



Annual Report of the Independent Monitoring Board at HMP The Verne

**For the reporting year:
1 August 2019 – 31 July 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, to every part of the prison and 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

2.1 HMP The Verne is located on the Isle of Portland in Dorset. The Verne citadel, constructed using convict labour between 1857 and 1881, served as Portland Harbour's primary defensive fortification. Many of the original buildings are still in use today and are Grade II or II* listed by Historic England. These buildings require constant upkeep and attention, and cannot be altered without permission.

2.2 The Verne operated as a prison from 1949 until October 2013. It then housed an adult male immigration removal centre from March 2014 until December 2017. On 28 July 2018, The Verne reopened as an adult training prison, operated by Her Majesty's Prison and Probation Service (HMPPS), for men convicted of sexual offences (MCOSO).

2.3 The certified normal accommodation is 580; the operational capacity is 570. The residential accommodation is described in section 5.1

2.4 Weston College provides most of the vocational and educational opportunities. These include tiling, bricklaying, a barber shop, art and music. These activities are housed in the older 'casemates' part of the estate, as are the library and multi-faith centre. Sports facilities include:

- a well-used multi-use games area
- a larger playing field for football and cricket
- a well-equipped gym and other outside exercise equipment.

2.5 Apart from education and healthcare services (the latter provided by Care UK; see section 6), HMPPS is responsible for all services currently offered in the establishment. The Board understands that discussions have continued with Dorset Council regarding the increased level of social care that an ageing population will necessitate. The local authority has occasionally provided profiling beds and other equipment.

2.6 Voluntary organisations regularly entering the prison before COVID-19 included: Age UK, Circles UK, the Samaritans, the Shannon Trust, Narcotics Anonymous and Alcoholics Anonymous.

3. Executive summary

3.1 Background to the report

This report presents the findings of the Board for the period 1 August 2019 to 31 July 2020. For the first half of that period, the Board was able to collect evidence from observations made on visits, scrutiny of prison records and of data, informal contact with prisoners and staff, and prisoners' applications. For most of the latter half, the COVID-19 restrictions meant that Board members did not enter the prison.

Monitoring was restricted to telephone conversations with staff from across the institution. The Board also held weekly telephone conferences, with the Governor or a senior staff member taking part. On occasion, wing staff assisted a prisoner to join in these conferences. In addition, our clerk was able to give the Board her first-hand impression of conditions within the prison. She was also able to copy to members the (few) applications collected during this period, and to pass on the Board's responses. Although the prison participated in the scheme whereby a prisoner could use an 0800 telephone number to speak to a Board volunteer, who recorded his/her complaint, the Board received no applications via this route.

In February, The Verne received an unannounced visit from Her Majesty's Inspectorate of Prisons (HMIP). The Board Chair was invited to speak to one of the inspectors, and was pleased to have the opportunity to express the Board's satisfaction with the way that prisoners are treated. This report seeks to demonstrate the basis of that general approbation.

3.2 Main judgements

How safe is the prison?

The Verne is very safe when compared with other prisons. Instances of violence are rare. Disruptive behaviour is dealt with promptly and firmly (see sections 4.3 and 4.4).

How fairly and humanely are prisoners treated?

The prevailing ethos established at The Verne is one of mutual respect between staff and prisoners. The perceived fairness and humanity of the regime is perhaps best indicated by the widespread acceptance of the various restrictions which COVID-19 has necessitated.

One area where conditions may fall short of humane lies in the lack of 24-hour provision for a small but growing number of frail, elderly prisoners who need regular personal care (see paragraph 6.3.2).

How well are prisoners' health and wellbeing needs met?

The Board is satisfied that, with the exception of the oldest and frailest prisoners, the health and wellbeing needs of the majority are adequately met (see sections 6.1 and 6.2).

How well are prisoners progressed towards successful resettlement?

The Board recalls that The Verne was set up as a training, rather than a resettlement, prison. It is aware, however, of the efforts being made to prepare the small number of prisoners (see paragraph 7.5.1) who are released directly into the community. While the shortage of category D places continues to make such releases an unfortunate necessity, the Board does not consider the resettlement provision to be satisfactory.

3.3 Main areas for development

TO THE MINISTER

The Board invites the minister to allocate appropriate funding for the 24-hour social care facility described in paragraph 6.3.2.

TO THE PRISON SERVICE

The Board urges HMPPS to expedite the establishment of the 'community hospital' described in paragraph 6.1.4.

If it is necessary to discharge residents from The Verne directly into the community, then appropriate funding for a resettlement programme should be made available.

TO THE GOVERNOR

The Board encourages the Governor, in collaboration with Dorset Council, to review the long-term provision of social care needs for the current population.

