

Report on short scrutiny visits to

Local prisons

by HM Chief Inspector of Prisons

28 April 2020

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Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary in our 'Guide for writing inspection reports', available on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Personal protective equipment (PPE)

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

Reverse cohort unit (RCU)

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

Shielded

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

Short scrutiny visit (SSV)

A new type of HM Inspectorate of Prisons (HMI Prisons) visit in which three similar establishments (for example, young offender institutions or local prisons) are visited. The aim of these visits is not to report on how an establishment meets HMI Prisons' Expectations, as in a regular full inspection, but to give a snapshot of how it is responding to the COVID-19 pandemic and to share any positive practice found.

About this report

- A1 Her Majesty's Inspectorate of Prisons (HMI Prisons) is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.
- A2 All visits 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. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 HMI Prisons normally reports against a wide range of detailed standards, which are listed in our Expectations. Inspection teams of up to 12 people are usually in establishments across two weeks, speaking to prisoners and staff, observing prison life and examining a large amount of documentation and evidence. The COVID-19 pandemic has required a substantial revision of such norms, at least in the short term.
- A4 A detailed briefing document on our new methodology is available on the HMI Prisons website (<https://www.justiceinspectores.gov.uk/hmiprison/2020/03/covid-19-update/>). It discusses the reasons for the actions we are taking, the primacy given to public health considerations and their place within the approach of what we have termed 'short scrutiny visits'. The purpose of our current approach is to:
- fulfil HMI Prisons' statutory duty to report on treatment and conditions effectively, without adding unreasonable burdens to a system currently dealing with unprecedented challenges
 - promote transparency about the response to COVID-19 in places of detention and ensure that lessons can be learned quickly
 - use an adapted methodology which provides effective independent scrutiny while adhering at all times to the 'do no harm' principle. This means that HMI Prisons will not put detainees, prison staff or its own staff at unreasonable risk and will work in line with national public health guidance.
- A5 HMI Prisons recognises that at times of crisis and operational pressure, the risks of both conscious and unintentional mistreatment increase, and external perspective and oversight of closed institutions become even more important than usual. By identifying concerns, we also aim to promote more effective and safer practices in prisons, thereby supporting public health. Our methodology will be reviewed and updated in line with changing circumstances.
- A6 Key characteristics of short scrutiny visits are that only two to three inspectors will attend establishments, including a health inspector. Each visit will take place over the course of a single day, and will focus on a small number of issues which are essential to the care and basic rights of those detained in the current circumstances. These critical areas include: care for the most vulnerable prisoners and the need for meaningful human contact; support for those at risk of self-harm and suicide; hygiene; legal rights; health care; access to fresh air; contact with families, friends and the outside world; and support and risk management for those being released.

- A7 Short scrutiny visits do not allow the exhaustive triangulation of evidence that characterises inspections. However, they do enable us to tell the story of life in prison during the current crisis and comment on the proportionality of the action being taken. Each report will normally encompass three establishments, visited on the same day by different teams. Findings in the report will be presented thematically rather than focusing on individual prisons.
- A8 For more information and updates on our response to the COVID-19 pandemic, see our website: <http://www.justiceinspectorates.gov.uk/hmiprisons/2020/03/covid-19-update/>.

Introduction

This report discusses findings from short scrutiny visits to three local prisons: HMP Wandsworth in south London, HMP Elmley on the Isle of Sheppey and HMP Altcourse (a private prison run by G4S) in Liverpool.

These large and busy prisons present considerable management challenges even in less exceptional times, including overcrowding and, in the case of Wandsworth, 19th-century accommodation. It was a credit to the approach of staff and skilled crisis management by senior managers that all the prisons were stable and prisoners we spoke to were largely supportive of the action that had been taken. Clear and imaginative communication from senior managers to prisoners and staff underpinned these findings. For example, good use was made of the opportunities presented by prison radio and television channels, and one of the prisons had appointed prisoner representatives to reinforce the information being provided.

