

INDEPENDENT MONITORING BOARD



HMP STAFFORD

ANNUAL REPORT

1 May 2015 to 30 April 2016

SECTION 1

STATUTORY ROLE OF THE IMB

1. The Prisons Act 1952 and the Asylum Act 1999 require every prison and Immigration Removal Centre (IRC) to be monitored by an Independent Board appointed by the Justice Secretary from members of the community in which the prison is situated.
2. The Board is specifically charged to:
 - 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
 - inform promptly the Secretary of State, or any official to whom they have delegated authority, as it judges appropriate, any concern it has
 - 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 custody.
3. 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.

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SECTION 3

DESCRIPTION OF THE PRISON

4. HMP Stafford is a category C, adult male, sex offender establishment with a certified normal accommodation of 751. On 30 April 2016 748 vulnerable and 2 non vulnerable prisoners were held in Stafford. The prison is a national sex offender hub. It is near Stafford town centre and is one of the oldest in the country; many areas are listed for planning purposes.

5. The prison comprises A, B, C, D, E, F and G wings. D wing is used for induction and accommodates the Healthcare Centre, also the Segregation Unit which is located below. Four of the residential wings have accommodation for over 100 prisoners. Each wing has in-cell sanitation and a shower block. Most cells accommodate two prisoners.

6. G wing, which is a single cell, two storey, prefabricated building for 40 prisoners, was constructed in 2004. The accommodation and facilities are more modern but the rest of the prison, for all its history, is just as well decorated and clean, even though some areas are not ideal for the ageing population. A new portacabin for the Senior Support Group (SSG) is now in full use.

7. There is a visitors' centre in a building opposite the prison and a visits hall with tea bar and children's play area within the prison itself. There are 8 workshops, a laundry, gardens and a reclamation/recycling area providing a variety of tasks for the prisoners, some of which provide income for the prison. There is also a well-equipped gym, library, education centre and chapel with a multi faith room.

8. As at 30 April 2016 the number of full time or equivalent staff was 258, 24 fewer than the previous year. The 10% savings of £50,000.00 which had to be made in the final 3 months of the reporting period were achieved.

9. Healthcare facilities, including dentistry, audiology and podiatry, were provided by Staffordshire and Stoke-on-Trent Primary Care Trust (PCT) initially and then by Care UK, education services by Milton Keynes College and Stoke-on-Trent College, library services by Staffordshire County Council. Transport for prisoners was provided by GeoAmey and canteen by DHL.

10. There were many voluntary organisations supporting the prisoners. Among them were Samaritans (support for Listeners), Halow Trust (visitors' centre), Shannon Trust ('Toe By Toe' reading project), official prison visitors, chaplaincy volunteers, Bereavement and Loss Counselling Service and refreshment provision in the visitors' centre by Friends of Stafford Prison.

SECTION 4

EXECUTIVE SUMMARY

- 11. The Board believed that HMP Stafford and the staff made determined efforts to ensure prisoners were treated with respect and dignity in a safe environment. HMP Stafford settled well following its change of role from adult male to sex offender hub and made considerable progress in many areas.**
- 12. Levels of prisoner engagement with work and education were high, the relationships built between staff and prisoners were productive and effective.**
- 13. Free flow was introduced throughout much of the prison which reflected the trust placed in prisoners. This was well managed and contributed to a sense of calm and order.**
- 14. The Board was pleased by the low level of violence and self-harm, reflecting a stable environment. Mandatory drug testing revealed minimal issues, though the prison was not complacent in this area and recognised the challenges of substances being smuggled in and the difficulties in detecting some of the new illegal psychoactive substances.**
- 15. The change of Healthcare provider towards the end of the reporting period gave the Board hope for improvement in this key area, particularly in view of the ageing population within HMP Stafford. Early signs were encouraging with reduced waiting lists and additional clinics.**
- 16. The management team at HMP Stafford recognised where additional efforts were needed to improve the situation, for example resettlement, cancelled external healthcare appointments and purposeful activity for older prisoners. The Board looked forward to seeing progress in these and other areas.**

17. The Board wishes to raise the following issues with the Minister, with special emphasis on issue D overleaf, the plight of IPP prisoners (held for an Indefinite Sentence for the Protection of the Public), an injustice which has been raised with the Minister over several years now.

Respondent	Issue	Action Required	Section
Minister and NOMS	A. <u>RESETTLEMENT</u>	Improve the national process to ensure:	5.5 (page 20 to 21)
	a) Why are some prisoners routinely released directly into the community without adequate resettlement?	<ul style="list-style-type: none"> - Specialist resettlement prisons are obliged to accept those nearing the end of their sentence and/or - Prisoners can prepare for a better life after discharge by being sent to a prison closer to home 	
	b) Why do some prisoners have a sentence plan which, once complete, does not affect their release?	<ul style="list-style-type: none"> - Make sentence plan completion a statutory guarantee of release 	

