



**ANNUAL REPORT  
FOR HER MAJESTY'S PRISON  
WAYLAND**

**JUNE 2011 TO MAY 2012**

## Section 1

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### 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 prisoners records with the exception of medical.

The Board is specifically charged to:

- (1) satisfy itself as to the humane and just treatment of those held in immigration removal centres
- (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 far the immigration removal centre has met the standards and requirements placed on it and what impact these have on those held in the centre.**

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

## Section 2

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### CONTENTS

	<b>PAGE</b>
<b>SECTION 3</b>	
Description of the Prison	4
<b>SECTION 4</b>	
(a) Executive Summary	6
(b) Questions for the Minister	9
(c) Questions for the Regional Manager Custodial Services [RMCS]	10
<b>SECTION 5</b>	
(a) Healthcare	11
(b) Drug Strategy	13
(c) Diversity	18
(d) Reducing Re-Offending	19
(e) Safer Custody	20
(f) Violence	25
(g) Catering	27
(h) Lifers and ISPs	28
<b>SECTION 6</b>	
(a) Board Statistics	30
<b>SECTION 7</b>	
Chair's Summary	34
<b>SECTION 8</b>	
Glossary of Abbreviations Used	37

## **Section 3**

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### **DESCRIPTION OF THE PRISON**

HMP Wayland is an adult male, category C, closed training prison in South Norfolk.

The prison is now 27 years old, during which time significant expansion has taken place.

The establishment has recently been awarded Level 3 status with many parts of the operation classified as 'high'.

Wayland holds convicted prisoners mainly from East Anglia and London with some from the wider UK and abroad.

Expansion began in 1985 with three additional wings and, more recently in 2008, with five quick-build accommodation blocks, segregation, kitchen and, activities and education units.

With the additional accommodation, the operational capacity of the prison is 1,017. Many prisoners still share cells originally designed for single occupancy.

Wayland remains a safe place providing a calm and purposeful regime.

Wayland remains a cost effective Cat C prison and its principle function is to provide education, training and treatment. Healthcare is provided

by Serco, education training and skills by A4e and in addition, various resettlement providers are situated within the prison. Agencies within the prison include NACRO, CADs, Probation, CARATs, Ormiston Trust, RAPt together with prison visitors, the Samaritans, St Giles Trust and the Chaplaincy.

This report concentrates on the aspects of prison life that have a significant impact on the lives of prisoners.

### **EXECUTIVE SUMMARY**

This has been another challenging year for Wayland. At the beginning of the reporting period HMCIP found the IDTS programme, Healthcare and OMU to be below standard. The Board fully recognises the hard work and dedication of the staff.

We continue to have a dedicated Segregation Governor and the Board believes she is making a real difference to the way prisoners are managed on the unit. The policy continues to be that very few moves out of prison will be from the Segregation Unit.

Food in the establishment generates great concern due to increasing costs. The Board still feels money could be saved if food was locally sourced with additional benefits to local business and the local community generally.

The Certified Normal Location (CNA) provides 958 prisoner places of which 658 are single cells with toilet and washbasin screened by a makeshift partition, (two additional cells are set aside for safer custody) and 300 places provided in 150 cells with integral toilet, shower and washbasin, designed for double occupancy.

At the start of this reporting year the occupational capacity (op cap), representing the maximum number of prisoners the prison can hold taking into account control, security and operation of a planned regime,

was set at 1,017 but was increased during the year to 1,031, this as a result of a national increase in numbers due to the summer riots, an increase in prisoners receiving longer sentences, longer waiting periods for parole eligibility, an increase in violence against the person and drug offences has also impacted on the prison population.

This larger op cap means that 73 single cells are designated for double occupancy. All the overcrowding of potentially 146 prisoners is confined to the 446 available cells of the four main wings in the oldest part of the prison where over 32% of prisoners are forced to share a cell in which they are confined for long periods, usually with a total stranger and expected to eat, sleep and carry out their ablutions in these potentially unhealthy conditions.

