



Annual Report
of the
Independent Monitoring Board
at

HMP Exeter

for reporting Year
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Monitoring fairness and respect for people in custody

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1 STATUTORY ROLE OF THE IMB

The Prison Act 1952 requires every prison 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 to the prison's records.

Abbreviations used

ACCT	Assessment, Care in Custody and Teamwork
BWC	Body worn camera
CRC	Community Rehabilitation Company
IPP	Imprisonment for Public Protection
MAPPA	Multi Agency Public Protection Arrangements
MPQL	Measuring Quality of Prison Life
OMIC	Offender Management in Custody
OSAG	Operational and Systems Assurance Group
SASH	Suicide and Self Harm
SCU	Segregation/Care and Separation Unit
UOF	Use of Force
VP	Vulnerable Prisoner
VR	Violence Reduction
YP	Young Person
ZT	Zero Tolerance (to violence)

2 EXECUTIVE SUMMARY

This report presents the findings of the Independent Monitoring Board at HMP Exeter for the year 2017. The Board's findings are based on observation, scrutiny of records and data, external surveys and audits, attendance at some prison meetings, formal and informal meetings with prisoners, staff and other agencies, and prisoners' applications.

Main judgements

Are prisoners treated fairly?

Based on observations of staff interaction with prisoners, occasional attendance at adjudications and GOOD reviews and discussion with staff and prisoners, the Board is of the opinion that prisoners are generally treated fairly. The Board does note however that the MQPL survey [para 4.18] undertaken in May indicates a different perception on the part of prisoners at that time although the Board has noted many improvements since. However, the Board has expressed concern that prisoners accommodated on C1 (who for a variety of reasons are difficult to accommodate on main wings) and in SCU [para 6.3] receive a limited regime although the year has seen some improvement (e.g. library access).

Are prisoners treated humanely?

Frequent discussions with staff at all levels together with observation indicates good staff attitudes and attempts to deal humanely with prisoners, however troublesome. IMB members have on several occasions observed the use of control and restraint techniques and these have not raised concerns.

However, the Board continues to be concerned at the delays experienced in transferring seriously mentally ill prisoners to more suitable accommodation [para 8.10] and the continuing unsuitable placement at HMP Exeter of prisoners subject to IPP and foreign national prisoners held beyond end of sentence under immigration detention powers. The Board is also very concerned that on occasions, the 'safe cell' in SCU has had to be used for prisoners on constant watch [para 6.6].

Are prisoners prepared well for their release?

This is an area of concern for the Board and one that will be looked at in more depth in 2018. The Board is concerned that the division of responsibility between Probation and the CRC results in confusion for prisoners [section 11]. Moreover, a local prison is not resourced to provide programmes appropriate for those nearing the end of long sentences.

A large part of the problem, however, is the lack of resources in the community to which prisoners can be referred, especially accommodation. This is an issue very often raised with Board members by prisoners.

Main Areas for Development

TO THE MINISTER

1) Staffing

This was raised last year and continues to be a concern although there have been significant improvements.

As a Pathfinder prison HMP Exeter has been able to recruit 73 new officers which has gradually but significantly improved the capacity to provide a full and purposeful regime. However, retaining officers in the context of the local employment market can be a problem;

there has also been a loss of more experienced staff and a number of officers on long term sick leave.

Will the Secretary of State commit to a review of pay and conditions for prison officers and other staff, having regard to the responsibility placed on them by the public and the challenging conditions they often face and ensuring that terms of appointment adequately reflect this?

2) Mentally ill prisoners

This was raised last year but continues to be a concern.

Yet again 2017 has seen the placement at HMP Exeter of a number of prisoners with very serious mental health problems. Several have waited far longer than the target two weeks for a secure mental health placement although data for the second half of the year shows improvement [para 8.10]. The Board is satisfied that the prison (especially staff in SCU and healthcare) does its best to treat them appropriately and humanely *but* prison staff are neither trained nor equipped to deal with serious mental health problems, nor are facilities adequate. For example, F Wing (health and social care) has one constant watch cell. If, as has happened several times this year, there have been two prisoners requiring constant watch for their own protection, the only option is to use the 'safe cell' in SCU which all acknowledge to be wholly unsuitable [para 6.6].

Will the Secretary of State urge his colleague the Secretary of State for Health and Social Care to increase the national provision of secure psychiatric beds so that no prisoner waits an unacceptably long time for a suitable placement to meet their mental health needs?

