

Annual Report

HMP Send, Woking, Surrey

April 2009 to March 2010

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.

The Independent Monitoring Board of HMP Send is committed to being a diverse board and to carrying out its work in a way that recognises diversity.

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Section 1

DESCRIPTION OF THE PRISON

HMP Send is a closed, female, training and resettlement prison, with an operational capacity of 282 offenders. It is currently twinned with HMP Downview. As at 31 March 2010 the population includes a range of prisoners from those who are serving short sentences (29 women – around 10% of the population - serving less than two years), to those who are being detained as ISPs, (47 serving life and 27 serving IPP sentences, approximately 25% of the total population). The prison is profiled to take 50 life-sentenced prisoners. A recent ethnic grouping of prisoners showed 65% White British, 35% BME. The number of Foreign Nationals has significantly reduced in the past year to approximately 10% of the population.

The majority of prisoners are housed in three adjacent wings in the main block and in a newer 64-bed unit (opened in 2008) with the remainder accommodated in separate resettlement and addiction treatment units. In the latter the RAPt team run a very successful addiction treatment programme, and the only one in a women's prison. Whilst dual occupancy is deliberately provided in this unit to encourage mutual support, accommodation in all other areas consists of individual cells with en-suite shower and toilet. Within the main block is a unit specifically dedicated to a Therapeutic Community (TC), the only such one in the female estate, and with a maximum capacity of 40 (32 in therapy; 4 pre and 4-post course). Prisoners. The 80-bed Resettlement Unit prepares prisoners for their return to society by offering semi-open conditions, and provides opportunities for voluntary and paid work placements in the community.

A healthcare centre is located in the main block and during the past year the Surrey PCT has provided medical services, with emergency night-time cover provided by Thamesdoc. Other buildings include a well-presented kitchen/dining room and an education block, where The Manchester College is provider of Education Services. The Offender Management Unit (staffed by prison staff and seconded probation staff from the Surrey and Sussex Probation Trust) runs the Thinking Skills Programme (TSP), previously known as Enhanced Thinking Skills (ETS), as well as offender management and supervision support.

The prison is supported by a number of voluntary organisations including Send Family Link, the National Organisation of Prison Visitors, the Mothers' Union, Prison Fellowship, the Samaritans, Alcoholics Anonymous, Narcotics Anonymous and Crack Awareness.

2.1 Overall judgement

The Board is satisfied that prisoners at HMP Send are treated humanely and fairly.

There are a number of areas where the Board has identified good practice having a positive effect upon the well-being of the women and we expect these to contribute to the longer-term rehabilitation of prisoners. There are also a few places that, in the Board's opinion, need improvement.

The Board has assessed the prison in relation to the critical baselines set out in PSO 4800 for women prisoners and is pleased to report that these are more than adequately met. More detailed comments on the relevant baselines can be found within Section 6.

There have been many instances during the year when members have witnessed examples of good practice and supportive care given by staff to prisoners. Whilst some prisoners can be fiercely critical of staff, many others are more positive, including two women on the RAPt unit who said that they "were welcomed, not judged; staff got things done and showed understanding." Prison staff are open and frank with members about the challenges of running a prison, and their enthusiasm, teamwork and morale have impressed the Board throughout the year.

During the reporting period there has been significant improvement in many aspects of prison delivery, including increases in the numbers of quality activities for prisoners, community work placements, and qualifications achieved by prisoners. The prison has benefited greatly from a professional and committed senior management team, and improved staff continuity (with virtually no dependence upon detached officers from other establishments). This has enabled a re-launch of the Personal Officer scheme (about which we highlighted concerns in earlier Reports), and the establishment of separate wing offices. All these, plus the completion of the building work that was such a major disruption last year, have ensured better care of the prisoners. Whilst there are a number of areas (as detailed below) where improvements could be made, the areas of good practice exceed these. The overall ethos of the prison, together with good prisoner and staff relations, are to be commended.

There was one self-inflicted death in custody in July 2009 and whilst the Board was impressed with the way in which the prison supported prisoners and staff, it remains concerned at the delay by the Prison and Probation Ombudsman Service in completing their final report (Ref. 3.4).

Throughout the year members have had free access across the prison. The cooperation and support provided by the Governor, and the Head of Send Prison and his staff have been much appreciated. All Board members have contributed to this report.

