



Annual Report of the Independent Monitoring Board at HMP Rye Hill

**For reporting year
1 April 2024 to 31 March 2025**

Published August 2025



Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	3
3. Key points	4
Evidence sections 4 – 7	
4. Safety	6
5. Fair and humane treatment	7
6. Health and wellbeing	10
7. Progression and resettlement	13
The work of the IMB	
Board statistics	15
Applications to the IMB	16
Annex A	
Response to the last report	17
Annex B	
Service providers	19
Annex C	
Population statistics	19

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Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

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

2. Description of the establishment

HMP Rye Hill is a privately run prison for men, near Rugby, in Warwickshire. It opened in January 2001 and was operated by Group 4 Falck/GSL on a 25-year contract to the Home Office. In May 2008, GSL was acquired by G4S, which took over the running of the prison.

The premises are purpose built, with ten residential units, with a certified normal accommodation (the number of prisoners a prison can hold without being crowded) of 600¹, an operational capacity (the maximum number of prisoners that can be held without serious risk to safety, security, good order and the proper running of the planned regime), of 625 and a maximum capacity of 664. The prison is still in the process of completing an expansion. The prison provides additional operational spaces, bringing it to maximum capacity, with a population of 840 at the end of the reporting year. The handover of the new accommodation blocks is underway but at the end of the reporting year is not completed. The maximum capacity of the prison will be 1122 once the expansion work has been completed.

During the year the prison has changed from a category B training prison to a category C training prison (which holds those whose escape risk is considered low but who cannot be trusted in open conditions) for prisoners convicted of a sexual offence.

¹ Figures included in this report are local management information. They reflect the prison's position at the time of reporting but may be subject to change following further validation and therefore may not always tally with Official Statistics later published by the Ministry of Justice.

3. Key points

3.1 Main findings

Safety

- Admissions remained relatively stable for most of the reporting period at 14 per month, except for March 2025, where the number increased significantly to 157 as a result of the prison expansion.
- There were five deaths in custody, all apparently from natural causes. One of these was a sudden death, but in the case of the other four, applications were being made for compassionate release - only one of these was completed, which was rejected. The remaining three were not finalised prior to death, due to complexities of the cases and possibly likely as a result of the requirement for a doctor to specify that death would occur within three months.
- The number of violent incidents has fallen considerably (from 43 down to 27). Self-harm incidents have also been reduced (from 343 to 235).
- The number of illicit items found remains very low, but with a small increase of positive drugs tests for non-prescription drugs.

Fair and humane treatment

- The expansion and recategorisation of the prison has been handled well, with the focus being on keeping the population stabilised.
- The use of the care and separation unit (CSU, for segregating prisoners) remains proportionally low, even with the increase as a result of positive body scans.
- The use of Prisoner Led Initiatives (PLI) has been supported to grow; these appear positive and prisoners appear keen to take up available places and support the community ethos within the prison.
- Key worker sessions remain high, with 85% attendance and all prisoners having at least one session per month and a majority having two. Communication appears to be good and supports the maintenance of prisoner/staff relationships.

Health and wellbeing

- There have been significant changes to both the personnel and the structure of healthcare in the past year. The healthcare team was due to operate from a new building in the following reporting year, with additional clinic rooms to become available in June 2025.
- The healthcare team has streamlined their services by establishing three Integrated Care Pathways and these appear to be having a positive impact on prisoner patients. Patient complements of healthcare average 14.6 per month against complaints 5.1 per month and concerns 5.4 per month. The IMB has received fewer applications with clinical care concerns in the past year than previously.
- A CQC review in September 2024 rated the healthcare department as outstanding.
- As in previous years the demand for hospital outpatient appointments remains high, outstripping the availability of escorts. However, the department has been creative in discussing availability of appointments with hospital administrators on a weekly basis and is bringing a number of services into the prison so that

- prisoners can be screened on site.
- Even with an increase in numbers over the past year the number of prisoners under the care of the mental health team has remained stable. A neurodiversity team established in 2024 is currently serving 46 prisoners with learning disability, autism and attention deficit hyperactivity disorder (ADHD), and on 11 February the prison held a Neurodiversity Awareness Day well attended by prisoners.
- The flow of information between the healthcare department and prisoners and the IMB has improved, with monthly statistics made available to the IMB.

