



# Annual Report of the Independent Monitoring Board at HMP/YOI Peterborough (Men)

**For reporting year  
01 April 2020 – 31 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 IMB is part of the United Kingdom's National Preventive Mechanism.

## 2. Description of the establishment

Her Majesty's Prison (HMP) and Young Offender Institution (YOI) Peterborough is a private prison on a brownfield site in the city centre, made up of two separate establishments, one for women and one for men, which share the same staff and management. It opened in March 2005 and is run by Sodexo Justice Services, under contract to the Ministry of Justice. There is a performance delivery unit, headed by a manager reporting to the Director, which tracks the contractor's adherence to the terms of the contract and also the actions arising from Her Majesty's Inspectorate of Probation inspections, Prisons and Probation Ombudsman investigations, audits and reviews. There is also a controller team on-site, employed by Her Majesty's Prison and Probation Service (HMPPS), which monitors the contractor's performance on behalf of the Ministry of Justice.

HMP Peterborough men's prison is a category B local prison. The operational capacity is 868, including 96 additional prisoner places, as agreed between HMPPS and Sodexo. Most cells are doubled. There are three modern residential house blocks containing 12 wings, including early days in custody (the induction wing), drug detoxification and safeguarding. Facilities include a large gym, chapel, workshops, classrooms and a library.

Each wing has an electronic kiosk, on which prisoners may, for example, order their meals, book visits and appointments, communicate with prison departments and review their finances.

The prison manages its staff recruitment and training needs locally. Recruitment has continued through the reporting year, and training has been off site to satisfy social distancing requirements during the Covid-19 pandemic.

The prison has been operating throughout the year under either a Stage 4 or Stage 3 regime, as defined by HMPPS. On 15 February 2021 it was declared a Covid-19 outbreak site by Public Health England (PHE) and remained so until after the end of the reporting year.

Key services were provided during the reporting year as follows:

- Physical healthcare by Sodexo Justice Services, with the GP service contracted to Cimarron UK.
- Primary and secondary mental healthcare services by Cambridge and Peterborough NHS Foundation Trust.
- Learning and skills provision by Sodexo Justice Services.
- Integrated substance misuse service by Sodexo Justice Services.

The prison also works closely with the community rehabilitation company (CRC) for Bedfordshire, Northamptonshire, Cambridgeshire and Hertfordshire (BeNCH).

Additionally, the following are the principal organisations providing services to the prison:

- Mind (mental health support)
- St Giles Trust (core resettlement provider to BeNCH and Unlock Banking)

- Alcoholics Anonymous
- Jobcentre Plus
- Bail, Accommodation and Support Service (supported housing for those on home detention curfew (HDC) or bail)

There are also a number of third sector organisations providing specific services locally.

### **3. Executive summary**

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

The pandemic has had a significant impact on the daily routines of the prison and the allocation of staff, therefore the statements made in the report do not reflect a fully operational regime. Nonetheless, the prison deserves considerable credit for the way in which the Covid-19 emergency has been managed. Strong leadership, flexibility, good communications and concerted effort have led to good safety outcomes for residents; however, their wellbeing and access to rehabilitation support were inevitably affected.

The re-rolling of the prison to accommodate a higher proportion of remand prisoners has impacted on the ability to recruit and train prisoners as volunteers in the various roles performed throughout the prison.

#### **3.2 Main judgements**

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

The prison suffered a Covid-19 outbreak in February 2021 and managed to eliminate it after two months.

Violence has reduced significantly this year (paragraph 4.3.1). Management attribute success to good relationships between residents and staff, constructive use of security intelligence and the rollout of restorative approaches. Also, clearly the restricted regime and lack of association has limited the opportunities for violent incidents. Self-harm has also reduced considerably. A broader group of men was identified as vulnerable and received regular welfare checks (paragraph 5.3.1). Considerable work has been done to overhaul the early days in custody (EDIC) provision.

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

The regime mandated by HMPPS and PHE could be considered inhumane but it was apparent that most prisoners both accepted it and coped extremely well, although there was an increase in referrals to mental health services on wellbeing grounds (paragraph 6.3.1). The provision of in-cell telephony with extra allowances and the development of Purple Visits was well managed by the prison (paragraph 7.4.1). The chaplaincy service provided consistent support to prisoners (paragraph 5.5).

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

The prison successfully administered a vaccination programme in parallel with the programme in the community. Improved triage has decreased GP waiting times and non-attendance at appointments (paragraph 6.2.1). However, dentistry was suspended for longer than in the community (paragraph 6.2.4). The prison still has limited psychologist support on site (paragraph 6.3.1). WayOut TV was used to broadcast exercise programmes (paragraph 6.5.2).

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

Education staff remained on site and able to undertake reception assessments (paragraph 7.1). Some education materials and tuition were provided in-cell during Stage 3 regime periods. Remote education continued (paragraph 7.1.3). WayOut TV was used when possible for education (paragraph 7.1.1).

Resettlement resource was very limited as most agencies were absent from the prison. Those who were on site generally communicated with men by phone rather than in person (paragraph 7.5.3).

The OMU continued to operate and the controllers continued to approve home detention curfew HDC); however it was not possible to arrange release on temporary licence (ROTL). The accommodation on release target was still met (paragraph 7.5.6).