3.4 Progress since the last report

The last report commented on what the Board saw as 'work in progress' in the first year of operation of the new prison. That progress has continued, and the Governor and his colleagues are to be congratulated on having firmly established a regime in which prisoners feel safe and respected, and are able to engage in a range of purposeful activities. With hindsight, the 'teething troubles' can now be seen as no more than that. Indeed, they seem trivial when compared with the challenges posed by COVID-19.

During what was only the second year of the new prison's operation, the Board became increasingly concerned about shortcomings in the care of the most elderly and vulnerable prisoners. It is possible that insufficient attention was devoted to this issue during commissioning. The Board believes that the consequences of an ageing population are now recognised and can be adequately addressed.

Evidence sections 4 – 7

4. Safety

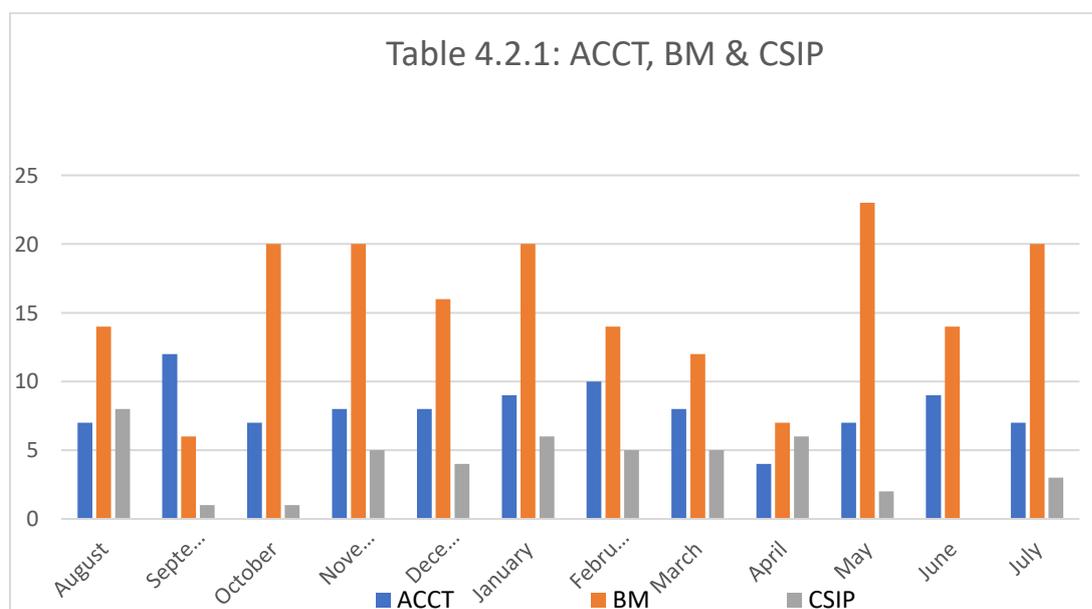
4.1 Reception and induction

4.1.1 New prisoners are escorted to the reception building. From the outset, they are introduced to the prison ethos of respect for the individual, coupled with intolerance of antisocial behaviour. Their property is collected and stored. They may be given a light meal. Those with obvious mobility issues may then be transferred to Dorset wing (see below) but the majority move to the induction wing, Chesil (C1). Since COVID-19, new arrivals have been required to spend 14 days in isolation on a designated spur on this wing.