Progression and resettlement

- Over the course of the reporting year, all category B prisoners were either re-categorised to category C, released or transferred. This means the entire prison population is category C at the end of the reporting year. Given the small number of transfers, this is a remarkable achievement.
- Education attendance and successful course completions have remained very good, with an overall achievement rate of 86%.
- There continues to be a large number of enrichment opportunities at Rye Hill that are varied and engaging. These included a neurodiversity day, TEDx talks events, festival of arts & literature, British values day, employability event, university guest seminars, Black History Month and a mental health awareness event.
- The numbers of prisoners receiving contact from family or friends has remained consistent throughout the year at about 40%. The use of video visits has continued to make it easier for contact to be maintained. This has increased year on year.
- Clearly some exceptional and intensive one-to-one work is being done with some imprisonment for public protection (IPP) prisoners that is making a real difference to their 'progress'. However, it cannot be overlooked that there are many others who feel they are not making progress, sometimes through their own lack of interest or understanding of what is possible.
- There were 67 direct releases, an increase on last year's figures. This was anticipated in our previous year's report.

3.2 Main areas for development

TO THE MINISTER

- The Board remains concerned that there is no centrally directed, long-term solution to the injustice of the IPP sentence and its impact on the mental health and wellbeing of affected prisoners. Despite the excellent internal work at HMP Rye Hill, the numbers have stayed the same as last year. Will the Minister be revisiting the recommendations from the select committee?
- The Board is interested to see what initiatives the government is able to facilitate to enable prisons that hold prisoners convicted of sexual offences (PCoSOs) to build meaningful national partnerships with employers and charities. It is also interested in the actions the government can take to encourage appropriate employment opportunities on release.

TO THE PRISON SERVICE

- The Board remains concerned that the process for compassionate release remains unnecessarily difficult and despite the answer given to the previous report, it has remained the situation that three out of four applications were not

completed and therefore not considered. Simple changes to allow someone other than the consultant to confirm the terminal diagnosis and to remove the requirement to wait until there is only three months left to live would enable individual decisions to be made.

- Given the ageing population at establishments such as HMP Rye Hill, can consideration be given to increasing the staff available, to avoid the need to ration hospital escorts? As this is likely to be a funding issue can the metric be reviewed and amendments made if necessary?

TO THE GOVERNOR

- The Board has no areas for development that it wishes to highlight within the reporting period. The expansion of the prison had only just begun in earnest at the end of the reporting period, but the support of category B prisoners in recategorisation to category C, with very few being transferred to other establishments, has been exceptional.
- Significant work has been undertaken around supporting prisoners with neurodiverse challenges. The Board would welcome sight of any strategies for improving this area of work.
- The property that goes missing at times contains sensitive documentation relating to the prisoner's index offence. Can you comment on what steps have been and are being taken to address this?

3.3 Response to the last report

Please see annex A.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

The prison has remained full during the reporting year, with around 14 admissions a month to replace released prisoners and prisoners who have moved within the prison estate, including those category B prisoners that needed to move establishments. As the expanded prison became available, 157 admissions took place in March.

4.2 Suicide and self-harm, deaths in custody

There were five deaths in custody in the reporting year. All were apparently from natural causes. Minor recommendations were made to the Head of Healthcare, but these were not related to the deaths. One was a sudden death. In all other cases, the process of compiling the paperwork for early release on compassionate grounds had begun. One application was rejected but the other three were not finalised prior to death. It remains a concern that in three of the four cases, the paperwork hadn't been submitted before death and it would appear that the requirement of a doctor to specify that death would occur within a three month window needs some consideration.

A total of 169 assessment, care in custody and teamwork (ACCT) plans, used to support prisoners who are at risk of self-harm and suicide, were opened during the year, which is a decrease from the previous year's total of 205 (which was considerably higher than the 129 for 2022-2023).

There were 235 incidences of self-harm during the reporting period, which is a decrease from the previous reporting period of 343 (and still lower than the 2022-23 period of 246). There were four serious acts of self-harm (all overdoses of medication); all of which required outside hospital attendance.

4.3 Violence and violence reduction, self-isolation

The number of acts of violence is very low and has reduced from the previous reporting period - 27 down from 43. There were no men who chose to self-isolate during the reporting period.

4.4 Use of Force

Incidences of use of force (UoF) have reduced considerably - with a total of 74 in the reporting period (down from 181 the previous year and 145 the year prior to that). Of the 74, 38 were spontaneous. Incidents were either recorded on body worn video cameras (BWVCs) or via CCTV, which is reviewed weekly by the UoF Committee.