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

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

The Board remains concerned about the lack of suitable accommodation for prisoners on release compounded during this period by most agencies not being present in the prison to offer advice and guidance (paragraph 7.5.1).

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

The Board remains concerned about the small but significant number of prisoners held in separation and care units without the necessary mental health inputs to provide suitable programs of care.

The Board is concerned about the expectations of what will emerge as “full regime” in the future and how this will impact the lives of prisoners.

#### ***TO THE DIRECTOR***

While the prison operated key work to the stipulated exceptional delivery model (EDM) during the pandemic, the Board is keen that this should return to normal as soon as possible.

The Board is encouraged by the impact of security measures that have reduced the flow of illicit substances into the prison.

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

The Board welcomes the continued improvement in the quantity and quality of furnishings that have been placed on the wings. There has also been an improvement in the décor and general cleanliness in most areas.

The interventions of the safer custody teams together with more rigorous monitoring and action plans have resulted in a continued decrease in violence, also assisted by the restorative justice programme.

## Evidence sections 4 – 7

### 4. Safety

In our last report we observed that the prison had created a strategy with the aim of significantly improving safety; this year we report on the impact of this strategy.

There is a senior manager, the head of resident safety, who is responsible for the strategy and accountable for results. Day-to-day management is led by the safer custody manager for the men's prison, supported by a senior prison custody officer (SPCO) and a PCO. All resident-facing staff are expected to contribute to a safer prison.

The Board considers that the prison has made considerable improvements in safety performance and created better outcomes for many residents.

The prison has maintained safety as a high priority even when Covid-19 derailed many plans and caused significant operational pressures. Staffing resources dedicated to safety have been maintained, even with numbers of staff sick, isolating or shielding.

#### 4.1 Reception and induction

4.1.1 The Board has observed that reception processes are well-managed and residents are given good support during early days in custody. In November, the Board undertook a thematic review of residents' experiences in reception and nearly all were satisfied with the process.

4.1.2 On arrival food and drink is available, phone calls to family members are offered, and initial screening is undertaken by a nurse. A member of the safer custody team speaks to residents shortly after arrival to identify vulnerability and risk issues. The family matters team sees new residents the day after their arrival Monday to Friday, and weekend arrivals are seen the following Monday morning. Issues relating to home and family can be addressed quickly and residents reassured.

4.1.3 Limited peer support, because of pandemic restrictions, was available in reception. Listener training (by the Samaritans) was curtailed, and at the end of the year there was only one trained Listener, but five residents had been identified for training. In-cell telephony allowed residents to access Samaritans, whose contact details are detailed on the back of every resident ID card.

4.1.4 Targeted use was made of the body scanner including scanning of all recalls. It was used 527 times during the year, compared with 278 times during the previous reporting year.

4.1.5 Induction procedures were reviewed by the prison and in October the new early days centre was launched. Trained Insiders, resident on the wing, offer support during the two-week induction process (which is wing-based because of Covid-19 restrictions). The aim is to provide all new arrivals with the help and support they need. Residents have reported to the Board that the longer time spent on their first wing, and support by the Insider, has helped them settle into prison life. The Board notes that induction materials are now available in some foreign languages.



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

4.2.1 The Board monitors closely the management of suicide and self-harm (SASH) prevention. SASH is managed using the assessment, care in custody and teamwork (ACCT) system. There were 485 incidents of self-harm during the reporting year, 204 fewer than last year, representing a reduction of 30%. Force was used by staff to prevent self-harm on 12 occasions, one fewer than last year, a reduction of 8%.

4.2.2 The Board considers that the ACCT system is generally well run. The Director has instigated regular reviews, and case managers are carefully chosen and supervised by the safer custody team. In difficult cases ACCTs are supported by multi-disciplinary teams (MDT), with specialists such as mental health, healthcare, trauma, substance misuse and family matters. The Board is often invited to observe. ACCT plans are seen to be varied and resources are readily made available if constant watches are required. It is recognised that some men self-harm in a minor way to distract, others focus on significant injuries to deal with trauma or in an attempt to manipulate staff into satisfying their demands, for example extra vapes, a single cell or more time out of cell, while others have a clear intent to end their lives. A balanced approach of appropriate intervention and risk management can be seen.

4.2.3 There was one death in custody, the apparently self-inflicted death of a foreign national resident being held on an Immigration Service warrant.

## 4.3 Violence and violence reduction, self-isolation

4.3.1 The Board notes that violence has reduced significantly this year (see table below). This is partly because men are locked up for most of the time and unlocked in small groups. Additionally, restorative approaches (RA) have been embedded across the prison, and residents have been trained to act as RA representatives on the wings. The aim is for the representatives to resolve low level conflict before it escalates; feedback indicates they have facilitated in situations relating to bullying, gang affiliation, and conflict between a resident and an officer.

Details	2019/2020	2020/2021	% change
Resident on resident assaults	325 (56 serious)	163 (15 serious)	-50%
Resident on resident fights	103 (7 serious)	52 (2 serious)	-50%
Resident on staff assaults	96 (18 serious)	66 (14 serious)	-22%

4.3.2 The safer custody team investigates incidents of violence and closely monitors those prone to violence. They deserve credit for the impact of their work on the violence statistics.

