



Annual Report of the Independent Monitoring Board at HMP Elmley

**For reporting year
1 November 2019 – 31 October 2020**

Published March 2021



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Introductory sections 1 – 3

1. Statutory role of the IMB

The Prison Act 1952 requires every prison to be monitored by an independent Board, appointed by the Secretary of State from members of the community in which the prison is situated.

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

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

To enable the Board to carry out these duties effectively, its members have right of access to every prisoner and every part of the prison, and also to the prison's records.

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

2. Description of the establishment

HMP Elmley is a local prison situated on the Isle of Sheppey which serves the courts of Kent. It was originally part of the Sheppey cluster of three prisons but is now a stand-alone establishment which presently has an operational capacity of 1,088.

Elmley opened in February 1992. It was built on the Bullingdon design and originally consisted of four house blocks, each designed to accommodate 155 prisoners, and a segregation unit which can house seven. In later years, two further house blocks were constructed and the single cells were converted to doubles. For some time, the cells in the original house blocks were used as trebles, although these have now, thankfully, been returned to doubles.

The prison houses remand and sentenced adult prisoners, as well as young adults. The population consists of a number of vulnerable prisoners, foreign nationals, those with drug dependency and/or mental health issues, life-sentenced prisoners, a growing number of older prisoners and many with disabilities.

Contracted services are:

Physical healthcare services provided by IC24

Mental health services provided by Oxleas NHS Foundation Trust ('Oxleas')

Drug treatment services provided by the Forward Trust

Education provided by Weston College

Maintenance provided by Government Facility Services Ltd.

3. Executive summary

3.1 Background to the report

This report presents the findings of the Board at HMP Elmley for the period from 1 November 2019 to 31 October 2020. The COVID-19 epidemic has had a severe impact on the Board's monitoring, as it has on life in the prison.

Since the imposition of the national lockdown in March 2020, the restrictions that it imposed on the prison population at Elmley caused frustration, with the lack of activity allowed and anxiety of prisoners regarding their families outside. The Board has been restricted in its customary face-to-face engagement with prisoners, and has relied heavily on prisoners' applications in order to obtain information about their experience of prison. We have made limited observations of the exceptional delivery models (EDM) put in place. Remote or blended monitoring has been the major feature of this year's reporting.

3.2 Main judgements

How safe is the prison?

Drugs, debt and bullying are still featured, even during the restrictions of the EDM.

How fairly and humanely are prisoners treated?

The Board considers that, given the conditions due to COVID-19, the treatment of prisoners was as fair as possible. Their initial acceptance of the situation was positive, knowing that there was a national lockdown. The prison officers' view was that the lockdown created a safe environment with fewer opportunities for violence.

The management adapted the EDM to provide more activity for prisoners and ease the growing tension that developed after the early months. This was hampered by the pandemic affecting staff numbers and the need to limit interaction between prisoners, to prevent the spread of any infection.

How well are prisoners' health and wellbeing needs met?

Mental health issues became more complex with the added anxiety about family and friends outside, and the limited contact with them. The prison tried to ease the situation with extra telephone credit and the possibility of video calls, and the chaplaincy was very active in its support.

Prisoners welcomed in-cell activity packs, and there was a higher-than-expected take-up of the education packs that the prison worked so hard to develop with Weston College.

Access to medical treatment inside the prison continued routinely, apart from dentistry, which is comparable with National Health Service treatment outside.

How well are prisoners progressed towards successful resettlement?

The situation with finding accommodation on release has not improved since last year's report. The establishment policy of interviewing prisoners prior to release had to be suspended during the COVID-19 restrictions. Where previously they could expect help to set up bank accounts and apply for identification documents to claim benefits, prisoners are currently thrown back on their own resources once they leave HMP Elmley.

Transfers to establishments that provide appropriate courses to address offending slowed down considerably, in line with a national policy of containing the spread of infection.

3.3 Main areas for development

TO THE MINISTER

The Board would ask the minister to review the effectiveness of the Criminal Justice Liaison and Diversion Service (CJLADS), given the number of prisoners that arrive at the establishment with a mental health diagnosis. Is the scheme working as it was designed to do, and is it properly resourced?

Prison is not a suitable environment for those whose offending is underpinned by poor mental health. The mental health team in HMP Elmley offers the best support they can, but reform and rehabilitation require a different form of intervention than can be provided in prison.