Overcrowding of the prison estate results in prisoners being transferred away from their home area. At Wayland over 55% of prisoners are from London and the South East making visiting difficult for their families and thereby reducing their contact with home and community.

A further effect is on those prisoners that have gained their Cat D status but are unable to access open conditions with the resettlement opportunities these provide. This is partially being addressed at Wayland by the conversion of a small 40 bed unit with a more relaxed regime and the option to work in the prison's outside gardens.

In conclusion, HMP Wayland remains a first rate prison due to strong management led by the Governor and his team. We do have grave concerns regarding budget cuts and how they impinge on staff recruitment, and how a safe environment can be maintained.

We are pleased to report that further to our criticism in last year's Annual Report and following a poor HMCIP inspection on IDTS delivery, this service has now been turned around and the process is safe, meaningful and proactive in detoxifying drug addicted prisoners.

## QUESTIONS FOR THE MINISTER

- 1 The Board considers doubling up in single cells totally unsatisfactory and strongly urges the Minister to instruct the Prison Service to discontinue the practise as soon as practicable.
- 2 With a change in provider and contract for ancillary drug services, the Board are concerned for the future funding of RAPt and P-ASRO programmes and the implication this has for prisoners and, therefore, their rehabilitation. Can the Minister assure us that this provision will continue?
- 3 The Board feels that the numbers of ISP prisoners who are over their tariff is still unacceptable at 46% of that population. What steps are being taken to address available training to support prisoners achieve their sentence plans?

## **QUESTIONS FOR THE REGIONAL MANAGER CUSTODIAL SERVICES [RMCS]**

- 1 With food costs continuing to increase over last year's, is the prison budget for prisoner food being raised to avoid even further reductions in volume or quality of meals?
- 2 The Board has been concerned with the quality of the build within the new prison wings and kitchens from the completion. Can you confirm that the fabric of the buildings, especially flooring, will be surveyed and faults rectified to make this part of the prison safe and suitable for purpose?

## **Section 5 (a)**

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### **HEALTHCARE**

Looking back over the last 12 months it is evident that changes instigated by the provider of Healthcare (Serco) have delivered a sustainable reliable service. The management and staff within Healthcare are to be congratulated for their efforts in what must have been a difficult transition period.

Serco, the provider of Healthcare services at Wayland, have been integrating some of the key clinical staff from third party providers to be directly employed. Last year we reported that one of the key issues was the employment of clinical staff by the previous contract holder.

Nurse Practitioners from the social enterprise group, Horizon Health, continue to be a valued part of the clinical team.

#### ***Mental Health***

This team is now established and seems to be delivering a good service. Greater support and more qualified Primary Mental Health trained nurses are essential.

#### ***Key Points Raised in Last Year's Report***

DENTISTRY waiting lists were and still are the issue in this area. The most recent figures (May 2012) indicate that the list for dental

assessment stands at 139 and those waiting for treatment at 81. Waiting list numbers did reduce but remain unacceptable and have been impacted by the upgrading of the dental suite when service was suspended for a short time.

PHARMACY, in-sight queues are greatly reduced since the introduction of issuing medication on wings and the increase of in-possession.

Recruitment of staff to replace bank / temps has taken some time, but is now resolved down to normal turnover levels.

A Housekeeper has been restored to the Healthcare department resulting in appropriate standards of hygiene now being achieved.

WAITING LIST for Smoking Cessation is still high, however, there are prisoners being trained as Health Trainers who work in conjunction with Healthcare staff to deliver the programme, these are based in the Gym.

Complaints have reduced dramatically and are dealt with within the agreed timescales. Applications, regarding Healthcare, to the IMB reflect this improvement mirroring a similar reduction for the reporting period.