4.3.3 There has been a concerted effort to increase the prison's control over gangs. Evidence of collaboration with outside agencies has been seen, intelligence co-ordination has improved and gang members are being proactively dispersed. The anti-violence HMPPS CSIP protocol has not been effective this year as lockdown has largely made unavailable the range of challenges and interventions that can be applied. However, the SCU has been seen to work persistently to address the behaviour of the most violent and disturbed individuals, and has made significant in-

roads, despite having to deal with violence, dirty protests and abuse. They have mentored individuals and used intervention and management plans to address concerns.

4.3.4 Lockdown has made drugs and contraband harder to access, and putting residents into bubbles has reduced distribution. The need to safeguard residents who are in debt remains an issue; a significant number of separation and care residents are there in their own interest. While safeguarding is always an issue, not unexpectedly, lockdown has increased the prison and residents' families' concerns for the vulnerable. Calls from families to the safe custody phone line have grown and the prison are seen to quickly carry out welfare checks. The prison deserves credit for its willingness to work with the families of the most vulnerable.

#### **4.4 Prisoners with specific vulnerabilities**

4.4.1 The Board closely monitors the management of residents with complex needs, who are managed by the weekly complex needs meeting group, and complex needs care planning system. Usually this group represents 2-3% of the men held in HMP Peterborough. The Board has previously been concerned at the low level of engagement at meetings from the primary healthcare team. This has improved somewhat this year, and the Board would welcome still greater input. The offender management unit SPCO has begun attending meetings which has also brought considerable benefits for example, by accessing pre-sentence reports and discharge planning.

4.4.2 The Board has not observed the foreign national manager attending, and believes that their input would be useful.

4.4.3 The Board has regularly attended meetings and observed the management of individuals on wings. In each observation individuals have been seen to be treated with humanity and compassion.

4.4.4 The healthcare unit (HCU) was managed differently this year, with beds being allocated on specific medical and mental health grounds and operational reasons taking a lower priority. Most admissions on operational grounds are brought from reception when staff have concerns about out-of-hours arrivals.

4.4.5 The Board considers that communication between the complex needs meeting group and operational staff could be improved; members have followed up on care plans with wing PCOs, hub SPCOs and houseblock managers, and sometimes find a lack of relevant knowledge about individuals they manage. Care plans are not always up-to-date and may be missing regularly discussed information.

4.4.6 Overall, while some minor issues need to be resolved, the prison has significantly developed the management of those with complex needs. Excellent examples of humane custody are regularly seen.

#### **4.5 Use of force**

4.5.1 Staff used force to maintain good order on 518 occasions, 209 fewer than last year, a reduction of 29%. The Board considers that this is a credit to the prison, particularly taking into account the frustrations residents have felt due to lockdown.

## **4.6 Substance misuse**

4.6.1 The prison's drug strategy, which outlines how it will restrict supply, reduce demand and build recovery, was revised in 2020. Its implementation is supported by a monthly integrated substance misuse service (ISMS) meeting. Implementation of the strategy has been affected by the pandemic; for example mandatory drug tests (MDTs) have been sporadic, and lockdown searches have been less frequent.

4.6.2 Effective methods are used to reduce the supply of illicit substances; all incoming post is photocopied and copies given to residents; all recalls are body-scanned in reception; parcels and clothing are scanned in reception; three dog handlers are available across both prisons.

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

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

5.1.1 General maintenance of the fabric of buildings re-started at the end of this reporting year following 'emergency only' work last year. Stairways and the internal and external area under windows in the houseblocks are on occasions littered and dirty, with discarded face masks, general refuse and overflowing orange waste bags. Showers throughout are generally shabby and require upgrade and refurbishment. The Board understands that there are refurbishment plans which will include privacy screens. The Board is not aware of any plans to install toilet screening. Some noticeboards are poorly maintained with little current information. Cells are hot in the summer and extra fans were brought in, but supplies were limited and initially there were not enough for all men who wanted them. Most cells had visible and legible cell cards. Externally the garden areas are neglected.

5.1.2 All areas are accessible by wheelchair users, but the Board remains concerned that there not enough disability adapted cells or equipment. An obese resident was housed in the healthcare unit with no suitable hoist or extra size mattress, although staff tried to maintain the resident's dignity with the equipment and accommodation available.

5.1.3 Men generally have cell privacy keys. Some wings are still awaiting the installation of new lockers, and it is quite common for some keys to go missing. All men are now provided with kettles, replacing hot water urns on the wing. Whenever possible, residents are provided with TVs or radios, and staff have been proactive in locating these if not already available on the wing. All mattresses are of the same type and standard unless an alternative is prescribed by the healthcare team. Bedding and towels are laundered regularly. Clothing is laundered on the wing and this continued until the Covid-19 outbreak was declared in February.

5.1.4 Applications to the Board in respect of accommodation including laundry and clothing total 13 this year (down in number from 28 in the previous reporting year). However, due to a drop in the overall number of applications received, the proportion remains similar (approximately 5%).

5.1.5 The prison has resolved problems with food trolleys and food is received on time in the wings. Meals are served hot and fit for consumption. The Christmas menu was well received with positive resident comments. Members have occasionally observed servery workers not wearing appropriate protective clothing, and on one occasion a member was told it was not available. Serveries are generally clean. 'Bubbles' for food service are running smoothly. Food comments books are visible, in use on most wings, monitored by wing staff and checked regularly by a member of the kitchen staff, although this did not happen when wings were locked down.