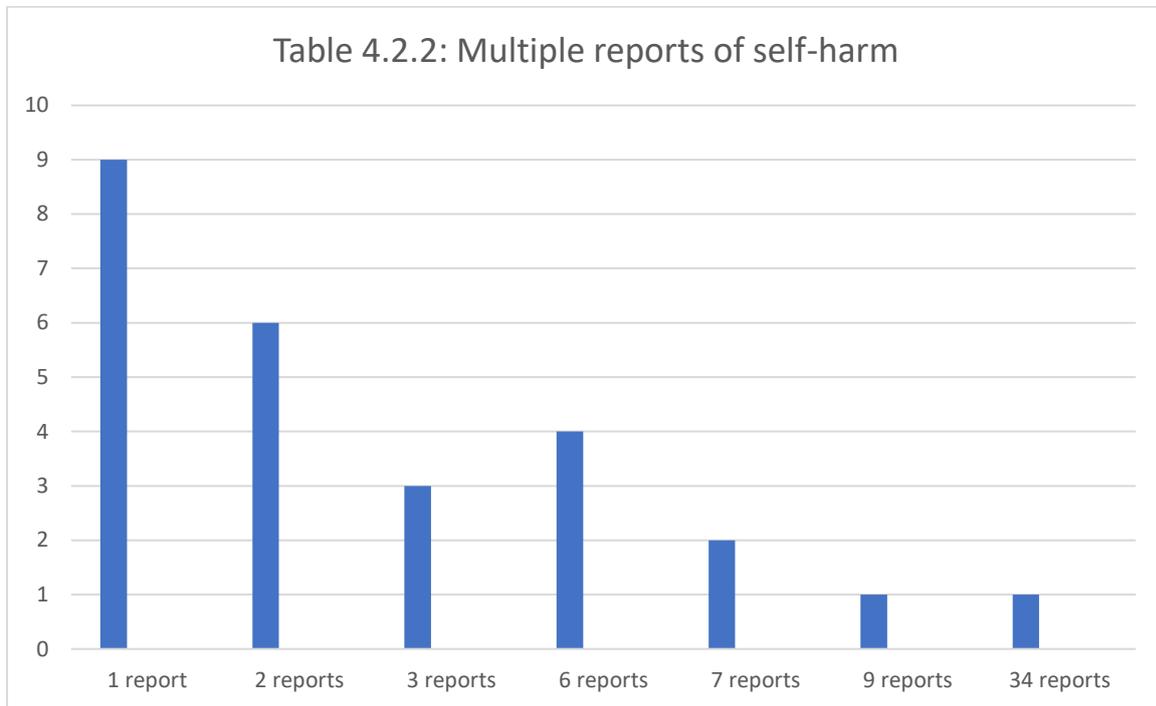
4.1.2 The week-long induction programme seeks to instil further the prevailing ethos of The Verne regime: mutual respect between staff and prisoners, intolerance of violence and the development of a supportive and caring community. The programme offers the opportunity to become acquainted with all aspects of prison life: education, healthcare, work, gym, library and chaplaincy. Prisoners receive talks from representatives of protected characteristics (see below) as well as from Listeners. They should be given the name of their key worker during induction, although it tends to be some time later that the first meeting takes place. Board members on rota try to attend the session in which the role of the IMB is outlined.

4.2 Suicide and self-harm, deaths in custody

4.2.1 There were no suicides or other forms of death in custody during the reporting period. Prisoners who threaten self-harm are placed on an assessment, care in custody and teamwork (ACCT) order. They are carefully monitored (hourly if necessary) and frequently reviewed by a multidisciplinary staff team until it is felt safe for the ACCT to be closed. Members of the Board are invited to attend these reviews when possible, and take part in the monthly audit of the relevant documents to ensure that they are fully and correctly completed. Table 4.2.1 shows the small number of ACCTs, behaviour monitoring (BM) cases, and challenge, support and intervention plans (CSIPs) opened per month; no trend is apparent either pre- or post-lockdown.

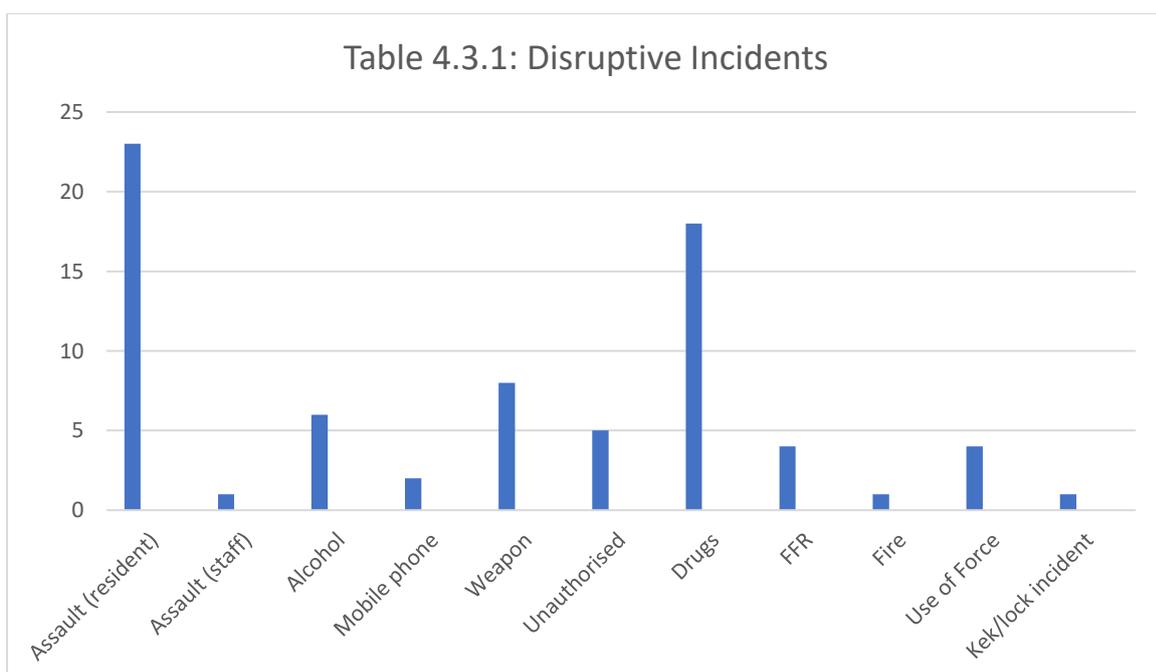


4.2.2 Table 4.2.2 attempts to show the extent of serial self-harming. (Outside the reporting period, the individual exhibiting 34 instances of self-harm has been designated an ‘area complex case’ who can benefit from the experience of treating similar conditions in nearby prisons.)



