



Annual Report
of the
Independent Monitoring Board
at
HMP Wayland

**for reporting year
June 2016 to May 2017**

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Monitoring fairness and respect for people in custody

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1. Statutory Role

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and Immigration Removal Centre to be monitored by an independent board appointed by the Home Secretary from members of the community in which the prison or centre stands.

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 concerns it has.**
- (3) To 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 prisoners records with the exception of medical.

2. Executive Summary

- **Staffing Levels** have caused the board concern over the past year.

At the beginning of the year there were only 139 in place. The required target is 187 in order to deliver the new Officer Management Model and a proactive recruitment drive has taken place. However, the prison is losing on average 4 Officers a month. It has also been difficult to recruit and maintain staff in Healthcare p.8 (6 ii.), Education p.10 (7, ii.) and Workshops p.10 (7, i, ii).

Planned lock downs (red regime) due to lack of staff mean that on average every offender is locked up 7/8 days a month. This, combined with sickness, holidays and incidents mean that the Officers have had little quality time to interact with offenders during this year or to fulfil their roles as Offender Supervisors.

- **OASys (Offender Assessment System – risk and needs assessment for sentence management)**

The situation has not improved since reporting this in the last 2 annual reports. The changes made to reviews has not reduced the numbers of those offenders transferred without an OASys. The monthly average to be completed by the prison this year is 150. p.12 (9)

- **Violence:**

The number of serious incidents both prisoner on prisoner and prisoner on staff remains higher than we would like to see. P.12(9, v. vii, viii)

In the experience of the members of the board, the negotiators and the C&R (Control and Restraint) team work in a very professional manner in resolving the incidents witnessed, resulting in fewer calls to the national team.

- **Applications to the board**

The largest category of applications to the IMB is concerning property, particularly concerning property which does not arrive at HMP Wayland when an offender is transferred from another prison. Complaints sent to other prisons about this rarely resolve the issues which then go to the Ombudsman. This is neither just nor humane treatment and causes unrest by the offenders who are deprived of their possessions. (Appendix A)

Of the complaints through the prison system regarding property, approximately half relate to loss of property at other establishments.

- **Illicit drugs, alcohol and mobile phones**

Good work takes place to stop these items coming into the prison and to detect them once inside. The illicit use of these and the resulting problems influence the increase in violence and self-harm. p.12 (9)

- **Indeterminate sentence for Public Protection (IPP)**

9% of the offenders are serving IPP sentences and all are over tariff. P.12 (9)

- **Resettlement**

The Board has had great concerns throughout the year about the services provided for resettlement for offenders nearing the end of their sentence. If not improved, it has great implications for re-offending. P.11(8)

- **Developments**

Digitalisation

HMP Wayland has become a digital prison, providing a telephone and individual laptop in each cell. This has been welcomed by the whole prison population. It improves the ability for offenders to communicate with their families. It will be interesting to see if there is a drop in the number of IMB applications once offenders can make prison applications, appointments etc. digitally.

Offender Management Surgeries

The offender management unit (OMU) now holds surgeries for offenders to discuss any issues around sentence planning and progression.

Future

Promises have been made to recruit a large number of prison staff, increasing the number to 187, hopefully enabling a new offender management scheme. A new segregation unit is scheduled to be built, and improvements to the at present unused segregation unit to be used as an induction wing. These should make an immense difference to the just treatment of the offenders at HMP Wayland.

Questions to Minister

- 1) IPP (Imprisonment for Public Protection) still creates problems recognised by both prison management and the board. Is the Minister aware of the issues, such as offenders being held long beyond their tariff date, and can he advise a pathway and time scale for considering and resolving these concerns?
- 2) The latest initiative for prison and probation resettlement services is failing to provide the required support to prisoners being released (8). What is your response to this?

Questions to the prison service/Governor

- 1) With the promised future plans outlined above, how is the prison service going to ensure that they take place without delays which will be of detriment to the offenders and staff?
- 2) The Board has identified unacceptable numbers of non-attenders at healthcare, and training facilities. The Board attributes some of this to the regime. Can the Governor indicate when this problem can be eradicated or at least significantly improved?

3. Description of Establishment

HMP Wayland is a Category C adult male offender training prison

Operational capacity **1017**

The main building of 8 wings was built 32 years ago, with a further 6 wings, a segregation unit and kitchen added 9 years ago. The new buildings have had numerous ongoing problems with the fabric and construction. The kitchen floor has eventually been repaired, but there have been problems with the wing showers and the segregation unit has been closed for the past 3years. P.6 (4) The original wings have double and single cells with integral toilet and shower blocks on the spurs. The newer wings have 150 double cells with integral toilet and shower.

