



HM Chief Inspector of Prisons for England and Wales

Annual Report 2020–21

HC 442

HM Chief Inspector of Prisons for England and Wales

Annual Report 2020–21

Presented to Parliament pursuant to Section 5A of the Prison Act 1952.

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Introduction

by the Chief Inspector of Prisons

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Prisoners, Parents &
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This is my first annual report and it covers a year of the COVID-19 pandemic. Much of the report, inevitably, focuses on the impact on the daily life of those held in prisons and other places of detention in England and Wales, who were subject to unprecedented restrictions. We were able to report on this because we were determined, in the early weeks of the pandemic, to find a safe way to enter and inspect places of detention. We could not report on treatment and conditions remotely.

As my predecessor observed in his annual report introduction last year, the entrenched problems the Inspectorate had identified over recent years did not disappear because of the pandemic. Violence, for instance, may have been suppressed by locking people up for almost all of the day, but its underlying causes have not gone away and continuing severe lock-up cannot be the answer in a post-COVID-19 world. It was understandably difficult for prisons to deliver full programmes of education, training and rehabilitation during COVID-19, but we have found poor outcomes in purposeful activity and failures in rehabilitation and release planning for many years, and the slow pace in some establishments in re-establishing these services has exacerbated that issue. Equally, the variations in performance we have seen for years between ostensibly comparable establishments – and the failure to learn from the better performing establishments – were clear to us during COVID-19, and will undoubtedly continue.

The year of COVID-19

For those living and working in prisons, this has been a year like no other. The challenges that the rest of us have faced in the community have been compounded in the secure estate where the risk of infection, in an environment where large numbers of people live and work in close proximity, is high. The Prison Service and ministers should be commended for their initial swift action in preventing the sorts of outbreaks that we have seen in other jurisdictions despite, at times, having large numbers of staff absent because of the virus. We found that prisoners were initially grateful for the steps that had been taken to keep them safe and at most prisons, we saw effective measures in place to prevent the spread of infection.

In autumn 2020, we conducted a thematic review, *What happens to prisoners in a pandemic?*, in which we interviewed more than 70 men, women and children across six prisons. It showed that keeping the worst excesses of the virus at bay has been achieved at significant cost to the welfare and progression of prisoners, most of whom have spent the pandemic locked in their cells for 22.5 hours a day. For many this has meant living their lives in a small cell that has limited ventilation, a toilet that may or may not have a curtain in front of it, a television and a cell mate. In the short time that they are let out each day, prisoners need to scramble to have a shower, make a phone call and get some fresh air.

The situation was even worse for prisoners in quarantine or those who had to isolate due to COVID-19 symptoms, with some spending just 20 minutes out of their cell a day. In one case, a prisoner in isolation was allowed out of his cell once a week for a 15-minute shower.

During our scrutiny visits many prisoners told us that they understood the reasons for the restrictions, but they felt drained, despondent, depleted, helpless and without hope. To manage the chronic boredom, some told us they listened to the ticking of the clock or counted down the days on the calendar. One prisoner said:

‘It’s like being in prison, while you’re in prison.’

The conclusions of our thematic review are particularly concerning in light of our other inspection findings. We found that most mental health services had ceased routine assessments or interventions and were focusing only on urgent and acute care. Prisoners often faced considerable waits to see mental health practitioners; in our survey, over half of prisoners told us they had mental health problems (52%) but less than a quarter said it was easy to see mental health workers (22%). There was also widespread curtailment of other health care services that left a long backlog of cases. At one prison we found prisoners waiting more than a year to see the GP.

There is no doubt that rehabilitation should be one of the main purposes of prisons, yet too many prisoners were locked up with too little to do before the pandemic and the situation became much worse this year, even in training prisons. In the last year leaders have had to make difficult decisions about staffing and services. This has meant that many prisoners have been denied the opportunity to get onto programmes that were part of their sentence plan and have therefore been unable to progress to a lower category prison or to a successful parole hearing.

Open (category D) prisons have been particularly hard hit by restrictions on release on temporary licence (ROTL) and some of the most frustrated prisoners I have met have been in these establishments. They arrived having proved they could be trusted in a less secure environment with the expectation that they would begin to experience life as a citizen rather than as a prisoner.

Visits have recently restarted in some establishments, but many prisoners have not seen family or friends for over a year. This is concerning because regular contact is a critical factor in holding families together and preventing reoffending. Even where visits have been possible, many prisoners have preferred not to be visited at all when constraints have forbidden any physical contact, even with young children. We came across one case where a prisoner was banned from visits for a month and sent into quarantine because his toddler came and sat on his lap; elsewhere we saw a more understanding approach.

Classroom-based education stopped in March last year and did not restart in the summer, in most prisons when restrictions were being lifted. Generic cell packs were developed by education providers, but some of these did not arrive until months after the lockdown began, which raised the question: what had the staff been doing during that time? In some establishments there has been an attempt to create bespoke in-cell learning packs as a result of assessment of prisoners' needs, and some have been able to pass basic qualifications. In limited circumstances, there may be some benefit to in-cell education, particularly for the most motivated prisoners who are taking qualifications at level 3 and above. The idea however, that these packs are in any way a substitute for high-quality face-to-face teaching is fanciful, particularly for the considerable proportion of prisoners with learning difficulties or a troubled educational past.

The lack of access to offender management programmes, education, resettlement planning and family visits means that in the last year, many prisoners have been released without some of the core building blocks that will help them to lead successful, crime-free lives. This may increase the risk that more will continue to offend.

The importance of leadership

Despite it generally being a difficult year, we saw areas of promise. One was the introduction of video calling for prisoners, known as Purple Visits. Although the initial roll-out was slow, by January 2021 the service was available at all prisons and young offender institutions (YOIs) across England and Wales, and for some prisoners Purple Visits have been a lifeline. Not enough was done to understand why initial take-up of these visits was low, although we saw efforts made at some prisons, including at Wetherby YOI, where a designated, proactive member of staff was appointed to take responsibility for managing and promoting video calls. HM Prison and Probation Service (HMPPS) should be congratulated for this innovative work and it is important that video calling facilities remain after restrictions are lifted.

The ability to innovate and work under extreme pressure was also seen elsewhere. As national restrictions began to lift in the summer, we found that leaders at some prisons were able to make speedy progress to return to a full regime, within the limitations of public health advice. For example, leaders at Bristol had maximised the time prisoners spent out of their cells and worked to make purposeful activity safe, which meant it had been maintained for about 44% of prisoners throughout the pandemic. Social visits had resumed earlier than in many prisons and were managed with sensitivity and discretion, while reflecting public health advice.

We saw a similar example of leadership in the youth estate. Throughout the pandemic, children at Parc YOI faced fewer restrictions than other YOIs, spending more than three hours a day out of their cells even in April 2020. When we visited again in April this year we found children at Parc (with the lowest per-place funding of any youth custody in England and Wales) were spending 10 hours out of their cells a day, more than double what is being offered to children in YOIs run by the Youth Custody Service (YCS). With the current spend at an average of more than £200,000 per child and very high staff ratios, it is hard to see why a similar regime has not been replicated by the YCS elsewhere in the youth estate.

There is no doubt that good leaders are one of the most important factors in improving prisons, so it is right that this should become a more important part of our inspections. After extensive consultation we have developed new expectations for leadership. The starting point for our inspections will be the prison leadership's Self-Assessment Report in which we will ask them to assess their establishment against our four healthy prison tests, set and monitor priorities, and evaluate their progress against the key recommendations in our most recent inspection report. We hope that this new focus will help leaders across different tiers of the Prison Service to learn from the most effective and successful prisons.

Meeting individual need

This year also confirmed the importance of meeting the needs of different groups across the estate.

In women's prisons, some told us the lack of face-to-face access to peer support workers, who could offer guidance when they were feeling low, and the loss of association periods when they could talk to friends, had deepened their distress. While self-harm in the male estate has generally fallen during the pandemic, it increased among women in prison, particularly in the early months of the pandemic. Although additional well-being checks had been introduced at all the women's prisons we visited, and there were good systems in place to identify vulnerable women, we remained concerned that those with high levels of need were not receiving enough support. Women's lack of contact with the outside world had led to extreme frustration and many had not seen their children for many months, leaving them feeling lonely and anxious.

Our new *Expectations* for women's prisons (<https://www.justiceinspectors.gov.uk/hmiprisons/our-expectations/womens-prison-expectations/>) will sharpen the way we inspect these establishments, focusing on what women need to resettle safely and successfully back into the community when they are released.

Prisoners with disabilities received too little help and we found cases of unacceptable treatment during the year. At some prisons the very poor support for prisoners with disabilities meant some were unable to clean themselves, their cells or access showers. There were serious safeguarding concerns relating to very vulnerable prisoners with disabilities at Erlestoke, who were without the social care provision they needed. It was not surprising that our survey showed that overall, 32% of those who said they had disabilities felt unsafe compared with 19% who said they did not have disabilities.

When restrictions were introduced last March, children in custody were subjected to the same regime as adults, with a big reduction in time out of cell and, with the notable exception of Parc YOI, no face-to-face education. Out in the community, vulnerable children continued to attend school during the pandemic as the government made exceptions for those whose well-being and progress would be put most at risk by being at home. It was therefore very disappointing that children in custody, without doubt one of the most vulnerable groups, did not get back into even limited face-to-face education until June or July 2020. At Wetherby delivery was inconsistent for the majority of children until January 2021. As the year continued, the YCS began to operate differently from the adult estate and children were able to spend slightly more time out of their cells. During the latest lockdown in January 2021, education and visits continued at YOIs and secure training centres (STCs).

In December 2020 at Rainsbrook STC we saw practice that was so poor that, together with our colleagues at Ofsted and the Care Quality Commission, we had no choice but to invoke an Urgent Notification to the Lord Chancellor (see page 71).

In the last year, a greater proportion of children in custody have reported that they feel cared for by staff. The challenge to the YCS is to build on the improved relationships that have developed during the pandemic, while making sure that children have full access to the education and support that they need.

Prior to the pandemic, the Inspectorate had decided to look more closely at the needs of those aged between 18 and 25 years old in custody. This resulted in the thematic report, *Outcomes for young adults in custody*, which highlighted that things were much worse for young adults than for adults. We found that young adults were placed in a range of different types of establishment without considering their needs and that provision for them largely relied on dedicated individual members of staff doing their best with limited resources. We decided to make just one key recommendation – for HMPPS to develop a national strategy for young adults. This is essential if there is to be progress with this vulnerable and often challenging group.

We also published a thematic report on *Minority ethnic prisoners' experiences of rehabilitation and release planning*. We found black and minority ethnic and Gypsy, Roma and Traveller prisoners experienced poorer outcomes in rehabilitation and release planning and there was little evidence that staff understood how experiences of prejudice and discrimination affected rehabilitation for black and minority ethnic prisoners. We also found insufficient use of data throughout, but this was particularly apparent with Gypsy, Roma and Traveller prisoners, who were poorly identified in all prisons. One of our recommendations was that HMPPS collects information on a wide range of activities which draws out differences between ethnic groups.

During our scrutiny visits, we often found work to promote equality had been neglected during the pandemic and many meetings and forums had not taken place. HM Inspectorate of Prisons will undertake a thematic review into the experience of black men in prison in the coming months.

During the year, the Inspectorate has undertaken work to consider how it can make better use of the many available sources of data when assessing outcomes for prisoners. I hope that by doing this we can support HMPPS in its aim to become more data-driven, with an emphasis on setting targets for improvement and monitoring progress.

Court custody

In our court custody inspections, we were pleased to see that the introduction of new contracts for escorting prisoners had brought about some positive changes, such as the risk-based, as opposed to routine, use of handcuffs. Contractual improvements requiring children to be accompanied and cared for by designated, trained staff were beginning to be realised, although children were still being held in cells too often. As in previous years, a real strength of court custody has been the caring and understanding approach taken by most staff, which has helped to mitigate some of the poor conditions.

Immigration detention

For the first time this year, we inspected Border Force short-term holding facilities (STHFs) on a national basis. The key finding from this inspection was that there was inadequate leadership and management of STHF detention. The Home Office had not notified us of the location of all STHFs, as it should on an ongoing basis, and the list of locations it provided ahead of the inspection was amended several times before and during our visits. Border Force was not able to provide us with comprehensive data on the number of detainees or the length of time they had spent in detention.

We also inspected provision for those who had recently arrived in Dover on small boats. There had been a general failure to plan for what we considered to have been a predictable increase in arrivals. The facilities at Tug Haven looked more like a building site than a place to look after vulnerable migrants. Some of the safeguarding procedures, particularly for children, were unacceptably poor, with one child being held for 66 hours before being moved to more suitable accommodation. Yarl's Wood IRC in Bedfordshire and Lunar House in Croydon however, provided better facilities and safeguarding arrangements were much more robust. We have been told that improvements to facilities at Dover have been made since our inspection.

We were invited to assist the Independent Chief Inspector of Borders and Immigration (ICIBI) in his inspection of contingency asylum accommodation at Penally Camp in Pembrokeshire and Napier Barracks in Folkstone. I joined the team at Napier and was shocked as much by the shambolic governance and haphazard commissioning of the site by the Home Office as I was by the totally unsuitable accommodation. The provision was opened in September 2020 without proper planning, or the endorsement of Public Health England or the Crown Premises Fire Safety Inspectorate (CPFSI). Flimsy partitions had been built between the beds where up to 28 men were sleeping in former barrack houses, but these were no protection against either noise or the virus and it was no surprise that there had been an outbreak of COVID-19 at Napier. The ICIBI published a summary of the findings in March this year and the full inspection report was sent to the Home Secretary in May.

After the pandemic

HMPPS has been successful in speeding up the process of the reopening of regimes compared to last summer, with most prisons having now reached stage 3 from stage 4 of the HMPPS regime level and some preparing for stage 2. Control from the centre remains tight and apart from gyms reopening and social visits restarting, prisoners will have experienced limited improvements so far, with many still to return to work or education and subjected to extended periods of lock-up. The priority for the Prison Service must be to end restricted regimes, with their damaging effect on the progress, morale and mental health of prisoners, as soon as is safe.

As the pandemic begins to recede and the vaccine roll out continues at pace, there are opportunities for the Prison Service to learn some positive lessons from the last year. The extended, and in other ways highly damaging, periods of lock-up have contributed to lower levels of violence. There is now the opportunity to learn from those prisons where reductions in violence have been achieved while continuing to allow prisoners out of their cells to socialise, work, attend education and training, and prepare for release. There is a danger of learning the wrong lesson from the pandemic by assuming that the solution to prison violence is to isolate prisoners from each other, rather than to make sure that when they are out of their cells, they are well-managed by high-quality officers during association, and given access to meaningful and productive education, training and work.

Before the pandemic, my predecessors consistently raised concerns about the amount of time prisoners spent in their cells. There is, therefore, a risk that new regime becomes an official endorsement of these historically poor outcomes. The reality is that prisoners are not being rehabilitated when they are banged up.

In a number of prisons we have seen improvements in relationships between prisoners and staff; understanding how this has come about and what leaders have done to promote a more positive culture will help those prisons where progress has been slow. Likewise, the roll-out and widespread uptake of Purple Visits has been a notable success and the Prison Service can now consider ways in which technology can be used more widely.

We have come across a lot of enthusiasm for the key worker scheme from both officers and prisoners, and though this initiative has been restricted recently, the best prisons have created an environment in which positive, meaningful conversations take place that increase trust and help prisoners to make progress.

It is through improving the quality of leadership, and learning from the many outstanding leaders at every grade, that real progress can be made towards an estate that is achieving consistently better outcomes for prisoners against each of our four healthy prison tests. The next year is likely to continue to be a challenge, but it also provides great opportunities for innovation and change.

Acknowledgements

I want to pay tribute to my predecessor, Peter Clarke, for his outstanding leadership of the Inspectorate over the last four years, for making sure it stayed in the field during the pandemic and for his support during and since my transition to the post in November 2020.

Since I started as Chief Inspector, I have been constantly impressed by the commitment and expertise of my colleagues at the Inspectorate. Apart from a short pause in March last year, they have remained in secure establishments throughout the pandemic, unflinching in their determination to shine a light on the treatment, conditions and outcomes for detainees. I want to thank all of the staff, whether inspectors, researchers or in the secretariat, for continuing to maintain this organisation's reputation for independence, impartiality and professionalism.

Governors, directors and staff in all places of detention have had the most exhausting year imaginable, but despite this we have seen how some prisons can be successful even under the most difficult conditions. While their work behind the walls often goes unnoticed and unrecognised, these are key workers who have remained at the front line throughout the pandemic. I know I speak for all my colleagues at the Inspectorate in paying tribute to their dedication and hard work.

Who we are and what we do



Our purpose

To ensure independent inspection of places of detention, report on conditions and treatment, and promote positive outcomes for those detained and the public.

Our values

- Independence, impartiality and integrity are the foundations of our work.
- The experience of the detainee is at the heart of our inspections.
- Respect for human rights underpins our expectations.
- We embrace diversity and are committed to pursuing equality of outcomes for all.
- We believe in the capacity of both individuals and organisations to change and improve, and that we have a part to play in initiating and encouraging change.

Our remit

Our remit is primarily set out in section 5A of the Prison Act 1952. We inspect:

- adult men's and women's prisons in England and Wales
- young offender institutions (YOIs) in England and Wales
- secure training centres (STCs) in England
- all forms of immigration detention throughout the UK and overseas escorts
- police custody in England and Wales
- court custody in England and Wales
- Border Force custody in England and Scotland
- military detention facilities throughout the UK, by invitation
- prisons in Northern Ireland, by invitation
- prisons and other custodial institutions in other jurisdictions with links to the UK, by invitation.

Most inspections take place with other inspectorates, including Ofsted, Estyn, HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS), Care Quality Commission (CQC), Healthcare Inspectorate Wales, HM Inspectorate of Probation, Criminal Justice Inspection Northern Ireland, Her Majesty's Inspectorate of Constabulary in Scotland, Care Inspectorate Wales and the General Pharmaceutical Council, appropriate to the type and location of the establishment.

OPCAT and the National Preventive Mechanism

All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees.

Our approach

In usual circumstances, HM Inspectorate of Prisons carries out full inspections against published inspection criteria known as *Expectations* (see below). During the COVID-19 pandemic, we amended our inspection methodology to continue carrying out our role in scrutinising the conditions for and treatment of those detained, while taking into account the health and safety considerations necessary as a result of the pandemic. Our scrutiny criteria continued to be based on our *Expectations*. Further information on our revised approach is provided in the relevant sections of this report.

Expectations

In inspections, the starting point is the outcome for detainees. The Inspectorate's *Expectations* are based on and referenced against international and regional human rights standards, with the aim of promoting treatment and conditions in detention which at least meet recognised human rights standards.

Expectations for inspections of adult men's and women's prisons and YOIs are based on four tests of a healthy establishment. For prisons, the four tests are:

- **Safety** – prisoners, particularly the most vulnerable, are held safely.
- **Respect** – prisoners are treated with respect for their human dignity.
- **Purposeful activity** – prisoners are able, and expected, to engage in activity that is likely to benefit them.
- **Rehabilitation and release planning** – prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

The tests for women's prisons and YOIs vary slightly. The tests for immigration detention facilities are also similar but consider the specific circumstances applying to detainees, that they are not being held for committing a criminal offence and their detention may not have been as a result of a judicial process.

In other inspection sectors, the principles underpinning the healthy establishment concept are applied, but the specific focus varies, depending on the sector.

Each expectation describes the standards of treatment and conditions an establishment is expected to achieve. These are underpinned by a series of ‘indicators’, which describe evidence that may show the expectation being met. The list of indicators is not exhaustive and does not exclude other ways of achieving the expectation.

The inspection team assesses the establishment’s performance against the healthy establishment tests using the following judgements:

Numeric	Definition
<p style="text-align: center;">4</p>	<p style="text-align: center;">Outcomes for prisoners/detainees are good</p> <p>There is no evidence that outcomes for detainees are being adversely affected in any significant areas.</p>
<p style="text-align: center;">3</p>	<p style="text-align: center;">Outcomes for prisoners/detainees are reasonably good</p> <p>There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns.</p>
<p style="text-align: center;">2</p>	<p style="text-align: center;">Outcomes for prisoners/detainees are not sufficiently good</p> <p>There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.</p>
<p style="text-align: center;">1</p>	<p style="text-align: center;">Outcomes for prisoners/detainees are poor</p> <p>There is evidence that outcomes for detainees are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.</p>

Inspectors use five key sources of evidence in making their assessments:



Observation



Prisoner/detainee surveys



Discussions with prisoners/detainees



Discussions with staff and relevant third parties



Documentation

In usual circumstances, HMI Prisons operates an almost entirely unannounced inspection programme (other than in exceptional situations), with all inspections following up recommendations from the previous inspection. There is a minimum frequency for inspection of all types of establishment, with the timing of inspections deliberately unpredictable. Such an approach is based on, and responsive to, considered intelligence and proactive risk assessment.