4.3 Violence and violence reduction, self-isolation

4.3.1 As HMIP observed, acts of violence were rare and none was serious. The one assault on a member of staff was no more than a ‘shove’. Each wing has a violence reduction representative. They, along with staff, seek to de-escalate incidents as soon as they arise. Table 4.3.1 shows the number and type of disruptive incidents.



4.3.2 CSIPs (see Table 4.2.1) tend to be used in less serious cases of violent behaviour.

4.4 Vulnerable prisoners, safeguarding

4.4.1 As all The Verne's prisoners have been convicted of sexual offences, they do not form the victimised minority found in other prisons. Unpaid debt (especially in respect of vapes) can give rise to bullying and such behaviour; when this is suspected by staff, covert BM is triggered (see Table 4.2.1). Moving the bully to another wing has often proved effective. There have been a couple of instances in which a prisoner has asked to be moved to Swanage wing (the care and separation unit; CSU) for his own protection. Prisoners who have clearly demonstrated that they cannot adhere to the non-violent regime established at The Verne have been transferred to other prisons.

4.5 Use of force

4.5.1 Only four instances of the use of force were recorded in the reporting period (see Table 4.3.1)

4.6 Substance misuse

4.6.1 Following assault, the next highest category of reportable incidents in Table 4.3.1 is drugs. A substance misuse strategy is in place. There were a few finds of 'spice' but misuse of prescribed drugs was more prevalent. In the run-up to Christmas, three batches of 'hooch' were found.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

5.1.1 Each of the three main residential blocks is divided into two units, giving a total of six separate wings (Arne, Abbotsbury, Bincombe, Blandford, Corfe and Chesil), each with 80 rooms spread across their first and second floors. The rooms do not have sanitation or telephones. Each floor has two spurs, each with a recess containing WCs, washbasins and showers, to which prisoners have 24-hour access. The ground floor of each residential unit consists of an association room, a dining area, office spaces and a communal foyer. 'The dormitories' (in Dorset wing) consists of 10 ground-floor dormitories, with eight cubicles in each. Dorset wing is largely used to house prisoners with mobility issues or other social care needs.

5.1.2 During the reporting period, the prison acquired 24 'pods', offering single accommodation with integral shower and WC. This new provision, labelled Evershot wing, has not increased the operational capacity. However, it provided the opportunity to vacate one spur on Chesil wing, to reserve these 20 rooms for prisoners who are 'reverse cohorting' on arrival from other establishments.

5.1.3 Prisoners are free to wear their own clothes, and most appear to do so.

5.1.4 The kitchen provides meals for up to 580 prisoners each day. Lunch is a light meal, with five choices of baguettes, sausage roll or pasties, with a homemade vegan soup every day. The evening meal is hot, with five choices – usually including a pie, curry, fish or meat. Desserts include fresh fruit, cereal bars, cakes or crisps, with hot puddings offered three times per week. On weekdays, breakfast is a cold packed meal, handed out the night before; at the weekends, the prisoners have a cooked breakfast with sausage, egg, beans, and so on.

5.1.5 At any one time, there may be 20–30 prisoners on special diets, including allergen-free, gluten-free, kosher, halal, vegan and many others. All of these are catered for in the kitchen, except for kosher food, which is prepared in a special kitchen off-site and delivered in sealed containers. The kitchens also provide food for special events, mostly religious festivals, throughout the year; these include Christmas, Easter, Eid, various Sikh festivals and Black History Month.

5.1.6 The duty governor (or a manager of band 5 or above) tastes the food every day – as do Board members during most visits. They can confirm that the food is of a consistently high standard, which explains why food-related complaints are so few. This was so even though the kitchen struggled with equipment failures and unconscionable delays in getting items repaired.

5.2 Segregation, special accommodation

5.2.1 The CSU (Swanage unit) consists of eight cells with in-cell sanitation, a shower, an outside exercise yard and a small library. Prisoners located on the unit under Rule 45 (good order and/or discipline) have access to a television if appropriate. Board members are alerted by email of any new arrival. They routinely visit the unit during their rota visits, and speak to prisoners in their cells. They also check documents in the CSU. These have shown that daily visits are made by appropriate staff, including the duty governor, a chaplain and a nurse. During the reporting period, 20 prisoners were located on Rule 53 (pending adjudication), nine on Rule 55 (cellular confinement) and 18 on Rule 45.

