



HMP EXETER

**Independent Monitoring Board
Annual Report**

January – December 2015

INTRODUCTION

Amendments to Prison and Immigration Rules governing the role and purpose of the IMB approved by Ministers in June 2004 require Boards “to report annually to the Secretary of State how well the prison/centre has met the standards and requirements placed on it and what impact these have had on those in its custody/held in the centre.”

This is a very broad remit and to help Boards increase the focus and value of their reports, the National Council has prepared the following template and guidance. It is drafted in the light of comments made by Chairs who helped trial the document, good practice found in IMB Annual Reports and comments and observations from those who evaluate the information these reports contain.

The format contained in this document enables Ministers, The Prison Service, NOMS, UKBA management and contractors in the prison and immigration estate to see more clearly what the IMB is telling them about their establishments and to make comparisons across the estate. At the same time, agencies with special interests and responsibilities such as the Skills Funding Agency (SFA), Primary Care Trusts (PCTs), healthcare providers and Safer Custody Group will be able to readily find the specialist information they require. It will also enable the IMB National Council to identify emerging themes and trends, inform NC priorities and identify training possibilities for IMB members.

Section 1

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 2

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Section 3

HMP Exeter is a traditional Victorian inner city establishment (built in the 1850s) which is under constant strain due to limited capacity for expansion. It receives both young male and older remand and sentenced prisoners primarily from courts within the South West of England. However, the closure of HMPs Dorchester and Gloucester has resulted in additional pressure owing to reduced availability of remand placements within the region. HMP Exeter is part of the Devon cluster (which also includes Channings Wood and Dartmoor) and a number of services and resources are shared.

The 3 main wings A, B and C are supplemented with D wing that is used solely by 'enhanced' prisoners.

F Wing is a residential Unit for men with social care needs and includes an 'End of Life' Suite which has enabled appropriate dignified end of life care to be given to 5 prisoners in the past year.

The lower ground floor of A wing is the Segregation Unit (SCU).

The same floor on C wing is nominally a first night centre but is not currently being used for this purpose owing to increased pressure of numbers so that newly arrived prisoners generally have to be placed immediately on the wings.

B Wing provides accommodation for vulnerable prisoners.

There is no separate provision for Young Offenders though cells are not shared with adult prisoners.

Healthcare is provided by DUHT (Dorset Healthcare University Foundation Trust). Pharmacy provision is based at HMP Channings Wood.

Certified Normal Accommodation is 326 and the Operational Capacity is 561. Overcrowding is considerable, especially since the closure of other SW prisons, and inevitably there is disruption caused by frequent transfers in and out of the prison.

Section Four

EXECUTIVE SUMMARY

- 1) The Board believes that HMP Exeter is a well run and generally safe establishment in which staff make a genuine effort to treat inmates with dignity and respect. The professional approach of all staff is commended but special mention is made of staff in SCU and Healthcare. They do however face formidable difficulties. The Management team is very supportive of the IMB.
- 2) There are obvious problems inherent in the cramped inner city site and Victorian buildings which are difficult to repair and maintain. Cells are dark, especially in SCU (*para 5.7*) and workshop space limits the number of prisoners that can be offered work placements (*para 5.4*)

Issues for the Minister

- 3) The Board is very concerned that staffing levels are too low to ensure optimum care of prisoners, especially the vulnerable, (*paras 5.6 and 6.4*) and to afford appropriate access to education, training and work placements and to other positive activities (*para 5.4*).

Given that all these contribute to maintaining good order in the prison and to supporting the aim of successful rehabilitation will the Minister review current 'normal staffing levels' within prisons and provide adequate resources?

- 4) The Board is concerned that nationally there are insufficient secure psychiatric beds so that seriously mentally ill prisoners are held, often for many weeks, in inappropriate and inimical conditions in prison, usually in SCU. (*Para 5.7*).

Will the Minister use his best endeavours to bring about improved nationwide provision of secure acute psychiatric places so that mentally ill prisoners can be transferred speedily to suitable environments?

- 5) The Board is concerned that healthcare resources are inadequate to provide a service equivalent to that in the community. Prisoners often complain of long waits for a doctor's appointment and lack of access to medication they received in the community.

Will the Minister commit to resourcing prison healthcare so that a genuinely equivalent service can be provided?