<p>Minister and NOMS</p>	<p>B. <u>HEALTHCARE</u></p> <p>How can the poor health of the ageing population here be managed more effectively without impacting on other prisoners?</p>	<p>Improve liaison between prisons and hospital trusts so that routine testing equipment and telemeds for remote consultation can be introduced in the prison, thus making best use of officers', hospital staff and prisoners' time.</p>	<p>5.3 (page 14 to 17)</p>
<p>Minister and NOMS</p>	<p>C. <u>PROGRAMMES</u></p> <p>How can all high risk prisoners access the SOT (sex offender treatment) programmes they need to ensure their release within tariff?</p>	<p>Redesign SOTP programmes so that more prisoners and fewer trainers are involved or allow more SOTP work to take place after discharge in the community.</p>	<p>5.5 (page 20 to 21)</p>
<p>Minister and NOMS</p>	<p>D. <u>IPPs</u></p> <p>Why are 78% of IPP prisoners kept in custody here beyond their tariff?</p>	<p>Introduce legislation to</p> <ul style="list-style-type: none"> a) reform the use of IPPs in courts and b) alter sentences for IPP prisoners to reflect their initial offence. 	<p>5.5 (page 21)</p>

Issues to be raised with the Governor 2015-16:

a) Healthcare

- Routine treatments e.g. dental services were unable to keep pace with needs of the population, 20% of whom were 60 and above.
- Ill prisoners' hospital appointments were cancelled because of operational demands.
- Healthcare staff faced more pressure with changes in managers and with being transferred to a private provider.
- Many prisoners were unfairly impacted by increased time in cells due to the large number of external bed watches and hospital escort requirements.
- Prisoners on the wings were made more vulnerable due to inconsistent supervision of medication queues. Some men were a target for fellow prisoners who illicitly sought their prescribed drugs.

Page 14 - 17

b) Resettlement

- Prisoners were not catered for by rehabilitation groups in the community. A contributory factor could be that the CRCs (Community Rehabilitation Companies) nationally could achieve their success target without including the more hard-to-place sex offenders.

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c) Purposeful Activity

- The focus on profit in the workshops was at the expense of prisoners in need of preparation for a successful life after discharge, offering little learning other than what happens on most basic assembly lines and little benefit other than a chance to leave the cells and to get into the habit of regular work.

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d) Wing Issues

- The IEP (Incentives and Earned Privileges) scheme continued to be applied ineffectively so that neither punishments nor rewards were truly felt or appreciated; behaviour was not affected by it as so many prisoners were on Standard and Enhanced, and so few on Basic.

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SECTION 5

5.1 Equality and Inclusion

Positives

18. During the reporting period HMP Stafford continued to monitor Equality and Diversity for all prisoners, respecting and responding to needs and differences. Protected characteristics were identified as follows:

- Religion and Belief
- Race
- Sexual Orientation
- Disability
- Gypsy/Roma/Travellers
- Age
- Transgender
- Veterans

19. Each of the 7 wings in the prison had at least one elected Equalities Representative. They represented the views and concerns of their wing at the Equality Action Group, chaired by an elected prisoner and supported by a Governor. At this meeting relevant actions were discussed and proposals added to the agenda of the Monthly Equalities Meeting where the Governors who were responsible for the individual characteristics attended. Veterans were added as an equality strand to ensure the complex needs of this distinct group were being met.

20. HMPS introduced a 'Help Desk' on some of the wings, manned by prisoners, which provided peer support for those prisoners who needed advice on prison systems and activities, complaints procedures etc. It was intended that this facility would be rolled out throughout all the prison wings.

21. HMPS had an active Lesbian/Gay/Bisexual/Transgender (LGBT) group which met monthly, chaired by a Supervising Officer supported by the Strand Leader from the Senior Management team (SMT). The group discussed problems which affected them in the prison in open forum and had a regular attendance of 40 plus. The group often had special guest speakers to address them.

22. HMPS ran Prisoner Forums on all the protected characteristics ensuring that the prison responded to equality issues of the whole prison population. Along with this, the introduction of Foreign National reps and forums were available to help support the specific issues of this group of prisoners.

23. The prison had an active Senior Support Group (SSG) day to assist those retired and elderly prisoners to engage in off wing activities and socialise with others within their age group.

24. HMPS provided facilities for religious observance for all faiths. The prison actively acknowledged and supported important festivals and days of special significance as well as dietary requirements to meet cultural needs.

25. At the end of 2014-2015 72 Discriminatory Incident Report Forms (DIRFs) were submitted by prisoners and staff. This had dramatically decreased during this reporting period though continued to reflect the freedom of prisoners to raise issues. 33 had been submitted and of those 18 were rejected, 11 upheld, 3 not completed and 1 dealt with under the complaints procedure:

The following table shows the complete breakdown:

End of Month	Reason for DIRFs	Total
May 2015	2 Religion & Belief, 1 Sexual Orientation, 1 Disability	4
June 2015	0 DIRFs	0
July 2015	2 Religion & Belief, 2 Race, 1 Sexual Orientation	5
August 2015	2 Disability, 1 Sexual Orientation, 1 Race	4
September 2015	2 Disability, 2 Race, 1 Sexual Orientation	5
October 2015	2 Race	2
November 2015	0 DIRFs	0
December 2015	1 Race, 2 Disability	3
January 2016	1 Race	1
February 2016	2 Race, 1 Age	3
March 2016	2 Race	2
April 2016	3 Race, 1 Transgender	4

Negatives

26. As last year, race remains the largest single equalities issue as evidenced in the table above. However none of the DIRFs were proven and the Board found no evidence of racial inequality. In spite of this, any form of perceived discrimination must be viewed as a negative even though there were fewer DIRFs submitted than in 2014 – 2015.