5.2.2 During the COVID-19 pandemic, cells in the CSU have been used to isolate prisoners on their return to the prison from hospital visits. They can exercise in the unit's yard and can shower whenever they wish. The Board has received no applications related to CSU facilities.

5.3 Staff/prisoner relationships, key workers

5.3.1 It came as no surprise to the Board that HMIP was able to report: 'Staff-prisoner relationships were among the best we have seen'. The Board believes that the key worker scheme was working well until COVID-19 reduced its effectiveness by limiting movement between the wings.

5.4 Equality and diversity

5.4.1 The Lammy Review (October 2017) recognised that other groups besides black, Asian and minority ethnic (BAME) prisoners – for example, the Gypsy, Romany and Traveller (GRT) community – required a voice. A wide range of minorities' is represented at The Verne, including BAME, GRT and LGBTQ+ prisoners. (In Annexe 1, Tables A1–A3 illustrate, respectively, the distribution of prisoners by age, ethnic group and sexual orientation.) At 9.3%, foreign national offenders form, after BAME, one of the larger minority groups. Discriminatory incidents are investigated through the discrimination incident report form system and are considered at the monthly equality action team meetings.

5.4.2 A senior manager, a liaison officer and at least one prisoner representative oversee each of the following protected characteristics: age, faith, BAME, LGBTQ+, disability, marriage and partnership, veterans, transgender and GRT. Forums were held regularly for all protected characteristics. Prisoners are encouraged to organise special events and religious festivals, often bringing in outside groups.

5.4.3 The Board remains confident that the prison effectively monitors and addresses the needs of all communities represented in the prison. The staff appear to be conscientious in their respect for all minorities.

5.5 Faith and pastoral support

5.5.1 In addition to the managing chaplain (Free Church), the Catholic and Muslim chaplains are also full time, with a part-time Anglican chaplain. They are supported by Anglican, Sikh, Free Church and Hindu sessional staff. A Pagan chaplain is to be recruited. There are also a number of volunteers – including Catholic, Anglican and Salvation Army, among others. They work as an inter-faith group, with each chaplain supporting prisoners of all faiths and none.

5.5.2 This energetic and creative team runs a very varied programme of activities, including book groups, music groups, craft classes, calligraphy sessions, quizzes and bingo. There are two choirs which lead the worship at services, using the professional skills of prisoners. The chaplains also conduct one-to-one support sessions, with approximately 150 per month.

5.5.3 The chaplains raise money locally and through other private contacts to supplement the work of the kitchens in providing additional food on festival days, and also to ensure that each prisoner receives a gift at the various religious celebrations and festivals throughout the year.

5.5.4 During the COVID-19 pandemic, the chaplains have enabled prisoners to attend virtual funerals of loved ones, using an iPad to join the live streaming of services.

5.6 Incentives and earned privileges

5.6.1 As HMIP noted, nearly all prisoners at The Verne are on enhanced privileges. However, minor offences too often resulted in a charge and then adjudication, rather than loss of privilege. The number of adjudications, at around 192 during the reporting period, is far lower than in comparable prisons but it could be even fewer, given that a quarter of these charges were dismissed or not proceeded with. This could give the impression that wrongdoers escape punishment. However, this does not detract from the Board's overall view of the regime as fair and decent.

5.7 Complaints

5.7.1 In the first half of the reporting period, 600 complaints were received. The number appeared to fall at the outset of the COVID-19 lockdown but was back to the normal level after five months or so. The Board has been assured that collection boxes are emptied daily, and that there is easy access to the various types of complaint forms. The complaints process appears to be well managed. Responses seen by the Board are invariably courteous and considerate. The Board was happy to take part in a quality assurance exercise of a sample of complaint responses.

5.8 Property

5.8.1 Property issues triggered fewer applications during the reporting period than last year. There were fewer disputes over the facilities list, which is perhaps the result of a more settled population.

6. Health and wellbeing

6.1 Physical healthcare

6.1.1 COVID-19 has presented many challenges this year, and it is a great credit to managers of The Verne that, during the reporting period, the prison has remained COVID-19 free. This has been achieved by:

- 14 days' isolation of all new prisoners and those who have been out for hospital appointments
- reserving one landing in Chesil wing for isolation; the CSU and D wing dining room are similarly used if necessary
- cancelling visits and minimising the number of people entering the prison
- restricting activities
- diligent social distancing and cleaning.