We usually inspect prisons at least once every five years, although we expect to inspect most every two to three years. Some high-risk establishments may be inspected more frequently, including those holding children, which are currently inspected annually.

Every immigration removal centre (IRC) also usually receives a full unannounced inspection at least once every four years, or every two years if it holds children. Non-residential short-term holding facilities (STHFs) are inspected at least once every six years. Residential STHFs are inspected at least once every four years. Within this framework, all immigration inspections are scheduled on a risk-assessed basis.

In usual circumstances, we inspect each police force's custody suites at least once every six years, or more often if concerns have been raised during a previous inspection or by other intelligence. Court custody facilities are inspected at least once every six years and Border Force custody facilities are inspected at least once every two years.

In addition to inspections of individual establishments, we produce thematic reports on cross-cutting issues, singly or with other inspectorates, including as part of the Criminal Justice Joint Inspection process. We also use our inspection findings to make observations and recommendations relating to proposed legislative and policy changes.

One

The year in brief



Between 1 April 2020 and 31 March 2021 we published 69 inspection, scrutiny visit and thematic reports.



Adult prisons (England and Wales)

- Inspections of seven prisons holding adult men and one prison holding adult women.



Establishments holding children and young people

- Inspection of one young offender institution (YOI) holding children under the age of 18.
- Inspection of one secure training centre (STC) holding children aged 12 to 18, jointly with Ofsted, with two further assurance visits and two monitoring visits to two STCs.



Immigration detention

- Inspection of short-term holding facilities run by Border Force.
- Inspection of detention of migrants arriving by small boats in Dover.
- Inspection of three flight removals to six European countries.



Police custody

- Inspection of police custody suites in two force areas, with HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).



Court custody

- Inspection of three court custody areas.



Extra-jurisdiction

- Inspections of one men's and one women's prison in Northern Ireland.



Short scrutiny visits

- 12 reports covering visits to 21 adult men's establishments, five women's prisons, five YOIs and four immigration removal centres (IRCs).



Scrutiny visits

- 24 reports covering visits to 22 adult men's prisons and two YOIs.



Other publications

In 2020–21, we published the following additional publications:

- *Aggregate report on short scrutiny visits*
- *Minority ethnic prisoners' experiences of rehabilitation and release planning*
- *Outcomes for young adults in custody*
- *What happens to prisoners in a pandemic?*
- *Children in Custody 2019–20. An analysis of 12–18-year-olds' perceptions of their experiences in secure training centres and young offender institutions*
- *Impact of the pandemic on the Criminal Justice System (Criminal Justice Joint Inspection)*
- *Monitoring places of detention. Eleventh annual report of the United Kingdom's National Preventive Mechanism 2019–20 (on behalf of the NPM).*

We also made written submissions to a range of consultations and inquiries, commented on draft Detention Services Orders and gave oral evidence to Parliamentary committees, including:



Written submissions

- Her Majesty's Prison and Probation Service, Video calls in prison policy framework (April 2020)
- Home Office, Whistleblowing Detention Services Order (May 2020)
- Her Majesty's Prison and Probation Service, various Exceptional Delivery Models (summer 2020)
- Youth Custody Service, Transition of young people from youth to adult custody policy framework (August 2020)
- Independent Chief Inspector of Borders and Immigration, Second Annual Inspection of 'Adults at Risk' in Immigration Detention (September 2020)
- Ministry of Justice, Strengthening the independent scrutiny bodies through legislation consultation (September 2020)
- Her Majesty's Prison and Probation Service, Assessment, care in custody and teamwork (ACCT) policy guidance, Annex to PSI 64, 2011 (November 2020)
- Her Majesty's Prison and Probation Service, Use of force policy framework (December 2020)
- Education Select Committee, Education: Are prisoners being left behind? (January 2021)
- Home Office, Hospital admissions Detention Services Order (March 2021)
- Home Office, Violence Against Women and Girls (VAWG) strategy 2021–2024 (March 2021).



Oral evidence

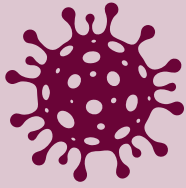
- Justice Select Committee, Ageing prison population (21 April 2020)
- Justice Select Committee, Children and young people in custody (2 June and 16 June 2020)
- Home Affairs Select Committee, Channel crossings, migration and asylum-seeking routes through the European Union (25 November 2020)
- Justice Select Committee, Coronavirus (COVID-19): The impact on prison, probation and court systems (19 January 2021)
- Justice Select Committee, Rainsbrook Secure Training Centre (9 March 2021).

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HMI Prisons' response to the pandemic

17 March 2020

All full inspections scheduled to the end of May are suspended. (See Section 6 for reports of full inspections carried out prior to that date.)

April – July 2020

Short scrutiny visits (SSVs) take place. Small teams of inspectors make one-day visits which focus on key issues which are essential to the safety, care and basic rights of those detained. SSVs cover groups of establishments of a similar type and take place in prisons, young offender institutions (YOIs) and immigration removal centres (IRCs). (See Sections 2 and 4.)

August 2020

As restrictions in the community and prisons begin to ease, SSVs are replaced with scrutiny visits (SVs), to provide greater focus on the pace at which restrictions in prisons are eased. Surveys of prisoners and detainees are reintroduced and reports cover individual establishments. SVs take place in prisons and YOIs. (See Section 3.) We also resume inspection of charter removal flights as the flights recommence. (See Section 4.)

September 2020

Full inspections of court custody facilities resume and a full inspection of detention facilities used to hold those arriving in small boats is carried out. (See sections 4 and 5.) Assurance visits to secure training centres, carried out with Ofsted and the Care Quality Commission, recommence and are in place until March 2021. (See Section 3.)

February 2021

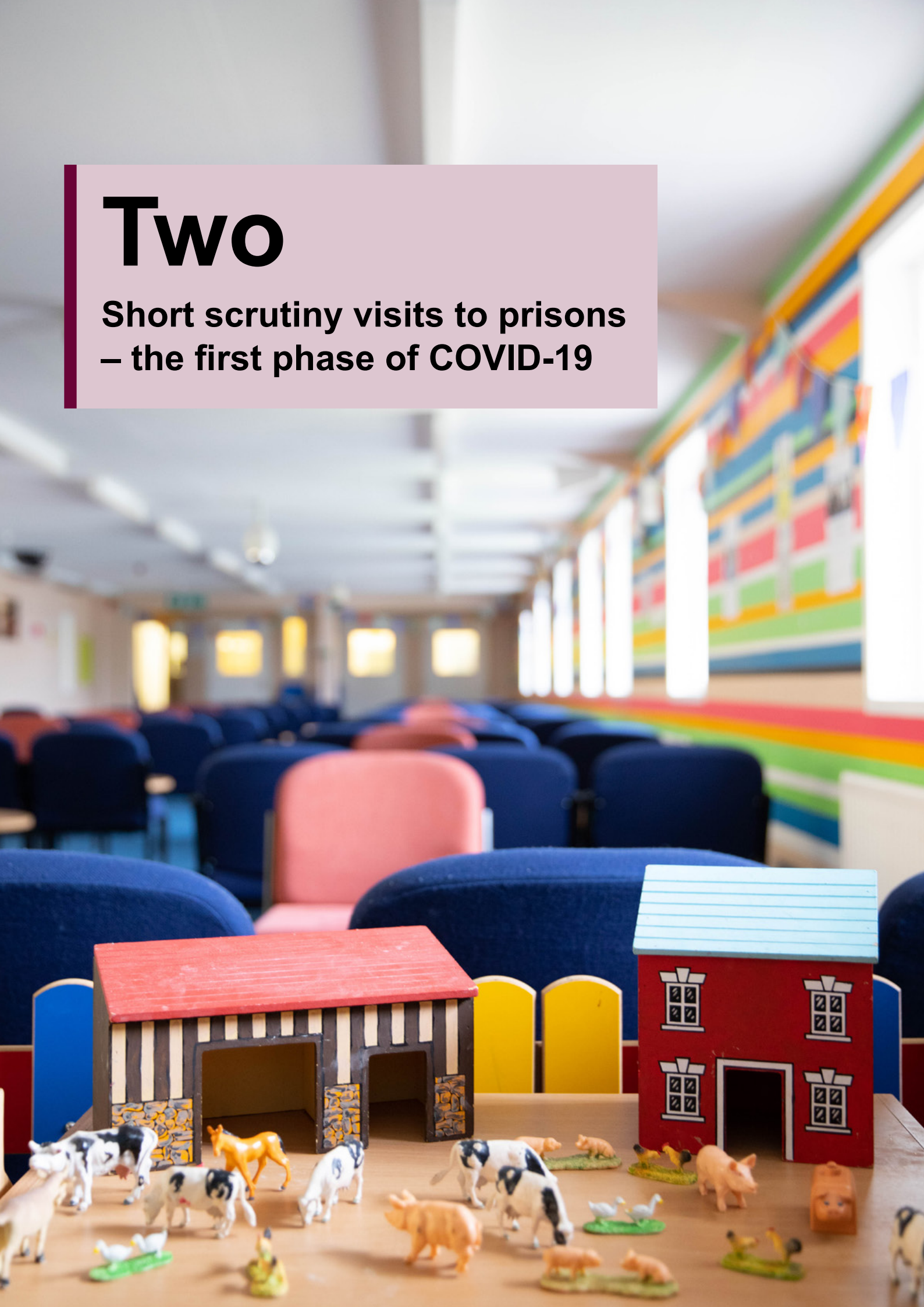
HMI Prisons assists the Independent Chief Inspector of Borders and Immigration by carrying out visits to asylum accommodation at Napier Barracks and Penally Camp.

May 2021

Full inspections of prisons, YOIs and IRCs resume, with scores being made against the four healthy prison areas set out in our *Expectations*.

Two

Short scrutiny visits to prisons
– the first phase of COVID-19



Between April and July 2020, we published 12 reports on 31 short scrutiny visits (SSVs), in which small inspection teams made one-day visits to selected establishments of a specific type, focusing only on our expectations most essential to the safety, care and basic rights of those detained. Here we give a brief summary of the findings from the SSVs, based on (and using extracts from) our aggregate report, published in August 2020.

Our SSVs to 31 prisons between 21 April and 7 July 2020 covered:



We also carried out SSVs to four immigration removal centres (see section 4, Immigration detention).

Quick response, but tough restrictions

We found that, following the forecast from Public Health England of an acute risk of loss of life within the high-risk nature of the prison environment, establishments had acted swiftly in taking action to keep detainees safe and to control the spread of COVID-19. However, this response had come at the expense of locking detainees up for almost the entire day. Except in the open prisons, most adult prisoners were locked up for at least 23 hours a day following restrictions imposed by HM Prison and Probation Service (HMPPS) in March 2020 – some had even less time out of their cell. Children in the four public sector YOIs had been locked up for more than 22 hours a day; this had gone on for 15 weeks in two establishments by the time of our visit.

The restrictions imposed in March included separating new arrivals into ‘reverse cohort units’ (RCUs) for their first two weeks, isolating detainees with symptoms or shielding those most at risk, suspending visits, cancelling activities and limiting prisoner time out of cell.

While the initial response from prisoners to these measures was supportive, as time went on they were increasingly frustrated at the restrictions and the effects of a lack of social contact, an absence of activity, and the inability to see family and friends on their well-being. The withdrawal of external services – such as education, rehabilitation, specialist health services and specialist support for some very vulnerable women – also had a negative impact.

We found that the restrictions imposed had not taken into consideration the specific needs of women and children in prison.

When restrictions in the community eased in June, there was little sign of change in prisons as there were still live outbreaks at various sites which continued into late summer. During this time governors had limited discretion to lift some of the restrictions.

Safety

Prisons were able to continue the key processes for reception of new arrivals and the care of the most vulnerable. It was difficult for staff and prisoners to maintain social distancing in many establishments, especially in overcrowded Victorian prisons with narrow prison landings.

In a minority of sites, we considered that the restrictions applied to prisoners were excessive and were not justified by health concerns.

In one women's prison, symptomatic prisoners were isolated for seven days without any opportunities to leave their cells, even for a shower or time in the open air. In one men's prison we found a prisoner held in these conditions for 14 days.

In one prison, over half the population were classified as shielding in a two-month period due to a very cautious interpretation of the shielding guidance. They had only 90 minutes a week out of their cells to shower, make telephone calls or spend time in the open air.

In all these examples, prisoners were effectively held in solitary confinement and in some cases in prolonged and/or indefinite solitary confinement.

With prisoners locked up for so many hours, incidents of violence initially fell, as did recorded self-harm among men in this period. However, the level of self-harm for women in prison was consistently high.

Living conditions

The pandemic exacerbated some underlying problems and unacceptable conditions that our inspections have previously criticised. These included overcrowded cells in some cases and the practice of 'night sanitation', which we reported on in one prison. Here prisoners had no access to a toilet or sink during the night and had to wait to leave their cell one at a time to use communal facilities in conditions we judged to be unacceptable and degrading.

Prisoners waited for hours to be let out, often resorting to urinating or defecating in buckets or bags in their cells.

Health care

Effective partnership working had helped to manage outbreaks of the virus. Urgent primary health care continued and where prisoners had in-cell telephones they were used for health consultations, as in the community. Most other health provision had been curtailed and dental provision was for emergencies only. Mental health support was not usually available except for those at the greatest risk. Midwifery services and support for new mothers and babies were maintained and good.

Purposeful activity

Only a minority of men in prison, about 10%, were still in work roles. In women's local prisons, 15–30% had some employment and half the women in training prisons had work for about 15 hours a week.

There was no classroom-based education in any adult prison we visited; in-cell study packs were not individually targeted and learners received little feedback from tutors.

HMPPS had cancelled all face-to-face education for children in public sector prisons; they were offered in-cell education packs instead. By contrast, children in Parc YOI, run by G4S, continued to attend classes for face-to-face education and also received at least three hours of purposeful time out of cell a day.

In the absence of activities, many establishments had developed in-cell activity and distraction material – including exercise routines, games and weekly film screenings – to occupy prisoners through the many hours locked up. Even by July, little structured exercise outdoors was provided.

Contact with family and friends

Suspension of social visits was the main complaint from prisoners. Those in public sector prisons were given £5 of telephone credit a week, which was welcome. Where prisoners had an in-cell telephone this helped them stay in touch with family and friends, but the limited time out of cell affected those who had to use communal telephones. We found delays in the roll-out of the Purple Visits video calling scheme and did not see this in use until the end of June.

HMPPS had alleviated some of the pressures of maintaining contact with family by providing secure mobile telephones in prisons without in-cell telephones, as well as tablet computers for urgent compassionate need, such as contacting a dying relative or attending a video funeral.

The suspension of release on temporary licence (ROTL) for family contact was particularly frustrating for primary carers and disproportionately affected women prisoners. Some prisons had innovated to support prisoner contact with their families.

Prisoners could record short video messages to send home... and some prisons kept in touch with families via Twitter.

Rehabilitation and release planning

Planning for prisoners to progress and for release had been affected by the lack of prison officer key workers, the absence on site of community rehabilitation company (CRC) staff and the suspension of most offending behaviour programmes. Offender management work was prioritised for those nearing release or due for parole.

All prisons maintained critical public protection processes, including multi-agency public protection arrangements (MAPPAs), but the increased telephone use by prisoners had overwhelmed call monitoring in some and there were very long backlogs. There had been barely any use of the two early release schemes in operation. Many prisoners, including women, continued to be released without accommodation, but all children had somewhere to live on release.

Three

Scrutiny visits to prisons
– findings from August 2020



In August 2020, we began our programme of scrutiny visits (SVs) to individual establishments while they were recovering from the first wave of the pandemic, focusing on conditions and treatment in greater depth and breadth than the previous short scrutiny visits. SVs included a one-day survey of detainees with two days of visits by inspectors in the following week. From August until the end of March 2021, we published reports of SVs to 24 individual establishments, made up of 22 adult men's prisons and two young offender institutions (YOIs). Scrutiny visits to a further three men's prisons and one women's prison had to be cancelled due to COVID outbreaks or restrictions in the community.

Confined to cell – the impact on prisoners

Nearly all locked up for most of the day

Since COVID-19 restrictions were imposed in prisons in March 2020, nearly all activities for prisoners had stopped and most spent the majority of each day locked in their cells. During the first few months of restrictions, prisoners often got as little as 45 minutes a day out of their cells.

When we began conducting scrutiny visits in the second half of 2020, time out of cell had slightly improved, but was still very limited for most prisoners. We found that, on average, they were unlocked for only about 90 minutes a day. This was typically split between a period spent in the open air and time on the wing to complete essential daily tasks.

Whitemoor, a high-security prison with a stable, long-term, life-sentenced population, offered the longest time out of cell at 150 minutes a day. We saw the worst example at Pentonville, a busy local prison with a transitory population. Prisoners there had just 45 minutes out of their cells and they could only access basic aspects of a decent regime, such as a shower and outside exercise, on alternate days, or sometimes even less often than that.

Prisoners were frustrated that they often did not have enough time unlocked to complete their essential daily tasks or had to choose between them. At Erlestoke, some had to sacrifice time in the open air because their meals were served at the same time. At Risley, prisoners sometimes had to choose between attending their health care appointment or having a shower. At Swansea, prisoners did not have enough time to shower, clean their cells and make a telephone call. At Northumberland, the need to use a communal touch-screen kiosk to place orders ate into the limited time spent unlocked.

Newly arrived prisoners were quarantined for 14 days on a dedicated reverse cohort unit (RCU). At the time of our scrutiny visits, the regimes on most RCUs were similar to those in the main prison, but there were some notable exceptions. At Wymott, some RCU prisoners were unlocked for only 40 minutes a day, less than half the time of the general population. On some days at Humber and Leicester, RCU prisoners spent just 20 minutes out of their cells and they lost the chance for outside exercise altogether.

For prisoners who showed symptoms of COVID-19, or were required to isolate, the regime could be severely curtailed.

The one prisoner who was in protective isolation during our visit was allowed out of his cell only once a week for 15 minutes to take a shower. **Preston**

Although some prison governors had been making plans to expand their regimes gradually and improve time out of cell further, these were halted when there was a second wave of the pandemic towards the end of 2020. This meant that many prisoners had spent at least 90% of their time behind their cell doors for over 12 months.

Distractions from boredom

Most prisons attempted to address the lack of activity and prisoners' anxiety and boredom by providing distraction packs. These typically contained activities such as crosswords, puzzles, colouring, stories, quizzes and self-help guidance, such as relaxation techniques. In our survey, 60% of prisoners said they had been provided with an in-cell activity pack.

Some packs attempted to encourage a sense of community. At Northumberland, prisoners were motivated to nominate peers for a 'community spirit award', Risley held a short story competition and at Swansea a prisoner survey had helped inform the content of the packs. Others had educational and rehabilitative content.

PACT (Prison Advice and Care Trust) staff... provided good quality in-cell work packs on the theme of relationships. These were tracked and assessed, and prisoners received certificates on completion. **Pentonville**

Many prisoners valued these packs, but as the weeks progressed they started to tell us that they were becoming repetitive and less of a diversion. This was clear by the time of our in-depth interviews with prisoners in autumn 2020 for our thematic review *What happens to prisoners in a pandemic?*

Prisoners told us that it was impossible to sustain meaningful in-cell activities for so many months. Their lives felt much too restricted, any distractions provided to them had long since worn thin and they were frustrated and fed up.
What happens to prisoners in a pandemic?

Most libraries were closed to prisoners. Some alternative arrangements for borrowing books, such as small stocks of books on the wing, were often not popular because of the limited range on offer. Outreach services run by library staff that enabled prisoners to make specific requests, including for CDs and DVDs, were more effective. However, these schemes were labour-intensive and required good communication between library and wing staff and some sites, such as Peterborough and Leicester, struggled to deliver them successfully. Some prisons also limited the number of books that could be borrowed, with Preston offering only one a week.

A few libraries continued literacy support programmes, such as Reading Ahead or Turning Pages, often using trained peer supporters. At Lindholme, prisoners were encouraged to write a story for their children and at Huntercombe library staff helped prisoners send a photograph and letter to their relatives for Christmas.

Time for exercise

Most prisoners could spend 30 to 45 minutes in the open air each day, although at Lindholme this was sometimes as little as 20 minutes. Bristol had managed to increase this to an hour. In our survey overall, 82% of prisoners said they could exercise outdoors every day if they wanted.

