



# Annual Report of the Independent Monitoring Board at HMP Dartmoor

**For reporting year  
1 October 2019 – 30 September 2020**



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## **Introductory sections 1 – 3**

### **1. Statutory role of the IMB**

1.0.1 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.

1.0.2 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.

1.0.3 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.

1.0.4 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**

2.0.1 HMP Dartmoor is a category C training prison for up to 640 adult male prisoners.

2.0.2 The prison is situated in Princetown, on the western edge of Dartmoor National Park, eight miles from Tavistock and 16 miles from Plymouth (the nearest mainline railway station). Access is difficult, with very limited public transport. The local environment is harsh and can be particularly bleak in the winter months.

2.0.3 The prison comprises six residential wings (known in Dartmoor as 'tors'), a care and separation unit (CSU), a healthcare suite, a chapel, and education facilities and workshops. In addition, there is a large gym, a well-equipped kitchen and other facilities to support the life of the prison. A fully integrated smoke-free regime is in operation; all wings are integrated and accommodate mainstream and vulnerable prisoners or prisoners who have committed sexual offences in single cells. The prison and prisoners are supported by contractors and charities, either working in the prison or visiting on a regular basis.

2.0.4 The buildings are leased from the Duchy of Cornwall, and the Prison Service is responsible for their upkeep. Notice of termination of the lease has been given, and the prison will close in 2023 unless the lease is renewed.

2.0.5 Most of the buildings in the prison are old but kept clean, built of granite and prone to damp. There are very well maintained and attractive garden areas. The prison is one of the major employers in the local area.

## **3. Executive summary**

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

3.1.1 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. Since March, the Board has met once a month via telephone conference, and some members have been able to access the prison even during the total lockdown, although only in a very limited way, to collect prisoner applications. Remote monitoring has taken place, and we are grateful to the prison staff for assisting in this. In July, more members were able to visit the prison, for longer periods of time, but not all services or staff were up and running and therefore there is less detail and supporting evidence than usual. Ministers are aware of this. Regular information is being collected specifically on the prison's response to the pandemic, and that is being collated nationally.

### **3.2 Summary**

#### **Main judgements**

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

3.2.1 We find that the prison is generally a safe place. Lack of capital investment over recent years raises a number of safety issues but, to its credit, the prison manages to work around the issues that arise. *(See section 4 for supporting evidence)*

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

3.2.2 The prison works hard to ensure that prisoners are treated fairly and humanely. For long periods of the time that this report covers, the prison was subject to a severe lockdown because of the COVID-19 pandemic. For a while, prisoners had less than 60 minutes a day out of their cell, with some telling us that this reduced often to 30 minutes. Although this time has now been extended, we worry that, should there be a need to return to a further lockdown, the mental health both of prisoners would be put at further risk. *(See section 5 for supporting evidence)*

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

3.2.3 Healthcare staff continue to do a difficult job under trying circumstances. Mental health issues are increasing and the Board worries that the support structures needed are not there. Continuity of staff in positions poses challenges, and because of the pandemic, access to outside services has been restricted. *(See section 6 for supporting evidence)*

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

3.2.4 Dartmoor is not classified or funded as a resettlement prison. Before lockdown, and within the resource limitations of a training prison, staff tried hard to give prisoners adequate preparation for release. During lockdown, it was even harder to ensure adequate preparations. Since the regime has been relaxed, these preparations have started to be put back in place, but the Board remains concerned that some prisoners are being released into very temporary accommodation, with only limited support being offered. *(See section 7)*

3.2.5 The Board is of the opinion that it would be better if prisoners due for release were transferred in adequate time to a resettlement prison, where they can be given the full resources and advice that Dartmoor is unable to provide. *(See section 7)*

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

3.3.1 The continued uncertainty as to the future of the prison is having a real impact on the prison. Lack of capital spending on the infrastructure is affecting the quality of life in the prison. The uncertainty over the future of the prison is affecting staff morale. *(See paragraph 6.3.2)*

3.3.2 Urgent consideration needs to be given to making sure that the prison continues to be fit for purpose until its planned closure in 2023, and that prisoners are treated equally alongside others in the prison estate. Areas of concern include investment in the living conditions *(see paragraph 5.1.2)*, in-cell telephony *(see paragraph 7.4.3)*, the resettlement budget *(see paragraph 7.5.1)*, dealing with substance misuse *(see section 4.6)* and the laundry *(see paragraph 5.1.5)*.

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

1/ The planned closure of HMP Dartmoor in 2023 is having a significant impact on prisoners' experience and staff morale. When will the minister provide clarity on the closure plans for the prison, so that detailed plans can be made for the future of all stakeholders?

2/ Will the Minister ask the Prison Service to work with other Government Departments to put in place processes to ensure that prisoners with severe mental health issues do not spend extensive periods in the CSU and are transferred rapidly to facilities better able to care for them?

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

1/ How will the Prison Service ensure that prisoners are not disadvantaged by the lack of investment in Dartmoor in the lead-up to the proposed closure in 2023?

2/ There continues to be a serious level of substance misuse at HMP Dartmoor. What additional measures are planned to address this, particularly in the absence of capital investments such as portals and itemisers?

4/ Will the service take steps to ensure that, in the future, prisoners at HMP Dartmoor who are due for release are transferred to a prison with facilities and resources to prepare them properly for their future?

