



# Annual Report of the Independent Monitoring Board at HMP/YOI Moorland

**For reporting year  
March 2019 – February 2020**

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## **Introductory sections 1 – 3**

### **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 is situated.

Under the National Monitoring Framework agreed with ministers, the Board is required to:

- satisfy itself as to the humane and just treatment of those held in custody within its prison, and the range and adequacy of the programmes preparing them for release
- inform promptly the Secretary of State, or any official to whom authority has been delegated as it judges appropriate, any concern it has
- report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in 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.

The Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that States designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detainees and to make recommendations for the prevention of ill-treatment. The Independent Monitoring Board (IMB) is part of the United Kingdom's National Preventive Mechanism.

### **2. Description of the establishment**

HMP/YOI Moorland is a category C male resettlement prison which has provision for 1,006 prisoners, with an average population of 954 for the reporting period. The population is diverse and, at the time of writing, includes 32 who are under 21 years, 142 between 21 and 25 years and 59 who are over 65 years, with the oldest being 94.

There are 204 foreign nationals and 340 men convicted of sexual offences (MCOSOs), and, as the result of national reconfiguration plans, it is expected that these two categories will further increase in number.

There are seven accommodation houseblocks. There are 634 single cells and 186 double cells:

- Houseblock 2A is an induction wing, for prisoners other than MCOSOs.
- Two houseblocks, 3 and 4, house solely MCOSOs and are managed as separate units from the rest of the prison, including their education, workshops, healthcare, gym and library sessions. They share religious services in the chaplaincy but are seated separately.
- Houseblock 5A wing is populated with prisoners, many of whom were recently housed in the segregation unit, engaging in the reintegration unit regime. Over the reporting year, the prison has worked with the psychology team to produce a regime which supports prisoners through one-to-one sessions, group interventions, in-cell activities and work/education placements, with the aim of rehabilitation to the standard regime. Houseblock 5B houses full-time workers working towards, or already of, enhanced incentives and earned privileges (IEP) status.
- Houseblock 6B has worked towards being drug-free accommodation, with voluntary drug testing as part of the regime in the prisoner compact.
- Houseblock 7 is used for prisoners over retirement age and younger prisoners who have any special medical or social care needs.

There are 16 operational workshops, two barber shops, two libraries, two education centres, kitchen, gym, chapel, non-residential healthcare centre, resettlement hub, reception area, visits (outside reception and internal hall) and various administration offices. These facilities are used by prisoners to address their needs and develop the skills that will support their progression within the prison regime during their imprisonment, and optimise their successful release – enabling reintegration and reducing reoffending.

Healthcare and education services are commissioned regionally, and are delivered by Care UK and Novus, respectively.

### **3. Executive summary**

#### **3.1 Background to the report**

The COVID-19 outbreak has had a significant impact on the Board's ability to gather information and discuss the contents of this annual report. The Board has therefore tried to cover as much ground as it can in these difficult circumstances, but inevitably there is less detail and supporting evidence than usual. Ministers are aware of these constraints. Regular information is being collected specifically on the prison's response to the pandemic, and that is being collated nationally.

During the period that this report was being collated, the Board was operating remotely both in relation to the prison and intra-Board discussions. Collecting and collating information to inform this report has been limited by not having access to paper information held at the prison but the Board, with the help of prison staff, has obtained relevant evidence where it can, and pulled on information collected during the reporting year from reports, meeting minutes, application statistics, and so on.

Her Majesty's Inspectorate of Prisons (HMIP) inspected HMP/YOI Moorland in February 2019 and their report was published in June 2019. Their findings were considered by the Board and informed, where appropriate, our monitoring.

The prison was a participant in the 10 Prisons Project, which was announced in August 2018, with the aim of 'fighting drugs, improving security and boosting leadership', and ended in June 2019. The additional funding that the project attracted enabled Moorland to increase staffing, improve the detection of drug use and supply (particularly identified by the body scanner used on all new receptions), and reduce violence (see section 4.3).

However, with the withdrawal of funding at the end of the project, a number of staff have been placed on detached duties to other prisons, to decrease prison expenditure and deliver a balanced budget, but there has been some strain on local services. Although the key worker scheme has been successfully operating across the prison, as detailed in our last annual report and confirmed by the HMIP report, it does seem to be one of those services most affected by any reduction in staff (for example, detached duties).

However, this year there has been a renewed focus on outcomes for prisoners, whether in education (see section 7.1), training workshops (see section 7.2), addressing refractory behaviour (see paragraph 5.1.1 and section 5.6) or resettlement (see section 7.5). This can be challenging with a diverse population, a high turnover of prisoners and a high (although reducing) proportion of inexperienced officers. At the time of the HMIP inspection, there were about a third of prison officers with less than one year's experience in post.

## **3.2 Main judgements**

### **How safe is the prison?**

Levels of violence have reduced since last year. There has been a 59% reduction in violence towards staff and a 27% reduction in prisoner-on-prisoner violence. Levels of self-harm have reduced by 37%, and the number of assessment, care in custody and teamwork (ACCT) documents opened by 17% (see paragraph 4.2.1). Board members have generally reported the prison as being calm and ordered when on their duties but there has been a 9% increase in Board applications regarding staff/prisoner concerns such as bullying.

The three deaths in custody have been in hospital and from natural causes (see paragraph 4.2.5).

There has been a reduction in the use of new psychoactive substances (NPS), in part due to the use of the body scanner in reception, the photocopying of all incoming mail and verification of legal mail (see paragraph 4.6.2), and also additional police checks outside the building on visits days.

### **How fairly and humanely are prisoners treated?**

Approximately, 50% of the Board's time is focused on the segregation unit, where prisoners spend most of the days in their cells, except for exercise, showers and telephone calls. Our monitoring has shown that the regime is humane and equitable, with prisoners aware of the reason they have been removed to segregation and receiving appropriate multi-agency reviews (see section 5.2).

The fabric of the prison is mostly of a high standard, with good standards of decoration and cleanliness, and the atmosphere has generally been calmer as the result of a combination of factors – reduced levels of drugs circulating in the prison; no regime restrictions, keeping the prisoners occupied; and the increasing success of the reintegration unit in reducing prisoners’ refractory behaviour, enabling them to safely return to work and normal location (see section 5.1).

