



**Annual Report**  
of the  
**Independent Monitoring Board**  
at

**HMP HEWELL**

**for reporting Year**

1 October 2018 to 30 September 2019

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*Monitoring fairness and respect for people in custody*

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## A Sections 1 - 3

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### 1 STATUTORY ROLE

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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 also to the prison's records.

## 2 EXECUTIVE SUMMARY

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This report presents the findings of the Independent Monitoring Board (IMB) at HMP Hewell for the period October 2018 to September 2019. Our evidence comes from observations made on visits, scrutiny of records and data, informal contact with prisoners and staff, and prisoner applications.

### **Main judgements**

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The judgements below should be considered within the context of an establishment which is continuing a long journey of improvement after many years of poor performance. The prison population is inherently unsettled, both as a whole and individually, which works against the development of positive relationships. Many staff are new and inexperienced, and this, together with the 'churn' inherent in a busy local prison, creates difficulties not present in prisons with a more stable population.

The Board remains concerned by the slow progress in modernising inadequate accommodation.

Although the Board still believes that Hewell is not providing a service appropriate for the 21st century, we remain confident that there is continual determination to move the prison forward. It is noteworthy that when issues are identified and raised, the governor and senior managers are receptive and try to deal with the underlying concerns.

The Board acknowledges the efforts made by the willing and largely dedicated staff to respond to, and support, some of society's most difficult and disturbed individuals.

#### **Are prisoners treated fairly?**

Prison staff and the senior leadership team are making progress towards meeting the standards of procedural justice. However, currently the Board cannot confirm that this is delivered every day to every prisoner.

The control of prisoners' property at this prison continues to be a problem, as is the case nationally.

#### **Are prisoners treated humanely?**

The Board believes that prisoners overall are treated humanely. However:

- A busy local prison is not a humane location for those with severe mental health/behavioural issues.
- In segregation, there are often disturbed men who are, as those present at the review accept, not suitable for that location, yet who are obliged to remain there in the absence of any agreed and available alternative.
- Prisoners with disabilities continue to have problems in accessing the showers. Wheelchair access is poor.
- Although much improved, rubbish accumulating around the site or where it is dropped from the cell windows remains of concern.

The fact that over 40% of cells designed to accommodate a single prisoner are used to house two prisoners causes significant problems – overcrowding being the obvious challenge but theft, violence and bullying are also sometimes facilitated by this over-filling of cells.

#### **Are prisoners prepared well for their release?**

The Board has not seen evidence that prisoners are well prepared for their release. As highlighted in previous reports, the Board remains concerned that the prison environment, with a substantial 'churn' of prisoners each month, results in many prisoners not having a reasonable chance to be supported, in order to look forward to and

develop the skills needed for employment. It is unrealistic to expect reasonable provision for rehabilitation when the remand population is so high.

## **Main areas for development**

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### **TO THE MINISTER**

Will the Minister instruct Her Majesty's Prison and Probation Service (HMPPS) to move all prisoners serving indeterminate sentences for public protection (IPP) out of category B local prisons, so that the response to the 2016/17 report ('HMPPS focuses on giving IPP prisoners the support, opportunities and motivation they need to progress more quickly so that offenders have the best possible prospect for securing release...') can be achieved?

The Board is concerned about the difficulties encountered in transferring prisoners with severe mental health/behavioural issues to an environment where they can be effectively treated. Will the Minister work with colleagues in other departments to ensure greater availability of more suitable locations for these prisoners?

### **TO THE PRISON SERVICE**

Will the Prison Service ensure that sufficient funds are available to make all parts of the prison (for example, cleanliness, flooring, showers, in-cell telephones) fit for the 21st century?

The Board remains of the opinion that the system for moving prisoners' property from prison to prison is not fit for purpose. Will the Prison Service ensure that a 21st century solution to moving prisoners' property is brought in?

### **TO THE GOVERNOR**

Will the Governor:

- continue to reinforce to staff the need to resolve issues at source and not allow them to escalate to formal complaint or adjudication?
- instruct staff to inform the Board of self-isolating prisoners and those 'kept behind their door' on normal location?
- devise a system whereby prisoner workers are able to receive their entitlement to showers, association and telephone calls?
- identify funds to make the healthcare department (particularly the inpatient unit) a welcoming space?