4.5 Preventing illicit items

Positive mandatory drug test (MDT) results remain very low at just 1.84% of all tests over the reporting period. In comparison with the previous year, monthly positive tests have increased (albeit still very low numbers). The positive results appear to be split between prescription medication (n=11) and other substances (n=11 - two opioid and nine synthetic cannabis).

Incoming post is scanned and the drug dog is used. Parcels are also x-rayed.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

The expansion of the prison has been an ongoing area of interest for prisoners, with Board members having several ad hoc conversations with prisoners on what this could mean for them. Whilst there continued to be unhappiness at the (perceived) potential for new arrivals being prioritised for the new accommodation or single cells, the reality of the allocation and the transition to the one new wing that was opened in January 2025 appears to be going well. There has been delay in the completion of the works, and at the end of the reporting period, just one of the four wings is in use. Issues with the facilities are being responded to and the prison continues to work with the construction company to get these remedied.

Of the 58 applications received for the reporting period, just one of these was related to food and one more was specifically about clothing, and both were resolved. The prison offers transgender prisoners specific clothing items that support them to maintain their gender identity.

5.2 Segregation

Prisoners are segregated in the care and separation unit, or CSU. Over the course of the reporting year, 108 orders to segregate were reported to the IMB, although a small number were for the same prisoners and one in particular who struggled to integrate into normal regime, despite a number of attempts by prison staff to support him to do so.

Until the start of the expansion and the transfer in of new prisoners, there were on average only two to four prisoners in the CSU. There were two prisoners who spent over 42 days (the limit allowed without external authorisation) in the CSU. Both of these were to support the prisoners to remain stable; one was released and one was transferred to another prison.

With the expansion and the increase of new prisoner transfers, the number of prisoners going into the CSU has doubled since the start of 2025. This is as a result of failed body scans. If a prisoner shows positive for carrying an item on the scan, they are placed in the CSU until they get a clear scan - usually within 48 hours. Questions have been raised on the reliability of the prison scanner and the introduction of a new scanner has not alleviated this. To manage the numbers of prisoners requiring the CSU as a result of a failed body scan, one of the wings has had two cells reserved specifically for this where, although located on the wing, the prisoners follow the CSU regime. This appears to be working well.

5.3 Staff and prisoner relationships, key workers

HMP Rye Hill has several prisoner led initiatives (PLIs) and there is a focus on involving prisoners, where possible, at every level. Overall staff and prisoner relationships are observed to be good. There are many groups that prisoners can engage with, such as Service Veterans meetings and there is a strong prison council that advocates for prisoners. New prisoners are met by 'insiders' who are a nominated group of prisoners who provide support through the induction period and conduct follow up checks to support integration and adaptation.

Communication appears to be good and supports the maintenance of these relationships, with the daily Director's vlog (video blog) and the provision of Rye Hill TV and radio channels, so all prisoners can stay up to date with events and popular challenges, such

as the football and chess competitions. The channels are available around the clock and are produced in-house by the Media Hub.

There is a continued focus by HMP Rye Hill to ensure prisoners are attending their key worker sessions. There is an average of around 85% take up of these sessions. The Director reports monthly on this and provides narrative on the figures to the Board. All prisoners continued to receive at least one key worker session a month with many having two and those in the CSU or identified as being vulnerable having weekly sessions.

5.4 Equality and diversity

HMP Rye Hill has provided statistics that show that 242 of the prisoners here have a physical or mental disability. There has been an older than average population which would also result in comorbidities. The prison has undertaken improvements to upgrade the shower and improve accessibility in the older wings, and the newer wings are designed to be accessible on all floors with lift access and in-cell shower facilities.

Equality action team (EAT) meetings continue to be held, and these meetings support groups. Representatives are in place for additional groups such as veterans and the Gypsy, Roma and Traveller community, as well as the standard protected characteristics, such as age or race. There are a range of policies that support the prison to be inclusive, with the latest equality and diversity policy last being updated in 2022.

The number of discrimination incident reporting forms (DIRFs) submitted was 26.

5.5 Faith and pastoral support

The Chaplaincy continues to provide support to a broad number of faiths - there are 19 recorded religions across the prison, with less than a third of prisoners reporting to have no religion. There are many faith-based celebrations observed throughout the year, including Christmas, Eid and Easter. The chaplaincy also plays a role in providing pastoral support to all prisoners who require support, not just those who are observing a particular religion. Prisoners can work as part of the chaplaincy support team and must be able to demonstrate sensitivity and a willingness to support others in need, regardless of faith.