Indoor physical education facilities remained closed for many months. Prisons varied considerably in how well and how quickly they organised alternative provision. In most prisons, PE staff had devised and circulated in-cell exercise programmes, either on paper or via in-cell televisions. However, in hot weather these became impractical, particularly for prisoners sharing cells designed for one and with limited ventilation. When there was sufficient space, prisoners often improvised circuits on the exercise yards.

Humber introduced outdoor circuits in mid-May, one of the first prisons to do so. By the time of our visit in August, prisoners could have three or four sessions a week. In contrast, by September, prisoners at Northumberland had only 30 minutes of circuits every fortnight.

Huntercombe's gym reopened in August, but elsewhere progress was slower. Indoor facilities were still closed when we visited Leicester in December, but artificial grass and gazebos had been installed so that prisoners could exercise outdoors, even in bad weather. The ability of prisons to reopen gyms was sometimes related to the overall availability of staff, with PE staff sometimes redeployed to help run the wings.

With prisoners having less access to physical exercise than before the pandemic, many complained about weight gain and its negative effects on their physical and mental health.

Suicide and self-harm – a mixed picture

After rising year-on-year for a decade, the number of recorded self-harm incidents in adult male prisons decreased after restrictions were imposed in March 2020 and remained lower. The reasons for this were unclear, but we were concerned that there was far less opportunity for staff to observe prisoners' behaviour. In the year to December 2020, there were 43,554 recorded incidents in men's prisons compared with 51,691 the year before, a decrease of 16%.

The number of self-inflicted deaths in adult men's prisons remained very similar to the previous year. In the 12 months to March 2021, there were 77 such deaths compared with 78 the year before.

On our scrutiny visits, we typically found that prisoners in crisis were identified at weekly multidisciplinary meetings and provided with support through assessment, care in custody and teamwork (ACCT) case management. We found a particularly effective example of ACCT at Huntercombe.

[The ACCT] system was used well to support prisoners. Staff often demonstrated an understanding of the impact of the restricted regime on prisoners and responded to them with compassion. We saw documented examples of meaningful conversations showing an understanding of the prisoner's state of mind and personal circumstances.

Huntercombe

With most prisoners experiencing unprecedented periods of confinement, often unobserved, we expected managers to make sure that every prisoner was checked regularly for signs of deterioration. This became even more important as the months passed. While some prisons did this well, at Erlestoke and Whatton there were no systematic well-being checks to identify vulnerability.

At some prisons, governance meetings covering suicide and self-harm prevention work had been suspended. This impeded strategic planning of a longer-term response to the effect of COVID-19 restrictions on prisoners' mood. Some prisons, such as Lindholme and Wymott, were slow to understand that there had been a rise in their number of recorded self-harm incidents after a dip at the start of the pandemic.

COVID-19 restrictions had also affected prisons' progress in implementing recommendations made by the Prisons and Probation Ombudsman (PPO) following its investigations into deaths in custody. For instance, there had been poor progress at Pentonville and required actions had not been taken at Leicester. Prison investigations into serious attempts by prisoners to take their own lives were also too often not thorough enough.

Prisons with in-cell telephones were able to provide much easier access to Samaritans support, although it was sometimes uncomfortable for prisoners to talk to them in a shared cell.

Demand for Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) had increased in some prisons, but access to them had been affected by the COVID-19 restrictions, with the scheme suspended for months at prisons such as Leicester, Humber and Peterborough, and the training of new Listeners not possible. Meanwhile, as existing Listeners were released at the end of their sentences, numbers started to dwindle. In our survey, only 32% of prisoners said it was easy to speak to a Listener if needed. There were, however, signs of recovery, with the training of Listeners resuming at Dartmoor and Swansea.

Prisoners could often no longer access Listener support overnight and Listeners were frequently unable to leave their own residential units, leading to some wings without any support. However, Huntercombe had allowed Listeners to wear personal protective equipment (PPE) while visiting prisoners on other units. Where prisoners could see a Listener, they could not always do so in private. While sessions at Whitemoor and Erlestoke were held behind a plastic screen in places like the segregation unit, at Gartree and Whatton, socially distanced listening was facilitated in association rooms.

Although Samaritans volunteers were no longer able to support Listeners on site, Risley used video calling and Listeners at Bristol and Preston could contact the volunteers on their in-cell telephone. At Swansea, Listeners could contact the prison's counsellor for one-to-one support.

Prisoner health and well-being

Early in the pandemic the number of COVID-19 deaths in prisons nationally was low, with 23 COVID-related prisoner deaths until June 2020 and no deaths between June and September 2020. Following the second wave of the virus and with an increase in prisoner movements and higher infection rates in local communities, 116 prisoners had died as a result of COVID-19 by 31 March 2021, and a further 27 had died having tested positive for the virus.

The national vaccination programme was rolled out in prisons from early 2021 using the same vulnerability criteria as in the rest of the community.

Health professionals monitored new arrivals for infection and cared for those in isolation, both infected and shielding. All health providers had maintained face-to-face screening for arriving prisoners and secondary screening. Most prisons experienced an outbreak in the latter part of 2020 and early 2021, which prompted an increase in COVID-19 testing. Many sites tested new arrivals on days one and five in the RCUs. Mass wing testing later became available to understand the severity of local outbreaks.

Access to health care during the pandemic

Health care staff showed considerable resilience in a year of very difficult conditions. Services that had ceased during the initial prison restrictions saw signs of recovery in most sites we visited, but this had not been for long enough for waiting times to improve before the second wave of restrictions in December 2020. The national shutdown of prisons, restricted time out of cell and limited access to health provision meant that clinical services were underused. Health providers had systems to provide urgent or emergency care and ever-increasing waiting lists were monitored for emerging problems, but triage did not always happen face to face. This situation was exacerbated for prisoners who lacked in-cell telephones, who health staff could not contact directly, or who shared a cell and were unable to discuss health issues in confidence.

Prisoner access to GPs varied considerably. While some prisons had maintained face-to-face care and had reduced waiting times, others had made very little impact on the increasing waiting lists.

There were 104 prisoners waiting to see the GP, with the longest wait of 428 days for a routine appointment. **Long Lartin**

At many prisons, we had concerns about long waiting times that were leading to poorer health outcomes for prisoners, including those with long-term conditions.

Annual reviews for [prisoners with long-term conditions] had been suspended at the start of the pandemic. Thirty-four annual reviews were overdue for patients with asthma, 19 reviews for patients with chronic obstructive pulmonary disease and 16 patients with diabetes were waiting for an annual foot check. There were no plans to address these shortfalls. **Dartmoor**

Most external health appointments had been cancelled by hospitals, but prison staff helped with emergency and urgent referrals. Some sites, such as Whitemoor, had provided patients with telephone access to external consultants, helping to allay anxieties about their treatment.

While all dental teams had maintained emergency and urgent care, they had been prevented from implementing the national recovery plan for dental treatments, published at the end of July 2020, for up to three months. This was due to the lack of a national prison policy on aerosol-generating procedures (see Glossary). Although many sites had made some progress on this position by December, the second national lockdown created further delays and expanded waiting lists. In our survey, only 10% of prisoners said it was easy to see a dentist.

Mental health problems increase

The long periods of isolation, in often stuffy cells without purposeful activity and for some prisoners, no company, had a profound effect on well-being. Our in-depth interviews with prisoners for our thematic review revealed a decline in mental and physical health, sometimes visibly. Prisoners experienced chronic boredom, to the extent that they moved their belongings around the cell, sat in a different position or simply delayed throwing litter in the bin, just to give themselves something to do.

'I alternate my time, I lie in bed, sit in my chair, lie in bed, sit in my chair, this is how I pass time, I think time to get up now, then I get stiff sitting on a chair, so I stretch out on my bed, then I get up again and sit in the chair.'

What happens to prisoners in a pandemic?

Prisoners felt drained and depleted, lacked hope for the future, and were despondent and sometimes resentful of restrictions they no longer saw as legitimate. Contact with family and friends had been drastically reduced and they had too little time out of cell to seek meaningful support from their peers or staff. We were concerned that the cumulative effect of the restrictions on their well-being was likely to be significant and far-reaching.

Separate questions in our survey revealed a disparity between the proportion of prisoners who told us they had mental health problems and the proportion who said that it was easy to see mental health workers.

Survey responses: Mental health problems



Although mental health services had continued to provide some support to prisoners, most had ceased routine assessments and interventions, focusing on urgent and acute input, and we found evidence of unmet need in some prisons. Prisoners often faced considerable waits to see mental health practitioners.

In our survey, two-thirds of prisoners said they had mental health problems, and those we interviewed described a decline in their mental well-being during the restricted regime... Only 13% of prisoners surveyed said it was easy to get a mental health appointment. Routine mental health assessments had ceased, with waiting times now at 16 weeks. **Preston**

More positively, at Lindholme mental health services had been active in risk assessing all mental health patients at the beginning of the pandemic and provided crisis care plans, which were shared with the prison. At Birmingham, some prisoners had been trained to become ‘well-being navigators’ and could provide mental health first aid to their peers. Although group therapies and interventions could generally not be facilitated due to social distancing restrictions and lack of rooms, Huntercombe, holding foreign national prisoners, had provided a range of support.

The team offered a variety of interventions including interventions based on cognitive behavioural therapy, sleep hygiene and an extensive range of in-cell guided workbooks. A particularly helpful booklet entitled ‘Living with Lockdown’ which had been translated into Albanian, Romanian, Spanish and Polish provided useful coping strategies.

Huntercombe

Prisoners due for transfers to hospital under the Mental Health Act continued to wait for unacceptably long periods and the guideline of 14 days was rarely met – one prisoner at Leicester had waited 266 days. However, there were no reported delays for transfers at Birmingham, Hindley, Lindholme and Peterborough. The number of prisoners waiting for transfer at Hewell had been reduced following effective weekly monitoring and liaison between health and justice commissioners and specialised commissioners for mental health beds.

Treatment for substance misuse

During the year, we saw an increasing shift in the delivery of substance misuse services to single mental health and substance misuse teams, which combined the management of caseloads and delivery of psychological interventions. During the pandemic, all services adopted a risk-based approach, which prioritised clinical treatment and safe detoxification for new arrivals. Despite regime constraints, specialist clinical staff maintained direct contact and support for prisoners with pressing drug and alcohol problems. As a result, the clinical support offered, including opiate-substitution treatment, had mostly remained safe, evidence-based and needs-led.

The delivery of psychosocial support for prisoners with substance misuse needs proved more problematic. Regime restrictions lessened opportunities for support services to see individual prisoners, group work had virtually ceased and peer support provision had stopped or was very restricted, but there were some exceptions. In our survey, only 24% of prisoners said it was easy to see substance misuse workers.

Many prisons had developed in-cell packs to offset these shortfalls and most had tried to maintain contact through in-cell telephones, where available, or short welfare visits. Discrete rehabilitation wings could not operate with the same therapeutic emphasis and mutual aid from groups such as Alcoholics Anonymous and Narcotics Anonymous had also stopped, although Huntercombe had enabled postal sponsorships for prisoners to contact the facilitator.

Most prisons had given greater emphasis to through-the-gate support for prisoners with substance misuse needs on release due to the increased difficulties in identifying and facilitating external support. All services had prioritised harm-reduction initiatives, and training and supply of naloxone (used to reverse the effects of opiate overdose) was still delivered almost everywhere.

Medicine supplies

Almost all sites had maintained effective oversight and prompt supply of medicines. Although most in-possession medicines continued to be issued to prisoners at secure hatches, but with more social distancing, over a third of prisons we visited had reverted to administration of supervised medicines away from the secure hatches and often at cell doors. This was a measured approach for the few prisoners who were infectious, but less so for prisoners in segregation units, such as at Long Lartin, where medicines were administered through the cell door, preventing clear observation and increasing the risk of hoarding and diversion.

The restrictions to the regime also meant that medicines were not always administered when they would be most effective.

The inability to release prisoners to receive not-in-possession medicines at the prescribed times was a serious concern as it increased the likelihood of medicines being ineffective or unwanted side-effects occurring, such as drowsiness in the early evening or pain in the early morning. **Risley**

Meeting social care needs

The local authority responsibility to provide domiciliary care for prisoners with social care needs was mostly sustained where care packages were already in place, but assessments for new referrals were affected because many local authorities had withdrawn face-to-face assessments and delayed those by telephone, which reduced the quality of the outcomes.

... the social care needs of six prisoners who had been referred to the local authority had been neither assessed nor met ... One disabled man had to pay prisoners to clean his cell; he did not have a bedrail to prevent him from falling out of bed or suitable shower or toilet adaptations. **Erlestoke**

Prisoner peer support for those with social care needs had ceased at most prisons, affecting the social support and practical care for some prisoners. We found some unacceptable cases of very poor treatment for prisoners with disabilities (see 'Equality and diversity work falls behind', page 51).

Early days and other support

Inducting new arrivals

Those arriving in prison for the first time during the pandemic received far less support to deal with this new experience than usual. Face-to-face induction for new arrivals had generally been curtailed or suspended altogether since March 2020. Before the pandemic, a variety of agencies responsible for areas such as release planning and housing would typically have seen new prisoners during a scheduled induction programme. This no longer happened. Instead, prisoners often only received printed material, which did not always reflect the latest COVID-19 restrictions in their prison and was difficult for those who had problems reading. Some had to rely instead on the conversations they had during their brief time unlocked to find out about daily life.

Some prisons had still managed to organise face-to-face induction within the COVID-19 restrictions, so new arrivals had a much better experience and could see peer workers to discuss the practicalities of prison life.

Peer workers continued to be involved in induction... Staff and peer workers spent time with new prisoners during their first two days to tell them about the prison and help with any questions or concerns. **Swansea**

Under the restrictions, induction was not always well enough organised to make sure that it was completed by every prisoner and there was sometimes insufficient staff oversight of what prisoners were told by peer workers.

Peer workers

Prisoner peer workers supply a range of welcome and helpful support for prisoners, but the COVID-19 restrictions had severely limited prisoner access. The number and range of peer worker roles had been reduced and prisoners had very little time unlocked to speak to those remaining in post.

Nonetheless, we found examples of some good-quality peer work being sustained. At Risley, health care peer workers continued to give support and prisoners still reviewed staff responses to complaints. At Dartmoor, safer custody peer workers were available. Impressively, 'Andy's Man Club', a peer-led support scheme for men to share and discuss their issues, was running at Humber during the pandemic, benefiting up to 250 prisoners a week.

Chaplains provide support

Although chaplaincy teams were sometimes affected by staffing shortages related to the pandemic, chaplains remained a critical source of support for prisoners. Where prisoners were bereaved or facing the imminent death of a loved one, they provided individual support and facilitated virtual attendance at funerals using newly acquired video technology. At Humber, the chaplaincy offered individual bereavement counselling.

We found examples of chaplains continuing to involve themselves in segregation checks, ACCT case reviews and, where it was running, face-to-face induction.

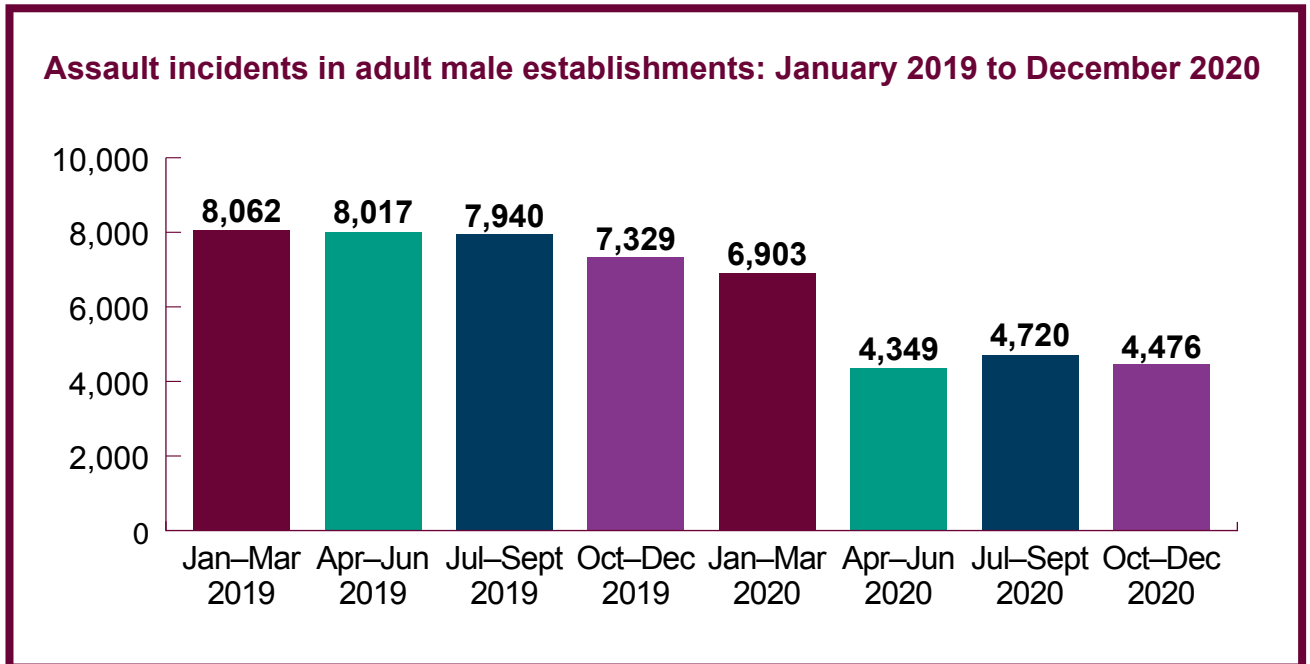
Chaplains met every prisoner each week to provide individual support. They also undertook daily visits to vulnerable prisoners in need of additional support. These included prisoners who found social interaction difficult, those in prison for the first time, prisoners with learning support or literacy needs, and those experiencing bereavement and family illness. **Pentonville**

While corporate worship was suspended at the start of the COVID-19 restrictions, as the months progressed it became possible for chaplaincies to run small prisoner faith groups instead, until restrictions tightened again.

With prisoners confined to their cells, chaplains worked innovatively to broadcast religious services on national prison radio and local prison TV channels. They provided material such as weekly sermons and prayer mats so that prisoners could continue to practise their religion.

Violence and managing behaviour

The recorded number of violent incidents had reduced in prisons at the start of the restrictions.



The total number of violent incidents during the past six months was 46% lower than the six months before the start of the restricted regime. **Lindholme**

The rate of assaults per 1,000 prisoners had decreased from 51.9 in March to 21.9 in July. **Swansea**

In our *What happens to prisoners in a pandemic?* thematic review, some prisoners felt that the reduction in recorded incidents was probably temporary as it had only been achieved due to the increased time they were locked in their cells. They described grudges brewing behind cell doors and said that violence often took place out of sight of staff, in shower areas or in cells. They also said that some prisoners took out their frustrations on staff when they were eventually unlocked after prolonged periods in their cells.

These points were reflected in our scrutiny visit survey in which, despite the reduction in recorded incidents, 22% of prisoners who responded said they had experienced bullying or victimisation from other prisoners and 34% said they had experienced it from staff.

Recorded violence in men's prisons fell by 35% between December 2019 and December 2020. Violence against staff fell by 22% and very few incidents were serious. Staff generally attributed incidents to prisoners' frustrations with the restricted regimes, but at some prisons the reasons had not been analysed or understood.

Some prisoners had turned to using drugs to manage their isolation and chronic boredom. In our thematic review, prisoners were clear that illicit drugs had continued to come into prisons, although in more limited quantities. They noted that this reduced availability had driven up demand and inflated the prices, which in turn increased the risk of getting into debt. The reduction in drug supply had also led to a rise in prisoner manufacture of illicit alcohol.

Meetings to provide strategic oversight of violence and develop long-term plans to address it had been suspended following the imposition of restrictions. However, prisons generally continued to hold weekly safety intervention meetings to help manage individual prisoners with complex and challenging behaviour.

As we found before the pandemic, challenge, support and intervention plans (CSIPs) to manage prisoners who pose a risk of violence were often not used effectively. The range of interventions to address violent behaviour were limited due to the restrictions and victims were usually left with little formal support.

At the beginning of the restrictions, HMPPS had decided that prisoners should not have their privileges removed and should only be placed on the basic level of the incentives scheme in exceptional circumstances. This was to minimise the negative effects of a prolonged restricted regime. However, some prisons, such as Pentonville, had continued to operate the basic level with limited governance. Measures such as the withdrawal of televisions from a few prisoners were disproportionately punitive given their very limited time out of cell.

The restricted regimes made it virtually impossible for prisoners to demonstrate improved behaviour and progress within the incentives scheme. A few prisons, such as Humber and Risley, had addressed this problem by moving prisoners to the highest level of the scheme to encourage positive behaviour, from which they could then be removed if they behaved badly.

