# TABLE OF CONTENTS

## Introductory Sections

<table>
<thead>
<tr>
<th>Section</th>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Statutory Role</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Description of Establishment</td>
<td>7</td>
</tr>
</tbody>
</table>

## Evidence Sections

<table>
<thead>
<tr>
<th>Section</th>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Safety</td>
<td>9</td>
</tr>
<tr>
<td>5</td>
<td>Equality and Fairness</td>
<td>11</td>
</tr>
<tr>
<td>6</td>
<td>Segregation/Care and Separation Unit</td>
<td>11</td>
</tr>
<tr>
<td>7</td>
<td>Accommodation (including communication)</td>
<td>13</td>
</tr>
<tr>
<td>8</td>
<td>Healthcare (including mental health and social care)</td>
<td>13</td>
</tr>
<tr>
<td>9</td>
<td>Education and Other Activities</td>
<td>15</td>
</tr>
<tr>
<td>10</td>
<td>Work, Vocational Training and Employment</td>
<td>16</td>
</tr>
<tr>
<td>11</td>
<td>Resettlement Preparation</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>The Work of the IMB</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Applications to the IMB</td>
<td>20</td>
</tr>
</tbody>
</table>
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:

1.1 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.
1.2 Inform promptly the Secretary of State, or any official to whom he has delegated authority as it judges appropriate, any concern it has.
1.3 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

2.1 INTRODUCTION to the REPORT

The independent monitoring of HM Prison Wakefield is, and remains, a critical aspect of the UK’s compliance with the United Nations Standard Minimum Rules for the Treatment of Prisoners (otherwise known as the ‘Nelson Mandela Rules’). The IMB at Wakefield is one of the bodies that collectively form the National Preventive Mechanism (NPM). The NPM is the mechanism that should facilitate the discharge of the UK’s legal obligations set out in the requirements of the United Nations Optional Protocol Against Torture and Inhumane Treatment (OPCAT). Continuous monitoring, in contrast to episodic inspection (which is the responsibility of Her Majesty's Chief Inspector of Prisons), enables the board to take a holistic view of the impact of the custodial environment on prisoners, staff and visitors.

This report presents the Board’s views on the conditions of custody at HMP Wakefield; in arriving at our judgments, we draw on an evidence base that includes, inter-alia, continuous monitoring observations of prisoners and staff through our weekly ‘rota’ visits, attendance at bi-weekly Prison Rule 45 reviews, local management committees, prisoner representation bodies, and in dealing with specific prisoner applications to the board including those received under confidential access.

It is our overall conclusion that HMP Wakefield continues to provide a regime that is, on the whole, just, consistent and inclusive.

2.2 MAIN JUDGEMENTS

2.2.1 Are prisoners treated fairly?

Yes. The board continues to observe a regime at HMP Wakefield that is consistent with national and locally established principles and by means that are fair and just. The board attends, where possible, adjudication standardisation meetings and remains satisfied that procedures are, on the whole, leading to just outcomes and that the application of the Prison
Rules is consistent and transparent. It is regrettable that the board was unable to monitor the work of the Prisoner Equality Action Group (PEAG) – we are therefore caveating our view accordingly.

We remain concerned by the impact of an aged physical environment on prisoners who, by reason of their mental or physical health, may be disadvantaged in relation to their specific needs.

2.2.2 Are prisoners treated humanely?

Yes. We continue to observe a custodial environment that seeks to ensure that ‘all prisoners shall be treated with the respect due to their inherent dignity and value as human beings’ and that no prisoner should be subject to ‘inhuman or degrading treatment or punishment’ (Mandela Rules).

The board remains profoundly exercised by a small number of prisoners who have 9and continue to) experience substantial periods of segregation. These prisoners, who present with complex behaviours and are likely to be assessed as suffering from ‘personality disorder’, cannot be managed in the normal population. Nevertheless, there must be active strategies in place to ensure that these prisoners can a) work towards realistic targets to progress out of prolonged segregation and b) access suitable mental health services where desirable.

In some cases, we have monitored prisoners that have endured extreme periods of segregation (see Section 6). This, by definition cannot be considered humane, and yet we applaud the discipline staff that we regularly observe treating prisoners dignity and humanity despite the very serious offences that some segregated prisoners have committed (or are alleged to have committed) against their colleagues and other prisoners.

2.2.3 Are prisoners prepared well for their release?

Prisoners are rarely discharged from custody at HMP Wakefield. The focus remains on i) achieving positive adaptations to a long sentence and by interventions seeking to achieve acknowledgement of serious (often sexual) offences, ii) addressing the risks of future offending and iii) encouraging prisoners to progress through re-categorisation to lower categories of risk, and by enabling their transfer to continue their rehabilitation in other prisons. This approach is supported by the ‘Enabling Environment’ underpinned by three core principles of i) conditions of success, ii) rehabilitative culture and iii) strategy of choices. The board continues to remain impressed by the willingness of staff and prisoners to engage with this important initiative.