TO THE PRISON SERVICE

The pandemic has highlighted the need to avoid overcrowding in prisons. The Board is pleased that reducing the operational capacity at HMP Elmley during the year allowed for the elimination of three-man cells in accommodation originally designed for one or two prisoners. The Board would seek reassurance that three-man cells are a thing of the past.

The Board recommends the return to some form of central control for the movement of life-sentenced prisoners. This would allow a better grasp of the national picture and promote more effective planning for the progress of lifers.

TO THE GOVERNOR

The Board seeks reassurance that the healthcare department's attempts at auditing the issue of paracetamol by prison staff on the wings is supported by managers. Given the near-miss this year, it is important that paracetamol is controlled in similar ways to any other medication provided in the prison.

The Board has raised the issue of medication under restraint, and received confirmation that the Governor is the ultimate authority in such interventions. This needs to be more firmly established, for the sake of the prison officers who carry out the restraint, and in terms of the fair treatment of the prisoner involved.

3.4 Progress since the last report

The detailing of two officers in the inpatients department has been a valuable improvement. Patients now have contact with prison staff who can help them with non-clinical issues. As a result, the Board no longer receives as many applications from patients. It appears that this informal key working has benefits all round.

Rigorous scrutiny of the use of force has increased the formal recording of incidents and provided learning points to be passed on to staff. There is more awareness of the need for body-worn cameras to be deployed effectively. This should make control and restraint a safer process for all concerned.

Despite the continued problems with illicit drugs getting into the prison, the establishment should be congratulated for its determined efforts to detect the sources of importation. The Board believes that the installation of the itemiser, the increased use of drug detection dogs, and the decision to photocopy all correspondence to avoid the risk of contaminated paper entering the prison will pay off in time.

The Board is pleased to report that equality and diversity is now being given a higher priority, and reinforces managers' view that the allocation of activities should reflect the ethnic mix of the prison's population.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

This year, the Board has nothing to report on this area.

4.2 Suicide and self-harm, deaths in custody

The prisoners responded positively to the initial COVID-19 lockdown, accepting the limited regime of 30 minutes' exercise in the open air, plus additional time for domestics/showers. This amounted to 45 minutes in total. They understood that visits would not be possible, in line with the restrictions outside the prison. The prison managed to provide the same limited regime for new prisoners, who were kept in an isolation unit for their first 14 days, and for those showing symptoms, who were kept on another unit until tests confirmed whether they had the virus.

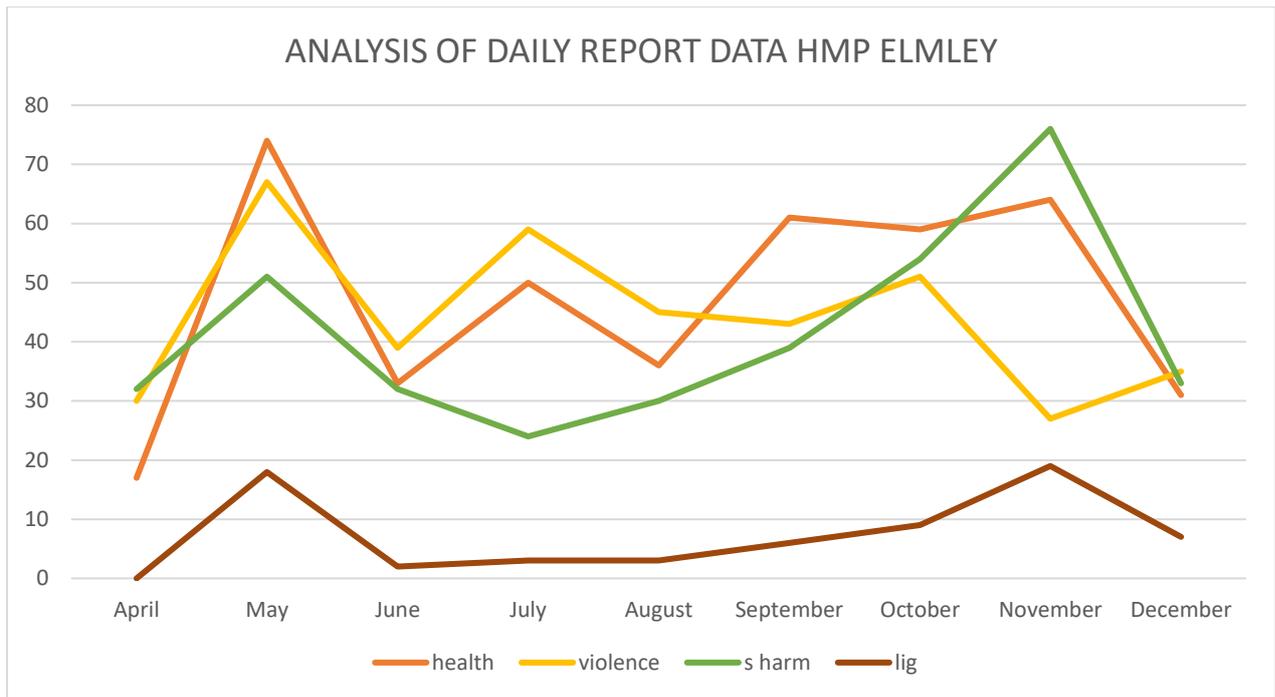
As time went on, frustration with the restrictions that they experienced and anxiety about what their family and friends were going through outside were sometimes expressed in acts of self-harm. The assessment, care in custody and teamwork (ACCT) statistics rose from July 2020, as is indicated in the chart below for self-harm. Extra staff were deployed to make sure that these were reviewed regularly, for which the establishment deserves credit.