## **TO THE GOVERNOR**

1/ The Board has been told that an equalities officer will be back in post and the equalities action team (EAT) functioning again monthly by November. What practical steps are planned to ramp up support to older and disabled prisoners, and reinstate the prisoner support groups, including the over-50s, Black, Asian and minority ethnic (BAME), and Gypsy, Roma and Traveller groups?

2/ What planning is under way to support prisoners in the shielding unit through the trauma of eventual unshielding?

3/ The Board understands that it is now planned to bring facilitators to every wing under the Dialogue Road Mapping (DRM) scheme. However, the nature of DRM means that not much is heard about it, except by word of mouth. Can ways be found of raising its profile in the prison?

4/ What further measures can be taken to ensure that body-worn cameras (BWCs) record all use of force incidents within the prison, and that any lessons are taken from the recordings?

5/ What measures can be taken to improve the library service under the current contract, and particularly to reinstate interlibrary loans and a more regular stock refresh?

6/ What more can be done to ensure that in-cell education packs are credited towards prisoner qualifications in the post-Covid-19 world?

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

- The continued restrictions on the budget and lack of capital investment in HMP Dartmoor are still having an impact on all sections of prison life, and this is a major theme in the latest report.
- The Board's findings before lockdown were that the lack of investment in buildings, staff and equipment were still resulting in a shortage of work placements for the prisoners and increased their time in cells and on the wing.
- There has been little progress on the speed of repair to essential equipment in the kitchens and laundry, and those repairs that are carried out continue to be costly and to take months to achieve.

- There is some progress on staff shortages; however, there can still be some occasional impact on other areas – for example, observation, classification and allocation, and the post room.
- Although the situation is improved, there is still inconsistency regarding the use of BWCs.

## **4. SAFETY**

4.0.1 Safety is the responsibility of everyone in the prison and is overseen by the safer custody team. A safety intervention team monitors and supports vulnerable prisoners, and the Board receives regular minutes of their weekly meetings, which are attended by a number of departments, including healthcare, the chaplaincy, the offender management unit (OMU), residential services, psychology, education and programmes.

4.0.2 The safer custody team regularly provides quantitative data which covers all aspects of safety within the prison. The Board thanks the team, which is always available to talk to members and address any questions. Conversations with prisoners and observations by Board members on rota leads the Board to believe that the prison is a safe environment

4.0.3 Stopping the reconfiguration of the prison's population under COVID-19 restrictions has presented challenges for managing safety, including a change in the profile of prisoners, which continues to have an impact on the day-to-day running of the prison. Examples here include more mainstream prisoners and more younger prisoners. *(See also paragraph 6.3.6)*

### **4.1 Reception and induction**

4.1.1 The Board monitored the reception and first night procedures and found them to be detailed and appreciated by prisoners. Before the restrictions to the regime, Board members would attend the weekly induction sessions held in the gym, to inform prisoners about the work of the IMB. These sessions are currently not taking place, but the Board hopes that they can be reinstated in the near future.

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

4.2.1 There were three deaths in custody during the year, including one that took place in hospital. The coroner's reports are not yet available.

4.2.2 During the course of the year, the Board has monitored the number of self-harm incidents and found there to have been no substantial increase. There were 12 self-harm incidents reported in March and 16 in August, in 15 of whom prisoners were on an open assessment, care in custody and teamwork (ACCT) document. Five of these prisoners had a history of self-harming, on between 50 and 182 occasions. The Board has noticed an increase in the number of prisoners transferring to the prison on an open ACCT during the year.

4.2.3 The Board is pleased to report that a debt advisory committee has been established through the safer custody team, to manage the welfare of prisoners in debt. The Board hopes that this will have a positive impact on the number of self-harm incidents linked to drug debt.

4.2.4 The use of distraction packs increased during the year. The Board is impressed with the quality of the material, some of which is highly individualised.

4.2.5 The Dialogue Road Mapping (DRM) scheme has proved useful, although knowledge of the scheme appears low. The Board welcomes the planned introduction of DRM facilitators on to the wings.

4.2.6 The important role of Listeners in helping prisoners who are isolating and lonely has been challenged by the significant increase in demand for their support as the lockdown has progressed. In August, there were 91 callouts for 22 individuals. The stress placed upon individual Listeners has increased, as their number has dropped during the course of the reporting year, to four. The prison has recently put forward plans to train new Listeners over a 12-week period. In the meantime, to reduce the stress on individual Listeners, the service is only being provided five days a week, with Samaritan's telephone calls covering the remaining two days.

4.2.7 During the lockdown period and the restricted regime, Board monitoring indicated an increase in mental health issues. This was evidenced by feedback from prisoners, officers and healthcare staff; incidents of self-harm; and a sustained increase in the use of Listeners.

4.2.7 During lockdown, a safety and decency questionnaire was issued by the prison. The 26% response rate to this questionnaire was disappointing. It is difficult to draw too many conclusions because of this low return and the generalised nature of the categories included. However, the published conclusion to the survey included comments such as: 'residents were undecided that since lockdown began, the staff have asked them how they are coping', and 'on average, residents agreed that the prison is a safe and decent place'. Similar conclusions were drawn with regard to mental health and contact with family and friends. The Board would like to see prisoner feedback further developed and a new survey issued as the prison's move towards easing lockdown continues.