Use of force

Data on the use of force against prisoners showed that it had initially reduced after COVID-19 restrictions severely limited their time out of cell. However, in some prisons incidents started to return to pre-pandemic levels. At Preston and Erlestoke, the use of force had actually increased during the restricted regime.

Many prisons had initially suspended regular oversight of incidents involving the use of force, but they were gradually reintroducing regular governance meetings. At Dartmoor, Leicester and Lowdham Grange, we were concerned that staff did not routinely use body-worn video cameras to record, monitor and reduce the use of force.

PAVA, an incapacitant spray, had been used nine times at Risley during the seven months of the pandemic and seven at Preston by the time of our SVs. HMPPS had made an exceptional decision to issue PAVA to trained staff across the adult male closed estate from April 2020 based on what it considered to be the potential threat to order posed by the COVID-19 crisis. This was before promised safeguards were in place, including an effective key worker scheme and the need for at least 50% of prison staff to be trained in the use of PAVA at each prison (key worker schemes and training were suspended or reduced due to pandemic and social distancing restrictions).

Segregation

Once COVID-19 restrictions were implemented, there was often little difference between the regimes in segregation units and those elsewhere in the prison. The regime was basic, but consistent, with daily access to a shower and exercise. In prisons with higher numbers of segregated prisoners, such as Lowdham Grange, access to showers and, in some cases, telephones, was limited to alternate days.

Oversight of segregation was lacking in several prisons we visited, with governance suspended or even absent.

There had been no strategic oversight meetings during 2020. We were concerned that this absence of governance and management oversight left the appropriate use of segregation and special accommodation unmonitored. **Leicester**

At Erlestoke, we found that prisoners had been held in degrading and inhumane conditions for weeks at a time. Many cells were damaged and lacked running water or working toilets.

At Long Lartin, one prisoner had been segregated for over two years and the average length of stay was in excess of 200 days; there were no reintegration plans to help prisoners aim for a return to life among the general population. There was more positive practice at Gartree and Lowdham Grange, where psychology teams had produced useful plans for the more complex prisoners; these helped staff to meet the individual needs of prisoners and manage them safely.

Less contact with staff

With prisoners confined to their cells for most of their time, it was vital that they had positive relationships with staff who could offer support or even just another person to speak to.

In our survey, 75% of prisoners said that most staff treated them with respect and that there were staff they could turn to if they had a problem. This finding was supported by our observations, where we saw staff interacting in a polite and respectful way with prisoners. However, in almost half of our visits we reported that interactions were frequently perfunctory and limited to when prisoners were being locked and unlocked. We often found staff paying little attention to social distancing measures. At some establishments, prisoners told us that they thought the lack of adherence to social distancing by staff posed a real threat to their safety. By autumn 2020, most staff were required to wear a fluid-resistant surgical mask while on the wings.

The limited time out of cell for each prisoner meant there was insufficient scope for staff to develop meaningful relationships to support prisoners or identify possible vulnerability.

Limited key work

The role of key worker was intended to develop constructive and motivational relationships with prisoners ‘to counter the negative effects of imprisonment and to encourage people in prison to identify and resolve issues and concerns for themselves, in order to settle, feel safe and calm; and to engage in their rehabilitation and progress through their sentence’ (HMPPS, Offender Management in Custody Model, 2017).

Key working had ceased at all sites in March. In May, prisons were permitted to resume key work with identified groups of priority prisoners where safe and possible to do so. During the latter part of the year some establishments had extended the scope of prisoners who were to receive regular key work checks, but at some we found a lack of management oversight and the absence of a clear plan to reintroduce key work fully. Many prisoners who had not been identified as vulnerable had not had a key work session recorded on their electronic case notes throughout the period of restrictions, which for some was up to nine months by our visit.

... most prisoners had not seen their key worker during their time at Birmingham. The lack of regular meaningful interaction with staff was of concern given the potential impact of continuing restrictions on prisoners’ well-being. **Birmingham**

In our survey, only 37% of prisoners said that a member of staff had talked to them in the previous week about how they were getting on. This lack of contact was all the more pronounced in some establishments where there was an over-reliance on using in-cell telephones, even when face-to-face contact was allowed.

The efficacy of key work was also undermined in some prisons where a different member of staff saw the prisoner each time; this potentially led to an absence of knowledge about the prisoner's history or custody plan targets and little time to develop trust and rapport. The lack of consistency also made it more difficult to spot signs of deterioration in a prisoner's well-being. Very few case notes of key work had a focus on the prisoner's resettlement and progression.

In normal times, prisoners' day-to-day contact with staff allows them to make progress through their sentence, with staff comments on their behaviour used to promote them (or not) through the levels of the incentives policy (see 'Violence and managing behaviour', page 48). The limited contact during the restrictions made it very difficult for prisoners to demonstrate improved behaviour. In some prisons this affected their ability to access the benefits on the top level of the incentives scheme, such as increased spending in the shop or additional in-cell equipment, such as gaming systems, which would have been particularly welcome during the restricted regime.

Equality and diversity work falls behind

We found weakness in equality and diversity work on every visit. Many prisons had paused equality management meetings when restrictions commenced, but then often took too long to resume these, even by our visits in September. Very few had designated equality staff.

At almost half the prisons visited we found inadequate analysis of equality data to identify potential disproportionate outcomes between groups of prisoners with protected characteristics. However, some prisons had been able to hold forums with at least some groups of prisoners to understand their needs.

In some of our surveys, prisoners from a black or minority ethnic background expressed more negative views than white prisoners about their treatment by staff, feelings of safety and other aspects of prison life.

In our survey, prisoners from a black or minority ethnic background had more negative perceptions of staff behaviour; fewer than half, 48%, compared with 73% of white prisoners said that most staff treated them with respect, and 58% that they had experienced bullying or victimisation by staff. In addition, only 5% of black and minority ethnic prisoners said that it was easy to get a job in the prison, compared with 21% of white prisoners. **Lindholme**

These feelings were reflected in our overall survey findings, where prisoners from a racial minority reported more unfavourable experiences compared with white prisoners in 30 of our 49 survey questions; they reported more positively in response to just four questions.

Although we found a few positive examples of provision for older prisoners and those with mobility issues, they had been left in degrading circumstances in some prisons. At Erlestoke, Hewell, Northumberland and Pentonville, lack of support for these prisoners had left them unable to clean themselves or their cells or access the shower.

The showers on the house block accommodating several prisoners with mobility difficulties were unsuitable for wheelchair users and not accessible. At least one prisoner had been unable to shower for more than seven months since the start of the restricted regime. **Northumberland**

In our survey, prisoners with disabilities also reported significantly more negatively about feeling safe than those without disabilities.

Survey responses: Disability and safety

Have you experienced any types of bullying/victimisation from:	Prisoners with a disability	Prisoners without a disability
Other prisoners here?	34%	17%
Staff here	43%	30%
Do you feel unsafe now?	32%	19%

Consultation and complaints

While prisoner consultation provides the opportunity for prison leaders to listen to and respond to prisoners' concerns – especially important when the routine for many prisoners had been so restricted – such consultation had ceased at many establishments. Where consultation arrangements had resumed, a minority were ineffective because they were too infrequent, only open to a few prisoners or did not lead to action on suggestions. However, meaningful arrangements at many establishments had resulted in positive changes to benefit prisoners.

The prison had worked with User Voice to set up a free telephone number for prisoners to make suggestions and ideas... there was evidence that the prison had responded positively to requests made and that changes had followed. These included allowing family and friends to send in hobby items, such as playing cards, art and crafts, and a radio. **Northumberland**

The limited time out of cell made it more difficult for prisoners to resolve individual requests informally with staff. More formally, they could use the application process; where this was electronic, and there were no technical issues, it had generally continued to work well through the period of restrictions. At Leicester, prisoners could use their telephones to make direct contact with departments such as education and the offender management unit, which offset some of the frustration they faced. At Lowdham Grange, prisoners could use their in-cell telephone to call the Prisoner Advice Line (PAL), staffed daily by two knowledgeable peer representatives; there had been over 16,000 calls to the line in 2020, more than double the number in 2019.

At some prisons that still used paper applications, prisoners told us of long delays receiving a response, or not getting one at all, which sometimes led to them making a complaint. However, the number of complaints submitted during the period of restrictions fell at almost half the prisons we visited.

In our survey, 57% of respondents said that it was easy to make a complaint; only a few prisons did not have complaint forms readily available on the wings. We examined a selection of complaints during each visit. The responses were generally polite and dealt with the issue. The quality of responses tended to be better when there was an effective quality assurance process – some prisons involved prisoners in this.

Prisoner representatives conducted structured quality checks of a sample of... completed complaint forms and discrimination incident report forms, with anonymisation in each case. This was useful and likely to increase trust. **Risley**

Poor living conditions exacerbate the effects of confinement

With few exceptions, we found prisoners living together in cramped conditions in cells designed for one occupant. This was particularly a problem given the extended periods of lock-up under the COVID-19 restrictions. Many such cells lacked a lockable cupboard for personal belongings or in-possession medicines and, where they existed, they were often in a poor condition. Many shared cells were just too small and had unscreened washing and toilet facilities. Regime restrictions meant that there was little opportunity to alleviate these pressures and use communal facilities, which were often more private. The design of some single cells also meant that toilets were unscreened and sometimes next to beds.

We found the poorest accommodation in some of the older prisons, with Leicester, Pentonville and parts of Erlestoke among the worst. Cold, dark and shabby cells were often plagued by damp and cockroaches, leaking pipes and toilets, and broken or missing furniture and windows.

The condition of most of the residential units was poor and some were dilapidated. Avebury unit had been patched up on the outside with sheets of plywood and there was also a hole in an external wall... We saw numerous broken windows and observation panels, some still with shards of sharp broken glass... prisoners showed us several blocked toilets and sinks that had not been repaired for weeks and months... We saw graffiti in most units, some of which was racist. Prison managers did not have a clear picture of the level of outstanding repairs or any plans to address the backlog. **Erlestoke**

We also had concerns about some substandard accommodation at Gartree, Lindholme, Risley and Bristol.

Dartmoor was under notice of closure and had leaking roofs and failing infrastructure, but widespread cleaning was a priority and the prison was one of the cleanest we visited. At Swansea and Preston (both old Victorian prisons) and also at Hindley, cleaning was similarly a priority with staff, managers and prisoners taking joint responsibility to keep the prison clean.

A range of refurbishment projects undertaken by prison working parties had improved the quality of some accommodation, with Bristol showing an impressive turnaround from the poor living conditions we reported on when we last inspected in 2019.

A common finding and regular complaint was the low standard of communal showers. Too often they lacked effective ventilation and drainage, were dirty and not sanitised properly or at all and many had no privacy screening. While the rolling unlock of small numbers of prisoners across the day to use the showers was positive, the almost constant use may have added to these problems.

Some prisoners were not able to shower daily, especially at weekends. At Pentonville, only 16% of respondents in our survey said they could shower every day.

Food provision ‘adequate’

Although menu choices had been reduced in most prisons to support social distancing in the kitchen, provision was generally adequate. Additional ‘snack packs’ were an initiative welcomed by prisoners, and Bristol provided the option of a hot breakfast. But almost all prisoners ate their meals in cell and they were often served far too early; we often saw the evening meal served at 3.30pm. At Pentonville, we heard many complaints about the quality and delivery of the food, which was prepared two to three days in advance.

In our survey, only 29% of prisoners at Whitemoor said the quality of prison food was good or reasonable. This was one of several prisons where the popular option of self-catering had been removed, although this continued to be offered at Lindholme and Erlestoke. Generally, prisoners were much more positive about the quality of food than we normally see, with an average of 60% saying that it was good or reasonable.

Lack of education, training and work

Cuts to education

At the beginning of the pandemic restrictions, HMPPS excluded education providers from public sector prisons and encouraged them to provide in-cell learning packs for prisoners instead. Providers achieved this at different speeds across the estate. A long delay in the introduction of packs at Birmingham had left prisoners without education opportunities for an extended period. At Whitemoor, they were not introduced until late July; during our August visit only seven prisoners had completed them and marking arrangements were unreliable. There was better provision at some sites, such as Swansea, where education outreach workers engaged with prisoners on the wings and 163 accredited qualifications had been achieved at a range of levels since the restrictions had started.

Ideally, in-cell learning packs should be both subject-specific and tailored to the needs of individual learners. Staff at Northumberland had achieved this by our visit in September, but Risley was still providing generic packs in November. Learning via paper packs was especially unsuitable for those who had additional educational needs or who spoke English as a second language.

Education staff in some prisons provided support. Teachers at Huntercombe wrote to learners who had not completed packs to keep them engaged and at Hindley they visited them on the wings. In prisons with in-cell telephones, teachers could make telephone contact with prisoners and at Leicester prisoners could call the education department directly from their cell. Some prisons had qualified peer mentors who also supported learners. However, support was less evident at Birmingham and Long Lartin, where prisoners told us that the lack of tutor contact was challenging, especially when they needed additional support.

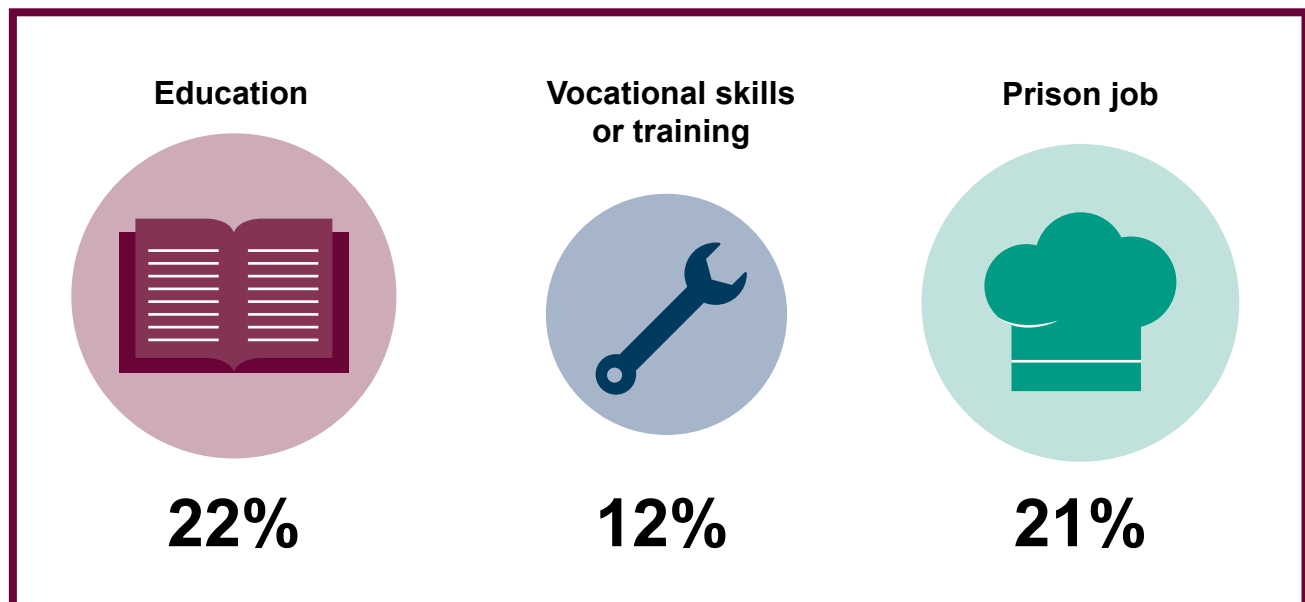
Progress towards reinstating in-person learning was slow and, since March 2020, most prisoners had lacked meaningful opportunities to gain skills to reduce their likelihood of reoffending. Although Whatton had adequate facilities for socially distanced classes when we visited in August, they had not been approved centrally and many prisoners remained locked up instead of progressing their education. By October and November, some prisons started to run a few small classes, although this was far from universal. For example, while tutors at Lindholme were delivering some one-to-one sessions and working with small groups of up to three learners, Pentonville still had no face-to-face learning.

Prisoners did not generally have access to IT and specialist resources to support their remote learning, and those taking Open University and distance learning courses at Wymott had experienced disruption and delay. However, in a trial project at Northumberland, 'Coracle Inside', prisoners were allocated individual laptops to access learning material and word processing.

Swansea had set up a well-being centre equipped with multisensory resources and a welcoming, well-equipped classroom so that prisoners with learning or mental health needs could access education. Hindley had also shown notable positive practice in an attempt to engage prisoners.

A commendable range of enrichment activities... included: a partnership with specialist creative arts group Odd Arts, working with 10 learners who were finding it hard to engage with the standard curriculum; and two projects involving social enterprise White Water Writers, which led to the production of a published book of Hindley prisoners' writing. **Hindley**

Survey responses: In this prison, is it easy to get into the following activities?



Limited access to training and work

Out-of-cell work opportunities had reduced substantially and few prisons had provided any accredited training, although innovative use of technology had produced good outcomes at Lindholme.

An LGV (driving) course was delivered remotely by iPad to a group of six learners in socially distanced conditions; all six had now moved to Hatfield open prison, where they could pursue the practical element of this course. **Lindholme**

Most non-essential activities had been suspended and social distancing requirements limited the number of workers employed. Prison workers were required for domestic tasks, such as cleaning and catering, and for the few workshops that remained open. These supplied other prisons (for example, packing prison shop orders or making prison furniture) or serviced external contracts (for example, making protective clothing for the NHS).

A minority of prisons took a more active approach, moving swiftly to review workplace capacity at the start of the pandemic. At Bristol, all work activity areas had remained open, although with reduced numbers, and the 44% of prisoners in work had much more time out of cell than their peers.

Swansea and Hindley had converted some full-time prisoner jobs into part-time jobs, which allowed a greater proportion of prisoners to have additional time out of cell.

Progress towards reopening workshops was generally very slow. Humber successfully opened four in October 2020 and, although no qualifications were available, prisoners appreciated the chance to keep active and be out of their cell. However, when we visited Leicester in December and Long Lartin in February, no plans to reopen workshops had been agreed.

Most prisoners continued to be paid for the work activity to which they were allocated, even if it was closed. This meant they received a wage, which helped avoid debt problems.

Contact with the outside world

Lack of visits had a profound impact

Social and official visits were initially terminated prison-wide in March 2020. Unsurprisingly, this had a profound impact on prisoners who were unable to meet their loved ones, including those with young or newborn children. While intended to be a temporary measure, many prisons were too slow to reintroduce face-to-face family contact when they could have done. Most prisons we visited had reintroduced social visits only from August, while at some this was not until as late as October.

The new visiting arrangements, in accordance with safe COVID-19 procedures, included tight restrictions: the number of visits was reduced significantly to maintain social distancing; visitors had to sit a minimum of two metres apart which, with the wearing of face masks, resulted in difficulty hearing and a lack of privacy; the time for visits was reduced; and few prisons facilitated weekend visits, affecting visitors living far away.

These restrictions, alongside a ban on catering, the closure of play facilities and the prohibition on children's attendance at some sites, meant that take-up was low at many prisons. Few prisons attempted to understand or find ways to resolve the low take-up of visits.

Visits were now offered on weekdays only... The overall visits capacity had reduced to about a third of what it was previously, and the two-hour timeslots had been reduced to just one hour... there had been only 549 visits since the end of July, about one-third of the capacity. **Northumberland**

Survey responses: Have you been able to see your family/friends more than once in the last month?

In person (prison visit)	4%
Using video calling	6%

It is not possible to make a direct comparison with prisoners' experience of visits before the pandemic as our standard inspection prisoner survey asks a different question (in 2019–20, 19% of men in our prisoner survey said they had at least a weekly visit from friends or family).

The consequences for breach of the visits rules were also a deterrent, including examples of a three-month ban on visits and/or closed visits, and responses were often insensitive.

... when a prisoner had allowed his six-year-old daughter to sit on his knee [the] response had been excessive. The prisoner had been placed on an adjudication, placed on banned visits for three months and both he and his cell mate were placed in isolation on the RCU. This response was disproportionate to the risks presented. **Leicester**

In contrast, we saw a more humane approach at Bristol where a father was allowed to hold his newborn baby for the first time.

The implementation of video calling (Purple Visits) across the prison estate was a welcome initiative to allow virtual face-to-face contact in the absence of social visits, but the scheme was slow to roll out, starting in most prisons in August, some five months after restrictions were imposed. The initial take-up was low, but a few prisons had explored and taken some action to address this, such as Hindley and Peterborough.

Huntercombe, a prison holding foreign national prisoners, had had its own video call service available from the start of the pandemic.

... video link social calls... could be booked every day, including evenings, which was important to foreign national prisoners with families in different time zones. This service... was used significantly more than the rest of the prison estate, with an average of 112 calls a week... there was a 65% take-up of the service. **Huntercombe**

For prisoners and families who took part, the video calling scheme was a positive experience, with an emotional impact on some prisoners who could see their home environment and even pets after a long gap. Most prisons took the positive step of same-day 'welfare visits' for prisoners who had taken part in a video call.