2.3 MAIN AREAS for DEVELOPMENTS

2.3.1 To the Minister

In the 2017/18 annual report we described the wholly unacceptable delays in securing expeditious transfers of prisoners who present with serious and acute mental health conditions under Section 47, 1(3) of the Mental Health Act 1983 (as amended). We described the necessity to secure appropriate accommodation for those prisoners, as a matter of ‘extreme urgency’.

It is therefore deeply troubling that we find ourselves reporting on a worsening situation at HMP Wakefield, characterised by a system that we perceive to be placing highly dangerous, yet vulnerable prisoners in an environment that is simply ill-equipped to cope with their extremely complex needs. Our concerns apply equally to operational staff, particularly discipline officers, who are regularly placed in situations where they are being asked to act as
mental health care practitioners by virtue of the prevailing legislation that considers the establishment to be a ‘place of safety’. The consequences of this are obvious, the environment is susceptible to being anything but a place of safety, particularly where staff and prisoners may face or be exposed to extreme prisoner-on-staff and prisoner-on-prisoner violence. We have seen evidence of serious self-harm and in the worst instances, attempts to commit acts of suicide; these are symptoms, in our view, of an absence of clarity in the management of complex prisoners across the ‘Long Term High Security Estate (LTHSE)’.

In one specific and deeply troubling example, the board took the exceptional step of exercising its’ powers under Sct. 77(4) of the Prison Rules (1999) to request an immediate intervention by the Minister in the case of one prisoner who presented with behaviours that caused serious concern for board members and staff alike. The prisoner in question, who had served 360 consecutive days in segregation on the day we contacted the Minister, was the subject of numerous ‘complex case reviews’ initiated by the establishment. Documented evidence of the decline in the prisoner’s mental health appeared frequently in our monitoring reports and in that of the establishment’s own records via C-NOMIS and yet inertia and delay led to a situation whereby the conditions of custody in which the prisoner existed were simply anything other than humane. We observed staff working tirelessly and with patience and courage to keep this prisoner safe, despite the demands placed upon them in a busy and challenging environment.

The prisoner in question was eventually transferred to secure accommodation and we are informed that his treatment is realising positive outcomes. We are grateful to Minister Stewart for his intervention and timely response. The professionalism of the staff and the dogged persistence of this (under-strength) board should be recognised by the Minister in averting an outcome that could quite easily have led to tragic consequences.

We turn to the issue of key-workers and the Minister’s assertion that ‘the introduction of key-worker arrangements at HMP Wakefield has resulted in lower than expected levels of violence’. We must, respectfully, challenge the Minister on this point; there is no evidence of this, in our view, and we would welcome clarification on a) the data used to inform the Minister’s view and b) the research (or methodological approach) underpinning the Minister’s view of a direct causality between reduced violence and key-work. The board’s view is that the time necessary to undertake meaningful key-work often conflicts with operational demands.

The board has been and remains significantly under-strength. We accept that the security classification of the establishment and the nature of offences committed by prisoners at Wakefield may be a factor in the ongoing challenges we face to encourage new members. Nevertheless, the work of the board has been hampered by our necessity to work at the quorum whilst dealing with a number of exceptionally complex and challenging applications – many of which requiring substantial time and effort to research fully and diligently. It is against this context that the board wishes to express its’ displeasure with the current ‘embargo’ on the funding of recruitment campaign advertisements in the local press. Our experience is that these advertisements tend to generate significantly greater interest than through the Cabinet Office public appointments portal. We ask the secretariat to release funding immediately to enable this board to recruit suitably qualified candidates with expediency.

Finally, the Board wishes to raise the ongoing impacts of the decision to abolish Indeterminate Sentences for Public Protection (IPP) sentences ((s.225 of the Criminal Justice Act 2003) in 2012 under the Legal Aid Sentencing and Punishment of Offenders Act. The board continues to receive written and oral representations from IPP prisoners and our conversations with them often betray a mental anguish that can easily manifest itself in acts of violence against staff and/or self-harm. We ask the Minister to clarify the position with respect to the a)
management and b) sentence planning arrangements of this specific population of prisoners at Wakefield.

2.3.2 To Her Majesty’s Prison and Probation Service

We are grateful for the response to our previous annual report and note HMPPS’s clarification on the delayed ‘new prisoners’ property framework’ and the intention to publish in Spring 2019. Nevertheless, we continue to deal with the frustrations of prisoners who experience problems with their property – often for reasons that are inexplicable to us. We have yet to receive further information on the new framework and would request clarification from HMPPS on the status of its implementation. Property issues create unnecessary conflict and can often consume the time of staff and the members of this Board who are, by any measure, stretched.

We are grateful for clarification on Prison Service Instruction (PSI) 12/2011 – ‘Prisoner’s Property’ and we are, of course, aware of the volumetric control requirements, particularly in the context of aiding the moving of property during transfers. It should be noted that the vast majority of prisoners at Wakefield are serving ‘long-tariff’ sentences and that transfers are less frequent than those typically observed at establishments outside the LTHSE group. Volumetric control is not an issue that we have encountered nor specifically raised in our previous annual report(s).

