



Annual Report of the Independent Monitoring Board at HMP Wymott

**For reporting year
1 June 2024 to 31 May 2025**

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Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Key points	5
 Evidence sections 4 – 7	
4. Safety	9
5. Fair and humane treatment	13
6. Health and wellbeing	19
7. Progression and resettlement	23
 The work of the IMB	
Board statistics	28
Applications to the IMB	29
 Annex A	
Service providers	31

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Introductory sections 1 – 3

1. Statutory role of the IMB

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

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

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

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

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

2. Description of the establishment

HMP Wymott is a category C training prison (for prisoners who are not trusted in an open, category D, prison but are not considered a high escape risk) for adult men. As of May 2025, the 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 prison) is 1192¹, with approximately 200 prisoners sharing cells. The population comprises approximately 40% mainstream category C prisoners and 60% prisoners convicted of a sexual offence (PCoSO). Most of the prisoners are serving sentences of four or more years. The accommodation mainly dates from the 1970s, with a few later additions. It comprises 11 wings, several of which offer specialist functions, including a drug therapeutic community wing and two psychologically informed planned environment (PIPE) units for prisoners who have some personality-related needs and screen onto the offender personality disorder (OPD) pathway (a personality disorder diagnosis is not needed).

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

As reported last year, Wymott has continued to suffer the effects of staffing shortages across both directly and indirectly employed staff, and this has impacted significantly on prisoners' experiences. The rate of absences among uniformed staff continues to be one of the highest in the region, putting a strain on the prison's ability to maintain a decent regime.

Towards the end of the reporting year, a number of new officers from outside the UK were appointed on a right to work scheme, but they are largely inexperienced and may not be able to remain here in the long term.

The ongoing lack of progress with major refurbishment projects has seen a continuation of the deterioration in living conditions, and national population pressures have forced the prison to accommodate many prisoners in overcrowded and/or shabby conditions.

The shortage of work opportunities for the main category C prisoners has seen men with too much time on their hands turn to drugs but with too little money, leading to debt.

3.1 Main findings

Safety

- The apparent ease with which illicit drugs are entering the prison is a major concern, with drones being regularly heard or seen delivering packages. The increase in prisoners using drugs would appear to be linked to an increase in debt and prisoners feeling vulnerable and, as a consequence, choosing to self-isolate. (see sections 4.3 and 4.5).
- There has been a notable increase in the use of force over the year, mainly unplanned (see section 4.4), despite the number of incidents of violence showing only a small increase.

Fair and humane treatment

- Some of the prisoners are accommodated in conditions that are both indecent and inhumane, due to the continued appalling state of some of the residential blocks (see section 5.1).
- There have been numerous failures of the heating and hot water on several wings, with unacceptable delays to repairs (see section 5.1).
- The kitchen is in desperate need of an upgrade, due to problems with the infrastructure and equipment (see section 5.1).

Health and wellbeing

- Prisoners are too frequently found to be 'under the influence' of illicit substances. This is a drain on both prison and healthcare staff, and the North West Ambulance Service (see section 4.5).
- Delivery of medication to the wings remains inconsistent, and healthcare staff are sometimes unwilling to return when prisoners have missed their medication for reasons outside their control (see section 6.2).

- The Board is still seriously concerned about the length of time prisoners with severe mental health problems wait to obtain a place in a secure mental health unit (see section 6.3).

Progression and resettlement

- The shortage of purposeful activity for the main category prisoners has been a significant concern for the Board (see section 7.2).
- Prisoners have regularly complained to Board members about difficulties in getting to see their offender manager to discuss their sentence management (see section 7.3).
- Despite being entitled to use the prison library, prisoners are still being denied access, due to a shortage of staff (see section 7.1).

3.2 Main areas for development

TO THE MINISTER

- Will the Minister give any reassurance that there will be an easing of population pressures at HMP Wymott in light of the planned new prison?
- How does the Minister envisage implementing the policy around timely relocation of prisoners to secure mental health units?
- What steps will the Minister take to protect the employment status of officers recruited from overseas?

TO THE PRISON SERVICE

- Can HMPPS reassure the Board that funding for the essential refurbishment, which has been highlighted for a number of years, will be forthcoming?
- How will HMPPS tackle the increase in drone activity and its impact on the prison and its population?
- What steps are being taken to mentor and support the professional development of new and recently recruited officers?

TO THE GOVERNOR

- What is the Governor doing to protect prisoners' entitlements in relation to time out of cell, library access and purposeful activity?
- Prisoners on the mainstream side of the prison have been without regular work for the entire year. How does the Governor plan to ensure that they make full use of employment opportunities as the workshops reopen?
- How will the Governor address the increasing incidence of prisoners being found under the influence of illicit substances?
- The report raises a number of concerns about the delivery of medication and essential repairs to the fabric of the prison. What will the Governor do to ensure that the service provided by external agencies (such as Practice Plus Group, Amey) is of an acceptable standard?

3.3 Response to the last report

Issue raised	Response given	Progress
Support for/release of IPP [imprisonment for public protection] prisoners.	Changes to the licence period; requirement for the Government to publish an annual report in the Victims and Prisoners Act 2024; Lord Chancellor to have the power to disallow a recall.	No progress.
Planned new prison.	Was approved in December 2024, for up to 1700 prisoners.	The Government has announced that the new prison will go ahead.
Prison estate population.	Independent Sentencing Review launched; bridging measures put in place in the meantime.	11 prisoners released in September/October under early release schemes, but over 1000 were ineligible. Wymott remains at capacity, with little scope for transfers.
Funding for category C workshop roof.	Funding in place; design and quotation process under way.	Work on the roof is complete. Electrics and alarms should be complete by autumn (see section 7.2).
Kitchen upgrade.	Business case submitted, but funding not provided.	Kitchen equipment reviewed as a standing item at monthly estates meetings.
Staffing shortages.	Significant recruitment, leading to large numbers of inexperienced staff to support.	New officers recruited from African countries, although most lack experience.
Hospital escorts and triaging.	Joint HMPPS/NHS review of new systems of working to help reduce numbers of external hospital appointments.	Good progress made (see section 6.2).
Funding for resettlement.	Resourcing managed by regional probation directors. Local in-reach service offered, but Wymott choose to	See section 7.5.

	maintain existing arrangements.	
Influx of drugs into the prison.	No response.	See section 4.5.
Lack of access to library services.	No response.	See section 7.1.
Healthcare service inadequate, particularly mental health care. Lack of consistency and continuity of medicines provision.	Healthcare contract up for tender.	New provider in place from April 2025 (see section 6).

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

During this reporting year, as was the case in the previous year, there were, on average, between 10 and 15 prisoners arriving each week from other custodial establishments. The number arriving peaked at 29 during one week in October 2024 to occupy the places vacated by those leaving under the SDS40² early release scheme.