2.2 Particular issues requiring a response

- **Policy**

- Delay in Prison Ombudsman's investigation into death in custody (Ref: 3.4)
- Longer-term impact of efficiency savings in 2009/10 (Ref: 4.7)

- **Operational**

- Availability of candidates for offending behaviour programmes (Ref: 4.4)
- Waiting Lists for dental treatment (Ref: 3.3)
- Shortage of psychologists for longer-term prisoners (Ref: 4.2)
- Effect of efficiency savings on Children's Visits, and on provision of catering for religious and cultural events (Ref: 4.7)

2.3 Examples of good practice not requiring a response

- As at 31 March 2010 there are 44 prisoners working in the local community – the highest number for two years.
- The new Card Workshop has provided interesting and worthwhile jobs for up to 30 women.
- The ROTL, Housing and other 'drop-in' clinics are good examples of initiatives in the past year designed to help solve problems promptly and to better manage prisoner expectations.
- The new second-hand clothes shop, run by two volunteer staff, has enabled many women to have a 'suitable wardrobe', particularly for interviews to work in the community and on release.

AREAS THAT MUST BE REPORTED ON

3.1 Diversity

The Board is pleased to record that Diversity continues to be taken seriously and that the focus has improved following the appointment of a Diversity Manager in January 2009 – a resource shared with HMP Downview. Diversity complaints are handled promptly and treated with sensitivity, and the number of RIRFs has reduced significantly. The Board notes that the following key items have been addressed: publication of the Race Equality Action Policy and Plan; introduction of Racist Crime Log; completion of discharge and exit questionnaires by offenders and staff respectively; appointment of Foreign National and Race Equality Officers.

The REDAT group meets regularly with representatives from senior prison staff, prisoners and support groups. In May 2009 an “Older Offenders Policy” was implemented and a new group known as SOAPS (for women aged 50+) now meets regularly to address issues affecting older women. The different cultural and religious days are observed, and each recognised faith group can choose one religious festival a year to celebrate. The Diversity team organises events such as Black History Month and facilitates regular meetings for Foreign National Prisoners to raise issues, which UKBA often attends.

The Board received only three applications relating to Diversity in the past year, the lowest number in five years.

3.2 Learning and Skills

The Board is satisfied that all prisoners are assessed in relation to their learning and skills within the first week after arrival.

The Manchester College assumed responsibility for providing education services in September 2009. Despite some initial difficulties causing anxiety for staff, tutors continue to provide a wide variety of courses designed to assist prisoners on their release. Up to 80 sessions (each with six to eight students) a week are provided and there was a 31% increase in qualifications achieved compared with the previous year. New NVQs are planned, including Horticulture and Hospitality & Catering.

Business Administration is a small but busy unit, specialising in translation and document production services for the prison and a number of external customers, and which last year yielded an impressive income of £5,000.

A new Card Workshop employing 30 women has become a sought-after place of work, offering the chance to develop artistic skills, and there are ongoing negotiations to sell products made here to other establishments.

The well-equipped hairdressing salon has flourished with numerous prisoner and staff clients, despite operating with only one instructor for half the reporting period. Recognised courses are available to the women, including a new Customer Services course.

The Gymnasium is a well-equipped facility; open six days a week, offering a number of courses relating to Physical Education.

The Horticultural Department is the largest employer in the prison, maintaining the grounds to a high standard, growing vegetables and flowers, and working on recycling materials from the prison.

The St Giles Trust has arranged for Car Phone Warehouse to provide funding for a call centre offering an information and guidance service to be introduced into the prison. The Michael Varah Foundation funds an in-house residential artist from the Watts Gallery. The workshop sessions have proved to be very popular, and students' work has been entered into the Koestler exhibition.

3.3 Healthcare and Mental Health

For the majority of the reporting period, and despite an increase in the number of health related applications (Ref: 5.1), the Board has identified improvements in the availability and quality of healthcare services. The problems associated with low staffing levels and the use of agency staff with limited prison experience were highlighted in the Board's last three Annual Reports. This shortfall has been addressed during the past year. In July 2009 there were only three permanent nursing staff but by the end of March 2010 the number had risen to eight (of a complement of ten).

Wing-based medication has been introduced and this has led to a more personal approach to the understanding of prisoners' needs. A weekly "drop in" clinic has been introduced which has proved popular with prisoners. The following is an extract from a letter addressed to Healthcare: "I do not see you guys as HMP Send. You are like the light at the end of the tunnel. On dark days you are the friends who aim to help. The help you have given is second to none". Not all comments are as glowing as this and a number of genuine difficulties have been highlighted.

