OF THE PRISON

Equality & Inclusion

25. Lewes IMB strives not to discriminate directly or indirectly against anyone because of age, disability, gender reassignment, marital and civil partnership status, pregnancy and maternity, race including colour, nationality, ethnic or national origins, religion or belief, sex and sexual orientation, in recruitment, in the treatment of members, and in the way they monitor the treatment of people in custody.
26. Members take seriously their duty to foster good relations between people from different groups and to work towards equality of opportunity.
27. In the Board's recruitment, wider advertising on the Web in 2013, rather than in the local Press, seems to have improved the balance of applicants to join the Board, in terms of age range.
28. In the prison, there have been no initiatives this year to promote good relations between prisoner groups, although there is a full range of characteristics in the prison population
29. There were 24 discrimination incidents reported via the form (DIRF) in the period, an increase of 45% on last year, alongside an increase of about 10% of the total prison population. The IMB noted that they had been dealt with promptly and properly. It was curious that most were complaints that did not seem to be about discrimination, and of those that were, many more were from staff about prisoners than from prisoners about staff.

30. There are only four cells that are fully compliant with the Disability Discrimination Act (DDA). For the most part disabled prisoners are accommodated in normal or part-adapted cells. During 2013 there was a wheelchair user living from May until October in the HCC, there being no other suitable cells, whilst an agreed transfer to the Isle of Wight took time to happen. This delay was unsatisfactory.
31. There is a lack of prisoner representatives for equality issues. Currently there are five, covering all areas of the prison, and none specifically for Foreign Nationals.
32. Recently an “Ensuring Quality Questionnaire” was issued to all prisoners. This has resulted in more protected characteristics being recorded on the prisoner database, so they can be easily identified and accessed.
33. The Induction and Pre-Release Centre (IP-RC) is proactive in identifying needs and specific problems and works closely with the Home Office Immigration Representative, who attends the prison twice a month, seeing both groups and individuals.
34. Under the new ‘pod’ system, the needs of Foreign National prisoners are now dealt with by several OMU staff, rather than by specialists. This means that staff may not always have sufficient knowledge and experience for complex specific issues. However there is a good working relationship between the prison staff and the immigration authorities.
35. Those prisoners with uncommon nationalities and languages share cells if possible, to reduce isolation and promote interaction with others.
36. The chaplaincy is proactive in offering a good service to ensure that individual needs are met. The IMB receives very few complaints about religious diets.

Education, Learning and Skills

37. Learning and skills provision at HMP Lewes falls into two types:
 - Classroom learning mainly supplied by The Manchester College (TMC)
 - Other vocational training supplied by the prison
38. Other learning activities include offending behaviour courses, drug reduction interventions, and various charity projects, provided both by staff and by volunteers.
39. Most prisoners do not stay for more than a few weeks at HMP Lewes, so most courses are short and attempt to offer a credit quickly.
40. In education, proactive officer support ensures order and purpose in and around classrooms. The presence of discipline officers, however, may be reduced or withdrawn because of budgetary pressures (65).
41. The IMB has seen an improved strategy (from wing staff, tutors and workshop leaders) to ensure that every prisoner should attend the activity he is enrolled on. Nonetheless, attendance remains at around 70%, which is very low.
42. The IMB considers that the contractor provides an appropriate range of education courses. These are mainly in reading, writing, numeracy, ICT and Art. Most are at NVQ

entry level or level one. Higher level courses are less in demand and harder to fund. Classes in English (ESOL) are in demand, and their attendance rates are better.

43. A particularly successful ‘National Prison Radio’ day included several items from HMP Lewes. There was a very high number of entries to the Koestler Trust exhibition in 2013, indicating considerable enthusiasm for creative work amongst tutors and prisoners, and this is laudable. Plans for Art within the prison include outreach classes in the Health Care Centre, and making the first night centre less intimidating by creating wall art. Art is a strength of TMC provision at Lewes.
44. Prisoners, who have experienced much educational failure outside, sometimes say that staff seem patronising to them. However learners’ voices carry increasing weight and importance. Six learning champions have been appointed and are awaiting training before they take up their new role, which will also carry a qualification. Peer mentors continue to support learners well in lessons.
45. Vocational training opportunities have however diminished since 2012. The only certificated courses are in painting and decorating, computer skills (PICTA), Information Advice and Guidance (IAG) and building cleaning (BICS). This reduced range contributes relatively little to the skills required by the labour market in Sussex, and numbers are small. Revised national policy puts stress on prisoners being at work rather than being trained.