The Board visited the reception area periodically and spoke to new prisoners about their experience and welfare. Prisoners were offered refreshment and food. Health and welfare checks were carried out and each prisoner had a first night interview as part of the induction process.

The arrival of prisoners late on Friday afternoons during some weeks appeared to cause a high workload for reception staff. On occasion, staff extended their working hours in order to complete the first night induction for new prisoners. The Board was concerned about the movement of prisoners around the estate in the period just before Christmas, and between Christmas and New Year, which appeared to be disruptive for them and their visiting families. During periods when there has been very little spare capacity within the male prison estate, HMP Wymott had to comply with directions from HMPPS Population Management regarding transfers in and out of the prison.

Although Board members did not observe prisoner inductions, all new prisoners were sent a leaflet and an introduction letter explaining the role of IMB and a slip to return if they would like a personal visit.

New arrivals are not a priority group for meeting with their key worker, but the key worker usually introduced themselves by letter.

Board members checked the induction logbooks periodically and visited a sample of recent arrivals in order to gain feedback on their experience of the induction process. Almost all the prisoners we spoke to gave positive feedback, although they were concerned about the length of time taken for their property to follow them on. As there have been periods of low attendance at scheduled induction and tour sessions, the prison has started to address refusal to attend induction through the local incentives scheme.

4.2 Suicide and self-harm, deaths in custody

Prisoners who are deemed to be at risk of suicide or self-harm are managed through the assessment, care in custody and teamwork (ACCT) process, a safeguarding procedure used to support prisoners who are at risk of self-harm or suicide. It should

² The SDS40 (standard determinate sentences, 40%) scheme is an early release policy that allows certain eligible prisoners serving standard determinate (fixed term) sentences to be released after serving 40% of their sentence, instead of the previous period of 50%. This was introduced as an emergency measure to alleviate prison overcrowding, and was implemented from 10 September, 2024.

involve ongoing monitoring, regular reviews, and the development of a personalised care plan, with input from relevant staff and professionals. In the 2024-2025 reporting year, 286 ACCTs were opened, which is a little higher than in the previous year. The number of self-harm incidents increased from 465 to 554, a rise of 19%. However, the Board notes that, in the two months with the highest number of self-harm incidents, namely August 2024 and May 2025, just four prisoners were responsible for 38% and 35% of incidents respectively; and, in April 2025, 24 incidents took place in the care and separation unit (CSU), representing 45% of the total number of incidents that month. The majority of self-harm acts are through cuts and scratches (in 2024, over 80% of incidents of self-harm were categorised in this way).

While any increase is of concern, the Board is satisfied that the prison is taking steps to manage and, where possible, reduce the number of self-harm incidents, such as, for example, through safety interviews carried out by staff from the safer living team, individualised support for prisoners identified as being neurodivergent, specialist prisoner focus group meetings, visits by therapy dogs and, as a more recent acquisition, therapy ponies. The prison does not have safety officers located on the wings, due to lack of staff; however, the safer living team maintains a prisoner interventions tracker, which logs work undertaken with both individuals and groups of prisoners deemed to be at risk of self-harm. There are plans to introduce paid prisoner safety representatives on the wings, although this has not yet been actioned.

There were 11 deaths in custody during the 2024-25 reporting year, three fewer than the previous year. Of these, five took place in the prison, five in hospital and one on the way to hospital. The Board completes a report on all deaths in custody and receives copies of initial and final Prisons and Probation Ombudsman (PPO) reports. Initial reports have been received for nine of the deaths, while final reports have been received for seven. Although the final outcomes of the inquests are yet to be notified, the PPO reported that two of the deaths were, apparently, self-inflicted, while a third was suspected of having been the result of the prisoner taking a psychoactive substance. All remaining deaths for which reports have been produced were deemed by the PPO to be from natural causes. The majority of recommendations made by the PPO were directed towards healthcare rather than to the prison. Wymott is either in the process of responding, or has responded, to all three of the recommendations the PPO has made to the prison to date.

It is the view of the Board that the prison manages the process of dealing with a death in custody in an appropriate and sensitive manner. Families, prisoners and staff are all offered support through, for example, FLOs (family liaison officers), the chaplaincy team and Listeners. Visits are made to wings where prisoners have been impacted, a member of the senior leadership team visits the next of kin, where appropriate, and memorial services are held in the chapel.

4.3 Violence and violence reduction, self-isolation

During the year in review, the prison reported 179 incidents of violence, slightly higher than in the previous year. The peak of these occurred in February 2025, with 22 reported incidents, of which five were alleged to be prisoners sexually assaulting other prisoners. The Board notes that this is not a regular occurrence; over the reporting period there were four months with no reports of alleged sexual assaults,

and just one or two in the remaining seven months. While any increase in violence is of concern, the Board is satisfied that the prison is working to reduce acts of violence and, despite the lack of productive work for many mainstream prisoners, numbers are consistently well below the national average.

The Board routinely monitors the number of prisoners who are self-isolating and visits them from time to time. The average, per month over the reporting period was 11, compared with eight in the previous year, with the highest number during any month being 17, in both February and March 2025. The majority of these have chosen to self-isolate, as they feel threatened or unsafe on the wing, and a number of them are in debt. The prison manages self-isolating prisoners through a separate regime, with some prisoners reporting to Board members that they have not routinely had the opportunity to exercise or access the showers. However, on checking, the Board has sometimes found that prisoners have been offered regime but have declined it. This should be documented in the diaries on the wings, but is not always done. All self-isolating prisoners are managed under the challenge, support and intervention plan (CSIP) process and are visited at least fortnightly by the custodial manager who has specific responsibility for self-isolating prisoners. He also carries out quality checks on active CSIPs and the outcomes are reported to the monthly safety meeting.

4.4 Use of force

The Board receives monthly reports on the use of force within the prison, a Board member frequently observes the prison's safety meeting and the data is discussed at the Board's monthly meeting. During the reporting period, there were 477 incidents involving the use of force (UoF), compared with 369 the previous year. This represents an increase of 29% overall, which is of some concern to the Board. Many of these were associated with prisoners being under the influence of an illicit psychoactive substance (PS), where they were being guided back to their cell. The number of planned uses of force increased by 38% while the unplanned incidents increased by 30%. Batons were drawn on five occasions but not used, while PAVA, an incapacitant spray, was drawn and used on four occasions and drawn but not used on a further four occasions. Handcuffs were used in 58% of UoF incidents and the majority of force was categorised as being to help prevent harm, assault or harm to others. The nature of such incidents ranges from guiding holds, where prisoners are moved using direct contact, through to full planned removals, when officers may be kitted up in personal protective equipment (PPE). Over the reporting year, there were 65 such planned events, an increase of 38% on the previous year.