The Board has observed that prisoners are encouraged and supported to attend services and faith groups. Equally, prisoners are encouraged to make new suggestions and ideas for projects in this area by the senior management team. The chaplaincy team consults regularly with all groups to ensure there is a careful balance between the needs of each religion and the shared usage of space.

5.6 Incentives schemes

Prisoner incentives have continued to grow through the last year, with the creation and expansion of 'trusted position' opportunities. A banding system is in place (red/yellow/blue) and prisoners who are able to apply for and obtain these bandings can work with prison senior leaders to have positive influence within HMP Rye Hill, as part of prisoner led initiatives (PLIs).

The community ethos work in the last 12 months has resulted in reported lowering of violent incidents and the increasing of positive entries by 60%. There has also been work to increase healthy lifestyle choices in areas such as gym, food and mental health awareness.

There is ongoing work with the planned introduction of 'community concessions', where unit credits are given for positive behaviour, and loss of credits for negative behaviours. Credits will be able to be exchanged for items such as enhanced meals or new snooker cues, for example.

A significant majority of prisoners maintain the 'enhanced' (highest) regime levels in the incentives scheme, a system of earned privileges to encourage positive behaviour, with just a small number going down to 'basic' (the lowest) or 'standard' (middle) levels.

5.7 Complaints

There was an average of 63 COMP1 (ordinary) complaints a month, with a high of 79 in December and low of 41 in February. This is lower than last year's average of 72 a month. Residential related complaints were highest across the year - with a total of 236 residential complaints across the whole reporting period.

There were only six COMP2 (confidential complaints regarding a staff member) across the entire reporting year, which is more than a 50% reduction on the previous year.

5.8 Property

The number of IMB applications concerning property lost on transfer into Rye Hill has decreased through the reporting year. There were seven applications overall. However, this still represented 12% of all applications. This is an ongoing area of frustration for prisoners and with the increase of prisoner transfers into HMP Rye Hill, the loss of property is expected to increase.

The issues that were reported last year, with old property cards just being filed and not checked against the property actually received, remain. As does the apparent unwillingness of the prison to address this.

The property that goes missing at times contains sensitive documentation relating to the prisoners' offence that they require access to, and so it is crucial that steps are taken to address this.

6. Health and wellbeing

6.1 Healthcare general

The Practice Plus Group (PPG) has run the healthcare department now since November 2022 and there have been significant changes to both personnel and structure. The new head of healthcare has been in place since July 2024 and the deputy head was appointed in January 2025.

From 2025, with the expected expansion of the prison by 70% and the change of the prison to category C, from 10 April healthcare will operate from a new building with an additional five clinic rooms.

With this expansion the healthcare team is looking to streamline their services during the next reporting year, by establishing three Integrated Care Pathways:

1. An early day custody service to ensure treatment is being followed through;
2. Unscheduled/emergency care to respond to prisoner needs, e.g. cardiac incidents and unexpected bleeding; and
3. Planned care to provide ongoing specific care for long-term conditions such as diabetes, asthma and cardiology problems.

There is evidence that the new staffing levels, new structures and upcoming expansion is providing a more streamlined provision of healthcare. In September 2024 the department underwent a Care and Quality Commission (CQC) review and was deemed to be outstanding. The IMB have been informed the report stated that 'Rye Hill is the benchmark for other prisons to aspire to'.

The department regularly collects and measures the number of healthcare complaints, concerns and compliments received from prisoners; these are maintained by a Patient Engagement Lead and most are available to the IMB on a monthly basis. Over the year to the end March 2025 these were:

TABLE: Number of Health complaints, concerns and compliments per month.

	highest	lowest	average
Complaints	12	1	5.1
Concerns	31	0	5.4
Compliments	25	3	14.6

Concerns, which now include informal verbal communications to staff are usually low but have increased in recent months, possibly due to the new reporting system and the new prisoner intake who are unfamiliar with systems at Rye Hill.

It should be noted that health related applications to the IMB over the past year are much lower than in previous years - just 11, with six of those coming from just two prisoners, both with serious mental health issues (see 'the work of the IMB', p.19.)

6.2 Physical healthcare

During the current year the number of appointments offered daily has remained stable but are expected to increase from 2 June 2025.