6.1.2 Emergency and essential treatments with the GP and nurse have continued during lockdown. In regard to preventative monitoring, the nurses had a triage system, and daily handovers to discuss how to proceed with patients requiring review. Face-to-face appointments were a secondary back-up to telephone triage. Routine appointments were reinstated towards the end of the reporting period but fewer patients were seen, as space for social distancing was limited.

6.1.3 The increasing number of elderly prisoners with health issues means that many have hospital outpatient and inpatient appointments. In February, there were 97 outpatient appointments, requiring many escorts and bed watches. Currently, one prisoner attends Dorset County Hospital three times per week for renal dialysis; two prisoners are attending Poole Hospital regularly for radiotherapy; and one prisoner is going to Salisbury Hospital for spinal surgery.

6.1.4 The Board was pleased to learn of the positive outcomes of initial discussions between HMPPS and the NHS on the creation of a 'community hospital' within The Verne which, when appropriately equipped and staffed, could enable certain clinical procedures to be performed there rather than in outside hospitals. The reduced number of bed watches would result in considerable savings in staff resources.

6.1.5 The dentist operated a remote triage system during lockdown, which entailed prescribing analgesia and antibiotics and then seeing ongoing problems and emergencies. She has now resumed a more normal service but sees fewer patients, as it is necessary to clean the surgery thoroughly between appointments. The podiatrist has continued to triage patients. The optician was absent during lockdown but has now restarted and held extra clinics to catch up.

6.1.6 Medical supplies have generally come into the prison as normal. In September, there were problems in transferring supplies from the main gate to the healthcare department, and 200 flu vaccines expired because of delays. Before lockdown, most medicines were changed to be 'in possession', and therefore issued weekly or monthly, reducing the need for prisoners to attend the pharmacy. The Board recognises the efforts made by healthcare staff to ensure the delivery of medication to all wings during lockdown.

6.2 Mental healthcare

6.2.1 Mental healthcare is provided mainly by the GP, two mental health nurses, two assistant psychologists, a psychologist and a visiting psychiatrist. A lot of their work has centred on those prisoners who regularly self-harm (see Table 4.2.2).

6.2.2 Throughout lockdown, the Listener service has been an active and well-used service, as anxiety levels were high and many prisoners opted to shield and isolate themselves. There were 295 Listener calls from March to July 2020.

6.3 Social care

6.3.1 The Board is very conscious that 14% of The Verne prisoners are over 70, and that there is an increasing amount of frailty and sickness among them. There have been several requests for social care assessments by the local authority. It is noted that this care is being provided by Care UK. However, the social care agreement between Care UK and the local authority has not yet been signed since the latter has undergone restructuring. The Board understands, however, that the establishment has received an increase in funding to provide for the four prisoners who currently require this additional care.

6.3.2 The Board is aware that social care poses considerable problems in the wider community, and that prisons cannot expect higher levels of provision from the local authority. It understands that up to three visits per day are possible, with the last being offered at 8pm. However, the Board is unaware of any visit having occurred after 6pm, when the Care UK nurses and carers finish their duties. Settling an elderly person for the night after 6pm would be expensive. It would also interfere with the night state of the prison and therefore need careful management to ensure continuing night security. Consequently, if it became necessary, a frail prisoner could only be assisted by his resident support assistant (RSA), or possibly by a prison officer. Neither is trained in social care which, strictly, they are not supposed to carry out. In a MCOSO prison, there are further considerations if one prisoner is permitted to engage in the intimate, personal care of another, who may well be confused and incontinent. The Board considers that this is neither humane nor fair for any of the parties concerned. Therefore, the Board believes that there should be an appropriately staffed 'care' unit established at The Verne to accommodate this group of elderly, frail, sick and vulnerable prisoners, which will, inevitably, become more numerous with an ageing population.

6.4 Exercise, time out of cell, gym

6.4.1 During lockdown, prisoners were confined to their landings and only allowed out to collect meals, and for one hour of exercise daily. The elderly and frail prisoners on the dormitory wing were encouraged to go outside for exercise for two hours daily, but many were reluctant to do so as they were afraid of contracting COVID-19. Prisoners were allowed greater access to telephone calls during lockdown, as many were very anxious about their families. There were several deaths reported among prisoners' family members, which the chaplaincy and newly appointed family liaison officers dealt with appropriately and sympathetically.

6.4.2 There have been problems in the gym this year; there were leaks in the changing room roof and, more seriously, with the sports hall floor, which buckled. A hardwood floor should have been installed when the gym was refurbished, and

health and safety staff will not allow the inadequate floor to be used, although prisoners can still use the apparatus. This has had an adverse effect on attendance. The floor has been temporarily patched but is not expected to last. A permanent solution should be found as soon as possible. (Outside the reporting period, the Board was informed that funding has been made available.)