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

4.3.1 On average, over the course of the reporting period, three prisoners have been self-isolating at any one time, and towards the end of the reporting year one individual has been isolating for 149 days. Safer custody representatives work with them and see them daily, and the Board is satisfied that these self-isolators are treated fairly.

4.3.2 During the reporting year, there has been an increase in the number of prisoners on challenge, support and intervention plans. Currently, eight prisoners are monitored, including the prisoner who has been self-isolating for a long period. This increase may potentially be influenced by the changing population of the prison, with more younger mains prisoners, and is an area that the Board will continue to monitor closely.

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

4.4.1 Prisoners who present safeguarding risks are discussed at the weekly safety intervention meetings. A snapshot taken in August showed that 26 ACCT documents were opened that month and 14 were closed. All post-closure interviews were conducted. Members of the Board have attended a small number of ACCT reviews and monitored ACCT documents. At the beginning of the reporting year, safer custody staff identified some concerns regarding incomplete care maps and unsigned documents. The small sample we analysed suggests that improvements have taken place in the completion of ACCT documents.

## **4.5 Use of force**

4.5.1 In this reporting year, on average, there have been 14 violent incidents per month, with a spike in March/April of 22. This was the period that the prison was beginning to be, and eventually was, subject to a strict lockdown regime. Most of these incidents are spontaneous, with BWCs used in approximately 70% of cases. The Board has expressed concern that BWCs are not being used to capture all incidents and intends to continue to monitor and encourage senior managers to introduce measures that ensure that all planned use of force incidents are recorded on BWCs.

4.5.2 A sample of one week in August showed that BWCs were used on 29 occasions, covering issues such as restraint, searches, movement to the CSU, and for prisoners who were 'under the influence'. It was noted that the section on the recording form identified as 'outcomes following viewing' was not completed. The Board believes that it is important that the outcomes are recorded and urges better record-keeping and follow-up on these recording forms by the prison.

## **4.6 Substance misuse**

4.6.1 The Board continues to be concerned with the level of substance misuse and the impact that this has on the prison regime, with frequent wing lockups necessary prior to the COVID-19 lockdown. Since the lockdown, the daily briefings seen by the Board regularly report that several prisoners were found to be under the influence of drugs or alcohol (hooch). More capital investment in such items as portals and itemisers is needed to help combat this rise.

4.6.2 The Board welcomes the plans being put in place to combat substance misuse, including more regular cell searches and the use of dogs to reduce the incidence of drugs and alcohol in the establishment and the number of mobile phones in use among prisoners. The Board also welcomes the work being carried out with the police to investigate and attempt to reduce the supply of drugs entering the establishment either via over-the-wall drops or by correspondence, including Rule 39 mail.

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

5.0.1 The monitoring by the Board indicates that the prison places a strong focus on treating all prisoners fairly and with humanity, as described below.

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

5.1.1 In its regular visits, the Board has generally found the accommodation on the residential wings (known locally as ‘tors’) to be maintained in a tidy condition, with some wings achieving a particularly high standard of cleanliness. The prison’s programme of wing redecoration initiated in the previous year has assisted this impression and is supported by the few (nine) complaints in this category received by the Board. Of these, none have been about a lack of cell furniture.

5.1.2 The number of cells out of use, and the length of time they have remained so, has increased from four in October 2019 to a peak of 11 in December; and was also at 11 in January and June. Eventually, Gov Facility Services Limited managed to get the figure back down to five at the end of the reporting year. Two cells on D5 landing were recorded unusable in December and were not available for use again until July. Ingress of water into the prison’s fabric has been a significant factor in these cells being out of action. Extended winter rains always present particular problems with dampness in some cells, slippery corridors in places and, in one major downpour, flooding in reception and plant rooms. A number of residential areas continue to require significant capital expenditure in order to achieve basic infrastructure improvements.

5.1.3 For a significant period of the COVID-19 lockdown, when a very restricted regime was in operation, some prisoners working in the kitchen and laundry complained to us that they had only 30 minutes out of cell daily in which to take a shower and make telephone calls. This was, in time, rectified, but the Board continued to receive some complaints from those working in the recycling unit and in the kitchens that they had insufficient time to shower post-shift before collecting their meal; this was despite an instruction to staff to ensure additional provision.

5.1.4 There have been improvements to some shower areas in respect of shower doors and privacy screening, but the limited space for accessing the showers in both Down tor and Granite tor precludes the use of individual doors and compromises decency. The Board noted that the prison has taken steps to provide a modesty cover over the wide louvred vent on Down tor, where some shower occupants could be seen from the landing above.

5.1.5 The availability of wing-based washing machines and driers in working order has improved but the Board continues to be concerned that the replacement of the two main laundry boilers has been postponed. A failure results in a reliance on laundry being transported to another prison, with consequent delays in getting it back and possible losses.

5.1.6 The kitchen has delivered a varied menu throughout the year, including during the COVID-19 lockdown. Special menu provision is made during religious festivals

such as Ramadan and Eid. We commend this, as it has been achieved despite there being a reduced kitchen staff and prisoner team from March to August.

5.1.7 The quality of meals is regularly observed through rota visits, and a spot check of comment books on the wings reveals infrequent adverse comments. Any such comments received are responded to by a member of the kitchen staff on a regular basis. This view is supported by our discussions with prisoners during food service and the relative lack of complaints to the Board concerning food.