3) IPP Prisoners

*This was raised last year but continues to be a **major** concern.*

The Board has continued to note the presence at HMP Exeter of prisoners subject to an IPP and has been appalled by the length of time that these prisoners have been incarcerated beyond their original tariff. It is not possible to give numbers as statistics are not routinely collected and the Board comes across these prisoners by chance, often in SCU. To repeat last year's comment: the uncertain position of these prisoners inevitably results in deteriorating mental health and behaviour which in turn reduces the chance of parole. The downward spiral is obvious. It is accepted that reform needs primary legislation, owing to the failure to provide transitional provisions when the IPP sentence was abolished.

Will the Secretary of State commit to the placement before the next Parliament of a Bill addressing this problem and providing for the immediate release of IPP prisoners 'over tariff' unless application is made by HMPPS to delay release on grounds of public safety?

4) Digitalisation project

At the end of the year the prison was wired-up in readiness for the introduction of a digitalised communication system, to have in-cell phones and tablets for prisoners, and ATM-like hubs installed on each landing. This system was intended to eliminate the need for paper processes such as complaints, applications, canteen orders, medical appointments and visits, by allowing prisoners to complete these online. As well as speeding up such processes, it would reduce staff time chasing paper trails and give prisoners responsibility for aspects of their lives over which they currently have little control. The Board is dismayed that, despite the costly preparation work already undertaken, the digitalisation project, apart from in-cell phones which are to go ahead, has been suspended.

Will the Secretary of State commit to re-starting the digitalisation project at Exeter, possibly on a trial basis, to see if it will be practicable in a local prison?

5) Resettlement

The Board has noted several examples of uncoordinated service between OMU (within the prison) and Probation and CRC services (for post-release support). As Exeter serves as a resettlement prison for a large geographical area the problem is compounded by the geographical division of CRC responsibility. Moreover, as a local prison, education and training provision at HMP Exeter mainly meets the needs of shorter term prisoners and is not always suitable for those nearing the end of much longer sentences. [section 11].

Will the Secretary of State review the designation 'resettlement prison' and acknowledge that all prisons fulfil this function and resource them appropriately?

TO HMPPS

1) Condition of SCU

This was raised last year but the situation has not improved

SCU is dark, dingy and plagued with problems especially relating to plumbing. Painting of the communal area has made it slightly brighter but the fundamental problems persist. For most of 2017 between 4 and 6 of the 8 cells were out of use [para 6.2]. This is making it very difficult to maintain control in the prison. HMIP, in their 2016 inspection recommended 'complete refurbishment' and this was to take place, finally, at the end of 2017 but was delayed. The collapse of Carillion early in 2018 has led to a further delay; the Board hopes that the work will be expedited as quickly as possible.

Will the Prison Service commit to undertaking this essential work as a matter of urgency and advise the Board of the projected date?

Will the Prison Service as a matter of urgency fund the construction of a second constant watch cell either on F Wing or elsewhere but away from the unsuitable environment of SCU? [para 6.6].

2) Accommodation for vulnerable prisoners

This issue was raised last year but continues to be a significant concern.

The Board is concerned that B Wing does not provide sufficient accommodation for all those assessed as vulnerable, leading to the unsatisfactory measure of housing them on C Wing (C2) among main location prisoners. In response to a PPO recommendation following a death in custody, prison management made a policy decision not to put newly received R45 prisoners who are on an ACCT on C2 on their first night in custody to ensure their safety. This is welcomed but the location of R45 prisoners on this wing after their first night in custody continues to be a concern owing to the risk of abuse. It also hinders the ability of the IMB to engage with R45 prisoners. It is to be hoped that additional capacity in The Verne, once it is re-opened, will alleviate this problem.

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, elsewhere in the Devon cluster or nearby?

TO THE GOVERNOR

Improvements

1. **Staffing** was a serious concern last year. As noted above, the 'Pathfinder' status has considerably improved matters.
2. Last year the Board raised concerns about **health care provision**. In March 2017 Care UK took over provision and the Board has noted many improvements, including many fewer missed appointments and improved response to complaints. Despite some improvement the Board remains concerned about delays in transferring seriously mentally ill prisoners to specialist provision. *[para 8.10]*

3 DESCRIPTION OF THE ESTABLISHMENT

HMP Exeter is a traditional Victorian inner-city establishment (built in the 1850s) which is under constant strain due to limited capacity for expansion. Its operational capacity is 561 though numbers are usually around 500.

As a local prison Exeter fulfils many functions, not all of which are compatible. It receives both remand and sentenced prisoners (adults and young offenders) primarily from courts within the South West of England. However, although the regime and facilities offered are best suited to those on shorter sentences, the Board has noted an increasing number of prisoners transferred from elsewhere who may be serving much longer sentences, including life sentences, and for whom the regime offered at Exeter is not suitable.

The IMB is particularly concerned about prisoners subject to the IPP. Furthermore, Exeter serves as a resettlement prison for Devon, Cornwall, Dorset and part of Somerset. Prisoners in this category again have very different needs from the other groups. These issues are raised in questions to the Minister above.