Healthcare & Mental Health

46. Healthcare services in HMP Lewes are run by the Sussex Partnership Foundation Trust. The Trust funds, with the Crime Reduction Initiative (CRI), a drug and alcohol service through the Drug and Alcohol Recovery Team (DART).
47. There is a 17 bed inpatient facility, and regular services are provided by doctors, dentists, podiatrists, optometrists, psychologists, nurses and psychiatrists.
48. In August 2013, concern was expressed by the Board regarding a number of healthcare issues, including appointments with GPs, prescribing, staffing and overlong complaints procedures. In the year as a whole, the number of such complaints from prisoners to the Board has doubled, to become the highest in the last five years. This is a concern.
49. The target for an initial response (not just an acknowledgement) to a complaint about healthcare is now 5 working days, in line with the prison’s own system. This follows representations from the IMB in 2013 about the previous HCC target of 20 working days, which was far too long. However other NHS Trusts in prisons appear to retain 20 days as a standard target. This is regrettable.
50. Many prisoners complain that their prescriptions are changed upon arrival at HMP Lewes. This appears to be because the guidelines of the National Institute for Health and Care Excellence (NICE) are more closely followed inside the prison than outside. Some drugs are not suitable in custody as they have a high value to other prisoners and can lead to theft and violence. Prescription changes are unpopular with prisoners.
51. Drug misuse remains a significant problem. The DART programmes work well, but a shifting population means the problem is contained rather than eliminated. There is no smoking-cessation programme.

52. There is currently no specific counselling service offered, but the chaplains visit prisoners to break news of death or serious illness in the family. This service is much appreciated by bereaved prisoners and their families and friends.
53. Bed-watches and escorts to external hospitals have reduced during the year, as more medical interventions can take place within the prison. There is still pressure on external appointments. Currently nine appointments are scheduled per week, but these are often cancelled when more urgent cases take priority.
54. The accommodation within healthcare is still a challenge with old and inadequate buildings which make it difficult to provide a caring and effective service. This has an impact on safety (e.g. some ligature points cannot be removed) and the Trust is working with the prison to reduce risk.
55. Staffing of the healthcare unit has been a concern. There has not been a full complement of staff during the year. The use of temporary staff can lead to continuity difficulties. However the situation has improved of late, through staff reorganisation and renewed efforts. There is a good balance between general and mental health nurses. Currently prison officers are also located in Healthcare, but this may not continue for budgetary reasons.
56. One of the barriers to swift recruitment is the length of time taken by the consecutive vetting processes carried out by both HMPS and the Trust. Together these can take up to 17 weeks to complete. It is not clear why these processes cannot be concurrent.
57. Despite the problems above, IMB members observe healthcare teams treating individuals in a caring and compassionate manner. Prisoners with chronic and life limiting conditions are cared for with respect and understanding and much work is done on a one to one basis with those who are most vulnerable.
58. The different teams now appear to be working more closely with each other and with the Prison. This results in clearer processes and outcomes. A recent data snapshot shows the considerable extent of the work:
- 247 prisoners receiving psycho-social interventions.
 - 102 with the clinical team
 - 12 on therapeutic programmes
 - 73 working on pre-release programme planning
 - 200 awaiting release having completed a DART programme.
59. There is a continuity of treatment with drug and alcohol treatment services in the local community, enabling staff to support prisoners from their arrival in the prison until and beyond their release or transfer. All are reviewed at between two and six month intervals and are able to re-engage if necessary.

Purposeful activity (including work)

60. Only about 40% of prisoners in the main wings are usually out of their cells during the core day. Her Majesty's Inspectors of Prisons (HMIP) gave overall the same figure in 2012, and the Board's figures (for the main wings only) from November to January 2013/14 show no improvement.