5.1.8 There were significant failures of equipment in the kitchen during the year, including dish sterilisers and freezers, and delays in repairs to the copper-plate boilers. This put a strain on kitchen staff, and very occasionally limited the menu choice. A delay in outside contractors coming into the prison, both pre- and during lockdown, did not help in ensuring speedy or timely repairs.

## **5.2 Segregation, special accommodation**

5.2.1 The Board attends the CSU every week and sees all the prisoners detained there, as well as attending some good order and/or discipline (GOOD) boards and a sample of adjudications. We commend the level of professionalism and care shown by CSU staff towards prisoners.

5.2.2 During the course of the reporting year, the Board was obliged to raise at a regional level the length of time that two particular prisoners were held in the CSU. While accepting that transfers during lockdown largely stopped, it was totally unsatisfactory that one prisoner spent over 140 days in isolation, and that another, with severe mental health issues requiring a specialist transfer, also spent over 100 days there. The Board recognises the work and efforts of staff and governors to help the two prisoners while in isolation, and the attempts made to try to effect a transfer to an establishment more suited to their needs. The Board was disappointed that it took so long for the transfers to happen.

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

5.3.1 Board monitoring in the prison has, in the main, shown good staff/prisoner relationships and good working practices. In general, there is a high level of respect and support shown to prisoners by staff.

5.3.2 The Board welcomed the attempts before lockdown to increase the number of key worker sessions. Before lockdown, 67% of prisoners were seen regularly by their key workers. These sessions stopped during lockdown. A safety intervention team was established to provide support to prisoners who were deemed vulnerable or in distress.

5.3.3 The Board hopes that now key worker sessions are slowly restarting, they ramp up rapidly. Reported figures in the middle of September showed that just over 25% of meetings between prisoners and their key workers were happening again, and there is expected to be a further increase in key work when the prison progresses from level 3 to level 2 of the HMPPS Exceptional Delivery Model.

## 5.4 Equality and diversity

5.4.1 The prison's own population tracker, as at August 2020, reported 230 prisoners who self-declare a disability on reception; 30 foreign nationals, of 18 nationalities; 542 prisoners self-declaring as heterosexual/straight and 21 declaring as gay or bisexual. There were 44 declaring as BAME and nine as Gypsy/Roma/Traveller Community. These figures have remained broadly constant throughout our reporting year.

5.4.2 Prison managers and staff generally place a high priority on fair treatment and equal access to services for all prisoners. However, based on our monitoring, on a few occasions this is not always achieved, although few prisoner complaints have been received by the Board in these areas this year. Where the Board has had concerns and has raised them with managers, action has been taken. For example, the prison obtained books and educational material in Portuguese to better support a Brazilian prisoner during lockdown, and an iPad was provided for him to speak with his family.

5.4.3 The challenges for wheelchair users accessing their cells and other areas of the prison as reported in the last year's annual report remain, although the prison has introduced a number of improvements. These include: the introduction of access ramps to the exercise yard on Fox tor, a greater number of medical beds across the prison where needed, lightweight wheelchairs to more readily evacuate prisoners with mobility issues in the event of fire, and an activity and reading room for older prisoners on Fox tor.

5.4.4 As also raised last year, the Board is pleased to see a rise in the number of prisoners supporting their less physically able fellow prisoners. Prisoners who receive this care support from other prisoners (called 'buddies'; see also paragraph 6.4.1) continue to be extremely appreciative of their support. It has continued in a somewhat modified form during lockdown.

5.4.5 In the first half of the reporting year, and before the lockdown, the prison was also taking a number of other positive steps to develop further equality and diversity needs, including developing a new day centre and reviewing the availability of activities for older prisoners in the diversity centre. It also continued with prisoner-led forums to represent the interests of communities, including the over-50s, Travellers and those from a BAME background.

5.4.6 A new equalities officer was appointed and began to develop staff communications and training on equality and diversity. In March, the EAT was relaunched under the sponsorship and chairing of the head of residence. The intention was that after the March meeting it would meet monthly. With lockdown, later in March, all of these prisoner forums ceased, in line with national guidance. The EAT stopped meeting and the equalities officer shielded. The EAT Chair also retired and responsibility for diversity and equality reverted back to the head of safer custody. The new day centre was completed but only stayed open for a very short period before closing under national lockdown guidance, with the volunteers who helped run the centre unable to come into the prison owing to restrictions and/or shielding

5.4.7 Work to review activities for older prisoners in the diversity centre was also suspended. The Board commends a number of positive initiatives that continued, including a management-driven initiative to better meet the needs of the BAME community and a commendable prisoner self-help initiative on Fox tor to foster welfare and provide access to library books in a COVID-19-safe manner.

5.4.8 The prison receives a small number of discrimination incident report forms (DIRFs) – only 10 were discussed at the EAT meeting in March. Before lockdown, a system was introduced whereby the response to 100% of these forms was independently quality assured by an external specialist. An initial review by the specialist highlighted that there were prison training needs in the handling of DIRFs. However, the lockdown intervened and work here was suspended. The Board applauds plans to resume this important work over the coming months as the prison progressively unlocks.