The IEP system, which did not appear to be consistently applied, was reviewed and is now used more transparently and fairly, offering prisoners the opportunity to improve their behaviour prior to any IEP penalty (see section 5.6). The focus of the reintegration wing has developed to be forward looking, reinforcing improved, positive behaviour as opposed to an earlier more punitive focus (see paragraph 7.1.5).

### **How well are prisoners’ health and wellbeing needs met?**

The Board found the healthcare provision to be equitable with that in the community, in most cases. However, there is a general concern regarding the provision for prisoners requiring mental health treatment and transfer to a secure psychiatric unit, corroborated by the fact that Care UK felt the need to issue their protocol. This is a national issue and not just unique to Care UK, and the policy is in place to ensure that escalation occurs immediately to all commissioners in order to ensure patient safety, and expedite and share risk.

The key workers offer individual support, especially to prisoners who find prison life difficult, and the chaplaincy offers a range of faith support through services, meetings and one-to-one support in situations such as bereavement or serious illness (see section 5.5).

The equalities group, with Board attendance, meets regularly and now has prisoner representation (see paragraph 5.4.2).

The food provided is varied and of good quality, although some prisoners consider the portions small, and particular consideration is given to serving appropriate food to meet all faith requirements (see paragraph 5.1.6).

### **How well are prisoners progressed towards successful resettlement?**

Although a resettlement prison, Moorland released only one prisoner on release on temporary licence (ROTL) during the reporting period (see paragraph 6.3.3). Therefore, almost all resettlement preparation is delivered within the prison via the resettlement hub and programmes, training workshops, resettlement fairs, family days, and so on (see paragraph 7.5.1). There is the need for more vocational training opportunities to enhance resettlement prospects of the prisoners.

In response to the HMIP inspection, a resettlement needs assessment and strategy was compiled and the subsequent action plan has driven prison delivery in this area. There has been a focus on utilising vocational training and working with the offender management unit (OMU) and resettlement hub partners, particularly the community rehabilitation company (CRC), to put the necessary pre-release and ‘through-the-gate’ work and support in place for successful resettlement. Finding suitable accommodation for prisoners on release remains a problem (see section 7.5).

The limited availability of offending behaviour programmes, especially for men convicted of sexual offences (MCOSO) (some of whom will require transfer to another establishment), has limited progress on sentence plans for some prisoners. Staff recruitment is under way but specialist training will then be required before programmes can be delivered.

### **3.3 Main areas for development**

#### ***TO THE MINISTER***

- As, by definition, any prisoner needing hospital care requires a secure facility, we suggest that the minister should ask the Secretary of State for Health and Social Care to address the national shortage of secure psychiatric beds.
- Can the minister work with the Ministry of Housing, Communities and Local Government to increase the provision of suitable post-release accommodation?

#### ***TO THE PRISON SERVICE***

- Can resources be provided to enable sufficient provision of programmes to allow prisoners to progress towards successful resettlement?
- Can the national daily budgetary allowance for food be reviewed, to ensure sufficient nutrition for all prisoners?

#### ***TO THE GOVERNOR***

- Can the key worker sessions be returned to their former levels, to offer the required support to prisoners on the wings?
- Can consideration be given to increasing the number of vocational and accredited qualifications in the workshops, to enhance prisoner confidence and employment opportunities on release?

### **3.4 Progress since the last report**

Area	Concern raised in 18/19 report to minister/HMP/Governor	Current assessment	Reference in report
Safety (4)	Continuing use of NPS,	Further reduced by use of body scanner on reception	4.1.2 and

	although reducing	and copying of mail	5.2.1
(4)	More distraction activities, in order to reduce the occurrence of self-harm	A variety of distraction activities are given to identified prisoners for use at specific times when they are known to be at their most vulnerable. Self-harm has decreased	4.2.2
(4)	Increase the number of Listeners	The number is now 9, although there have been 10 for most of the reporting period	4.2.4
Fair and humane treatment (5)	The establishment of a prisoner/prison IEP forum in order to improve transparency	The updated IEP policy introduced prisoner IEP forums	5.6
(5)	Lack of PID [prisoner information desk] workers and succession planning for future replacements	There are now PID workers on each houseblock, with prompt recruitment when a vacancy occurs	5.1.1
(5)	Prisoner property being lost on transfer between establishments	Moorland has a complaints procedure in place which escalates to governors after two failures to respond. Reception staff more proactive	5.8.1
(5)	Prisoner property being lost during transfer within the establishment following a cell clearance	Cell clearance policy reviewed and recirculated, with audit trail	5.2.3
(5)	25 IPP [indeterminate sentence for public protection] prisoners did not have a release date	There are 20 IPP prisoners. 2 IPP prisoners were released in the reporting period and another transferred for a relevant offending behaviour course	7.3.7

Health and wellbeing (6)	Virtual segregation transfers may not address the complex needs of the prisoners	Moorland ensures that incoming virtual segregation transfers have a reintegration plan	5.2.7
Progression and resettlement (7)	Moorland does not deliver the Kaizen programme to MCOSOs	Programmes staff are being recruited and retrained. 13 prisoners transferred to complete offending behaviour programmes	7.3
(7)	Facilities in some workshops do not meet health and safety needs	Bricklaying workshop controls the dust by dampening down and sweeping. There is no mechanical extraction of dust	7.2
(7)	Prisoners being released without suitable accommodation because there is a shortage in the community	Increased contracted Nacro staffing and links with housing providers has improved the service but there remains a worrying shortfall of suitable accommodation	7.5
(7)	Increase the frequency of meetings between prisoners and offender supervisors	The implementation of OMiC [Offender Management in Custody] has driven the development of sentence and resettlement planning. Additional prison and probation staff have been employed, and there has been training to deliver a more effective service. There remain some probation staff vacancies	7.3
(7)	Lack of offender managers (OMs), which had a detrimental effect on sentence planning		

## Evidence sections 4 – 7

## **4. Safety**

### **4.1 Reception and induction**

4.1.1 The reception area is busy, with 1,781 prisoners admitted, with their property, over the reporting period, with the majority of admissions from Doncaster and Leeds prisons. Unfortunately, although all escort contractors are advised of the standard working hours, there can be long waits in GeoAmey vans for the prisoners to be processed, and this was of particular concern to the Board during the hot summer period in 2019, when prisoners were found to be waiting for a considerable time in very warm conditions. Arrangements were made for waiting times to be kept to the minimum and water given to the prisoners while waiting.