146 offenders still share cells for single occupancy.

50 cells out of action at the time of the report due to showers/floors needing repair, resulting in loss of 86 bed spaces.

In mid-2014 a PIPE (Psychologically Informed Planned Environment) unit was established for offenders (residents) who have completed medium or high intensity offending behaviour programmes with the aim of preparing them for release or moving to an open prison. It is staffed by specifically trained uniformed prison staff and NHS clinical staff which gives them sufficient time to interact with the offenders, unlike the rest of the prison.

There is also a medium secure service for offenders with personality disorders who may have been held in secure hospitals or special prison units. The board is not aware of any impact on reoffending rates.

Other organisations which deliver services: Virgin Health Care, People Plus (Education), St Giles Trust, Carillion(Works), NACRO (National Association for Care and Resettlement of Offenders), Samaritans, Chaplaincy, Ormiston Families, RAPt (Rehabilitation for Addicted Prisoners Trust)

- The site is 13.2 miles from the nearest train station at Thetford and 3 miles from the nearest bus stop at Watton which has an impact for visits and offenders on ROTL (Release on Temporary Licence) p.7 (5, iii.)
- Only 15% of offenders are from Norfolk and Suffolk, which has an impact on visits and resettlement. P.7(5 iii., & 7,ii)

4. Segregation/ Care and Separation Unit

In our last report we raised the problem of the existing segregation unit which we considered not 'fit for purpose'. It was pleasing to hear that a new unit is to be built with work scheduled to commence in September 2017.

One of the problems in the current unit were highlighted during the year when two prisoners with mental health problems had to be placed in the unit as nowhere else suitable could be found. One remained there for 82 days and the other 55 days. This does not comply with the Department of Health guidelines of 14 days between the referral and transfer.

The staff should be praised for the way they work in the unit which is always busy, frequently difficult and in an unsuitable environment.

5. Visits

- i. The general hygiene and cleanliness of visitors hall has been kept to a good standard although the visitors centre is in need of new lockers and some refreshments.
- ii. The vending machines from the visitor's hall have been withdrawn and Cafe Britannia, an initiative from HMP Norwich is providing an excellent service with a selection of hot and cold snacks, sandwiches and cakes, hot and cold drinks and halal food. This is much appreciated by visitors and staff. Offenders from HMP Wayland prepare and serve the food under supervision. The decor is colourful and there is new furniture. A corner has been set up for fathers to help with children's homework.
- iii. The problem for visitors is the inaccessibility of HMP Wayland by public transport. There is a flexibus service 2 days a week from Thetford and an infrequent private bus from pick up points in London. Being located in a rural area, and with 85% of offenders coming from counties other than Norfolk and Suffolk, makes visiting difficult and expensive, particularly with children.
- iv. Accumulated visits rarely/never occur, due to limitations on transport and cell availability, which for elderly or incapacitated next of kin is an inhumane situation.

6. Healthcare, Mental Health and Social Care

- i.** As stated in last year's report, Virgin Care provide equivalent service to those provided in the community. In some instances it is better, in that there are shorter waiting times for both urgent and non-urgent appointments, namely 1 day and 4 days.
- ii.** There is still a continuing problem with appointing staff, and there has not been a full complement of staff in post during the year.
- iii.** DNAs (Do Not Attends) remain a problem, averaging 18% for dentistry, 23% for the GP, 32% for the nurse practitioner and 50% for physiotherapy. This has been investigated and various reasons found from patient choice, not getting appointment slips and regime lock downs.
- iv.** Some of the problems with dispensing have been resolved since the last report.
- v.** As an IMB we get few applications about healthcare which are dealt with by PALS (Patient Advisory Liaison Service). There is a PALS clinic once a week to deal with complaints, but we are concerned that the person appointed is employed by Virgin Care.
- vi.** There have been a number of Serious Incidents this reporting year, which have highlighted the problem of not having medically trained staff available out of hours, necessitating calling an ambulance or on one instance, the cluster manager attending.
- vii.** When offenders are segregated on the wing, the doctors have had to alter their working day to see them, adding to their working hours.
- viii.** Healthcare still report concerns for their safety with no prison staff allocated. There has been one incident.
- ix.** At any time there are about 320 offenders between 40 -75 years, but no dedicated Long Term Conditions Nurse. One inquest highlighted this.

Mental Health

- x.** This area of Healthcare is working to full capacity having recruited new staff.
- xi.** A concern for the IMB is that the NHS guidelines for transferring an offender requiring secure accommodation is not always met. This reporting year there have been 2 offenders with severe mental health problems needing transfer. The IMB referred to the Minister about on offender for whom it took 55 days. These offenders spend their time waiting in the segregation unit, although this is not deemed appropriate by mental health, as they cannot be kept safe anywhere else. This is a great additional pressure for the prison officers and inhumane for the vulnerable offenders.