6.4.3 In the reporting period, gym staff introduced sessions for younger prisoners, the over-40s and the over-60s; chair-based exercises for those on Dorset wing and also sessions for staff. They also provided first aid and nutrition courses.

6.4.4 Since lockdown, most prisoners have been able to access the large sports field, accompanied by gym staff, for walking and outside activities. Each wing had set times for this, and there was a relaxed induction process to allow as many prisoners as possible to join up. Approximately 50% of the prisoners took advantage of this. However, it was weather dependent, and The Verne is prone to high winds, rain and fog. Gym staff were also deployed elsewhere in the prison in times of officer shortage, which meant that fewer staff were available for the gym.

Gym usage before lockdown (February 2020)

| | |
|-----------------------------|-------------|
| Prison roll | 578 |
| Prisoners registered for PE | 442 (76.4%) |
| Prisoners who attended PE | 202 (34.9%) |

6.5 Drug and alcohol rehabilitation

6.5.1 The integrated substance misuse service is undertaken by EDP drug and alcohol services, under contract with Care UK. The team consists of one full-time and one part-time member. It runs clinics, group sessions and one-to-one counselling. Drug strategy meetings take place every two months.

7. Progression and resettlement

7.1 Education, library

7.1.1 Weston College has the contract to provide education. Unfortunately, COVID-19 obliged it to withdraw its services on 26 March 2020.. This caused some resentment among prisoners, who observed schools and colleges preparing for the new academic year. The Board understands that feasibility studies have been completed, to facilitate Weston College's return to direct teaching.

7.1.2 Since August 2019, the following courses have been available: information technology and computerised (Sage) accounting, mathematics, English, music, art and media. Forty-five prisoners have been registered with the Open University (OU). They have been able to continue over lockdown as The Verne staff organised communications and sent assignments to the OU coordinator. The prisoners also received support and help from their peers.

7.1.3 The library distributed boxes of books to each of the landings for prisoners' use during lockdown. Law books were made available for individual prisoners to consult when accompanied by an officer; these books were then quarantined for 72 hours before being seen by other prisoners.

7.2 Vocational training, work

7.2.1 There were several vocational courses for which qualifications (mostly City and Guilds) could be earned. These included health and safety, tiling, bricklaying, painting and decorating, cycle maintenance, cleaning, food hygiene and barbering.

7.2.2 In normal circumstances, there are a number of paid work activities: kitchen, wing servery, gardening, window cleaning, wood mill, carpentry, spray shop, waste management and recycling workers, library assistants, prisoner support assistants, mentors, peer support work and barbers. Contract services included breakfast pack filling, television repair, leather work, sewing and, more recently, tailoring.

7.2.3 The machine sewing team initially made sheets but during lockdown switched to making personal protective equipment for the NHS. The Verne gardens came second in an inter-prison ecological garden competition. The opening of Evershot wing created new job opportunities for cleaners and people to work in the servery.

7.2.4 During lockdown, only a skeleton workforce was employed in essential positions. Thus, in May there were 566 prisoners, of whom 229 were actively employed despite the lockdown (that is, 40% of the total population, or 46% if the retired and medically unfit prisoners are excluded). Retired prisoners received pensions and others were paid if not able to work. Weston College prepared activity and entertainment packs, which prison staff copied and distributed.

7.2.5 Weston College was made aware that some of the prisoners did not have sufficient basic skills in mathematics and English to access the available courses. Prior to lockdown, two cohorts of the entry-level 3 mathematics and English courses were completed. It was also found that there was a need for training in English for speakers of other languages for some of the prisoners.

7.2.6 The Shannon Trust has been supporting prisoners with literacy, and in February a ceremony of graduating students was held. During lockdown, trained prisoner mentors continued to work with learners, with 13 mentors working with 19

learners in March, for a total of 131 sessions. The Shannon Trust also sent monthly activity books for the learners.

7.3 Offender management, progression

7.3.1 The Horizon and Kaizen programmes remain the first and foremost treatment pathway for those prisoners who meet the criteria for interventions. These criteria are based on the risk matrix 2000 score. A large proportion of The Verne prisoners are scored as 'low' and thus, as the Boards at other MCOSO prisons have noted, ineligible for inclusion in an intervention. However, 45 prisoners have temporarily left The Verne to complete one or other of the programmes elsewhere. Between July 2019 and July 2020, 145 prisoners arrived having already completed either Horizon or Kaizen.

7.3.2 In January, an accredited behaviour programme scoping exercise by Southwest Forensic Psychological Services decided not to recommend the introduction of the programmes at The Verne.