The Board is pleased to report that the use of body worn video cameras (BWVCs) has increased slightly over the year, reaching a total of 90% of UoF incidents where camera footage was available by May 2025. On average, BWVCs were activated on an average of 80% of occasions over the reporting year, although the head of safer living has raised concerns that cameras are sometimes switched off before an incident has reached its conclusion, so essential data may not be captured. The Board remains concerned that, on average, 20% of incidents involving force are not captured on BWVC.

4.5 Preventing illicit items

The Board has noted an increase in reports of drone activity over the reporting year. The prison's location, near to the two major conurbations of Manchester and

Liverpool and adjacent to HMP Garth, makes it particularly vulnerable, in the Board's view. A number of drones have been spotted and located and prisoners' cells have been searched following a suspected drone drop, some of which have resulted in large finds of illicit items. However, there will, inevitably, have been successful deliveries of drugs, mobile phones and other contraband, as has been evidenced through a number of spikes in prisoners being found under the influence of an unknown substance (over the course of the year 723 incidents of suspected PS use were reported). Where a prisoner has collapsed and is suspected of being under the influence (UTI), the prison responds by calling a 'code blue' alert for healthcare and an ambulance is routinely called, although this is often subsequently stood down. In addition to all healthcare staff, 17 officers across the prison have now been trained to administer naloxone, a medicine that can reverse an opioid overdose (see section 6.6). There have been some occasions over the reporting year when there has been a cluster of cases of prisoners using a psychoactive substance (PS) on a particular wing, often during a weekend. In these situations, the prisoners are unlocked in cohorts, sometimes for a few days, to minimise the circulation of drugs, and any suspected dealers are removed from the wing. The national dog search team makes regular visits to the prison and carries out extensive searches.

All new arrivals are body scanned in reception and if any suspect items are found, the prisoner is taken to the care and separation unit (CSU) until such time as they can produce a clear scan. Mandatory drug tests (MDTs) are carried out. During the reporting period, the prison met its target for random drug tests in just eight of the 12 months, and staff shortages have meant that additional 'suspicion' testing has fallen behind to the extent of being abandoned altogether. When Board members have made random data checks, they have found that test results are often not processed in a sufficiently timely manner and many positive tests are found to be associated with prescribed medication. Any prisoner who fails an initial MDT is given an adjudication (a disciplinary hearing when a prisoner is alleged to have broken prison rules), which is usually opened and then adjourned until the results of a confirmation test are received. All prisoners who are found guilty of being in possession of an unauthorised substance or an article associated with illicit drug use are referred to the drug and alcohol recovery service (DARS) (see section 6.6).

While the Board recognises that the prevalence of drugs in prisons is a national problem, it does have concerns about the apparent increase of availability and use of a few illicit substances in some areas of Wymott. A revised drug strategy is being developed, although this is still in the process of being produced.

5. Fair and humane treatment

5.1 Accommodation, clothing, food

Some of the accommodation issues mentioned in the last report have been addressed, such as, for example, the blocked guttering around the administration building. However, the damage caused by the vegetation growing out of the roof has not been addressed. There continue to be many leaks, causing further damage. The fabric of the buildings remains poor and, in many cases, deplorable.

The refurbishment of A and B wings has yet to start, the main contractor having gone into receivership. These wings remain unfit for purpose. They are the subject of constant repairs, especially to the sanitary facilities, which are often not carried out in a timely manner. Staff have told the Board that they are frequently not aware that maintenance workers from Amey, the contractors, are on the wing, they do not know what, if anything, has been done, and repairs are often signed off by Amey when they are not completed or reoccur very shortly afterwards. The design of these wings, where there are no clear lines of sight, also facilitates damage being caused by the prisoners themselves.

Not only are A and B wings in a very poor state of repair, but they have also been the subject of problems with the supply of hot water and power outages. Broken equipment, such as the washing machine on A wing, has remained out of service for months, all of which was also reported last year.

There have been problems with the residential units across the prison. Worst of all were G and H wings where, yet again, from November onwards, there were frequent problems, with a lack of heating and hot water. Again, Amey did not always attend promptly. Some prisoners on G wing had no heating in their cells for months. A very expensive temporary boiler was installed outside the wing, but this has not entirely solved the problems, which persisted until April. These two wings have also been subject to power outages. In addition, C and D wings have had major problems with heating and hot water in the latter part of the reporting period and are now also running on a similar unit to the one installed outside G and H.

The Board is concerned about the condition of the flooring on K wing. Repairs have been ongoing during most of the reporting period but are still not complete; this wing has also been subject to frequent power outages.

E wing was without a clothes dryer for most of the reporting period, which led to prisoners drying their clothes on the railings. This not only caused a security problem by obscuring sight of the landing, but also raised health and safety issues.

The CSU has been without a hot plate in the servery since August 2024, which resulted in hot meals having to be served directly from the trolley.

There are several lifts in the prison and all of them have been out of order at least once during the reporting period. The newly installed lift to the visits hall has rarely worked (see section 7.4), and the stair lift on Haven wing, which houses older and disabled prisoners, is so frequently out of order that both staff and prisoners hardly ever use it. The lift that provides access to the healthcare unit has also broken down on numerous occasions, meaning that disabled prisoners could not access the area.

The Board notes that although Amey, the maintenance contractor, has been served with an improvement notice and some progress has been made, there remain problems and many repairs remain pending for far too long.

Rats have been a major problem during the reporting period. At the end of February 2025, parts of the kitchen were condemned, due to rat infestation in the roof, where the rodents had gnawed through and made a hole. Other areas in the prison were also affected and a pest control company has been attending the prison weekly. The Board is pleased to note that this issue has been largely addressed.

It remains the case that over 200 prisoners are sharing cells at HMP Wymott. Only a small number of these are large, double cells, while the majority were originally single cells. There is only room for one chair in these cells and prisoners must, therefore, either stand or sit on the toilet to eat their meals, and their clothing is often stored on the floor. Refusal to share a cell without a valid reason results in the prisoner being sent to the CSU.

The kitchen continues to struggle to cater for nearly 1200 prisoners; the facility was originally designed to cater for 800 prisoners and there has been no increase to its size since then. There are major problems with infrastructure and equipment, not least damage caused by rat infestations.

Staff shortages have led to frequent instances of regime slippage, which has a serious impact on the production of meals, especially in the afternoon. The kitchen has also suffered from staff shortages during the reporting period and the length of time taken to security-clear workers has been considerable.

An ongoing concern for the Board is the poor supervision of the trolleys and the serveries, especially on the category C side of the prison. Almost all IMB weekly reports mention issues such as the lack of proper protective clothing for serverly workers, poor portion control, prisoners climbing over the counter and eating or vaping behind the serverly.

Special diets remain a problem for the kitchens. These diets are more expensive than the main menu and the kitchen staff are to be commended for the way in which they cope with this, especially in the face of the supply problems that have confronted them. It is also the case that the Board received few complaints about the food during the reporting period.