Social Care

- xii.** All offenders who require a social care assessment receive this and any equipment required arrives at the prison. However Carillion takes an unreasonable length of time to put them in place.
- xiii.** These patients would benefit from the attention of a long term conditions nurse.

7. Education and workshops

- i.** The restricted regime due to staff shortages means that every wing is in lockdown approximately 7/8 days per month, considerably reducing the opportunity to attend education or work.
- ii.** Also due to staff shortages, the library has been closed in the evening and at weekends since November 2016. It has recently started opening on Saturday mornings only.
- iii.** The art department had great success in last year's Koestler awards with one offender receiving gold, one bronze, 3 highly commended and 3 commended. 33 entries have been submitted for the 2017 awards.

8. Re-Offending and resettlement

i. Re-Offending

It is accepted that the Prison Service needs to reduce re-offending rates. At HMP Wayland apart from the prison itself there are three agencies- National Probation Service, St. Giles Trust, and, Norfolk and Suffolk Community Company who prepare offenders for release.

ii. Resettlement

The aforementioned three agencies deal with accommodation, bank accounts employment, training and education for offenders released to the local catchment area (Norfolk and Suffolk) which totals only 15% of the prison population. The remaining 85% can go anywhere but principally Essex and London. The theory is that offenders should be transferred to resettlement prisons, in their area, prior to release. In practise this does not always happen.

iii. Accommodation

Targets for providing accommodation are not officially set but a figure of 90% is accepted as the normal level. Norfolk and Suffolk Community Company achieved 47%, Essex 68%, and London does not release figures. It is therefore impossible for HMP Wayland to provide any meaningful numbers

iv. On Release

Without suitable accommodation it will be extremely difficult for offenders to progress on release. It will hinder their ability to open a bank account, acquire employment, or go into education.

Everybody wants to see Re-offending rates reduce, but it will need a radical change of approach for this to happen.

9. Safeguarding Adults and Safer Prisons

- i. The primary role of the safer custody team at HMP Wayland is to address suicide, self-harm and bullying issues among the prison population.
- ii. Each month the safer custody team meet with a mix of uniformed staff, Samaritans, healthcare, psychology, Rapt, Chaplaincy and IMB members with a deputy governor, with some offenders attending part of the meeting.
- iii. The safer custody team have ownership of Assessment Care in Custody Teamwork (ACCT) plans and the numbers remain similar to last year. A number of offenders have an ACCT opened and closed on more than one occasion which influences these figures.
- iv. There is a new Deliberate Self Harm Diagnostic Tool being used, but at present there is little information on any impact it may have.
- v. With 85% of offenders not from Norfolk or Suffolk, some offenders use incidents to try to persuade the prison to return them nearer to their home to facilitate easier visits.
- vi. Although only 9% of the prison population are IPP offenders, they contribute to a disproportionate level of violent incidents, due to frustration.
- vii. The lack of prison staff causing regular lockdowns (red regime), incomplete or no OASys, turf wars between rival gangs from London prisons, combined with the availability of NPS (New Psychoactive substances) and other drugs, all contribute to unrest within the offender population, many of whom have complex needs.
- viii. Four Violence Reduction Officers have been appointed towards the end of the reporting year, but it is too early to gauge what effect they will have.
- ix. There were two deaths in custody during the last reporting year.

Appendix A

Applications to the IMB

Code	Subject	Current reporting year	Previous reporting year
A	Accommodation Including laundry, clothing, ablutions	10	
B	Discipline including adjudications, IEP, sanctions	24	
C	Equality	9	
D	Purposeful activity including education, work, training, library, regime, time out of cell	11	
E1	Letters, visits, phones, public protection restrictions	24	
E2	Finance including pay, private monies, spends	17	
F	Food and kitchens	8	
G	Health including physical, mental and social care	33	
H1	Property within this establishment	51	
H2	Property during transfer or in another establishment or location	81	
H3	Canteen, facility list, catalogue(s)	13	
I	Sentence management, including home detention curfew, release on temporary licence, parole, release dates, re-categorisation	64	
J	Staff/prisoner concerns including bullying	30	
K	Transfers	23	
	Total number of IMB applications	398	521

Appendix B _____

BOARD STATISTICS	
Recommended complement of Board Members	20
Number of Board Members at the start of the reporting period	15
Number of Board Members at the end of reporting year	10
Total number of visits to the Establishment	543
Total number of segregation reviews attended	154