

Report on short scrutiny visits to

Category D open prisons

by HM Chief Inspector of Prisons

9th June 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/>

End of Custody Temporary Release Scheme

A national scheme through which risk-assessed prisoners, who are within two months of their release date, can be temporarily released from custody. See: <https://www.gov.uk/government/publications/covid-19-prison-releases>

FFP3 masks

FFP3 mask Filtering face piece (FFP) masks come in three respirator ratings: FFPI, FFP2 and FFP3. FFP3 offers the wearer the highest level of protection and is recommended for use during outbreaks of SARS, Avian Flu and Coronavirus.

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.

Shielding

Those who 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.

Social distancing

The practice of staying two metres apart from other individuals, recommended by Public Health England as a measure to reduce the transmission of COVID-19.

Telemedicine

The practice of caring for patients remotely when the provider and patient are not physically present with each other.

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.justiceinspectorates.gov.uk/hmiprison/about-hmi-prison/covid-19/short-scrutiny-visits/>). 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 normally encompasses three establishments, visited on the same day by different teams. Findings in the report are 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: <https://www.justiceinspectorates.gov.uk/hmiprisons/about-hmi-prisons/covid-19/>.

Introduction

This report discusses findings from short scrutiny visits to HMP/YOI Thorn Cross, HMP Ford and HMP Sudbury, three open prisons holding category D prisoners. Many of these prisoners will have worked their way down the prison security categories and will be coming to the end of their sentence.

The report highlights the challenges of running open prisons safely during the COVID-19 pandemic. Release on temporary licence (ROTL) is a key focus of open prisons and is of great importance to effective resettlement back into the community. Agreed, planned and monitored periods of ROTL aim to enable prisoners to undertake work, education or training in the community, maintain contact with their family or significant people in their lives and access community services and support. ROTL opportunities were suspended at the three prisons on 23 March 2020, except for prisoners who were designated essential workers (prisoners who have jobs in the community that are designated key worker roles).

The suspension of ROTL was necessary at the start of the restricted regime to minimise the spread of COVID-19, but 11 weeks later we found a sense among prisoners that the establishments had lost their purpose. Many prisoners had worked for years to gain the opportunity to move to open conditions, and evidence a reduction in their risk of reoffending and build or re-build ties with family and the community; others had been working out in the community for some time and had begun to build a new life even before release. Prisoners felt the loss of opportunity keenly and levels of frustration were high. Most understood the need for the restrictions, but were anxious to know when they would be relaxed in line with the lifting of some restrictions in the community.

There were variations in the identification of essential workers between the sites, which resulted in very different outcomes for prisoners. At Ford and Sudbury, a limited number of prisoners had been accepted as essential workers and continued to attend work in the community, but at Thorn Cross nobody had been deemed an essential worker. In addition, the loosening of restrictions in the community meant that people who could not work from home could travel to their place of employment, but the restrictions in prison had not changed. We spoke to some prisoners at Thorn Cross who had lost or were at risk of losing their job, which was very concerning.

There was a striking variation between the sites on measures in place to limit the risk of infection. At each site, prisoners lived together in 'households' made up of others from the same house unit. Social distancing procedures were clear at each prison and included separate outdoor exercise routes for prisoners in the same household. Distancing in house units with narrow corridors was difficult for staff, and at Thorn Cross the external doors to the house units were locked for much of the day with prisoners only allowed outside at their designated exercise times, which was at odds with the ethos of an open prison and not defensible. At Ford and Sudbury prisoners continued to enjoy the freedom of an open prison and were allowed out of their unit at any time until the evening curfew, as long as they adhered to the social distancing rules.

New arrivals were managed safely at each of the prisons and support in the early days was adequate. Prisoners who were most vulnerable to self-harm, isolation or well-being issues within each prison were supported well. Living conditions were reasonable and the delivery of additional temporary accommodation would enable all prisoners to have a single room.

Health care services remained curtailed but some clinics were now restarting. Ford, however, had a long waiting list for emergency dental treatment. Face-to-face support for mental health and substance misuse problems, including drug recovery work, continued and access was good.

Almost all education had stopped and most workshops were closed, which left prisoners with little to do during the day, but some steps had been taken to provide some access to PE activity and library books or DVDs.