## **Improvements**

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The condition of the common parts of the prison – for example, the gatehouse/reception area, corridors and general outside space – has notably improved. Examples of this are improved noticeboards, painting of railings and improved cleaning of corridors.

### 3 DESCRIPTION OF THE PRISON

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HMP Hewell is a local adult male category B prison (house blocks 1–6).

Certified normal accommodation and operational capacity for house blocks 1–6:

Baseline certified normal accommodation (CNA)	814	(‘uncrowded’)
Maximum CNA	1,074	(‘crowded’)
Operational capacity	978	(reduced to this from January 2018, to take account of window replacement and refurbishment).

Hewell is jointly managed with The Grange, a category D open prison located on adjoining property, and a single Board monitors both prisons. Although they share almost all services, contracts and staff, The Grange and Hewell operate as separate units and exist for very different purposes. The Grange is subject to a separate report

Physical health provider: Care UK

Mental health provider: Care UK

Substance use treatment provider: Care UK

Learning and skills provider: Novus

The library service: Worcestershire County Council

Community rehabilitation companies (CRCs): Staffordshire and West Midlands; Warwickshire and West Mercia

Careers information and advice: Coventry/Solihull/Warwickshire Partnership (CSWP)

Escort contractor: GEOAmey

Maintenance: Amey

House blocks 1 to 6 are a purpose-built prison, opened in 1993, with single and double cells and shared showers. More than 40% of cells designed for one prisoner hold two.

Two-thirds of prison officers are in their first two years of service.

A quarter of the population is identified as presenting a high risk of harm to others.

In June 2018, it was announced that Hewell would be subject to special measures.

In February 2019, there was a change of Governor.

HM Inspectorate of Prisons (HMIP) carried out an unannounced inspection of Hewell in June 2019. Inspectors reported that there had been a marked decline in performance, with safety and purposeful activity assessed as poor. Hewell was graded as poor for safety for the third time, and the Chief Inspector considered invoking the urgent notification (UN) process, requiring the Secretary of State to produce an action plan for improvement within 28 days. However, the Chief Inspector did not do so because Hewell had already been in ‘special measures’ for a considerable time, and he concluded that it was highly unlikely that the UN process would achieve the required improvements. In light of the fact that there was a new Governor in place, who had produced a credible business plan to move the prison forward, the Chief Inspector decided to give the prison leadership and regional HMPPS leadership the opportunity to implement the business plan. This was on the basis that the Inspectorate’s new independent reviews of progress gave them the ability to return and assess progress much sooner than would have previously been the case.

## B Evidence sections 4 – 11

### 4 SAFETY

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As in previous IMB reports and the HMIP inspection report, prisoners often report feeling unsafe within the prison and under threat of violence from other prisoners. Board members regularly meet prisoners accommodated on the segregation unit who claim that living in the unit is their only means of feeling safe within the prison, and this is not disputed by prison management. This view is supported by the increase in the number of applications to the Board in the current year, compared with the previous year, on issues including staff-prisoner concerns, such as bullying (30 compared with 13).

The Board has no evidence that prisoners do not arrive in good condition, although the HMIP report found that prisoners often spent longer than they considered reasonable in escort vehicles and reception.

The Board's observations of reception, both for arrivals and departures, is that the process is thorough, careful and humanely managed. This is often in challenging circumstances due to the large numbers of prisoners arriving and late arrivals, usually from court, presenting difficulties for a careful and thorough reception process. As reported last year, there has been particular stress on the reception process and staff as a result of the reassigning of prisoners to Hewell to reduce the pressure on HMP Birmingham.

The assessment and medical assessments on arrival that we have observed appear to be thorough and careful. There are times when the short-term accommodation of new arrivals is less than optimal – for example, when specialist induction, vulnerable prisoner or alcohol detoxification cells are not available, or the cell sharing risk assessment status of incoming prisoners precludes optimal accommodation in the short term.

The Board has observed efforts to ensure that assessment, care in custody and teamwork (ACCT) procedures are used appropriately. The large number of prisoners on an open ACCT at any one time mitigates against this at times, and this view is supported by the recent HMIP report. On occasion, medical staff have had insufficient input into ACCT reviews. The Board has regularly noted and reported that observations have not been conducted appropriately (for example, being undertaken at night, on the hour every hour), and in a minority of cases that the quality of the observations is poor.