## **Section 5 (b)**

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### **DRUG STRATEGY**

Better liaison between Healthcare and other drug/alcohol related agencies such as CARATs, RAPt and P-ASRO has resulted in more prisoners able to address their addictions and return to their communities with a reduced risk of re-offending. However, at the time of going to print, implementation of a new contract for non-clinical interventions has been delayed until February 2013 due to a legal challenge. The existing provider has agreed to continue their provision although P-ASRO has been suspended due to the lack of funding. It is to be hoped that these changes and delays will not see a regression in the progress made over the year in drug and alcohol services at Wayland.

Wayland continues to keep the availability and use of illegal drugs in the prison at a low level.

Prisoners with substance related needs are identified at reception with the aim of providing effective treatment and support throughout their stay.

The drug and alcohol strategy is up to date and posted on the prison's computer network with input and funding from the local DAAT.

### **DRUG TESTING**

A good result for MDT testing in the year 2011/12 which saw a positive rate of 5.25% against a target of 7.75%. A breakdown of the positive

results show that misuse of prescribed medication still make up a high percentage of these positive readings.

The improvement in the figures from those in our last report, have largely been brought about by the introduction of medication now being delivered direct to prisoners on the wings.

## SUPPLY REDUCTION

Medication subversion and trading continues to dominate the drug culture as a substitute for illicit substances, which remain low.

Medication in-possession checks are now being carried out and prisoners with excess or un-prescribed medication, or do not have the medication they have been prescribed, have their prescription stopped and have their status reduced.

Drug trafficking attempts are being made predominantly through visits and the mail.

## DRUG FREE WING

This is located on N Wing and is up and running and due to be formally opened in June.

Staff have received specific training in drug awareness and are being proactive in support of the prisoners. Random searches and Compact Based Drug Testing (CBDT) are taking place. The ethos of this wing is that prisoners 100% want to be drug free and a group room is being

made available for prisoner led support. Application forms are available to request location on this wing and prisoners will also be screened for suitability at induction.

## PLUS

This new prisoner led forum was introduced recently to provide support for IDTS prisoners on D Wing and also acts as an early warning system for any potential mass issues. Monthly meetings are held for prisoners to air their problems in open forum and weekly NA meetings take place with the help of G Wing peer supporters.

## ANCILLARY DRUG SERVICES

These services are contracted out to the Norfolk DAAT who manages them both in the prison and in the community.

This funding is for non-clinical staff and includes CARATs, P-ASRO, RAPt and testing.

This contract is currently up for renewal and the tendering process should see a new provider in place by October. However, uncertainty over funding has led to P-ASRO courses being suspended with a waiting list of 46 prisoners unable to fulfil their sentence plan requirements and a number of staff leaving amidst employment concerns. It is to be hoped that funds are made available for this valuable work to continue.

## CARATs

The team work with over 400 of the Wayland prisoner population and are located on the IDTS wing where group facilities have been provided.

CARATs based primary alcohol work was launched last year (REACT) for those serving sentences for offences committed while under the influence of alcohol and in addition, a new alcohol violence related ARV programme has begun. These interventions have been added to the range of treatment programmes available.

At the beginning of this reporting year their work with prisoners with drug problems, was severely hampered by poor unsafe IDTS practices, but improvement in this service has seen better liaison with CARATs and each prisoner is being well managed with 13 week reviews completed.

The team offer one to one support as well as group sessions; they develop care plans, refer prisoners to other related services in prison such as RAPt and P-ASRO and prepare discharge plans and referral to the DIP team for support on release. AA and NA are also offered. IDTS is located on D Wing.

In our report last year the Board highlighted concerns with the incompetent delivery of IDTS at Wayland. There is now a permanent IDTS lead and further posts have been recruited. Prescriptions are now scrutinised and linked to a clinical needs analysis and any changes discussed with the nurse, doctor and prisoner prior to being implemented.

The number of IDTS prisoners have reduced considerably from the high of 100+ last year as a result of the policy of detoxing and these prisoners have the opportunity to move on to the RAPt and drug free wings.

Wayland are to be commended for keeping the supply and use of illegal drugs and alcohol at a low level. Changes made to work practices by both the prison and Healthcare has resulted in an improved service for IDTS prisoners and a reduction in medication misuse. The provision of a range of treatments enables those with drug/alcohol problems to get the help needed to control their addictions and reduce their risk of re-offending.