27. The ageing population (20% were aged 60 and above) resulted in the following increases which undoubtedly placed a strain on this old prison:

- The numbers of disabled increased from 247 to 285, up 15%
- Those with reduced physical capability increased from 31 to 45, up 45%
- Those with reduced mobility increased from 55 to 74 up 35%
- The environment, although clean, needed further adaptation to satisfy the needs of the Social Care Act and other health needs of the elderly population.

28. The ethnic population marginally increased from 13% to 15% of the total prisoners in April 2016. This was not reflected in the proportion of staff from ethnic backgrounds. The prison had made repeated attempts to encourage members of the BME group to take an active role in wing representation but had met only limited response. However, the Spring HMIP visit revealed feelings of resentment amongst BME prisoners. This situation might have been improved by a more representative ethnic mix in the staff though the Board recognised that recruitment was out of the control of HMP Stafford

5.2 Education, Learning and Skills

Positives

29. The Education Department run by Milton Keynes College was rated “Good” at the Spring OFSTED inspection.

30. The induction process in the Education Department was informative, thorough and encouraged all prisoners to learn across the ability range.

31. Role models in the form of prisoner learning mentors from OLIP (Offender Learning Improvement Programme) helped both the induction and the learning process.

32. English and Maths success rates were embedded within vocational courses and those prisoners who had not reached Level 2 in either Maths or English could be supported in the VTC by an outreach worker.

33. A very well attended Celebration of Achievement was organised by Milton Keynes College, which recognised levels of prisoner achievement up to and including Degree level.

34. Information in respect of Finance for Level 3 and above was made available and clearly publicised. (i.e. Prisoners’ Education Trust, Haven Books, 24+ Finance).

35. A greater range of NVQs in the workplace continued to be introduced by the partnership with Stoke-on-Trent College utilising Adult Skills Board and OLASS funding; prisoners working in the kitchen worked towards an NVQ and City and Guilds Level 2 in Hospitality and Catering.

36. Some foreign national prisoners were unable to speak English, and responding to that need, ESOL courses were re-introduced and second language speakers were identified to help.

37. The Library (run by Staffordshire County Council) continued to be very well used by both education departments and by some workshops during the working day. The introduction of a well-organised timetable for evenings and Saturday mornings meant more use by the wings. A new table in one of the library rooms enhanced co-operative working and discussion.

38. The Shannon Trust’s programme “Turning Pages” continued to be a success in helping former non-readers to read, and the programme was enhanced by Shannon Trust mentors on the wings. Their success was celebrated by the prison in a Learning and Skills Award Ceremony.

39. Milton Keynes College introduced a system whereby they were able to put a stop to a prisoner being moved suddenly before the completion of his course (a Transfer Hold); this saved lost course fees and also enabled a qualification to be gained where otherwise it would have been lost.

40. Following the OFSTED report in February, both Shannon Trust and OLIP mentors facilitated more maths and other forms of learning in the prison workshops.

41. The gym organised a very well attended, active Veterans Day in which activities were matched to the needs and ages of participants.

42. Education participation targets were all exceeded;

	Target	Achieved
Allocated v maximum capacity	Greater than 90%	92%
Attended v allocated	Greater than 80%	88%
Attendance v maximum capacity	Greater than 80%	85%

Negatives

43. Key staff were often absent from the Quality Improvement Group (QIG) meetings, which delayed some strategic responses and diluted the quality of improvement.

44. Staff shortages meant that gym staff were often used for medical escorts, and diluted what was offered in the gym.

45. The Library was not fully used during the working day and was also subject to non-attendance by prisoners during evening opening times caused by unscheduled lock-downs because of staff shortages.

5.3 Healthcare (Includes Drug Strategy)

Positives

46. Two new consulting rooms were functioning allowing for additional clinical capacity.

47. B wing was a smoke-free environment; prisoners accommodated there were non-smoking and those who had undertaken a smoking cessation programme. Those from B wing who did not wish to participate were moved to other wings. Plans were in place to extend the smoke-free environment to the other wings through 2016/2017

48. Macmillan Cancer Care funded a full time Project Manager in the prison who monitored end of life care, a key initiative in view of the ageing population (the reporting period saw an increase in deaths in custody from 2 to 3, all due to natural causes). The funding was in place for 18 months. This appointment enabled individual end of life support to be arranged in a humane way. The Board looked forward to this appointment being supported by the provision of a palliative care suite on site, subject to funding agreements.

