

HMP BRIXTON

Independent Monitoring Board

Annual Report to the Secretary of State

1 July 2009 to 31 August 2010

Section 1

STATUTORY ROLE OF THE IMB

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and IRC to be monitored by an independent Board appointed by the Home Secretary from members of the community in which the prison or centre is situated.

The Board is specifically charged to:

(1) 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.

(2) inform promptly the Secretary of State, or any official to whom he has delegated authority as it judges appropriate, any concern it has.

(3) 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.

Section 2

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Section 3

DESCRIPTION OF THE PRISON

HMP Brixton is a category B male local prison serving a number of courts in South London. The site has been in use since 1819: the buildings are forbidding, and costly to maintain. The prison now has an operational capacity of 798, with a very high turnover, of about 700 prisoners a month. On a heavy day, as many as 25 newly sentenced or remanded men might turn up from the courts. The exact numbers are often not clear until after the courts close.

Brixton houses a mixture of remand and sentenced prisoners in one healthcare and four residential wings:

- A 143 cells, mostly doubled, 1 for disabled
- B 86 cells, some doubles
- C, for prisoners on their first night and early days in prison, with 69 cells (all doubled, 1 for disabled). Vulnerable prisoners are on the top floor
- G 151 cells, 61 doubles (1 disabled), is the centre for drug treatment programmes. From spring 2010, detoxing prisoners have been on the top floor
- D, the healthcare wing, has 21 cells (6 potentially double) and is mainly used for prisoners with acute mental illnesses.

There are about 30% foreign nationals, some with poor understanding of English. The population of the prison is also quite varied in age profile, and the crimes for which the men are sentenced or on remand. Drug and phone use, and bullying, have to be kept under constant vigilance.

Healthcare services are delivered by a consortium led by Care UK, including the South London and Maudsley NHS Foundation Trust (SLaM), with pharmacy and other services provided by Lambeth Community Health, and dental services by Weymouth Group. NHS Lambeth (the Primary Care Trust) is the commissioner and holds the contract with Care UK, which was recently extended to 2013.

The Core Day regulates provision of exercise periods and purposeful activity for each wing, for half the day only, with very limited out of cell activity in the evenings. There is an Incentives and Earned Privileges (IEP) scheme: on average, fewer than 10 prisoners are on Basic, the lowest level.

Prisoners can pursue a range of education courses. The most popular are the NVQs available for prisoners working, for instance in the kitchen, with the St Giles Trust, or in the gym. Electric Radio, the award winning radio station, is also well subscribed. Prison managers are working to improve take-up and attendance at the courses provided under contract by Kensington and Chelsea College. Often, however, prisoners fail to complete even short courses because they are at court or transferred. A limited number of courses is also provided by the Psychology department.

The Chaplaincy team, for all the main religions of the world, are very active, and outside faith groups are involved in some of the services. The probation services, Borders Agency, CARAT, Adfam, PASRO and St Giles Trust are all active in the prison, and PACTS runs the Visitor Centre.

Section 4

EXECUTIVE SUMMARY

The Board's overall judgement is that Brixton is continuing to improve at a steady pace. This was recognised when its performance status was raised from 2 to 3. This is judged by national targets, so it is a real achievement within Brixton's constraints. These include the unsuitability of the buildings, the very high annual turnover – around 7,000 a year - the mix of remand and sentenced prisoners, around 30% foreign nationals. Staffing is already pared down to the minimum. For most of the year, the prison was running at about its operational capacity.

The Board recognises the contribution made by staff at all levels, and their daily commitment to the welfare of prisoners. Board members would like to thank Amy Rees, Governor from July 2009 to July 2010. Her energy and vision were crucial in driving forward structural change, and in ensuring that there was no loss of focus on priorities. She was strongly supported by the senior management team, and she could draw on, and encourage, initiatives from staff at all levels. We look forward to working with the new Governor, Ed Tullett

Welcome building improvements came on stream in the reporting year. The new kitchen is working very efficiently, and the food is varied and well cooked. New workshops were opened in the old kitchen accommodation, and the art class has been very successful. Generally, the wings and the surrounding areas are kept clean, and there is no major problem with vermin. An exercise yard was refurbished in the spring, in memory of the Governor's father.