The provision of dental care (an issue highlighted in previous reports) has continued to be a problem throughout the year. Whilst the Board is pleased to note that nursing staff have received training in dental triaging, and that prisoners with 'serious' emergency dental needs are now usually seen within 24 hours, members remain concerned that prisoners continue to express considerable frustration about the waiting time to see a dentist. Whilst the average waiting time for non-urgent dental care has been reduced from eight to twelve weeks to six to eight weeks and the Board acknowledge that there is some important work to be done with regard to the management of prisoners' expectations about dental provision, its view remains that many of these complaints are justified. Furthermore, as the dental clinic runs on a Monday, there is often a backlog during the spring months with three bank holiday Mondays affecting the delivery of the service. The Board will continue to monitor this situation closely.

Mental Health staff members have worked hard to meet the complex mental health needs of prisoners, although the Board recognises that many of the prisoners' requirements cannot be fully addressed within the prison context. A new weekly mental health "drop in" clinic is much valued by prisoners. A pilot mental health group session has taken place; the plan being to provide an eight week rolling programme for prisoners where topics such as how they handle self-harm, the benefits of exercise, etc., are openly discussed. It is recognised that early intervention is required to reduce the severity of mental health issues.

The use of the PALS service has helped address unresolved problems. There are about 20 applications per month that relate mainly to difficulties in obtaining repeat medications and obtaining GP appointments. PALS have also held a number of focus groups with prisoners with the aim of identifying and resolving areas of concern.

The IMB has responded to 36 applications concerning healthcare (Ref: 5.1)

Post reporting period note: *It is with regret that in the period 1 April – 30 June 2010, a number of serious difficulties with the provision of healthcare by the PCT have been noted by the Board. Members are concerned that these may negate some of the improvements of the last year. A close watch will be kept on the provision of healthcare services to prisoners during the coming months.*

3.4 Safer Custody

The Board is pleased to note the continuing efforts in this area. A new post of Safer Custody Governor was created in April 2009 and a key priority of this new role was the production of a Suicide Prevention and Self-Harm Management Strategy (published in May 2010). A Violence Reduction Survey, completed by 102 prisoners (37.5% of the population), identified that most of these women feel safe within the prison and report having neither witnessed nor experienced violence and/or bullying. The Board is encouraged to note that, in response to some less favourable comments in this survey, steps have been taken to adopt a more pro-active approach to bullying and better care of the victims of such incidents.

Despite monthly fluctuations, the number of self-harming incidents has remained fairly consistent throughout the year. The Board is satisfied that the robust procedures in place and the increased awareness by all staff ensure that prisoners at risk of self-harm can now be identified and supported more quickly. The Board is pleased to report that Healthcare members now regularly attend the monthly Safer Custody meetings, which was not always the case in previous years.

There was one self-inflicted death in custody in July 2009 and the Board was impressed with the sensitive and caring manner in which the prison supported both prisoners and staff. However, it remains concerned at the delay by the Prison and Probation Ombudsman Service in completing their final report with regard to this incident. Investigations did commence within a week of the incident, but there was no Ombudsman representation at the clinical review with the PCT in January 2010 and, at the time of publication of this IMB Report (June 2010), only a draft version of the Ombudsman's report is available. However, it should be noted that the draft report is a favourable one that commends both prison and healthcare staff in their involvement in the care of the prisoner.

3.5 Segregation/Separation and Care Units

HMP Send does not have a Segregation unit. This policy is viewed by the Board as very commendable as it has a positive effect on the overall atmosphere within the prison.

However, some women are segregated on Cellular Confinement for disciplinary reasons. This procedure was used on 23 occasions in 2009/10 (12 in 2008/09). Healthcare staff sees these women at least once every 24 hours, and is required to confirm that they do not have mental health problems or other vulnerabilities that would make segregation unsafe or unreasonable. An IMB member visits within 72 hours and thereafter at least once every seven days.

A prisoner whose personal safety is held to be at serious risk is held in a special observation cell on Constant Supervision. An individual regime is prescribed, tailored to the woman's specific problems. Constant Supervision was needed on 15 occasions in 2009/10 (compared with 19 in 2008/09). An IMB member visits the prisoner within 24 hours and thereafter at least once every 24 hours.

The implementation of both these regimes is fully documented.