49. Plans were in place for staff learning events covering end of life care provided by the Education Department of Compton Hospice

50. Prisoner carers, prisoner health champions, prisoner recovery champions and prisoner listeners all worked well in terms of supporting those prisoners in need. Prisoners who held these roles also supported the Health Fairs that were arranged 3 times in the reporting period. These provided information to prisoners and staff on areas such as smoking cessation, healthy eating and the Drug and Alcohol Recovery Service (DARS).

51. Freeflow of prisoners through certain areas of the prison and reminders on appointment slips had a positive impact on DNA (Did Not Attend) for internal healthcare appointments.

52. There were early signs of progress, i.e. reduced dental waiting lists under the new contract provider, Care UK, who joined the prison at the end of the reporting period.

53. Following an isolated outbreak of TB in the prison, the Deputy Governor and his team worked effectively with Public Health England to communicate with staff and prisoners in a non-alarmist way. Pro-active screening was also arranged for selected staff and prisoners alike.

54. HMP Stafford worked effectively with the local authority to secure resources and co-operation in the assessment of care and needs for prisoners who might have been covered by the Care Act. Social workers responsible for carrying out some of the assessments took part in the regular Safer Custody meeting to strengthen ties with the prison.

55. The Drug and Alcohol Recovery Service (DARS) had an effective, proactive and well-advertised approach in the prison. Staff were involved in the induction process for prisoners where they were made aware of and offered a wide range of support and interventions.

56. Illegal drug use remained low throughout the year, with no positive results from the MDT (Mandatory Drug Testing) during the majority of the reporting period.

57. The prison used effectively the prisoner Health Champions to develop health and wellbeing.

58. Prisoner carers provided effective support to prisoners with social care needs.

Negatives

59. The ageing population in the prison placed the healthcare function under continual pressure

60. The pressure of escorting prisoners attending external medical appointments impacted on the regime with wing closures.

61. Similar pressures were created in the prison due to increased hospital bed watches. Just before the end of the reporting period the prison was required to support six bed watches over a weekend period. The result was a loss of time out of cell for many prisoners and 20+ officers being assigned to duties outside of the prison.

62. Whilst the staffing profile included provision for escorting staff, this rarely proved sufficient to meet the needs of the population. This resulted in the dual issue of non-attendance at appointments with the resultant genuine risk to the health and well-being of a few prisoners, and the curtailment of the regime impacting on time out of cell activity for many. The healthcare staff were required to prioritise hospital attendance on many occasions to meet the available escort resource. This remained a situation of great concern to the Board.

63. In the reporting period +1300 hospital appointments were arranged and 56 appointments were deemed to be an emergency. Out of the total appointments arranged, 377 were cancelled. This figure, which represented over 20% of the total, was in the main attributable to a lack of escorts to take prisoners to these appointments and the need to prioritise appointments. This also concerned the Board.

64. During the reporting period the contract for healthcare delivery lay largely with the Staffordshire and Stoke on Trent Partnership NHS Trust. Following a tender process, the contract was awarded to Care UK who took over from 1st April 2016. This significant change created challenges around continuity and also prisoner expectation. Early signs of progress were encouraging, assuming that resourcing issues were addressed swiftly, together with the urgent contracting of a full GP service. Positive steps were made in some clinic waiting lists and recruitment to fill vacancies was active and focussed.

65. In the 2014-2015 report the Board expressed its concern regarding the shared resource of Head of Healthcare. This undoubtedly placed the leadership of the function under additional pressure and key discussions around solutions to the escorting issues and the resultant DNAs (e.g. in-house clinics, telemeds) did not move at the pace they should have.

66. The impact of the Social Care Act which came into force from April 2015 saw carers from an external company visiting the prison to provide support/intimate care to prisoners whose care needs had been assessed by the local authority. Difficulties with the quality of this care resulted in the provider being changed recently to Care Avenues. This change gave positive progress in the area of on-site care in the prison.

67. The Board was concerned by the level of care that could be practically offered in an old prison to elderly patients who had been assessed as not meeting the clinical needs for hospital admission, even though their social needs were extensive.

68. Lengthy waiting lists for the dentist were of significant concern, with the wait period being at one point in excess of 15 weeks. Prisoners were not receiving a comparable service to the external system in terms of waiting times and also the range of dental services available. Additional dental sessions were approved by NHS England, however a dentist to deliver these sessions could not be found. Interestingly, under the new contract provider, by mid-April 2016 the wait list for routine appointments and urgent appointments reduced to zero and whilst this was positive, the waiting lists throughout the reporting period were unacceptably long and caused suffering to some prisoners.

69. Late discharges from local hospitals resulted in prisoners being returned to the prison when healthcare staff were not available at the end of the working day. This caused issues with medication and there was an on-going heavy reliance on the already stretched out of hours GP service. A discharge from a local hospital saw a resident return to the prison at 22.00 with medication requirements and no healthcare staff on site.