As noted in earlier reports, additional pressure continues to be felt owing to reduced availability of remand placements within the region. Remand prisoners place a particular strain on the prison: many need additional support on arrival, whether because it is their first experience of custody, they are in need of detox, their legal position and future are uncertain or they have worries about family or friends in the community.

Healthcare is provided by CareUK, the CRC is Working Links (operating through Catch 22 within the prison), education is provided by Weston College and throughout 2017 building and maintenance work were contracted to Carillion. In addition, several voluntary organisations provide a range of smaller services.

HMP Exeter is part of the Devon cluster (which also includes Channings Wood and Dartmoor) and many services and resources are shared.

B Evidence sections 4 – 11

4. SAFETY

First night and Induction

- 4.1 The high turnover of prisoners through Exeter requires considerable resource in the reception centre. A new system for handling first nighters was introduced during the year. Instead of accommodating them to C wing (C1), where there was insufficient capacity, some cells on A4 were allocated to first nighters, other than Vulnerable Prisoners.
- 4.2 The new arrangement took some time to settle down, with initial problems about the poor state of cells, availability of furniture and bedding and unfamiliarity of staff (some of them also newcomers) with the changes. These problems seem to have been largely resolved by the end of the year, although Board members have been told that there are no additional staff on A Wing to reflect the presence of first nighters. Conversations with prisoners indicate that new arrivals are usually seen by healthcare, education and other services within their first 24 hours.
- 4.3 The Board noted on one visit that ACCTs had been opened on two of the prisoners who had arrived the previous day and that they had been put in cells with more experienced prisoners. The 'Risks and Triggers' form, routinely completed in Reception is commended as good practice in identifying new arrivals at risk of suicide or self harm.

Listeners, Wing Representatives and Buddies

- 4.4 The Board commends the continuing effective arrangements for training suitable prisoners as Listeners. Wing representatives also offer support, including with practical matters such as helping a prisoner with poor literacy to complete a form, and Buddies support prisoners assessed as having daily living needs. There has sometimes been a shortage of Listeners due to the high turnover of the prison population, although this is being addressed by a placing a hold on transfers of individuals who are trained Listeners. This can be removed if the prisoner so requests.
- 4.5 The Board has attended several Safer Custody and Violence Reduction meetings over the year and is satisfied that the prison has good arrangements in place to make the prison as safe as possible. It commends the practice of inviting prisoner representatives to Safer Custody meetings.

Deaths in Custody

- 4.6 The Board notes with concern the five self-inflicted deaths in the prison in 2017. On each occasion the Board has visited and discussed what happened with officers and staff. PPO reports received in 2017 have made only minor criticisms of procedures within the prison. The prison has developed action plans to deal with the PPO's recommendations and closely monitors progress. The high number of deaths certainly reflects the volatile and vulnerable nature of the population of a local prison. It also reflects that the south-west generally has the highest suicide rate in the country.
- 4.7 The Board notes with approval that towards the end of 2017 the prison started rolling out '5 minute intervention training' and SASH (Suicide and Self Harm) training for all staff that deal directly with prisoners and also commenced the training of officers to undertake the role of Keyworker. These initiatives should all contribute to ensuring that any prisoner in difficulty is identified and supported appropriately. The Board commends the chaplaincy and other prison staff for their support of prisoners who display distress and of families of prisoners who sadly die in custody.

ACCTs

- 4.8 The Board notes the large number of ACCTs open at any one time, with an average of 71 ACCTs open in any given month and remains concerned about the capacity of staff to manage such a large number, and the demands this places on them. Random samples of open ACCTs taken throughout the year have generally found them to be of good quality. However some forms contained extremely brief comments which were lacking in detail and observations, whilst frequent, seemed to have been conducted at predictable intervals (strictly on the hour or half hour), which is not best practice. The SASH training is reinforcing the need for meaningful interaction with prisoners and thorough recording thereof, which picks up on concerns previously identified by HMIP. Board members have attended Initial Assessments of individuals on ACCTs and found these to be conducted in a calm and empathetic manner. Monthly Safer Custody meetings (mentioned above) review ACCTs, and a daily Safer Custody Briefings cover all individuals on ACCTs and detail known risk factors and triggers in particular cases. The Board commends the prison for its management of prisoners placed on constant watch; there have been a number of vulnerable and distressed prisoners needing this level of supervision in 2017 and they have been cared for in a supportive and constructive manner and all have eventually transitioned back to the wings.
- 4.9 Whilst the Board greatly welcomes the increase in staffing and has noticed a perceptible improvement in staff morale, it is of potential concern that 53% of Band 3 prison officers have less than two years experience. We commend the approach of the SMT in being visible on the landings which sets a good example to staff and reassures prisoners.