COMMENTS ON OTHER AREAS OF THE PRISON REGIME

4.1 Purposeful Activity

With the exception of those women who are of retirement age or are temporarily unemployed, all prisoners are involved in meaningful activity on a full time basis during the weekdays (not Friday afternoons). This is an excellent achievement that contributes significantly to the overall positive ethos of the prison - both prison staff and prisoners are to be congratulated.

As at 31 March 2010 there are 44 prisoners working in the local community – the highest number for two years. A Business in the Community Employers' Forum was held in March 2010. This included a well-known High Street retailer and it is hoped that some women will be able to take up employment there. Preparation for the placement of prisoners in external work commences as soon as they come to HMP Send and this positive approach towards re-integration to the community is to be applauded.

4.2 Indeterminate Sentence Prisoners

Although there is no separate ISP wing in the prison, 37 (50%) of ISP prisoners are accommodated in the newer J Wing. A positive development has been the new arrangement by which eight beds are made available on the resettlement wings for suitable ISPs who are approaching their parole date. However, the Board is concerned that for several months there has been no psychologist for ISPs requiring one-to-one therapy. This can be a particular problem for prisoners who are not in the TC; for example, in a recent case the Parole Board said that a prisoner had to see a psychologist but no psychology resources were available. There is a full-time psychotherapist, but spaces are only available for group work and there are no one-to-one places available until September 2011. The prison is also unable to offer a specific anger management intervention, resulting in prisoners who require this to meet their sentence planning requirements having to move elsewhere.

4.3 Prisoner Discharge Board

It has long been recognised that leaving prison can be very difficult for some women, particularly when they have served long sentences. The Prisoner Discharge Board aims to see all prisoners within the 14 days prior to their release, in order to mitigate problems on the day of release. Issues include housing, formal identification (the lack of passport, driver's licence, or utility bills), job interviews or appointments with Job Centre Plus. Whilst this system has been in place for four years, the Board has not monitored it until the last year. Members who have observed the sessions have been impressed with the comprehensive and sensitive way in which they are conducted.

4.4 Offending behaviour programmes

RAPt

The Board continues to be impressed by the creative rehabilitation programme delivered by this team, based on the 12 steps of Alcohol and Narcotics Anonymous and lasting for approximately 18 weeks. Of the 52 prisoners who started the programme during the last year, 39 successfully completed the course. In the past year, of the eight graduates who left the prison, six progressed to residential secondary treatment. To their credit, two of these were IPP prisoners who were paroled to treatment after their first hearing.

The Board is concerned that it is now becoming increasingly difficult to attract prisoners to the RAPt programme (which requires immediate abstinence). RAPt staff and Board members believe the introduction of the IDTS system (a more gradual process of detox, maintenance, reduction and abstinence) over the next year may exacerbate this problem. Whilst the unit has spaces for up to 20 women, there were on occasions only 12 - 15 prisoners on the course at any one time.

TC

A number of the women have testified to the beneficial effect the TC has had on their lives and the Board recognises that staff in the TC are very committed to developing a risk management intervention for high-risk prisoners with complex needs. It also acknowledges that considerable efforts have been made to establish the TC as a national resource within the Offender Management Model, which should help the community to become safer and more sustainable.

However, the Board has expressed concern about the future of the TC in its last three reports. With a maximum capacity of 32 therapy places, the TC had only an average of 18 –19 women at any one time during the past year. The Board is aware that new assessment and referral procedures are under development and that the team has improved its links with Offender Management Units and visited other women's prisons to promote the programme. Whilst TC management considers there are now significant grounds for optimism about the longer-term viability of the programme, the Board will continue to monitor this area very closely.

4.5 Chaplaincy

The Multifaith chaplaincy team covers the major world religions: Christian (for example, C of E, RC, Pentecostal, Baptist), Muslim, Jewish, Hindu, Sikh, Buddhist and Pagan. A wide range of timetabled services, prayer and faith meetings are provided, and all the major religious festivals are celebrated. An inclusive culture is promoted, with those with a different religion or none are made welcome at special events.

The chaplaincy staff are also very supportive to the women at vulnerable times. The Board has been impressed with how well the team has functioned in the past year without a coordinating chaplain.

Through the Chaplaincy, the Prison Fellowship is responsible for organising and delivering Sycamore Tree courses in victim awareness/ restorative justice. Four six-week courses (each for 15 prisoners), delivered by qualified volunteer tutors, have been run during the past year. Prisoners are helped to appreciate the wider impact of their crime and to take responsibility. Sheffield Hallam University's Research Centre for Community Justice was commissioned to evaluate more than 2,000 prisoners who had taken part in Sycamore Tree. The indication was that the programme had the desired impact on participants and reduced the attitudes that are known to be conducive to offending behaviour. The Board had been concerned about the long waiting list (typically 20 - 30) and was therefore pleased that funding has been made available for three courses in 2010/11.