70. The number of prisoners requiring support by the Drug and Alcohol Rehabilitation Service was, at the time of writing this report, very low at less than 1% of the population. MDT showed very few positive tests. However, issues around the sale of, or more worryingly, the bullying of older prisoners for their prescription medication continued, although evidence showed this to be at a low level. Queuing for medication without consistent supervision was an issue and could have contributed to the concerns around bullying and verbal abuse of healthcare staff.

71. Whilst the IMB were pleased to see the fitting out of two new consultation rooms, it took an inordinate length of time for cabling and telephone services to be fitted. It was very frustrating for the IMB to see such facilities lying idle for weeks awaiting work to be completed. This undoubtedly did have an adverse impact on reducing waiting lists.

72. Healthcare staff did not regularly attend the monthly Drug Strategy meetings, often due to staffing issues.

73. There was concern regarding the increasing level of the new psychoactive substances (NPS) throughout the prison and the difficulty in tracking and establishing their presence.

74. Requirement for locate flat (ground floor) and single cells exceeded available capacity.

5.4 **Purposeful Activity (Includes Work)**

Positives

75. There were 8 fully staffed workshops in operation throughout the reporting year providing work on a daily basis for a maximum of 243 prisoners at any one time. This was an increase of 9 work spaces since 2014-2015. The prison laundry provided work for 20 and the garden for 11 prisoners. The reclamation/recycling area accounted for a further 12, making a total of 286 work spaces, just under 50% of the entire prison population.

76. The work available continued to require differing skill levels and aptitudes. The atmosphere in the workshops continued to improve with a quiet and more willing prisoner population.

77. The efforts of the Industries Manager during the reporting year had resulted in further new contracts from outside customers and this reflected in a 22% increase in the value of total income against 2014-2015.

78. The reclamation area did well in recovering 100% of prison waste over the year and as a result prevented landfill costs to the prison of £117k.

79. During the year 11 residents from this area gained NVQs in Reclamation and Recycling Studies through Stoke on Trent City College.

80. Plans were being put in place for one to one mentoring in the workshops which encouraged more prisoners to obtain Level One in Maths and English. Additionally, workshop supervisors were to be given training and encouraged to involve prisoners in the administration, planning and production routines of a workshop. This could increase the opportunities for prisoners to gain employment on release.

81. A painting party of prisoners was in place during the reporting period. They undertook work in the residential and visitor areas of the prison. Their efforts made a substantial difference to areas which had previously suffered from looking tired and dingy.

Negatives

82. Whilst acknowledging the valuable income generated for the prison, the Board remained concerned that much of the work provided (e.g. key ring production, packing and simple assembly) provided little preparation for prisoners approaching the end of their sentence and their need to find suitable employment on release. Whilst the tasks developed a positive work ethic and gave an opportunity for team work, the skills in some cases were not valuable.

83. The link between basic education levels and pay rates in the workshops caused a level of discontent and perceptions of unfairness amongst those prisoners who were either unable or unwilling to obtain Level 1 Maths and English. Many of these prisoners believed they were equally or more capable of carrying out the various work routines/tasks and felt strongly that the pay rate should be “for the job not the person”.

84. The need for more education and training for prisoners is accepted by workshop supervision; however there was a feeling amongst them that they “were not teachers” and their pay band did not cover such a role.

85. Elderly prisoners sometimes chose to take places in workshops that might have been more beneficial to younger prisoners. It was acknowledged that this was their right in view of the removal of a retirement age.

5.5 Resettlement (Includes IPP)

Positives

86. A Custodial Manager (CM) had been appointed to oversee resettlement matters and was located in the Offender Management Unit. The CM also had responsibility for OCA, Observation, Classification and Allocation, which moved prisoners, when possible, to a resettlement prison.

87. Resettlement meetings had ceased to be held in the majority of the reporting period, owing to the withdrawal of the resettlement services under the Through the Gate project. However, these were resurrected at the end of the reporting period and were being held every other month.

88. Family visits had been held throughout the year and had received much positive feedback.

89. The Board was pleased to note that the prison was chosen to pilot Horizon, a programme aimed at medium risk offenders whose offence was more behavioural than sexual. If Horizon proved effective it would, in time, replace TSP which would extend training and support to those who had previously not been allowed to benefit from SOTP.

90. Horizon, unlike other programmes could also be offered to those prisoners maintaining their innocence.

91. The Board was pleased to note that HMPS had undertaken some follow up work with the NPS which showed that on the day of release, if prisoners visited their local probation office, they actually were provided with emergency accommodation and taking this into consideration, the percentage for securing accommodation was an average of 96.66%.

Negatives

92. As the prison was a national resource it had to deal with 19 National Probation Service (NPS) areas and 21 Community Resettlement Companies (CRC) throughout the country. The Board had noted that the national target for prisoners to go to a resettlement prison had now been set at 80%. This meant that 20% of prisoners nationally would not benefit from being released from a resettlement prison. The Board was concerned that, as sex offenders nationally only form a small percentage of the prison population and the sex offender hubs were so few and sparsely located, the issues of resettling these prisoners might go unaddressed, yet the national target could still be met.