Waiting times for appointments have in two areas remained high, ie. for the GP (except for the GP in Feb 2025) and the Dentist. Both show an increase over last year.

TABLE: Number of patients waiting to be seen at the end of a month:

	April 2024	March 2025	Highest
GP	unknown	unknown	143 (Sep)
Dentist	49	4	67 (Oct)*
Podiatrist	11	2	4 (Oct/Nov)
Physiotherapist	13	4	25 (Nov)
Optician	21	1	33 (Aug)

*In March 2025 the longest wait for a dental appointment was 368 days due to one patient who recently transferred into the prison and skewed the figures.

It is possible that the average wait to see a GP has increased due to the prison change to category C. Dental wait time has also increased, caused by the loss of a dentist. However, the expanded prison now includes two dental suites with greater capacity so waiting times should improve.

The Board has no concerns over podiatry and physiotherapy wait times.

As in previous years, with an older consort of prisoners the demand for outpatient appointments remains high and on some occasions this has outstripped the availability of the four escorts each day (20 per week) that are provided. The actual need is estimated to be closer to six escorts per day. The need for staff to make decisions on a daily basis on which appointments to cancel as demand surpasses this quota is challenging. To alleviate the impact this has on prisoners the department has, to its credit, been proactive in creating a number of initiatives:

1. It discusses hospital availability of appointments on a weekly basis with hospital administrators and endeavours to be flexible in their planning, to enable as many appointments as possible to be met.
It is estimated that the need for outpatient appointments will increase as the prison expands and although the age cohort of the prisoners is unknown at this moment, the number of outpatient appointments is expected to remain high and be of concern.
2. The department is bringing a number of services into the prison so that prisoners can be treated on site, e.g. triple A cardiac screening for the over 55s, quarterly audiology and retinal screening.

Other services that could be brought on-site have also been investigated but there are issues with logistics, information sharing and commissioning. Telemedicine services (remote healthcare services via video) have been looked at, but the lack of current clinic space is an issue, although this should be resolved on completion of the expansion. Security remains an issue.

6.3 Mental health

Even with the movement out of the prison of a number of category B prisoners as the prison has moved towards a category C status, the number of prisoners under the care of the mental health team has remained stable and is currently at 59.

To address the mainly psychological needs of the prisoners - in the main anxiety, stress, low mood, and sleep issues, the prison has recruited additional staff – a psychologist in May 2024 and an assistant psychologist in September 2024. In addition to this, the prison has an on-site psychiatrist for two days a week and recently has recruited two additional mental health nurses.

A neurodiversity team was established in 2024 and is currently serving 46 prisoners with learning disability, autism and ADHD. On 11 February 2025 the prison held a Neurodiversity Awareness Day, attended by many prisoners.

The prison offers memory testing for all prisoners over the age of 65 years, picking up issues and referring up where appropriate. During the current year three prisoners have been diagnosed with dementia and two have been transferred to a hospital secure unit, the other remains at Rye Hill.

6.4 Social care

There are currently nine prisoners who require daily social care, and two who require limited social care. The social care staff are provided by and funded by Northampton County Council but are managed by the healthcare department. Three operate full-time and are based at the prison, with Rye Hill health care assistants providing additional support as needed. Regular meetings of healthcare staff and others taking care of vulnerable prisoners and ensuring their safety are held weekly and the IMB has been impressed at the detail of care that has been observed to be provided for these often-elderly prisoners.

6.5 Drug and alcohol rehabilitation (DART)

The DART team currently (as at the end of March 2025) supports 170 prisoners, providing an Integrated Drug Treatment Service (IDTS) subcontracted to The Forward Trust via the Practice Plus group. The team aims to provide psychosocial support to prisoners with both historic or current drug and/or alcohol issues.

There are health and wellbeing champions to act as positive role models and mentor other service users. In addition, as part of individual care plans, clients are encouraged to set future SMART (specific, measurable, achievable, relevant, and time-bound) goals that incorporate improvements to their own physical health and mental wellbeing.

In recent months the prison has seen an increase in prisoners with drug issues with the new intake of category C prisoners from other establishments within the wider prison estate where drug dependency is more prevalent. HMP Rye Hill now has eight prisoners on methadone, an opioid substitute, and the IDTS provides weekly reviews for these prisoners to address concerns and help each client detoxify safely, whilst being supported.