4.6 Family Liaison Support

Prisoners can ask for advice and support about family issues from staff of the charity Send Family Link, who have a monthly clinic in the prison. A Family Liaison Officer can be approached directly by prisoners, or through their Personal Officer. Staff members working on the visits afternoons are briefed before each visit about any child-safeguarding issues that might arise from the particular visits. There are also well-equipped and safe children's areas in the Visitors' Centre and Visits Hall.

4.7 Efficiency Savings

The robust day-to-day management of the establishment by the Governor and his team has considerably mitigated adverse outcomes of the efficiency savings in 2009/10. The Board acknowledges there has been minimal change in many areas as a result of these savings. The reduction in the Friday core day has, of course, reduced the amount of purposeful activity time available, but it has also facilitated the implementation of prisoner clinics (e.g. ROTL and Housing advice) resulting in a reduction in associated complaints and applications. However, it is important to highlight a decline in a number of important areas. Given the importance of visits in maintaining contacts and reducing re-offending, the Board is disappointed that budgetary measures have resulted in a reduction in Children's Day Visits (as distinct from the statutory Social Visits) from six to four per annum. Furthermore, the Board is disappointed to note that there is now a more limited ability to provide catering for faith and cultural events. Whilst the safety and conditions of prisoners are not threatened at present, this position could change if further cuts are imposed, and particularly if these result in a reduction in intervention programmes. The Board will continue to monitor closely the impact of any additional significant cost-saving measures.

THE INDEPENDENT MONITORING BOARD AT HMP SEND

5.1 The Work of the IMB

Throughout the year the Board has taken an active role in monitoring the prison to ensure that women in custody at HMP Send are treated fairly and humanely. At least three members of the Board visit the prison each week; one to investigate issues raised by the prisoners who have made a written application to the Board; another on rota to monitor specific areas of the prison such as the kitchens, healthcare, the observation cells and accommodation areas (other parts of the prison are also monitored on a regular basis); the third member supports the other two where required (e.g. visiting prisoners on cellular confinement or on constant supervision). Each board member has a special interest area and attends meetings as an observer. As part of these duties members have also attended a number of incidents, incident and case reviews, and accompanied visits by Magistrates and other groups.

The monthly Board Meetings ensure good communication between the members and a consistency of approach towards prisoners. The Governor, or the Head of Send Prison (or his deputy), attends these meetings to report on developments within the prison and to resolve any queries. Regular training has been provided, One member transferred from another prison in the area and four new members joined the Board. Two members resigned due to family and work commitments.

The Board received a total of 153 applications, up from 129 last year. The highest number (36) related to healthcare matters. Many of these concerned the apparent delay in obtaining hospital appointments. 11 applications concerned dental queries, usually where the prisoner's discomfort was not considered serious enough to merit emergency treatment. All members have worked hard to improve communication lines between prisoners and healthcare staff.

The second highest number of applications to the Board in 2009/10 (26) was in relation to property, although this is slightly down on 2008/09. This continues to be a problem throughout the female estate. Board members have spent considerable amounts of time investigating specific concerns but with limited success. We will continue to monitor this area closely as we are aware that the loss of personal items is distressing to prisoners.

5.2 Board statistics

| | |
|---|-----|
| Recommended Complement of Board Members | 14 |
| Number of Board members at the start of the reporting period | 11 |
| Number of Board members at the end of the reporting period | 14 |
| Number of new members joining within the reporting period (4 plus 1 transferee) | 5 |
| Number of members leaving within reporting period | 2 |
| Number of attendances at meetings other than Board meetings | 139 |
| Total number of visits to the prison (including all meetings) | 393 |
| Total number of applications received | 153 |
| Total number of segregation reviews held | 0* |
| Total number of segregation reviews attended | 0* |

* HMP Send does not have a segregation unit.