Social visits and ROTL aimed at promoting family ties had been suspended which deeply affected prisoners. Steps had been taken to enable prisoners to keep in touch with family and friends, but they did not compensate for the lack of face-to-face contact. The rollout of video calling across the estate had not started but two of the prisons had developed creative ways in which prisoners could use their own mobile phone to keep in touch with their family through video calling. Core offender management and resettlement tasks were being completed but largely without face-to-face contact with the prisoners. Many prisoners said they felt unable to achieve their sentence plan targets.

This report notes the successful action taken to prevent the spread of COVID-19. It also highlights inconsistencies between prisons and the significant impact that the lack of ROTL is having on prisoners held in open prisons.

Peter Clarke CVO OBE QPM

HM Chief Inspector of Prisons

June 2020

Notable positive practice

- At Thorn Cross new arrivals were admitted onto the reverse cohorting unit (RCU, see Glossary of terms) rather than going through the reception unit and all necessary processes were undertaken on the house unit.
- A question and answer box had been installed in the dining hall area at Sudbury, and answers to the prisoner queries submitted were circulated to all prisoners weekly.
- Ford had undertaken site visits to release on temporary licence (ROTL) employers to assess infection control arrangements in anticipation of reduced restrictions.
- At Thorn Cross a prison shop had been opened in addition to the DHL (the provider of canteen goods in most prisons) provision so that prisoners could buy additional items that had been in short supply from DHL.
- Prisoners at Ford and Thorn Cross had supervised access to their own mobile phones to make telephone and video calls to family members.
- At Sudbury prisoners could call the family engagement worker directly to seek help and advice and at Ford the family engagement team remained active in the prison to support prisoners with family and relationship issues.

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 The management teams at all three prisons had responded well to the crisis and had focused on the risks and challenges during this period. However, we identified inconsistencies in practice between the sites.
- 1.2 There was regular ongoing communication to prisoners at all the sites. At Sudbury, for example, there had been daily briefings to staff and now a weekly briefing to prisoners, and information was provided through the local WayOut TV channel. The introduction of cascaded oral briefings to staff had been helpful. A question and answer box had been installed in the dining hall area and answers to the prisoner queries submitted were circulated to all prisoners weekly. At Thorn Cross a committee met twice a week to consult with prisoners and provide updates. At all sites, a lack of information about the reintroduction of social visits and release on temporary licence (ROTL) were the main frustrations among prisoners.
- 1.3 Our staff surveys showed most staff to be confident in the measures taken to keep them and prisoners safe. In our survey at each site the majority 'strongly agreed' or 'somewhat agreed' that reasonable steps were being taken to keep them safe. A still higher proportion of staff at each site strongly or somewhat agreed that reasonable steps were being taken to keep prisoners safe.
- 1.4 At Sudbury, after one death in the first week of April, there had been no positive cases of COVID-19 among prisoners for almost two months. At Ford there had been four symptomatic prisoners, one of whom had tested positive for COVID-19, but there was no evidence of further onward transmission of the virus. Two members of staff had tested positive for the virus since the start of the restricted regime. At Thorn Cross, no prisoners had tested positive for the virus, but one member of staff had tested positive very recently.
- 1.5 There was a striking variation between the sites on measures to limit the risk of infection between individuals and between the households formed by individual living units. At Thorn Cross the external doors to the house units were locked for much of the day to prevent prisoners from associating with other households. It also meant that prisoners from the same household were unable to sit outside their own unit. This was not defensible for an open prison. At Ford there were appropriate measures to restrict prisoner interactions within much smaller household groups of up to 20 prisoners, while at Sudbury there was increased staff supervision but no systematic attempt to keep household groups apart, except for specific activities such as gym, meal collection and administration of medication.
- 1.6 It was difficult to ensure social distancing among staff and prisoners in an open prison site, particularly in the narrow corridors on some of the residential units. At Thorn Cross we saw some staff not applying the guidance during our visit. At Ford, staff generally adhered well to social distancing, but we saw some prisoners clustered in outside areas and it was not always clear whether they were from the same household. At Sudbury, except for one or two formal settings such as meal queues and canteen collection, we saw little enforcement of social distancing among prisoners.

Arrival and early days

- I.7** Prisoners arriving at the three sites were managed safely. The reverse cohorting units (RCUs, see Glossary of terms) were working well and processes on arrival were comprehensive and appropriately focused on risk. These included health care screening and an interview in private to assess safety issues. At Thorn Cross, new arrivals went straight onto the RCU rather than going through the small reception unit, which supported infection control. All reception processes were undertaken on the RCU and the unit provided unlimited access to the open air.
- I.8** Since lockdown began in March there had been virtually no new arrivals at Sudbury. New receptions had recently resumed, and good arrangements were in place for them to be isolated for 14 days at the sending establishment before departure, for pre-arrival screening and for the provision of advance information to the prisoner. At each site, prisoners still received an induction.