On the matter of staff security clearance, we do not accept HMPPS’s assertion that there is ‘no evidence that the speed of pre-employment processes (are) currently a barrier to recruitment’. We are frequently informed of situations whereby the process of securing CTC clearance has led to suitably qualified and desirable candidates withdrawing from the recruitment process.

2.3.3 To the Governor

We continue to be impressed by the regime at Wakefield, and by the professionalism of the staff that demonstrate courage and professionalism on a daily basis. The board is readily able to access information from the Business Hub and via C-NOMIS on request, and we are particularly grateful for the provision of an additional networked computer terminal and the ongoing provision of a highly experienced part-time clerk.

The ‘population mix’ at Wakefield is changing (see Fig 1); and it would seem that low-level bullying (reported on in 2017/18) is on the rise; the main perpetrators being younger prisoners, we believe. 33% of prisoners are aged below 40 and 20% of prisoners are aged 18-24. The danger is that a stable regime is gradually being eroded by the impact of this cohort of prisoners on the 46% of prisoner's aged 50 or over.
We are concerned that some prisoners, who would ordinarily be located in segregated conditions by virtue of their propensity to commit acts against he Prison Rules, are increasingly being housed on the main residential wings. This is often a symptom of a segregation unit that is, more often than not, operating at or near full capacity. The location of these prisoners on main residential units can disrupt the regime and create additional demands on staff time.

3 DESCRIPTION OF THE PRISON

3.1. HMP Wakefield is a long-term high security prison for men typically in security categories A and B. It was originally built as a house of correction in 1594. In 1966, the prison was designated as a ‘dispersal’ prison following the recommendations of the 1966 Mountbatten Report into Prison Escapes and Security. Today, HMP Wakefield is one of 13 ‘Long Term High Security Estate’ (LTHSE) establishments and a main lifer centre with a focus on serious sex offenders. The prison roll is circa 740 including approximately 150 Category A and no more than 10 Category A 'high-risk' prisoners. The board has compiled population statistics for the reporting period, by category of prisoner (see Figs 1 and 2).

3.2 There are four Residential Wings: A, B, C and D. All cells are of single occupancy except for a small number of accessible cells that contain sufficient space for a prison ‘carer’ to reside. Prisoners are also held in the Health Care Centre (HCC), the Segregation Unit (Prison Rule 45 and a small number of Rule 46 designated cells) and the Close Supervision Centre (Prison Rule 46), both being located in F Wing.

3.3 The Close Supervision Centre (CSC) operates under a national co-ordinated management strategy to provide a secure isolated location for those prisoners who are assessed as consistently and violently disruptive.

3.4 The main prisoner facilities provided comprise of wing kitchens, snooker & pool tables, a gymnasium, library, external exercise area and sports field, a chapel, education spaces and a selection of work-places.

3.5 During the reporting period, the following services were supplied by contract: Healthcare services are provided by Care UK; Education provision by the Milton Keynes College; Maintenance is contracted out to Amey and Prisoner Transport (for non Category A prisoners) is provided by GEOAmey.
Notes: The monthly population data is collated by the clerk to the board and reported to the monthly meeting. The time-series shown in Fig 2a illustrates a continuation of the stable population described in the 2017/18 annual report. The variance in the number of prisoners serving life sentences at Wakefield is greater than other populations and we continue to monitor the provision of services at Wakefield including life sentence planning and access to programmes.
4 SAFETY

4.1 This sections draws on an evidence based gathered from the outcomes of routine meetings with the ‘Safer Prisons’ team, together with our own observations and verbal feedback from Wing Representatives, Listeners and individual prisoners, to determine how safe the prison feels with regard to Deaths in Custody, Wing Safety, Recorded Acts of Violence / Self-Harm and ACCT Documents.

Deaths in Custody

4.2 There were 11 deaths in the 2018/19 reporting year compared with only 4 deaths in the previous 12 months. All these occurrences with the exception of one were due to natural causes and consistent with the age population profile who are serving longer sentences. The exception was believed to be as a result of self-infliction caused by a drug overdose. Each occurrence has been appropriately and satisfactorily handled in a respectful and dignified manner with the use of Liaison Officers to engage with and notify relatives to provide the appropriate and timely support.

4.3 Following historical criticism by the Prison Ombudsman regarding the use of restraints, it is pleasing to report that the continued usage and successful implementation by Wakefield staff over the last year of their Death in Custody algorithm (which is used inline with the Graham Judgment) enables staff conducting Risk Assessments a better understanding of any mobility issues of individual prisoners.