5.4.9 As at September 2020, there is a regional equalities lead in position and we are informed that the EAT will restart monthly meetings in October. The prison is planning for an eventual move to COVID-19 stage 2, and this will see the day centre open with a focus on prisoners with dementia, as well as the activities for older prisoners being reviewed and expanded. The Board commends the steps planned by the prison to further develop the embryonic current management of the equality and diversity agenda.

5.4.10 At the start of lockdown, Fox tor was dedicated as a shielding unit for a small group (26 prisoners) of the most vulnerable prisoners. Board members have spoken to most of these prisoners, and they tell us that they feel well protected and supported by staff. Several have told us that reduced mobility from the lockdown has had an adverse impact on their health.

5.4.11 Weight gain during the lockdown, particularly among older prisoners, has also been reported, with an average weight increase across the shielding wing of 1.5 stone. The healthcare team has started a healthy eating project with this group to help resolve this matter.

## **5.5 Faith and pastoral support**

5.5.1 Prisoners frequently expressed to the Board their appreciation of the faith and pastoral care they received during the first half of the reporting year. This included the positive support that they received from the chaplaincy from day to day and during times of personal or family crisis. One prisoner referred to this as a 'lifeline' in difficult times.

5.5.2 Pastoral and religious support has continued to be provided to prisoners of all faiths. The Board has heard many positive prisoner comments – for example, 'a very engaged chaplaincy and a committed team'. The Board is pleased to note that, since April, a sessional imam has been in weekly to support Muslim prisoners. The chaplaincy also supported ACCT and GOOD reviews, as well as prisoners being discharged.

5.5.3 As the prison entered lockdown, chapel-based group faith activities ceased, with the chaplaincy providing support to in-cell faith activities. Other chaplaincy activities continued, despite the team being reduced by one member of staff. Board members' discussions with prisoners and staff have highlighted that the chaplaincy has continued to work hard to support the pastoral needs of prisoners, with all prisoners continuing to be visited regularly.

5.5.4 As at September 2020, the chaplaincy reported to the Board that they continue to be extremely busy. Discussions with chaplaincy staff indicate that they deliver by hand, and support prisoners with, 185 items of in-cell faith material a week, as well as providing substantive support to a further 59 prisoners each week. In September, they also attended 37 ACCT reviews, which is particularly important now that, the Board understands, mental health staff do not attend every review. The chaplaincy supported 18 prisoners in the lead-up to discharge.

5.5.5 The chaplaincy has also introduced compassionate video visits to funerals, arranging for a provider to stream funerals so they can be watched by prisoners on video-links. Six funerals have been supported this way.

## **5.6 Incentives and earned privileges (IEP)**

5.6.1 It has not been possible to observe how the new rewards and incentives scheme, introduced on 13 January, has been received, as the regime required in response to COVID-19 precluded the use of basic privileges and the general activities that would have opened up the track to rewards and privileges.

## **5.7 Complaints**

5.7.1 The Board monitored a small sample of prison complaints by virtue of looking at applications it received in which the prisoner mentioned previously using the complaints system. In general, the Board found the responses to be of an adequate quality.

5.7.2 A total of 134 applications were submitted to the Board during this reporting year, against 339 the year before. Before the lockdown, the number of applications was running at roughly the same level as in 2018/19. However, since the prison started to move to a stage 3 regime, the number of applications submitted has remained low.

## **5.8 Property**

5.8.1 The Board was pleased to note a significant reduction in the number of complaints regarding loss of property within the prison (down from 22 to four). There were still, however, 12 complaints concerning property lost immediately prior to, or in transit to, the prison, although the number has reduced substantially as transfers have been greatly reduced during the COVID-19 pandemic. The facility for prisoners to bring more of their personal kit with them in transit, rather than have it sent separately owing to space limitations, has helped reduce the number of complaints during the current year.

## **6. Health and wellbeing**

### **6.1 Healthcare: general**

6.1.1 Care UK was responsible for healthcare and social care provision during the reporting year. Mental health services are sub-contracted through the Devon Partnership Trust, substance misuse services through the Exeter Drugs Project, and dental services through Time for Teeth, whose contract was increased by an additional day per week from 1 January.

6.1.2 Board monitoring of healthcare provision during the first half of the year took place through rota visits, attendance at the local delivery and quality meetings (chaired by the Governor or Deputy Governor), patient forum results, attendance at GOOD boards, regular reports from the head of healthcare, and the monitoring of daily and weekly management information. Since March, monitoring has been restricted to regular written reports from the head of healthcare, supported by limited rota visits, conversations with prisoners and data from other reports.

6.1.3 The COVID-19 pandemic has had a profound impact on the delivery of healthcare services. The prison has faced the challenges of enforcing social distancing and regime restrictions. Her Majesty's Prison and Probation Service, and Public Health England worked closely to tackle these challenges and introduced a shielding and cohorting strategy in April. This strategy responded to the need to shield vulnerable prisoners, and to prevent possible infection spread from new arrivals into the prison, as well as isolating people with symptoms of COVID-19. The Board observed that good supportive relationships were sustained throughout between the healthcare teams, prison officers and prisoners, and that the strategy was successfully implemented.

6.1.4 To support the prison, healthcare staff provided 'vulnerable packs' to all eligible patients, and these detailed the decisions that had been taken and the measures in place to mitigate against the risks of COVID-19 in Dartmoor.