7.4 Family contact

7.4.1 In the period from July 2019 to March 2020 visits continued as normal, with online booking introduced during the reporting period. The first family visits day took place on 17 December and was very successful, with 84 visitors meeting 19 prisoners. However, the prisoner and visitor lifts and stairlifts were out of use and the lack of handrails made visits difficult for those with mobility problems. This has not yet been addressed. Barnardo's has been awarded a contract to support family visits.

7.4.2 All family visits were stopped during lockdown, and have only recently restarted. There is evidence of a reluctance to request visits by those who remain fearful of the risk posed to their visitors in travelling, mostly on public transport, to this location. The prison has worked hard to establish visits using computer technology ('Purple Visits') and it is understood that these will start at the beginning of our next reporting year.

7.5 Resettlement planning

7.5.1 When the prison opened in July 2018, it was expected that prisoners would go on to a category D prison, where resettlement provision would be given. However, largely because there are not enough places at category D facilities, and with reduced inter-prison movement during the COVID-19 lockdown, 17 prisoners were released directly from The Verne during the lockdown period, seven of whom were discharged in June and July.

7.5.2 A release planning coordinator was appointed in July, and is working on resettlement provision. This includes assisting with benefit claims, providing prisoners with a resettlement information booklet eight months prior to release, and starting the process of joining the offender banking programme, to enable eligible prisoners to have access to a basic bank account.

7.5.3 It was envisaged that surgeries from outside agencies, including the Department of Work and Pensions/Jobcentre Plus, CF03 and Catch 22, would

become available but, sadly, COVID-19 restrictions have delayed this. However, the coordinator is in regular touch with various organisations to assist with resettlement provision, including Circles of Support and Prospects, which provide information on employment opportunities. A career service provider has recently been appointed. The life skills team has also introduced a citizenship programme, but the introduction of a Live Well/Age Well course has had to be delayed because of COVID-19.

7.5.4 Shortcomings in resettlement provision appear to be being addressed. The Board will continue to monitor this closely.

8. The work of the IMB

Board statistics

| | |
|--|----|
| Recommended complement of Board members | 14 |
| Number of Board members at the start of the reporting period | 10 |
| Number of Board members at the end of the reporting period | 8 |
| Total number of visits to the establishment | 97 |
| Total number of segregation reviews attended | 1 |

Applications to the IMB

| Code | Subject | Previous reporting year | Current reporting year |
|------|---|-------------------------|------------------------|
| A | Accommodation, including laundry, clothing, ablutions | 2 | 11 |
| B | Discipline, including adjudications, incentives and earned privileges, sanctions | 5 | 3 |
| C | Equality | 1 | 0 |
| D | Purposeful activity, including education, work, training, library, regime, time out of cell | 2 | 4 |
| E1 | Letters, visits, telephones, public protection restrictions | 13 | 6 |
| E2 | Finance, including pay, private monies, spends | 2 | 4 |
| F | Food and kitchens | 3 | 0 |
| G | Health, including physical, mental, social care | 4 | 8 |
| H1 | Property within this establishment | 6 | 4 |
| H2 | Property during transfer or in another establishment or location | 9 | 6 |
| H3 | Canteen, facility list, catalogue(s) | 0 | 1 |
| I | Sentence management, including home detention curfew, release on temporary licence, parole, release dates, recategorisation | 6 | 8 |
| J | Staff/prisoner concerns, including bullying | 1 | 1 |
| K | Transfers | 4 | 2 |
| L | Miscellaneous, including complaints system | 5 | 7 |
| | Total number of applications | 63 | 65 |

Annexe 1: Equality and diversity: further data

| Age range | Number | Percentage |
|-----------|--------|------------|
| 21–29 | 44 | 8 |
| 30–39 | 75 | 13 |
| 40–49 | 116 | 21.5 |
| 50–59 | 137 | 25.5 |
| 60–69 | 101 | 18 |
| 70+ | 78 | 14 |
| | | |
| TOTAL | 551 | 100 |

| | Number | Percentage |
|--|--------|------------|
| White (English/Welsh/Scottish/Northern Irish) | 393 | 71 |
| White other | 15 | 3 |
| Asian | 40 | 7 |
| Black British Caribbean | 28 | 5 |
| Black British African | 30 | 5 |
| White Gypsy/Irish Traveller | 15 | 3 |
| Mixed black/white Caribbean | 15 | 3 |
| Other | 15 | 3 |
| | | |
| TOTAL | 551 | 100 |

| | Number | Percentage |
|---------------|--------|------------|
| Heterosexual | 454 | 83 |
| Gay | 26 | 5 |
| Bisexual | 20 | 3.5 |
| Not disclosed | 33 | 5 |
| Not recorded | 14 | 2.5 |
| Other | 4 | 1 |
| | | |
| TOTAL | 551 | 100 |



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