There was one death in custody during this reporting year, and this was due to natural causes, pre-COVID-19.

4.3 Violence and violence reduction, self-isolation

By the time that restrictions could be eased, giving more time out of cell, tension was already building among the prison population, as evidenced by reports of aggression towards staff and assaults on other prisoners.

The graph below, covering the period from April 2020 until the end of the calendar year, shows that reports of violence and self-harm and peaked in May. The making of ligatures is included in the figures for self-harm but shown separately on the graph. The statistics show another rise that began in August and is continuing at the time of this report.



4.4 Vulnerable prisoners, safeguarding

Approximately one third of the applications to the Board came from one particular house block which had previously been allocated to sex offenders and vulnerable prisoners. The character of this house block changed due to the need to make space for Foreign National prisoners. The new mix resulted in some prisoners now finding themselves located in the same house block as those that had supplied them with illicit articles (drugs and phones), and to whom they are in debt. The prison no longer provides shelter for those engaged in illegal activities and expects them to hide behind their doors if they feel threatened. However, it does seek to protect and support those who are genuinely vulnerable such as care leavers and those with physical and mental differences.

4.5 Use of force

The Board is pleased to note that use of force is being managed in accordance with the latest guidance to allow the introduction of PAVA and rigid handcuffs. Recording is much better now, and weekly meetings are held to scrutinise 100% of recorded use of force. There is greater use of body-worn cameras and hand-held video cameras. The Board attends these meetings, where learning points are raised about leadership and the correct use of control and restraint.

Medication under restraint is the area where the Board has had concerns. Fortunately, this is a rare event. However, there was an occasion during the year when the prison officers felt very uneasy about restraining a prisoner at the request of the clinical staff. The duty governor was only informed after the event. On viewing the camera footage, the Board could understand the officers' unease.

At the learning review that followed sometime later, a clear line of authority was never established. It is accepted that a prisoner's capacity to refuse medication that might benefit him is a clinical decision. However, there had been an opportunity to seek the prior authority of the duty governor before the medication was given under restraint and recorded as a defensible decision.

For the sake of prison staff, as well as prisoners, the Board will monitor such events very carefully and have discussions with the Governor to establish if each was recorded as a defensible decision.

4.6 Substance misuse

Substance misuse continues to be an issue at Elmley. In some sense, the boredom and frustration of lockdown with a restricted regime has increased the desire to use illicit drugs. During a three-day period in August 2020, 58 prisoners in one house block were found under the influence.

Several measures have been introduced to disrupt the flow of drugs into the prison. All mail is photocopied rather than passing on the originals, which might be contaminated with drugs. The drug dogs are available to detect any impregnated paper that it would not be appropriate to photocopy, such as cards and photographs. Rule 39 letters are no longer opened if the dogs indicate a suspicious substance. It has become too dangerous for officers to be exposed to the potency of the chemicals now being used by opening mail in front of the prisoner. The letters are destroyed and the prisoner is informed of the reason.