This level of communication was critical given the extreme restrictions that prisoners were being asked to endure to minimise the spread of COVID-19. The vast majority were locked up for nearly the whole day with usually no more than half an hour out of their cells. We found some examples of even greater restrictions. In one prison, a small number of symptomatic prisoners had been isolated in their cells without any opportunity to come out for a shower or exercise for up to 14 days. A prisoner who had been subject to such restrictions described to us the impact on his mental health and well-being.

More positively, ACCT processes for supporting prisoners at risk of self-harm remained in place at all establishments and it was encouraging that recorded levels of self-harm had either remained the same or slightly reduced at all prisons. We spoke to many isolating prisoners and were pleased that most felt supported by staff.

Management of health care and joint working to manage local outbreaks were effective across all three sites. Access to personal protective equipment (PPE) (see Glossary of terms) was adequate at two sites but HMP Elmley continued to have supply problems for some items. Primary mental health applications had increased and mental health support was being sustained across each prison. Medicines supply and administration continued to be effective following some interim disruption.

Considerable efforts had been made to provide well-designed activity packs to help prisoners to occupy themselves while in their cells. Each prison had also maintained employment for a small number of prisoners, with all the physical and mental health benefits that such occupation can bring. As well as wing workers such as cleaners and servery workers, some workshops were running in each prison with reduced workforces to enable adequate social distancing.

Efforts had been made everywhere to promote a safer environment through rigorous cleaning and social distancing. However, narrow landings and cramped accommodation made social distancing extremely difficult in some parts of each prison. We also saw too many staff were unnecessarily crowding into small offices in some prisons. It was obvious that important messages were not always fully understood or practised.

The loss of visits had had a considerable impact on all prisoners; while in-cell telephones in all the visited prisons were a great help, not enough had yet been done to expand the use of video-calling to better compensate for the loss of face-to-face contact.

Very few prisoners had been released through the early release scheme. While the prisons' populations had all declined slightly, each had received large numbers of recalled prisoners. In two prisons, there was adequate practical support for those being released, but in one there was evidence of many being released without fixed accommodation.

In all the visited establishments, we were impressed by the way that prison managers, staff and prisoners had adapted to the challenges presented by the current crisis. We were also struck by the support that staff had so far received from prisoners who understood the reasons for the extreme restrictions to which they were subject.

Prison managers were starting to turn their minds towards the potentially even greater challenges that lay ahead, of recovery and providing more purposeful and rehabilitative regimes. This series of short scrutiny reports will continue to provide information and analysis that can help prisons to tackle the risks and maximise the opportunities during this process.

Peter Clarke CVO OBE QPM

HM Chief Inspector of Prisons

April 2020

Notable positive practice

- At all the prisons, there had been a good leadership and management response to a fast-changing situation. At Elmley, there was a dedicated COVID-19 team, with key managers seconded in, and frequent operational meetings concerned with matters of safety and security.
- At all prisons, communication with prisoners and staff was good. They spoke positively about the amount of information that they were receiving, for example through daily bulletins, prison radio and television broadcasts and COVID-19 prisoner representatives.
- At Elmley, specific actions had been taken to ensure that prisoners who did not speak fluent English were kept informed about the unfolding situation. They were held on a dedicated wing and were helped by staff who spoke a range of languages.
- At Wandsworth, swift testing and provision of results was now ensuring that prisoners free of COVID-19 were quickly allowed to participate in the restricted regime.
- At all three prisons, governance and oversight of health services had been enhanced with daily commissioner-led telephone conferences with prison health providers.
- At Altcourse, the mental health team had created a well-being room for health and prison staff to take some time out before, during or after stressful situations and/or shifts.
- At Altcourse, health care managers had developed bespoke patient logs which improved oversight of COVID-19 monitoring and were shared with relevant agencies to enhance release arrangements.
- At all prisons, considerable thought had been put into providing good quality in-cell activity packs.
- All prisons had tried to enhance communication with families, for example through the appointment of additional family liaison officers and writing to families.
- At Altcourse, an email system had been established for family and friends to submit song requests to be dedicated to named prisoners on the prison radio. The request line was promoted among prisoners and advertised externally via Twitter.