5.1.6 Health related diets and faith foods have been professionally managed, with little disruption throughout the year despite changes in kitchen arrangements due to the pandemic. There are adequate arrangements for vegan diet requests which are at approximately the same level as last year, and vegan dishes are indicated by symbols on the kiosk. The prison imam visits the kitchen to observe procedures for halal food, which is bought from a recognised halal supplier and is stored, prepared and served separately with separate utensils by Muslim workers.

5.1.7 The Board received six applications related to food (less than 2% of the total).

5.1.8 The prison planned carefully for potential Brexit problems such as reduced supplies or lack of spare parts for kitchen equipment. Plans are in place for an emergency diet menu and a field kitchen; fortunately, this has not been necessary. Food preparation time has not been unduly affected by having fewer kitchen workers because of social distancing; staff have recognised difficulties and helped where possible to ensure meals can be delivered on time. Several kitchen workers tested positive for Covid-19 in February 2021 and a contingency plan was put in place, with the kitchens deep cleaned overnight and women from the Vita Nova workshop deployed instead.

5.1.9 All residents may wear their own clothing. Residents can request basic joggers, tops and flipflops if they have no suitable clothing, however a resident requesting small size joggers was told that none are available. Work by the prison in this reporting year has identified products specific to ethnic minority hair and skin which will be offered via the kiosk later in 2021. Transitioning residents have been offered the Avon catalogue and appropriate clothing.

5.1.10 Less than 6% of complaints to the prison relate to the canteen or facilities list, and the Board received two applications in this area.

5.1.11 Time out of cell has been severely affected by the pandemic, and for much of the year has been no more than 90 minutes per day. During the outbreak period, men on lockdown wings were served meals in their cells, limited to two showers per week and offered no outdoor exercise.

5.1.12 Quality of life consultation meetings involving resident representatives have not been held for most of this year, limiting opportunities for feedback.

## **5.2 Segregation**

5.2.1 The separation and care unit (SCU) contains 14 cells, and maintains good levels of cleanliness, maintenance and tidiness. The unit generally operates at or

near full capacity. Men were placed in the unit on 767 occasions during the year, with five residents being frequent returners. The Board remains concerned at the number held in the unit on rule 45 for long periods (seven) while awaiting transfer to other prisons, a situation aggravated by Covid-19. During the year there were seven occasions when men were held on the unit for more than 42 days.

5.2.2 Residents on ACCT documentation were held in the unit on 35 occasions compared with 79 last year. The Board continues to monitor this situation and considers that in general the men concerned received appropriate support. There were 16 dirty protests during the period but despite these challenges the special accommodation cells were not used.

5.2.3 The Board normally attends all rule 45 or 49 reviews, but due to Covid-19 restrictions, this was mainly confined to telephone conferencing. Unfortunately the Board was not always notified when these took place. 177 rule 45 reviews were held during the period.

5.2.4 There were 1906 adjudications of which 295 were not proceeded with due to fatal flaws such as being out of time, the co-accused being found guilty, and the transfer or release of the accused or the victim. Normally the Board would attend a number of these reviews but this was severely restricted this period due to Covid-19.

5.2.5 Covid-19 presented challenges to the unit, with staff shortages due to sickness and residents having to adjust to the restricted regime. Access to activities was severely limited, but in-cell education and distraction packs were issued as well as extra canteen packs. HMPPS provided an additional £5 phone credit per week. At all times residents received an appropriate regime including access to exercise yards and showers. The unit was visited by the chaplaincy and nursing teams daily with visits from the doctor three times a week.

5.2.6 The Board's normal weekly monitoring visit of the unit was for the main part suspended and the alternative of weekly phone monitoring was carried out. Whilst the Board was unable to speak directly to residents, there was a full discussion about each resident with the unit management cooperating fully with the Board. In general the Board observed unit staff managing and dealing appropriately with often very demanding residents during a very demanding year.

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

5.3.1 During the early months of the pandemic, key worker contact was limited to residents deemed high risk or with complex needs, or vulnerable, this last group broadened to include those with no family contact or not making external telephone calls. The scheme was then widened to include a weekly welfare check for all residents, in addition to continuing the support for those with complex needs. Wing staff operate as key workers on wings they work on. Contacts with residents are recorded weekly. The proportion of residents with a recorded key worker contact varied greatly during the year. From March to September 2020 the weekly average was 12.2%, peaking at 36% in one particular month. From October 2020 to March 2021 this improved to a weekly average of 59.5%, peaking at 86% in one particular month.

5.3.2 Many men remain unaware of the key worker system and the Board would like to see an increase in residents being allocated a contactable key worker whom they feel supported by, and evidence of improved outcomes for residents as a result of having a key worker.

5.3.3 The Board has observed a high level of positive working relationships between staff and residents over the year with good rapport and professionalism noted – particularly during rule 45 review meetings, adjudications and in complex situations. This has been noted over the period of the pandemic and staff have been sensitive to the unusual circumstances of this year.

## **5.4 Equality and diversity**

5.4.1 The Board monitors the prison management's approach to equality and diversity by attending or reviewing the bi-monthly diversity and inclusion meetings. Attendance includes the Director/deputy director, a diversity and inclusion manager, lead managers for the nine protected characteristics and at least one diversity representative who is a resident. There has been increased attendance by senior managers compared to last year. A new diversity and inclusion manager was appointed in the autumn to replace an individual on long-term sick leave.