4.1.2 The introduction and routine use of the body scanner has been integrated into the reception process, with immediate transfer to the segregation unit if a package is identified. Scanning is repeated on a daily basis until the package is handed over or no longer visible. From June 2019 to February 2020, there was an average of 276 scans per month. Some of these were repeated scans on the same prisoner after he had been placed on the segregation unit following a positive scan, but the majority were on new receptions, although there were incidents of identifying packages passed in the visits hall and within the prison. The number of positive scans has been reducing, with an average of 24 per month.

4.1.3 Prisoners are initially housed on the induction wing of houseblock 2, where an induction session is delivered by a peer mentor, or one of the houseblocks accommodating MCOSOs. The remainder of the induction process enables the prisoner to become familiar with the education, training and employment opportunities available to him. There is a varied range of work offered, and allocation aims to be swift but does depend on prisoner skills and the workshop space available.

### **4.2 Suicide and self-harm, deaths in custody**

4.2.1 During the reporting year, there were 477 self-harm incidents, carried out by 86 individuals, which is a reduction in incidents of 37% on the previous year. A total of 485 ACCT documents were opened, which, again, is a 17% reduction on 578 in the previous year.

4.2.2 The reduction in the instances of self-harm can be attributed to a number of strategies introduced by the safer custody department.

- Different types of activity are supplied to prisoners on a case-by-case basis. The form of distraction (for example, jigsaws, painting by numbers, matchstick modelling, puzzles, colouring books) are given at the most appropriate time to increase the chance of preventing self-harm.
- In the two MCOSO houseblocks, the safer custody red band, who is a Listener, conducts daily welfare checks on those prisoners at risk of self-harm. This practice has proved to be so effective that it will be expanded across the whole prison post-COVID.
- A self-harm support group has been established.

4.2.3 Prisoners can contact the Samaritans using their in-cell telephones, at no cost. Segregation prisoners can request a Samaritans telephone.

4.2.4 There are now nine Listeners, with 10 for most of the reporting period. The last training session was in November 2019 and there are now 13 prisoners approved for the next training course.

4.2.5 There were three deaths in custody in the reporting year – all in hospital and due to natural causes. While there were learning points from two of the cases where the Prisons and Probation Ombudsman report has been seen, and actions taken to modify administrative practice, both prisoners received good clinical care in HMP/YOI Moorland.

### **4.3 Violence and violence reduction, self-isolation**

4.3.1 There has been a downward trend in violence towards staff and other prisoners during the reporting year. There has been a 59% reduction in violence towards staff and a 33% reduction in prisoner-on-prisoner violence. This successful reduction in violence may be due to a number of new prison-wide procedures and practices which have been introduced over the last few years, including, most recently, challenge, support and intervention plans.

4.3.2 There were 120 self-isolators during the year.

### **4.4 Vulnerable prisoners, safeguarding**

4.4.1 The two regimes which run in Moorland keep MCOSOs and other prisoners separated for all activities apart from religious services.

4.4.2 Monthly protected characteristics forums are held. These directly inform strategy as reports are prepared for the equality action team.

### **4.5 Use of force**

4.5.1 Use of force meetings are held on a monthly basis. These meetings, chaired by a governor, have members from security and safer custody departments, control and restraint instructors, the healthcare team and the Board. With the use of surveillance video and body-worn camera footage, the Board examines the incidents from the previous month where force was used and addresses the consistency of reports made at the time, to ascertain how each incident was brought to conclusion. A great emphasis is made on the use of de-escalation techniques and the application of guiding holds while restraining and escorting prisoners.

4.5.2 During this reporting period, the prison also introduced the use of PAVA spray, and all officers were trained in its use, including the residual after effects, although it has yet to be used. Officers also had training in SPEAR (Spontaneous, Protection, Enabling, Accelerated, Response), as a form of close-quarter self-defence, and the introduction and use of rigid-bar handcuffs.

4.5.3 The most recent use of force report shows a decline, approximately 30%, from the previous reporting year – from an average of 36 per month in 2018/19 to 27.7 per month in 2019/20. The prisoners involved were mainly 26–35 years old and the majority of occurrences were spontaneous.

## **4.6 Substance misuse**

4.6.1 There have been peaks and dips in the numbers of those who have been reported as being under the influence of unknown substances, with, over the reporting year, 185 individuals reported to the substance misuse service (SMS) team and seen within 24 hours by the SMS duty worker to offer harm reduction, advice and also the opportunity to engage with the service should they require this.

4.6.2 There has been a decline over the past six months in relation to the drug-related incidents reported, which has been linked to the 10 Prisons Project-funded body scanner and the photocopying of mail, both of which have contributed to reducing the amount of psychoactive substances coming into the establishment. However, it is also dependent on what drugs are available in the community. There is generally a spike of illicit substances and hooch over the festive periods. However, prisoners report that they find it harder to obtain illicit substances at Moorland, and that some of them prefer this and have requested to be transferred to the prison for this specific purpose.

4.6.3 Over the reporting year, the main drugs of misuse were NPS but, when this route had been dramatically reduced, the use of prescribed medications such as pregabalin, gabapentin, olanzapine, diazepam, quetiapine, codeine and co-codamol increased. However, with the introduction of the new safer prescribing guidelines, and individuals being caught for concealment of medication, their availability has decreased, increasing their price and reducing their use. Currently, the evidence is not available to track any rise in debt and bullying alongside the price increase but this is an issue that the Board will explore in 20/21.

## **5. Fair and humane treatment**

### **5.1 Accommodation, clothing, food**

5.1.1 During the year, houseblock 1 suffered a level of unsettlement and poor behaviour. However, the staff and prisoners have worked together and achieved a good level of improvement, and this is welcomed by the Board. Similarly, houseblock 5A had a level of teething problems that were highlighted last year and now has achieved a significant level of improvement. Personal officers, individual action plans with development/learning programmes and a greater number of interventions have undoubtedly helped with the improvements. PID workers, recommended by houseblock staff and approved by the security department, are available on all houseblocks and meet as a group regularly with members of the senior management team. They are identifiable by their purple t-shirts and offer advice, appropriate forms and assistance to prisoners requesting their help.

5.1.2 The prison, in line with others, is working on a reconfiguration of the prison population, and once the timeline has been decided it will need to address the changed needs and future management. This ongoing planning continues to give staff uncertainty.