Section 1. Safety

In this section, we report mainly on the actions taken to promote safety; the treatment of prisoners during arrival and early days; and the support for the most vulnerable prisoners, including those at risk of self-harm.

Actions taken to promote safety

- 1.1** All prisons had acted quickly to implement revised regimes, and staffing levels were sufficient to provide supervision and to facilitate consistent delivery of restricted time out of cell.
- 1.2** At all three prisons we found evidence of positive leadership and a strong focus on communication. In our surveys, the vast majority of staff who responded said they were being kept informed and almost all thought that actions taken to promote safety were proportionate in the circumstances. Elmley held a daily COVID-19 meeting in addition to the morning meeting to ensure focus and coordination. There was a full-time COVID-19 team and key safety meetings were held more frequently.
- 1.3** Prisoners at all establishments understood the reasons for the measures taken and how they reflected what was happening in the community. They spoke positively of the efforts that had been made to inform them of developments. The methods of communication included daily written bulletins from senior managers, the appointment of COVID-19 prisoner representatives, regular broadcasts on prison radio and the use of prison television channels.
- 1.4** Prisons had also taken steps to understand the perspectives of prisoners. A prisoner survey had been carried out at Wandsworth and two at Elmley. Action was taken in response to surveys, such as increasing communication and providing more television channels. The high level of communication and consultation we saw helped to increase the legitimacy of the restrictions among prisoners.
- 1.5** Social distancing was working reasonably effectively in certain contexts such as the well-supervised meal queues and during staff entry into prisons where access to gate areas was generally well controlled. However, adherence to distancing was inconsistent at all prisons and some staff and prisoners were clearly not following guidance. For example, we saw staff needlessly crowded together in some offices and administration areas, and prisoners too close to each other in workshops, or speaking to each other through gaps around cell doors. Some staff and prisoners explained that while they agreed with the principle of distancing they thought it was impossible to implement because of the design of their wings. The narrow Victorian-era prison landings in Wandsworth were especially problematic in this regard. In one prison, managers had considered a one-way system onto wings as a partial solution; this appeared a logical step, but had not yet been tried to establish its value.
- 1.6** All prisons had slightly reduced populations but were still overcrowded. At Elmley, where some cells had three occupants, one of the governor's priorities was to reduce the number of such cells.

Arrival and early days

- 1.7** Each prison had established a reverse cohorting unit (RCU) (see Glossary of terms) and normal reception processes were still being completed, including full safety interviews and health screening. Safety and welfare checks were undertaken and prisoners were given

information about the pandemic. At Altcourse checks were carried out on newly-arrived prisoners every 30 minutes.

- I.8** In each RCU the regimes were comparable to the rest of the prison. However, lack of space meant that prisoners were often sharing cells for 14 days, which created risks for those sharing a cell with anyone who might have arrived with the virus. On one of the RCUs, a prisoner was concerned that some people might be afraid to complain about emerging symptoms because of the constant lock-up that might ensue (see paragraph 2.2). In all prisons, induction had been curtailed but newly-arrived prisoners still received information from staff on a one-to-one basis and information booklets.