5.2 Segregation

Prisoners who are subject to segregation are held in the care and separation unit (CSU), a specialist unit that comprises 13 regular cells, two special accommodation cells (where items such as furniture, bedding and sanitation are removed in the interests of safety), two safe cells, one of which is not used as it does not have appropriate fittings, one constant supervision cells and a neurodiversity room. At one point, there was a plan to fit out a room for storing and issuing medication, but this has not happened.

The officers who are detailed to work in the CSU appear to form a cohesive and effective team. They are extensively trained in a range of areas, including the use of the body scanner, and are offered support, through the psychology service, for what is a particularly difficult role. The Board has routinely praised these officers for their

dedication and the support they offer to some of the most challenging prisoners at Wymott.

The average number of prisoners who have been held in the CSU has varied between 10 and 13 over the reporting period. From time to time, numbers have exceeded this, as some prisoners see the CSU as a way of gaining a transfer to another prison, so their behaviour on the wing reflects this. In October 2024, the prison introduced a ban on vaping in the CSU, in an attempt to deter this practice, with prisoners initially being issued with nicotine patches to help with the transition, before being required to purchase their own.

All prisoners who are signed up under Rule 45 (where they are segregated for self-protection or for good order or discipline/GOoD) are scheduled to attend a segregation review board (SRB) within 72 hours of the initial authorisation, with the meeting being chaired by a Governor other than the original authorising Governor. At this stage, the IMB should be notified of the prisoner being signed up and advised of the date and time of the SRB meeting, although this has not always happened, particularly if the officers on duty are not regular CSU staff. Following the initial review, prisoners are subject to an SRB every 14 days or less (or seven, in the case of a young offender).

During the reporting year, members of the Board have observed 214 SRBs and have been generally satisfied that the process has been conducted in a fair and appropriate manner. One concern that the Board has raised over the year has been the lack of information about a prisoner that some Duty Governors have displayed, particularly if conducting an SRB at the weekend, and the prison has taken steps to address this.

The prison reports that the average length of stay for prisoners in the CSU ranges from seven in July to 17 in October 2024. Over the year, there have been two prisoners whose stays were much longer (one six months and the other three months), as they waited for a bed to become available in a secure mental health unit (see section 6.3). The Board is concerned that these transfers often take many weeks to action and, as a consequence, prisoners are being held in an inappropriate and unsuitable setting.

There has been a small number of instances where the healthcare unit has failed the health algorithm and, therefore, did not support segregation. In these cases, a multidisciplinary team meeting is held and the healthcare advice can be overruled. A member of the IMB should be invited to observe these meetings but, inevitably, they are held at short notice and the IMB has been neither invited nor informed. If prisoners are placed in special accommodation, where basic items have been removed in the interests of safety, the Board should be informed immediately and notified again when the prisoner is moved out. Use of special accommodation in the CSU is relatively unusual (just five cases over the reporting year); in almost all cases, the length of stay has been minimal (usually minutes rather than hours) and the Board has been appropriately notified.

5.3 Staff and prisoner relationships, key workers

Low staff numbers have meant that it has been more difficult for officers to build trusting relationships with prisoners. Regime restrictions have increased frustrations among prisoners although, surprisingly, there have been fewer prisoner-on-staff

assaults during the reporting year: 32 compared with 40 in the previous year. Key work has been intermittent, with officers detailed for key work often being redeployed to other duties at short notice, although there has been an improvement in the quality of recording of those sessions that did take place.

5.4 Equality and diversity

The diversity, equality and inclusion (DEI) committee has continued to meet every two months and a Board member attended several meetings as an observer. Most of the wings were represented and the prison continues to actively recruit new representatives. The prison also held regular focus groups for a number of specific cohorts, such as Gypsy, Roma and Traveller, LGBTQ+, veterans, and transgender prisoner communities. In conjunction with the chaplaincy team, the DEI manager has organised events and festivals throughout the year to raise awareness and celebrate the history, characteristics and needs of various groups. These seem to be well-received and supported.

At the end of the reporting period, the prison held 44 foreign national prisoners. The Home Office Immigration Enforcement Agency attended the prison periodically to hold 'surgeries', and prisoners were able to submit questions in advance. The prison has appointed a new foreign national prisoner lead so that the prisoners have a local contact.

In March 2025, approximately 29% of the prison's population were 50 and over, mainly made up of prisoners convicted of a sexual offence (PCoSO). Many of them attended the Salvation Army's come and meet each other (CAMEO) group to socialise.

The prison holds a significant number of older prisoners with complex physical health needs. Many of them are supported by 'buddies' (a fellow prisoner trained to offer peer help, often with daily tasks such as collecting meals) and just over 100 have personal emergency evacuation plans, or PEEPs (which provide assistance for those who cannot get themselves out of the prison unaided in an emergency). Each man has been allocated an assistant who will provide support in case of an emergency.

The Board has expressed concern that the lift on the Haven unit, which allows prisoners to access the healthcare unit and the chapel, was frequently out of use. The key to the concourse lift, which enables disabled prisoners from the wings and visitors with mobility issues to access the chapel and visits, was frequently missing, but the Board understands that additional keys have now been ordered.

Young prisoners (25 and under) make up approximately 6% of the prison population, with around two-thirds located on the main category C side. Young prisoners were disproportionately represented in disciplinary issues and the DEI manager is exploring activities for them. A Duke of Edinburgh's Award scheme programme was being planned at the end of the reporting period and the Board commends the manager for their work on this.

At the end of the reporting period, the prison held six prisoners who identified as transgender; HMPPS is reviewing its procedures to ensure that prisons are in compliance with the recent Supreme Court Ruling on birth gender.

Complaints relating to the protected characteristics were dealt with through discrimination incident reporting forms (DIRFs). A total of 38 DIRFs were received during the reporting year: 12 related to religion, 11 to disability, eight to ethnicity; four to sexual orientation; and three to gender. Fifteen complaints were proven and 21 unproven, while two were withdrawn by the prisoner. The process was quality assured by an external assessor from the charity, Manchester Survivors.

5.5 Faith and pastoral support

During the reporting year, the chaplaincy team provided spiritual support to prisoners from a range of faiths. Regular services were held, as well as feast day celebrations. The chaplaincy team facilitated individual prisoner visits to the chapel and visited prisoners in their cells on request. The family liaison team also supported bereaved prisoners and families.

The head chaplain left in May 2025, and will be a big loss to the prison and to the prisoners; a temporary internal promotion has been made to provide continuity.

5.6 Incentives schemes

Revisions to the local incentives scheme policy were issued in June and July 2024 and, again, in March 2025.

The policy now includes sanctions for prisoner who refuse to attend scheduled induction sessions, as well as for those who refuse to share a cell in cases where the cell sharing risk assessment does not preclude it. The Board notes that the prison has applied this sanction rigorously, even though many cells are not suitable for double occupancy (see section 5.1).