93. In spite of not being a specialist resettlement prison, between 20 and 25 prisoners were still being released from Stafford on a monthly basis, in some cases without the support of the NPS or CRCs. There were no key performance targets to be applied to resettlement but records were still being kept which showed disappointing returns of about 70% for accommodation at the point of discharge. This rose to an average of 96.66% when prisoners, with the encouragement of HMPS, visited their local probation office on release and were issued with emergency accommodation.

94. As a result of not being categorised as a resettlement prison, the Board was concerned that prisoner resettlement fairs ceased to be held during the reporting period and that Job Centre Plus and the National Careers Service had a more limited presence in the prison. This was not helpful to those being released from the prison each month. Additionally those above retirement age had no support to deal with pension entitlements as this fell out of the scope of Job Centre Plus.

95. Owing to a lack of programme resources, as with the previous year, SOTP programmes were still only be offered to those prisoners who had six months of their sentence left to serve. There were only 18 prisoners currently on SOTP, however as at the end of April 2016, 104 prisoners had been assessed for Core SOTP and were ready and willing to engage. There were 25 prisoners who did not have enough time left on their sentences to complete an SOTP at Stafford.

96. In the last reporting period there were 50 prisoners in custody for an Indeterminate Sentence for Public Protection (IPP), 39 of whom were post tariff. The Board recognised that the Independent Parole Board decided their final release date but it was also aware that prisoners could not complete their sentence plans when appropriate SOTPs were not available or when prisoners were maintaining their innocence. The Board felt that this was a miscarriage of justice.

5.6 Safer Custody

Positives

97. It was the Board's belief that the prison was a safe prison during the reporting year. This opinion was confirmed by HMIP following their unannounced inspection in February 2016. The prison was awarded a Level 4 for Safety, the highest grading available.

98. The members of the Safer Custody team were to be commended for their commitment and work in keeping prisoners safe. Throughout the year, they monitored areas of risk and dealt swiftly with any potential issues identified.

99. Listeners who offered assistance, support and a listening ear played an important part in keeping men safe at the prison. Their numbers were well above the recommended 1:50, and at one time there were as many as 32. At the beginning of each monthly Safer Custody meeting, they reported on the hours they had worked the previous month and on any other non-confidential matters.

100. Safer Custody Newsletters were produced for staff. The December issue aimed to enhance their awareness of potential risks such as suicide and self-harm at that difficult time of the year for prisoners. A well-attended Safer Custody Awareness Day was held for prisoners, highlighting many areas where help was available to those in need.

101. Incidents of violence remained low throughout the year, and the number of adjudications dropped considerably. Although the Safer Custody Team monitored these incidents and endeavoured to analyse them, the low numbers did not allow many trends to be seen or conclusions to be drawn.

102. The Assessment Care in Custody and Teamwork (ACCT) documentation had mainly maintained last year's improvement. This was due to the systematic quality checking so that any shortcomings could be noted and dealt with. The Board's regular scrutiny of ACCT documents confirmed that the process was sound.

103. The Safer Custody Hotline was used throughout the year, mainly by anxious family members who had not heard from their prisoner relation for a few days. The prison then notified the prisoner and suggested that he contacted his family.

104. Incidents of food refusal, usually only short-lived, had increased. However, the prison was aware of this and monitored the situation.

105. Listeners and Insiders played an integral role within induction for all new prisoners. During the reporting year, a Listener and an Insider were employed within Reception to ensure that all new prisoners received support on arrival, and this support continued on the wing. As a consequence, the use of force was greatly reduced.

106. The prison offered a bespoke bereavement service to provide support and comfort. This service was funded by HMP Stafford.

Negatives

107. The Board remained disappointed that only a few of the Senior Management Team (SMT) attended the monthly meetings of this important area. At five of the monthly meetings, the Governor responsible for safer custody, who chaired every meeting, was the only member of the SMT present. The Board acknowledged however that there was no requirement for their attendance.

108. Prisoners who required counselling after bereavement had a wait of up to four months for their first appointment. The Board hoped this delay could be shortened in the coming year.

109. A number of prisoners were working as carers for older and needy inmates. They were only paid for 9 sessions (4.5 days), yet they considered themselves to be “on call” all the time to meet the needs of the prisoner they were supporting.

5.7 Segregation, Care & Separation, Close Supervision/Constant Watch)

Positives:

110. There were ten cells in the Segregation Unit, all of which were well maintained. During the reporting period 154 residents were held for periods ranging from 1 to 52 days. One resident was held for 52 days and a second for 47 days, for which external independent reviews were undertaken.

111. There were no dirty protests during the year.

112. The Board was of the opinion that this unit was well run with staff continuing to demonstrate skill and patience in their work with some challenging residents. The five officers detailed to these duties were trained and experienced, thus ensuring continuity of care and provision.

113. All paperwork such as daily logs, history sheets and ACCT documents were well recorded and available for monitoring purposes.

114. Review boards were professionally managed and Board members attended regularly, together with a member of the healthcare team.

115. The Board recognised the vulnerability of prisoners in the Segregation Unit. It was notified promptly of each new arrival. Prisoners were visited regularly and members spoke freely with them.