5.1.3 In last year's report, refurbishment and modernisation was reported, and this has continued; each cell now has a toilet privacy screen, window curtains, together with a digital safe for the storage of medication. Replacement of beds continues on a

rolling programme. The provision of in-cell telephones rolled out earlier is working well, and, as before, all calls are strictly monitored, with the facility withdrawn when a prisoner abuses or vandalises the equipment. Repainting is an ongoing project involving the contractor, with prisoners assisting in certain areas. However, their involvement is limited due to the types of paint that are approved for prisoners' use. The prison, however, reports that getting a start date on the re-roofing continues to be a challenge, as is the refurbishment of cell showers in houseblocks 1–4, due to funding issues. Overall, the accommodation is looking better, and this no doubt adds to the continuing positive staff–prisoner relationships that the Board observes.

5.1.4 Food is centrally prepared and cooked, and is distributed to each houseblock by heated trolley. Labour is mainly provided by the prison population, fully supervised by staff. Prisoners working in the kitchen see it as a privileged job and there is a waiting list for this type of work. During the year, approximately 25% of the large catering equipment items have been replaced, although there is often a long wait for repair/replacement by the contractors. There is a continuing problem with the roof that needs replacing.

5.1.5 The provision of prisoners' meals is an important part of the daily regime, and, of the applications that the Board received in this reporting year, only 1.4% relate to food issues, indicating a good level of satisfaction. The Board visits both the kitchen and the houseblocks on a regular basis and this includes visits to the servery, inspection of the local complaints book, talking to prisoners collecting food and making random 'tastings' of the food on offer.

5.1.6 During the year, an electronic weekly menu system was rolled out. Initially, this had teething problems but has now settled down. The Board understands that this has led to staff efficiencies, with the orders being electronically scanned in, and better management of ordering and less waste. Currently, there are around 10 different types of menu being offered to meet religious, social and special diets, and each of these 'non-standard' diets add disproportionately to cost. The national daily budget for food is £2.02, unchanged since 2010, and this appears now to be quite low.

## **5.2 Segregation, special accommodation**

5.2.1 The segregation unit has a total capacity for 28 prisoners, and there is a continuing programme of refurbishment. A complete shower refurbishment and the installation of new beds for all cells is under way. Anti-graffiti paint is also being used on cell walls, and all Perspex windows have been replaced. With the introduction of a new body scanner in reception, the segregation unit receives prisoners showing signs of concealment, who are held until they either reveal the contraband or are scanned clear. This facility has contributed to a marked decrease in drugs and weapons entering the establishment. Over the last year, there has been consistency across the whole segregation process.

5.2.2 Board members are notified very quickly of new arrivals in segregation, and they usually are seen by a member within 72 hours. Prisoners have access to reading material from the library trolley, distraction puzzle packs, colouring books and a radio. More recently, basic educational books have been acquired, giving the longer-staying prisoners the opportunity to continue their education while in the unit. The unit is visited on a regular basis by healthcare, mental health and chaplaincy

staff, and a member of the Board, as well as daily visits by the duty governor. Board members visit all prisoners weekly and check on all documentation in the unit, including the daily log, history sheets and ACCT forms.

5.2.3 The Board has previously expressed concern about the length of time it can take for cell clearances, and the transfer of medication from previous accommodation to the segregation unit. The introduction of a cell clearance protocol has gone some way to improve the situation; however, the Board still received 21 applications from the segregation unit in the reporting period, compared with only 12 in the previous year.

5.2.4 During the reporting period, there was an average of 33 new receptions per month, an increase on the 28 in the previous year, of which an average of six were under restraint, compared with five in the previous year. The average population in segregation was 13, which was the same as in the previous reporting period, and no prisoners were admitted to the unit for their own protection.

5.2.5 A Board member attends segregation reviews twice a week. These are normally attended by healthcare, security, and safer custody staff, the prisoner's key worker and a member of the substance misuse and resettlement teams if appropriate. This provides a multidisciplinary approach to the review process for each individual. At these meetings, discussions particularly focus on the prisoner's mental health and wellbeing. Priority is given to how quickly and safely the prisoner can be returned to normal location, and the reintegration plans are updated. On leaving the unit, prisoners are usually transferred to the dedicated basic wing on houseblock 5A to progress their reintegration, before being placed back on normal location.

5.2.6 Staff in the unit are promoting procedural justice, with staff and prisoners alike, to make the adjudication process transparent and easier to understand. Their efforts over the last year have been rewarded by reaching the finals of the Prison Officer of the Year, as Team of the Year.

5.2.7 The Board is still concerned about the principle of 'virtual' segregation transfers, as this may result in some of the more challenging prisoners being moved around the prison system without their complex issues being addressed in an effective manner. The Board is pleased to note that Moorland makes every effort to address the problems of the 'virtual' segregation prisoners who are transferred to them from other establishments.

5.2.8 For some prisoners with serious mental health issues, the prison does not have the facilities to sustain their wellbeing on a long-term basis. Within the limiting conditions of the segregation unit, the prison staff demonstrate their genuine concern and care for these prisoners, while waiting for the seemingly slow external mental health protocols to be followed. During the reporting period there were 15 prisoners held for over 42 days, with required approval, and 30 ACCTs were opened for prisoners in the Segregation Unit.

5.2.9 The prison carries out adjudications on a daily basis, a sample of which are attended by a Board member on a weekly basis. There were approximately 2,742 adjudications held, compared with 3,926 in the previous period, 172 of which were referred to the police for further investigation, a considerable decrease on the previous year's figure of 394.

### **5.3 Staff–prisoner/detainee relationships, key workers**

5.3.1 The HMIP inspection noted that ‘staff–prisoner relationships had improved considerably and were now a strength’. The prison had reached the required level of trained key workers and they were deployed across the prison. Feedback from prisoners was positive and some, especially those finding difficulties with prison life, valued the dedicated time they were given. There was not a drop in Board applications, which we thought might happen, but Board members found it useful to be able to refer prisoners to their key workers for additional ongoing support.

5.3.2 However, key working appeared to be one of the first casualties of any reduction in staff availability – for example, staff needed for bed watches and staff on detached duties – and this resulted in the success of the rollout across the prison being curtailed. Plans are in place to address this.