Issues for the Prison Service

- 6) HMP Exeter is a local prison accepting both sentenced and remand prisoners so 'churn' is inevitable. However, late redirects, especially from court/HMP Bristol, together with unexpected transfers in and out, have led to unacceptable pressure on prison staff, especially in Reception. (*Para 6.6*). Lack of vulnerable prisoner accommodation has had unwelcome consequences including the temporary closure of the first night /induction centre.

Will the Prison Service consider its systems for transferring and allocating prisoners with a view to minimising the impact on local prisons such as Exeter of late arrivals and temporary overcrowding?

- 7) The Board believes that mental health cover is inadequate (*para 5.3*) and the current lack of a permanent psychiatrist causes concern.
The Board is aware that DUHT will not bid for the healthcare contract when the current one expires in 2017. In tendering for the new contract will the Prison Service require mental health staff cover on a 24 hr basis and an adequate psychiatrist service?
- 8) Compared with the previous in-house arrangements, the repair and maintenance service currently provided by Carillion is woefully inadequate and costly (*paras 5.7 & 6.1*).
Will the Prison Service renegotiate the current contract to improve services and contract-manage more robustly?
- 9) The Board is concerned that the building limits capacity for accommodating vulnerable prisoners who may therefore be unsatisfactorily accommodated away from B Wing (*para 5.8*).
Will the Prison Service commit to providing resources so that building work can be carried out to improve capacity for housing vulnerable prisoners either at HMP Exeter or elsewhere in the Devon cluster?

Examples of Good Practice

- 10) The location of the social work team within the prison and the development of the 'buddy' scheme to support prisoners with social care needs on normal location is excellent practice. (*Para 5.1*)
- 11) As Weston College provides education in all three prisons in the Devon cluster there is some continuity of provision. For example courses at HMP Exeter, where prisoners generally do not stay for long periods, are mostly at Levels 1&2. Follow-on Level 3 courses in the same subjects are provided in the other two establishments. This coherent planning is commended as good practice. (*Para 5.2*).

• 5.1 Equality & Inclusion

- **Chaplaincy** A new chaplain is now in post giving welcome relief to the over stretched team. There is good attendance at weekly worship services. Support from local church and charity groups ensures a good programme of faith activities. Non-Christian faith leaders are often not reliable in visiting resulting in frustration for those prisoners.
- The Board has not been involved in monitoring **DIRFs** (Discrimination Incident Reporting Forms). This will change from 2016 when the prison also hopes to increase reporting of incidents.
- The establishment of the **Social Work team** (Devon County Council, located in HMP Exeter but serving the three prisons in the cluster) to comply with Care Act 2014 has brought significant benefits ensuring that health and social care needs are identified at reception and prisoners are assessed promptly. Those identified as having care needs but not eligible for a place on F Wing may be allocated a 'buddy' to provide all kinds of assistance other than personal care. These buddies are well trained and supported and can work towards achieving Health and Social Care NVQ Level 1. It is believed that Exeter is the first prison nationally to have established this scheme and the Board commends it as an example of excellent practice.
- **Social care unit (F wing)** Elderly, chronically ill and disabled prisoners on the Social Care Unit are very well cared for by care staff provided by DCC. There is a small workshop on the wing providing meaningful activity for those prisoners who are capable of work. Prisoners are encouraged to associate in the day room, and books and jigsaws are provided. Prison staff on F wing are to be commended for their exceptional care and professionalism, especially when the unit is caring for a terminally ill prisoner.

• 5.2 Education, Learning and Skills

- Education is managed under the OLASS contract and mainly provided by Weston College although other partners contribute. All prisoners are assessed by the CRC within a few days of arrival and given information about courses available. They also, with the help of other partners, deliver work-related training. There is good take-up of courses. These are mainly at Levels 1 & 2 (owing to the high turnover of prisoners) but there is some co-ordination with provision at Channings Wood and Dartmoor (where education is also by Weston College and includes follow-on Level 2 & 3 courses). Subjects offered are mainly basic literacy and numeracy, IT, art and several practical courses. These are mainly accredited by City and Guilds Institute.
- A reading programme, Turning Pages, managed by an officer and volunteers from The Shannon Trust, is available to those prisoners who have low reading capability.
- Workshop activities may also lead to accreditation, usually at Level 1, that aim to build skills linked to future employability.

• 5.3 Healthcare & Mental Health

- New arrangements under Dorset Healthcare University Foundation Trust (DUHT) are settling down, though staffing related issues are challenging. Shift pattern changes have been implemented and where necessary pre-existing contracts for 'special hours' have been accommodated.