### **6.2 Physical healthcare**

6.2.1 Non-critical health services were reduced or stopped with the COVID-19 lockdown. Healthcare service provision remained on an urgent and emergency response basis. Some services – for example, three-weekly MPCCC reviews with GPs for cancer patients – continued, to ensure that any urgent care, such as blood monitoring and long-term condition monitoring, was reviewed and undertaken as required. Remote workers were able to use video conferencing.

6.2.2 Dental provision and waiting times continue to be a challenge. At the start of lockdown, dental services moved to urgent and emergency treatment only. Owing to the COVID-19 restrictions, some aerosol-generating treatments are not currently available, and, as a result of the cleaning regime, fewer people can be seen. Emergency treatment is prioritised but waiting times for routine appointments have increased. The target is six weeks, against a current performance of 20 weeks, although this is probably no worse than in the community.

6.2.3 It has been difficult for the Board to collect full prisoner feedback on healthcare provision during the lockdown, and the patient forum has been suspended pending the regime recovery moving to level 2. However, patient surveys were reintroduced by healthcare staff in June and July. The Board has been told that no formal complaints have been registered by the healthcare department, with a maximum of five healthcare concerns being raised per month, all of which were dealt with face to face, with no escalation outside the department.

### **6.3 Mental healthcare**

6.3.1 Throughout the period of lockdown, the Board's discussions with prisoners and staff highlighted that the levels of distress had risen, and this has resulted in an increased number of anxious and troubled prisoners. The short length of time spent by prisoners out of their cells each day during lockdown cannot have helped. Based on the prison's survey, 51% of prisoners self-reported mental health concerns from the extended periods of lock-up, with only one third of these saying that they were being supported.

6.3.2 At the same time, during its visits the Board also noted that, despite the evident continued professionalism, the resilience of prison staff is being affected as increased pressures due to the restrictions on the regime affect their wellbeing. Many of the Board's conversations with staff increasingly turn to the uncertainties arising from the planned closure notice and the impact that this, and anxieties about coping with COVID-19, is having on their morale and mental health.

6.3.3 The incidence of open ACCTs has had an impact on staff providing mental health services, with qualified staff regularly attending up to eight ACCT reviews a day. This has affected their availability to complete both triage assessments in agreed timescales and other caseload interventions owing to the demand on clinical time. However, the Board is pleased to note that attendance at initial and caseload ACCTs is prioritised because of the high-risk nature of this client group.

6.3.4 During the first few months of the pandemic, several of the mental health team worked remotely, including the mental health team leader and the principal psychologist. During this period, the team operated an emergency service only, but continued to offer support for individuals presenting with a high risk of harm to themselves, and those who have a severe or enduring mental illness (psychosis/bipolar disease) and other complex needs. Throughout lockdown, the team continued to complete face-to-face triage assessments for all referrals and managed caseload support, but, as a result of reduced activity, there is some backlog in referral and treatment.

6.3.5 The 'improving access to psychological therapies' service was not able to operate during emergency procedures, in the first months of the pandemic. In place of normal provision, affected prisoners were offered self-help in-cell support packs, and graded self-help and distraction packs are available for individuals with cognitive difficulties (such as dementia or a learning disability). The Board noted the effectiveness of these packs, as demonstrated by conversations with prisoners in receipt of them.

6.3.6 Prior to the COVID-19 outbreak, the focus of HMP Dartmoor was to receive prisoners who were eligible for a training prison. With the lockdown in place, the prison also received prisoners who would more normally be sent to reception and resettlement prisons. There has been an increase in the number of younger, violent prisoners with behavioural problems that are either undiagnosed or do not meet the threshold criteria for a diagnosis and subsequent treatment. There has also been a significant increase in the number of prisoners with personality disorders and more serious enduring mental health conditions.

6.3.7 The current commissioning agreement does not cover cognitive behavioural therapy, trauma working, talking teams, some group work or counselling. The Board has strong concerns that this commissioning agreement means that the mental health unit is not adequately resourced to provide the full range of services that are now required and cannot, therefore, totally meet the needs of the prison under its developing profile. A further concern is the possible lack of support necessary to prisoners across the prison, particularly in the shielding unit, where they have been, by necessity, more isolated.

## **6.4 Social care**

6.4.1 Social care packages are provided as necessary – typically, during the reporting year, to four to six prisoners at any one time. Prisoner ‘buddies’ provide support and non-intimate care to approximately 30–40 prisoners, and their work is highly valued and carried out to a very high standard. They receive training from RECOOP (Resettlement and Care of Older Prisoners).

6.4.2 The day centre for older prisoners (Two Bridges) was opened in late 2019 and provides activities for 15–20 prisoners on a rota basis. It has had a favourable response from those who use it but has been closed since the start of lockdown. Another positive development, welcomed by the Board, has been the introduction of a common room on Fox (shielding) for which provides library facilities, gym equipment, seating and an area for talking and reading.

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

6.5.1 As noted elsewhere in this report, the Board felt it necessary to raise serious concerns around the amount of time that prisoners had out of their cells during lockdown. This was especially difficult for older, infirm prisoners, who were unable to complete all their personal tasks in the time available to them. Despite subsequent increases in time out of cell, prisoners continue to tell us that it is still a struggle to complete exercise, showers, family calls and household chores.