The Board is particularly concerned about the number of prisoners on an open ACCT being held in segregation.

Board members have had reports of delays in cell call bells being responded to, and, indeed, cell call bells being out of action in occupied cells.

From daily briefings and discussions with prisoners, the Board is aware that illicit drug taking is endemic within the prison, and the accessibility of mobile phones is a constant challenge.

In the reporting year, there were three deaths in custody, which occurred during a seven-week period spanning May to July 2019. At the time of writing, no Prisons and Probation Ombudsman (PPO) reports or inquest findings are available but the initial indications suggest that these were self-inflicted deaths. None of these prisoners appeared to be on an open ACCT. One prisoner died the day after receiving a 10-year sentence, and another died one month after arriving at Hewell.

The HMIP inspection found that: "...PPO recommendations following deaths in custody had not been fully implemented, and oversight of their progress was inadequate".

There is one death, which took place in June 2018, for which no PPO report has been received and no inquest held, and another, dating back to January 2018, for which no inquest has been held.

The senior coroner for Worcestershire, Geraint Williams, has sent the prison a report to prevent future deaths, dated 27 February 2019, following the completion of the inquest into a death that occurred on 9 May 2016. This report centred around the poor compliance with national and local policies for the use and completion of ACCT documentation and procedures. The coroner also expressed concern that, despite previous assurances given by the prison that 'lessons have been learnt' about failures to ensure that ACCTs are completed properly, he does not see this as being the case, and alluded to cases to be heard in 2019 having similar issues.

## 5 EQUALITY AND FAIRNESS

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In the last two reports, the Board raised concerns that there continued to be a number of IPP prisoners, whose tariffs have expired and who were still being held in Hewell. Unfortunately, this situation continues. Board members continue to meet prisoners who are many years, often over a decade, over tariff. More often than not, these prisoners are in segregation. An analysis of segregation records for the reporting year show that 17 different IPP prisoners were segregated during the year, two on three occasions, two on two occasions, one for over six months and one for over four months (this compares with 15 in 2017/18). These prisoners tell us that, from experience, they behave badly because all other forms of behaviour have got them nowhere. They tell us that they have been in many prisons and perceive that they have no options for a transfer to a more suitable environment, and that they have very limited expectation that a change in behaviour will result in release.

For example, an IPP prisoner requested a private meeting with the Board to discuss his situation. He stated that he was many years beyond his tariff and that he was unable to progress because of a lack of support by HMPPS, particularly in regard to substance misuse. He had recently been returned to Hewell from a category D prison. The prisoner indicated that this was 'fine with him' because, as a result, he occupied a single cell. He further stated that he could see little hope of release and that there was little point in IPP prisoners complying with prison rules if this did not work to improve their chances of parole. He further alleged that IPP prisoners were punished more severely (and unfairly) for the infringement of rules than were prisoners on fixed sentences.

The Board has not systematically looked at fairness and equality but is mindful of such issues in its monitoring. However we have noted that access remains poor for prisoners using wheelchairs and those with mobility issues. In at least two cases, prisoners using wheelchairs have not had access to adapted cells for prolonged periods and, in one case, the prisoner had no access to showers, telephones, education or work due to his being accommodated on an inaccessible landing in a non-adapted cell.

From our observations, prisoners have appropriate access to the complaints procedure and make full use of it. However, when prisoners wish to complain about healthcare provision, they are often confused about the procedure, complaining to the prison (and the Board) and not the healthcare provider.

Vulnerable prisoners do not always have equal access to education or work provision, and the risks of moving them around the establishment are often cited as reasons to explain this difference in treatment. The waiting room for vulnerable prisoners in the healthcare department (located within the inpatient unit) is entirely devoid of furniture, lacking even a chair or table. The walls of the room are defaced with offensive graffiti and the room is an entirely unsatisfactory place for prisoners to await medical treatment.

The visitors centre is clean and, when we observed it, well staffed, with sufficient seating and waiting areas. The front search area is less welcoming, although the staff deployed there are generally friendly and helpful. The visits hall itself is large, well lit and provided with refreshments and a play area for visiting children. However, Board members have reported that the arrival of visitors to the visiting room was late, resulting in reduced visit times and frustrated prisoners. Vulnerable prisoners also make the point that, due to the escort arrangements for them, they receive less visiting time than other prisoners.