Monitoring fairness and respect for people in custody

- Primary Care is under pressure because of the large numbers of prisoners passing through the prison, which can exceed 200 per month. Staffing levels are only just adequate and problems arise when for example escorts to hospital are needed, or cover for sickness and annual leave is required.
- The service relies for backup on bank and agency nurses but there is a shortage of nurses with the necessary security clearance. DUHT is providing incentives to reward nursing staff who serve for more than six months. Vacancies are permanently advertised.
- The Primary Health manager is doing a very good job under difficult circumstances.
- The Board is concerned about mental health provision, where staffing is under review and which has resulted in an ongoing dispute. Mental health cover is present only during office hours.
- Major staffing changes are underway. The psychiatrist for the three prisons in the cluster has left and a permanent replacement has not yet been appointed. Also the occupational therapist is leaving and the psychologist is on maternity leave.
- Ideally a mental health triage nurse should be available at all times in Reception. The prison staff is often managing prisoners with significant mental health issues without support from mental health professionals.
- As a local prison with a shifting population the health problems of the prisoners are ever changing and acute, and the system is under strain.

- **5.4 Purposeful activity (includes work)**

- **Workshops** The prison runs three successful workshops. The main workshop has a sewing workshop sewing towels for the prison service and also undertakes commercial packaging contracts which prison staff work hard to secure and maintain. Maximum capacity is 50 prisoners *provided* two staff members are present. Sadly, considering the key role of workshops in prisoner welfare and rehabilitation, many OSGs do not opt to work here. The VPU workshop operates at full capacity (27) or more fulfilling commercial packaging contracts as in the main workshop. Prisoners can achieve an NVQ. There is always a waiting list for this workshop but the limitations of the building preclude expansion. The third workshop is located in D Wing though other prisoners may be included. Thanks to an enthusiastic staff member this is a successful enterprise tying flies for fly fishing which are then supplied on a commercial basis to various specialist outlets. At 10 prisoners this operates at full capacity.
- **Library** There is a well stocked library supported by Devon CC. Unfortunately it is under used owing to shortage of staff to escort prisoners to the library on a regular basis and D Wing prisoners had no access for some months.
- **Gymnasium and exercise yard** HMP Exeter possesses a well maintained and very well used gymnasium and weights room allowing prisoners to maintain a healthy lifestyle whilst in prison. Staff maintain an excellent professional relationship with prisoners and this is facilitated by the employment of a number of prisoners as Gym Orderlies. In addressing the wide variety of prisoners' physical capabilities, the Prison staff encourage uptake of a variety of classes to assist those who are less able.

- **5.5 Resettlement**

- Working Links holds the CRC (Community Rehabilitation Company) contract for Devon, Cornwall and Dorset. Within HMP Exeter, this is subcontracted to Catch 22 which has two workers in the prison. Every prisoner is seen within a week of admission to assess resettlement needs and, with 65-70 assessments per week, the team is hard-pressed. Some group work is done on employability skills and finance, this to be developed further in 2016. Housing issues are handled by St Petrock's, a local charity. Catch 22 workers have some contact with Offender

Monitoring fairness and respect for people in custody

Managers within the prison but contact with those outside is problematic. Catch 22 deals only with prisoners while in custody. On release they are referred to PACT (Prison Advice and Care Trust). PACT workers see prisoners immediately on release and may refer to other agencies. These arrangements highlight the difficulties of providing a genuinely joined-up service.