61. This is in spite of the national policy change towards putting prisoners to work. The implementation of this change began at Lewes in October 2013, and is not yet complete.
62. There is a current maximum of 375 activity places available for about 660 prisoners. Places can derive from work, training, education, charity projects, anti-drug courses, and reducing re-offending programmes.
63. 35 prisoners work at sorting recycling materials or assembling folders; this is the only work provided by outside agencies. Other work is for the prison, including cleaning outside and in, the laundry, the kitchen, stores, wing serveries and various orderly tasks. Education provides 90 places, and vocational training 39. The Prince's Trust and KeepOut provide together 16 places for their rehabilitation projects.
64. Clearly this is not enough to occupy prisoners. Although HMP Lewes is constrained in its use of space, the IMB is not convinced that the existing space cannot be used better. In the past, work places have been provided in the aviary and in gardening. Recently four outside cleaners have been appointed, and this is a forward move.
65. Prisoner attendance rates at the activity placements remains a problem, running at about 70%. Attendance at education improved when discipline officers were assigned to the area, as they would find out why a prisoner was absent and escort him to class. However these officers may be withdrawn under a tighter staffing model. Prisoners can be disciplined for non-attendance, but these sanctions do not seem to have a great effect.
66. In addition, activities of all kinds are frequently closed down as a result of staff absence or other factors. The IMB observed (November 2013 to January 2014) a higher number of lockdowns and lockouts than earlier in the year. These were on Wings, the IP-RC, the Gym and workshops. Both the Kitchen and Healthcare operated on reduced staffing (e.g. 3 staff instead of 8 in the kitchen) for most of the year. Staff absence also affects outside appointments and the support given by peer mentors.

Resettlement

67. The re-offending rates for those released from HMP Lewes are similar to those of other comparable (local) prisons. About three quarters of prisoners are discharged to Sussex addresses, and this fact contributes to the admirably close co-operation between the prison and local probation staff, making links and joint initiatives easier.
68. Offender Management works well, and completion rates for sentence plans and the recording of offender assessments improved during the year.
69. Very few prisoners are released from Lewes on temporary licence (ROTL) other than for compassionate reasons, such as to attend a funeral. Some are given Home Detention Curfew (HDC or tagging), but not many qualify.
70. The Multi Agency Arrangements for Public Protection (MAPPA) apply to high risk and prolific prisoners, and meetings observed by the IMB have seemed carefully done, making balanced judgements on the basis of information from all sources.
71. The prison's IP-RC offers both induction for new arrivals and appointments with a wide range of agency staff for those about to be released. This usually works well, with attendance from Citizen's Advice, Job Centre Plus, and 'through-the-gate' mentors.

Appointments can be made with employers, and benefits, accommodation and GP registration sorted out. There is an unusually wide range of outside bodies that contribute to supporting Lewes prisoners' resettlement. In addition to those listed earlier, there is a guitar group (Jail Guitars) and yoga classes, and both are much appreciated by offenders.

72. There are up to six Family Days a year, when some prisoners can see their partners and children for a longer period than at the regular visit sessions. For the latter, visitors still have problems booking visits by phone, as too often the phone is engaged or goes unanswered. However once they have arrived at the prison, they are made welcome. Refreshments can be purchased and there are children's toys. These sessions are important for prisoners, though sadly some visitors are found to be carrying drugs, for which they are prosecuted.
73. Several charities do valuable work towards resettlement. These include Sussex Pathways, the Prince's Trust, and KeepOut. The latter can provide valuable work for 8 prisoners, training them to give dramatic presentations to young people selected because they may be heading for custody themselves. The prisoners gain confidence and say they have become even more determined not to re-offend.