Violence Reduction

- 4.10 Rates of violence have increased significantly across the national prison estate and this is also reflected at HMP Exeter. The analysis of reported incident data broadly identifies a gradual monthly increase, culminating in a significant rise in incidents towards the end of the year. In December 2017 there was an increase of 15 reported incidents compared to the previous month. This also represented an increase of 23 incidents compared to the same point in 2016. The Measuring the Quality of Prison Life (MQPL) survey, which reported in May 2017, also reflected that prisoners' perceptions of safety at Exeter are generally low. 45.5% felt that the prison was not good at delivering personal safety and 43.1% did not feel safe from injury, bullying or threats by other prisoners. 56.4% felt that there is a lot of bullying and threats. However, and against this background, the OSAG Risk Management – Violence and Self-Harm Audit undertaken in September 2017 judged Exeter overall to be Amber/Green, which is commendable and reflects the progress made in this area during the reporting period.
- 4.10 Officers and prisoners have both commented to Board members on the positive impact of increased staffing, which has been crucial to some of the improvements observed in the latter half of the reporting period. The prison has been better able to implement its Violence Reduction (VR) strategies, challenge violent behaviour and re-establish behavioural boundaries and expectations because they have the resource to do so. Initiatives and strategies such as ZT Zero Tolerance (to violence), better use of the prison environment in relation to particular populations (such as the A4 first night landing and ACCT management on C2) signal a clear commitment to the management of violence and self-harm at Exeter.
- 4.11 A dedicated police presence at the prison also functions as a deterrent to the commission of violent offences and has resulted in 27 convictions for mostly violent offences committed within the prison during 2017. Outcomes of court sentences are communicated to all prisoners.
- 4.12 Monthly VR meetings analyse data to identify the drivers for violence and develop local policy and procedures and the Board has been aware of an increased presence and

visibility of staff at key risk areas and times, such as canteen, meal times and movements. The Board has been advised that staff are routinely reminded to activate their Body Worn Cameras (BWCs) when an alarm call goes out - apart from recording incidents for evidential purposes, these can have the effect of de-escalating incidents.

4.13 There are some early indications that vaping may be instrumental in reducing incidents and bullying in relation to nicotine patches. (It is notable that the smoking ban was identified as a significant factor in deterioration of the prisoner experience in the MPQL survey mentioned below). However, drugs, especially NPS (New Psychoactive Substances) remain a key driver for violent incidents. Although the prison is vigilant in both random and intelligence driven searching and finds of drugs and other contraband are regularly made, incidences of prisoners being found under the influence of drugs are frequent and have led to a number of emergency hospital admissions.

4.14 Overall, the Board feels that the establishment is attempting to support the reduction in violence and self-harm by providing an environment that is decent and secure. However, the Board is aware of situations which could constrain or undermine the effectiveness of some of these measures. For example:

- delays in repair to damaged cells impacts on the ability of the prison to create a safe environment in that some prisoners have to share a cell, who should not because of risk.
- the number of cells out of action in the Segregation Unit undermines the ability of the prison management to manage and deal robustly with violent behaviour.
- some inconsistency in the implementation of the ZT programme - for example, in some cases prisoners reduced to basic regime have not lost key privileges, such as access to TV, if their cell share is a Standard prisoner. This potentially undermines the impact and effectiveness of the strategy.

Use of Force by staff on prisoners, and Use of Force Recording.

4.15 The Board has been monitoring use of force recording, following up concerns raised by HMIP on their most recent visit to Exeter that use of force “was not properly recorded”. This has identified a number of issues with use of force reporting:

- *Concerns around under-reporting:* A large number of use of force cases have been entered on the electronic system but are still waiting for paperwork to be completed and filed. A visual check of the file indicates that, in some months, paperwork has not been filed in the vast majority of incidents. Staff told us that, out of 380 individual pieces of UOF paperwork for October, November and December 2017, there were currently 322 still outstanding, as of February 2018 (the SMT have been unable to confirm the exact number outstanding in February on checking this Report).
- *Quality of the documentation submitted:* Reviewing a random sample of seven forms filed reveals that the ‘Staff Statement’ was generally clearly and legibly filled out by all officers named as being involved in the incident and with sufficient detail. However:
 - In at least two cases, officer statements were not received from all officers involved in the incident;
 - In three cases, the use of force form which is meant to accompany the officer’s statements was missing. In four cases the corresponding prisoner injury form was not attached. Again, this is of concern in its own right but presumably also makes calculating the number of injuries arising from use

of force incidents more difficult. It also makes it more difficult to assess the impact of BWCs, and risks over-representing the number of incidents that have resulted in injury, if officers are failing to fill out the form when no such injury occurs.