- **5.6 Safer Custody**

- **Deaths in custody and violent incidents.** There have been five expected deaths in the prison's 'end of life' suite in 2015 and other deaths from natural causes. Sadly there have been four deaths apparently self-inflicted in 2015, an increase on past years. The Board is very concerned about this trend. Undoubtedly there are many factors contributing to this but the Board *is* concerned that low staff numbers prevent staff from engaging as they would like with prisoners in difficulty.
- The prison has an active and effective system for suicide prevention and maintains constant vigilance on its effectiveness. The Listener scheme is working well, and Listeners attend Safer Custody meetings each month, contributing valuable insights about the 'temperature' of the prison. A new Listener Suite has opened on C wing, where prisoners in need can talk in a comfortable and confidential environment to Listeners. The Listeners are themselves well supported with a monthly meeting. The Board believes that increased staff numbers would, in collaboration with the Listener scheme, increase staff engagement and lead to a decrease in self-inflicted deaths.
- The temporary closure of the induction centre (C1) because of shortage of vulnerable prisoner places has been a concern both for the Board and for prison staff. First night prisoners have been placed on normal location straight from reception and induction carried out on an outreach basis, but this is far from ideal. The Rule 45 prisoners on C1 have until recently had little meaningful activity and are locked in their cells in the afternoons because of staffing issues. More recently, some have been placed on B wing in the mornings for association and can work if there are workshop spaces available. *(And please see section on Buildings below).*
- **Violent incidents and self harm** are also on the increase as is clearly demonstrated by statistics presented at each monthly meeting to the Board. Low staffing levels contribute to frustration among prisoners when time out of cell and access to activities is restricted. A key factor in violent incidents is 'spice'/New Psychoactive Substances (NPS). The prison has made strenuous efforts to monitor this and close routes by which these have entered the prison but it is an uphill struggle. Drugs, NPS and other prohibited substances/items are frequently thrown over the wall, and some have been flown in by drones. The prison has introduced a new Violence Reduction Strategy this autumn and a Violence Reduction meeting takes place monthly to evaluate this.
- The use of body-worn cameras by staff has contributed to a significant decrease in violent incidents especially towards staff (although there is some evidence that between prisoner violence has moved behind cell doors).
- CCTV surveillance of the perimeter has been improved.

- **5.7 Segregation, Care & Separation, Close Supervision**

- The Special Care Unit (SCU) continues to function very well despite having had some very difficult prisoners over the year including a number of seriously mentally ill individuals who are not appropriately placed in prison. The length of time it can take to identify a suitable placement in a secure mental health unit is of considerable concern.

Monitoring fairness and respect for people in custody

- The physical environment of SCU is unsatisfactory. Its bottom floor location means it is always dark and there have been frequent maintenance problems especially with the plumbing. It is neither dignified nor respectful to leave a prisoner for several weeks in a cell with a blocked toilet. Unfortunately issues of this nature have highlighted problems with the service afforded to the prison by Carillion.
 - The CCTV in SCU is often out of action and it is seldom that all cameras are working.
 - Prisoners located in SCU get very bored and frustrated. The Board would like to see prisoners there being encouraged to read or carry out some form of meaningful activity (although it is recognised that this may have resource implications).
 - The Board would like to increase the number of GOOD hearings it attends, but this has proved difficult, since there are no fixed times/days when these take place. An improved system for alerting Board Members to GOOD hearings would help considerably.
 - SCU staff are to be commended for the professional and respectful way in which they manage the unit.
- **5.8 Residential Services** (includes accommodation, food, catering and kitchens)
 - The kitchen is to be commended for the standard of food served to prisoners given the low budget, occasional failures of essential equipment (also compounded by tardy attention from Carillion) and chronic shortage of prisoners able or willing to work in the kitchen (despite the potential for training for resettlement). It is noteworthy that the Board has received no complaints about the standard of the food although other issues such as provision for special diets have occasionally been raised (and discussed with the catering manager). The Board is satisfied that all reasonable requests are addressed and complied with as far as possible.
 - The prison faces some difficulty in the housing of prisoners identified as vulnerable. Currently B Wing, the smallest, is designated as the VP Wing. It accommodates 87 prisoners but ideally the prison would have around 110 VP places. A and C Wings are too large to be re-categorised. However, recently the First Night Centre (located on C1) and part of C3 have been used for vulnerable prisoners. This is unsatisfactory as there is currently no designated first night provision and VPs on C3 have reported abuse. The prison is committed to restoring first night provision but there is no obvious solution to the problem of accommodating vulnerable prisoners. This relates to the safer custody issue raised above.
 - Recent budget cuts have led to delay in implementing previously agreed building improvements. For example, new cell doors for C Wing (with wide view observation panels) are on site but have not been installed.