Wing Safety

4.4 Wing safety figures are regularly collected from all Wing Representatives through the use of frequent prisoner survey forms and the joint monthly Safer Prisons meetings. These findings generally reflect a more positive feeling of safety however as in the previous year, there is verbal evidence from the representatives that different wings are feeling less safe at specific periodic times. The prisoner representatives suggest the main reason for this is the continued circulation of individual prisoners being moved from wing to wing for disciplinary reasons. Additionally, the influx of younger prisoners is perceived to be showing a lack of respect towards the more elderly residents. There is a general opinion of higher noise levels. The increasing availability of drugs / substance misuse and the forming of groups which causes older detainees to feel threatened is also a growing concern. There were also isolated allegations of some bullying and harassment by other prisoners. Senior management staff are aware of all these issues and are making prolonged efforts to address them.

4.5 There are a select number of prisoner representatives located on each wing to provide peer support for anti-bullying, carers and listeners who are available at all times. The establishment, working with the Samaritans is constantly looking to arrange for additional representatives to these roles to further assist prisoners. A Samaritan phone is also available on each wing and they regularly visit the prison to attend the Safer Prisons meeting and meet separately with these appointed representatives. In addition, the Prisoner Visitors Scheme continues to be available to all prisoners whether or not they receive visits from family members or friends.

4.6 It is important that feedback is given to prisoners so that their perception of safety is better understood, and this relies on the existing good liaison between the Safer Prisons Team, the Wing Residential Managers and the Prisoner Representatives themselves.
4.7 The number of new arrivals into the establishment are comparatively few however, all prisoners are assessed carefully on arrival prior to receiving their induction into the prison.

4.8 The segregation unit (F Wing) presents its own unique challenges and we are continuing to monitor the long-term effects of a prolonged stay within this accommodation. The Board acknowledges the positive steps taken to relocate people back onto the residential wings whenever possible and understand the complexities and challenges that certain individuals present. Staff safety is also a persistent concern and will also be monitored. The recent willful damage to a section of the Wing caused by one individual has highlighted issues in repairing/replacing obsolete alarm panels causing a temporary part closure of this area for a period of time.

4.9 Previously HMP Wakefield reported the management of four safer cells on F Wing but these are not regarded as fulfilling the current national requirements for this type of cell as they have strayed from the requisite specification and would necessitate modifications to meet the same. During the last 12 months there was again no funding secured to address this concern. As a result, there are only two cells in use as “safer” cells and one being utilised as a special accommodation cell.

**Recorded Acts of Violence / Self-Harming**

4.10 The number of ‘acts of violence’ for the year has risen, being recorded at 177 occurrences (an increase from 110 on the previous year). All such incidents of attacks on staff and/or other prisoners are recorded and have been well documented. The use of force when observed has been necessary, appropriate, and proportional. The use of CCTV and body-worn cameras continues to prove very effective and beneficial when dealing with, and reporting such incidents.

4.11 During the same period, the number of Self-Harm incidents has also slightly increased from 238 to 268. This figure is from a total of 72 separate prisoners, but indications are showing a decrease in self-harming by known challenging individuals with complex and difficult problems.

4.12 HMP Wakefield has also introduced its Safer Custody (Self-Harm and Suicide Prevention) Local Operating Procedures into their induction-training programme. This is further aimed at making Wakefield a safer place to live and work, by reducing and managing incidents of violence and self-harm. It is managed by the Safer Custody Team to provide assurance, support and effective care to the most vulnerable prisoners who display challenging and/or violent behavior to encourage positive outcomes.

**ACCT Documents**

4.13 The number of ACCT documents opened has again increased from 148 (90 different individuals) to 202 by 117 different prisoners.

4.14 The routine random sampling of these documents by prison governors shows an overall improvement but continues to highlight infrequent minor recording issues, mainly in ensuring all details are completed in a timely manner. To address this concern, focused staff ACCT training is continuing to be addressed with a training package that commenced during the previous reporting year.

**Summary**
4.15 The Board believes HMP Wakefield is committed to providing and maintaining a safe environment for all who live, work and visit the establishment. To this end, it considers that it has generally calm and safe surroundings despite its challenging population mix and changing profile. The continuation of an influx of younger prisoners continues to raise concerns amongst the more elderly population with regards to bullying and harassment, which will continue to be monitored.

Over the last year it has been a reported that the use of illicit drug taking by prisoners has stabilized and remained largely constant throughout the period. This is mainly instigated by the inappropriate usage of prescribed medicines and substance “spice” misuse however, this is under constant monitoring and review and is being taken seriously by the establishment incorporating routine prisoner testing by means of the Drug Management Team (DMT).

Throughout the year there has been the continued assistance with prisoner safety through the existing programme of support to all residents via the Prisoner Support Scheme. This provides for prisoner Listeners, Safer Prisons and Carer representatives being available on all Wings on a 24/7 basis, in addition to Samaritans phones being available via fixed lines and DECT phones. This is linked to the Prisoner Visitors Scheme that is available to all prisoners.