- These omissions are of concern and also make analysis of frequency and severity of incidents more difficult.
- There was evidence of very similar language in the staff statements – e.g. ‘I have attended training which has raised my awareness of lawful use of force’—used in several accounts by officers, which may need further exploration.

4.16 The later months of the reporting period saw the highest number of reported use of force incidents. The number of incidents reported in December was the highest in the last six years. Quarterly Use of Force Reporting meetings are held, to which the IMB are invited and are occasionally able to attend, where such trends are discussed, monitored and actions raised. Trends around under-reporting (as above) are monitored and actioned and the reasons why force was used, the location of use of force incidents, the ethnicity and YP status of individuals on whom force is used are also discussed.

4.17 Over the course of the year, Board Members have had occasion to witness use of force incidents. These appear to have been proportionate and necessary under the circumstances, with no more force used than necessary. The use of hand-held video camera footage for pre-planned incidents has also been noted as a positive development. However, there appears to be room for more consistency around BWCs, as the PSI devolves policy to the Governor / Director, and no local policy was available at the time of writing.

MQPL Survey

4.18 This survey of prisoners’ perceptions of prison life was conducted in May 2017 before the extra resources under the Pathfinder programme came on stream but the Board notes with concern the deterioration in score from the survey two years earlier with prisoners reporting feeling less safe, more open to bullying and less well supported. However many of the underlying causes identified have been or are being addressed. In particular the greatly improved staffing position has changed the atmosphere in the prison; the establishment of first night/induction cells on A4 and developments in staff training detailed above [*paras 4.1 and 4.6/7 above*] have all contributed.

5. EQUALITY AND FAIRNESS

5.1 The Board is satisfied that the prison endeavours to treat prisoners fairly:

- The Board routinely monitors DIRFs and is satisfied with the standard of investigation of reported incidents.
- On occasions the Board has observed adjudications and GOOD reviews and noted that considerable effort is put into ensuring the prisoner understands the process, his rights and the consequences of decisions. However there is not always a representative from healthcare at GOOD reviews which gives rise to some concern. The Board has noted, where a health issue may be particularly relevant, the hearing will be delayed to secure attendance of a healthcare representative.

5.2 The Board has some concerns about the operation of the IEP system:

- Discussion with prisoners reveals that it is not always well understood. In particular they do not always understand the different processes of IEP and adjudication.
- Cell sharing may mean the system does not always operate fairly. For example if one prisoner is put on basic while the other is on standard, *either* the prisoner on basic will continue to enjoy the use of a TV *or* the other will lose it.
- The Board plans to monitor the operation of the IEP system in more detail in 2018.

6. SEGREGATION/CARE AND SEPARATION UNIT

- 6.1 Last year the Board noted with concern that the physical state of the Segregation Unit was lamentable. The Board recommended a full refurbishment of the unit and in principle this was accepted by HMPPS but so far nothing has happened and the situation has not improved.
- 6.2 The location is unpromising (A1, which is semi-basement so inevitably dark) but it is wholly unacceptable that for much of the year 4-6 (of 8) cells have not been in use owing to damage or other defects (usually plumbing) which Carillion were very slow to remedy. The heating was not working for several weeks in the autumn, resulting in an extremely uncomfortable, cold environment. Although extra blankets were issued to prisoners, this could not make up for the lack of heating given the coldness of the air. Prisoners report they have occasionally seen cockroaches, although this appears to be on an infrequent basis rather than a persistent problem. To address the shortage of cells, two cells on A2 have routinely been used as segregation cells but this is unsatisfactory as it is not possible to offer the same levels of care and supervision as on A1. Despite all these problems, the Board has observed the staff of the Unit making commendable efforts to care appropriately for the sometimes difficult and disturbed prisoners they hold. However, despite frequent requests throughout the year, the Board is not routinely notified of placements in SCU.

Regime and activities whilst in segregation:

- 6.3 Staff appear proactive in providing activities for prisoners on segregation. There is an exercise bike available for prisoners to use and handheld wind-up radios have recently been purchased, filling an important gap. Whilst prisoners are often able to go out for exercise, on some relatively isolated occasions this has not happened due to inclement weather, and logistical difficulties rescheduling exercise for a time in the day when the weather is better. The Board appreciate the difficulties bad weather can pose but reiterate the importance of prisoners being able to go outside for exercise, particularly when they are in segregation.

Length of stay:

- 6.4 During 2017, a number of prisoners stayed in the segregation unit longer than 15 days. Often these individuals had severe mental health problems, and often they refused to move back to the wings. The IMB saw no evidence to indicate prisoners were being kept in the segregation unit longer than necessary. There was some evidence of staff working with prisoners to encourage relocation, and the Board witnessed occasions where prisoners were quickly relocated away from SCU. Nevertheless lengthy stays in segregation, and in particular those over 15 days, continue to be of particular concern, not least under UN Norms and Standards, including the recent statements by the UN Special Rapporteur on Torture on this issue.