In-cell phones provide a lifeline

Many prisons, but still far from all, were now equipped with in-cell telephones. Just under half the prisons we visited either already had in-cell telephones or accelerated their implementation due to the restrictions. Prisoners were hugely positive about this innovation, which meant that they did not have to spend time queuing for landing telephones and having to choose between showering and maintaining family contact. In-cell telephones allowed easy and more private access to their family and friends at a time of extensive isolation. They also proved a benefit for prisoners in maintaining contact with other services throughout the prison.

For prisoners without in-cell telephones, maintaining contact with the outside world was difficult. There were few communal telephones on prison landings and, with such limited time out of cell, prisoners often reported difficulty in making calls when they also needed to shower, exercise and complete domestic tasks. Allocated times out of cell, such as 8am, were not convenient to call relatives who could be at work then.

HMPPS provided some mobile phones to each prison, which was a welcome step. However, these were often not fully used or not used at all, and in Dartmoor and Risley they were used mostly or just for self-isolating prisoners. This was a wasted resource.

Family support

Some prisons had been active in supporting prisoners to stay in contact with their families. For example, Peterborough, Preston, Whitemoor and Wymott took photos of prisoners and sent them to family members, sometimes accompanied with reassuring messages.

Tablet computers were used across prisons for prisoners to attend funerals virtually or to see relatives at the end of their life. The 'email a prisoner' scheme was in place at most prisons, with some adding a 'reply' function to enable a two-way exchange. Records generally showed large increases in the use of such schemes, highlighting their benefit.

On-site family support work had ceased in most prisons at the start of the restrictions and a limited service was offered remotely. However, in some, such as Humber, Peterborough and Risley, family support work had continued throughout, providing meaningful support to prisoners and their families, and others had tried to plug the gaps.

Staff had continued to provide support for families throughout the restricted regime, using video technology to hold forums and provide up-to-date information on visits, restrictions and other relevant topics. Staff also provided additional support for more vulnerable families with social difficulties, offering signposting to community organisations for help. **Wymott**

Some other prisons, such as Northumberland and Whatton, had reintroduced face-to-face family support and engagement.

Legal visits

Face-to-face legal visits were very slow to resume. Some prisons, such as Peterborough, kept official visits open during the second national restrictions and at Huntercombe official visits had remained open throughout the pandemic. Alternative arrangements, such as video conferencing, were introduced where technology allowed, but contact with legal representatives otherwise relied on the telephone, which was a further difficulty for prisoners without in-cell phones.

Progressing and preparing for release

Prisoners lose out on rehabilitation services

In the early months of the pandemic restrictions, there was generally no regular contact by prison offender managers (POMs) with the prisoners on their caseload. In many prisons, it took a long time before offender management units (OMUs) had enough staff to resume normal work. In others, such as Dartmoor, Erlestoke and Whatton, strong staffing levels were maintained, with probation staff staying in the establishment throughout. However, in almost all prisons, POM contact with prisoners was restricted to a minority, usually those approaching a parole milestone, who had been recalled or for whom specific public protection measures were needed. Despite the difficulties, we did note positive practice at Risley and Huntercombe.

There had been some missed opportunities for engaging prisoners in continuing work to reduce the risk of reoffending, but there were a few exceptions, such as the use of in-cell work packs at Dartmoor covering such areas as behaviour change and employability skills.

Prisoners given category D status found it difficult to move to open conditions, but from October onwards, there were signs that the rate of transfer was improving.

Limited sentence planning

Some establishments had used the pandemic period, when OMU staff contact with prisoners was limited, to catch up with processes such as reviews of offender assessment system (OASys) assessments, sentence plans and risk management plans. The backlog had reduced in many prisons, although it did not involve direct engagement with the prisoner. There was still variation; while Bristol, Preston and Swansea were fully up to date on OASys, Whitemoor was 20% behind and Lindholme 12%, measured against HMPPS standards.

For the majority of prisoners, sentence planning and risk reduction work had stopped, and for most there were no immediate plans to resume their challenge, support and supervision. The lack of key worker and prison offender manager contact, delivery of offender behaviour programmes, and therapeutic community and psychologically informed planned environment interventions meant that this had a serious impact on many prisoners' sentence progression. **Wymott**

Infection-control procedures kept OMU staff off the wings, especially in the early stages and in outbreak periods. Some prisons lacked suitable rooms for socially distanced private interviews, although in Hewell and Swansea some one-to-one interviews took place in safe interview rooms on the wings. While face-to-face contact was resuming at Humber and Hindley, by November such contact was still limited to the 'more complex cases' at Peterborough, and at Birmingham POMs' face-to-face contact with prisoners was still limited by January to key events and tasks.

Public protection work

The governance of public protection is important, with regular interdepartmental meetings ensuring that no prisoner and no key risk factor is missed. In some prisons these meetings had not taken place, even monthly, in the first period of the pandemic, while in others they had not been sufficiently well attended by all necessary departments or were too narrow in scope. Better practice at Dartmoor, Gartree, Huntercombe, Leicester, Whatton and Wymott illustrated that consistent delivery was possible.

Most prisons with in-cell telephones had substantial backlogs in monitoring the calls of prisoners identified as a public protection risk, generally because the number of calls had grown considerably. In Hewell, for example, the prison estimated a 650% increase in the volume of prisoner calls and it had a backlog of a month in listening to them. Most prisons without in-cell telephones were up to date on this monitoring.

Very little use of ROTL and early release

The release of prisoners on temporary licence (ROTL) for rehabilitation purposes had largely been suspended and nearly all the prisons we visited had withdrawn this provision. The notable exception was at Huntercombe, where the use of ROTL had continued and was managed effectively. It provided positive outcomes for prisoners to support their resettlement needs and maintain family links, showing what could be achieved within the strictures of the COVID-19 crisis.

Prisoners could still be released on special purpose licence ROTL for exceptional, personal circumstances, such as compassionate reasons and those identified by NHS England and NHS Improvement guidelines as 'extremely vulnerable'. However, very few prisoners had been released in this way.

The end of custody temporary release scheme introduced in April 2020 in response to the impact of the COVID-19 outbreak on prisons had made little impact. The aim was to reduce the numbers of prisoners in overcrowded prisons and to enable HMPPS to maximise its cohorting strategy and use of single-cell accommodation. Despite considerable work by some prisons, such as Bristol, to assess those potentially eligible, only 13 prisoners in all the men's prisons we visited had been released through this scheme.

Little programme work

The suspension of offending behaviour programme work at the end of March had a direct impact on many prisoners' ability to progress in their sentence. While some prisons, such as Hindley, had provided in-cell work packs to encourage prisoners' motivation and to maintain engagement with offence-related work, this did not address the notable shortfall in structured programme work. Many prisoners were released without having had access to such programmes.

As prisons stabilised in the summer of 2020, plans to resume delivery within the constraints of COVID-19 safe working practices were sometimes limited and lacked pace. Waiting lists for programmes continued to grow. For most prisons, there was little realistic prospect of reducing the substantial backlogs, given the continued restrictions.

In some prisons, such as Birmingham, Erlestoke and Humber, limited delivery had resumed and had been adapted to be undertaken one-to-one or in groups of two or three. While this was positive, the additional time needed to complete these programmes meant far fewer prisoners than usual had the opportunity to engage with them and overall completion levels were greatly reduced.

Limited support for prisoners on release

During the first few months of the restrictions, almost all community rehabilitation company (CRC) staff (responsible for resettlement planning work with medium- and low-risk offenders) had withdrawn face-to-face contact with prisoners. This absence presented challenges to the reviews of prisoners' resettlement needs that should have taken place 12 weeks before their release and which were now often much closer to the release date.

Most resettlement plans were drawn up using self-assessment questionnaires sent to prisoners through the internal mail. CRC staff often had to rely on historical information with no up-to-date input from the prisoner, which limited the relevance and value of the assessments.

Release planning had not taken place face to face, but was carried out through written correspondence with the prisoner. However, not all prisoners completed the paper questionnaires... and, despite reminder emails... there was no systematic process to chase these up. **Risley**

The provision of finance, benefit and debt advice was not always prioritised and, while CRCs had continued to make referrals to specialist services, many providers had withdrawn and worked remotely or at reduced capacity, with some prisoners not supported adequately.

Although we saw face-to-face contact slowly resuming, such as at Hindley and Humber, this was not common and was generally limited to targeting some of the most complex and vulnerable prisoners who needed more specialist support, such as care leavers and those likely to be released homeless.

It was a positive exception that CRC staff in Birmingham had maintained face-to-face contact with prisoners throughout the restrictions, making sure that key assessments were meaningful; this showed what could be achieved. Staff also met all prisoners on the day of their release to offer them support with any last-minute practical arrangements.

Lack of accommodation on release

In direct response to the onset of the COVID-19 crisis, the Ministry of Justice and HMPPS had invested resources to regional 'homeless prevention taskforces' to provide much-needed opportunities to fund up to 56 nights of emergency, temporary accommodation for eligible prison-leavers who would have otherwise been released homeless. The scheme initially operated for a time-limited period between 18 May and 31 August 2020 and was paused when national restrictions eased slightly. It was reinstated, subject to review, from 22 October 2020 to 31 March 2021, providing some good outcomes for prisoners.

However, prisoner access to settled accommodation on release continued to be a concern. This was often despite considerable efforts from resettlement staff and in many cases due to circumstances outside the prison's control. In Pentonville, for example, over half of prisoners (58%) had been released with no settled accommodation and 14% were released homeless.

At Humber, we saw an example of the use of legal challenge to change a local authority's decision not to accept a prisoner with a priority need for housing. Despite this, 14% of prisoners there did not have a sustainable address to go to on release.

Some prisoners who had been granted release by the parole board faced delays in this because of the lack of approved premises spaces during the pandemic.

Finding accommodation on release was an increasing problem. The supply of approved premises places had reduced considerably during COVID-19, and there was sometimes a gap of up to three months between the parole board directing release and the availability of a place. **Whatton**

We saw some innovative work to improve prisoners' chances of securing accommodation. As part of a pilot scheme at Bristol, a city council housing officer assessed potentially homeless prisoners before release to reduce the number leaving prison without settled accommodation. At Peterborough, effective partnership working helped to provide homes for those leaving the prison.

Working in partnership, the prison and Nacro had secured 15 accommodation units in the city centre that were prioritised for prisoners released from Peterborough. St Giles Trust had also secured funding from Peterborough City Council to recruit a member of staff to support prisoners who had been rough sleeping before coming into custody. **Peterborough**

However, despite these efforts, nearly a third of prisoners from Peterborough and a quarter from Bristol had no settled accommodation on release.

The experience for women in prison

The experience for women in prison during the period of the pandemic showed many similarities with that of men, in terms of the impact of long periods of confinement, lack of contact with family and friends, and the withdrawal of activities and services. But women prisoners also suffered in specific ways, which were not always recognised in the restrictions imposed on all prisons in March 2020.

We were not able to carry out a planned scrutiny visit of a women's prison in January 2021 due to COVID-19 tier restrictions, but we did make short scrutiny visits (SSVs) to Bronzefield, Eastwood Park and Foston Hall in May 2020 and Downview and Send in June 2020, as well as looking at the experience of women prisoners in our thematic review *What happens to prisoners in a pandemic?* (February 2021).

Self-harm increased and remained high

We were concerned that, in the 12 months to December 2020, the rate of self-harm incidents per 1,000 prisoners, which takes account of the reduction in the prison population between this and the previous year, increased by 13% in women's prisons.

In *What happens to prisoners in a pandemic?* we found that long periods of isolation in cell had led to women using unhealthy coping strategies. Some reported cutting themselves more often during the restricted regime as a way of managing increased stress. The removal of face-to-face access to peer support workers, who could offer advice and guidance when they were feeling low, and the loss of association periods when they could talk to friends had deepened some women's distress.

Our SSVs found that additional well-being checks had been introduced at all sites. Bronzefield had good systems to identify deterioration in prisoners' moods, and staff in the enlarged safer custody team at Eastwood Park made daily checks on women identified as more vulnerable to the effects of the restrictions on their mental health.

Despite these efforts, we were concerned that prisoners with high levels of need were not getting the support they required. These women had previously received vital structured support from a range of agencies, but this work had stopped or been drastically curtailed when the restrictions were first imposed.

The Listener service had continued at Bronzefield, Eastwood Park and Send, with demand for the service at Send doubling since the restrictions were implemented. The scheme had been suspended at Foston Hall and Downview (where it had later been reinstated). A safer custody telephone line, staffed by peer support workers, provided support for the more vulnerable women at Eastwood Park, and Foston Hall had initiated telephone welfare checks and interventions.

Restrictions limit activities

Our SSVs reported that the restrictions had affected women prisoners' time out of cell across all sites, with variations. Whereas most women at Foston Hall received only 30 minutes a day out of their cell, they had an hour a day out at Bronzefield and Eastwood Park and 90 minutes at Downview and Send.

All the prisons visited provided a wide range of in-cell activities, including distraction packs and crafts, in an attempt to offset the limited regime. While all the libraries had been closed, books were still delivered to women on their units. Bronzefield had provided extra TV channels and Foston Hall had bought extra DVD players, but women in Send told us the in-cell activities were not providing sufficient stimulation.

Women at the prisons we visited had some access to work, involving almost half of the women in Send and a slightly higher proportion in Downview. Education classes had been suspended at all sites, although at Bronzefield some limited provision was delivered at cell doors. Instead, women were given in-cell workbooks. Prisoners at Eastwood Park had been able to continue with their distance learning, limited to in-cell study.

Well-being and self-esteem

Our thematic review found that the communal dining that had been common in women's prisons before the restrictions had stopped and prisoners had to eat meals in their cells, which they said was unpleasant. While extra food packs had been provided to mitigate the reduced time out of cell, this, combined with the lack of gym provision at most sites, had raised women's concerns about weight gain and led to issues with self-esteem. Downview and Send had provided some limited access to outdoor gym sessions.

In our SSVs, women were positive about staff, but some felt isolated due to the lack of time to seek help.

Reduced contact with the outside world

The suspension of social visits had led to extreme frustration for women prisoners, with many not having seen their children for many months. Women interviewed for our thematic said that not being able to see their children left them feeling lonely, frustrated and anxious. Where women did not have in-cell telephones, contact was much harder.

The initial roll-out of video calling to help women keep in touch with family and friends had been slow, with some technical problems, and initial take-up of video calling was lower than anticipated. Eastwood Park had set up a scheme where women could read a bedtime story to their children each evening,

Bronzefield had enabled family engagement workers and caseworkers to remain on site throughout the restricted regime to provide women with face-to-face support.

Lack of planning and accommodation on release

At the time of our SSVs, most community rehabilitation company staff had withdrawn from the prisons and were only providing a remote, paper-based service. This meant they did not meet women to discuss their resettlement needs, which undermined effective release planning.

The end of custody temporary release scheme had failed. Despite work at all sites to release women on this scheme, at the time of our visits only four out of over 140 prisoners reviewed as potential candidates for it had been released.

All sites had maintained some practical release planning support, such as issuing mobile phones for women who needed one. However, in the key area of accommodation many women were released without a home to go to. Since the start of the restrictions, 40% of women released from Bronzefield and Eastwood Park and 20% of those released from Foston Hall had no accommodation on the day of their release.

Children in custody

Young offender institutions

At the start of the pandemic, HMPPS gave too little attention to the distinct needs of children in custody. Leaders in public sector young offender institutions (YOIs) had made efforts to provide a regime that could meet the needs of children safely, but these were undermined by HMPPS decisions nationally to treat children in the same way as prisoners held in the adult estate. This was despite most children in custody meeting the definition of a vulnerable child; in the community face-to-face education was maintained for such children when the COVID-19 restrictions took effect. The result was a negative impact on children's access to services, including education and visits. Children in these YOIs also spent extensive periods locked in their cells (see Section 2). We found that fewer of these restrictions were placed on children held in Parc, who continued to have access to education.

The specific needs of children in custody were recognised as the pandemic progressed. By the time of our scrutiny visits to Wetherby and Feltham A, local managers were able to provide face-to-face services to children and make some improvement to the time they could spend out of their cells each day. At both sites, part-time education was provided for children to attend in small groups.

Grouping children into smaller 'family groups' had improved relationships between staff and children, but this had been at the cost of fewer hours of education and social interaction for each child and many had become detached from resettlement planning. At Wetherby, there was also evidence that the prolonged use of very small family groups, or bubbles, had resulted in children becoming unused to mixing with others and tension between different groups. This had created an understandable anxiety among staff and children about mixing the groups. At Feltham A, the emerging concern was the increasing number of assaults within groups, which also created anxiety.

The challenge for the Youth Custody Service (YCS) following the pandemic period will be to build on lessons learned during this time, while providing children with increasing hours of constructive time out of their cells.

Secure training centres (STCs)

We carried out an assurance visit at Rainsbrook STC jointly with Ofsted and the Care Quality Commission (CQC) in October 2020, where we raised several serious concerns (see box). Leaders had failed to assure children's safety and well-being consistently, and to address deficiencies in their care; support plans for vulnerable children were generic and did not detail the risk to the child or any strategies needed to keep them safe.

At a further visit in December, we decided to invoke the Urgent Notification procedure (see Glossary). Despite assurances from leaders at the centre, national leaders and YCS monitors, children continued to be locked up for 23.5 hours a day for days or weeks following arrival at the centre. It was inexplicable that leaders were unaware of this practice in a centre holding just 45 children. At a further visit in January 2021 we found some improvements in oversight, but weaknesses in education provision remained.

We also made an assurance visit to Oakhill STC in December. Leaders had responded well to the pandemic restrictions by gradually lifting the highly restrictive measures that were imposed initially. Education had recommenced and children had a suitable amount of association time together. Attendance at outreach education was high and, following a recruitment drive for teaching staff, there had been rapid progress in meeting the recommendations from the last full inspection. Children said they felt safe, and levels of violence and use of force were low. A well-integrated health care team, who had good oversight of children's needs, provided support.

Rainsbrook – an appalling lack of care for children

At a joint assurance visit carried out by Ofsted, HM Inspectorate of Prisons and the CQC in October 2020, inspectors found three boys on the reverse cohort unit (RCU), a unit holding newly admitted children for 14-days quarantine. All three children were assessed as needing heightened observations; staff were so concerned about one child that his observations were at five-minute intervals. Despite the identified vulnerabilities, these children were effectively in solitary confinement, locked in their cells with no interaction with staff or other children for 23.5 hours a day. They were allowed just 30 minutes a day in the open air. One 15-year-old, who was new to custody, received a visit from his caseworker and education staff in his cell on his first day, which was his sole induction to custody. After 24 hours, he was assessed as needing increased 15-minute observations, but his risk assessment did not reflect the reasons why or include any strategies to help him. This practice was reflected across the centre for newly arrived girls and those who had left the centre on escort for any reason.

The inspection team raised a serious concern and we were subsequently given assurances by national leaders in the YCS that this practice had ceased. However, at a further visit in December we found that leaders in the YCS and the centre had allowed these restrictions on new arrivals to continue and that no provision had been made for girls, leading to one being locked up for 48 hours without leaving her room. The team invoked the Urgent Notification process following this visit.

At a further visit in January 2021 we found some improvements in standards. Children who required quarantine were now given adequate time out of cell, but there continued to be weaknesses in the delivery of education. Work was still needed to address our previous recommendations.

Four

Immigration detention



Short scrutiny visits

We visited four immigration removal centres (IRCs) as part of our programme of short scrutiny visits (SSVs). Two additional IRC scrutiny visits were planned but then cancelled – one due to a COVID-19 outbreak and the other because there were no detainees being held at the time.

Fall in numbers of detainees

All four IRCs had seen a major reduction in their populations since the outbreak of the COVID-19 pandemic. It was likely that the releases prompted by COVID-19 had helped to prevent the spread of the virus in these establishments. The lower numbers also meant that detainees could be accommodated in single rooms, usually with their own toilets and showers, which provided additional privacy and helped to curtail the spread of the virus. However, some of those still in detention had been there for extended periods and many were frustrated by their ongoing detention. There was little prospect of removal at the time of our SSV because of the curtailments on international travel.

Freedom of movement and access to activities

In the four IRCs we visited, we saw none of the extreme restrictions observed in the more crowded prisons. Detainees had generally good freedom of movement and those in Morton Hall and Yarl's Wood could move around the centres and their grounds all day. They also had reasonable access to activity areas and most could work if they wished to. Detainees who were often otherwise stressed and frustrated were very positive about the benefits of these activities to their mental health. All the IRCs provided extra activity packs for detainees to use in their rooms, with education materials, quizzes and puzzles. Some centres had organised COVID-safe activities and events, such as bingo, quizzes and exercise classes, which detainees generally appreciated. But there were inconsistencies between the centres; it was unclear why some had been unable to sustain activities that others were still providing.