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

- I.9** Levels of self-harm remained low in the three sites. Almost all staff responding to our survey said that vulnerable prisoners were being well cared for and we found good support at each site. Thorn Cross and Sudbury had started to identify prisoners who had been on an assessment, care in custody and teamwork review (ACCT) in the last 18 months so that they could be offered additional support. At Ford, in the week prior to our visit three prisoners had been placed on an ACCT, which was more than usual. The lack of access to ROTL was a factor in two of these.
- I.10** Prisoners needing to shield due to underlying health conditions were well supported at each site. At Thorn Cross the two shielding prisoners lived on a general house unit but arrangements were in place for them to undertake activities separately to others.
- I.11** The three prisons were reasonably calm, and there was little visible impact of the current situation on order and control, except that at Ford there had been an increase in drug finds. There were potential risks associated with debt, which may have contributed to the small number of prisoner assaults at Ford. At Sudbury and Thorn Cross there was no evidence of deterioration in security or order. There had been no absconds from Sudbury during the COVID-19 period, and there had been no visible change in the normally very low levels of violence, nor in the rate of returns to closed conditions at any of the sites. This was a good outcome, in view of the widespread sense of frustration at the lack of opportunities to achieve temporary release or to receive visits.

Section 2. Respect

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

Living conditions

- 2.1** In all three prisons, staffing levels were sufficient and staff-prisoner relationships were generally positive, although some prisoners in Sudbury reported some negative relationships with staff. Personal officer time with prisoners had not been consistently maintained during the restricted regime despite a higher level of need among prisoners. In Thorn Cross, many prisoners we spoke to said that formal contact under the personal officer scheme was not happening.
- 2.2** Not all prisoners had a single bedroom and many had to share with one other prisoner. In Sudbury about 225 men were sharing and, at Ford, this included some accommodated in the reverse cohorting unit (RCU, see Glossary of terms). New temporary accommodation was being installed at all three prisons. This new accommodation provided decent, single bedrooms with a shower and toilet, but it did not include any communal facilities such as an association room or a servery.
- 2.3** In all three prisons, access to basic facilities was good and rooms and communal areas were clean. However, at Thorn Cross and Sudbury we were not convinced that additional cleaning needed due to COVID-19 was being undertaken regularly on every house unit. At Ford, prisoners had not had access to laundry facilities on their units since before the pandemic and had to hand wash their personal clothing in a bowl.
- 2.4** At all three sites, prisoners had good access to showers and toiletries were in good supply. At Sudbury prisoners reported shortages of hand washing gel and sanitiser earlier in the lockdown period, which had since been rectified. At Thorn Cross, a bar of soap was provided at the entrance to one of the house units for hand washing which was not as effective as hand washing gel in preventing infection.
- 2.5** At Ford, most prisoners we spoke to were very critical of both the quality and quantity of the food. At Sudbury and Thorn Cross, prisoners we spoke to were positive about the general quality of the food. However, at Sudbury, prisoners reported occasions at weekends when food had run short by the final sitting, and that daily additional food packs were not always given out.
- 2.6** Prisoners could purchase items through the DHL canteen and systems had been maintained at each prison. At Thorn Cross, in addition to the canteen provision, an onsite shop enabled prisoners to buy items that had recently been in short supply through DHL, such as pasta.
- 2.7** Corporate worship and classes had been suspended since the start of the restricted regime, but the chaplaincy at each prison continued to provide pastoral support and festivals such as Ramadan were observed as far as possible. It was positive that the chaplaincy team at Ford was providing outdoor meditation sessions and was in the process of resuming a programme of activities for prisoners of different faiths. At Sudbury and Ford, a good range of faith packs and materials was available in the dining hall for prisoners to take to their rooms.