ACCT individuals:

- 6.5 In 2017, a number of individuals on an ACCT were placed in the SCU. Whilst the Board saw no evidence to indicate this was inappropriate under the circumstances, this remains of concern given the impact segregation can have on mental health and given the present state of the unit in particular.
- 6.6 Cell A5 is a safe cell, very occasionally used to contain an aggressive prisoner for a very short period (usually maximum half an hour). This is a totally bare room with a clear door and no bed, toilet or washbasin. However, on occasion it has had to be used to house a prisoner on constant watch (when the constant watch cell in F Wing was already occupied). On these occasions a mattress and bedding is provided and staff have worked hard to provide decent, humane care and to manage several extremely complex constant

watch cases appropriately and successfully. The prison fully accepts that this is an unsuitable environment for a vulnerable, seriously disturbed or distressed prisoner.

7. ACCOMMODATION (including communication)

Prison Maintenance.

7.1 The Board has been very disturbed during the reporting year by the inadequacy of the service provided by Carillion. In particular, this has seriously affected the SCU, numbers of offline cells (often as many as 40 places) and D wing. From May 2017, the state of plumbing on D wing was appalling. From the Board's own observations, toilets on D2 had doors missing, they were not flushing and waste and excrement were accumulating on the floor. There was a leak through the ceiling of D1 from the toilets on D2. Panelling was coming off the showers adding to the leaking. On D3 there was a leak from the hot water pipe below a washbasin. Additionally, the urinals on D2 were blocked and overflowing when flushed. Prisoners were using buckets to flush some toilets and leaks were being collected in bins on the floor. Funding was granted for remedial works on 23 May; despite the prison senior management team's best efforts the work had still not been carried out at year end. A letter from the Board in September to the former Minister, Sam Gyimah, on this matter never received a reply.

Digitalisation

7.2 At the end of the year the entire prison had been wired up in readiness for the introduction of a digitalised communication system. Prisoners were to be issued with in-cell phones and tablets, and hubs would be installed on each landing. The system was designed to eliminate the need for many paper trails such as complaints, applications, canteen orders, medical appointments and visits, thus streamlining and speeding up many processes, as well as giving prisoners responsibility for aspects of their lives over which they currently have little control: good preparation for resettlement. Some Board members have been impressed by similar systems working in contacted-out prisons.

7.3 At the time of writing, however, despite the costly preparation work already undertaken, the Board is dismayed to hear that, apart from in-cell phones, the digitalisation programme has been suspended.

Kit

7.3 The Board has heard many complaints from prisoners about availability and quality of kit (clothing and bedding) and frequency with which clean kit is issued.

7.4 At the start of the year most laundry was being sent to Channings Wood, which has industrial quality machines. Complaints that items were lost or that items of inferior quality were returned were frequent and this undoubtedly led to problems with having adequate clean kit to issue to prisoners on a regular basis.

7.5 Towards the end of the year new washing machines were installed at HMP Exeter so that all items except sheets will be laundered on site. The Board hopes that this – together with additional kit which the Governor has ordered – will improve matters.

8. HEALTHCARE (including mental health and social care)

- 8.1 Care UK has provided healthcare services from 1st April 2017 and although some services are sub-contracted, it now has overall responsibility for all aspects of healthcare provision. In the Board's opinion greater integration coupled with clear leadership by Care UK management is having a positive impact on the service provision and in general prisoners have reasonable access to an improving standard of healthcare; however some problems continue with the dispensing of regular medication.
- 8.2 In addition to GP and nurse-led sessions, there is a broad range of specialist clinics scheduled regularly. The Board's investigations indicate that waiting times are reasonable.
- 8.3 Providing healthcare services in such old buildings presents many challenges. Although the clinical areas are clean and adequately equipped, other areas, for example the waiting room and substance misuse office, need refurbishment. The Head of Healthcare suggests that this does not convey the correct positive image of healthcare: moreover, if more space was available additional clinics could be scheduled. Despite this, the Board's observations indicate that staff are committed to providing a good service and prisoners are generally afforded privacy and respect.
- 8.4 There are occasional complaints to Board members about lack of courtesy by some nurses at the dispensing hatches. Board members have not witnessed this but are aware that some of the men can exhibit challenging behaviours and the hatches can sometimes become a flashpoint.
- 8.5 Other main challenges:
- Changes to the vetting process which have led to extra delays and impact adversely on recruitment.
 - Court diversions to the prison for those with mental health problems cause difficulties for the staff. These men would be better placed in secure psychiatric units.
- 8.6 Recent improvements include:
- The secondary comprehensive health assessment following the initial screening at Reception is usually carried out within 72 hours, although prisoners and nursing staff advise that on some occasions the wait was longer. There are no statistics available to verify this.
 - Requests for health appointments have been simplified by the introduction of a single form. A senior nurse triages all applications to prioritise them.
 - The new dental service provider has arranged additional clinics to bring the waiting list down.
 - Requests for dental appointments are now triaged and two slots are made available daily for emergencies. Prisoners spoken to by the Board are generally satisfied with their treatment.
 - The introduction of a healthcare movements officer to accompany prisoners to and from appointments. Wing staff report that this is working quite well.
 - The healthcare complaints procedure has been simplified leading to a more effective and faster response in most cases. Availability of healthcare complaint forms on the wings and confidentiality for prisoners submitting forms has improved.
 - A clinical lead nurse and a full time pharmacy technician appointed.