There have been continuing improvements in healthcare, including extra funding to reduce the waiting list for dentistry. Efforts to prevent self-harm, through identification of prisoners at risk, have been very focussed, and record keeping has improved significantly. Sadly, there was one case of severe self-harm in May, and in July a death from natural causes.

In terms of security, more work has been done to prevent and deter visitors and staff from bringing forbidden items into the prison, including the use of two dogs, and more staff searching. A specific operation to prevent the illegal use of mobile phones in the prison started in July, with extra resources.

The Board strongly supports the Secretary of State's intention to consider alternatives to prison. At the time of writing, however, no formal proposals had been put forward, whereas cuts in public spending were already being decided. The Board strongly believes that at Brixton any more reductions in resource would create risks to the security of the prison.

Opportunities for rehabilitation are already low. This is because at Brixton the core day is reduced below the prison average. So prisoners are in their cells for much more than 16 hours a day, effectively because of overcrowding. There is not enough space for 'purposeful activity', cells have to be shared even when they are not adapted for it, and there is nowhere for men to eat at tables. Although there has been a reduction in numbers this summer, it is not yet clear whether this will continue, or how it can be exploited to improve conditions. In

NOMS' view, maximum use has to be made of Brixton, until and if more suitable provision can be made.

In these circumstances, the half day regime is the best that can be provided. But it means that welfare of prisoners is at a lower level than elsewhere, even other London locals, because activities and association are available alternately, each for only half the day, and there is no evening association, or evening visits. The target for purposeful activity is only 17 hours a week. The 'half day' regime is particularly damaging in the healthcare wing, where it constrains the provision by the healthcare team of a full therapeutic care programme to men who are acutely mentally ill. It is a tribute to staff throughout the prison that the difficulties of the regime and of the accommodation do not result in a higher incidence of discipline and security problems.

Matters for the attention of the Minister

- **No further reductions in the regime**
- **Improving safer custody standards**
- **Equivalence of healthcare provision, including the new healthcare centre**
- **Implementation of the Bradley report recommendations**

The Board's priority concern is that there should be no further reductions in the regime at Brixton, and that at least the current level of access to training, education, exercise, and workshops should be safeguarded. There should, if possible, be a reduction in numbers: the accommodation at Brixton is already poor, and it is indecent that men have to eat in their cells, often shared, with an unscreened toilet.

Secondly, the Board considers it essential that enough resources are provided to maintain and to drive forward the improvements in safer custody which have been made this year – for instance in reducing mobile phone use, and in searching visitors and staff. Already, as a result of budget pressures, the programme of voluntary drug testing has ceased, so that the two officer posts can be reallocated to even more urgent priorities.

The Board's next most pressing concern is ensuring that equivalence of healthcare provision is provided and maintained, and that the recommendations of the Bradley report are implemented fully. The present healthcare centre is unfit for purpose and does not provide equivalence of provision. Construction of a new one was to start in autumn 2010. At the time of writing, NOMS had put the capital funding on hold, both for the new centre and for refurbishment of the treatment rooms on the wings. The Board considers that this is unacceptable.

Any further deterioration from equivalence, were NHS funding to be reduced, or the successor to Lambeth PCT to be less committed to improvements, would jeopardise the NOMS commitment to treating prisoners with humanity, and also the prospects for their rehabilitation.

The Board believes it is essential for ministers in Justice and in Health to work together to maintain equivalence, in the light of potential funding constraints and the reorganisation of the health system; and to ensure better identification and treatment, throughout the justice system, of people with acute mental health problems and/or learning disabilities. As it did last year, the Board also calls on the Minister to work with his Ministerial counterpart in Health to facilitate speeding up the transfer of

prisoners to specialist mental hospitals, in line with the Bradley report recommendations of 14 days.

Section 5

CORE REPORTING AREAS

Diversity

Under a new head this year, HMP Brixton's diversity department continues to prepare staff well to deal with the challenges the prison throws up, and successfully draws together staff from all departments, alongside prisoners and representatives of external organisations, to implement a thorough and well thought out diversity action plan. The prison's achievements were rightly recognised by the receipt, in 2009, of a prestigious National Justice Award, as the top-rated establishment in the Commitment to Diversity team category.