6.6 Wellbeing and community ethos

Over the past year the senior management team has developed a focus on building community ethos within the prison, led by the head of residence. Its focus has been on developing equality and inclusivity; healthy lifestyles; progression within the community; promoting rehabilitative culture; consistent regimes; and levelling up.

Some of the visible positive outcomes that have had an impact on prisoners and their wellbeing include:

- An increase in the time in fresh air for every prisoner from 30 minutes to one hour a day
- The introduction of community concessions (CCs) where prisoners can earn points for themselves but also their wing, with updates put out on the TV channel, and credits earned, e.g. an opportunity to engage in events such as dine outs. However, prisoners can also lose points for both themselves and their wing for violent behaviour. The CC message is reinforced following minor incidents on a wing, with 'think before you engage in such acts' messages put out.
- CCs have been found to have a positive impact on increasing positive and decreasing negative behaviour, and there has been an overall reduction in acts of violence. Though violence statistics were fluctuating monthly from one to four per month, in August 2024 when CC was introduced there was an immediate fall in violence to two then to one per month, and this has stayed stable since September 2024 through to February 2025 (see section 4.3).

7. Progression and resettlement

7.1 Education

Education attendance for the year was 79.8% and was significantly impacted by the education manager leaving during the autumn. This compares with over 80% from the previous year.

The most common reasons for absence were for attendance at enrichment events, other work, healthcare and religious activities.

The focus on maths and English courses continued. The following passes were noted:

- Maths entry level passes = 22
- Maths level 1 and 2 passes = 61
- English entry level passes = 26
- English level 1 and 2 passes = 137

The overall achievement rate is 86%.

The reading initiative has continued, with over 50 individuals improving their reading support level during the year. In addition to formal education, enrichment opportunities at HMP Rye Hill continue to be varied and engaging. These included a neurodiversity day, TEDx talks events, festival of arts and literature, British values day, employability event, university guest seminars, Black History Month and a mental health awareness event.

The Board hoped to have seen an increase in the education offered to prisoners following the expansion of the prison, but the opening of the expansion was delayed, and this will now be a focus of our monitoring for the 2025-26 year.

7.2 Vocational training, work

Employment levels have remained high, with all prisoners who can work being allocated a job. The long-term sickness (absences of seven days or more) average was six prisoners per week. The highest number being 12 and the lowest week was three. The long-term sickness figures were an increase on the previous year.

The Board hoped to have seen an increase in the vocational offer to prisoners following the expansion of the prison, but the opening of the expansion was delayed, and this will now be a focus of our monitoring for the 2025-26 year.

7.3 Offender management, progression

The offender management unit (OMU) has continued with a structure of 'pods' of prison offender managers (POMs) working together with probation officers to support a group of prisoners. Despite there being concerns from prisoners voiced to the IMB anecdotally, the IMB has not received applications (prisoners' written representations to the IMB) relating to the changes.

During the reporting period, all category B prisoners have either been recategorised to category C, released or moved to an alternative category B prison. This means that at the end of the reporting year, all 840 prisoners were category C. This has been a remarkable achievement by the prison, with very few prisoners remaining at Category B and being transferred to another establishment.

The same offender behaviour programmes were offered as the previous year. There

were 170 programme participants, with 159 completing their programme during the year.

7.4 Family contact

Social visits and social video calls have continued to be available. Family days have continued as in previous years. The numbers of prisoners receiving one of these visits has remained consistent throughout the year at about 40%.

7.5 Resettlement planning

There were 67 direct releases from April 2024 to the end of March 2025. This was a 17% increase on the previous year.

During November 2024 the IMB at Rye Hill completed a thematic review on the 'making sense of a long sentence' process that was launched in 2023. Our conclusion found that:

- The process has achieved good visibility, and prisoners understand what it is trying to achieve
- There did seem to be a divide between prisoners who were already strongly motivated to progress and those who had not yet reached the level of personal development required to be able to self-plan or self-evaluate. The process does not seem to be engaging the latter group.
- There is a strong reliance on the members of the PLI teams, some of whom were nearing their parole dates. Without these individuals, with their specific skills, this process would be difficult to maintain.
- We were left with the impression there may now be a gap in one-to-one targeted support for the more complex prisoners; this process originally focused on -Imprisonment for Public Protection (IPP) and prisoners with life sentences or those with neurodiverse conditions.

Towards the end of the reporting year the national lead for IPP prisoners across the prison estate remarked that he had not seen the same processes in any other establishment and described the way prisoners feel supported and listened to by staff at Rye Hill as superb.