Otherwise, the Board considers that the prison has applied the policy in a fair and consistent manner; that stated, some applications were received from prisoners who were not happy with the decision taken, did not understand the reasons for the decision or were unclear about the appeals process.

5.7 Complaints

The prison recorded 2411 complaints in the reporting period, which included 237 stage 2 appeals (COMP1A forms), where the prisoner was not satisfied that the original complaint had been adequately addressed. The greatest number of complaints related to finance, property and mail, residential, sentence management and work/activities. During the year, there were several complaints that related to damage to personal electrical equipment arising from power interruptions in the residential units.

The Board monitored a sample of responses to complaints throughout the year and these were mostly consistent with the values of Procedural Justice (voice, respect, neutrality and trust). Most complaints were responded to within the HMPPS timescale, but a small number remained unresolved for significant periods. Sometimes, prisoners sent in IMB applications regarding the complaints process and they could also refer the matter to Independent Prisoner Complaint Investigations (IPCI, which is part of Prisons and Probation Ombudsman) if they had exhausted the prison complaints system.

In the reporting year, 86 confidential access complaints were accepted by the prison Governor or Prison Group Director (PGD). This is a substantial reduction from the

previous year. The Board found that some prisoners misunderstood the purpose of confidential access complaints (COMP2 forms) and that a significant proportion were rejected by the Governor or Prison Group Director (PGD).

The Board is concerned about the time taken by some other prisons to respond to prisoners' complaints, particularly about property on transfer. In the reporting year, 177 complaints were referred to other custodial establishments. A total of 30 of these complaints took more than 30 days to resolve and the complaints clerk had to send reminders on numerous occasions.

The Board has carried out an audit of complaints' responses and considers that the process is well managed by the prison. At the end of the reporting period, only 19 (fewer than 1%) complaints had not been resolved.

5.8 Property

The Board remains concerned about the failure of property to accompany a prisoner on transfer from another prison. Many prisons fail to respond to prisoners' complaints in a timely manner (see section 5.7). There continues to be a significant number of complaints to the Board regarding this matter.

Cell clearances continue to be problematic, especially in relation to shared cells. From the Board's observations, these are not always carried out in a timely manner or documented correctly. Some prisoners complain that their property has been stolen or lost, resulting in financial claims against the prison. A significant number of these have been successful, as the prison has accepted liability for their loss.

There has been an improvement in the procedures for receiving parcels into the prison and there are now fewer problems, although delays in issuing them can be lengthy, as all parcels are checked by the sniffer dogs.

6. Health and wellbeing

6.1 Healthcare general

For most of the reporting year, Greater Manchester Mental Health NHS Foundation Trust continued to provide healthcare services, with Smart Dental providing dental care and Delphi Medical providing substance misuse services (SMS). As reported last year, the contract was up for tender during the year and, in April 2025, Practice Plus Group (PPG) took over the provision of healthcare services, including SMS. Dental care is now contracted to Time for Teeth. Many of the existing staff were transferred over, including the dentist. The initial handover was completed very quickly, albeit with a few transitional problems. For example, the Board has raised concerns about the significantly longer time PPG's policy states for responding to complaints, and this is being reviewed.

A new head of healthcare started in July 2024 and they have introduced greater co-ordination in providing regular updated data to prison management. A Board member meets with her regularly to discuss issues of concern. Staffing levels have continued to be problematic throughout the year, but this seems to be improving towards the end of the reporting year, as a number of new roles have been created by the new provider and recruitment is ongoing.

Accommodation continues to be inadequate, although a few clinics are now delivered on the wings. The waiting room on the PCoSO side is often overcrowded, with insufficient seating, which is exacerbated by delays in returning prisoners to the wings after being seen.

The prisoners' healthcare forum has continued to meet monthly and provides a valuable conduit for prisoners to raise concerns with health and prison managers through their wing representatives. A Board member observes this and finds it a useful monitoring resource.

During the reporting year, the Board received 64 applications from prisoners relating to aspects of healthcare. This compares with 52 in the last reporting period and remains the highest category of applications received. The majority of these concerned medication or appointments.

6.2 Physical healthcare

The Board has continued to be concerned about medication management and distribution. Prisoners regularly report non-receipt of medication: this can be due to a variety of reasons, such as the medication not being available or the regime making the prisoner have to choose between queueing at the medication hatch or attending work or a visit.

'In-possession' medication is only dispensed once a week on each wing and, if the prisoner does not receive it then, they may have to wait another week if healthcare staff will not dispense it at another time. This can be problematic if the prisoner has not ordered it in ample time.

On most wings the dispensing hatch is on the first floor. Prisoners with mobility issues are located on the ground floor and have to use a lift to attend the hatch. When the lift is not working, as is often the case, Board members have been told that healthcare staff sometimes refuse to take the medication to the prisoner. While the

Board understands that dispensing controlled medicines requires two members of staff, prisoners should still receive their medication regularly and in a timely manner.

The Board continues to be concerned about the number of missed healthcare appointments, despite efforts by the prison and the healthcare unit to devise a reliable system for notifying prisoners of their appointments. In January 2025, 278 prisoners did not attend (DNA) their appointments, while, in May, the figure was 279; the highest rates of DNA are for GP and healthcare assistant appointments. Reasons for non-attendance include prisoners not receiving appointment slips, prisoners refusing/no longer needing the appointment, and lack of escorts to facilitate. It is not uncommon for a prisoner to arrive at the healthcare unit not knowing why they are there or to be told that they are 'not on the list'.

The prison is contracted to provide three hospital escorts in the morning and afternoon. This number was frequently being exceeded, leading to decisions having to be taken to cancel some appointments. Some good work by the prison healthcare support manager and the head of healthcare has resulted in better advance planning so that few appointments now have to be cancelled by the prison. Late cancellation of hospital clinic appointments by the hospital is a cause of anxiety and frustration for prisoners. They may already be in reception, waiting to go out or, on occasion, they have arrived at the hospital only to be told the appointment had been cancelled by the hospital but the prison seemed not to have been informed.

The winter vaccination programme worked well this year, with prisoners attending clinics in the CAMEO unit. Take-up was consistent with that in the community.

Provision of much-needed health-related equipment is inconsistent. One prisoner has been waiting for a CPAP breathing assistance device for over six months. Prison records show that at least two of these machines have been delivered to the prison but have then gone missing.

The prison dentist was without a working treatment chair for a number of weeks, such that the waiting list for treatment increased alarmingly. However, the Board commends the dentist for the supreme effort they made to catch up once the new chair was in place. Waiting time for a routine appointment was 145 days in May 2025. Prisoners speak highly of the dentist and the service they receive.

6.3 Mental health

The Head of the mental health team retired when the contract came to an end and was replaced by an internal appointment, which was good for continuity.