6.5.2 The prison has reacted, where possible, to maximise time out of cell as it moves out of lockdown, including the introduction of open-air gym sessions. The Board has observed the work carried out by gym staff to ensure that prisoners have had access to some physical activities. Out-of-cell jobs, like cleaning and kitchen work, were rotated among prisoners during lockdown, to assist in ensuring that they were treated equally. Distraction packs have also been distributed widely to prisoners, and the Board has received positive feedback about them.

## **6.6 Drug rehabilitation**

6.6.1 The substance misuse services team (Exeter Drugs Project) continued its work through the lockdown period. Work in groups was not possible but the unit provided information drops to patients, as well as giving individual support. The Board hopes that as partners move back into the prison, group work will restart.

## **7. Progression and resettlement**

### **7.1 Education, library**

7.1.1 Education courses and library services are provided by Weston College. When the prison went into lockdown at the beginning of March, all education courses were stopped, and library services suspended. As the lockdown progressed, some in-cell course packs became available. A total of 38 different subject packs were on offer, including two that might be of particular interest for the transgender prisoners. The course length ranged from a few hours to at least 12 weeks, and the prisoners we spoke to generally felt that the quality was high.

7.1.2 The Board regrets, however, that the design/content of the courses made them unsuitable to be used towards City & Guilds accreditation. New foundation packs are expected soon, and, with some additional classwork when possible, these will be used to gain accreditation. The number of prisoners for each of these part-classroom, part in-cell courses will be limited to six, and Weston College will provide tutor support via telephone calls, letters or notes to those on the course. These limited numbers working towards accreditation might be expected to cause frustration on the part of the prisoners, and the Board will be monitoring this going forward.

7.1.3 At the time of writing, the library has not yet reopened for prisoners to visit, although an innovative service that is 'COVID-19 friendly' is provided, with a weekly list of books for prisoners to choose from being placed on each wing.

7.1.4 Before lockdown, prisoners regularly expressed concern to the Board about the lack of books available. This particularly affected prisoners studying on Open University courses, but there were general issues about the lack of stock refresh, and inter-library loans not being available under the new contract. The Board would like to see these issues addressed urgently when the library service is fully back up and running.

### **7.2 Vocational training, work**

7.2.1 All vocational training and work stopped under lockdown, except for those prisoners working in critical services, including the kitchen, laundry and recycling. As restrictions were eased, cleaners, gardeners and wing orderlies began to move around the prison. As at September 2020, approximately 20% of the industries workforce is classified as 'essential' and 41% of the total prisoner workforce is physically working again.

7.2.2 When the prison moves to stage 2, industries are predicted only to be able to support, in a COVID-19 friendly manner, 42% of the pre-COVID-19 industry workforce. The Board shares managers' concern that it will be important that more prisoners are offered the opportunity to work or train.

7.2.3 The Board notes that no prisoner has received lower wages because of the lockdown, and completion of an in-cell course generates a £2 payment.

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

7.3.1 Prison offender managers (POMs) have been present within the establishment from the start of the pandemic. However, they continue to work from home on approximately two days per week, focusing their attention on face-to-face meetings only on the days when they are in the establishment.

7.3.2 As part of the Offender Management in Custody model, there is a requirement that a comprehensive handover between the POM and the community offender manager (COM) takes place. The practice is that the COM contacts the POM (six to eight months prior to release) and a release planning meeting is set up. The service user is invited to that meeting, along with any other significant persons involved, including the key worker. Owing to COVID-19, these release planning boards are happening virtually, via telephone or video conferencing. The Board has been invited to observe these meetings when they restart in the prison.

7.3.3 Monitoring by the Board indicates a potential issue with prisoners being told where they will be staying on their first night after release. Although there has never been a requirement for administrative staff to advise prisoners of where they will be living – this being a matter between the prisoner and their supervising officer – the expectation is that a prisoner must receive this information, with a confirmed address, 28 days prior to their release date. At the moment, the OMU cannot guarantee that this is always the case, especially if accommodation in approved premises is trying to be accessed.

7.3.4 OMU staff have told the Board that the recording of where prisoners are to be resettled on release has not been consistent, and the Board notes the work of the acting governor in the OMU in trying to improve the recording of such details.

### **7.4 Family contact**

7.4.1 In line with the national guidance when the regime changed in March, all visits to the prison from families and friends ceased. Under the stage 3 regime, visits have been able to take place, but under severe restrictions. Only five open visits can take place per session, which has a reduced length of one hour, and all visitors, prisoners and staff have to wear masks. If all spaces are filled, the maximum number allowed is 21 visitors, including children, and seven prisoners, two of whom will be in closed conditions, so giving a total of 28 people for the room. No contacts are allowed between prisoners and visitors, and no refreshments are provided. Based on our discussions with prisoners, they understand why these restrictions are needed, but find these arrangements highly frustrating in many cases, particularly given the potentially long travel times for just a one-hour visit.

7.4.2 The introduction of Purple (video) Visits was welcomed by the Board, and the Board congratulates staff on establishing them. The Board hopes that when the regime relaxes, these virtual visits will continue, as prisoners tell us that they are highly valued. The Board hopes that money could be found to invest in the equipment necessary to have the scheme expanded. The service could also be particularly useful to prisoners with families overseas.