Support for the most vulnerable prisoners, including those at risk of self-harm

- I.9** In two prisons self-harm had reduced slightly since the start of the restrictions on 23 March and in the other it had remained at the same level. ACCT processes (case management for prisoners at risk of suicide or self-harm) were still being undertaken in line with requirements and it appeared that more ACCTs were being opened as staff responded to the potential impact of the restricted regimes. Safer custody teams were carrying out additional checks on prisoners considered to be at risk because they were on ACCTs. At Elmley, new ACCT review processes were helping to ensure good engagement with prisoners at risk. All ACCT reviews were now held with a multidisciplinary team in the spacious chapel, which ensured adequate distancing.
- I.10** We were able to speak to a considerable number of isolating prisoners using in-cell phones. They were almost all positive about staff support and the focus on their welfare. This was especially the case for those who were being shielded (see Glossary of terms).
- I.11** Some prisoners in each prison who met the criteria for shielding had declined to move to the shielding units. For example, in Wandsworth 20 prisoners had declined to be shielded, against medical advice. In Elmley, their safety was being supported through separate regime provision, but in the others, they came out of their cells along with others in their cohort.

Section 2. Respect

In this section, we report mainly on living conditions and health care.

Living conditions

- 2.1** Prisoners were being given materials to clean their cells, and at all sites there was a programme of extra cleaning of communal areas, especially entry and exit points, throughout the day. At one prison, there had been intermittent shortages of cleaning materials, and some prisoner cleaners told us they did not have enough gloves to wear when they were deep cleaning high-risk areas.
- 2.2** Daily showers were available to most prisoners (see Purposeful activity section). However, in Wandsworth, symptomatic prisoners had been locked in their cells for up to two weeks with no opportunity to come out for a shower. The prison had taken this decision in consultation with Public Health England, and as a result of the lack of space for a protective isolation unit. The prison's physical limitations therefore had a severe impact on outcomes for some prisoners. At the time of our visit, there were only three symptomatic prisoners and these measures had ended. Overall, the prison had had over 100 symptomatic prisoners.
- 2.3** In one prison, some shower rooms were too dilapidated to be cleaned to a safe standard, and on one wing where the hot water supply could not cope with the current level of demand, gym staff took groups to use the showers in the gymnasium. Soap was not always available to all prisoners in their cells.
- 2.4** There was a large number of foreign national prisoners at Wandsworth, and more than the national average at Elmley; those who were not fluent in English were not as well informed as others about the pandemic arrangements. At Elmley, specific measures had been taken to improve communication, mainly through co-location on one wing of most foreign nationals and by using staff who spoke a variety of languages.
- 2.5** Most prisoners left their cells in cohorts to collect their food. All prisons provided additional food packs. Meals were served with good attention to safety; prisoners queuing in the servery areas maintained social distancing. At Altcourse, it was a major problem that many prisoners did not have a kettle in their cell and their access to hot water was very limited.
- 2.6** Arrangements for weekly purchase of items were continuing, and at all prisons there was provision for prisoners to spend more of their money than the usual weekly limit, although at Altcourse, some basic products had run out in recent weeks.
- 2.7** At Wandsworth, complaints had not been dealt with for two weeks at the start of the restricted regime, when staffing levels had been lower. However, we were told the prison was now up to date with complaints.

Health care

- 2.8** Management oversight of health care was effective across all three sites. Partnerships had been strengthened to manage local outbreaks and daily strategic meetings were held with regional National Health Service England (NHSE) commissioners.