- Multi Professional Case Conference clinics held weekly to identify prisoners requiring care planning.

8.7 Care UK has responded well to the CQC Requirement Notices (issued to the previous service provider) following the HMIP's report published in February 2017. After a follow-up inspection towards the end of the 2017, CQC were satisfied that changes had been made to address the concerns and improve the service so that:

- Prisoners who failed to attend appointments are followed up and re-booked in to the next available clinic.
- Clinics are held for prisoners who have failed to attend to receive their medications.
- Review clinics are held to ensure prisoners' medicines are routinely reviewed.
- Prisoners with long term conditions are now being better managed and work is ongoing to ensure that these prisoners have individualised care plans.
- Safety issues in respect of the handling of medicines have been addressed.
- The new dental provider has put in place proper documentation in relation to the x-ray equipment and maintenance and servicing of all equipment.

8.8 Approximately 23% of applications to the IMB for the year were healthcare related. There was no discernible trend. A number concerned medication but investigation usually revealed a satisfactory explanation. Some prisoners had unrealistic expectations of the healthcare service and some complained about delays in accessing services. However Care UK has improved waiting list management.

8.9 Wing staff and prisoners have reported difficulties faced by some prisoners in getting to the dispensing hatches in time to receive their regular medication, especially those engaged in workshops. There is no alternative system in place for dispensing medicines to those prisoners who miss their regular medication through no fault of their own which is unsatisfactory. The Board has brought this to the attention of the governor.

Mental health

8.10 The provision of the mental health service is contracted out to Devon Partnership Trust. Under the leadership of a new Mental Health Services Manager the Board notes the following improvements:

- More staff have been recruited, including a new team leader and psychology assistant.
- All prisoners are now seen by the Mental Health team.
- Governance processes have been improved.
- Team development and supervision have been enhanced.
- There is a good working relationship with the local consultant psychiatrists who cross-cover the three prisons in the cluster and the local secure facility at Langdon. This facilitates the process of transferring men to the local unit. There have only been three cases out of a total of fourteen in the last six months of the year where the fourteen day advisory limit has been missed and these three cases were all out-of-area transfers.

Social care

8.11 Social care is provided through Devon County Council and effected through carers who work throughout the prison but are based in F Wing. The team includes nurses who liaise with other carers to put in place treatment plans. Trained 'Buddies' are integral to this and follow agreed detailed plans to support prisoners who struggle with day-to-day tasks such as showering. The Board is impressed with the high level of care offered on a 24 hour basis.

9. EDUCATION AND OTHER ACTIVITIES

Education

- 9.1 The education service is provided by Weston College which also provides facilities at the other Devon prisons making it possible for prisoners who are transferred to continue studying subjects to a higher level. Courses at Exeter include: maths, English, IT, art, horticulture, peer mentoring and behavioural change. During 2017 preparations were made for horticulture students to undertake practical work in a small outside area of the prison and this has come into operation early in 2018. Preparations are also in hand for courses in painting and decorating and CSCS, a health and safety qualification used in the construction industry.
- 9.2 Throughout most of the year the education service was affected by shortages in the number of prison officers available to escort prisoners to and from the wings. The education provider's statistics are kept on an academic year basis: for 2016/17 they received only 61% of the planned number of prisoners, 2579 as against 4235, and they lost 6372 hours because of what are described as "prison failures".
- 9.3 Notwithstanding this, feedback from prisoners (obtained routinely at the end of every course by the Education Dept) indicates very high levels of satisfaction for both course content, teaching, attitude of staff, feedback and usefulness with regard to future employment.
- 9.4 The Shannon Trust continues to operate in the prison, training prisoners to help other prisoners with reading.