5 EQUALITY AND FAIRNESS

5.1 The board was unable to monitor the establishment Prisoner Equality Action Group (PEAG) committee throughout the reporting period. This is a consequence of a significantly ‘under-strength’ complement of members (see 2.3.4)

6 SEGREGATION/CARE AND SEPARATION UNIT

6.1 Prisoners held on Prison Rule 45 (Good Order and Discipline), 53 (Pending Adjudication) and 55 (Governors’ Punishment’s) usually reside in the segregation unit and are subject to a restrictive regime. Some of the prisoners held on Prison Rule 45 at Wakefield are highly complex individuals with a history of serious violence against staff and/or other prisoners. The management of these prisoners is exceptionally challenging. During the reporting period, a number of these prisoners have attacked staff, leading to serious injuries. Other instances of indiscipline, such as the deliberate damaging of the internal fabric of the cell, climbing onto the safety netting, ‘dirty protests’ and refusals to relocate to normal accommodation following a decision by the review board, place additional pressures on the regime.

6.2 Prisoners held on Prison Rule 46 (Close Supervision Centre) are located in a specific part of the wing, or in ‘designated cells’ elsewhere on the wing. ‘Designated cells’ are designated by the Deputy Director of Custody with the delegated authority of the Secretary of State for the purpose of holding Rule 46 prisoners whose location with the main population of Rule 46 is undesirable. We continue to applaud the prison in its continuing work to offer progression opportunities to CSC prisoners within the constraints of what is inevitably a highly restrictive regime.

6.3 Prisoners held in the CSC (under Prison Rule 46) are ‘centrally managed’ in a highly structured environment that reflects the risks they pose to staff and other prisoners. Following the success of HMP Wakefield’s Close Supervision Centre (CSC) in receiving the ‘Enabling Environment’ accreditation by the Royal College of Psychiatrists (reported on in the 2017/18 annual report), we continue to observe a very well run unit.

6.4 The Segregation Unit has operated at near capacity for the duration of the reporting year, and often at capacity. Consequently, we have observed prisoners, who would
normally be held in the segregation unit for reasons of good order and discipline, being housed in their residential units under Rule 45 conditions. This is undesirable as it can lead to disruption of the main regime, divert staff resources and infuriate prisoners who attempt to go about their daily regime in an orderly fashion. We are also mindful of the concerns of some members of the discipline staff who have informed us, during rota visits, of their concerns in respect of decisions to locate refractory prisoners on the residential units due to on-going capacity pressures in the segregation unit.

6.5 During periods where the unit is operating at maximum capacity, the willingness of prisoners to ‘opt out’ of certain elements of the regime (such as taking a shower, exercise, phone call etc.) is the only method by which other essential tasks can be completed.

6.6 There is a smaller cohort of ‘settled’ long-stay prisoners who continue to remain in the segregation unit for reasons of their own desire to ‘self isolate’ and despite our concerns raised at the bi-weekly Prison Rule 45 review boards, and the attempts of the prison staff to encourage/facilitate a move to normal location – this can often

6.7 The dangers faced by operational staff working with extremely violent prisoners became all to apparent during the reporting year when two members of this board witnessed an attack, at close quarters, on a member of the prison staff during a review board.

6.8 The board remains troubled by the prolonged segregation of a small number of prisoners presenting with complex and highly unpredictable behaviours. The board continues, through the Segregation Monitoring and Review Group that is annexed to the establishment SMARG report and the board’s submission to the April 2019 SMARG report, to highlight the case of three particular prisoners who, for very different reasons, have spent extensive periods of segregation (Fig 3a and 3b).

The data in Fig 3b identifies three particular prisoners who have spent considerable periods of time in segregation:

- No. 1 total number of segregated days, 643
• No. 4 total number of segregated days, 494
• No. 2 total number of segregated days, 420

6.9 Very occasionally, the use of special accommodation (in either a furnished or unfurnished cell) is sanctioned for short-periods of time as a de-escalation tactic in situations where prisoners exhibit serious or extreme violence towards staff or other prisoners. The board is, without exception, notified and will visit the prisoner during the period of confinement where it is possible to do so.

Summary

6.10 Our monitoring observations and conversations with prisoners and operational staff during week-day and week-end visits have satisfied us that prisoners are treated with patience, dignity and humanity despite the very real risks that they present to the good order and discipline of the prison.

7 ACCOMMODATION (including communication)

7.1 The residential areas of HMP Wakefield continue to be usually calm and ordered; prisoners more often than not express a perception of feeling safe and reasonably empowered to engage with a full regime. Our previous annual reports have identified this strength of HMP Wakefield; it is arguably a benefit of a relatively static population of prisoners, single cell occupancy, and a willingness to introduce elements of innovation into the daily regime.

7.2 In our previous annual reports from 2015-16 onwards, we have raised the needs of an increasingly ageing population at Wakefield. Those prisoners, particular with mobility impairment, require more active support to facilitate their engagement with the regime. We recognised that their issues are being raised and tackled through the appropriate management systems and most notably the Prisoner Equality and Action Group (PEAG) and it is regretful that we have found ourselves unable to track progress this year.