- 2.9** At the time of our visits, outbreak management was good and all sites had improving access to personal protective equipment (PPE) (see Glossary of terms). All three prisons had prisoners being shielded (see Glossary of terms) due to underlying health risks, an induction wing where new arrivals were being kept separate from other prisoners for 14 days to prevent the spread of the virus from outside the prison, and a group of prisoners isolated due to being infected or symptomatic of COVID-19. Wandsworth and Altcourse were actively and effectively managing outbreaks, and both sites had reducing numbers. Elmley had not had any confirmed cases to date. All sites now had access to more testing facilities. At Wandsworth, we saw an example of swift testing and quick provision of results, which allowed prisoners free of COVID-19 to participate in the same regime as others.
- 2.10** Most of the routine health provision, such as external hospital appointments, physiotherapy, podiatry, optometry, dentistry and face-to-face psychosocial interventions, had temporarily ceased in response to the COVID-19 risks. Most service providers had realigned provision to focus on increased coordination of care, oversight and supporting those most at risk to promote well-being.
- 2.11** New arrivals were seen face-to-face and received reception screening assessments. Access arrangements to health provision was unchanged and application forms were triaged by the nurse and risk managed. Consultations with GPs were for urgent cases only. The reduction in GP contact and face-to-face consultations was reflected in the reduced number of secondary care referrals, which was mirrored in the community. Emergency hospital access remained in place and Altcourse benefitted from continued onsite access to X-ray and ultrasound services.
- 2.12** Social care packages had all been maintained at each site, but social care assessment arrangements were either conducted over the phone or had temporarily ceased.
- 2.13** Primary mental health applications had increased due to prisoners' anxieties about their health and regime restrictions, but these were managed creatively to deliver a service such as in-cell assessment forms, work packs and health information sheets. Some specialist mental health interventions, including all group work, had ceased. Those at high risk of deterioration were identified and managed through one-to-one work and regular welfare checks at all prisons. Psychiatry remained in place and mental health transfers had continued.
- 2.14** Substance misuse services continued to provide monitoring and alternative psychosocial interventions.
- 2.15** Medicines supply and administration were now improving after some initial disruption at Elmley and Wandsworth, and included access to basic symptomatic flu medicines. At all prisons, the provision of in-cell medicines had increased following individual risk assessment, and had reduced prisoner visits to the medicines hatches.
- 2.16** Dental requests were managed by the onsite dental team, which included dental triage, prescribing and follow-up letters. At all sites we were told emergency treatment could be accessed through the onsite dentist or through a community dental service.

Section 3. Purposeful activity

In this section we report mainly on time out of cell and access to activities.

- 3.1** The regime in all three sites was limited to exercise and a shower, with the addition of access to the application terminals at Altcourse. In our staff survey, most reported that prisoners were regularly receiving their exercise, showers, phone calls and in-cell activity. At Elmley, prisoners had 30 minutes of exercise and additional time for a shower; at the other two sites, prisoners had to choose whether to use their 30 minutes for exercise or a shower and, at Altcourse, the self-service electronic terminals from which prisoners could access information and request services or support.
- 3.2** At Elmley and on some wings at Wandsworth, there were no showers or exercise at all on one day of the week: this was to enable delivery of shop-bought goods to prisoners and the exchange of clothing and bedding. The prisons had found that this was the only way that everyone could receive the regular regime on one weekend day. At Wandsworth, additional temporary exercise yards had been opened to enable better distancing.
- 3.3** Some prisoners, though far fewer than in normal times, were still doing paid work: at Elmley, over 100 were off their wing each day doing essential work, and at Wandsworth there were 192 workers, about 70 of whom left the wings to work. Extra cleaning teams were also being used to keep wings properly clean. Supervising staff were generally aware of the need to enforce social distancing and ensure hygiene standards in workplaces, although distancing was not always properly observed (see paragraph 1.5). At Altcourse, those arriving during the pandemic period were registered as unemployed and only received an allowance of £2.50 a week, which was insufficient.
- 3.4** At all sites there had been very good attention to providing materials for in-cell activity. At Elmley, a full-time activities team had been established, and a wide range of packs and workbooks were freely available on all wings, with weekly competitions across a range of in-cell activities. Similar arrangements were in place at the other sites. Library books were available to order, and at Wandsworth a small temporary library had been established on each wing. There was limited involvement from the education providers at each prison as their staff were usually no longer in the prisons.
- 3.5** Resources for in-cell workouts were provided by gym staff. At Wandsworth, videos of in-cell exercise routines were shown on the prison TV channel.

Section 4. Rehabilitation and release planning

In this section, we report mainly on contact with children and families, and release planning.