Safer Custody

74. The number of Assessment, Care in Custody, Teamwork (ACCT) documents opened during 2013 was 365, compared to 279 in 2012. The rise may reflect the higher population, and the greater number of 18 – 21 year olds now at Lewes. Of the 365, 94 (26%) related to only 42 prisoners because they needed this protection more than once in the year. 8 prisoners transferred to Lewes on open ACCTs during the period. A large proportion of the ACCTs are opened in the First Night Centre, and this seems to show that these vulnerable prisoners are being spotted on arrival.
75. The number of incidents of self-harm was 88 in 2013 compared to 102 in 2012. Of the 88 incidents, half were single occurrences, while the other half were repeated self-harmings, carried out by 18 prisoners.
76. There were 2 deaths in custody (DICs) in 2013 – there were 4 in 2012. Of the 2 DICs in 2013, one died of natural causes in hospital which although not in the prison, is treated as a DIC. Two inquests in respect of DICs in 2012 were held in 2013, but the Coroner made no recommendations for the prison.
77. The Board is concerned that inquests have not yet taken place on two deaths in July 2012, more than 18 months ago.
78. Three Prison and Probation Ombudsman (PPO) reports, each on a recent death, include the following comments:
 - 78.1. *“That GEOAmev should conduct random periodic audit checks of CCTV recording on escort vehicles to help ensure that escort staff carry out on-board checks in line with its operating procedures”*
 - 78.2. *“Concern ... about the delay in the prisoner being seen by a prison doctor... Although this would not apparently have affected the outcome, GPs should make urgent referrals to specialists whenever cancer is suspected. I am also concerned*

that, when the prisoner was taken to hospital, he was restrained on the basis of an inadequate risk assessment”

78.3. *Recommendations include “the need to respond appropriately to alleged threatening behaviour, better risk assessments for in possession medication, the importance of first reception healthcare interviews, and improvements to emergency procedures. There is also a need to ensure that there is no unnecessary delay in informing families about a death in custody. While the prisoner had a number of risk factors which would have suggested he was at risk of suicide or self-harm, he gave little indication to those who knew him that he intended to harm himself and I consider that it would have been difficult for the prison to have foreseen or prevented his death.”*

79. After these concerns, there is now an integrated plan and a monitoring system which tests the processes and procedures put in place following recommendations from the Prison Ombudsman and the Coroner.
80. The Safer Custody team meets regularly, and Listeners, the Samaritans and IMB attend these meetings. The group makes strenuous efforts to reduce bullying amongst prisoners. For example, on some wings, and despite the prisoner Violence Reduction representatives, there is a degree of theft and intimidation when canteen purchases are issued to those who have paid for them. On one wing newly arrived prisoners have been bullied to bring in illegal items from outside and hand them over. A barrier is planned, to prevent this.
81. The Samaritans lead a four day training course for prisoners wanting to become Listeners to support other prisoners at any time. For most of the year there have been only 6 Listeners, although their recommendation is for a 1:50 ratio or about 12. Ideally there should be Listeners on every wing, so that when on rota during the night they can be taken to help the prisoner in distress. This has not been the case for most of the year.

Segregation (Care & Separation)

82. The accommodation enjoyed by the Unit is generally good and provides a sound environment for the effective management of prisoners and the maintenance of a humane regime. Staff ensure that cells are maintained and that damage is dealt with promptly. One cell has a drain. This is valuable when dirty protests occur. The exercise areas are limited but adequate. One deficiency is the limited holding accommodation for prisoners who have come from wings for adjudication. Sometimes ten or more prisoners are held in one cell, some for up to a couple of hours. This is not ideal and not helpful to a sound adjudication process.
83. The Unit is well managed and staffed. The residential governors take a close interest in the Unit and its prisoners and provide a clear lead on policy and procedure. Prisoners are constructively managed by staff who are skilled and patient in handling some very difficult prisoners and resolving difficult situations. Staff work hard within the parameters of the segregation regime to provide a disciplined, secure and caring environment.
84. The Board regards it as important to be represented at all programmed Good Order or Discipline (GOoD) reviews and every week a Member is on rota to attend. The Board is also committed to being represented at initial 72 hour reviews whenever possible.

However securing timely details of these reviews continues to be a problem and will be the subject of continuing discussion between the Board and the Governor.