7.4.3 HMP Dartmoor, unlike many other establishments in the prison estate, has no in-cell telephones, and prisoners have to use on wing telephones that are, prisoners tell us, often unreliable. The prison does its best to report and fix these telephones, but problems with the equipment do occur. Some of the telephones have poor privacy shielding. The Board believes that this arrangement is unsatisfactory, particularly at a time when family communications and support are even more important than usual.

7.4.4 The prison has strived to support shielding and reverse cohorting prisoners in maintaining family contacts through access to mobile phones.

7.4.5 Two Board members participated in the national 0800 applications scheme, whereby applications to an IMB could come confidentially via a central call centre run by Board volunteers. However, no prisoner in Dartmoor has made use of the service, probably because Board members have been able to handle IMB applications, even at the height of the lockdown.

## **7.5 Resettlement planning**

7.5.1 Dartmoor is not a resettlement prison and does not receive a full separate budget for resettlement activities. Limited funds are found by reallocation from other budgets, which is unsatisfactory. This continues to be of concern to the Board, given that more than 220 prisoners were released back into the community directly from the prison over the course of the reporting year. The Board commends the good work that managers do in managing releases in this difficult situation, but additional central funding is essential to provide full resettlement activities if prisoners are to continue to be released directly.

7.5.2 From a snapshot covering the releases that occurred during a four-week period starting in September, the following was found:

- Eighteen prisoners were due for release.
- Five of these were released at sentence expiry date, and so there was no supervision and no requirement to arrange accommodation.
- Three were post-recall releases and all had been assigned to approved premises.
- Three were home detention curfew (HDC) releases, so the prisoners provided the address.
- Three had a conditional release date, where the prisoners provided addresses and those addresses were approved.
- There were 83 prisoners on the waiting list for transfers. This included those who had been recategorised and expressed a preference for an open prison (category D) and those who have applied for moves for family reasons. This figure does not include those prisoners who *should* have been moving, or had moved, to a resettlement prison.

7.5.3 Transfers from other establishments largely stopped during the initial COVID-19 measures, with any transfers on an exceptional basis having to be approved by Gold Command. The Board remains concerned that too many category D prisoners

face a long wait to be transferred to a facility designated as appropriate in their sentence plans, although it is pleased to report that in the very last weeks of our reporting year, the backlog was beginning to be addressed.

7.5.4 The Board also notes with concern the 22 prisoners serving an indeterminate sentence for public protection, who are all well over their tariff.

## 8. The work of the IMB

8.1.1 Despite the difficulties caused by the COVID-19 pandemic, Board members have worked hard to complete all the requirements of an IMB this year. Up until March, Board duties continued to be split between rota visits and addressing applications from prisoners on a weekly basis. When lockdown occurred, a system was rapidly established to deal with prisoner applications (complaints) remotely, and we thank the staff of the business hub for helping us set up this confidential system.

8.1.2 However, it quickly became apparent that Board members who were not shielding could enter the prison safely, observing all health requirements, during the lockdown. So, for a period of three months, one member a week would visit the prison for a short time to pick up and deal with any applications, although, as noted previously in this report, there were very few of these. These visits also enabled members to continue to observe conditions on the wings over a short period of time.

8.1.3 Each Board member has had an area of special interest. For much of this reporting year, that work has taken place remotely, and the Board thanks the prison for putting in place systems to enable members to continue our monitoring role. Where possible, members have also spoken to prisoners, to provide an independent view of the prison.

8.1.4 Issues of concern have been raised with the Governor through rota reports issued weekly. Before the stage 3 regime, the Board Chair had monthly meetings with the governors, and during the lockdown has had weekly telephone conversations with the Governor or Deputy Governor. The Governor, or her Deputy, has also attended the monthly Board meetings for a dedicated agenda item, and has continued to be open and frank in addressing the Board's concerns.

8.1.5 Except during the stage 3 regime, Board members have attended most segregation reviews, and appreciate the efforts of prison managers to facilitate reviews to be attended by teleconference during stage 3. Board members have raised no issues with the conduct of these reviews. Less regularly, Board members have attended adjudications and ACCT reviews. Those ACCT reviews that have been attended have been found to be carried out well.

8.1.6 Developing a Board that is truly representative of the community continues to prove elusive. One member of the Board has taken temporary leave of absence as he has returned to work in the NHS.

### Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	11
Number of Board members at the end of the reporting period	11
Total number of visits to the establishment	302
Total number of segregation reviews attended	47

### Applications to the IMB

<b>Code</b>	<b>Subject</b>	<b>Previous reporting year</b>	<b>Current reporting year</b>
A	Accommodation, including laundry, clothing, ablutions	10	9
B	Discipline, including adjudications, IEP, sanctions	27	4
C	Equality	9	0
D	Purposeful activity, including education, work, training, library, regime, time out of cell	23	14
E1	Letters, visits, telephones, public protection restrictions	60	18
E2	Finance, including pay, private monies, spends	24	1
F	Food and kitchens	5	2
G	Health, including physical, mental, social care	20	19
H1	Property within this establishment	22	4
H2	Property during transfer or in another establishment or location	40	13
H3	Canteen, facility list, catalogue(s)	2	2
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	24	11
J	Staff/prisoner concerns, including bullying	50	28
K	Transfers	23	9
L	Miscellaneous, including complaints system	0	0
	<b>Total number of applications</b>	<b>339</b>	<b>134</b>



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