## 6 SEGREGATION/CARE AND SEPARATION UNIT

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The Board can confirm HMIP's view that there is: 'good care from segregation staff, who were very knowledgeable about the prisoners and had good relationships with some extremely challenging prisoners. But staff were often overwhelmed by balancing the needs of the prisoners and the large number of adjudications, and lacked the resources to do more with the prisoners'.

During the reporting period, there were two changes of segregation governor, each bringing a different approach to the management of segregated prisoners. The Board was concerned that middle managers found it difficult to accept and work with the new governors, and this created additional stresses and tensions in an already fraught environment. Also, Board members felt that the regime/tone in segregation was not focused on improvement in behaviour, and more on containment and control than care. The use of segregation remains high, with the unit often at full capacity.

There is a seriously concerning frequency of individuals subject to the ACCT process being held on the unit, sometimes for extended periods of time.

Conditions on the unit are unsatisfactory. It has not been cleaned to a decent standard and at times has been unacceptably dirty. There have been consistent issues around heating, ventilation and water supply. Observation panels are routinely broken or missing, and take an inordinate time to be repaired, resulting in safety concerns for all within the unit. This also allows those accommodated there to talk to, shout at or goad each other from cell to cell. Instances of illicit drug use on the unit are not uncommon. The fact that the unit has only two showers, two exercise yards and one telephone make it impossible to provide a full regime when the unit is full (over 15 prisoners). As mentioned in previous reports, the Board remains concerned that tables are not provided in any of the cells.

The Board continues to be impressed with the take-up of voluntary in-cell education by segregated prisoners, and their interaction with the staff member from the education department.

The Board is usually, although not always, told of new arrivals on the unit. The Rule 45 reviews are held regularly, at set times in the week, which allows the Board to attend all of them. The review boards are usually attended by representatives from the chaplaincy, whose contributions are constructive and helpful. Review boards are often attended by a representative from the education department, which can help to create a broader and more constructive discussion.

The review boards are almost always conducted fairly and professionally by the prison staff but routinely suffer from either delayed attendance by, or insufficiently knowledgeable representation from, healthcare staff. Many review boards – even though attended by a healthcare professional – have not had adequate medical information available to them. Recent initiatives to include representatives from the psychology team, and more consistent and informed attendance by healthcare staff have improved the effectiveness of the reviews and the quality of the decision making markedly. In almost all cases, the prisoners attend the review board. The engagement of the review board members is usually frank and constructive.

Although the focus of the review board is often on returning the prisoner to normal location, many prisoners refuse to leave the unit, resulting in them residing there for significant lengths of time and their accommodation in segregation developing into an intractable problem for the prison. Board members report instances of segregated prisoners being ready for return to normal accommodation but those responsible for managing the normal house blocks resisting attempts to move them on from segregation. This too often leads to prisoners being 'stuck' on the unit.

Instances of apparently unreasonable decision making have often resulted from a lack of availability of more suitable accommodation in other establishments or in a healthcare setting

within the prison or elsewhere. Decisions are often as reasonable as possible in impossible circumstances. Therefore, although the unit is acknowledged to be an inappropriate place for an individual, the board is informed that it is the only option available to the prison. On occasion, prisoners who have been clearly unfit to be held on the unit – for example, due to mental health and/or behavioural issues – have been accommodated there, despite segregation staff making strenuous efforts to secure more appropriate accommodation for them.

The documentation we have inspected is usually up to date and correctly completed.

When observed, adjudications appear to be conducted thoroughly and fairly. There have, however, been worryingly frequent cases of documentation from the reporting officer being incomplete, resulting in a large proportion of cases not being proceeded with. The district judge has raised concerns with the Board about the quality of paperwork and attendance of witnesses at his adjudications. The Board, along with HMIP, has noted that a large number of issues have escalated into adjudications rather than being handled, as would be expected, on the house blocks.

Several 'dirty protests' have occurred within the unit which have caused significant disruption to its effectiveness and have had a deleterious effect on the atmosphere on the unit. Although such events are distressing for all involved, the Board is content that they are handled within policy and with professionalism.