5.4.2 An equality action plan is regularly updated. The Board notes that at times timescales for achievement of outcomes have been extended or delayed, but in recent months there has been renewed focus and improved structure. It is noted that there has been an increase in raising awareness of equality matters amongst both staff and residents with the development of new initiatives such as widening the scope of focus groups, developing further training options, developing training toolkits and making new links with outside partner agencies. The prison also now collects more consistent equality data and monitors it more consistently. There was no evidence this year of significant disproportionality.

5.4.3 Focus groups operate for all nine protected characteristics and information from these is fed into the diversity and inclusion meetings. There has been recent improvement in ensuring information and decisions from this meeting circulate back to the focus groups.

5.4.4 At the end of the reporting year there were 159 male foreign national residents. Residents are seen by a foreign nationals officer within three days of arrival. Progress through the courts has been slower than usual and flights have been cancelled and delayed this year due to the pandemic which has caused distress for residents. The Board will monitor evidence that residents are supported well with appropriate communication methods at these stressful times and that there is diligent recording of all contacts and actions taken.

5.4.5 Written information for reception and induction is now available in eight languages, an improvement from previous years when no translated material was available. Interpreting support is available via a telephone translation service however staff or residents fluent in the relevant language are often called upon. The Board will continue to observe whether the most appropriate form of interpreting service is used according to the need and the occasion, particularly in relation to

confidential matters. A supply of international library books has been made available for residents.

5.4.6 There were 53 DIRFs in this 12-month period and 60.4% were completed within timescale. 85.5% of DIRFs were alleged discrimination on grounds of race. Eight DIRFs were upheld. Independent scrutiny arrangements of DIRFs are not yet in place due to difficulties setting this up during the pandemic, however an internal quality assurance process has been instigated involving oversight by the diversity and inclusion lead and the deputy director. The Board considers numbers of DIRFs are low and notes recent promotional work has been carried out to raise awareness of the DIRF process amongst residents.

5.4.7 The prison has worked continuously throughout the year to resolve resident need for culturally appropriate personal care and dietary products, despite some obstacles with suppliers and costs. Residents have expressed increased satisfaction with the improvements now made to availability of products. There has been good recognition of the importance of this for residents.

5.4.8 The Board notes that there is excellent focus on celebration and awareness days throughout the year such as Black History month, International Men's Day, Transgender Awareness, general men's health awareness days, and also for most religious festivals. There is a circulated calendar of events throughout the year. The prison develops good links with community or external support for these events.

5.4.9 The pandemic has caused a delay in the appointment of a special educational needs coordinator for residents with learning difficulties and this has delayed the development of a learning disability strategy. The Board would like to see progress on this as soon as possible.

5.4.10 The prison is largely accessible for residents using wheelchairs and lift passes are issued where appropriate. A supplier for maintenance of wheelchairs has recently been identified. The needs for mature residents are being considered well such as the need for suitable chairs, mattresses and additional blankets.

5.4.11 The Board notes there is good support for transgender residents with individual plans. The Board considers that transgender people are treated decently and sensitively. Training is provided at staff induction and appropriate toolkits are currently being prepared for use to support staff and raise awareness.

## **5.5 Faith and pastoral support**

5.5.1 The Board considers that there is good provision for all faiths within the prison and excellent support is provided by the chaplaincy service to both residents and staff, with daily contact being made with all wings throughout the pandemic. Services have been developed with faith pastors within the community who provide literature and materials to be distributed, plus DVDs and books. Services are available for a wide variety of faiths on WayOut TV and national radio and chaplaincy headquarters provide newsletters for distribution.

5.5.2 Good planning and provision was made for Ramadan with respect to food availability at appropriate times.

5.5.3 New appointments have recently been made for Hindu, Muslim and Pagan chaplains.

5.5.4 The chaplaincy has continued to provide individual support to bereaved men, including private access to the chapel and support to attend funerals by video.

## **5.6 Incentives schemes (IP)**

5.6.1 The use of the Basic level was suspended during the pandemic in line with national instructions, and any transfers also retained their IEP status from their previous prison. TVs were given to all residents who wanted them. The Board has continued to receive applications concerning staff behaviour, including on occasion alleged unfairness, but has received none relating specifically to IEP processes being considered unfair. The Board notes that residents occasionally find they are not allowed in possession items that they were entitled to elsewhere at the same level of IEP, because facilities lists are at the discretion of prison management.

## **5.7 Complaints**

5.7.1 The prison received 1521 complaints in the reporting year, a 20% reduction from the previous year, and responded to 94% within the required timescale. The most significant areas complained about were property (25% of total), issues on wings (18%), post (8%) and canteen (6%). Healthcare complaints remained at a similar level to the previous year. 92% of responses to complaints overall were within time.

## **5.8 Property**

5.8.1 Less than 19% of all applications to the Board are in-house property related (a total of 50 in comparison to 69 last year).

5.8.2 Residents may request a copy of their personal property list via the offender management unit, which can be a lengthy process. Paper property cards are at risk of damage or loss and a digital system would be preferable. The facilities list of allowable possessions is displayed on the wing notice boards.