Referrals to the mental health team increased during 2024-2025, possibly due to population pressures to locate younger prisoners and those earlier in their sentence who may find it more difficult to adapt to prison life. Approximately 100 prisoners were case loaded across five mental health nurses in February 2025, with another 20 receiving psychological services. In addition, the nurses carried out welfare checks and attended ACCT reviews and segregation review boards. Under the new contract, staffing levels have improved, although there still seems to be a significant reliance on agency staff.

The main issues that concerned prisoners were delays in getting to see a mental health nurse, wanting to be recommended for a single cell, and access to medication for ADHD (attention deficit hyperactivity disorder).

HMP Wymott does not carry out neurodiversity assessments, but prisoners with self-reported ADHD tell staff that they find the prison's structured regime helpful, as it provides them with routine.

Waiting time for places in secure mental health units are still too long, due to shortage of suitable spaces, the longest period this year being around six months. The recommended maximum wait of 28 days has now become mandatory, but it is unclear how this can be enforced under the current bed shortage.

6.4 Social care

Social care continues to be provided through Lancashire County Council, with a social worker attending the prison regularly to carry out assessments. Prisoners can self-refer or may be referred by prison staff.

The Recoop buddy scheme has continued to thrive, with increasing numbers of prisoners being supported. Buddies work closely with the social worker; they have regular meetings to share their experiences and to receive ongoing training sessions.

The Board is particularly concerned about wheelchair access and maintenance. A physiotherapist carries out needs' assessments, but responsibility for providing individual wheelchairs is unclear and can take an unacceptably long time. Maintenance is also slow, as requests have to be referred to community wheelchair services. Buddies report that there are insufficient general-use wheelchairs to enable them to escort clients to activities around the prison. The Board continues to closely monitor the situation.

6.5 Time out of cell, regime

The regime and time out of cell during this reporting year have again been significantly impacted by low staff numbers and the lack of purposeful activity for Cat C prisoners. Weekend wing lock-downs have continued to be a regular occurrence, sometimes at very short notice. This can cause anxiety to the prisoners, particularly individuals who are neurodivergent. The prison has made efforts to facilitate access to the gym, but library visits have been very limited (see section 7.1).

6.6 Drug and alcohol rehabilitation

For most of the year, drug and alcohol rehabilitation services (DARS) were provided by Delphi Medic. But, from April 2025, the renamed substance misuse service, or SMS (including the Intermediate drug treatment service), have been part of the PPG provision.

Prisoners who are found to be 'under the influence' (UTI) are routinely referred to the SMS via the robust recovery team, although not all are willing to engage. Prisoners can also self-refer. The number of referrals has increased through the reporting year, as the availability of drugs within the prison has increased. Weekly or monthly Buvidal injections are offered to some prisoners as an alternative to daily methadone medication.

Low staff numbers limited the service to prisoners during the first half of the reporting year, and the changeover in April was challenging, but the service manager reports that the therapeutic community's (TC) SMS staff and prison staff on the wing are now working together more effectively. Population pressures have led to the location

on the wing of 'lodgers' - prisoners who are not on the TC programme; these men have increasingly hampered the work of the TC by introducing illicit substances onto the wing.

6.7 Soft skills

The Board is disappointed to report that the Asset Based Community Development (ABCD) programme has dwindled significantly, due to shortage of staff to facilitate the groups. From April 2025, it has been included as part of purposeful activity, so it is hoped that this might help to revive the programme.

A music group continues to meet in the chapel at lunchtime, but other opportunities to develop soft skills have been limited and access to the library restricted.

At the end of the reporting year, the prison began to work on a new initiative to engage vulnerable prisoners in activities in order to support and bring them together. The Board hopes to be able to report how this has developed in its 2025-2026 report.

7. Progression and resettlement

7.1 Education, library

According to the Prison Education & Library Service for Adult Prisons in England Policy framework, 'The prison library should provide an accessible service which has a focus on supporting learning, improving literacy and other barriers to effective resettlement. It should promote reading as a source of pleasure and provide prisoners with opportunities for wider cultural engagement.'

During the reporting period, there has been very little library access for the prisoners. Those who are in education, in classrooms located in the library, were able to access the library whenever they were in education. All other prisoners located on the wings or at activities were only able to access the library when wing staff or escorts were available to escort the men across. Prisoners have stated how much they value their time in the library. The calm environment helps with their mental health and social interaction. As most prisoners on the main category C side of the prison have not been able to attend the workshops throughout the year, loss of the library as well has had a negative effect on their mental wellbeing.

The number of librarians has been reduced from four to two and both of these are part time. As a result, there were 71 sessions when the library was closed. These were mainly due to regime restrictions and when one of the librarians was sick or on holiday. To compensate for the lack of access, some small satellite 'libraries' have been set up on certain wings.

Access to the library is a statutory entitlement. Whilst the Board understands that the staffing issues have had a significant impact on the prison's ability to satisfy this requirement, we are seriously concerned about the lack of access. Attendances in education from the PCoSO side of the prison were over 85%; the main category C side had significantly lower attendances, with some of these prisoners only attending when education had a gym session slot. This has been addressed and full attendance is now required, except where a justified absence is given. This has led to an increase in main category C attendance in education.

There were several days where education was closed due to insufficient staff to facilitate escorts. This led to sessions of education staff being in classrooms without any prisoners which, consequently, affected the department's ability to reach its attainment targets. Education is now considered a 'priority area' and education sessions should not be cancelled.

The introduction of a new computer system in October 2024 had a positive impact for prisoners transferring in from other establishments. All the coursework that had been electronically stored at other jails is now automatically available to the prisoners on arrival to HMP Wymott. Previously, saved data could not be transferred to computers at Wymott and the work was lost. The new system also provides a broader use of the internet, with controlled and supervised information gathering for prisoners researching subjects on the internet. Extra learning resources can now be placed in individual accounts. This should enable prisoners to be better supported with individualised work and lead to greater attainment.

A number of new initiatives have been introduced during the reporting year: a new specialised maths course has been implemented; there has been an increase in the

number of qualified peer mentors and members of the Shannon Trust; and a reading specialist joined the education team.

Other activities organised by the education staff included Black History Month and the Festival of Learning, which celebrates learners' achievements. Staff informed the Board that achievements for the neurodiverse prisoners were better than for many other prisoners.

Support for learners in the CSU improved, so that, for example, a prisoner who was close to taking his English exam was allowed to remain in the CSU for an extended period. Education staff continued to support him through the course and a room in the CSU was provided so he could take the exam, which he passed.

7.2 Vocational training, work

Throughout the reporting period, there has been very limited work for the main category C prisoners, following the closure of the category C workshops because of the failure of the building's roof. Work to replace the entire roof started in January 2025, after another partial repair failed. By the end of the reporting period, the roof has been fully replaced and insulation is in place. An action plan is now in place to refurbish the toilet areas in the workshops and install a rest area, food servery and classroom, ready for the longer working hours' initiative. The workshops are expected to be functioning in September 2025.