Vulnerable adults

There was a high level of assessed vulnerability among those who remained in detention and many vulnerable adults had been held for long periods at a time when the prospect of removal was remote. Our SSV identified nearly 40% of detainees as coming under the Home Office adults at risk in detention definition – often because they met the criteria for shielding. There were processes for supporting the most vulnerable detainees and reviewing their detention. Levels of self-harm were generally low.

Rule 35 reports – which notify the Home Office when a detainee’s health is injuriously affected by detention or when they may have been a victim of torture – were generally completed promptly, although we found some delays. At our SSV inspection in May 2020, we found that a higher proportion of Rule 35 reports had led to detainees being released than was the case at our two full inspections in 2019.

Contact with the outside world

All detainees had access to phones, internet and video calling, which meant it was relatively easy for them to maintain contact with family and friends. Welfare staff still provided useful assistance and some community support groups were in telephone contact with detainees.

The suspension of social visits at all four IRCs had had a considerable negative impact on some detainees, but it was positive that all had been given additional free telephone credit and access to video calling to contact family and friends. The take-up of video calling varied widely between the centres, although the reasons for this were unclear. At Morton Hall, detainees on the reverse cohort unit who could not use the communal computers and phones were allowed to use their personal mobile phones from their stored property to access emails and the internet.

Border Force short-term holding facilities

Our inspection of Border Force short-term holding facilities (STHFs) in March 2020 was the first national inspection of these sites and the first time that HMI Prisons had inspected STHFs on a national basis rather than as individual facilities or geographical clusters.

Failures of leadership and management

The Home Office should inform HMI Prisons where any site is used for immigration detention. During 2019, we became aware of a number of operational STHFs about which we had not been notified. Border Force then supplied a list of 11 holding facilities subject to the STHF rules, nine of which were previously unknown to us. This list was amended several times before and during the inspection. We eventually inspected 13 STHFs across the country, eight of which were at seaports and five at airports.

Border Force was unable to provide us with comprehensive information on the numbers of detainees, their profiles or length of detention. The available data suggested that detainees could be held for lengthy periods, occasionally over 24 hours, in facilities that were not fit for purpose.

A major finding from this inspection was that there was inadequate leadership and management of detention.

The fact that Border Force senior managers could not even tell us with certainty which of their ports actually had detention facilities suggests an alarming lack of oversight and accountability... In many facilities, Border Force staff told inspectors that they felt like they had been 'forgotten' and that there was neither national guidance nor sharing of best practices. **Border Force STHFs**

We concluded that there was an urgent need for Border Force leaders to undertake a comprehensive national audit of detention to assure themselves and the public that all sites of detention are identified, properly equipped for holding detainees and subject to consistent management.

The detention of migrants arriving in small boats

We reported on five sites used to hold migrants arriving on the English south coast in small boats. They had often spent several years in total travelling from home countries before attempting dangerous sea crossings to Dover. We identified concerns across all stages of the arrival and reception process.

Most migrants were first taken to the facilities at Tug Haven in Dover, which resembled a building site and were not fit for purpose. Migrants almost always arrived wet and cold and then usually spent hours in the open air or in cramped container units before being transferred. Basic supplies of clean and dry clothing regularly ran out and the bathroom facilities were inadequate. Shortly after the inspection, Home Office managers sent us photographs showing some improvements made to Tug Haven.

The other sites on the south coast – the Kent Intake Unit in Dover and Frontier House in Folkestone – provided basic accommodation suitable for a short time. However, many people had been in crowded conditions for lengthy periods, without access to sleeping facilities, showers or the open air. In the three months to 31 August 2020, 29% of unaccompanied minors were held at the Kent Intake Unit for over 24 hours and a 15-year-old unaccompanied child was held for 66 hours, which was unacceptably long.

We were concerned by weaknesses in safeguarding arrangements for vulnerable adults and unaccompanied children. We found cases in which vulnerabilities had not been properly identified and where children had been mistakenly transferred to adult detention. In one case, a child had been transferred to asylum accommodation in London without social services being informed by UK Visas and Immigration to make sure the child was properly safeguarded.

The facilities at Yarl's Wood IRC in Bedfordshire and Lunar House in Croydon were generally good and safeguarding arrangements there were much more robust. At Yarl's Wood, in particular, detainees had a high standard of accommodation and could participate in some education and exercise.

At all the sites we were concerned by the inadequate use of professional interpreting services and the use of abridged asylum-screening interviews. These carried the risks that detainees would not be properly informed about what was happening and that important safeguarding issues would fail to be identified.

There was a general failure to prepare adequately for what we considered to have been a predictable increase in migrants arriving in small boats. Small boat crossings across the Channel had been increasing since late 2018, when the then Home Secretary declared a 'major incident'. Yet the detention facilities at Dover remained poorly equipped to meet their purpose and important processes had broken down. While some of the concerns we identified could have been addressed by local managers, an effective response required coordinated and strategic action involving different Home Office agencies and the port authorities.

Asylum accommodation

In February 2021, HMI Prisons assisted the Independent Chief Inspector of Borders and Immigration (ICIBI) in his inspection of contingency asylum accommodation at Penally Camp in Pembrokeshire and Napier Barracks in Folkstone. At both sites, we identified poor outcomes and serious failures of leadership and management.

The general environment at both sites was impoverished, run down and not suitable for long-term accommodation. Cleanliness was variable at best and cleaning was made difficult by the age of the buildings. Public Health England had advised the Home Office that opening multi-occupancy, dormitory-style accommodation during a pandemic was not in line with its guidance and Public Health Wales had expressed concerns about the COVID-safety of the accommodation. There had been a significant COVID-19 outbreak at Napier Barracks. The communal conditions and the inability to cohort residents effectively meant that once one person was infected, a large-scale outbreak was virtually inevitable. There had also been a fire at Napier, but ongoing fire safety failings identified by the Crown Premises Fire Safety Inspectorate (CPFSI) had not been fully addressed. Residents at both sites were normally able to come and go, although over a hundred people at Napier were confined to their billets during the COVID-19 outbreak there.

At both sites, residents reported high levels of stress, depression, and despondency. There was too little communication from the Home Office and residents were frustrated at the lack of information about their asylum claims and when they would be able to leave the sites. We found several cases of individuals at high risk of self-harm who had been accommodated at Napier Barracks for long periods without suitable support. At Napier, there had been some serious self-harm incidents and people at high risk were placed in a decrepit, filthy and damp isolation block, which was unfit for habitation. Residents who may have been children were also housed in the same block pending an age assessment.

More positively, most residents we spoke to said that onsite security and services staff were friendly and treated them with respect. Local voluntary groups were giving residents some valuable support at both camps, including with clothing, activities, legal and other external support.

Shortly after our inspection, Penally Camp was closed and we were told of changes at Napier Barracks, including the closure of the isolation block. HMI Prisons submitted a full report to the ICIBI, which was sent to the Home Secretary in May.

Overseas escorts

Enforced charter flight removals had been suspended at the beginning of the pandemic but resumed in August 2020. We reported on three flights, all of which were to multiple European destinations and took place before the UK left the European Union (EU). Some detainees were moved to third countries under the Dublin Convention (an EU law that determines which member state is responsible for considering an asylum claim and allows member states to transfer asylum seekers to the responsible state).

Initially, removals were carried out in a manner very similar to those conducted before the pandemic, with a few changes to reduce the risks of virus transmission. Detailed measures and mitigations specified in Mitie Care & Custody's 'safe systems of work' documentation were implemented only in part, with escort staff giving little priority to wearing face coverings or maintaining distance. Use of face coverings was more consistent in the second and third flights we inspected, but other health and safety requirements, such as social distancing, were more difficult to achieve alongside the need to exercise physical control. This was further undermined by the relatively high number of staff used to accompany small numbers of detainees.

Standards of organisation and communication between the Home Office, IRC and escort contractor were sometimes inadequate, which had led to delays, misunderstandings and unnecessary long and arduous journeys for detainees.

All of those on the first inspected removal flight to France and Germany were removed under the Dublin Convention. Fourteen detainees flew with over 86 staff. The number of staff present at each stage often made social distancing impossible and face coverings were not worn consistently. There had been several incidents of self-harm in the days before the flight. During the removal operation, we saw few incidents at the IRC and the use of interpreters throughout was helpful. While waist restraint belts were applied to half the detainees, better justification was given for their use than we have often seen. However, dynamic risk assessment was still poor and the belts usually stayed on until arrival at the receiving country, even though all detainees were compliant after take-off.

The cancellation of removals for detainees due to be removed under the Dublin Convention was commonplace. This suggested that detainees' vulnerabilities, which often led to cancellations, were not identified early enough. In some cases, important assessments of vulnerability (Rule 35 reports) were not ready by the time of the flight.

Findings for the other two inspected flights – to Sweden and Romania, and France and Lithuania – were more positive. Most removals were of ex-prisoners who were generally content to return home and there was little non-compliance. Where detainees demonstrated challenging behaviour, we were pleased to see a continuation of the improved practice in use of restraints, with evidence that they were applied only when de-escalation had been attempted and as a last resort.

Five

Court custody



We reported on three inspections of court custody facilities. The inspection of Avon, Somerset and Gloucester took place just before the national COVID-19 restrictions took effect in March 2020; we inspected court custody facilities in Derbyshire and Nottinghamshire in September, and Norfolk, Suffolk and Essex in November and December. The inspections used our *Expectations: Criteria for assessing the treatment of and conditions for detainees in court custody* (updated in March 2020), with additional questions relating to the management of COVID-19 for the latter two inspections.

The COVID-19 pandemic saw the numbers of detainees going through court custody drastically reduce from April 2020. Throughput increased incrementally from June, but had not returned to pre-COVID levels by the time of our inspections in September and November/December.

The re-tendered contract for the delivery of escort and custody services came into effect in August 2020. The new contract placed more focus on improving the detainee experience and had led to some positive changes, notably the much more proportionate approach to handcuffing detainees and the new and safer fleet of escort vehicles.

Where the use of handcuffs had previously been routine for all detainees, they were now only used when supported by an individualised risk assessment, which reflected a far more proportionate approach. **Norfolk, Suffolk and Essex court custody**

However, some planned improvements had been stymied by the pandemic.

There was a good multiagency approach to identifying and mitigating the risks associated with the transmission of the virus. Implementation of the increased safety measures was inconsistent, but had improved by the time of our inspection in November/December.

Leadership and multiagency arrangements generally reflected a shared aim to deliver good outcomes for detainees. Relationships between key personnel from the three main agencies involved – HM Courts & Tribunal Services (HMCTS), Prisoner Escort and Custody Services (PECS) and the service provider – were well developed, but were not always properly focused on the experience of detainees. The collation and analysis of data were not robust and were not used effectively to drive or support the required improvements for detainees.

The legal rights of detainees were generally well served. Our biggest concern was that many were affected by spending longer in custody than was strictly necessary. The issues were complex, but the scale or reasons for this were not fully understood and little or no action was taken to identify and address the problems.

The conditions in which detainees were held varied greatly. While some cells were clean, safe and well-maintained, others were inexcusably dirty and contained graffiti. Very few cells had natural light, some were cold and many contained potential ligature points. Despite improved oversight, complex contractual arrangements and budgetary constraints made it more difficult to rectify some of these flaws.

The condition of cells across the custody estate varied and some of the issues raised in our last report remained a concern. Those in the two private finance initiative suites at Derby and Chesterfield magistrates' courts were clean and in a good state of repair. Others were less well maintained and were grubby in places, which was unacceptable during a pandemic and when use was so low. Most cells lacked natural light and some were cold. **Derbyshire and Nottinghamshire court custody**

There was a programme of training and development activity for court custody staff, but the embedding of learning from this was often weak, particularly for safeguarding, equality and diversity, and mental health. While we found no major failings for detainees, we were not confident that if problems arose in these areas they would be consistently identified or responded to appropriately.

It was positive that few children were held in court custody. By our inspection at the end of 2020, the contractual improvements requiring children to be generally accompanied and cared for by designated, trained staff were beginning to be realised, but they were still too often held in cells. Delays awaiting placement orders and appropriate transportation continued, but were less prevalent.

We met a team of three [officers] looking after a child who had travelled in a small non-cellular vehicle and been given various resources, including a tablet computer (for use in the vehicle) and distraction activities. The child told us that the support he had received had been helpful. **Norfolk, Suffolk and Essex court custody**

The understanding approach taken by most custody staff was a strength and often mitigated some of the poorer conditions and shortfalls in provision.

Staff in all suites were calm and professional in their approach to the care and safety of detainees. They behaved very humanely and respectfully and took care to explain each stage of the process, especially to those unfamiliar with the working of the courts. Their attitude was patient and encouraging, and they made every effort to reduce tension and anxiety. **Avon, Somerset and Gloucestershire court custody**

The detainees we spoke to were content with, and frequently complimentary about, their treatment. It was, however, disappointing that some services for detainees were delivered inconsistently: distraction activities and reading materials were not always provided routinely; and the quality and provision of food varied, even when detainees indicated they were hungry. The overall identification and management of risk were reasonably good. Release arrangements ensured that detainees at least had the means to get home safely.

Improved arrangements for detainee access to specialist health advice and care had been commissioned from August 2020. While positive, we were unable to test the effectiveness of the changes fully due to the pandemic. Health training for custody staff was fragmented; although all had first-aid training, there were few opportunities for them to maintain levels of competence. Information sharing about detainee health risks was too often insufficient to be of use to the custody staff responsible for looking after them. There continued to be appropriate support for those with mental health needs.

Six

Pre-COVID-19 inspection reports



In the early part of 2020–21, we published reports of inspections that had taken place before the pandemic. These included seven adult male prisons, one women's prison and one young offender institution (YOI) holding children aged 15 to 17 years old. All the inspections were carried out using the full inspection methodology and criteria set out in our Expectations (see pages 18 and 19) and were conducted jointly with Ofsted and the Care Quality Commission (CQC). We also reported on inspections of two prisons in Northern Ireland and custody suites in two police forces. A report of national short-term holding facilities in this period is included in Section 4: Immigration detention.

Adult men's prisons

The following is a summary of reports of inspections at Frankland, Full Sutton, Holme House, Lincoln, Nottingham, Stafford and The Verne.

Safety

Our assessments of safety outcomes were that they were good at three prisons, reasonably good at two and not sufficiently good at two.

Levels of violence and prisoner feelings of safety were generally similar to the previous inspections and to other comparable establishments, but we had continuing concerns about safety at Nottingham. Here, we found that safety had been poor at three previous inspections, invoking an Urgent Notification in 2018 followed by our first-ever independent review of progress. Although this inspection reported some change, there was still far too much violence and not enough done to counter it effectively.

Self-harm had increased at most of the prisons. While support for those at risk was mostly good, recommendations from the Prisons and Probation Ombudsman (PPO) following self-inflicted deaths were not always addressed.

Respect

Our assessments of respect outcomes were that they were good at two prisons, reasonably good at four and not sufficiently good at one.

Staff-prisoner relationships were generally good. Key working had been implemented in many prisons, but sometimes lacked focus on prisoner progression.

Living conditions for prisoners varied widely, with severe overcrowding in Lincoln and a lack of some basic equipment elsewhere. The food and prison shop facilities were generally reasonable, but some first shop orders for new arrivals took too long, which potentially led them into debt with other prisoners.

Work to promote equality and diversity had been improving, but the specific needs of prisoners with protected characteristics were not always met and some groups, such as disabled prisoners, received too little support.

Health services were generally good, but there were shortfalls in several areas, with excessive waiting times for treatment, including mental health.

Purposeful activity

Our assessments of purposeful activity outcomes were that they were reasonably good at two prisons and not sufficiently good at five. Ofsted assessments of the overall effectiveness of education, skills and work were that they were good at two prisons and required improvement at five.

The time that prisoners could spend out of their cells each day was generally reasonable, although too many were locked up during the core working day at Nottingham and Frankland. Library and gym provision were generally good.

Education, skills and work provision were generally sufficient, but there were not always enough activities to occupy prisoners and activity places in some prisons were not fully used.

The curriculum did not always meet the needs of short-term prisoners, those wanting to pursue higher-level education or those with English language needs. Prisoners generally behaved well in activities, but their attendance and punctuality were sometimes poor.

Rehabilitation and release planning

Our assessments of rehabilitation and release planning outcomes were that they were reasonably good at six prisons and not sufficiently good at one.

Support to help prisoners maintain contact with their children and families ranged from reasonable to good.

Rehabilitation work was often not effective for the specific needs of the prison's population and there were sometimes gaps in provision. We found some continuing delays in the completion of offender assessment system (OASys) reports, although some backlogs had been reduced. There were variations in the contact that prison offender managers (POMs) had with their prisoners.

Our assessment of public protection measures also varied from them being 'robust' to having 'significant weaknesses'.

Categorisation reviews and home detention curfew processes were generally well managed, although a national lack of category B places affected some prisoners' progress and there were some delays in moving on to open prisons.

Where prisons delivered intervention programmes to address offending behaviour these were generally good or improving.

Release and resettlement planning was generally reasonable, and sometimes very good, but increasing numbers of prisoners were released homeless.

Drake Hall women's prison

We reported on a full inspection of Drake Hall, holding adult and young adult women. A closed prison with an open regime, prisoners were never locked in their rooms and the prison promoted a 'community ethos'.

Drake Hall was assessed as good in our tests of safety, respect, and rehabilitation and release planning, and reasonably good for purposeful activity.

Although it was a safe place, and the proportion of self-harm incidents was lower than in similar prisons, drugs, including diverted medication, were too easily available. Staff were not based on all the house units, which limited prisoner engagement with them and did not always ensure adequate protection for the more vulnerable prisoners or challenge those involved in bullying others.

Living conditions were reasonable except on two prefabricated units dating from World War II, which needed demolition and replacement. Prisoners had good access to a range of primary health care, including a female GP. There was a high need for mental health services.

Ofsted rated the quality of education, skills and work activity as good. However, there was no strategic oversight of the curriculum, no careers advice and no accurate data on how many prisoners went into education, training and employment on release.

Work to help women maintain contact with children and family members remained a positive feature. The prison made extensive use of release on temporary licence (ROTL) to aid prisoner progression and maintain family contact.

Northern Ireland

We inspect prisons in Northern Ireland by invitation from Criminal Justice Inspection Northern Ireland (CJI), and jointly with CJI and other partner inspectorates in Northern Ireland. In October and November 2019, we inspected Hydebank Wood Secure College, holding young adult men aged 18 to 24 years old, and Ash House Women's Prison at Hydebank Wood, the sole women's prison in Northern Ireland.

In both establishments, we reported 'remarkable' progress since the previous inspections in 2016, with the rating for safety outcomes in the secure college and respect in the women's prison moving up from not sufficiently good to good. Violence had reduced in the secure college, and levels of both violence and self-harm in Ash House were below those in women's prisons in England and Wales. However, there were concerns about governance of the use of force and the strategy to reduce the supply of drugs at both sites, as well as prescribed medication in the women's site.

Prisoners had good relationships with staff at both sites. They had good access to health services. The one area that fell below the rating of good at both sites was purposeful activity.

Compared with the poor treatment of, and outcomes for, young adults in prisons in England and Wales, the inspection found examples where the college performed favourably, and even better, than its equivalents.

Werrington young offender institution

We reported on a full inspection of Werrington, a YOI holding children aged 15 to 17 years old. We found that outcomes were good in care and reasonably good in purposeful activity and resettlement, but the high levels of violence and the increased use of force meant that outcomes for safety were still not sufficiently good. In our survey, only 25% of children said that behaviour management schemes encouraged them to behave well.

There were many examples of staff working patiently with children, although children consistently reported that some staff were dismissive of their concerns.

Time out of cell was better than at other YOIs, at up to 11.5 hours a day on weekdays, and very few children were locked up during the school day. More children now engaged in activity, including education – which Ofsted rated as good overall. Most children made good progress on courses that met their needs, although this was slower in English and mathematics. A few classes were disrupted by poor behaviour.

Although there had been improvement in ROTL to aid children's resettlement, there were some weaknesses in sentence planning and public protection work. Despite the efforts of the resettlement team, children did not always have education, training or employment arranged on their release.

Police custody

We published reports of inspections of British Transport Police (BTP) and Leicestershire Police, carried out jointly with Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

Both forces had a clear governance structure and appropriate accountability for their custody services and facilities.

Some of the practices that we observed in both forces did not follow professional or local guidance, such as recording sufficient detail to justify the use of force and strip searching. We had concerns about the governance and oversight of use of force on both inspections.