5.8.3 A log number to access property is by request every six months, or three months for enhanced residents. The property store area has not been opened for residents to visit in person most of this year, and officers take property from and to the wings. This has inevitably caused some delays and losses and added to resident frustration.

5.8.4 Residents coming into the prison should be present when their property is logged, and the list is signed in by the individual at that time. Property recording happens out of sight of the resident in exceptional circumstances, for example if the resident is with medical staff or being issued with an identification card, and requires the resident to consent. Any excess allowable property is stored until transfer or release. Other property is posted back at the owner's expense. Some residents have difficulty understanding rules if they have limited language skills. The Board would like to see property rules provided in other languages.



5.8.5 Books are accepted directly from a list of agreed suppliers and from family and friends by post, subject to security protocols. This is a well-received and appreciated service. Music CDs are allowed if purchased from an agreed recognised supplier. Family or friends can only send new sealed music CDs of allowable content, which is religious music or foreign language material. Most residents are aware of the prison rules about music.

5.8.6 Parcels delivered by courier are sometimes reported as 'missing' because the delivery drivers may not wait for checks at the gate and a parcel is not delivered. All parcels are now routinely tested for illicit substances in accordance with guidelines laid down by HMPPS, and then sent to reception, usually within 48 hours.

5.8.7 There is a separate property store in the new transport, which should reduce the risk of items being lost between establishments.

5.8.8 The prison, in the main, gives due consideration to property, and recognises importance to the residents. Compensation was paid to residents on 18 occasions for property lost at the prison.

## **6. Health and wellbeing**

### **6.1 Healthcare general**

6.1.1 The healthcare unit has seven single cells and a ward area suitable for four men. It is staffed by PCOs, with daily visits from managers, chaplaincy, and weekly monitoring visits by the Board (conducted by phone during the Covid-19 Stage 4 periods). Healthcare supports SCU and HCU with daily visits and nurses normally attend all ACCT and segregation reviews. New ways of working such as a 'one stop shop' for secondary screening of new residents have saved nurses' and residents' time. Unfortunately, despite careful management, an outbreak of Covid-19 occurred in February 2021. Good management initiatives and close working with Public Health England helped to contain it. No CQC assessment was carried out during the reporting period.

6.1.2 A recent Board survey of 50 men showed more residents were dissatisfied with the quality of healthcare than satisfied, with comments including 'doctor will not deal with 2 issues at once', 'must wait another 3 weeks to reapply', but also positive comments including 'happy with mental health treatment' and 'bad asthma well looked after'. Comments on the same survey showed most residents found it difficult to get an appointment; this was possibly influenced by the discontinuation of dental services until January 2021. Healthcare was mentioned four times in rota reports over the year (twice about the lack of dentistry and twice when residents were not collected for healthcare appointments).

6.1.3 There were 62 health applications to the Board compared with 86 last year, of which 15 (24%) related to medication. Over the year healthcare complaints averaged 24.8 per month, similar to the previous year. The complaints (nearly 66%) relate to either treatment received, or medications, and more than 90% were answered within the required timeframe.

## 6.2 Physical healthcare

6.2.1 The procedures for access to clinicians were changed at the outset of the pandemic, and statistics on waiting times are no longer collected as in previous years. All requests for appointments (GP and nurses) were subject to triage by nurses who make use of in-cell telephones. This has been a success, with more efficient processing of requests and appointments not requiring a GP, leading to shorter waiting times (approximately two days for the GP) and significantly reduced did-not-attend statistics. It is intended that this approach will continue. Covid-19 positive residents were still seen in clinic, if clinically necessary. Screening clinics (for example diabetic eye retinopathy) were suspended.

6.2.2 Of 208 residents falling into national qualifying Covid-19 vaccine cohorts 1-9, 17 had clinical contraindications, one had not been offered the vaccination at the end of the reporting year, and 156 accepted, representing an 82% uptake. Over 50% of those who refused were in cohort 6 (long-term conditions).

6.2.3 Pharmacy services were brought in house in February 2021, enabling an enhanced clinical service. Initiatives to improve medication administration were driven by Covid-19, and included rationalising to provision twice daily where possible, giving regular and controlled medication at the same time, and refreshing risk assessments with the aim of permitting more residents “in possession” drugs, including paracetamol.

6.2.4 The dental service was suspended until January 2021, resulting in complaints from residents having to tolerate painful conditions. This did not mirror dental services in the community which continued to a limited level during the same period. Healthcare was given an algorithm by the dentist to follow to manage pain and infections and serious cases were referred to the local hospital.

6.2.5 One double amputee resident with morbid obesity was inappropriately kept on the healthcare unit without suitable facilities for his needs due to none being available nationally for a remand prisoner.

6.2.6 Overall there was some reduction in healthcare activities compared with the previous year. However, probably as a result of the new triage procedure, there was a large reduction in appointments cancelled and DNAs. Cancelled appointments fell from nearly 2,800 to 825, and DNAs fell from nearly 5,000 to 1,204.

## Healthcare activities 2020-21

Totals for the year 2020-21	Booked Appointments	Cancelled Appointments	DNA	% DNA Rate
Doctor Clinic	5453	233	194	4%
Nurse Clinics	8825	527	983	11%
ISMS	8440	65	27	0%
Dentist	103	12	10	10%

### 6.3 Mental health

6.3.1 The mental health (InReach) team operates across both prisons. This reporting year, there has been a shortfall in the establishment of two nurses, one psychiatrist and one psychologist. The team has experienced an increase in the number of men seeking help, with the loss of social visits and delays to court hearings and HDC release being particular concerns. However, about 75% of referrals are found on assessment not to have recognisable mental health issues.