5.3 Written applications to see the Board

| Code | Subject | 2006/7 | 2007/8 | 2008/9* | 2009/10 |
|------|-------------------------------------|--------|--------|---------|---------|
| A | Accommodation | 0 | 4 | 3 | 7 |
| B | Adjudications | 9 | 3 | 2 | 2 |
| C | Diversity related | 12 | 10 | 6 | 3 |
| D | Education/employment/training | 5 | 6 | 10 | 12 |
| E | Family/visits | 7 | 12 | 4 | 6 |
| F | Food/kitchen related | 10 | 7 | 5 | 9 |
| G | Health related | 20 | 17 | 26 | 36 |
| H | Property | 12 | 2 | 28 | 26 |
| I | Sentence related | 13 | 11 | 6 | 10 |
| J | Staff/prisoner related | 2 | 0 | 7 | 10 |
| K | Transfers | 2 | 0 | 4 | 10 |
| L | Miscellaneous | 17 | 24 | 28 | 22 |
| | Total number of applications | 109 | 96 | 129* | 153 |

* Prisoner numbers increased from 218 to 282 after 1 April 2008

Section 6

PSO 4800 BASELINES RELEVANT TO HMP SEND

5. Reception - this area is clean and (although not particularly well appointed) is as pleasant and bright as its location and construction allow. There is a selection of suitable magazines in the reception room.
11. Personal Officer scheme – this has been overhauled and the Board believes that it now works well.
13. Prison regime - the rate of unemployment is very low. Women are kept busy and there are a wide variety of interventions that contribute to containing the instances of self-harm, including an active Chaplaincy, trained Listeners, visits by the Samaritans, help and advice with addiction problems, and improved Mental Health care.
17. Personal Hygiene - almost all women have their own toilet/shower room. Toiletry, sanitary and depilatory products are now easily available.
29. Segregation Unit – there is no Segregation Unit. Women who are on CS are held in the one observation cell, and an individual regime is prescribed, depending on their specific circumstances.
30. Segregation Unit - apart from the constant supervision cell, the only women segregated are those on CC for disciplinary reasons. Before such a decision is made, healthcare staff must confirm that they do not have mental health problems or vulnerabilities that would make segregation unsafe or unreasonable.
31. Detoxification – women do not undergo de-toxification, as there is no 24-hour healthcare.
33. Family Support - a Family Liaison Officer can be approached directly by prisoners, or through their Personal Officer.
35. Visits - staff members working on the visits afternoons are briefed before each visit about any child-safeguarding issues that might arise from the particular visits. All visits staff are aware that they can report concerns.
36. Visits - there are well-equipped and safe children's areas in both the Visitors' Centre and the Visits Hall.
39. Domestic Violence – a 10-week course has been introduced for women who have been victims of domestic violence. Plans are in place for prison officers to be trained in how to deal with disclosure of domestic violence.
40. Support for Sex Workers - A sex worker course has also been introduced for such prisoners. The Ugly Mug scheme is a project to provide identified women (prior to discharge) with information about local men who are believed to be dangerous. They are given information on sexual health clinics and out reach worker support.
42. Older Offenders Policy – this was implemented In May 2009 and a new group known as SOAPS (for women aged 50+) meets regularly to address issues affecting older women.
43. Diversity - The Diversity team organises events such as Black History Month.
44. Foreign Nationals – these prisoners now have regular meetings organised by the Diversity team, at which they can raise issues, and UKBA visits regularly to answer their questions.
50. WASP training (including Sex Worker course) – this is compulsory for prison staff and volunteers.

Section 7

LIST OF ABBREVIATIONS USED IN REPORT

BME Black & Minority Ethnic

CC Cellular Confinement – a punishment

CS Constant Supervision – for a prisoner’s own safety

ETS Enhanced Thinking Skills

IDTS Integrated Drug Treatment System

PCT Primary Care Trust – National Health component responsible for healthcare

IMB Independent Monitoring Board

IPP Indeterminate sentence for Public Protection

ISP Indeterminate Sentence Prisoner

NVQs Non Vocational Qualifications

PCT Primary Care Trust – National Health component responsible for healthcare

PALS Patient Advice and Liaison Services

PSO Prison Service Order (see www.hmprisonservice.gov.uk/resourcecentre/psispsos/listpsos)

RAPt Rehabilitation for Addicted Prisoners trust

REAG Race Equality Action Group

REDAT Race Equality & Diversity Action Team

RIRF Race Incident Report Form

ROTL Release on Temporary Licence – e.g. to work in mess; town visits; home leave; community

SOAPS Send Old Age Pensioners

TC Therapeutic Community

TSP Thinking Skills Programme

UKBA – United Kingdom Border Authority

WASP – Women Awareness Staff Programme