The prison has a high proportion of foreign nationals in its population – about 30%, with up to 60 different nationalities represented - and this year has seen the welcome creation of a specific local policy for foreign national prisoners. This comes alongside the continuing use of a system specifically for foreign national prisoners to make a free five-minute international phone call each month, and a steady rise, overall, in the use of the expensive but valuable Big Word telephone translation service, to facilitate communication between prisoners and staff inside the prison. Foreign national prisoners also benefit from a flexible approach to the availability of support from UKBA immigration officials, who have been invited into the prison by the Foreign Nationals co-ordinator to offer case support.

A modified Incentives and Earned Privileges (IEP) policy has been introduced this year, and its application monitored carefully for fairness across all groups of prisoners. Data continue to show that percentages of the HMP Brixton black and minority ethnic (BME) population in each of the three categories are broadly within the expected ranges for fair distribution in most months. Given that the use of force is low for HMP Brixton as a whole, and therefore the risk of disproportion or statistical aberrations in trends is higher, it is impressive that the percentage of BME prisoners subjected to use of force remains consistently well within the expected fair range.

Work on diversity issues continues to have a broad focus. A local disability policy has been produced this year, and work done to investigate and mitigate reports of more negative experiences of prison on the part of Muslim prisoners, involving imaginative and high-quality events such as a showcase of inventions from the Muslim world. Major annual special events, such as Black History Month and Eid, have been complemented this year by celebrations of days of significance to the White British community (marking the days of patron saints of constituent countries of the UK) and others, as part of a policy of varying recognition of important dates from year to year to embrace a wide range.

Challenges remain, such as the difficulty that foreign national prisoners without visitors face in taking receipt of property, but the diversity team is aware of outstanding issues and well equipped to tackle them.

Learning and skills

The provision of education in Brixton, like other activities, is affected by the restrictions of the regime and the lack of evening and weekend activity, as well as the high turnover of prisoners. A high proportion do not complete even short courses, and library visits are lower than desirable. Courses that some offenders are required to complete are not available, but

NOMS operational pressures mean that such prisoners may spend several months in Brixton. In July 2010, for instance, there were 6 lifers in Brixton and 8 men on IPP.

This year, the prison management has been focussing on improving the take up of education. After some successes, this was disrupted by the education contractor's failure to arrange cover for a significant number of hours of staff leave in the summer. Attendance at education on any given day – ie half day, because of the regime – is about 100. This is about two thirds of capacity, and the prison should continue to try to drive up take up to nearer full capacity.

Training through employment is more popular, except for the new textiles workshop. The prison is considering how the equipment might be more fully used. Qualifications are available for workers in the kitchen, cleaners, and prisoners who are listeners or work with St Giles Trust.

Electric Radio Brixton continues to flourish and its qualification is popular. It is also used for communicating to prisoners – for instance, promoting the early release scheme (HDC).

Healthcare and Mental Health

Prisoners access healthcare services through dispensaries on the wing or by making appointments for the healthcare centre. Inevitably, the requirements of prison security and discipline affect how healthcare is delivered, but the commitment of staff is high. There have been very significant improvements in the last couple of years under Lambeth PCT commissioning, and these have been recognised by the Department of Health.

The healthcare wing, D, was designed as a small high security unit, and is therefore quite unsuitable for purpose. It provides up to places (the shared cells cannot always be used). For some of the year, D wing had a waiting list of three to five. Each patient has a dedicated nursing officer and deputy, and record keeping has improved significantly over the year. But despite staff commitment, it is impossible to provide full treatment for men with severe mental illness when they are locked up for more than half the day. For this reason, and because the proposed new healthcare centre would have only 14 beds, with a day care centre for non-acute treatment, it is essential that there are quicker transfers to psychiatric hospitals in the community. As of May 2010, the waiting time for transfer from Brixton to a community mental hospital was 47 days for the local health authority, and 9 days for other facilities. These figures vary by month, and there has been a significant improvement since the summer in transfer of mentally ill prisoners to hospital direct from the court. However, no additional funding is available to help with meeting the Bradley report target of 14 days' wait, or for better identification and support for prisoners with learning disabilities.

On the other wings, prisoners with physical disabilities cannot always be properly accommodated because there are only two suitable cells – for instance, prisoners who have mobility problems may have to be placed on an upper floor. Prisoners with acute physical illnesses or injuries are taken to hospital outside prison, with at least two officers accompanying the prisoner at all times. More generally, there are recurrent problems about prisoners' access to routine healthcare because of the restrictions in the regime, although the dispensaries on the wings are helpful. Care UK and the prison management have been co-operating to reduce the number of missed appointments, and there is a patient forum.