The forces did not always meet the requirements of code C of the Police and Criminal Evidence Act 1984 (PACE) codes of practice for detention, treatment and questioning.

Although both forces aimed to divert children and mentally ill people away from custody, the arrangements in BTP to achieve this were not satisfactory. However, Leicestershire had secured good outcomes in diverting those with mental ill health from custody.

Custody staff in both forces treated detainees well and took a caring approach, although provision in Leicestershire to meet the needs of women and people with disabilities was not always adequate. In both forces, the approach to the identification of risk was good, but there were some weaknesses in its management.

We alerted both forces to some potential ligature points in cells, to which they responded promptly.

Health care provision was good in both forces; in BTP it was available 24 hours a day in the custody suites, with mental health nurses on site for 12 hours. Both forces faced problems in transferring detainees to hospital when mental health inpatient beds were needed.

Detainees were released safely in both forces, but in BTP there was limited support for those identified as homeless.

Healthy prison and establishment assessments in full inspections 2020–21

Establishment	Inspection type	Safety	Respect	Purposeful activity	Rehabilitation and release planning
Local prisons					
HMP Nottingham	Unannounced	2	3	2	3
HMP Lincoln	Unannounced	3	3	2	3
High secure prisons					
HMP Frankland	Unannounced	3	3	3	3
HMP Full Sutton	Unannounced	4	3	2	3
Training prisons					
HMP Stafford	Unannounced	4	4	3	3
HMP The Verne	Unannounced	4	4	2	3
HMP Holme House	Unannounced	2	2	2	2
Women's prisons					
HMP/YOI Drake Hall	Unannounced	4	4	3	4
Children's establishments					
HMYOI Werrington	Unannounced	2	4	3	3

Recommendations accepted in full inspections 2020–21

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle or accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Local prisons												
Nottingham	10	19	29	9	16	25	1	2	3	0	1	1
Lincoln	13	14	27	12	9	21	0	5	5	1	0	1
TOTAL	23	33	56	21 (91%)	25 (76%)	46 (82%)	1 (4%)	7 (21%)	8 (14%)	1 (4%)	1 (3%)	2 (4%)
Category C training prisons												
Holme House	15	20	35	14	18	32	0	1	1	1	1	2
TOTAL	15	20	35	14 (93%)	18 (90%)	32 (91%)	0 (0%)	1 (5%)	1 (3%)	1 (7%)	1 (5%)	2 (6%)
Male sex offender prisons												
Stafford	4	19	23	2	14	16	2	5	7	0	0	0
The Verne	10	8	18	10	7	17	0	1	1	0	0	0
TOTAL	14	27	41	12 (86%)	21 (78%)	33 (80%)	2 (14%)	6 (22%)	8 (20%)	0 (0%)	0 (0%)	0 (0%)
Male high secure prisons												
Frankland	5	23	28	5	17	22	0	5	5	0	1	1
Full Sutton	4	22	26	3	19	22	1	2	3	0	1	1
TOTAL	9	45	54	8 (89%)	36 (80%)	44 (81%)	1 (11%)	7 (16%)	8 (15%)	0 (0%)	2 (4%)	2 (4%)
Women's prisons												
Drake Hall	3	18	21	3	17	20	0	1	1	0	0	0
TOTAL	3	18	21	3 (100%)	17 (94%)	20 (95%)	0 (0%)	1 (6%)	1 (5%)	0 (0%)	0 (0%)	0 (0%)

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle or accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Children's establishments												
Werrington	9	11	20	8	10	18	1	1	2	0	0	0
TOTAL	9	11	20	8 (89%)	10 (91%)	18 (90%)	1 (11%)	1 (9%)	2 (10%)	0 (0%)	0 (0%)	0 (0%)
PRISON TOTAL	73	154	227	66 (90%)	127 (82%)	193 (85%)	5 (7%)	23 (15%)	28 (12%)	2 (3%)	4 (3%)	6 (3%)

Recommendations accepted in full inspections 2020–21 (continued)

Key: * Action plans not due until after the end of the annual reporting period (31 March 2021)

** Not published by HMI Prisons

ESTABLISHMENT	RECOMMENDATIONS			ACCEPTED			PARTIALLY ACCEPTED (Includes recommendations accepted in principle or accepted subject to resources)			REJECTED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
STHFs												
Border Force	*	*	*	*	*	*	*	*	*	*	*	*
Migrants arriving in Dover	10	10	20	7	4	11	3	5	8	0	1	1
TOTAL	10	10	20	7 (70%)	4 (40%)	11 (55%)	3 (30%)	5 (50%)	8 (40%)	0 (0%)	1 (10%)	1 (5%)
OVERSEAS ESCORTS												
France / Germany	0	4	4	0	2	2	0	2	2	0	0	0
Sweden / Romania	*	*	*	*	*	*	*	*	*	*	*	*
France / Lithuania	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	0	4	4	0 (0%)	2 (50%)	2 (50%)	0 (0%)	2 (50%)	2 (50%)	0 (0%)	0 (0%)	0 (0%)
COURTS												
Avon, Somerset and Gloucestershire	3	15	18	2	13	15	1	1	2	0	1	1
Derbyshire and Nottinghamshire	3	18	21	3	15	18	0	2	2	0	1	1
Norfolk, Suffolk and Essex	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	6	33	39	5 (83%)	28 (85%)	33 (85%)	1 (17%)	3 (9%)	4 (10%)	0 (0%)	2 (6%)	2 (5%)

Recommendations achieved in full inspections 2020–21

Key: * No previous recommendations

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Local prisons												
Nottingham	8	30	38	3	17	20	3	2	5	2	11	13
Lincoln	5	49	54	3	22	25	1	10	11	1	17	18
TOTAL	13	79	92	6 (46%)	39 (49%)	45 (49%)	4 (31%)	12 (15%)	16 (17%)	3 (23%)	28 (35%)	31 (34%)
Category C training prisons												
Holme House	5	56	61	1	23	24	1	7	8	3	26	29
TOTAL	5	56	61	1 (20%)	23 (41%)	24 (39%)	1 (20%)	7 (13%)	8 (13%)	3 (60%)	26 (46%)	29 (48%)
Male sex offender prisons												
Stafford	4	43	47	2	23	25	1	3	4	1	17	18
The Verne	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	4	43	47	2 (50%)	23 (53%)	25 (53%)	1 (25%)	3 (7%)	4 (9%)	1 (25%)	17 (40%)	18 (38%)
Male high secure prisons												
Frankland	4	27	31	2	17	19	0	1	1	2	9	11
Full Sutton	3	33	36	2	17	19	0	2	2	1	14	15
TOTAL	7	60	67	4 (57%)	34 (57%)	38 (57%)	0 (0%)	3 (5%)	3 (4%)	3 (43%)	23 (38%)	26 (39%)

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
Open prisons												
N/A	–	–	–	–	–	–	–	–	–	–	–	–
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0
Women's prisons												
Drake Hall	1	41	42	1	33	34	0	0	0	0	8	8
TOTAL	1	41	42	1 (100%)	33 (80%)	34 (81%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	8 (20%)	8 (19%)
Children's establishments												
Werrington	9	21	30	5	10	15	2	0	2	2	11	13
TOTAL	9	21	30	5 (56%)	10 (48%)	15 (50%)	2 (22%)	0 (0%)	2 (7%)	2 (22%)	11 (52%)	13 (43%)
PRISON TOTAL	39	300	339	19 (49%)	162 (54%)	181 (53%)	8 (21%)	25 (8%)	33 (10%)	12 (31%)	113 (38%)	125 (37%)

Recommendations achieved in full inspections 2020–21 (continued)

Key: * No previous recommendations

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
STHFs												
Border Force	*	*	*	*	*	*	*	*	*	*	*	*
Migrants arriving in Dover	0	13	13	0	1	1	0	4	4	0	8	8
TOTAL	0	13	13	0 (0%)	1 (8%)	1 (8%)	0 (0%)	4 (31%)	4 (31%)	0 (0%)	8 (62%)	8 (62%)
OVERSEAS ESCORTS												
France / Germany	0	4	4	0	2	2	0	0	0	0	2	2
Sweden / Romania	0	6	6	0	1	1	0	0	0	0	5	5
France / Lithuania	*	*	*	*	*	*	*	*	*	*	*	*
TOTAL	0	10	10	0 (0%)	3 (30%)	3 (30%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	7 (70%)	7 (70%)
COURTS												
Avon, Somerset and Gloucestershire	*	*	*	*	*	*	*	*	*	*	*	*
Derbyshire and Nottinghamshire	4	25	29	1	7	8	0	11	11	3	7	10
Norfolk, Suffolk and Essex	6	71	77	2	25	27	3	35	38	1	11	12
TOTAL	10	96	106	3 (30%)	32 (33%)	35 (33%)	3 (30%)	46 (48%)	49 (46%)	4 (40%)	18 (19%)	22 (21%)

ESTABLISHMENT	RECOMMENDATIONS (excluding recommendations no longer relevant)			ACHIEVED			PARTIALLY ACHIEVED			NOT ACHIEVED		
	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL	Main recommendations	Recommendations	TOTAL
POLICE CUSTODY												
British Transport Police	3	17	20	2	9	11	1	2	3	0	6	6
Leicestershire	4	27	31	2	7	9	1	8	9	1	12	13
TOTAL	7	44	51	4 (57%)	16 (36%)	20 (39%)	2 (29%)	10 (23%)	12 (24%)	1 (14%)	18 (41%)	19 (37%)
OTHER JURISDICTION												
Hydebank Wood	3	38	41	1	26	27	1	4	5	1	8	9
Ash House	4	43	47	0	28	28	1	5	6	3	10	13
TOTAL	7	81	88	1 (14%)	54 (67%)	55 (63%)	2 (29%)	9 (11%)	11 (13%)	4 (57%)	18 (22%)	22 (25%)

Seven

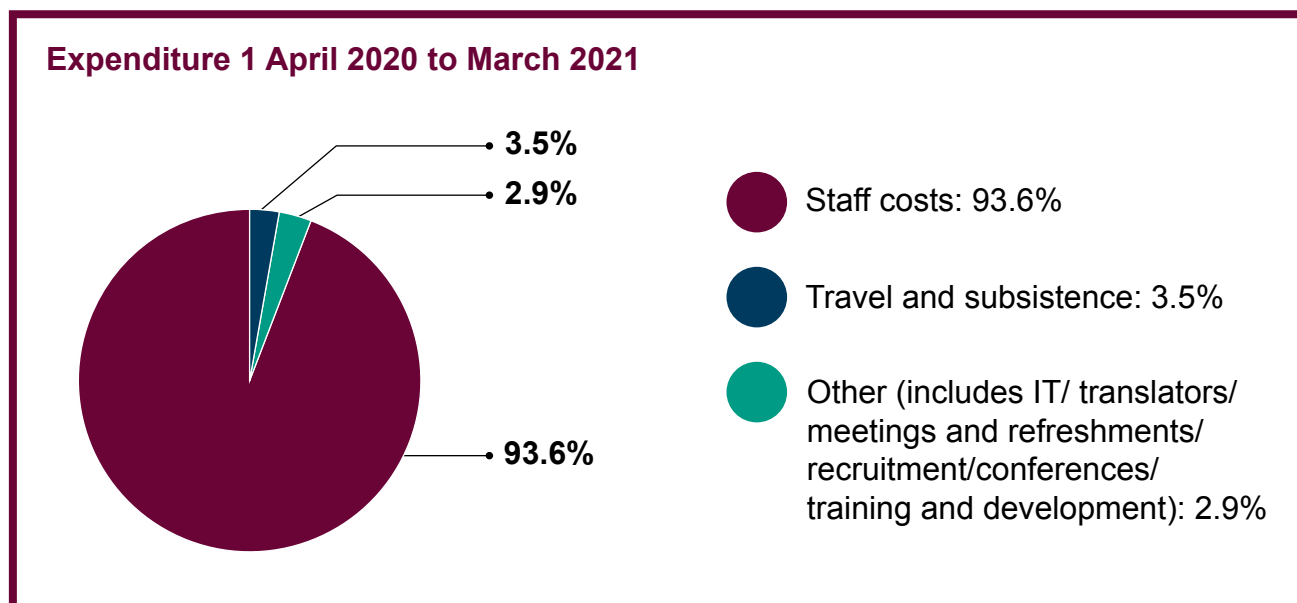
The Inspectorate in 2020–21



Income and expenditure – 1 April 2020 to 31 March 2021

Income	£
MoJ (prisons and court cells)	4,369,000
Home Office (immigration detention)	352,220
Home Office (HMICFRS/police custody)	300,000
Youth Justice Board/Youth Justice Commissioning Team (YJCT) (children's custody)	119,866
Other income (HMI Probation, Prisons and Probation Ombudsman, STC, Ministry of Defence, Border Force)	52,184
Total	5,193,270

Expenditure	£	%
Staff costs Includes staff, fee-paid inspectors, secondees and joint inspection/partner organisation costs, e.g. General Pharmaceutical Council and contribution to secretariat support of the Joint Criminal Justice Inspection Chief Inspectors Group.	4,487,561	93.6%
Travel and subsistence Reduced activities were undertaken in the field due to COVID-19. Regular inspections were suspended at the start of the year, with a revised short scrutiny visit methodology introduced in April and longer scrutiny visits introduced in August to the end of the financial year.	169,823	3.54%
Printing and stationery	11,224	0.23%
Information technology and telecommunications Includes the cost of renewing licenses to software (SPSS and SNAP – used by researchers to process and analyse survey data) and additional equipment required by office-based staff working from home due to COVID-19.	44,358	0.93%
Translators	14,477	0.30%
Training and development	17,904	0.37%
Other costs (including recruitment costs, conferences and professional memberships)	49,107	1.02%
Total	4,794,454	100%



Inspectorate staffing – 1 April 2020 to 31 March 2021

Our staff and fee-paid associates come from a range of professional backgrounds. While many have experience of working in prisons, others have expertise in social work, probation, law, youth justice, health care and drug treatment, social research and policy. Most staff are permanent, but we also take inspectors on loan from HMPPS and other organisations. We engage associates based on their expertise in areas we inspect to enhance our employed staff. Currently, 10 staff are loaned from HMPPS, and their experience and familiarity with current practice are invaluable to our work.

Staff engagement

Every year we gather feedback from our staff. In 2020, we once again participated in the Civil Service People Survey, commissioned by the Cabinet Office. The survey was completed by 68% of HM Inspectorate of Prisons staff and the results indicated a score of 79% on the overall staff engagement index. This repeats our score from 2019 and remains a strong overall result; some nine percentage points higher than even 'high performing units' across the civil service. In 2020 our results around learning and development improved from our 2019 survey (up 13%), a reflection of the work of the Staff Learning and Development Committee created in 2019.

Staff and associates – 1 April 2020 to 31 March 2021

	Charlie Taylor	Chief Inspector
	Martin Lomas	Deputy Chief Inspector
	Barbara Buchanan	Senior Personal Secretary to the Chief Inspector
	Ruth Mostyn-Dignan	Administrative Support Officer to the Deputy Chief Inspector
A Team (adult male prisons)	Sara Pennington	A Team Leader
	Natalie Heeks	Inspector
	Jade Richards	Inspector
	Paul Rowlands	Inspector
	Jonathan Tickner	Inspector
O Team (prisons holding women)	Sandra Fieldhouse	O Team Leader
	Rebecca Stanbury	Inspector
	Darren Wilkinson	Inspector
	Caroline Wright	Inspector
N Team (adult male and young adult prisons)	Deborah Butler	N Team Leader
	Ian Dickens	Inspector
	Alice Oddy	Inspector
	David Owens	Inspector
	Nadia Syed	Inspector

Y Team (establishments holding children)	Angus Jones	Y Team Leader
	David Foot	Inspector
	Angela Johnson	Inspector
	Esra Sari	Inspector
	Donna Ward	Inspector
I Team (immigration detention)	Hindpal Singh Bhui	I Team Leader
	Rebecca Mavin	Inspector
	Tamara Pattinson	Inspector
	Kam Sarai	Inspector
P team (police custody)	Kellie Reeve	Acting P Team Leader
	Jeanette Hall	Inspector
	Fiona Shearlaw	Inspector
Health Services Team	Tania Osborne	Head of Health and Social Care Inspection
	Steve Eley	Health and Social Care Inspector
	Shaun Thomson	Health and Social Care Inspector
Research, Development and Thematics	Catherine Shaw	Head of Research, Development and Thematics
	Rahul Jalil	Senior Research Officer
	Helen Ranns	Senior Research Officer

	Annie Bunce	Research Officer
	Becky Duffield	Research Officer
	Amilcar Johnson	Research Officer
	Alec Martin	Research Officer
	Joe Simmonds	Research Officer
	Charlotte Betts	Research Assistant
	Shannon Sahni	Research Assistant
	Heather Acornley	Research Trainee
	Jed Waghorn	Research Trainee
Secretariat	Jane Boys	Head of Secretariat
	Lesley Young	Head of Finance, HR and Inspection Support
	Umar Farooq	HR and Inspection Support Manager
	Stephen Seago	Finance and Inspection Support Manager
	Tanveer Ali	Inspection Support Officer
	Caroline Fitzgerald	Inspection Support Officer
	Charlie Pym	Inspection Support Officer
	Lucy Gregg	Head of NPM Secretariat
	Rosanna Ellul	Assistant NPM Coordinator

	Jade Glenister	Senior Policy Officer
	Hannah Pittaway	Policy Officer
	John Steele	Chief Communications Officer
	Tamsin Williamson	Publications Manager
	Helen Saunders	Publications and Digital Communications Officer
Fee-paid associates	Anne Clifford	Editor
	Sarah Goodwin	Health Inspector
	Martyn Griffiths	Inspector
	Deri Hughes-Roberts	Inspector
	Keith Humphreys	Inspector
	Maureen Jamieson	Health Inspector
	Martin Kettle	Inspector
	Brenda Kirsch	Editor
	Stephen Oliver-Watts	Inspector
	Adrienne Penfield	Editor
	Yasmin Prabhudas	Editor
	Christopher Rush	Inspector
	Paul Tarbuck	Inspector

Staff and associates who left this reporting year	Peter Clarke	Chief Inspector
	Colin Carroll	Inspector
	Paddy Doyle	Inspector
	Michael Dunkley	Inspector
	Hayley Edwards	Inspector
	Scott Ellis	Inspector
	Sigrid Engelen	Drugs and Alcohol Inspector
	Louise Finer	Head of NPM Secretariat
	Louise Hopper	Head of Secretariat
	Ian Macfadyen	Inspector
	Chloe Moore	Research Trainee
	Alison Perry	Inspector
	Billie Powell	Research Trainee
	Anthony Quinn	Research Officer
	Patricia Taflan	Research Officer

Stakeholder feedback

We conduct an annual online survey of stakeholders to inform our corporate planning process. A link to the questionnaire is distributed to our mailing list of contacts by email and publicised via staff and professional bulletins, a link on our website and Twitter alerts. The 2020 survey which was conducted in November and December 2020 received 171 complete responses.

The 2020 survey included specific questions about HMI Prisons' response to COVID-19. Of those who responded, 60% had viewed the COVID-19 pages on the HMI Prisons website; over 90% of these respondents found the information quite or very useful and over 80% agreed that we had kept stakeholders well informed about our response to the pandemic. More than three-quarters agreed that HMI Prisons 'has continued to fulfil its statutory duty to report accurately, impartially and publicly on the treatment and condition of detainees' during the pandemic. Feedback was also positive about our scrutiny visit reports, with over 90% of those who had looked at one or more of the reports finding them clear, well-structured and useful.

Just under three-quarters of respondents had visited the HMI Prisons website in the previous 12 months, the vast majority doing so once a month or less. The most common reason for visiting the website was to access an HMI Prisons report, cited by 80%.

Over a quarter of survey respondents followed HMI Prisons on Twitter, and more than three-quarters reported that the tweets were either very or quite useful. We established a LinkedIn page during the reporting year, with 9% of survey respondents following HMI Prisons through this route.

In terms of media coverage, around three in five respondents had seen items about HMI Prisons on national TV or in newspapers, and 87% had seen an online news story about the Inspectorate.

Communications

We issued 64 media releases in the year, a reduction from 86 in the previous year and reflecting our switch during the COVID-19 pandemic from a full inspection schedule to fewer scrutiny visits. Our evidence on life in prisons and other places of detention during COVID-19 informed debate across the media and on Twitter, generating regional and national news headlines, and shed light on the cost on prisoner welfare of being locked up for most of the day for many months. In particular, our scrutiny visit report on poor conditions in HMP Erlestoke and our thematic report on the human impact of COVID-19 restrictions both featured prominently in national print and broadcast media coverage. Our release of ‘voiceover’ quotes from prisoners in the thematic – the first time we had done this – was well received, as was our report, with photos, on troubling conditions for the detention of migrants arriving in small boats on the Kent coast.