Section 6

- **6.1 Building repair and maintenance** There have been numerous instances throughout the year of essential maintenance work not done in a timely fashion. Several examples have been mentioned above. Others include D Wing waiting many weeks for repairs to the washing machine and drier, D Wing fire alarm not ringing in control room for several months, B and D Wings waiting 6 months for a water boiler repair, 6 months to change a light bulb in the library. This issue has been discussed with governors and other staff on many occasions but this is outside their control.
- **6.2 Escorts** The Board is concerned at the frequency with which prisoners' property goes missing especially on transfer between prisons. The problem seems to be that GeoAmey restricts the amount that can be transported with the prisoner leaving the prison to pay for transport by taxi of other items. This has been raised frequently at IMB monthly meetings with the Governor.
- **6.3 Non smoking policy.** HMP Exeter has been designated an early adopter of the non-smoking policy, which was announced in the media before staff and prisoners had been told. The Board is concerned at the precipitate introduction of this initiative leaving very little time to prepare both staff and prisoners for this substantial change which brings inevitable risk of increased violence and contraband. Despite this, the prison has made good efforts to prepare for this initiative with staff training, focus groups of prisoners and discussions with Healthcare staff.
- **6.4 Staffing** The Board wishes to highlight grave concerns that, although HMP Exeter generally has the right number of staff as allocated by benchmarking, this is not adequate to ensure a safe and purposeful environment and this in turn affects staff morale. This is not a criticism of HMP Exeter's staff at any level but there is absolutely no slack in the system so that staff sickness, a couple of hospital escorts or bed watches quickly results in a restricted regime. The low level of staff together with the lack of any mental health cover out of working hours means it is very difficult to provide appropriate support to a distressed prisoner, especially at night. This has been discussed with governors and other staff on many occasions but this is outside their control.
- **6.5 Substance misuse** The retirement of one (of two) drugs dogs in June has led to an inadequate drug detection capacity within the prison. There have been numerous drugs finds thanks to intelligence and staff alertness but the town centre location of the prison and the high number of prisoners on short term licence recall increase the risk of drugs, NPS and other restricted items entering the prison. This has been discussed frequently at IMB monthly meetings with the Governor and generally.
- **6.6 Transfers, redirects and late arrivals from court** Following the closure of HMPs Dorchester and Gloucester, Exeter has often been receiving very late arrivals (up to 11 pm) from court of prisoners redirected from HMP Bristol which became full often by early afternoon. Strenuous representations by the Governor that this needed to be better managed have resulted in considerable improvement as prisoners are now also redirected to Wales but late arrivals still occur, including when prisoners are transferred from out of area. It is a concern not only because staff have to remain on duty long past the end of their shift and travel home at a very late hour, but also because it is very difficult to provide a calm, thorough reception and induction process at that hour, increasing first night risk. This has been raised frequently at IMB monthly meetings with the Governor.

Section 7

THE WORK OF THE INDEPENDENT MONITORING BOARD

Despite very depleted numbers the Board has maintained regular visits throughout the year, usually making rota visits twice weekly with additional visits to attend meetings, training or in response to incidents. Applications have been dealt with promptly. There have been no 'serious incidents' during the year.

BOARD STATISTICS	
Recommended Complement of Board Members	11
Number of Board members at the start of the reporting period	6
Number of Board members at the end of the reporting period	4 +2 'in training'.
Number of new members joining within the reporting period	1
Number of members leaving within reporting period	3
Total number of Board meetings during reporting period	13
Total number of visits to the Establishment	133
Total number of segregation reviews held	Data not available as these have not routinely been notified to IMB
Total number of segregation reviews attended	Attendance intermittent owing to unpredictable

	timings
Date of Annual Team Performance Review	March

Section 7 (cont.)

Applications by subject category

Code	Subject	Year 2015
A	Accommodation	1
B	Adjudications	2
C	Equality & Diversity (inc religion)	2
D	Education/employment/training inc IEP	4
E 1	Family/visits inc mail & phone	13
E 2	Finance/pay	11
F	Food/kitchen related	3
G	Health related	25
H 1	Property (within current establishment)	17
H 2	Property (during transfer/in another establishment)	14
H 3	Canteen, facilities, Catalogue shopping, Argos	9
I	Sentence related (inc. HDC, ROTL, parole, release dates, re-cat etc)	11

J	Staff/prisoner/detainee concerns inc bullying	16
K	Transfers	1
L	Miscellaneous	20
No code		26
	Total number of IMB applications	175
	Of total: number of IMB Confidential Access was:	2

Section 8

GLOSSARY OF ESTABLISHMENT RELATED TERMS AND ABBREVIATIONS USED IN THIS REPORT

<i>DCC</i>	<i>Devon County Council</i>
<i>DUHT</i>	<i>Dorset Healthcare University Foundation Trust</i>
<i>PACT</i>	<i>Prison Advice and Care Trust</i>
<i>NPS</i>	<i>New Psychoactive Substances</i>