Library

- 9.5 During 2017 arrangements were made for librarians to escort prisoners to and from the library which has increased usage. Longer opening hours have been introduced involving Monday evening from 18.15 – 19.30 and on Friday afternoons until 15.30. To achieve these extended hours the two librarians now only overlap on a Tuesday.
- 9.6 The library is reasonably well stocked and the librarians engage positively with prisoners.
- 9.7 Arrangements are also made for prisoners currently held on SCU, C1 and F Wing to access library books on a limited basis.

10. WORK, VOCATIONAL TRAINING and EMPLOYMENT

Workshops

10.1 The capacity for enhancing the scope of workshops and the range of employment offered is limited both by the prison's cramped inner city site and by its status as a local prison accommodating a range of different prisoners, some for a very limited time.

10.2 Until October 2017 the prison maintained three workshops: both the main workshop and the VP workshop undertake commercial contract work sourced by the prison, mainly packing and simple assembly tasks. In addition the main workshop has a sewing room making towels and other items for HMPPS. The workshops have been less affected by the staff shortages as the prison officers or instructors on duty escort the prisoners to and from the wings. The Board has frequently visited the workshops and been impressed by the purposeful atmosphere and the good relationship between staff and prisoners.

10.3 Sadly, in October the third D Wing workshop closed. This did excellent work making flies for fly fishing and supplying a number of specialist fishing outlets on a commercial basis but depended on one enthusiastic and knowledgeable officer who unfortunately left and could not be replaced. The Board regrets the loss of this imaginative and constructive initiative. Whilst it is certain that this workshop will be brought back into use, its location in the prison (no easy vehicular access and up stairs) means it is not suitable for work requiring large equipment or heavy lifting. At the time of writing it seems likely that it will become simply an extension of the main workshop.

10.4 The Board noted with pleasure that the long-awaited polytunnels were in action by the end of the year. This is the responsibility of the Education Department and there are plans to extend the horticultural training programme along with other vocational courses, all of which enhances the training and purposeful activity in the prison.

11. RESETTLEMENT PREPARATION

- 11.1 The mixed population of Exeter makes this a difficult area to monitor.
- 11.2 The Board is satisfied (from talking to prisoners, the education department, and Catch 22 (operating on behalf of the CRC)) that initial assessments of need both within the prison (e.g. education and health) and beyond (such as the likelihood of accommodation problems on release) are carried out to a good standard.
- 11.3 However, the Board is less convinced that this is well followed through as the prisoner's sentence progresses. Remand prisoners are difficult to provide for as their future is uncertain. Prisoners receiving a longer sentence will normally be transferred out fairly quickly after sentence but OMU confirm that little planning is undertaken for prisoners in this category although receiving training prisons expect that some sentence planning will already have occurred. The Board has been advised by OMU staff that currently sentence planning responsibility sits with the probation officer in the community and that planning for prisoners, especially those starting longer sentences, will inevitably not be a priority.
- 11.3 Prisoners who will be the responsibility of the CRC post-release are assessed by the CRC within the prison but through-the-gate mentoring is provided by PACT and the Board has not found evidence of useful links being made with this service pre-release. The wide geographical area for which the prison is the designated 'resettlement prison' increases the problems of making meaningful contacts although the whole area is now the responsibility of Working Links (via its sub-contractors). Prisoners who are the responsibility of the Probation Service generally know the identity of their probation officer and where MAPPA is involved there is evidence of planning and communication. (Evidence of this comes from discussions with prisoners, OMU and the CRC). However, for all prisoners the uncertainty of accommodation is a frequently raised issue.
- 11.4 The Board is advised that the system is currently in transition with the introduction of the OMIC (Offender Management in Custody) model. A major change will be the shifting of responsibility for through-sentence planning from the community to prisons. The Board will monitor this transition carefully.

C Section – Work of the IMB

BOARD STATISTICS	
Recommended Complement of Board Members	11
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	10
Total number of visits to the Establishment	282
Total number of segregation reviews attended	47

D Section – Applications to the IMB

Code	Subject	Current reporting year 2017	Previous reporting year 2016
A	Accommodation including laundry, clothing, ablutions	14	13
B	Discipline including adjudications, IEP, sanctions	0	1
C	Equality	3	4
D	Purposeful Activity including education, work, training, library, regime, time out of cell	2	10
E 1	Letters, visits, phones, public protection restrictions	15	9
E 2	Finance including pay, private monies, spends	2	7
F	Food and kitchens	1	11
G	Health including physical, mental, social care	39	38
H 1	Property within this establishment	5	8
H 2	Property during transfer or in another establishment or location	20	20
H 3	Canteen, facility list, catalogue(s)	7	10
I	Sentence management including HDC, ROTL, parole, release dates, re-categorisation	4	6
J	Staff/prisoner concerns including bullying	24	24
K	Transfers	1	8
	Total number of IMB applications	137	183