85. GOoD reviews are conducted by the presiding Governor with care and patience and considerable trouble is taken to involve the prisoner in the process and consider what he has to say. Options of returning to normal location and, in appropriate cases, transfer to another establishment are considered and the prisoner is encouraged to take personal responsibility as part of this process.
86. The psychiatric health of patients is an important consideration at GOoD reviews and for this reason the Board has, in some previous years, been concerned at the variable attendance of Healthcare. The Board is pleased that Healthcare's attendance has been good throughout the year and their advice has been an important factor in the decision making process.
87. Care plans continue to be a matter of some concern to the Board. These are sometimes seen as a nominal requirement and do not feature as prominently as they should in planning the care of prisoners who are in the Unit for longer periods. It is very often the case that transfers prove difficult to arrange, or are delayed, with the result that prisoners remain in the Unit for longer than anticipated. Care plans should be in place for such prisoners after the appropriate period even if transfer is expected.
88. The Board is also committed to being represented at the Adjudication Standards and monthly Segregation Monitoring and Review Group (SMARG) meetings. The former meetings have not always been held four times a year as mandated; the one in August 2013 was after a gap of 18 months, following IMB representations. Since August however the meeting have been held regularly. The number of adjudications has remained fairly constant over recent years.
89. Review of records at the SMARG meetings confirms that the standards of record keeping remain high. Data presented to these meetings also enables the Board to monitor use of the Unit, average length of stay, including the number of prisoners who are in the Unit for over thirty days, and the use of special accommodation. These figures inevitably vary from month to month but there was some increase in the average number on the Unit's roll and the use of special accommodation in the last quarter of 2013, and the Board will be keeping this under review.
90. Previously the Board has expressed concern that location in the Unit may be too attractive an option for prisoners and encourage some prisoners to remain in the Unit when a return to normal location would be viable. It is understood that there is to be a review of the Unit's regime, and its relationship with the separate Care and Support Unit.

Residential Services

91. Problems have arisen over 'change of kit', with an erratic supply of **clothing and bed linen**. In addition, the poor condition and extensive staining of prison towels has been noted. The towels are white, whereas previous issues were bottle-green so stains were not so easily noticed. It is difficult to rationalise how HMPS chose white as a practical colour when ordering supplies. The kit change procedures will continue to be monitored by the IMB
92. During 2012 the Board had on several occasions observed that inadequate hand-washing facilities were provided for prisoner workers in the Kitchen. This is a concern as

basic **food hygiene** rules are thereby flouted. It is difficult to be confident that all prisoners wash their hands before preparing food.

93. The Board continued to monitor this in 2013 and continued to observe poor cleanliness within the kitchen, especially in the prison workers' changing room and WC. After successive reports to the prison management the situation improved a little. The Board will however continue to monitor this area, as there is a risk of food poisoning.
94. Following the installation of **privacy** curtains for the WCs in F wing cells in 2013, most cells are again occupied by two prisoners, as the population has increased. Some cells are however only 6.3 sqm. In this space there must be two bunk beds, one WC, one basin, two chairs, table, pin-board, mirror, waste bin and two storage lockers. Under official 'crowded conditions', such a cell can be certified to house two prisoners. Commonly there will also be a small TV and a kettle. The IMB feels that cells as small as this should not house two people. Indeed the Board feel that even slightly larger cells should not be 'doubled' if there is an in-cell lavatory.
95. Although prisoners have complained about the size of **food** portions, the portions provided are as directed and are considered adequate. When complaints have been made, the food has been tasted by the IMB and found of good quality. Food comment books are available at the serveries, although they are neither used nor checked regularly, so there is little confidence in them. This is a pity.
96. Fewer prisoners attended the **library** than in 2012, apparently because they do not want to have to stay for a whole session (about 3 hours), and there are not enough officers to escort them back to the wing individually.
97. The availability of **phones** for prisoners' use on the wings reduced following the introduction of the new regime, when the periods of free association were shortened. This situation has now been resolved by the introduction of a rota system. As a result of these measures the IMB have received few complaints recently about access to phones.
98. Prisoners have complained about delays in recent months in the distribution of **post** received. Letters are important to prisoners, and it is regrettable that reduced staffing and a high sick rate result at times in processing delays.

Section 4

OTHER ASPECTS OF THE PRISON

Drugs/Substance Abuse

99. Finds of 'hooch' have decreased. Up to 10 litres a week were regularly being found hidden in the prison, at the beginning of the year, but this has been reduced to well below 10 litres in the last 10 months, partly because large plastic containers were inventoried even more carefully. Christmas 2013, often a peak period for hooch finds, was calm and well managed.
100. However there is evidence that cannabis is being widely used. There were 379 random Mandatory Drug Tests (MDT) carried out in 2013, of which 30 or 7.9% were positive, and this is better than the target of 9.5%. These tests cover a range of substances.