This year, there has been an increase in the number of prisoners arriving with drug problems – around 140 a month – and an increase in drink dependency, which is up 100% from two years ago. Services for detoxing prisoners have been reviewed and improved, with a dedicated landing on G wing. New staff have been recruited by Care UK, partly to cover the integration of the counselling service into healthcare. Prisoners will now be able to refer themselves for counselling. A new data system means that records can be transferred within the prison system (P NOMIS is also used). The average wait for a routine GP appointment is three days, and there are relatively few complaints to the IMB about medical appointments. In the middle of the year, there were several problems for prisoners with diabetes, including provision for new prisoners, and extra food for those who have to inject insulin during the long interval between supper at 4.30 pm and lunch at 11.30am. These problems now seem to have been resolved, and there is to be an audit of diabetes treatment.

The Board was very pleased that Lambeth PCT provided extra funding so that the new provider, Weymouth Dental Practice, could reduce the long waiting list for routine dental services.

Safer Custody

ACCTs

All officers have received foundation ACCT training, with more training for POs and psychologists. As a result, the standard of ACCT completion has improved significantly, aided by bi weekly checks by the SCD team and duty management team. The care plans are also checked to see that they are regularly reviewed, within the correct timeframes.

Death in Custody

In May, a prisoner made a suicide attempt and was taken to hospital where he was later bailed. The prisoner was not on an ACCT at the time, and there was a delay in reaching him because he had jammed the lock on his cell door. A prisoner died, from natural causes, in his cell between 16 and 17 July and this will be investigated as is routine.

SCD

The safer custody and decency team have monthly meetings to which the healthcare team, IMB and listeners are all invited to attend.

The board has concerns that this year the role of regional SCD coordinator has been removed – leaving little opportunity for learnings to be shared.

The board is reassured that the “ghosting” of inmates that occurred before the 2008 Prison inspection is no longer happening.

Listeners and First Nighters

There are presently 11 listeners in Brixton who have weekly meetings with the Samaritans and monthly with the healthcare management team. They have produced a DVD for prisoners on their first night. There is access to both a Samaritan phone and the listeners 24 hours a day. At present there are no listeners on G Wing and D wing.

Bullying

At present 3-4 violent incidents a month are reported. Because anti-bullying reps were perceived negatively, the responsibility for anti-bullying advice has been given to all reps. Victim/perpetrator plans are widely used, and are being extended further this year to all anti social behaviour.

Inquests

As in previous years, the Board has been concerned about the long delays in holding inquests on prisoners who die in custody – as much as four years for some Brixton cases.

This is unacceptable for the families. In correspondence with the Minister in June, the Board was assured that work was in hand to reduce the delays, and it will continue to monitor this.

Segregation/Care and Separation Unit (CSU)

For a prison of its size, and its diverse and shifting population, HMP Brixton has a small CSU, and makes little use of it. On average, there are two or three prisoners in the CSU, and sometimes none. There were few complaints from prisoners in the CSU, and the special cell was used rarely. Adjudications are held regularly and are fully recorded.

On one occasion a prisoner was put into the same holding cell as the prisoner whom he was testifying against, and was assaulted. The Board is satisfied that the prison management followed up this error properly, and took action to prevent a recurrence.

The Board is trying to establish a system where members may be present more regularly at reviews.

Section 6

Additional Reporting Areas

Canteen

The new system has eventually bedded down, and complaints to the prison have tapered off, to about 15 a month in July 2010. For some months in the reporting year there were very significant problems, and the prison had to allocate extra staff to deal with them. There is a 'new arrivals' pack – smokers and non-smokers. Prisoners who are absent at court on the delivery day, and so cannot receive one are able to get these packs. Ordering fruit is still a difficulty, however, which is disappointing in terms of encouraging healthier eating.

Chaplaincy

The refurbishment of the chapel has been welcomed by all the dozen or so faith groups which use it. There were some problems, around the introduction of P-NOMIS, in getting all members of faith groups to their services but there has been no recurrence. For Ramadan this year, the kitchens were kept open in the evening, and hot meals were delivered to the wings. This worked well.