6.3.2 InReach examined its service model and attempted to address some problems through distraction packs and self-help coping mechanisms. Patient outcomes have been improved by the use of in-cell telephony. Covid-19 has caused delays with responses from external agencies, most notably for assessments regarding patients' suitability for transfer to a secure institution, that could not be conducted by video link. At first agencies prioritised Covid-19 risk rather than acuteness of mental health need; however this improved as experience was gained with quarantining, cohorting and the national regime in general.

6.3.3 At the end of the reporting year there were 57 men receiving treatment. In conclusion, InReach has been able to keep waiting times for psychology and psychiatry down by changing ways of working, better triaging and signposting and more extensive use of self-help guides.

### 6.4 Social care

6.4.1 Social care assessment is conducted by staff from Peterborough City Council and has been carried out remotely by phone for most of the year, although site visits were made if essential. Provision is monitored through the monthly clinical governance meeting.

6.4.2 Residents may self-refer for assessment by using the kiosk facility or be referred by staff or healthcare. Referrals have been at the rate of one or two per month. At the end of the reporting year there were three men receiving care packages. Carers have continued to attend and used PPE as appropriate. The Board's wing inspections during the year indicated that in general staff were aware when residents had personal emergency evacuation plans (PEEPs).

### 6.5 Exercise, regime

6.5.1 Throughout the reporting period, Covid-19 protection arrangements involved a restricted regime for residents. Individuals were unlocked each day in 'bubble groups' with no more than six at a time for two periods, typically 20 minutes for

shower and kiosk and 30 minutes for exercise outside. During the Stage 3 regime exercise groups were extended to 20 residents at a time for 45 minutes exercise outside. While wellbeing checks were conducted for residents identified as vulnerable, there was an increase in referrals to mental health services, some on wellbeing grounds.

6.5.2 The gym was closed for much of the year due to Covid-19 restrictions. However, the WayOut TV service was used to broadcast exercise classes, and in-cell exercise guides were available to help residents maintain physical fitness.

## **6.6 Drug and alcohol rehabilitation**

6.6.1 The prison continued to operate two reception wings, one being specifically for detoxifying residents. On average there were nearly 48 referrals per month to the ISMS service and 98.3% of those referred were seen within 1 week. On average more than 50 ISMS treated residents were released each month, and 92.5% of those had been provided with release plans.

## **6.7 Soft skills**

Distraction packs have been made available across the prison, although these were for entertainment rather than skills.

# **7. Progression and resettlement**

## **7.1 Education, library**

7.1.1 Education staff remained on site, with some exceptions for shielding, and have been able to continue some education provision in a different way. Classroom learning could not take place, but education staff continued to deliver learning using work packs and contact with residents through cell doors or via in-cell telephones. Skills levels in English and maths were still assessed in the induction process, and appropriate in-cell workbooks provided. Over 300 qualifications in English, maths, ESOL and art have been gained via in-cell and remote learning this year with the use of WayOut TV offering some courses. The Board notes that no ICT learning was delivered during the pandemic, which may jeopardise employment opportunities for residents on release.

7.1.2 Over 40,000 in-cell activity packs have been delivered to wings. However, the take up rate has not been recorded so evaluation is difficult.

7.1.3 Remote learning continued through the reporting year.

7.1.4 The library was closed, but a mobile library was introduced visiting each wing in rotation, which continued to operate throughout lockdown. A civilian librarian also joined the prison staff during the reporting year. The Board expects to see the library open more often as a consequence.

7.1.5 Education provision is reviewed at quarterly quality improvement group (QIG) meetings, where information about attendance and achievement are presented and

evaluated. Learning and skills champions would normally attend these meetings to present residents' views but have been unable to do this during lockdown.

## **7.2 Vocational training, work**

7.2.1 The range of vocational training opportunities offered during lockdown has been greatly reduced, with only the recycling and carpentry workshops and the call centre available for limited attendance. The kitchens and laundry continued to operate. The Board is disappointed that there continue to be no opportunities for residents to work in an outdoor environment.

7.2.2 Forklift truck training has not been restarted mainly due to security concerns. It is hoped that the prison will look again at providing this especially useful training.

7.2.3 ROTL opportunities have ceased altogether during the pandemic and will not resume until the prison gains Stage 2 status; however liaison with the outside contacts who provide opportunities has been maintained. There has been no employment ROTL during the year.

## **7.3 Offender management, progression**

7.3.1 All new sentenced residents serving more than one year are allocated an offender supervisor and seen shortly after arrival to begin sentence planning.

7.3.2 During the reporting year the preparation of offender assessments (OASys) was affected as staff were unable to meet residents in person, although the assessments were completed. Offender management programmes were reduced and those which ran had fewer residents attending to maintain social distancing.

7.3.3 The offender management in custody (OMiC) scheme had been embedded across the prison before the pandemic. It was initially reduced to include only residents who were considered most at need, but towards the end of the year this was extended and should be fully available by May 2021. To reduce movement of staff across the prison, key workers were allocated to residents on their wing. Some residents reported to the Board they had had limited or no interaction with a key worker and would prefer a worker who was independent of their wing.