8 HEALTHCARE (including mental health and social care)

8.1 Two members of the IMB in Wakefield continue to monitor the provision of all healthcare and elderly social care services within the prison.

8.2 Care UK now contract healthcare service provision for Psychiatry, Recovery and Psychology services from The Midlands Partnership Foundation Trust, recently renamed from the previous South Staffordshire & Shropshire NHS Trust. Currently there are challenges with the provision of Psychology services, a vacant post is out to recruitment and has been entered on the Datix risk register.

8.3 The IMB are again pleased to report excellent communications with all members of the healthcare teams. There continues to be bi-monthly meetings between the IMB nominated members and Head of Healthcare Services (HoH). The HoH has resigned from post and towards the end of the reporting period governance of healthcare is being managed on a daily basis by deputy HoH and overseen by a regional manager. In addition, and by invitation, attendance at several meetings and committees concerned with continued and forward planning of healthcare and social care services. The Prisoner Patients Forum has continually taken place over the 12-month reporting
period, this group has been overseen by the Deputy Head of Healthcare (DHOH) to discuss any health related matters with representatives of the healthcare professionals.

In-patient Care

8.4 The In-patient service at the Health Care Centre (HCC) is now fully staffed, this due to moving one Band 6 post from the Primary Care Centre (PCC). The HOH has raised concerns that currently night shifts are being undertaken with one Nurse and one Health Care Support Worker. As stated in the previous report the aim is to ensure that there are two registered practitioners on each shift. There is currently a vacant Band 5 post which was moved to PCC following the Band 6 move, although consideration will be given to the Band 5 post remaining with HCC in order to allow further support on night shifts. The current Healthcare team has the capability of providing three Nurse Prescribers, with two more being trained.

8.5 Certain high profile vulnerable prisoners continue to be housed within the healthcare facility and this remains an unsatisfactory situation. This is due to difficulties with integration on a wing and avoidance of segregation, but we are pleased to report that the numbers of these prisoners is slightly down from previous years. A new Head of Reducing Re-offending has recently come into post and is keen to ensure maximum engagement for all able prisoners.

8.6 There remains no provision of a separate sluice facility within this unit, this could lead to issues of cross-infection/contamination given the lack of provision for the safe disposal of bodily fluids and human waste. There is currently a large under utilised space within the HCC building; the HOH has requested schematics from Amey, the facilities contractor, this in order to plan a better use of the Health Care building. If plans are accepted and funded by the appropriate prison authorities this space could be made into three sections to house the following facilities, a Families Room, a Sluice Room and a Healthcare Training/Study Room.

8.7 The palliative care suite maintains the Macmillan Quality Excellence Award with regards to the provision of end of life care. The suite, which is currently named ‘Lily pad’, has recently been redecorated and artwork painted on to the walls as a means of providing a calming environment. Staff continue to ensure that both patients and their relatives are treated with dignity and compassion at all times.

Mental Health

8.8 The requisition for Mental Health assistance within the prison has been defined as follows:- the nursing caseload at the end of the reporting period was 57 patients, this included 16 patients designated with a Learning Disability (LD).

8.9 There were 43 patients on the caseload of the Psychiatrist- this comprised of a list of people who are seen in his clinic for review.

8.10 There were 24 people on the Improving Access to Psychological Therapy (IAPT) waiting list - this number will be taken over by the assistant Psychologist when the new appointee arrives. There are 19 people on the Psychology waiting list.

8.11 There is one L.D. nurse in post. The prison is due to open a specialist Autism wing, this to be named the Mulberry Wing. It is anticipated that it will accommodate prisoners who are on the Autistic spectrum. As yet, the current L.D. Nurse has yet to be engaged with this process.

Pharmacy Outpatients

8.12 The plan for this department was that the pharmacy team would take over the full dispensing of medications, however this has been delayed due to recruitment and CTC
clearance issues. At the end of the reporting period PCC were assisting and dispensing. The HOH will take careful note of any reports of previously alleged dismissive behavior towards prisoners as reported in last year's annual report and this will again be closely monitored by members of the IMB.

Smoking Cessation

8.13 The prison is now smoke-free and e-cigarettes have replaced tobacco products. There is currently not sufficient evidence around the long-term effects of vaping to educate prisoners. However, the recovery team and PCC do provide education and advice with regard to the use of these products.

Social Care Assessments

8.14 Social care assessments can be accessed via self-referral, key worker and PCC referrals. This is then passed to the two members of the HCC team who have been designated as social care leads. The referral is then assessed and contact made with the council social care services at Wakefield Care Direct. This then provides a pathway to gain a full social care assessment by a council social worker. Regular monitoring meetings of the assessment processes continue at circa six weekly intervals.

Recovery Team

8.15 The recovery team at Wakefield has circa 130 men on its books, they offer support with alcohol, narcotics, gambling and smoking problems. The team currently consists of one Recovery Lead and three Recovery coordinators. There are nine trained peer mentors on the wings.