The prison now has an itemiser to check any suspicious mail and parcels. It will be a valuable tool but it is taking some time to train staff to operate it. As a result, there has been a backlog of mail, which has caused frustration for prisoners, who are increasingly desperate to have contact from family and friends at this particular time.

Despite prisoners being locked in their cells for much greater periods and social visits being cancelled for a time, drugs are still getting into the prison, along with other contraband, giving rise to debt and bullying. The prison has taken serious steps to prevent the importation of drugs, as outlined above. Inevitably, suspicion has fallen on members of staff, and outside agencies, especially when family visits were suspended.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

There have been complaints from prisoners about the lack of kit change during the year. The Board believes that this is due to poor management by cleaning officers and house block managers. Attempts have been made to address kit shortages in the establishment. It has been hard to establish regular kit change in recent months because laundry from the isolation and shielding units has to be kept separate. Laundry staff have also taken on the washing of personal clothing for prisoners, so that they can avoid use of the machines on the house blocks.

Most laundry staff worked every weekend when they were off duty, to ensure an adequate, safe supply of clothing, and the supply of bedding was maintained.

Prisoners complain about the provision of fresh food by DHL in their canteen. There are increasing problems with securing refunds for items that have not been delivered.

The Board is pleased to report that most prisoners now have access to in-cell telephones. This has been of great benefit during the period when members of the Board were unable to have face-to-face contact with prisoners owing to COVID-19 restrictions. The setting up of the freephone application line has made it easier for prisoners to contact the Board with their issues. This communication facility was also valuable for maintaining links with families during the COVID-19 pandemic.

5.2 Segregation, special accommodation

The challenges of the care and separation unit (CSU) continued to be met by a very effective team of officers, who work through the difficulties that have brought a prisoner to segregation and help them to move on. However, especially since the start of the COVID-19 pandemic, there are some prisoners who say that they feel safer from violence and COVID-19 on the CSU, and resist returning to a house block.

Good order and/or discipline reviews are conducted in a timely fashion, despite the increase in the population in the CSU during the last six months of the reporting period. The reviews are better attended than when we last reported. The chaplaincy and the mental health team have become much more important and relevant, given the tensions and stress that have built up under the EDM. The Forward Trust is usually on hand, to invite prisoners who are charged with drug-related offences for support and treatment.

Last year, we reported on the frequent adjournments of adjudications due to missing paperwork or the absence of the reporting officer. The measures that had begun to rectify this have unfortunately been overtaken by the impact of COVID-19. Fewer staff to collect and provide evidence has meant that adjudications can be timed out, and less serious charges are sometimes reviewed and dropped. This pragmatic

approach is inclined towards inconsistencies in sanctions, but the Board feels that, in the current circumstances, the establishment is handling the situation well.

The limit to the number of cases that the independent adjudicator deals with each month has caused anxiety for some prisoners, who feel that the delays have had an impact on their parole hearings and probation reviews.

5.3 Staff/prisoner relationships, key workers

Key working started to have a positive effect at the beginning of the reporting period. Prisoners said that they found it very supportive. This support had to be reduced dramatically to prevent the spread of the virus in the prison, and has now been all but suspended.

Members of the activities team did their best to provide in-cell packs for prisoners who were locked in their cells for longer periods.

In section 8, it can be seen that 20% of the applications to the Board relate to accusations of bullying by staff or other prisoners. It has been difficult for members to investigate the authenticity of such complaints because of the limited amount of direct contact with prisoners during the current COVID-19 restrictions. They are referred to the Deputy Governor when they concern staff, and to safer custody staff when they are against another prisoner. The Board is rarely informed about the result of any investigation, and would seek to improve this aspect of our monitoring when circumstances allow.

5.4 Equality and diversity

The Board is pleased to comment on the improved situation regarding diversity and inclusion at the prison. Meetings are now held monthly, are well attended and include a number of representatives from the prisoner council. They are chaired by the Deputy Governor and are more robust than previously. There is more awareness of potential discrimination and unfairness related to ethnicity.

The discussions at these meetings support the Governor's view that the allocation of work and responsibilities should reflect the ethnic mix of Elmley's population. Records are now being kept of activities in relation to ethnicity, in a drive towards a fairer allocation. Adverts for jobs are published, so that anyone who fits the criteria can apply. It is not left to the cleaning officer or word of mouth. Applicants are put on a waiting list if they are suitable. This is dependent, to some extent, on a return to normal working in the prison and a review of the security algorithm, which appears to disadvantage some ethnic groups from getting jobs.