Health care

- 2.8** Support for health care providers at Ford, Sudbury and Thorn Cross by the NHS service commissioners and Public Health England was good. Partnership working between the prisons and the respective health and substance misuse providers was effective. The services were responsive to the health care needs of prisoners.
- 2.9** Reception health screening was enhanced with additional COVID-19 questions and most patients we spoke to were happy with their care. At Ford there were some inconsistencies in the use of personal protective equipment (PPE, see Glossary of terms) during assessments. Accessible nursing and medical triage arrangements were in place with patients often being seen face-to-face. Medical arrangements for isolating or shielding prisoners were satisfactory.
- 2.10** Routine primary care services were curtailed early on in the pandemic although the prisons continued to ensure good access to urgent hospital care, and to social care. At Ford and Thorn Cross several routine health clinics had now restarted such as asthma, diabetic reviews and immunisations, and Sudbury was planning to reintroduce similar services from the week after our visit.
- 2.11** Infection control measures in the respective health centres were robust and at Thorn Cross an officer was assigned to the waiting area to promote social distancing. Appropriate additional PPE had been added to health emergency resuscitation bags, though at Ford and Thorn Cross insufficient staff had been face-fit tested for FFP3 masks (see Glossary of terms), which created unnecessary risks. At Sudbury the prison had deployed PPE grab bags for officers to use in escorts or emergencies.
- 2.12** Routine dental services, as in the community, had ceased during the emergency. However weekly dental triage was available at Sudbury and Thorn Cross, and emergency dentistry was available on site at Thorn Cross. At Ford dental service providers had not been in the prison since mid-March though were now offering limited telephone advice to health staff on treating those in most distress. This had resulted in 42 dental applicants waiting to be triaged, many of whom indicated they had dental pain, with no pathway for emergency treatment.
- 2.13** Several mental health and substance misuse group treatments had been curtailed because of the lockdown. However, the services were responsive and access was good, with face-to-face support provided as necessary and monitoring of the most vulnerable in place. Counselling remained available at Ford and Thorn Cross and psychiatrists were regularly available at Thorn Cross and Sudbury. Peer drug recovery workers continued to provide valued mutual aid in the prisons.
- 2.14** The COVID-19 emergency had not affected the supply and administration of medicines at the prisons, including opiate substitution therapy. However, at Ford a recent change of supplier had created a slower process for acquiring medicines, which was being closely monitored to ensure that patients received their medicines as prescribed.

Section 3. Purposeful activity

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

- 3.1** Most release on temporary licence (ROTL) had been suspended since 23 March with the exception of those designated as essential workers. The number of prisoners in external paid employment had been reduced significantly at Ford and Sudbury and had stopped completely at Thorn Cross.
- 3.2** The three prisons had inconsistent criteria for what constituted essential work, which was hard to explain. In Thorn Cross, no prisoner had been designated an essential worker while at the other two sites the recognition of essential worker roles was much more flexible and, as a result, some prisoners were able to continue working throughout the restricted regime. At Sudbury, at the beginning of the lockdown period 97 prisoners deemed to be essential workers had continued in external paid employment, but this had reduced to 35 by the time of our visit.
- 3.3** A further issue concerning ROTL for paid employment was that restrictions in prison had diverged from restrictions in the community, leading to potentially disproportionate outcomes such as the loss of employment placements. For those in an open prison this would be a significant barrier to their successful resettlement and, for some, could also have a direct impact on their family life. We spoke to one prisoner at Thorn Cross who had already lost his job and several others who had employment in a fast food business and were at risk of losing their jobs.
- 3.4** Managers at Ford and Sudbury were planning for the relaxation of ROTL restrictions. This included liaising with employers and undertaking site visits to ensure appropriate distancing and hygiene arrangements were in place.
- 3.5** All three prisons maintained employment in key roles within the prison such as kitchen work, gardening and peer support. Sudbury employed up to 86 men in such roles. Almost all education had been suspended since 23 March and most workshops were closed at the time of our visit. Written education packs were provided as an alternative to face-to-face classes.
- 3.6** In all, the restrictions left the majority of prisoners without any work, education or training. Prisoners across the three sites, including new arrivals, received a minimum weekly pay but this varied in amount: prisoners at Thorn Cross received a minimum of £15, while those at Ford received £13.50 as a minimum wage.
- 3.7** Although no prisoners were locked in their rooms, there were significant inconsistencies in the regime offered by the three prisons. At Sudbury, prisoners could access the open air at any time throughout the day. At Thorn Cross and Ford, most prisoners had scheduled periods of exercise for about three hours or more during the day and evening. Outside these periods, most prisoners at Ford were allowed out of their house units to associate with others from their household in the immediate vicinity of the unit, as long as they maintained social distance from staff and prisoners not in their household. However, prisoners at Thorn Cross were not allowed off the unit outside of exercise hours, even though it was more difficult to social distance while on the units as the corridors were very narrow.
- 3.8** The gyms remained closed in all three prisons. Ford and Sudbury had recently provided an excellent outdoor gym, which included weights and cardiovascular equipment. Provision was more limited at Thorn Cross, which had introduced structured outdoor sessions on the

sports field, but without exercise equipment. Team sports, even within households, were prohibited at Thorn Cross.