### **5.4 Equality and diversity**

5.4.1 The Board has continued its six-monthly review of a sample of redacted discrimination incident report forms, looking at correct and timely processes and appropriately worded responses, which are generally of a high standard. Any concerns, usually about the standard of investigation, are fed back to the lead officer. The lead governor and equalities staff have changed during this year, and procedures have been reviewed.

5.4.2 Equality meetings are held two-monthly and are chaired by the Governor. This multidisciplinary group is made up of representatives from healthcare, the chaplaincy, immigration, the senior management team, the Board and two prisoners. Due to reduced Board numbers, attendance at these meetings has been limited but minutes are always received. We have received 20 Board applications regarding diversity issues, all of which were resolved.

5.4.3 Throughout the year, prisoner forums have been arranged, covering various groups, including LGBT, the prisoners equality council, Travellers, foreign nationals, and black, Asian or minority ethnic. Although small in number, cross-dressing and transgender prisoners are fully participant in the regime, including work. There are equality representative posts on all houseblocks but, due to the high prisoner turnover, continuous recruitment is necessary, with equality and diversity training given to new recruits.

5.4.4 Other meetings and events have taken place:

- a meeting with NHS England to ensure and discuss equality and health provision at Moorland
- wellbeing staff day, resulting in 25 staff signing up for staff support networks
- operational staff have received Pride in Prisons and Probation training
- Mental Health Awareness week
- Traveller History Month
- the LGBT rainbow flag was flown for the first time in the prison.

## **5.5 Faith and pastoral support**

5.5.1 Following retirements last year, the chaplaincy now has a managing chaplain and a Roman Catholic chaplain who are full time. Other members of the chaplaincy operate on a sessional basis and cover Anglican, Buddhist, Hindu, Free Church, Jehovah's Witness, Jewish, Quaker, Muslim, Pagan, Rastafarian and Sikh religions. A vacancy exists for a Mormon appointment.

5.5.2 The chaplaincy is very active in offering both pastoral and faith-based courses. Regardless of faith, it is able to offer support and assistance to prisoners who may be experiencing difficulties with, for example, family life, resettlement, bereavement and any issues in coping with prison life. Over the year, there has been an increase in both Muslim and Roman Catholic attendance at services.

5.5.3 An excellent small leaflet has been produced and is available on induction and on all houseblocks. This welcomes prisoners and staff alike, and outlines briefly the facilities available at the Chapel of St Peter and St Paul, and the multi-faith centre.

## **5.6 IEP**

The Board was concerned that the IEP process was not used in a transparent way, and received applications (twice as many as in the previous year) describing how prisoners were surprised when their level was reduced as they had not received any written warnings, and therefore not had the opportunity to improve their behaviour. HMIP described the IEP regime as punitive in its focus. This was raised with the Governor, and the application of the process was reviewed and now demands more transparency, with written warnings and more opportunity to amend unacceptable behaviour before a drop in regime is imposed.

## **5.7 Complaints**

Frustration with the complaints system was often mentioned in Board conversations with prisoners, and referred to in applications to the Board. The faults of the system, both the apparent loss of complaints and insufficient or delayed responses, were acknowledged by the prison, and the system was reviewed and improved to offer an audit trail and expectation that appropriate responses would be sent within the specified timescale. This does appear to have improved the situation and there have been no Board applications about the complaints system since November 2019. However, the remaining issue appears to be complaints about other establishments (see section 5.8) but this has improved significantly from last year.

## **5.8 Property**

5.8.1 Property loss (within and between establishments) continues to be the greatest category of Board applications (22%), with only three fewer than last year. It causes unnecessary stress when prisoners do not have personal property, such as family photographs. However, the number concerning property loss within Moorland and during transfer/in another establishment are now almost the same. The latter category has been reduced by the complaints clerk escalating the complaint after two 'failures of the other establishment to respond'.

5.8.2 The near doubling of ‘within the prison’ property applications remains a concern. The cell clearance policy has again been reviewed, and the need to work within the specified timescale emphasised. However, with many of the prisoners in double cells, the process is fraught. In addition, it has been apparent that property appears to be transferred/passed on by prisoners without completion of the appropriate paperwork and therefore without property cards being amended. Prisoners have been reminded of the required procedures to enable them to retain such property.

## 6. Health and wellbeing

### 6.1 Physical healthcare

6.1.1 All aspects of healthcare in HMP/YOI Moorland are commissioned by the NHS from Care UK. Overall, the Board continues to be satisfied that healthcare services, including mental health, substance misuse and the arrangements for social care, are of a standard equivalent to those available to the general population.

6.1.2 Requests for general practitioner (GP) appointments are triaged by nurses, some of whom are trained and authorised to prescribe certain medicines. Any cases deemed urgent can be slotted into the next GP clinic, as a number of appointments are ‘embargoed’ – that is, left free for emergencies.

6.1.3 We have continued to monitor waiting times for other routine clinic appointments. These have fluctuated over the year; for example, waiting times for podiatry were up to six weeks over the summer, when there was a big increase in new receptions (176 in July) but issues have been addressed, and by the end of the reporting year all waiting times were within an acceptable range.

Clinic	Max. % not seen within 6 weeks	Current waiting time
Podiatry	60% (June 2019)	5 days
Optician	27.6% (November 2019)	6 days
Dental	33% (February 2020)	22 days
Physiotherapy	33% (February 2020)	13 days

6.1.4 Board reports for the last five years have raised concerns about the cancellation of scheduled hospital appointments due to unavailability of escorts. We are pleased that this year the number of appointments cancelled by the prison can be separated from cancellations for other reasons, and totalled only 14.

Months 2019/20	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Tot
Hospital appts. scheduled	76	76	85	83	78	59	73	74	67	61	81	61	805

Cancelled by prison	0	0	2	2	1	1	0	3	3	1	0	1	<b>14</b>
Percentage	0	0	2.4	2.4	1.3	1.7	0	4.0	4.5	1.6	0	1.6	<b>1.7%</b>

Our reports for the last three years have also raised concerns about the number of internal appointments missed. The 'did not attend' (DNA) rate for GP clinics has shown a marked improvement, averaging 8.7% compared with 13.3% last year. This may be due to the new practice of putting appointments onto the Prison National Offender Management Information System (P-NOMIS), so that each houseblock can print off its own list, as previously prisoners did not always receive their appointment slips.