## **Section 5 (c)**

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### **DIVERSITY**

After several recent changes of name and emphasis, all diversity activity at Wayland is now in the hands of the Equality Action Team (EAT) following the latest Prison Service Instruction.

## **Section 5 (d)**

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### **REDUCING RE-OFFENDING**

#### ***Accommodation***

This continues to be provided by NACRO who work on a one to one basis with prisoners. During the last 12 months they have achieved their target of 85% of prisoners discharged with accommodation.

#### ***Education, Training and Employment***

Last year the target of 30% released with employment was exceeded and reached a total of 35%.

#### ***Children and Families of Offenders***

The Ormiston Trust has responsibility for this area; we recognise the excellent work completed by this organisation this year.

## **Section 5 (e)**

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### **SAFER CUSTODY**

The primary role of the Safer Custody Team is to address suicide, self-harm and bullying issues among the prison population. Safer Custody, however, in its broader remit, encompasses all those who have dealings with staff, prisoners, partnership agencies and visitors. All parties have a right to feel safe and supported within the establishment.

At the beginning of the reporting year the management structure consisted of an acting Safer Custody Manager together with some part time help when available. When the workload on the Safer Custody Manager increased, full time help was made available. However, as of January 2012, due to staff shortages and reorganisation, Safer Custody team members have been absorbed into the residential function; the officers are now required to fulfil other duties on the wings. There will be times when the Safer Custody Office will be unmanned as the officers are fulfilling duties elsewhere. During the reporting period this department had achieved a green rating at external audit. It remains to be seen if the high standards that have been achieved can be maintained under the new regime.

#### **Self- harm**

When a member of staff or agency member suspects a prisoner might be at risk, by interpreting body language, behavioural changes and verbal signals, then that individual will open an ACCT document with the full knowledge and input from the prisoner.

With an ACCT document open, the prisoner is assessed at an interview by one of 14 members of staff who have taken on this extra responsibility. The risks are identified and contribute to the case review that is held immediately after the interview.

From this case review a care-map is drawn up which helps the prisoner deal with his problem and provides regular staff support. This document remains open until all concerns for the prisoner are satisfied. Just prior to document closure, the prisoner is again interviewed to assess the efficacy of the care-map.

As normal a routine as possible is encouraged for a prisoner on an ACCT and this document travels around the prison with him to ensure that all his contacts are made aware.

A general Notice to Staff and Governor's Order regarding this document's movement is in place and is proving effective.

To aid those prisoners who need to unburden themselves, particularly out of hours and in the event of not wanting to engage with a Listener, there is a telephone system with sets across the residential estate linked to the local Samaritan branch at King's Lynn.

An ACCT document is not closed when a prisoner is transferred to another establishment and transfers only take place as part of a progressive move.

## **BULLYING**

Bullying documents are three stages and are in place and effective.

The Safer Custody Officer investigates allegations of bullying by a member of staff on a prisoner.

There is an Anti-Bullying Representative on each wing and also in Chaplaincy and Reception. They wear distinctive polo shirts for easy recognition and play an important role by their presence and interaction with prisoners in reducing violent events.

## **STATISTICS FOR THE REPORTING YEAR**

During the reporting year, 152 ACCT documents were opened with 23 prisoners transferred in from another establishment with an open ACCT and eight prisoners transferred out to other prisons on open ACCTs.

The reasons for ACCT opening and methods used are as below.

NB There have been occasions where the prisoner has provided more than one reason/method code.

### **SELF HARM REASON**

Relieve anger/stress/tension	20
Feelings of anger towards others	10
Depression	55
Feeling lonely	2

Coping method	6
Achieve/prevent transfer	10
Grief/bereavement	5
To attract help/assistance	25
Concern-family issues	5
Guilt/shame	1
Being in prison	13

#### SELF HARM METHOD

Hanging	2
Self-strangulation	4
Cuts/scratches	45
Overdose	29
Swallowing	6
Head-banging	2
Other	12

#### LISTENERS

The Samaritans accredited scheme has been operating on this site for nine years and is run by the King's Lynn branch.