- 3.9** The libraries were closed but each site had put arrangements in place for prisoners to access a small range of books and DVDs on their house units or request specific titles.
- 3.10** A variety of education and activity packs were available in all three prisons. In Sudbury, an additional 10 TV channels had been provided during the lockdown period and at Thorn Cross prisoners could buy digital TV boxes to increase the range of channels.

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** Social visits to the prison by family and friends had been suspended in line with national guidance and the introduction of the restricted regime. Releasing prisoners on temporary licence to meet their family, go home for the day or stay overnight had also been suspended. Both measures were necessary but were having an enormous impact on prisoners. This and the fact that the measures had continued for so long was causing obvious distress for those at the three prisons.
- 4.2** Each prison had taken steps to try to alleviate the impact caused by the lack of visits and release on temporary licence (ROTL). An additional weekly £5 telephone credit was given to each prisoner and there was no limit on the number of letters that they could send. The 'email a prisoner' scheme enables family and friends to contact a prisoner and this was continuing. At Ford the family engagement team remained proactive within the prison and at Sudbury prisoners could telephone the family workers directly for advice and support.
- 4.3** The rollout of the HM Prison and Probation Service (HMPPS)-led video calling system across the three prisons had not yet started and the timescales for this were unknown. Each prison had been given two tablets but the use of these for video calling was limited to virtual attendance at a funeral or speaking to a terminally ill relative. The reasons for such a restrictive use were unclear.
- 4.4** At Ford and Thorn Cross a creative scheme had been introduced to promote contact with family and friends in the absence of a national video calling system. Prisoners with a mobile phone in their stored property or those that could get one sent in could book a slot in the visits hall to contact their family and friends using the mobile. This also allowed video calling. A risk assessment was carried out prior to approval and the visits hall had been rearranged with several small tables spread out across the space. Prisoners could store their phone in a locker which also contained a charging point. Slots of about 15 minutes were offered at Thorn Cross but these were extended when time permitted. Thirty-five men were regularly accessing this facility.

Release planning

- 4.5** The population held at each of the prisons included a significant proportion of prisoners who presented a high risk of harm to others and those serving indeterminate sentences. The offender management unit (OMU) at each prison continued to complete the core processes such as release on temporary licence (ROTL) risk assessments, parole reports and home detention curfew (HDC) assessments. However, most tasks were completed without a face-to-face interview with the prisoner and were sometimes only based on information gathering from records, which was far more limited than prisoners would normally experience or expect.
- 4.6** Few probation officers had been on site since the start of the restricted regime and many of the prison officer offender supervisors had been redeployed to operational duties across the

prison. This and the fact that many probation officers had been instructed by their employer not to have face-to-face contact even when on site left prisoners at Thorn Cross and Ford feeling that they were not able to receive the help and support they needed. At Thorn Cross we were told that prisoners were not allowed to go to the OMU building to seek advice and the weekly drop-in surgeries had stopped. Prisoners we spoke to said they had not had any contact with their offender supervisor for the last couple of months and many felt their sentence plan targets and their progression were being neglected during the restricted regime.

- 4.7** Public protection remained a high priority at each prison, which was necessary given the risk of harm to others some prisoners posed. We were told that all public protection measures had been maintained during the restricted regime and that ROTL risk assessments were up to date.
- 4.8** Resettlement staff were not providing face-to-face contact with prisoners. Ford had introduced monthly multi-disciplinary release planning meetings which was a good idea. But reviews of resettlement plans were still being done without an interview with the prisoner which undermined the process. Despite efforts to find prisoners accommodation for release, too many only had very temporary places to go to such as a hostel or a bed and breakfast.
- 4.9** Only a small number of prisoners had been released under the End of Custody Temporary Release Scheme (see Glossary of terms) and we were told that there were delays with HMPPS responding to applications from prisons.

Section 5. Appendix

Scrutiny visit team

Sandra Fieldhouse	Team leader
Hayley Edwards	Inspector
Deri Hughes-Roberts	Inspector
Martin Kettle	Inspector
David Owens	Inspector
Chris Rush	Inspector
Nadia Syed	Inspector
Tania Osborne	Health and social care inspector
Paul Tarbuck	Health and social care inspector
Shaun Thomson	Health and social care inspector