Months 2019/20	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Average
GP DNA rate %	11.3	9.2	8.9	6.8	4.4	1.8	7.7	2.7	8.8	6.4	21.0	8.0	8.7

6.1.5 The Board received 65 health-related applications this year, compared with 51 in 2018/19. We have analysed these in detail: seven came from one individual and were not related to the quality of health care in Moorland. A number of applications were the result of new legislation on prescribing tramadol, pregabalin and gabapentin, which has meant that some prisoners have had to come off their previous medication; others were unhappy when their prescriptions were reduced after they had diverted their medication.

Issue	No: of apps
• Quality of clinical care in Moorland	23
• Delay in access to care or medication in Moorland	18
• Missed or delayed hospital appointments	8
• Issues about F35 forms	0
• Issues about other establishments	1
• Miscellaneous other	12

There is nothing in the health-related applications this year which causes the Board any concern about the overall standard of care offered to prisoners.

## 6.2 Mental healthcare

6.2.1 We are satisfied that prisoners in Moorland receive a standard of mental healthcare equivalent to that available in the community. We were pleased to receive from the head of mental health a copy of a Care UK policy document, issued in October 2019, about the escalation of delays in mental health transfers. We were concerned to note that: 'delays in transferring mentally ill patients to hospital are so commonplace that it has become accepted that this is the norm and systems developed that assume long delays. ... There has been increasing criticism from the CQC [Care Quality Commission] about the length of time that patients are having to

wait to be transferred to hospital and some patients with very high risks waiting unacceptably long times before being able to access treatment’.

6.2.2 Care UK is to be commended on seeking to establish clear protocols for the escalation of delays. However, this has only become necessary because of the national shortage of secure psychiatric beds and, since, by definition, any prisoner needing hospital care requires a secure facility, we suggest that the minister should ask the Secretary of State for Health and Social Care to address this shortage.

### **6.3 Social care**

6.3.1 Houseblock 7 provides accommodation for prisoners who have mobility problems or who require a high level of social care. There is a good working relationship between Care UK and Doncaster Metropolitan Borough Council to provide sufficient provision and negotiation of discharge plans, taking into account the level of risk posed by the prisoner.

6.3.2 Plans have been recently announced to develop a 10-bedded intermediate care unit within Moorland, with provision for the four Doncaster prisons.

6.3.3 Significant work has been undertaken to support a tetraplegic prisoner, who needed considerable physical support which was not available in an open prison (appropriate to his risk level). He was initially awarded day release, and then five days’ ROTL in February in anticipation of his later release to his mother’s home, on completion of the structural changes needed.

### **6.4 Exercise, time out of cell, gym**

6.4.1 All prisoners, apart from those in segregation, have access to the gym. Attendance at the gym is popular. Prisoners can participate in team sports, planned courses or their own individual fitness programmes. The fabric of the department is well maintained, with motivational and instructive posters on display.

6.4.2 A variety of team sports which meet the needs of the prisoners, such as football, cricket and badminton, take place every day and are well attended. Preparation for the future and the importance of maintaining a healthy lifestyle is encouraged with the provision of the gym skills and first-aid courses.

6.4.3 Individual fitness programmes take place in the well-maintained and -equipped gym. There are a number of planned sessions which meet the needs of individual prisoners, such as remedial and recovery PE and sessions specifically designed for older prisoners.

### **6.5 Drug rehabilitation**

6.5.1 The number of patients engaging with the SMS has increased from last year, to a total of 2,459 patients, with 2,852 appointments completed. These figures do not include those individuals who were presenting as being under the influence of unknown substances who were seen and chose not to engage with the service.

6.5.2 Four prisoners were placed onto multidisciplinary management plans relating to their problematic NPS use. The management plans involved managing the individual in segregation, for their own safety, for a period of time, allowing the individual a significant period of time substance free and to engage with their

substance misuse worker on a daily basis. Reintegration plans were embedded for when they returned to normal location, preventing them from overdosing.

6.5.3 Currently, there are 76 individuals prescribed opiate substitute therapy (methadone), with 115 being the highest number over the past year, with some taking the opportunity to reduce their dose while in custody. Moving forward, a specialist GP has been employed to provide two sessions a week, to undertake reviews and assess individuals' clinical needs.

6.5.4 The SMS has also run blood-borne virus screening on houseblock 1, which was a drop-in session, and 49 volunteered to be screened. The SMS has also supported the Hepatitis C Trust and its peer educator sessions, with the aim of eradicating hepatitis C and engaging individuals in treatment earlier.

6.5.5 Harm reduction and overdose drop-in sessions have also been arranged, whereby the team has delivered naloxone training and basic advice on what to do if someone collapses or is suspected to have overdosed, and how to deliver cardiopulmonary resuscitation to individuals, with training using resuscitation dolls. This was run to both populations of the establishment, with a good uptake, and allowed individuals to express their concerns, or to talk about overdoses that they have witnessed or have had themselves, enabling the SMS team to be able to work with and support these individuals.

## **6.6 Soft skills**

6.6.1 Parenting courses are delivered by the Prison Advice and Care Trust (PACT) as part of their family-focused interventions. The library also offers Storybook Dads recording sessions (see paragraph 7.1.7). There are support groups for certain prisoners (for example, LGBT individuals), peer mentors and Listeners.

6.6.2 Although art courses were withdrawn from the Novus curriculum owing to a reduction in the funding budget, there are plans to restore it to the MCOSO education options, and to develop it in the reintegration unit.

6.6.3 The mutual aid group, Narcotics Anonymous (NA), has been running in Moorland for the past three years. However, over the past year there has been an increase in the number attending. For the general population, weekly meetings take place during Thursday evening association in the multi-faith room, and each fortnight members of NA, who are in recovery themselves, facilitate the meetings, with prisoners in the group leading the other sessions. In the past six months, NA has been introduced to MCOSO, with an increasing attendance (8–20 prisoners). It is from these meetings that individuals have increased their motivation to reduce their opiate substitution therapy or to look at attending residential rehabilitation on release.

## **7. Progression and resettlement**

### **7.1 Education, library**

7.1.1 Education is provided by Novus. During the reporting year, there has been a stable regime and very little teaching time has been lost, although there was a significant reduction imposed on the education budget this year. After a prisoner goes through induction and the employment pathway has been decided, education and/or employment is usually found within an acceptable time span.

7.1.2 There are 236 permanent places in education, with English and mathematics a priority, and attendance is greater than 83%. On a number of occasions, Board members have noted in their rota reports the interest and enthusiasm shown by the prisoners. Those with identified learning difficulties can engage in education as support is provided by learning mentors.