Cleanliness

There is regular and thorough cleaning of floors and common areas. In D wing, cells are deep cleaned when possible. Because there are limited shower facilities, it is a problem when scheduled or emergency maintenance makes them unavailable. On the healthcare wing, prisoners often damage plumbing – one prisoner flooded three cells in two days. More time out of cell could reduce the costs of damage.

The vermin problem is being kept in check. However, there is no rubbish collection from the wings on Saturday and Sunday, and this means food refuse can be strewn about, and accessed by vermin.

Induction, Reception and First Nighters (C Wing)

This is a vital area of the prison's work, and many problems in the rest of the prison can be avoided if prisoners' first 24 hours in the prison are effective at solving initial problems and teaching them what they need to know. This is resource intensive. For instance, in the period February to May 2010, 1565 prisoners were seen by healthcare staff in reception. These are prisoners new to custody, transferring from another prison, or returning to Brixton on a change of status. Several aspects have improved over the past year:

- Induction information is now available in a wide range of different languages.
- The IMB is more confident that all prisoners attend induction, and there are effective processes for segmenting out people who need addiction treatment. Over 50% of

prisoners, including all with an identified substance misuse problem, saw a GP on their first night.

- The staffing of C wing is more stable, with staff being transferred between wings less often; this leads to a calmer and better organised wing. The prisoners taking induction are also more consistent, providing a higher standard; and their obvious commitment to delivering a good quality induction is to be praised. There are 5 Listeners on C wing who also help to give new arrivals the support they need.

There are some issues which the IMB will ensure are monitored over the coming year:

- Although the Big Word translation service is often used on C wing, it seems it is very rarely used in Reception. This, for example, means that prisoners with very little English can arrive on C wing without having taken 3 numbers off their mobile phone. It much more difficult and time consuming to resolve at that stage, and the problem can have a big impact on a prisoner's contact with their family in the important early days of being in the prison.
- The induction process is being changed from half a day to a full day. This is to be welcomed, as it shows a greater emphasis on effectively inducting new prisoners. However, the prison will need to ensure that these changes are made in a realistic way, and that sufficient resources are dedicated to it, to ensure the standard remains high. Once the change has been made, we suggest review meetings are held to ensure this has happened.
- The reception building continues to be unfit for purpose (poorly designed and oppressive) and extremely busy at peak times.

Security

There is still have grave concerns regarding the high use of drugs and mobile phones in the Prison. Since the fitting of nets and grills on cell windows, there is no indication that this has reduced these items from entering the Prison

There are still four dogs at Brixton, one is trained in detecting mobile phones and SIM cards, and the others are drug dogs. The Board also notes that the dog searches on the Wings seem to be having a direct result in the amount of drugs available, information from intelligence sources indicate that the price has vastly increased. The Board would like to see these searches happening more frequently.

There are on average 3.5 searches of staff a month, the Board calls for more random searches on staff arriving at the Prison and that the dogs should play a part in these searches. The Board believe this would not interfere or cause any delays and would be a great deterrent to all staff from bringing illegal items in to the prison.

There has been a significant curbing of the use of mobile phones in the prison.

The IMB monitored a number of serious security incidents this year, including the use of the Tornado team. The IMB are happy with the way that these incidents were handled and impressed at the calm, caring attitude shown by staff of all grades.

The biometric system seems to be working well in the visitors hall and with the release of prisoners. A few visitors decided not to carry on with a visit once they were aware that a finger print would be taken. However, the Board is concerned that, because the tables and chairs are not attached to the floor, visitors and prisoners can arrange them so the officers are not able to see whether contraband items being passed. This can also block any CCTV surveillance. We understand the staff would like all furniture secured and the prisoner should always be seated away and not in direct contact with the visitors.

It is also suggested that the CCTV does not cover the complete visitors' hall, leaving a possible null position, which can be used for the transfer of illicit items. More training is also needed for staff in the security section so they can be able to collect, respond and handle any intelligence received with confidence.

The Board understands that the dog section are not being used to their full capacity in wing searches because of staff shortages. The handlers need at least one other officer with them at all times.