The Board is not typically advised of prisoners on normal location kept 'behind doors'/self-isolators but comes across them by accident. The Board has serious concerns that the safeguards available to individuals formally segregated are not afforded to those kept 'behind their doors' informally.

## **7 ACCOMMODATION (including communication)**

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The Board and HMIP find that accommodation is unnecessarily poor. Over the past year, efforts have been made to ensure improved cleanliness and tidiness of the accommodation, and an ongoing – although slow – programme of refurbishment is improving an unsatisfactory situation. Much of the accommodation is dirty, in disrepair, suffers from graffiti and, in limited cases, is unsanitary. Rota reports have highlighted the constant challenge to carry out repairs and effective maintenance to toilet and shower facilities, which are often the targets for vandalism and damage. Throughout the reporting year, there has been an improving picture but Board members have come across damaged cells still being used pending repairs – for example, prisoners left with a non-working toilet and, on occasion, non-working cell call bells. The Board has also been informed that sometimes prisoners on their first night in prison are put into cells which are officially out of use.

Recent improvements to the appearance of the common and public areas of the prison are to be welcomed, although such improvements only serve to highlight the poor state of much of the prison accommodation.

The Board is often told that some prisoner workers feel disadvantaged because their hours of work make it difficult or impossible for them to access the wing regime. Workers also repeatedly inform Board members that the serving of lunch begins before all the prisoners have returned from their places of work, and that those arriving late are disadvantaged.

Throughout the year the Board has received complaints about, and observed issues with portion size, quality and temperature of the food served. Board observation has identified that portion control varies. However, the food we have tasted has been considered edible. Recently, the number of complaints about the quality and quantity of the food has risen and Board members have observed and been told of menu choices running out. The food comments book is frequently not available at serveries.

There are longstanding issues with broken servery hotplates and leaking floors; despite this, in most areas concerted efforts are made to keep the serveries as clean as possible. Although the numbers are low, there has been a 100% increase in the number of applications relating to food and the kitchens in the current reporting year as compared with the previous year (14 as compared with seven).

When visited, kitchen staff were always properly attired. Visits to the serveries found a very varied picture. The Board is informed that insufficient protective clothing is available, despite requests from staff and prisoners, and, in some cases, staff do not enforce the use of relevant attire, even though it is available.

The Board continues to receive applications from current prisoners and from other IMBs regarding alleged loss of prisoners' property – a concern borne out by the increase in the number of applications received by the Board relating to property.

Board members have observed positive relationships between staff and prisoners, and in specific cases very supportive work being undertaken by staff. The key worker scheme has been introduced at Hewell and, in the reporting year, some isolated positive examples of its success were noted though the implementation of the scheme as a whole had yet to gain significant traction, with many staff and prisoners still unaware of its introduction or purpose. However, many of the applications received by the Board could or should have been resolved by staff. Board members have observed cases where small issues for a prisoner are not dealt with. In addition, there are cases of staff not doing what they say they will – that is, promising/undertaking to do things and then not doing so – to such an extent that the prisoner's concerns then sometimes escalate to a complaint or bad behaviour, including damage to cells or incidents of violence, leading to an adjudication. This frustration builds a lack of trust in the 'system'. The Board's sampling of complaints has also supported the view that relatively minor issues are not being dealt with on the landings.

There is also a mixed picture regarding officers' knowledge of individual prisoners; some have a very good knowledge of individuals, which pays dividends in terms of managing behaviour. In other cases, staff are deployed away from their normal place of work and display a lack of interest in, or knowledge of, the prisoners in their charge. Prisoners and experienced staff alike have expressed concern about the impact of a large proportion of new, very young staff and their lack of experience/authority.

Prisoners have regularly raised their concerns about the provision of canteen as they are concerned that the items ordered do not always arrive, especially when the prisoner has been at work when canteen is delivered.

## **8 HEALTHCARE (including mental health and social care)**

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Board members find the healthcare department (particularly the inpatient unit) to be an unwelcoming environment.

Following its inspection, the Care Quality Commission issued a requirement notice to Care UK Health and Rehabilitation Services Limited and to Midlands Partnership NHS Foundation Trust, both relating to ‘treatment of disease, disorder or injury; diagnostic and screening procedures’.