Incentives & Earned Privileges

101. A new 'Entry' level, for two weeks, has been introduced for any new prisoner. This PSI is being interpreted flexibly and has not led to any instability.

Security

102. There is excellent communication between the Security Department and the Police Liaison Officers. Both actively respond to intelligence obtained.
103. The new benchmarked staffing model does not allow for prison officers in the Healthcare Centre (either inpatients or prisoners attending clinics). Nor does it allow for any officer in the Induction and Pre-Release Centre, though the volunteers and civilians delivering advice might feel unable to attend if the prison did not provide discipline staff. Similarly, the provision of discipline officers for Education is at risk. The effects on security in these locations have not yet been seen.

Section 5

THE WORK OF THE INDEPENDENT MONITORING BOARD

104. The Board details 3 members to be on duty each week. One monitors the Segregation Unit, Healthcare, the Kitchen and all residential wings. Another visits other areas of the prison, and the third member attends the weekly Segregation Review and speaks to those prisoners who have made an IMB application.
105. During the year members have visited at all times of the day and week, including one night-time visit. There have been no serious incidents to attend. Many planned removals, and short uses of a Special Accommodation cell have been observed. None have caused concern.
106. Members have made two visits to other prisons, and one visit to see officers being trained in Control and Restraint at Kidlington. The IMB have held two in-house training events at the prison, one for general Board development and one to review IMB performance. Delegates attended the IMB conference and several took part in national training events and National Council working groups, including training as an independent interviewer and as a flight monitor for deportees.
107. The Board records its reports each week on a private folder on the prison's intranet in a searchable database. All members use secure email (cjsm) and some access p-nomis

and the prison's online data and reports. A special members' website is maintained to hold all DC letters so they can be accessed easily.

108. The Board lost three members through the new tenure rules at the end of 2013 and will lose one in 2015. Recruitment has not been difficult, but time pressures on members who work full-time result in quite a high turnover.

BOARD STATISTICS (Source: Board records)	
Recommended Complement of Board Members	17
Number of Board members at the start of the reporting period	17
Number of Board members at the end of the reporting period	13
Number of new members joining within the reporting period	4
Number of members leaving within reporting period	8
Total number of Board meetings during reporting period	12
Total number of visits to the Establishment	602
Total number of segregation reviews held (individual prisoners)	170
Total number of segregation reviews attended (individual prisoners)	135
Date of Annual Team Performance Review	16 November 2013

APPLICATIONS FROM PRISONERS TO THE IMB

109. The overall numbers of complaints to the IMB have risen in line with the increase in the prisoner population. The numbers of complaints about the Health service provided by the Sussex Partnership NHS Trust have doubled, and are the highest in five years.

110. Complaints made to the prison's own system have remained over the period in line with totals made to the IMB. It is not known whether complaints to the Trust direct have also risen.

Code	Subject	Year 2010	Year 2011	Year 2012	Year 2013
A	Accommodation	7	9	9	14
B	Adjudications	3	7	6	7
C	Equality & Diversity (inc. religion)	8	0	9	8
D	Education/employment/training inc. IEP	21	27	24	17
E 1	Family/visits inc mail & phone	51	20	21	32
E 2	Finance/pay			5	8
F	Food/kitchen related	6	4	8	13
G	Health related	40	36	29	63
H 1	Property (within current establishment)	39	38	17	11
H 2	Property (during transfer/in another establishment)			7	10
H 3	Canteen, facilities, Catalogue shopping, Argos			7	9
I	Sentence related (inc. HDC, ROTL, parole, release dates, re-cat etc)	25	23	47	36
J	Staff/prisoner concerns inc bullying	29	14	21	24
K	Transfers	19	4	5	20
L	Miscellaneous	16	12	13	12
	Total number of IMB applications	264	194	228	284
	Of total: number under Confidential Access:			37	40

N.B. Categories E and H were not disaggregated for this report before 2012
(Source: IMB records)