Contact with children and families and the outside world

- 4.1** The suspension of social visits had had a dramatic impact on prisoners who could no longer have face-to-face time with their families and friends. However, all three prisons we visited had in-cell phones. This did not compensate fully for the lack of visits, but they were much appreciated by prisoners. Prisoners also valued the additional £5 phone credit each week and access to additional, free letters. Altcourse had also managed to negotiate a significant reduction in the cost of calls from PIN phones, which was a positive step forward.
- 4.2** All the prisons had been slow to implement video-calling to allow prisoners to keep in touch with their families and friends, which was a significant missed opportunity. While two prisons, Wandsworth and Elmley, had received two handheld tablets, prison managers said that HM Prison and Probation Service (HMPPS) guidance on their use was limited to compassionate cases.
- 4.3** In two of the prisons we visited (Altcourse and Wandsworth) a dedicated telephone line had been established, which enabled family members or friends to make enquiries about the impact of COVID-19 on the regime or request welfare checks on individual prisoners. At Wandsworth, the governor had written to all families to inform them of what was happening in the prison and had given them a number to call with the assurance that an additional welfare check would be carried out on request.
- 4.4** At Altcourse, family members and friends could make requests for songs to be played on the prison radio with a dedication to be read out for individual prisoners, which was a simple but creative idea by prisoners. This was widely promoted, including on Twitter.

Release planning

- 4.5** The offender management unit (OMU) in each prison continued to fulfil the tasks required for sentence management. Inevitably, face-to-face contact between offender managers in the prison, resettlement staff and prisoners was very limited. In Wandsworth and Elmley, the in-cell phone system allowed prison staff to call prisoners. This meant that community rehabilitation company (CRC) or OMU staff could keep prisoners up to date with important information or undertake resettlement interviews by phone. However, this opportunity was rarely taken. The in-cell system at Altcourse was older and did not enable staff to call prisoners, which was a significant gap staff were trying to address.
- 4.6** Contact between offender managers in the prison or in the community and prisoners as they approached release varied between prisons. We spoke to some prisoners who were a few days from release who confirmed they had not had any direct contact.
- 4.7** Public protection procedures were being applied in line with the policy in each of the prisons and we were told that multi-agency public protection arrangements (MAPPA) were operating as normal when considering risk management release planning.

- 4.8** Resettlement assessments and planning for release were limited. In all three prisons, CRC staff allocated to the prison were not seeing prisoners and relied on previous reports and emails from colleagues to develop or review resettlement plans. All prisons had introduced a resettlement questionnaire for prisoners to complete and return but this was no replacement for an actual interview with the prisoner, even by phone or in a meeting that carefully observed social distancing guidelines.
- 4.9** At Altcourse and Elmley, good efforts were made to address accommodation needs. There were systems in place to make referrals and liaise with other agencies about release arrangements. We were told that few men were released homeless from these prisons even if it was clear that for many the only provision was short-term, emergency accommodation that was often found only on the day of release. At Wandsworth, there were longstanding problems with CRC provision and referrals were not being made systematically or promptly to the housing provider. In the previous month, 23 prisoners had been referred through a variety of sources to the housing provider, often too late for them to take meaningful action. Of those who were referred, only two had confirmed temporary accommodation to go to on release.
- 4.10** In one case, at Wandsworth, proactive work by the health care department in liaison with a community housing provider had ensured that temporary accommodation was found for a man who had recently recovered from COVID-19 who would otherwise have been released homeless.
- 4.11** The population of the prisons had not been significantly reduced (see Safety section) and a large number of those arriving were recalled prisoners serving short periods. For example, in the week before our visit, Wandsworth had received 19 prisoners who had been recalled to custody, most serving only seven to 14 days. Only one man across the three prisons had been released under the 'End of Custody Release Scheme'.

Section 5. Appendix

Scrutiny visit team

Hindpal Singh Bhui	Team leader (overall)
Sandra Fieldhouse	Team leader
Martin Kettle	Team leader
David Owens	Inspector
Deri Hughes-Roberts	Inspector
Chris Rush	Inspector
Tania Osborne	Health care inspector
Paul Tarbuck	Health care inspector
Shaun Thomson	Health care inspector