The Board has very little evidence with which to judge the provision of healthcare. However, it has observed that many prisoners arrive at Hewell with multiple health needs and as the recipients of multiple medicines/prescriptions. Prisoners tell Board members that they experience what they regard as arbitrary changes (that is, they do not have the situation explained to them) to their medication and/or delays in securing the medication on arrival at the prison, leading to their perception that their medical conditions worsen.

There are only two constant watch cells, which leads to tensions between the competing needs of often very vulnerable prisoners. Board members have encountered tension between prison and healthcare staff about delineating between cases of clinical need and other requirements. Instances have been observed of prison and healthcare staff both resisting making a decision about moving a prisoner, in the hope that the other ‘side’ will make that decision and therefore bear the staffing costs. In the meantime, very vulnerable prisoners are, for example, kept in segregation. This is on top of the frequently acknowledged need for more than two prisoners at a time to be held on constant watch.

Board members observe an almost insatiable demand for mental health care, with very limited resources available to meet it. There is a constant tension between prisoners, and prison and healthcare staff about defining mental health needs as distinct from behavioural issues. Members are concerned about the frequency with which prisoners resort to self-harm as a means of forcing the issue to secure attention or treatment. Prisoners tell Board members that simply talking about their perceived mental health needs is not deemed serious enough to warrant intervention, so they feel that self-harm is the only way to demonstrate or prove their distress. In cases followed up by Board members, self-harm is often dismissed as ‘just attention seeking’ – including by healthcare staff.

From observation, once a prisoner is accepted as requiring mental health support that support does seem to be forthcoming. The challenge is securing the correct diagnosis in the context of competing and often conflicting demands on resources. There are cases of delayed intervention caused by an apparent unwillingness to diagnose or accept a need.

Discussions about prisoners’ opinions of the standard of care and treatment receive a mixed response. It is possible that those in prison have unrealistic expectations of the treatment available, which in fact might be similarly constrained in the community.

Prisoners often do not understand the process of complaining about healthcare provision. This results in applications and complaints being directed to prison, rather than healthcare, staff. Despite the separate complaints system to deal with health issues, the number of applications to the Board relating to health and social care has risen steeply in the reporting year.

The proportion of older prisoners and those with chronic health needs and/or disabilities would suggest that a higher level of social care interventions than seen to date would be expected. The Board understands from conversations with staff and prisoners that there has been a lack of coordination between healthcare and prison staff in terms of making referrals to the local authority – with both teams making referrals but not telling the other. The Board understands that attempts are being made to ensure a consistency of approach to referrals by providing training for staff in assessment thresholds and processes.

Informal arrangements have been noted, whereby prisoners provide unofficial social care support to their fellows. While this unofficial support is often welcome and to be commended, it raises concerns about potential safeguarding and welfare issues that would be more effectively mitigated in a system of planned and officially provided support.

## **9 EDUCATION AND OTHER ACTIVITIES**

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The recent Ofsted inspection judged that the overall effectiveness of education, skills and work activities was inadequate, and identified some major areas for improvement, including a poorly resourced and overstretched management team. Poor attendance at activities and the impact of the 'churn' of prisoners often prevents progress in training and education, with initial success being interrupted by a transfer to another establishment.

On the very few occasions that lessons are observed, they are found to be engaging, and those present were interested and appeared motivated.

The library is clean and well stocked. Board members have observed challenges in prisoners accessing the library – sometimes (we are told) access is limited due to staff shortages. House blocks vary in their commitment to escorting prisoners to the library for their allocated sessions. The recently revised schedule for access to the library is an attempt to improve the regularity of attendance.

## **10 WORK, VOCATIONAL TRAINING and EMPLOYMENT**

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There is a range of work and vocational training available, and prisoners can undertake a City & Guilds level 1 qualification – for example, in painting and decorating. Prisoners observed seem to enjoy this training and see it as a pathway to employment after release. They can also undertake a City & Guilds level 1 qualification in woodwork. The standard of finished work observed is high and prisoners express pride and satisfaction in their work, as well as informing Board members that they have developed some design and development skills.

There is some evidence of prisoners attending work and being turned away as the workshops have been over-allocated.