Workshops that could be opened were running on part-time working to allow a greater number of prisoners to access purposeful activities. These included a bicycle repair shop, lawn mower repairs, window cleaning, barbering, and hotel warehousing. There are approximately 125 part-time and 12 full-time positions for the category C side of the prison. Attendances for these positions have been low in many of the workshops and sanctions are placed on prisoners who refuse to attend work. Some prisoners said that they didn't feel that there was an incentive to attend work for half days.

The Board is very concerned that when the category C industries finally fully opens, it will be a challenge to get the prisoners back into work. These prisoners have had several years of limited opportunities to work, when they were not being rehabilitated to gain experience and qualifications to enable them to gain employment on release.

In July the PCoSOs working in the laundry began the 'longer working hours' scheme, which enables them to work a full day, as they would in the community. This will prepare them for the working environment outside the prison. Employment opportunities for PCoSOs in the community can be limited due to the nature of their convictions, so business courses have been introduced for these prisoners to help them develop skills in running their own businesses such as web design or horticulture.

There have been times during the year when delays in security vetting of prisoners for approval to work in their chosen area have led to long delays in some prisoners gaining employment. The Board received 29 applications regarding purposeful activity during the reporting period, of which over 40% related to the time taken to obtain a job.

Prisoners working in the gardens and woodworking workshop have contributed to schemes in the community such as the village 'Croston In Bloom', bird and bat boxes for Cuerden Valley Park and pine marten nest boxes in Cumbria.

7.3 Offender management, progression

Low staffing throughout the year has meant that prison offender managers (POMs) had to be redeployed to support the prison regime. Key work sessions were also curtailed for the same reason. This has meant that prisoners were not able to meet their key worker on a regular basis and opportunities to help them with problems were not always available.

Offender management unit (OMU) staff have had to prioritise prisoners who were eligible for the early release schemes. This has resulted in other prisoners having had limited access to their POMs, particularly when POMs had to be deployed elsewhere in the prison to support the regime.

The Board received 45 applications regarding sentence management. Over 50% of these related to prisoners wanting transfers to other prisons or release under the early release schemes. An additional 26 applications were received, specifically regarding transfers to other establishments.

In July 2024, assessments and delivery of existing offending behaviour courses, such as Kaizen, were being wound down, ready for the introduction of the new Building Choices accredited programmes. Prisoners are still coming into Wymott with sentence plans that identify older courses such as Kaizen. Building Choices does overlap in many areas with the previous courses and the programmes team checks and reassures the prisoner that the new course offers skills training that will address the areas highlighted in their sentence plans.

Waiting lists for places on programmes are prioritised according to the prisoner's release date, which can cause some frustrations.

The input from the neurodiversity support manager has had a positive impact on neurodivergent prisoners, as more of these men are now attending and remaining on the programme relevant to their sentence plan.

7.4 Family contact

The family liaison service provider remains Partners of Prisons (POPs); they are supported by the prison's family development officer. Their strategies to assist family contact include family days (which bring together prisoners and their families outside of their statutory entitlement to social visits, usually in more informal settings), new fathers' days and other day-long special visits. These are much appreciated by both families and prisoners. There are also social video calls and other activities such as Raising Readers, which enables prisoners to share a book with their family over the phone.

The family forum continues to operate and is an opportunity for families to meet to express problems they may encounter or to share positive ideas for the future.

The major problem regarding social visits in the reporting period is, again, access for visitors with mobility issues. The new stair lift, enabling those with mobility issues to access the first-floor visits' areas, has never been properly functioning and has not worked at all for the second half of the reporting period (see section 5.1). Visitors in wheelchairs or those who cannot climb the stairs have to enter the prison via the

vehicle lock. They then proceed through the main concourse to the lift in order to gain access to the visits area. This entails the possibility of encountering prisoners being escorted to activities. At one point, the stair lift was stuck halfway up the stairs and visitors had to negotiate around it. This situation has led to some visitors not being able to attend at all. The Board considers this arrangement to be highly unsatisfactory and not a decent manner in which to treat visitors.

Staff shortages have again led to delays in adding numbers to prisoners' PIN phone lists and also to the handling of prisoners' mail. This has created difficulties in contacting solicitors, and in receiving and responding to legal mail within time limits.

7.5 Resettlement planning

Although HMP Wymott has not been designated as a resettlement prison, 290 prisoners were released in to the community during the reporting period, at a rate of about 15-30 per month. More prisoners were released in the autumn than at other times of the year, because of the effect of changes to early release schemes.

The process to support release from prison is coordinated by the resettlement team and starts 12 weeks prior to a prisoner's release. This includes providing help with securing accommodation, personal finance and banking, obtaining identification documents, health support, employment and vocational training.

The employment hub is staffed by an employment lead and advisers, who have strong links with potential employers, business networks and training providers. They provide assistance with writing CVs and applying for jobs. Interviews whilst the prisoners are still in custody are facilitated either by the video conference facility or in person at the prison. The CSU staff have proactively helped prisoners who were segregated at the time of their interview.

A representative from the Department for Work and Pensions (DWP) attends the prison regularly in order to assist those being released with applying for state benefits and the state pension, and with access to housing.

The employment hub organised several employment days during the year, where employers and training providers from different sectors were able to showcase their opportunities. An employment advisory board (EAB) provides strategic advice and guidance on training and employment. The prison held a 'ways into work' event during the year and a skills session for those wishing to enter employment in the construction sector.

During the reporting year, 37 prisoners (about 12% of those released) had employment placements (including apprenticeships and self-employment) after release. The prison was also successful in placing prisoners on vocational training courses, such as commercial driver training and warehousing and logistics.

Prisoners released during the year went to live in a variety of accommodation as shown in the table, below.

Accommodation type	Number in category
Permanent/private housing	86
Approved Premises	137
Short-term accommodation (Community Accommodation Service CAS-2 and CAS-3)	23
Supported living and rehabilitation centres	10
No fixed abode	31
Immigration Removal Centre and custody	3
Total	290

Table 7.1: First night accommodation for prisoners released between June 2024 and May 2025

Every effort is made to secure accommodation in time for a prisoner's release. The prison liaises with community offender managers (COMs), who have a duty to refer prisoners to local authorities in cases of potential homelessness. The custodial manager can escalate a prisoner's case if there are problems securing accommodation on release.

Despite this, 31 prisoners released during the reporting period did not have first night accommodation arranged; the Board will continue to monitor this area. Reasons for release to no fixed abode might be:

- it was the prisoner's preference;
- the prisoner was released at very short notice (e.g. immediate release after a parole board hearing);
- there was no appropriate accommodation available, or arrangements could not be made with the prisoner's family.