7.1.3 The nature of the course determines the venue, so outreach courses take place within the workshops, such as cleaning, employability and food safety courses, while others are taught in one of the two education centres or the reintegration unit.

7.1.4 Numeracy; literacy; English for speakers of other languages; and information, advice and guidance courses are taught in both education centres. Prisoners are also able to access Open University courses.

7.1.5 Prisoners held on the reintegration unit have access to many in-cell (for example, 'reducing the boiling point'; substance misuse) and group-based (for example, coping with change; anger, aggression, stress, low mood and anxiety; dealing with debt; maintaining a healthy lifestyle) interventions. Staff are also trained to deliver Timewise to suitable prisoners, and 18–25-year-olds are encouraged to engage in the Choices and Changes package.

7.1.6 During the reporting year, budget issues resulted in some reorganisation within the education department, which resulted in the loss of the art course. However, after a brief hiatus, there are plans for its return, with an increased cohort to include self-isolators and re-integrators.

7.1.7 The two libraries, provided by Doncaster Council, are popular with the prisoners as they supply books (including audio, easy-read, large print) in a number of languages, DVDs and general education support. Two book trolleys are provided for the segregation unit and specialist books can be obtained upon request. The library also houses the Shannon Trust, Reading Ahead and Storybook Dads, which are supported by mentors and two dedicated officers.

## **7.2 Vocational training, work**

7.2.1 Vocational training and nationally recognised qualifications are available in warehousing, forklift truck driving, barbering, bricklaying, industrial cleaning, braille and catering, although level 2 national vocational qualifications in carpentry and catering were lost in the budget cuts this year. The needs of the prison community are supported by prisoners carrying out catering, decorating, gardening, cleaning, laundry and waste management. Prisoners are also employed as librarians, PID workers, healthcare representatives, Listeners and peer mentors in houseblocks, classrooms and workshops. Employment is also available in the production and

recycling of plastics, tailoring, television repairs, Ministry of Defence netting, CD recycling, breakfast packs, and packing.

7.2.2 Attendance at work is, on average, 90%, which is greater than last year. There are 730 workplaces. During the reporting year, there were only a minimal number of stoppages as a result of the inability of the prison to cover the annual leave of the instructors. Recognition of achievement and effort through certification and small monetary rewards, in some workshops, has become an established and successful method of encouragement.

7.2.3 Over the reporting year, a number of Board rota reports have highlighted a lack of work in some workshops due to the irregular availability of materials. In some instances, it has been noted that at these times boredom ensues, and the experience of work is not always a positive one.

7.2.4 Maximising the number of employers who can provide employment within the prison is a major focus and new employers are constantly being sought. Employment fairs are viewed as an important part of a prisoner's journey as they are an opportunity to bring soon-to-be-released prisoners and employers together with the purpose of raising awareness about future employment and support on release. One was held in October 2019, and good links with Jobcentre Plus through the resettlement hub provide employer links for future events.

7.2.5 Lack of workshop space deters some employers from pursuing their initial interest. It is not possible to build more workshops; however, the available space is constantly under review, to ensure that it is being used effectively. During the reporting year, reorganisation of two workshops resulted in 10 more workplaces being created. External employers who provide work inside the establishment are DHL (canteen), Ministry of Defence (netting), Tess Amm (recycling plastic) and Interhatch (packing chicken grit). New employers are constantly being sought, in order to bring work into the prison to broaden the prisoner experience or support employment on release.

7.2.6 Boosting confidence and self-esteem is recognised by the prison as an essential step on the road to employment after release. This is enhanced for targeted prisoners via motivational talks, drama workshops and groupwork led by employers. A drama course called 'Bird on a Wing' was led by a theatre company called 'Imagine If'. This not only provided the three-week course experience, but also promised two years of support towards gaining employment on release. Trackwork has also worked with groups of prisoners to offer support on release.

### **7.3 Offender management, progression**

7.3.1 The OMU is currently staffed in accordance with the OMiC model, albeit with two temporarily promoted staff members and probation staff vacancies. All staff have received, or are currently completing, their required development training and qualifications.

7.3.2 The arrival and implementation of the OMiC model, which was praised by HMIP, was a significant challenge for the prison with regard to sentence planning,

bringing together the Prison Service and Probation Service. The OMiC model was implemented in two parallel phases; one was the implementation of key work, and the other the new case management model. Preparation for the OMiC go-live date of October 2019 required a vast amount of engagement and planning.

7.3.3 The transitional period was extensive and required ongoing and effective control to ensure that the process was implemented and embedded, and that risks were managed without impact on staff, prisoners, their families or victims while the ongoing business and day-to-day service continued to be delivered. This required partnership working through engagement with groups of prisoners, staff, departments and external agencies, to ensure that awareness and assurances were shared and partner agency working established.

7.3.4 Expanding staff knowledge, personal development and continued support through the immediate transition is ongoing as new staff arrive in post. This is alongside the monitoring and reviewing of individual cases and caseloads to ensure that high-risk cases sit at the appropriate grade, and that staff workloads are balanced and reasonable. The arrival of the prison offender managers (POMs) and change from OM to the POM was a huge achievement and a challenging task, due to the speed of implementation.

7.3.5 Delivery of offending behaviour courses – Horizon, Resolve and the Thinking Skills Programme – has been limited due to staff availability, with a maximum of 112 completions expected for this year. There are suitable prisoners waiting for the programmes but not staff to deliver them. This interferes with achieving sentence plans and, ultimately, decreasing the risk of reoffending.

7.3.6 There was the need for continuity and stability in processing licences and categorisation reviews so as not to have an impact on performance and offenders pathways. The revised home detention curfew (HDC) framework and arrival of the digital service into region was designed to speed up and increase the opportunities for prisoners to secure HDC. During the year, there were 405 releases on HDC and 35 deportations.

7.3.7 There are 20 prisoners with indeterminate sentences – one life sentence, one discretionary life sentence, 17 IPP and one Section 94 – all beyond their tariff end date. During the reporting period, two IPP prisoners were released and there were five parole board hearings, with an additional two adjournments and one deferral.

## **7.4 Family contact**

7.4.1 The prison acknowledges the importance of family contacts and has developed its own services and those contracted to PACT, which employs a family engagement worker. PACT also acts as the point of contact for child protection, delivers training to prison staff on effective family engagement and delivers four different family-focused courses to prisoners.