The prison monitors the statistics for adjudication, IEP, Use of Force and other factors that impact on prisoners in terms of ethnicity. Any disproportion is investigated. The Board attends the Diversity meeting where these are discussed.

There are, on average, 200 foreign national prisoners in Elmley. Approximately 30 of these do not speak or understand English. It has been the practice to rely on other

prisoners, or officers who speak their language, to interpret for them. The Board says that this is not appropriate in formal proceedings such as adjudications and reviews. It can also lead to challenges by solicitors. The use of professional telephone interpreting services is now being encouraged but the COVID-19 outbreak makes it difficult to assess how effectively because the Boards visits are necessarily limited. The needs analysis form for prisoners has been redesigned by the diversity department to capture the details of non-English speakers. The Board has been given a list of these prisoners and will monitor their progress.

Statistics indicate that few black, Asian and minority ethnic prisoners are registered with the Forward Trust, in relation to their proportion of the prison population. A strategy has been introduced for anyone with an adjudication involving drugs to be referred to the Forward Trust for support. It is too soon to judge the outcome but it is hoped that this might go some way to overcoming their reluctance to ask for help with a drug problem.

5.5 Faith and pastoral support

Unable to run the usual religious services in the chapel because of social distancing, chaplains have worked hard to support prisoners during COVID-19. They distribute service sheets to those who want to continue to worship in their cells. They organise the live streaming of family funerals, and video contact for new fathers with their babies. They offer counselling for the increased number of prisoners who have lost family and close friends to the pandemic.

Religious festivals have continued to be marked by the provision of their traditional foods, although the communal celebrations have been suspended.

5.6 Incentives and earned privileges

This year, the Board has nothing to report on this area.

5.7 Complaints

The early days of the COVID-19 pandemic generated many complaints from prisoners about staff not observing social distancing from them (and each other) and not wearing masks, and not being able to wear masks themselves. These criticisms appear justified in the light of the outbreak that subsequently occurred. By the end of our reporting year, much more rigorous control of the virus was being observed; prisoners were able to wear masks and officers seemed more conscious of the need for personal protective equipment when in contact with prisoners.

Since March, prisoners have had the option of using the 0800 freephone line to raise issues with the Board. This more direct form of contact has mitigated the reduced presence of the Board in the prison.

5.8 Property

This year, the Board has nothing to report on this area.

6. Health and wellbeing

6.1 Physical healthcare

Last year's improvements in dentistry provision and a shorter waiting list have unfortunately not been able to be sustained during the COVID-19 pandemic. Public Health England's guidance makes it impossible for the dentist to perform routine work at the prison. Patients are triaged if they are in pain, and offered extraction at an outside surgery, if staffing allows for the escort, or paracetamol. Prisoners report that they have waited in pain for long periods for treatment, and the Board questions whether it is medically safe to take paracetamol for the length of time that some prisoners report – four months, in one case. There is also the issue of the risk of overdose by accident or design.

Applications relating to health issues amount to 14% of complaints to the Board. Prisoners complain that they are unhappy with their medication regime and how difficult it is becoming to see a doctor or dentist. They tell the Board that they feel left in the dark about visits to an outside hospital (understandable, for security reasons) and, more worryingly for them, about the results of medical investigations. They do not have the option of contacting the hospital directly for results, as would be the case in the community outside, and have to rely on healthcare staff for the information.

The Board is pleased that the fitting out of the shower in the inpatient department has finally made it possible for the less active/able patients to take showers unassisted and in a dignified manner. There are two officers rota-ed to work in the inpatient department now, which helps staff with the more volatile patients and those on constant watch when they are moved between rooms and cells for cleaning. They are also on hand for searches, when necessary, and assist patients with their non-clinical needs, such as exercise and administrative queries. This has been a positive move, in terms of engagement with prisoners and the running of the regime.

There has been criticism of the way that the house block staff have been managing the issuing of paracetamol to prisoners needing relief from mild pain such as headaches. This should be recorded, and details sent to the healthcare department, but only after telephoning healthcare staff to check that it is safe to give the drug. The prisoner may have already been prescribed medication that would have an adverse impact on them when taken in combination with paracetamol. There is also the risk that a prisoner will store the drug for the purpose of self-harm.