Again, this was a key area for us and in September 2024 the IMB completed a thematic review regarding 'The management of IPP prisoners'. One key finding was that 12 of the 14 IPP prisoners at the time were known to or suspected to have neurodivergent needs and that this could be a major barrier when preparing to go in front of the Parole Board.

The report made the following conclusions:

- Clearly some exceptional and intensive one-to-one work is being done with some IPP prisoners that is making a real difference to their 'progress'. However, it cannot be overlooked that there are many others who feel they are not making progress, sometimes through their own lack of interest or understanding of what is possible.
- When speaking to IPP prisoners, as part of the data gathering to inform this report, there was a sense of hopelessness amongst many of them and a frustration at the barriers they still faced specifically when preparing for and appearing before the Parole Board. As long-term prisoners who interact with the rest of the prison population, there is a risk that the hopelessness they have could be a motivator for negative and violent behaviour.
- It is reported by probation that all the IPP prisoners do have a positive

relationship with at least one member of staff and that this is a positive to build on. They are ambitious for the cohort and their intention is to work jointly to see each one progress in ways that are meaningful for them.

- Suggestions from the forum for bespoke cooking classes for IPP prisoners, IT skills, modern world sessions and shopping experiences - some perhaps more viable than others - if instigated will however have a role in inculcating hope and reducing fear of the future amongst the IPP prisoner community.

The work of the IMB

Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	7, (including 2 on induction and 1 new member)
Number of Board members at the end of the reporting period	4 (including 2 nearing completion of their training)
Total number of visits to the establishment	182

Applications to the Board

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	13	0
B	Discipline, including adjudications, incentives -scheme, sanctions	18	1
C	Equality	1	6
D	Purposeful activity, including education, work, training, time out of cell	8	7
E1	Letters, visits, telephones, public protection, restrictions	7	2
E2	Finance, including pay, private monies, spends	0	2
F	Food and kitchens	0	0
G	Health, including physical, mental, social care	33	11
H1	Property within the establishment	10	9
H2	Property during transfer or in another facility	14	3
H3	Canteen, facility list, catalogues	2	0
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary parole), parole, release dates, recategorisation	8	5

J	Staff/prisoner concerns, including bullying	27	5
K	Transfers	8	1
L	Miscellaneous	5	3
	Total number of applications	154	55

Annex A

Response to the last report

Issue raised	Response given
<p>To the Minister</p> <p>The Board remains concerned that there is no centrally directed, long-term solution to the injustice of the IPP (imprisoned for public protection) sentence and its impact on the mental health and wellbeing of affected prisoners. The IMB has raised this for a number of years, but since the rejection of the Justice Select Committee's recommendations, there does not seem to have been any alternatives put forward.</p> <p>We acknowledge the work HMP Rye Hill has done internally to support these prisoners, but as many have complex needs, additional budget and central support for individual progression plans may be the only way these prisoners stand any chance of release. When and how will the Minister address this serious injustice?</p>	<p>I appreciate your continued concerns regarding Imprisonment for Public Protection (IPP) sentences. On 5 September, the Lord Chancellor announced that the Government would implement reforms we supported in opposition to the IPP licence period in the Victims and Prisoners Act 2024. These commenced on 1 November, when the licences for 1,742 IPP offenders in the community were terminated. The remaining reforms will be implemented on 1 February 2025, when the reduced qualifying period for consideration of licence termination will see around 600 additional referrals made to the Parole Board.</p> <p>The government is determined to support the rehabilitation of IPP offenders through a refreshed Action Plan, which we published on 15 November 2024. The refreshed plan puts an important emphasis on effective frontline delivery in our prisons and the probation Service, to ensure that those serving IPP sentences have robust and effective sentence plans, which they are actively engaging with, and that they are in the correct prison to access the right interventions and rehabilitative services. This is the most effective way to help them to reduce their risk so that they can progress towards safe release from custody. The refreshed Action Plan was published in our IPP Annual Report and can be accessed using the following link: https://www.gov.uk/government/publications/hmpps-annual-report-on-the-ipp-sentence-2023-to-24</p>