Visits

The manager of the Visitor Centre, which is run by the Prison Advice and Care Trust (PACT) reports quarterly to the governor responsible for visits. PACT provides support for families and children who are visiting the prison, and there is an information sharing procedure with Visits prison staff, with the aim of improving safeguarding for children. There are over 30,000 visitors a year, possibly about two thirds for remand prisoners, and overwhelmingly from the local area (within 50 miles). About half of them seek support from the PACT team.

The introduction of NOMIS in the spring caused some problems, in general and when men transferred to Brixton tried to use visiting orders still valid from their previous prison. It remained difficult to book visits for a couple of months. Applications and complaints to the prison increased dramatically. The process for booking visits now seems to be working reasonably well. No major problems were reported with the introduction of biometric ID in March 2010.

The Visits Centre is not unpleasant, with soft drink and snack dispensers. The small play area for children has often been unstaffed, because the prison has been slow to give PACT volunteers security clearance. There are no evening visits, or homework clubs, because of the half day regime. One event for children to visit in the school holidays had to be cancelled because of an administrative failure, and a later event was pulled because the external support was not available.

The Board feels there are opportunities for improvements in visits, and will discuss this with the Governor in the coming year.

Section 7

The Work of the IMB

The Board has been operating at about half strength for much of the year, and the delays in appointing new members have been frustrating. A number of members resigned, because of pressure of work, study, or new babies, and there has been a fair burden of interviewing for Board officers and experienced members. In June, the Board was saddened by the death of Lady Kitty Giles, a Board member for over 20 years, and much respected and admired by staff and prisoners.

Applications to the IMB have stayed at fairly constant levels, about 25 to 35 a month. Within the prison system, complaints have fallen from over 200 in January to 63 in July. Prisoners have been encouraged to apply to their wing staff rather than making complaints, and this should have a beneficial effect.

Board Statistics	
Recommended Complement of Board Members	20
Number of Board members at the start of the reporting period	14
Number of Board members at the end of the reporting period	14
Number of new members joining within the reporting period	6
Number of members leaving within reporting period	6
Total Number of board meetings during reporting period	12
Average number of attendances at Board meetings during reporting period	N/A
Number of attendances at meetings other than Board Meetings	N/A
Total number of visits to the prison (including all meetings)	N/A
Total number of applications received	475
Total number of segregation reviews held	N/A
Total number of segregation reviews attended	N/A

Code	Subject	2006/7	2007/8	2008/9	2009/10
A	Accommodation	32	37	34	41
B	Adjudications	8	5	7	11
C	Diversity Related	5	10	19	18
D	Education/employment/training	26	33	21	24
E	Family/visits	90	48	79	61
F	Food/kitchen related	47	25	37	27
G	Health related	78	62	65	55
H	Property	132	102	98	92
I	Sentence related	20	17	18	15
J	Staff/prisoner/detainee related	31	44	41	38
K	Transfers	55	27	28	29
L	Miscellaneous	72	66	62	64
	Total number of applications	596	476	509	475

Section 8
GLOSSARY OF PRISON-RELATED ABBREVIATIONS USED

AA Administrative Assistant
ABS Anti-Bullying System
ACCT Assessment, Care in Custody & Teamwork – replacement for F2052SH
ACR Automatic Conditional Release
AO Administrative Officer
ARD Automatic Release Date
ATOS Company responsible for assessing long-term sick
BCU Briefing and Casework Unit – PS unit handling adjudication appeals
BME Black & Minority Ethnic
BOV Board of Visitors – now IMB
C & R Control & Restraint
C2W, CTW Custody to Work – pre-release focus on housing, employment and lifestyle issues
CARATS Counselling, Assessment, Referral, Advice & Throughcare Scheme – drug & alcohol team
CC Cellular Confinement – a punishment
CCD Criminal Casework Department (Croydon)
CLAIT Computer Literacy and Information Technology
CCT Criminal Casework Team (part of Home Office Immigration & Nationalities Dept)
CMU Case Management Unit – work on sentence planning & progress
CNA Certified Normal Accommodation
CRD Conditional Release Date
CSH Contracted Service Hours (pre-agreed paid overtime)
CSU Commissioning Support Unit
DASU Drug And Alcohol Support Unit
DH Dog Handler
EDR Earliest Date of Release
EMU Estates Management Unit
EO Executive Officer
EPDG Estates Planning & Development Group
EGP Ex Gratia Payment
ETA Employment & Training Allocation
ETE Employment/Training/Education
ETS Enhanced Thinking Skills – an OBP
F2050 Prisoner's basic record
F2052A Prisoner's wing record
F2052SH Record for prisoner currently at risk of self-harm
FLED Facility Licence Eligibility Date (when prisoner may be **considered** for ROTL)
FOCUS Financial Outstations and Central Unified Systems – the PS accounting system
GOOD Good Order or Discipline – Segregation under Rule 45/49 (historically GOAD)