Work continued throughout the year to improve the accessibility of our website. In the year, our Twitter feed, which at the end of March 2020 had almost 14,000 followers, grew to around 17,000 followers. Our non-inspection work generated some of our most successful tweets: the pandemic restrictions tweet was seen by over 50,000 Twitter users, and tweets about neurodiversity, young adults in custody and women’s expectations were seen over 20,000 times each. Tweets announcing our response to COVID-19 in the spring of 2020 boosted our Twitter engagement rate at the start of the pandemic.

We also launched a LinkedIn account, which by the end of the year had over 900 followers, including many professionals in the prisons sector.

Eight

Appendices



Appendix one

Reports published 1 April 2020 to 31 March 2021

ESTABLISHMENT	DATE PUBLISHED
Nottingham	7 April 2020
Lincoln	15 April 2020
British Transport police custody suites	21 April 2020
Rainsbrook STC	23 April 2020
Werrington	30 April 2020
Frankland	5 May 2020
YOIs holding children SSV (Cookham Wood, Wetherby, Parc)	7 May 2020
Stafford	12 May 2020
Local prisons SSV (Wandsworth, Elmley, Altcourse)	18 May 2020
Training prisons SSV (Coldingley, Portland, Ranby)	22 May 2020
Drake Hall	22 May 2020
Leicestershire police custody suites	28 May 2020
IRCs SSV (Yarl's Wood, Harmondsworth, Brook House, Morton Hall)	2 June 2020
The Verne	3 June 2020
Women's prisons SSV (Foston Hall, Bronzefield, Eastwood Park)	5 June 2020
Hydebank Wood	9 June 2020
Ash House	9 June 2020
Full Sutton	11 June 2020
Long-term high security prisons SSV (Woodhill, Belmarsh, Manchester)	15 June 2020

ESTABLISHMENT	DATE PUBLISHED
Holme House	17 June 2020
Sex offender prisons SSV (Littlehey, Stafford, Rye Hill)	22 June 2020
Border Force STHFs	24 June 2020
Open prisons SSV (Thorn Cross, Ford, Sudbury)	29 June 2020
Avon, Somerset and Gloucestershire court custody	1 July 2020
Category C training prisons SSV (Maidstone, Onley, Brinsford)	3 July 2020
Local prisons SSV (Leeds, Thameside, Winchester)	10 July 2020
Women's prisons SSV (Send, Downview)	17 July 2020
YOIs holding children SSV (Feltham A, Werrington)	27 July 2020
Whitemoor SV	8 September 2020
Preston SV	15 September 2020
Hewell SV	15 September 2020
Erlestoke SV	22 September 2020
Wymott SV	29 September 2020
Whatton SV	29 September 2020
France and Germany escort and removals	2 October 2020
Swansea SV	6 October 2020
Northumberland SV	16 October 2020
Bristol SV	23 October 2020
Detention of migrants arriving in Dover	23 October 2020
Nottinghamshire and Derbyshire court custody	19 November 2020
Sweden and Romania escort and removals	24 November 2020

ESTABLISHMENT	DATE PUBLISHED
Gartree SV	30 October 2020
Dartmoor SV	3 November 2020
Lindholme SV	1 December 2020
Pentonville SV	4 December 2020
Rainsbrook STC assurance visit	7 December 2020
Humber SV	8 December 2020
France and Lithuania escort and removals	11 December 2020
Oakhill STC assurance visit	5 January 2021
Peterborough (men) SV	6 January 2021
Risley SV	12 January 2021
Huntercombe SV	19 January 2021
Rainsbrook STC monitoring visit	19 January 2021
Hindley SV	26 January 2021
Leicester SV	27 January 2021
Norfolk, Suffolk and Essex court custody	12 February 2021
Birmingham SV	16 February 2021
Rainsbrook STC monitoring visit	22 February 2021
Wetherby and Keppel Unit SV	26 February 2021
Lowdham Grange SV	5 March 2021
Long Lartin SV	16 March 2021
Feltham A SV	23 March 2021

Appendix two

Prisoner survey responses: scrutiny visits, 1 July 2020 to 31 March 2021

In this table summary statistics from all adult prisoners surveyed during scrutiny visits between 1 July 2020 and 31 March 2021 are presented.

The data comprise responses from male prisoners in local, training, sex offender and high secure prisons.

		Prisoners surveyed
Number of completed questionnaires returned		3,599
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
2	Are you 25 years of age or younger?	14%
	Are you 50 years of age or older?	18%
3	Do you self-identify in a racial minority group (black, Asian, mixed, other)?	28%
4	Are you a foreign national?	12%
18	Do you have any mental health problems?	52%
	Do you consider yourself to have a disability?	27%
COVID-19 RESTRICTIONS		
5	Do you know what the restrictions are here?	86%
	Have the reasons for the restrictions been explained to you?	84%
	Do you agree the restrictions are necessary?	70%
	Do you feel you have been kept safe from the virus?	62%

		Prisoners surveyed
ON THE WING/HOUSEBLOCK		
6	Do you have enough soap or sanitiser to keep your hands clean?	57%
	Do you have enough clean, suitable clothes for the week?	71%
	Can you shower every day?	88%
	Do you have clean sheets every week?	76%
	Do you get cell cleaning materials every week?	59%
	Are the communal/shared areas of your wing or house block clean?	72%
	Is your cell call bell normally answered within 5 minutes?	48%
	Is it easy for you to make a complaint?	57%
FOOD AND CANTEEN		
7	Is the quality of food good or reasonable?	60%
8	Can you access the canteen/shop if you want to?	71%
RELATIONSHIPS WITH STAFF		
9	Do most staff here treat you with respect?	75%
	Are there any staff you could turn to if you had a problem?	75%
	In the last week, has a member of staff talked to you about how you are getting on?	37%
CONTACT WITH THE OUTSIDE WORLD		
10	Have you had any problems with sending or receiving mail?	44%
	Are you able to use the phone every day, if you have credit?	90%
11	Have you been able to see your family/friends more than once in the last month:	
	In person (prison visit)	4%
	Using video calling	6%
TIME OUT OF CELL		
12	Under the current regime, do you usually spend less than 1 hour out of your cell each day?	40%
	Under the current regime, do you usually spend 6 hours or more out of your cell each day?	9%
13	Are you able to exercise outside every day, if you want to?	82%

		Prisoners surveyed
PURPOSEFUL ACTIVITY		
	Have you been provided with an in-cell activity pack?	60%
14	For those who were provided with an in-cell activity pack:	
	Are these packs helpful?	47%
	In this prison, is it easy to get into the following activities:	
15	Education?	22%
	Vocational or skills training?	12%
	Prison job?	21%
HEALTH CARE		
	Is it easy to see:	
16	Doctor?	21%
	Nurse?	45%
	Dentist?	10%
	Pharmacist?	31%
	Mental health workers?	22%
	Substance misuse workers?	24%
17	Do you think the overall quality of the health services here is good?	36%
OTHER SUPPORT NEEDS		
	Have you been on an ACCT in this prison?	26%
19	For those who have been on an ACCT:	
	Did you feel cared for by staff?	47%
20	Is it easy for you to speak to a Listener if you need to?	32%
ALCOHOL AND DRUGS		
21	Is it easy to get illicit drugs in this prison?	25%
	Is it easy to get alcohol in this prison?	17%

		Prisoners surveyed
SAFETY		
	Have you experienced any types of bullying/victimisation from:	
22	Other prisoners here?	22%
	Staff here?	34%
23	Do you feel unsafe now?	23%
BEHAVIOUR MANAGEMENT		
24	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	52%
PLANNING AND PROGRESSION		
	Do you know what your custody plan objectives or targets are?	63%
25	For those who know their custody plan objectives and targets:	
	Are staff helping you to achieve your objectives or targets?	40%
PREPARATION FOR RELEASE		
	Do you expect to be released in the next 3 months?	36%
26	For those who expect to be released in the next 3 months:	
	Is anybody helping you to prepare for your release?	39%

Prisoner survey responses: STC survey responses 1 July 2020 to 31 March 2021

In this table summary statistics from all STCs surveyed during scrutiny visits between 1 July 2020 and 31 March 2021 are presented.

		Prisoners surveyed
Number of completed questionnaires returned		71
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
2	Are you under 15 years of age?	6%
	Are you aged 18 or over?	1%
3	Are you female?	13%
4	Do you self-identify in a racial minority group (black, Asian, mixed, other)?	58%
5	Are you from a Traveller community?	9%
6	Have you ever been in local authority care?	54%
24	Do you have any mental health problems?	29%
	Do you consider yourself to have a disability?	19%
COVID-19 RESTRICTIONS		
7	Do you know what the restrictions are here?	93%
	Have the reasons for the restrictions been explained to you?	86%
	Do you agree the restrictions are necessary?	60%
	Do you feel you have been kept safe from the virus?	65%

		Prisoners surveyed
ON THE WING/UNIT		
8	Do you have enough soap or sanitiser to keep your hands clean?	63%
	Do you have enough clean, suitable clothes for the week?	93%
	Can you shower every day?	94%
	Do you have clean sheets every week?	79%
	Are the communal/shared areas clean?	67%
	Is your emergency call bell or intercom normally answered within 5 minutes?	69%
	Is it easy for you to make a complaint?	78%
FOOD		
9	Is the food here good or reasonable?	66%
RELATIONSHIPS WITH STAFF		
10	Do you feel cared for by most staff here?	77%
	Do most staff here treat you with respect?	83%
	If you had a problem, are there any staff here you could turn to for help?	84%
	Do staff encourage you to attend education, training or work?	90%
PURPOSEFUL ACTIVITY		
11	Are you doing any of the following activities at the moment:	
	Education?	88%
	Training for a job (vocational training)?	22%
	Paid work?	11%
	Interventions (e.g. offending behaviour programmes)?	25%
	Not doing any of these activities	9%
12	Have you been provided with an in-cell activity pack?	54%
	For those who were provided with an in-cell activity pack: Are these packs helpful?	47%
TIME OUT OF ROOM		
13	Do you usually spend 2 hours or more out of your room each day?	85%
14	Can you spend time outside in the fresh air most days?	68%

		Prisoners surveyed
CONTACT WITH THE OUTSIDE WORLD		
15	Has anyone here helped you to keep in touch with your family and friends?	73%
	Are you able to use the phone every day, if you have credit?	92%
16	Have you been able to see your family and friends more than once in the last month:	
	Visited you here?	15%
	Using video calls?	12%
SAFETY AND SECURITY		
17	Have other young people here ever done any of the following to you?	
	Verbal abuse?	46%
	Threats or intimidation?	23%
	Physical assault?	23%
	Sexual assault?	4%
	Being forced to assault another young person?	7%
	Theft of canteen or property?	9%
	Other bullying or victimisation?	9%
	Young people here have not done any of these things to me	49%
18	If you were being bullied / victimised by other young people here, would you report it?	36%
19	Have staff here ever done any of the following to you?	
	Verbal abuse?	30%
	Threats or intimidation?	14%
	Physical assault?	4%
	Sexual assault?	4%
	Theft of canteen or property?	4%
	Other bullying / victimisation?	5%
Staff here have not done any of these things to me	64%	
20	If you were being bullied / victimised by staff here, would you report it?	53%
21	Do you feel unsafe now?	14%

Prisoners surveyed

HEALTH AND WELL-BEING		
23	Is it easy to see:	
	Doctor?	49%
	Nurse?	79%
	Dentist?	42%
	Mental health worker?	51%
	Substance misuse worker?	53%
BEHAVIOUR MANAGEMENT		
25	Do the rewards or incentives for good behaviour encourage you to behave well?	39%
26	Have you been physically restrained (e.g. MMPR) since you have been here?	47%
27	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room.)	57%
PREPARING TO MOVE ON		
	Do you know what your custody plan objectives or targets are?	58%
28	For those who know their custody plan objectives and targets:	
	Are staff helping you to achieve your objectives or targets?	53%
29	Is anybody here helping you to prepare for when you leave?	49%

Prisoner survey responses: YOI survey responses 1 July 2020 to 31 March 2021

In this table summary statistics from all children's YOIs surveyed during scrutiny visits between 1 July 2020 and 31 March 2021 are presented.

		All YOIs surveyed
Number of completed questionnaires returned		180
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		
2	Are you under 15 years of age?	0%
	Are you aged 18 or over?	20%
4	Do you self-identify in a racial minority group (black, Asian, mixed, other)?	48%
5	Are you from a Traveller community?	9%
6	Have you ever been in local authority care?	53%
24	Do you have any mental health problems?	36%
	Do you consider yourself to have a disability?	11%
COVID-19 RESTRICTIONS		
7	Do you know what the restrictions are here?	90%
	Have the reasons for the restrictions been explained to you?	83%
	Do you agree the restrictions are necessary?	50%
	Do you feel you have been kept safe from the virus?	71%
ON THE WING/UNIT		
8	Do you have enough soap or sanitiser to keep your hands clean?	63%
	Do you have enough clean, suitable clothes for the week?	81%
	Can you shower every day?	92%
	Do you have clean sheets every week?	83%
	Are the communal/shared areas clean?	56%
	Is your emergency call bell or intercom normally answered within 5 minutes?	33%
	Is it easy for you to make a complaint?	51%

All YOIs surveyed

FOOD		
9	Is the food here good or reasonable?	69%
RELATIONSHIPS WITH STAFF		
10	Do you feel cared for by most staff here?	61%
	Do most staff here treat you with respect?	76%
	If you had a problem, are there any staff here you could turn to for help?	66%
	Do staff encourage you to attend education, training or work?	72%
PURPOSEFUL ACTIVITY		
11	Are you doing any of the following activities at the moment:	
	Education?	88%
	Training for a job (vocational training)?	11%
	Paid work?	9%
	Interventions (e.g. offending behaviour programmes)?	21%
	Not doing any of these activities	9%
12	Have you been provided with an in-cell activity pack?	58%
	For those who were provided with an in-cell activity pack: Are these packs helpful?	25%
TIME OUT OF CELL		
13	Do you usually spend 2 hours or more out of your room each day?	42%
14	Can you spend time outside in the fresh air most days?	80%
CONTACT WITH THE OUTSIDE WORLD		
15	Has anyone here helped you to keep in touch with your family and friends?	64%
	Are you able to use the phone every day, if you have credit?	92%
16	Have you been able to see your family and friends more than once in the last month:	
	Visited you here?	6%
	Using video calls?	17%

All YOIs surveyed

SAFETY AND SECURITY		
	Have other children or young people here ever done any of the following to you?	
17	Verbal abuse?	35%
	Threats or intimidation?	19%
	Physical assault?	15%
	Sexual assault?	2%
	Being forced to assault another child or young person?	4%
	Theft of canteen or property?	5%
	Other bullying or victimisation?	4%
	Children or young people here have not done any of these things to me	63%
18	If you were being bullied/victimised by other children or young people here, would you report it?	28%
	Have staff here ever done any of the following to you?	
19	Verbal abuse?	31%
	Threats or intimidation?	17%
	Physical assault?	13%
	Sexual assault?	3%
	Theft of canteen or property?	10%
	Other bullying / victimisation?	10%
	Staff here have not done any of these things to me	64%
20	If you were being bullied / victimised by staff here, would you report it?	50%
21	Do you feel unsafe now?	12%
HEALTH AND WELL-BEING		
	Is it easy to see:	
23	Doctor?	39%
	Nurse?	60%
	Dentist?	20%
	Mental health worker?	47%
	Substance misuse worker?	39%

All YOIs surveyed

BEHAVIOUR MANAGEMENT		
25	Do the rewards or incentives for good behaviour encourage you to behave well?	36%
26	Have you been physically restrained (e.g. MMPR) since you have been here?	60%
27	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room.)	54%
PREPARING TO MOVE ON		
	Do you know what your custody plan objectives or targets are?	43%
28	For those who know their custody plan objectives and targets:	
	Are staff helping you to achieve your objectives or targets?	51%
29	Is anybody here helping you to prepare for when you leave?	29%

Glossary

ACCT

Assessment, care in custody and teamwork (case management for prisoners at risk of suicide or self-harm).

Adult at risk

Under the Care Act 2014, safeguarding duties apply to an adult who: has needs for care and support (whether or not the local authority is meeting any of those needs); and is experiencing, or is at risk of, abuse or neglect; and as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect.

Aerosol generating procedures (AGPs)

Certain medical and patient care activities that can result in the release of airborne particles (aerosols) and a risk of airborne-transmission of infections that are usually only spread by droplet transmission.

Appropriate adults

Independent individuals who provide support to children and vulnerable adults in custody.

Category A

Prisoners on highest category of security risk whose escape would be highly dangerous.

Category B

Prisoners for whom the highest conditions of security are not necessary but for whom escape must be made very difficult.

Category C

Prisoners who cannot be trusted in open conditions who do not have the will or resources to make a determined escape attempt.

Category D

Prisoners who can be reasonably trusted to serve their sentence in open conditions.

Code C (of PACE)

Covers the detention, treatment and questioning of persons by police officers.

CQC

Care Quality Commission.

CRC

Community rehabilitation company. Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The National Probation Service has maintained responsibility for high- and very high-risk offenders.

CSIP

Challenge, support and intervention plan. Used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

Email a prisoner

A scheme that allows families and friends of prisoners to send emails into the prison.

End of custody temporary release scheme

Risk-assessed prisoners who are within two months of their release date can be temporarily released from custody.

HMCTS

Her Majesty's Courts & Tribunals Service.

HMICFRS

HM Inspectorate of Constabulary and Fire & Rescue Services.

HMPPS

Her Majesty's Prison and Probation Service.

IEP

Incentives and earned privileges.

IRC

Immigration removal centre.

IRP

Independent review of progress.

Key workers

Introduced under OmiC, prison officer key workers aim to have regular contact with named prisoners.

Listeners

Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.

MAPPA

Multi-agency public protection arrangements.

Naloxone

Drug to manage substance misuse overdose.

NPM

National Preventive Mechanism.

OASys

Offender assessment system. A framework used by both prisons and probation for assessing the likelihood of reoffending and the risk of harm to others.

Ofsted

Office for Standards in Education, Children's Services and Skills.

OmiC

The offender management in custody model has been implemented in two phases across the closed male prison estate. The first phase entails prison officers undertaking key work sessions with prisoners and was implemented during 2018–19. The second phase, case management, was introduced on 1 October 2019 and is still being rolled out. It established the role of the prison offender manager (POM).

OPCAT

Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment.

PACE

Police and Criminal Evidence Act.

PAVA

Incapacitant spray.

PECS

Prisoner Escort and Custody Services.

POM

Prison offender manager; introduced under OmiC.

Personal protective equipment (PPE)

Safety equipment including masks, aprons and gloves, worn by frontline workers during the COVID-19 pandemic.

PPO

Prisons and Probation Ombudsman.

Protected characteristics

The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Purple Visits

A secure video calling system commissioned by HMPPS to enable prisoners to have visits by video. This system requires users to download an app to their phone or computer. Before a visit can be booked, users must upload valid ID.

Reverse cohort unit (RCU)

Unit where newly arrived prisoners are held in quarantine for 14 days.

ROTL

Release on temporary licence.

Rule 35 (of Detention Centre Rules)

Requires notification to Home Office Immigration and Enforcement if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture.

Shielding

Those who have health conditions that make them vulnerable to infection are held for at least 12 weeks in a shielding unit.

Social care package

A level of personal care to address prisoner needs identified following a social needs assessment undertaken by the local authority (i.e. assistance with washing, bathing, toileting, activities of daily living etc., but not medical care).

Solitary confinement

When detainees are confined alone for 22 hours or more a day without meaningful human contact (United Nations Standard Minimum Rules for the treatment of prisoners. Rule 44).

STC

Secure training centre.

STHF

Short-term holding facility.

UN

Urgent Notification. Where an inspection identifies significant concerns about the treatment and conditions of detainees, the Chief Inspector will write an Urgent Notification to the Secretary of State within seven calendar days with the reasons for concerns and identifying issues that require improvement. The Secretary of State commits to respond publicly to the concerns raised within 28 calendar days.

YOI

Young offender institution.

Website references

HM Inspectorate of Prisons reports, *Expectations* and inspection/scrutiny visit methodology can be found at: www.justiceinspectorates.gov.uk/hmiprisons

HM Prison and Probation Service COVID-19 Official Statistics can be found at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/978109/HMPPS_COVID19_Mar21_Pub_Doc.pdf

HM Prison and Probation Service Safety in custody statistics can be found at: <https://www.gov.uk/government/collections/safety-in-custody-statistics>

Information on the National Preventive Mechanism can be found at: www.nationalpreventivemechanism.org.uk

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