On occasion, the Board has observed large numbers of prisoners employed on the house blocks as cleaners or servery staff but not being engaged in purposeful activity for of the day. HMIP found that: ‘The number of prisoners locked in their cells during our roll much checks had risen from 46% of the population in 2016 to 61% at this inspection’. This HMIP finding tallies with the Board’s observations and what members are told by prisoners.

The Board is frequently impressed by the supportive relationships which many instructors develop with the prisoners. The prisoners respond well to more extended and consistent dealings with staff than they are typically able to have on the house blocks. There is evidence of genuine efforts to develop life and work skills within the workshops. Board members have often seen examples of trainers fulfilling the role of the old personal officer or key worker, and acting as mentors to their charges in a general sense, filling gaps in the mentoring and guidance that is done on the house blocks. However, Board members consider that much of the work and vocational training is focused on utilising time in prison effectively and constructively, rather than explicitly on what might happen on release.

## **11 RESETTLEMENT PREPARATION**

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As in previous years, the Board has not seen evidence that prisoners are well prepared for their release. Conversations with prisoners continue to suggest that they do not feel that they are being prepared for release, but that they are merely being detained until release.

When Board members have met enthusiastic prisoners in workshops and discussed their plans after release, the prisoners have aspired to working in their old job or another job unrelated to the workshop.

The Board remains concerned that the environment, with a substantial 'churn' of prisoners each month, results in many men not having a reasonable chance to be supported, in order to look forward to and develop the skills needed for employment. The Board has regularly met prisoners who are unable, before their release or transfer, to complete training or education courses which they have started while at Hewell. It remains unrealistic to expect reasonable provision for rehabilitation when the remand population is so high. This is an area where the Board has not been able, due to lack of experienced members, to monitor as effectively as it would wish.

From our observations, transfers and removals are adequately managed when they happen but discussion with officers and prisoners indicate there are too many cases of prisoners being held in Hewell in the absence of more appropriate accommodation. Board members have met prisoners in segregation as a result of protest to seek transfers – often because of geography and proximity to friends and family etc. Board members have met category D prisoners 'trapped' in Hewell pending category D places being found.

## C Section – The work of the IMB

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This has been the third consecutive difficult year for the Board. All four of the new members who started in 2017 stopped attending the prison. Both the deputy chair and Board Development Officer (BDO) resigned. A recruitment campaign resulted in five new members, who are in probation and undertaking training. With a limited number of experienced members, training for new members has proved a challenge. The Board is grateful for the support from the BDO at HMP Oakwood, providing offsite training.

As in the previous two years, the Board prioritised its work, focusing on the segregation unit, being present for Rule 45 reviews and dealing with applications. The increase in the number of applications received is thought to be due to the increased presence of Board members at the prison. Board members have visited most areas of both prisons during the reporting year, and these visits have provided enough evidence for judgements to be made. However, monitoring has tended to be of the fabric of the prison and there still remain areas of the prison that the Board has not had sufficient resources to monitor effectively and is therefore unable to comment on.

The Grange is subject to a separate report.

<b>BOARD STATISTICS</b>	
Recommended complement of Board members	20
Number of Board members at the start of the reporting period (active)	10 (7)
Number of Board members at the end of the reporting period (active)	10 (8)
Total number of visits to the establishment	473
Total number of segregation reviews attended	98

## D Section – Applications to the IMB

Code	Subject	Current reporting year	Previous reporting year
A	Accommodation, including laundry, clothing, ablutions	9	6
B	Discipline, including adjudications, incentives and earned privileges, sanctions	5	2
C	Equality	4	4
D	Purposeful activity, including education, work, training, library, regime, time out of cell	6	3
E 1	Letters, visits, telephones, public protection restrictions	10	6
E 2	Finance, including pay, private monies, spends	5	5
F	Food and kitchens	14	7
G	Health, including physical, mental, social care	35	14
H 1	Property within this establishment	31	20
H 2	Property during transfer or in another establishment or location	26	34
H 3	Canteen, facility list, catalogue(s)	5	2
I	Sentence management, including home detention curfew, release on temporary licence, parole, release dates, recategorisation	18	13
J	Staff/prisoner concerns, including bullying	30	13
K	Transfers	1	14
L	Miscellaneous	40	3
	<b>Total number of IMB applications</b>	<b>238</b>	<b>151</b>