116. Showers, exercise and telephone calls were taken in the Segregation Unit and residents had daily access to a Governor, to healthcare and to chaplaincy.

117. Prisoners in Constant Supervision were exceptionally vulnerable due to their suicidal thoughts and self-harm behaviours. These prisoners were visited and their care/treatment monitored by Board members on a regular basis. However, there was less use of the new cells in Constant Supervision during the reporting period than in 2014 - 2015.

118. The Board monitored random adjudications throughout the year. These were held in the Segregation Unit and the Board had no concerns in respect of the procedures. Adjudications were reviewed at senior level and any available trends noted. An independent judge visited the Segregation Unit every three weeks and Board members had the opportunity to monitor those hearings.

119. Despite comments in the HMIP report, the Board was unable to evidence any unfair treatment of BME prisoners in Segregation or anywhere else in the prison.

120. Data on the ethnicity of prisoners held in the Segregation Unit only began to be collected in the second half of the reporting period. Over the six months the ethnic breakdown was as follows:

White -	38
Asian -	8
Black -	3
Mixed -	2

121. During the reporting period the prison did not use special cellular accommodation. The Governor did not support or approve the use of this type of cell.

5.8 Residential Services (Includes Food, Catering, Kitchens)

Positive

122. The wings were clean, tidy and well maintained.
123. The notice boards on all wings were informative and consistent.
124. Prisoner help desks were set up and were a source of useful information and guidance for prisoners. The Board hoped to see this initiative extend across all wings.
125. As a useful supplement to the library service, reading rooms were established on some wings where prisoners could find quiet reading space together with a supply of books to borrow.
126. Towards the end of the reporting period, new flat screen TVs arrived in the prison and were fitted in cells, if prisoners wished to rent them.
127. Whilst Personal Officers were no longer in place, there was plenty of evidence of nurturing relationships between prisoners and staff.
128. There was a big push via the Senior Management Team (SMT) for decency through the staff use of prisoner first names or titles; there was some evidence of improvement in this area.
129. Free-flow throughout some areas of the prison meant that prisoners were given responsibility for getting themselves from point A to B. The presence of additional open gates supported the positive nature of free-flow.
130. The number of unemployed was negligible. Cleaners, and those prisoners excused from work, were the only men present on the wings during the day.
131. Prisoners had a number of opportunities to undertake roles in the prison including carers, Listeners, Insiders, Shannon Trust mentors, Veterans in Custody volunteers, education mentors, reception orderlies, Prisoner Council representatives, health champions, equality representatives, disability orderlies and workshop supervisors. Not all these peer support roles were paid.
132. The cost per day for meals and snacks was £2.01 per prisoner. Despite this challenge, the Catering team provided good quality food to all prisoners daily.
133. The kitchen had received a 5 star award for food hygiene from the local council and the report was made available to the Board.

134. Monthly meetings were held by the Catering team with prisoner representatives from each of the wings. Comments from prisoners regarding the food were generally positive and complimentary. Suggestions from prisoners were always welcomed by the Catering team.

135. The work of the prison kitchen had been ably managed by the Catering team under the leadership of the newly appointed Catering Manager.

136. Nourishing meals were presented well and were adequate in portion size, evidenced by a lack of complaints.

137. Separators were used on the wing serveries to keep foods separated based on religious grounds.

138. Special festivals and celebrations were catered for and were a very positive aspect of the life of the prisoners.

139. The Board observed prisoners being required to return to cells without doors being locked, demonstrating a level of trust by the prison.

Negative:

140. The Board remained concerned by the use of the IEP system in the prison. At the end of the reporting period 4 prisoners were on Basic, 410 prisoners were on Standard and 331 were on Enhanced. These statistics remained fairly consistent throughout the period and it was therefore questionable as to how rigorously conduct and performance was being managed through the IEP system.

141. As an old prison with an ageing population there was insufficient provision for “locate flat” accommodation for those who found the many staircases physically challenging.

142. Prisoner property was still regularly lost at the time of transfer between prisons. Applications to the IMB from prisoners often remained unresolved and therefore the only option was to refer matters to the prison or Ombudsman for a compensation claim to be made. This matter continued to cause frustration to the Board and prisoners alike.

143. An area of concern highlighted in the report of 2014 - 2015 was the high level of inoperative equipment in the kitchen and the time taken to rectify this situation. However, all of the long standing issues were addressed. There was still concern at the time taken to repair equipment within the kitchen and the impact this had on the preparation of the meals.

SECTION 6

Wing Issues

144. Please refer to Residential Services on pages 26 & 27 of this Annual Report

SECTION 7

THE WORK OF THE IMB AT HMP STAFFORD

145. The Board appreciated the cooperation freely given by management and staff during the course of its work. Each week Board members attended the prison to monitor Rule 45 reviews and to observe meetings. They responded to prisoner applications on a weekly basis; adjudications were monitored and rota visits, which included ACCT monitoring, were undertaken fortnightly.