8.16 In addition to the above, the IMB would wish to acknowledge the hard work and professionalism of all members of the health & social care teams and to thank them for their co-operation during our visits to the units.

9 EDUCATION AND OTHER ACTIVITIES

9.1 Wakefield prison focuses its attention on the significant proportion of its population who have basic skills needs. One of the key targets is to provide support for prisoners to be able to attain levels of ability that enable them to access offending behaviour programmes - a vital necessity when there are a large number of prisoners in denial of their index offence.

9.2 In addition, with a large number of prisoners on long sentences, it has always been imperative for Wakefield to provide progressive educational support over a longer period than would be expected at other establishments and to ensure that the provision is varied enough to sustain prisoners through those extended periods of sentence time.

9.3 The biggest change to education in the reporting year was the transfer from Novus to Milton Keynes College with regard to the provision of Education services in the establishment (and indeed across all High Security establishments). This had the potential for a lot of disruption and significant issues for learners and service users throughout the prison and as a Board we expected to see an increase in applications to us around this.

In the event, it was a very seamless transfer, we suspect due to a lot of hard work in the background, and we did not experience any increase in applications nor any negative prisoner commentary to us. The majority of all existing staff transferred across to the new provider thus ensuring continuity of provision for all of our user population.
Indeed, there appears to have been a very positive response and the Milton Keynes approach has so far been given a ‘thumbs up’ from both staff and prisoners. The Board commends all of the teams involved and will continue to monitor as this year develops.

9.4 The Board committed last year to focus on the additional provision for our long term population and relatively ‘aged’ population and therefore have been pleased to note that the ability for governors to ‘tailor’ the provision to suit the circumstances of each regime and each offender has now been realised with the introduction of PEF (Prison Education Framework), the new commissioning route for education & libraries which replaced OLASS (offenders Learning & Skills Service). Along with the new DPS (Dynamic Purchasing System) and DPF (Direct Purchasing Fund) which both allow for more flexible way for Governors to provide specific services for particular groups of prisoners.

As all of these along with the transfer of provisioning went live towards the close of the reporting year, we expect to report in more detail on outputs in next year’s report but are reassured that there is now provision to meet the individual needs of the prison population and local labour markets at Wakefield.

9.5 The Library continues to be well used, well run, well stocked and pragmatic, purposeful and progressive in its provision of material and service offers and is an area where we continue to receive positive feedback from the prison population.

9.6 The Board continues to have concerns over the recruitment and retention of qualified staff for vacancies in this area as well as the extended length of time it takes to achieve security clearance for appointees. This is not restricted just to this area but applies across a number of other functions as well and still requires Central awareness and intervention to a better level than currently exists. Vacancies and long delays in appointments have a significant detrimental effect on the day-to-day provision of educational courses and service provision and remain the largest factor in complaints raised with the IMB in this area.

Summary

9.7 It is the view of the Board that the education provided is appropriate and meets the needs of the prisoners. The year has seen some transformational new provisioning and commissioning and we are enthused over the opportunity to better provide a ‘fit for purpose’ education regime that can meet the specific individual needs of Wakefield's prisoner population. Gym and library provision is of a high quality and the Board is satisfied that the overall provision for this area is good when observing it via our monitoring visits.

10 WORK, VOCATIONAL TRAINING and EMPLOYMENT

10.1 There are a number of high quality workshops in operation at Wakefield where significant craft and workplace skills are constantly in evidence. In addition there are some excellent tutors and instructional staff with absolute devotion to their area of expertise and the prisoner population they service.

10.2 For the reporting year, the Boards concerns remain as per prior years and to a certain extent are somewhat outside the control of the regime at Wakefield and we again refer them to the Prison Service and ministers for discussion and action.

10.3 Despite the Ministerial response to the 2017/18 annual report year, it remains the case that prisoners are not afforded sufficient true purposeful activity; we saw no extension of the prison service ‘internal market’ at Wakefield during the reporting year, which was disappointing, particularly given the length of tariffs. There remains an urgent need for
additional high quality active and purposeful work at Wakefield for a reasonably large number of prisoners.

10.4 As per education, the largest number of complaints received by the Board in this area, relate to the cancellation of activity largely due to vacancies, sickness etc. related to the challenge of recruiting and retaining sufficient skilled and security cleared tutors/instructional staff to deliver the purposeful activities in the prison. The Board again recommends that there is better national provision to ensure day-to-day disruption within regimes is minimised.

10.5 As a very old prison in terms of fabric and infrastructure, the second highest reason for the cancellation of purposeful activity at Wakefield is related to the on-going maintenance of the facilities. The Board recognises that there is no ‘easy-fix’ to this but leaking roofs, failing machinery, lack of parts etc. can close down workshops for long periods of time and have major impacts upon the prisoner population. At a Central level, thought must be given and provision made for how to deal with such occurrences around the prison estate in a more timely and cost-conscious manner that avoids it being detrimental to the workplace population.