<p>To the Prison Service</p> <p>The Board was pleased that one terminally ill prisoner was given compassionate release during the reporting period. However, the Board is still concerned that the process remains unnecessarily difficult, particularly as it requires a GP's diagnosis of terminal illness to be confirmed by a hospital consultant. The long waiting times to see an NHS consultant add unnecessary delays, which can be the difference between a prisoner dying while still in prison or in a setting of their choice.</p>	<p>I note the Board's concerns regarding Early Release on Compassionate Grounds (ERCG). HMPPS balance essential public protection concerns with the needs of prisoners who may be reaching the end of life or have serious and complex health or social care needs while serving custodial sentences. The policy allows for prison Governors to make applications at any stage of a prisoner's sentence when a terminal or complex diagnosis is given. For terminal diagnoses, while the policy provides a guide that the prisoner is within the last few months of life as an appropriate point at which to release under the provisions of ERCG, each case is considered on its own merits. The current process to confirm diagnosis provides vital and necessary information for an informed decision to be made regarding the need for early release and possible ongoing care requirements in the community, if early release were to be granted.</p>
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<p>The Board remains concerned that prisoner-requested transfers within the estate have remained all but impossible, meaning that many prisoners remain held a long distance from their family and friends. While acknowledging that the over-population issue is partly to blame, there does not seem to be any active consideration of family ties when decisions are made on where prisoners are located, which can have a serious impact on their mental wellbeing.</p>	<p>As a training prison and a national resource, HMP Rye Hill could receive from anywhere. However, where practicable, prisoners are accommodated as close as possible to their home probation region to maintain family ties and aid resettlement. Whilst this is a priority, unfortunately, it is not always possible due to a variety of factors, including wider population pressures, security concerns, or where prisoners have specific sentence planning needs which can only be met at certain establishments.</p> <p>The establishment works closely with population management and has a local transfer strategy to ensure that appropriate prisoners are both allocated and transferred to and from HMP Rye Hill. We note that there are occasions when individuals request a transfer on compassionate grounds, and we work on a case-by-case basis to reach an appropriate decision. Due to the pressures that are being seen nationally, this is often a challenge. However, we do whatever we can to reach an appropriate outcome in all circumstances.</p>
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<p>The Board is disappointed that the problem continues of prisoner property not being sent when transferring into HMP Rye Hill. With the requirement to send the old property card (an official record of a prisoner's personal items) with the prisoner now established, could the admissions process include a check against the old card while the new card is created? This would highlight missing items, which could be immediately reported to sending prison.</p>	<p>HMPPS is aware of the problems around property and continues to explore what further can be done. Since the introduction of the Prisoners' Property Framework, prisoners must comply with volumetric control limits since any property within these limits will be transferred with them. This includes items which are exempt from volumetric control, such as legal papers. It is not possible to transfer with a prisoner all excess property which they might have accrued above these limits and any excess property outside of these limits should be transferred within four weeks.</p> <p>Property cards must be updated to reflect any changes to a prisoner's property and prisoners must be invited to sign the card as soon as possible after any changes, having a proper opportunity to see that it is correct. All property accompanying prisoners leaving the prison for any reason, including for court appearances or transfer to another establishment, must be checked against the property record cards and discrepancies recorded. A prisoner must be invited to sign any newly created property card at the receiving prison.</p>
<p>To the Director</p> <p>The Board has no areas for development it wishes to highlight within the reporting period. However, there remains some concern about the accelerated time frame for the opening of the new building and subsequent migration to an all-category C establishment. Monitoring in the coming reporting period will focus on the allocation of prisoners to the new accommodation blocks, as well as on the support provided to the more complex category B prisoners to help them progress before it becomes necessary for them to move to a new establishment, which may disrupt their progression.</p>	<p>There was no specific comment received from the Director on this point.</p>

Annex B

Service providers

- Healthcare and social care services are provided by Practice Partnership Group (PPG), commissioned by the NHS.
- The education provider is Novus Foundation for Change.
- Catering is provided by Aramark.
- Links with the Samaritans are established, together with a Listener service.

Annex C

Population statistics

At the end of the reporting year, the prison held 69 prisoners under life sentences; this is only a small change from the 73 held at the start of the year. The number held on an imprisonment for public protection (IPP) stayed very similar from 16 in March 2024 to 15 in March 2025.

At the end of the reporting period, the prison held 840 category C prisoners. As included earlier in the report, HMP Rye Hill is now a category C prison.

The ethnic breakdown has remained predominantly white, with 80.4% white, 7% black, 7.7% Asian and 4.9% others. This is broadly in line with the previous year. Foreign nationals make up 6.3% of the prison population.



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