HCC Health Care Centre
HDC Home Detention Curfew – the Tag
HDCED Earliest Date of Release on HDC
HEO Higher Executive Officer
HMCIP Her Majesty's Chief Inspector of Prisons
ICA1/2 Initial Categorisation & Classification Forms for Adults/YOs
IDU Inmate Development Unit
IEP Incentives and Earned Privileges – Prisoners can be on Basic, Standard or Enhanced
IG Instruction to Governors
IMB Independent Monitoring Board
IND Immigration & Nationality Department
IRC Immigration Removal/Reception Centre
JSA Job-Seekers Allowance
JSAC Job Simulation & Assessment Centre (for officers seeking promotion to SO)
KPI/KPT Key Performance Indicator/Target
LDR Latest Date of Release
LED Licence Expiry Date
LIDS Local Inmate Database System – IMB can use this to check location, dates, etc.
LSC Learning & Skills Council
MAPP Multi-Agency Public Protection Arrangements
MDT Mandatory Drugs Testing
MSL Minimum Staffing Level
MQPL Measuring the Quality of Prison Life
NACRO National Association for Care & Resettlement of Offenders
NC The National Council for IMBs
NEC National Exchange Centre- building between VTC & Boiler Ho. used for ETE
NOMS National Offender Manager Service – amalgamation of the Prison & Probation Services
OASYS Offender Assessment System – computerised risk & needs assessment
OBP Offending Behaviour Programme
OCA Observation, Classification & Allocations – a Reception task
OLASS Offender Learning and Skills Service (part of LSC)
OSG Operational Support Grade
OI/OR/OP Own Interests/Request/Protection – Segregation under Rule 45/49
PASRO Prisons Addressing Substance-Related Offending – an OBP
PCO Prison Custody Officer
PCT Primary Care Trust – National Health component responsible for healthcare
PEI/O Physical Education Instructor/Officer

PER Prisoner Escort Record
PESO/PEPO Physical Education Senior/Principal Officer
PIN Prisoner Information Notice
PMU Population Management Unit (central)
PO Principal Officer
POA Prison Officers' Association – the main trade union
POELT Prison Officer Entry Level Trainee
POPO Prolific and Other Priority Offender
PPO Prisons and Probation Ombudsman
PPP Public Protection Panel
PS Prison Service
PSI Prison Service Instruction
PSO Prison Service Order – see www.hmprisonservice.gov.uk/resourcecentre/psispos/listpsos
RFW Removal from Wing – a punishment
ROAD Remission of Added Days (up to 50%)
ROM Regional Offender Manager
ROR Restoration of Remission – now ROAD; Risk of Reconviction;
ROTL Release on Temporary Licence – e.g. to work in mess; town visits; home leave
ROWD Review of Works Departments (may involve privatisation/civilianisation)
RRA Assistant to the RRLO
RRLO Race Relations Liaison Officer
SAU Standards Audit Unit
SCG Safer Custody Group
SED Sentence Expiry Date
SEO Senior Executive Officer
SIN Staff Information Notice
SIR Security Information Report
SLA Service Level Agreement
SMARG Segregation and Monitoring Review Group
SMT Senior Management Team
SO Senior Officer
SPDR Staff Performance & Development Record – reviewed annually
TOIL Time Off in Lieu (of payment)
TSU Technical Support Unit – part of PS responsible for repairs/installations (“Works”)
TUPE Transfer of Undertakings (Protection of Employment) – staff transfer
VDT Voluntary Drugs Testing
VO Visiting Order – sent out by prisoners, allows named people to visit
VTC Vocational Training Centre
Gold Commander Headquarters controller for serious incidents
Silver Commander Person in establishment in charge of serious incidents
Bronze Commander Local Sub Commander for serious incidents

Operation Tornado System to provide extra staff and resources for serious incidents