7.4.2 In-cell telephone access across the prison, except for those in the segregation unit and houseblock 5A, has enhanced the availability of family calls for prisoners

and reduced their cost. In addition, it allows for family to leave voicemail messages, which can be accessed, using the prisoner's voicemail number, from any telephone in the prison. Prisoners can then leave a reply.

7.4.3 The visits facilities have been updated during the year, with new furniture in the internal visits hall and a refurbished children's activity area. This is regularly staffed by PACT volunteers, providing a much better child-friendly environment for the visiting families.

7.4.4 Traditionally, the prison has run family days for a number of years. Prisoners can apply to attend and, if approved, have the opportunity provided by prison staff and PACT to enjoy games and activities as a whole family and share a meal together. Feedback from one day included 'the children had the opportunity to spend quality time with their Dad which was meaningful and special'.

## **7.5 Resettlement planning**

7.5.1 HMP/YOI Moorland is supported by contracted services (Nacro, CRC, Novus Works and Jobcentre Plus) in delivering resettlement services. Between 1 April 2019 and 31 March 2020, the establishment released an average of 106 prisoners per month. Resettlement plans complement both the offender assessment system (OASys) and sentence planning systems that exist within the prison. Positive relationships have been developed with key outside providers which enable a more cooperative approach to casework.

7.5.2 The resettlement hub identifies prisoners within 12 weeks of release, who are encouraged to attend resettlement appointments. These are booked through the P-NOMIS system, and prisoners are invited up to three times. If they fail to attend, a letter is sent for the prisoner to confirm whether he would like to use their services.

7.5.3 If required, the hub starts sourcing accommodation by contacting community housing agencies. A total of 247 prisoners were discharged with no fixed address, and an additional 248 were given appointments with a housing provider but with no specific accommodation being identified pre-release. The prison is unable to retrospectively insert any accommodation provision on P-NOMIS. The remaining 632 prisoners were released with accommodation, which included approved premises, permanent housing or short-term accommodation.

7.5.4 Data and information are stored by the resettlement partner, with comments added to P-NOMIS and information passed on to POMs and community offender managers (COMs) to ensure accurate information sharing and storing. The partners work together and refer prisoners they are working with among themselves, if required – for example, for a prisoner to make benefit claims. With regard to family contact, the establishment has PACT and GENUS, which offer prisoners an intervention to support a more positive family environment on release.

7.5.5 With regard to employment, the establishment is measured on the prison performance tool for the number of prisoners who have employment six weeks after release; the delivery requirement is 15%. Available data from April 2019 to January 2020 highlights that 35 prisoners, out of 812 releases, were in employment six weeks after release, which correlates to 6% of prisoners who were released with a

licence period. Work is continuing with prisoners and potential employers to increase this figure towards the target. The establishment does not release any prisoners on ROTL, so there is no opportunity for external pre-release experience.

7.5.6 The SMS has good links with community services in South Yorkshire and has arranged gate collection for those who are at high risk of overdose wherever possible, which has resulted in a massive increase in retention into treatment. Not all areas are able to provide this facility but communication between key workers and community teams is undertaken to highlight any risks.

7.5.7 As well as mutual aid (see paragraph 6.6.3), the SMS arranged a recovery event attended by over 50 prisoners in the main sports hall, when agencies from South Yorkshire attended and offered information about the services that they provide in relation to substance use and accommodation.

7.5.8 In relation to other clinical interventions, over the past year, four individuals have been released on naltrexone (opiate antagonist/blocker), four on disulfiram (does not allow the individual to drink alcohol without feeling unwell) and eight on acamprosate (which reduces cravings in those who drink alcohol). Nine individuals have been successfully assessed, and funded, for residential rehabilitation programmes straight from custody over the past year, a significant achievement and encouraging that individuals are entering recovery.

## **8. The work of the IMB**

The Board at HMP/YOI Moorland has well-established procedures for compiling 3x4-month rotas for:

- monitoring via visits to all areas of the prison – the frequency of these visits reflects any concerns – for example, doubling the visits to the reintegration wing while relevant programmes and regimes were being developed
- attending segregation reviews (2x weekly) and visiting all segregation prisoners on a weekly basis
- responding to applications within seven days of receipt
- being ‘on call’ for serious incidents.

Members opt for areas of special interest and attend relevant meetings, when possible. Board members continue to contribute to prison officer entry-level training induction.

Board meetings are held monthly, usually with Governor attendance, and the Board development officer arranges relevant training sessions, delivered by prison staff, which are much appreciated. Several members of the Board visited HMP Doncaster, privately run by Serco and the main feeder prison for Moorland, particularly to look at the digital technology used by prisoners on the wings. We also hosted a visit by Hatfield IMB.

Two IMB recruitment campaigns have been run throughout the year, with a lack of success, for a variety of reasons. Plans are under way for a joint campaign for the four South Yorkshire IMBs.

## Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	7
Number of Board members at the end of the reporting period	7 (including 1 sabbatical)
Total number of visits to the establishment	396 (excluding 'other' meetings – for example, visits by Chair)
Total number of segregation reviews attended	104

## Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	5	11
B	Discipline, including adjudications, IEP, sanctions	10	20
C	Equality	10	5
D	Purposeful activity, including education, work, training, library, regime, time out of cell	30	9
E1	Letters, visits, telephones, public protection restrictions	14	23
E2	Finance, including pay, private monies, spends	11	9
F	Food and kitchens	6	5
G	Health, including physical, mental, social care	51	65
H1	Property within this establishment	20	39
H2	Property during transfer or in another establishment or location	59	37
H3	Canteen, facility list, catalogue(s)	8	9
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	41	45
J	Staff/prisoner concerns, including bullying	32	35
K	Transfers	4	21
L	Miscellaneous, including complaints system	26	10
	Total number of applications	327	343

The anomalies in the table have been discussed at the Board meetings throughout the year:

- B - the IEP system was raised with the governors and has been reviewed and recirculated during 2019/20.
- D - the significant reduction in this category probably reflects the increased staffing and full regime operating throughout the year.
- H1 - the delay in cell clearance (especially double cells) on removal to the segregation unit or HB5A was raised with governors, and further guidance circulated to staff to address H1.
- K - a number of these complaints relate to the lack of transfers for MCOSOs, who need to complete specific courses to address their sentence plan



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