Prisoners released with no fixed abode can find it difficult to obtain employment and a basic bank account. Changes to the early release schemes have increased pressure on the resettlement function.

Practical help is given on the day of release, such as with clothing and luggage and providing transport to the bus/train station. Overall, the Board considers that resettlement provision at HMP Wymott is good and the resettlement team manages the process well, given the challenges of prisoners being released at short notice. Prisoners seemed to engage well with the resettlement process.

8. The work of the IMB

Unfortunately, the Board was not able to retain the two new members recruited last year. However, we were pleased to welcome back an experienced member from sabbatical.

Board members have continued to carry out, and report on, weekly monitoring visits, respond to prisoners' applications and meet monthly with the Governor to discuss their findings. Board members also monitor meetings relevant to their area of specific interest, in addition to the prisoner-led prison council, which helps to identify prison-wide issues of concern to the prisoners.

The Board reports regularly to the north west regional representative and the Chair and Vice Chair have attended quarterly regional IMB meetings to learn of new developments and share good practice.

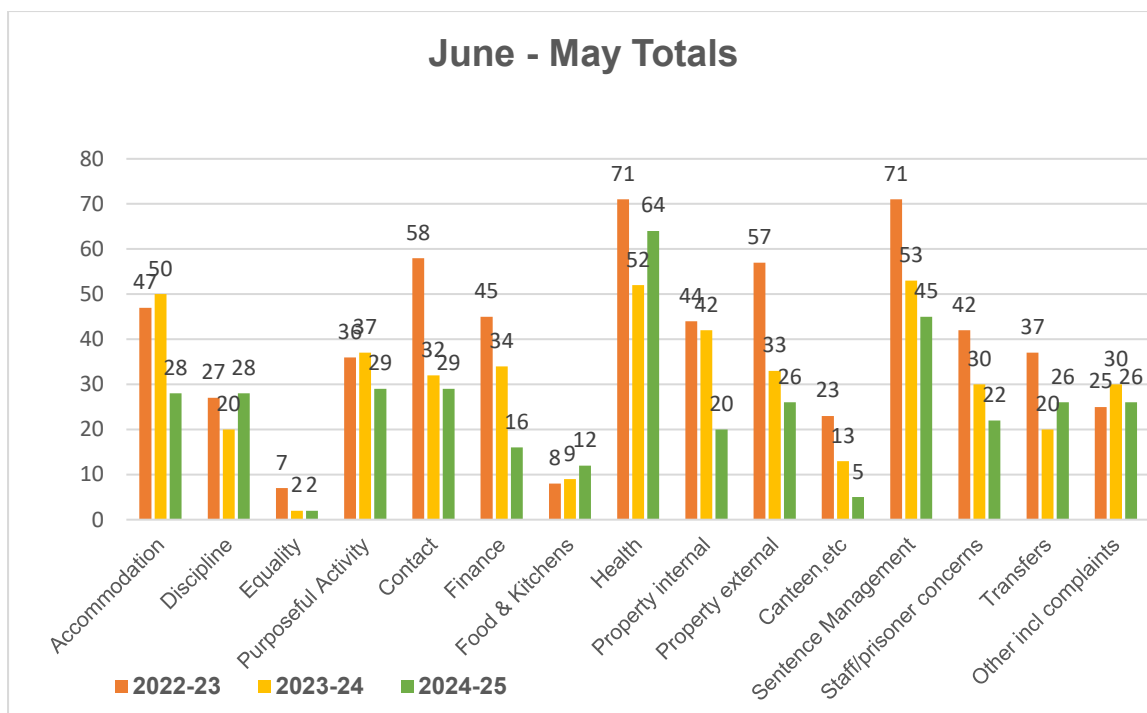
Board statistics

Recommended complement of Board members	16
Number of Board members at the start of the reporting period	8
Number of Board members at the end of the reporting period	6
Total number of visits to the establishment	507

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	50	28
B	Discipline, including adjudications, incentives scheme, sanctions	21	28
C	Equality	2	2
D	Purposeful activity, including education, work, training, time out of cell	37	29
E1	Letters, visits, telephones, public protection, restrictions	33	29
E2	Finance, including pay, private monies, spends	34	16
F	Food and kitchens	9	12
G	Health, including physical, mental, social care	52	64
H1	Property within the establishment	42	20
H2	Property during transfer or in another facility	33	26
H3	Canteen, facility list, catalogues	14	5
I	Sentence management, including HDC (home detention curfew), ROTL (release on temporary licence), parole, release dates, recategorisation	54	45
J	Staff/prisoner concerns, including bullying	30	22
K	Transfers	20	26
L	Miscellaneous	30	26
	Total number of applications	461	378

All new prisoners receive a letter and leaflet from the Board, explaining the role of the IMB and how they can make contact through the applications process. The Board logs all applications received and operates a rota system for responding to these. In almost all cases, this involves an initial visit to the prisoner within a few days, followed by a written response with the findings of any investigation.



Applications for last three reporting years

In our 2023-2024 annual report, we noted that the total number of applications had fallen by 23%, while this year has seen a further reduction of 18%. The two most frequently occurring topics - healthcare and sentence management - remain the highest in terms of applications; however, the proportions have changed, with healthcare accounting for 17% of all applications to the Board in the 2024-2025 reporting period (in 2023-2024, this was 11%). This was an increase of 23% on the previous year. In response to this increase, the Board has been monitoring healthcare applications and has found that most of these related to medication and missed appointments, including hospital appointments that were rescheduled or cancelled by the healthcare unit.

Approximately two-thirds of all applications were submitted by PCoSOs, a slightly lower percentage than in the previous year.

The Board has received far fewer applications about property in the reporting year, particularly for items within the establishment, where the number has more than halved from 42 to 20. Those that have been received relate mainly to unsatisfactory and/or undocumented cell clearances and items held in reception for which officers need to arrange collection but which has not happened (see section 5.8). On investigation, the Board has found that these are almost always due to staff shortages, either in reception or on the wings.

Interestingly, the number of applications concerning accommodation has almost halved since the previous year. The Board believes that this is, at least in part, due to the acceptance of prisoners that the IMB is unable to take direct action to improve the conditions in which they are housed, rather than any real improvement in conditions.

Annex A

Service providers

- Maintenance: Amey
- Education: Novus
- Escort contractor: GeoAmey
- Healthcare and pharmacy: Greater Manchester Mental Health NHS Foundation Trust (GMMH), with support from other providers for additional services up to 31 March 2025; Practice Plus Group (PPG) from 1 April 2025.
- Dentistry: Smart Dental up to 31 March 2025; Time for Teeth from 1 April 2025.
- Mental health: GMMH up to 31 March 2025; PPG from 1 April 2025.
- Substance misuse programme: Delphi Medical up to 31 March 2025; PPG from 1 April 2025.
- Social Care: Lancashire County Council
- Visitors' centre: Partners of Prisons (POPS)



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