146. The new duty to monitor ACCTS in a more formal way finished at the end of the reporting period but continued as part of rota through ACCT folder scrutiny. The use of ACCTs and the completion of the associated documentation was of a good standard in the prison.

147. The Board regularly attended induction for new prisoners and explained the role of the IMB. The opportunities that prisoners had to engage with the Board were outlined and sometimes members were able to make themselves available for questions at the end of the presentation.

148. The Board held a monthly meeting, which the Governing Governor or Deputy Governor attended, in order to brief members on prison matters and to discuss issues arising from monitoring.

149. The IMB Clerk was always present at Board meetings and was very efficient. Her support was much appreciated.

150. Two Board members attended the IMB Annual Conference in London during March 2016.

151. The Chair attended the quarterly Area IMB meetings. Both Chair and Vice-Chairs also attended Senior Management Team meetings, as did other interested Board members.

152. HMP Stafford was represented on the Sex Offender Working Group. It gave the Board a chance to understand the national picture for sex offenders and to pool knowledge.

153. All members took part in a programme of training provided by visitors who attended the Board Meetings. This was extended when the Board voted to dedicate part of the morning before the formal meeting for more training. Over the reporting period the two BDOs retired and the position was filled by one member.

154. The prison offered the Board places on relevant internal training courses though staff places were always prioritised. The Board welcomed these opportunities.

155. To extend knowledge the Board visited HMP Oakwood, the local resettlement prison.

156. At the end of the reporting period an Action Plan inspired by the New Monitoring Framework was devised by the whole Board. It reduced the width but increased the depth of focus on 5 major issues, namely:

- Safety of Prisoners
- Resettlement
- Physical Wellbeing of Prisoners
- Mental Wellbeing of Prisoners
- Prisoners' Personal Development

STATISTICS

Board 2015/16	
Recommended complement of Board members	16
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	12
Number of new members joining within the reporting period	2
Number of members leaving within reporting period	1
Number of Board meetings during reporting period	12
Average number of attendances at Board meetings during reporting period	9
Total number of visits to the establishment	542
Number of applications dealt with	200
Number of confidential requests/complaints processed	31
Number of segregation reviews held	108
Number of segregation reviews attended	81

Applications								
Subject		2009/ 2010	2010/ 2011	2011/ 2012	2012/ 2013	2013/ 2014	2014/ 2015	2015/ 2016
A	Accommodation	0	5	4	0	5	5	13
B	Adjudications	1	0	5	1	3	7	4
C	Diversity related	1	0	3	0	1	5	10
D	Education/employment/training	5	7	11	9	9	29	12
E	Family/visits	5	3	19	3	16	19	5
F	Food/kitchen related	2	1	1	1	4	8	2
G	Health related	1	6	22	17	22	22	27
H	Property	3	10	18	15	32	51	36
I	Sentence related	4	20	29	9	23	19	21
J	Staff/prisoner related	4	1	19	17	3	11	14
K	Transfers	8	9	13	22	30	38	24
L*	Miscellaneous	9	26	27	24	3	41	32
	Compliments	-	-	-	-	-	1	1
	Total number of applications	43	88	171	107	151	256	**201

157. * Covers subjects such as risk assessments, lock up, regime, MDT, cell searches, security record, information requests, canteen/catalogue shopping, facilities and behaviour warnings.

158. ** Reduction in applications between 2014/2015 and 2015/2016 appeared to be partly due to Prisoner Help Desks being developed on residential wings, regular Prisoner Council meetings and peer support from Listeners, Equality Representatives etc.

SECTION 8

GLOSSARY OF ESTABLISHMENT RELATED TERMS AND ABBREVIATIONS USED IN THIS ANNUAL REPORT

ACCT	Assessment Care in Custody and Teamwork
BDO	Board Development Officer
BME	Black and Minority Ethnic
CM	Custodial Manager
CRC	Community Rehabilitation Companies
DARS	Drug and Alcohol Recovery Service
DIRF	Discrimination Incident Reporting Form
DNA	Did Not Attend
EL&S	Education, Learning & Skills
ESOL	English as a Second Language
LGBT	Lesbian/Gay/Bisexual/Transgender
HMIP	Her Majesty's Inspectorate of Prisons
HMPS	Her Majesty's Prison Stafford
IEP	Incentives and Earned Privileges
IPP	Indeterminate Sentence for Public Protection
IRC	Immigration Removal Centre
MDT	Mandatory Drug Testing
NPS	National Probation Service
NPS	New Psychoactive Substances
NVQ	National Vocational Qualification
OFSTED	Office for Standards in Education
OCA	Observation, Classification and Allocation
OLASS	Offender Learning and Skills Service
OLIP	Offender Learning Improvement Programme
OMU	Offender Management Unit
PCT	Primary Care Trust
QIG	Quality Improvement Group
SMT	Senior Management Team
SO	Senior/Supervising Officer
SOT	Sex Offender Treatment
SOTP	Sex Offender Treatment Programme
SSG	Senior Support Group
TB	Tuberculosis
TSP	Thinking Skills Programme
TTG	Through the Gate
VTC	Vocational Training Centre