The establishment has taken a relaxed attitude to paracetamol in the past, believing that it was freely available from the canteen. This is not in fact the case. The Board is pleased that the prison pharmacy is taking measures to audit the issue of the paracetamol that they dispense to the house blocks, although it is having difficulty in getting records back from them.

6.2 Mental healthcare

The number of prisoners with mental health issues continues to be high, as reported in previous years. Despite the role of CJLADS, there are prisoners with serious psychotic behaviour who have not been diverted to a more appropriate establishment where their mental health can be addressed, along with their rehabilitation.

Prison makes matters worse for those with a mental health condition, and places a burden on prison officers dealing with difficult and sometimes violent prisoners. The rates of self-harm are high and some are fairly serious. The Board recorded 254 incidents of self-harm between April and October, although there were certainly more incidents that were not captured. Some 42 incidents in this period involved ligatures which could have had serious and unintended results. The Board has observed good support for officers who deal with the consequences of these, in both formal and informal debriefings.

The mental health team's caseload has remained fairly consistent through the year but has become more complex. One-third of its patients arrive at Elmley with a diagnosis of attention-deficit hyperactivity disorder, but confirmation and prescribing are hampered by the need for an ECG, which Oxleas is unable to perform. There appears to be a difficulty with the healthcare provider, IC24, supporting the training of the mental health team in carrying out these important tests.

Oxleas has had success in working with outside agencies that are familiar with a patient's case prior to prison and re-establish continuing care for those released in Kent. However, for patients from outside Kent, there is often no response from a mental health agency, and the prisoner leaves with a letter to his GP, which makes him responsible for his own continuing treatment. Such prisoners remain vulnerable to reoffending just to get by.

6.3 Social care

This year, the Board has nothing to report on this area.

6.4 Exercise, time out of cell, gym

The gym has been closed since the COVID-19 lockdown, and exercise has been very limited. As restrictions eased slightly, time out of cell was increased from 30 minutes per day to an hour in the morning and again in the afternoon, when staffing levels allowed the unlocking of small groups at a time, to reduce the mixing of prisoners. Exercise was organised outside on one of the yards on the same principle of small 'bubbles', to avoid the spread of infection. Prisoners in the isolation units were offered the same exercise regime but later in the day.

6.5 Drug rehabilitation

This year, the Board has nothing to report on this area.

6.6 Soft skills

This year, the Board has nothing to report on this area.

7. Progression and resettlement

7.1 Education, library

The education provider, Weston College, under an improvement notice since the beginning of the year, withdrew its services at the start of the COVID-19 pandemic. Prison education staff took the initiative to devise a learner menu, so that prisoners could work independently in their cells. They had approximately 400 responses from prisoners, and were able to keep Weston College involved by giving them the completed packs to mark off-site and provide feedback for the learners.

The standard of the material in the learner packs was gradually improved, with encouragement from the establishment. The Board has reviewed the workbooks and believes that they now provide an adequate introduction to both traditional and vocational skills. It is recommended that, when it is possible, the vocational element could be further developed by integrating it with practical skills training within the prison. The certification of such experience will promote the enthusiasm of the learner and increase their employment opportunities on release from prison. It is unfortunate that because of COVID-19, face-to-face learning in classrooms was cancelled in March 2020.

The library was working much better for the prisoners until the COVID-19 lockdown, when Kent Libraries had to reduce their provision to guard against transmitting the infection. The library staff have been available two days per week to respond to prisoners' requests for books and other library facilities as best they can.

7.2 Vocational training, work

Most workshops have been closed since the start of the COVID-19 pandemic, to limit the spread of the infection around the prison, although prisoners continue to be paid, so as not to disadvantage them.

The laundry was kept running by staff when the prisoner laundry workers had to be isolated on their wing.

7.3 Offender management, progression

As at September 2020, there were 43 lifer prisoners waiting for places at an appropriate centre where they would have the opportunity to address their offending. This is a slight increase since last year. As reported in 2018/19, there are few courses available for this group at a local prison such as Elmley. The one course that might benefit them has 100 on its waiting list at the time of writing. The Board repeats that this is unsatisfactory, in terms of rehabilitation, and requires review. Currently, it can take two years to find a place at a lifer centre, which cannot be seen as appropriate pre-release preparation.