7.3.4 Transfers had a small impact; they still took place but required Gold HMPPS approval. Home detention curfew (HDC) continued to be assessed and granted by the controller team. Release on temporary licence (ROTL) ceased for the whole reporting period. Parole hearings were initially affected during the pandemic. Specialist IT equipment, which did not become operational until September 2020, had to be set up at HMP Peterborough for the parole team/chair to use on site. Once it had been set up hearings were able to continue.

7.3.5 The court video links within the prison were used to mitigate the lack of face-to-face interaction at hearings for men on IPP and life sentences. At the end of the reporting year there were 12 men serving IPP sentences, all beyond tariff, and 12 men serving life sentences.

## **7.4 Family contact**

7.4.1 Pandemic restrictions meant that family contact was reduced. For much of the year social visits were suspended, and when reinstated were limited to one hour, and for much of the year were not available at weekends owing to staff shortages. There were no family day events. Purple Visits using vetted video technology started from September 2020, and while initial take up was low, its use increased gradually for the rest of the year. The number of slots available increased in October in preparation for the second lockdown.

7.4.2 Throughout the year access to mail and telephone services was uninterrupted. Additional phone credit was made available to residents to enable family contact and ease anxiety for those with insufficient funds.

7.4.3 The family matters team has continued to see all new arrivals throughout the year, and any new arrivals under 25 who were in care prior to arrival. The team all received approved restorative family training in the autumn. Parenting assessments and contact with regional social services has continued, for example in March 2021, 167 new receptions were seen by the team and last month also saw a noticeable increase in calls from social workers and solicitors as the Covid-19 infection rates were starting to show significant decline in the UK. The team planned to procure new children's play equipment for the visits hall.

## **7.5 Resettlement planning**

7.5.1 Pandemic restrictions reduced the presence of community rehabilitation company (CRC) and other agency staff in the prison for the first quarter of the reporting year. When they returned in July 2020, most contact with residents was over the phone. Staff commented to the Board that their tasks were more difficult, due to lack of face-to-face interaction with residents.

7.5.2 'Most in need' assessments were still completed on all residents who had been in custody 15 times or more. The most in need in-house programme was not delivered this year. The building skills for recovery (BSR) and thinking skills (TSP) programmes were delivered to very few men this year, which had a negative impact on men's preparation for release.

7.5.3 The CRCs continued to give help on accommodation, bank accounts and personal IDs. Initial work was conducted with residents on the phone pre-release and then support packs were provided by the outside link team on departure from custody. It is noted that Job Centre Plus was absent for the whole reporting year, which reduced the specialist advice (for example on benefits) available to residents.

7.5.4 Total recalls for the year were 607. Some residents who did not have access to a phone on release were given a mobile phone to help them maintain contact with probation.

7.5.5 The outside link staff gave valuable support at the gate to residents on release, including accurate information on Covid-19 measures and provision of masks. In the outside link building, reduced hours were imposed due to Covid-19, with a maximum of six people at a time in the building. The service continued to be

well used; for example, during April and May 2020, 50 men visited and housing assessments were completed for six who were offered accommodation at a local hotel.

7.5.6 Finding suitable accommodation on release continued to be challenging. The resettlement team recently secured a small number of local accommodation places in Peterborough with Eastfield House and the 3 Pillows organisation. All are there for immediate local releases who have no accommodation. 74% of men were released to settled accommodation, in accordance with the target.

## 8. The work of the IMB

Members made no visits from 1 April to mid July 2020, with some but not all members resuming on site monitoring since then. All Board meetings during the reporting year were held remotely via teleconference or video conference.

Members have been able to listen to the weekday morning briefing meeting at the prison. They have also been invited to listen to some segregation reviews remotely; however, this has been inconsistent and there is not as a result a consistent record of reviews attended. Healthcare and separation and care units were monitored weekly, either by phone remotely or in the prison, or on some occasions in person. At least one residential wing was monitored by phone or in person each week.

The Board has successfully implemented a more flexible approach to rota activities, which has enabled members who are in the workplace to be able to fully contribute to the work of the Board.

One new member joined the Board in September 2020.

### Board statistics

Recommended complement of Board members	18
Number of Board members at the start of the reporting period	12
Number of Board members at the end of the reporting period	13
Total number of visits to the establishment	175 *
Total number of segregation reviews attended	n/a

\* Covers visits to both the men's and women's prisons



## Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	28	13
B	Discipline, including adjudications, IEP, sanctions	4	1
C	Equality	8	7
D	Purposeful activity, including education, work, training, library, regime, time out of cell	32	8
E1	Letters, visits, telephones, public protection restrictions	31	10
E2	Finance, including pay, private monies, spends	17	10
F	Food and kitchens	8	6
G	Health, including physical, mental, social care	86	62
H1	Property within this establishment	69	50
H2	Property during transfer or in another establishment or location	34	12
H3	Canteen, facility list, catalogue(s)	12	2
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation	56	29
J	Staff/prisoner concerns, including bullying	94	54
K	Transfers	22	4
L	Miscellaneous, including complaints system	12	2
	<b>Total number of applications</b>	<b>513</b>	<b>270</b>

The data includes applications taken by telephone on the 0800 line.



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