Summary

10.6 It is the overall view of the Board that the scope of work available to prisoners is acceptable and that the allocation of work is fair in so far as the regime at Wakefield is able to offer it. The Board would like to see additional purposeful activity be provided as soon as possible within the scope of the prison service ‘internal market’ and will continue to lobby for additional support on recruitment and building maintenance for the regime here at Wakefield. The Board commends the work of the dedicated team here at Wakefield in terms of getting the best they can from often challenging circumstances.

11 RESSETTLEMENT PREPARATION

11.1 Wakefield's core function as a high security prison with a significant population of long-tariff life-sentenced prisoners requires a substantial focus on ‘settlement’ rather than ‘resettlement’. The prison adopts a multidisciplinary approach to supporting prisoners who must learn to cope with the impact of a long sentence. Rehabilitation and settlement includes interventions from psychology, education and work. A number of prisoners at Wakefield remain in denial of their index offence(s) and this can introduce some unique challenges.

11.2 In the reporting year, xx prisoners were discharged from custody (time served) and xx prisoners were released following a Parole Board decision. This accounts for c. x% of the average population.

11.3 In the year, the Board focused on rehabilitative interventions with time spent around the Assessments and Interventions Centre (AIC) to both better understand its purpose and provision and to satisfy ourselves of its outputs and general progression for the prisoner population at Wakefield.

11.4 In particular, we attended an open day session for all prisoners which showcased twenty minute ‘taster’ sessions of the programmes available including programme content and ways to access them as well as details of how all of them fit within the overarching Pathways to Progression Programme for rehabilitation at Wakefield. Particular attention was given to the opportunities afforded to Wakefield’s ‘denial’ population and the ways in which their additional needs/challenges are accommodated.
11.5 From our observations through the year, it was evident that both the overall provision of programmes and the content breadth of them had increased and improved and that the additional focus for denial prisoners had substantially broadened. Prisoner feedback to us was also more positive and there was an overall expectation of enhanced outputs from both staff and prisoners, which as a Board we commend and will continue to monitor in the year to go.

11.6 The only concerns noted were two fold;

One of the ways to access AIC programmes is via keyworker referral and along with other commentary made elsewhere in this report, the Board is not completely satisfied that this scheme is delivering to its full potential and there was evidence of a lack of referrals via this access route. The Board intends to monitor this particular area more closely in the year to go and has already taken steps to meet with relevant teams to try and accelerate this.

The AIC delivery team should be commended for the breadth and depth of their interventions programme and the Board fully endorses their endeavours to fulfil this. However, again as per other areas, this is frequently hampered by the availability of qualified staff to undertake the workload and there have been a number of vacancies throughout the year with the occurrence probably worsening rather than improving. The Board would like to draw Ministers attention yet again to the need for additional central support on recruitment and retention of all qualified vacancies throughout the prison service.

C Section – Work of Board
<table>
<thead>
<tr>
<th>BOARD STATISTICS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommended Complement of Board Members</td>
<td>20</td>
</tr>
<tr>
<td>Number of Board members at the start of the reporting period</td>
<td>7</td>
</tr>
<tr>
<td>Number of Board members at the end of the reporting period</td>
<td>7</td>
</tr>
<tr>
<td>Total number of visits to the Establishment</td>
<td>351</td>
</tr>
<tr>
<td>Total number of segregation reviews attended</td>
<td>20</td>
</tr>
</tbody>
</table>
### D  Section - Applications

<table>
<thead>
<tr>
<th>Code</th>
<th>Subject</th>
<th>Current reporting year</th>
<th>Previous reporting year</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Accommodation including laundry, clothing, ablutions</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>B</td>
<td>Discipline including adjudications, IEP, sanctions</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>C</td>
<td>Equality</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>D</td>
<td>Purposeful Activity including education, work, training, library, regime, time out of cell</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>E 1</td>
<td>Letters, visits, phones, public protection restrictions</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>E 2</td>
<td>Finance including pay, private monies, spends</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>F</td>
<td>Food and kitchens</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>G</td>
<td>Health including physical, mental, social care</td>
<td>12</td>
<td>9</td>
</tr>
<tr>
<td>H 1</td>
<td>Property within this establishment</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>H 2</td>
<td>Property during transfer or in another establishment or location</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>H 3</td>
<td>Canteen, facility list, catalogue(s)</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>I</td>
<td>Sentence management including HDC, ROTL, parole, release dates, re-categorisation</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>J</td>
<td>Staff/prisoner concerns including bullying</td>
<td>27</td>
<td>14</td>
</tr>
<tr>
<td>K</td>
<td>Transfers</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Miscellaneous</td>
<td>16</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td><strong>Total number of IMB applications</strong></td>
<td><strong>136</strong></td>
<td><strong>91</strong></td>
</tr>
</tbody>
</table>
Fig 4: Trend analysis of applications received by category 2009/10-2018/19