The annual parole review process can also add to the delays in transfer, as once a review is set, no transfers can take place until it is complete. The Board considers that a return to central control by a headquarters lifer section with a national

overview would prove more efficient and productive, rather than delegating this work to local offender management unit staff as at present.

Sentence-related applications form another 14% of the total. The fact that staff in the offender management unit have had to work from home during the COVID-19 restrictions has meant that prisoners have felt anxious about the limited contact they have had with their case worker. There have been delays to offender assessment system (OASys) planning and probation reports, which prisoners have seen as a barrier to their recategorisation.

7.4 Family contact

The prison increased the number of visits sessions this year, to allow for the reduction in the number of spaces in the visits hall brought about by the sectioning off of an area for the video-link suite.

Visits had to be stopped in the early days of the COVID-19 pandemic, to prevent the possible spread of infection. Extra telephone credit was provided, to help maintain family contacts, and the use of an iPad was allowed in exceptional circumstances, such as births and funerals. When visits restarted in a limited way, the uptake of the offer was slow. The visiting hours were shorter and close contact had to be prevented, and this proved difficult in the case of young children. Transport was more of an issue because visits were limited to a single household. In pre-covid days, visits were not confined to a single household so visitors were able to travel to the prison with people outside their own household.

As the national restrictions continued, the prison tried to support family contact with the offer of 'Purple Visits' using laptop computers.

7.5 Resettlement planning

Resettlement planning has suffered setbacks as a result of COVID-19 guidance. Face-to-face assessments have been replaced by telephone calls and forms sent out to prisoners. The resettlement team has been working fewer days in the prison during the COVID-19 restrictions.

The direct help that prisoners had with arranging bank accounts and identification documents has had to be suspended. The resettlement team now issues them with a step-by-step guide on how to set these up for themselves after release. It is difficult to judge how effective this process is. However, if resettlement staff feel that extra support on the outside might be needed in order for a prisoner to claim benefits, they notify the community probation officer.

The biggest problem continues to concern finding accommodation for prisoners at the end of their sentence, as reported last year and highlighted to the minister for consideration. Prison managers are keen to address this lack of provision by the local authority, and early in the new year hosted an 'Open Doors' event, to raise awareness of the problem and its impact on reoffending. Several useful contacts

were made, the most promising being the 'Together Kent' project, which aims to convert a church property into accommodation for ex-prisoners. The Board plans to follow this project when the COVID-19 lockdown permits.

Many prisoners have spent years prior to imprisonment sleeping rough, and have no experience of managing a tenancy or paying household bills. The Board recommends that some form of pre-release training covering such issues should be conducted for nominated prisoners before release. It is appreciated that short sentences mitigate against the success of such a proposal.

8. The work of the IMB

A member of the Board visits the prison on most days and some weekends, in order to monitor the conditions that prisoners experience in the establishment. The focus is particularly on prisoners who are separated from the main population, either in the CSU or the inpatient department, and on the provision of meals, exercise and other welfare issues.

Members deal with applications from prisoners who feel unable to get answers from their house block officers. They attend adjudications, segregation reviews and ACCT reviews, and monitor the arrival and release of prisoners at reception.

The Board raises issues of concern with the Governor, usually at the monthly Board meeting, but urgent matters are addressed more immediately with management or the Prison Group Director.

Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	14
Number of Board members at the end of the reporting period	13
Total number of visits to the establishment	282
Total number of segregation reviews attended	80

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	7	25
B	Discipline, including adjudications, IEP, sanctions	4	7
C	Equality	8	5
D	Purposeful activity, including education, work, training, library, regime, time out of cell	17	11
E1	Letters, visits, telephones, public protection restrictions	32	24
E2	Finance, including pay, private monies, spends	35	14
F	Food and kitchens	5	8
G	Health, including physical, mental, social care	93	76
H1	Property within this establishment	41	33
H2	Property during transfer or in another establishment or location	28	18
H3	Canteen, facility list, catalogue(s)	18	29
I	Sentence management, including home detention curfew, release on temporary licence, parole, release dates, recategorisation	98	68
J	Staff/prisoner concerns, including bullying	77	86
K	Transfers	19	14
L	Miscellaneous, including complaints system	80	58
	Total number of applications	562	476



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