Listeners are on call 24/7 using a rota system, there are 20 Listeners with five more starting in June. They are spread well across the residential estate, however, as might be expected, the enhanced wings have a higher ratio of Listeners due to their good behaviour.

There is a passport system in place supported by a general Notice to Staff to enable free movement of Listeners.

There is a buddy cell on A Wing for the use of Listeners.

## **SAFER CELLS**

There is one safer cell in this establishment.

## **DEATHS IN CUSTODY**

There have been three deaths in custody during the reporting year, two of which appear to be self-inflicted, one in January 2012 and one in February 2012. They are both subject to a Coroner's inquest, the dates for which had not been set at the time of reporting. The other death was from natural causes.

## **Section 5 (f)**

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### **VIOLENCE**

To counter threats of violence, there is in place an intelligence network stretching from the sharp end of residential areas up to a focused security team that monitors constantly for signs of unrest.

Individuals, victims or perpetrators, can and are relocated within the prison or transferred out for their own protection or to dilute the potential for violence. When violent events do occur, they are dealt with promptly.

Types of victim violence during the reporting year:

- Unknown violence
- Threatened
- Assaulted
- In debt
- Bullied
- Bullied (medication)
- Bullied (canteen)
- Property damage
- Total victims for this period = 137

Types of perpetrator violence during the reporting year:

- Sexual threats
- Threats (weapon)

- Alleged assault
- Assault
- Verbal bullying
- Arson attack
- Bullying
- Total perpetrators for this period = 155

## **Section 5 (g)**

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### **CATERING**

A Board member attends the Food Forum bi-monthly where the prisoner wing reps air their views on food and discuss menu options with catering staff.

One concern is the daily feeding rate of £2.10 and the advent of further food price inflation. It is felt that this and the fact that the Prison Service is tied to one supplier, places an increasingly unacceptable burden on the catering staff.

## Section 5 (h)

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### LIFERS and ISPs

	2010	2011	2012
Lifers	92	92	91
ISPs	94	78	58

Over the past three years the number of lifers has remained fairly static although it is unacceptable that the number of men post tariff still remains high at 46% (45).

However, the ISP population has decreased significantly. The main reason for this is that it is now possible for the prison to only select prisoners who have sentence plans it can cater for. Although again the post tariff figure is worryingly high at 55% (58).

### ***Programmes available for Lifers/ISPs***

- TSP            Thinking Skills
- CALM        Controlling Anger and Learning to Manage
- ARV         Alcohol Reducing Violence
- RAPt         Rehabilitation Addicted Prisoners' Trust
- P-ASRO      Prisoners Addressing Substance Related Offending
- Sycamore     Is currently not running and there are a number of prisoners requiring this intervention.

Over the last two years excellent training and supervision has been put in place to develop the skills of wing officers and eight of them are now qualified to be Offender Supervisors. It is regrettable that with the introduction of Fair and Sustainable, officers will no longer be able to fill this role. However, this staff development has given officers the tools to deal with the complex issues of lifers and indeterminate prisoners. This has had the result of good interaction between staff and prisoners and a calm atmosphere on both E and F wings.

## CAT D PRISONERS

There are currently 30 determinate prisoners and ten ISPs waiting to transfer to Cat D establishments. Unfortunately many of the determinate prisoners are unlikely to ever get to open conditions. This is because priority is given to ISPs and it is of concern that this category will need to spend at least a year in open conditions resulting in fewer and fewer spaces being available. The prison is doing what it can to provide outside work to enable men to show the level of trustworthiness to progress to town and home visits. However, the most serious problem is for ISP Cat D prisoners who are pre-tariff. The prison has no capacity for working with these prisoners who are not eligible for ROTL and cannot leave the prison. There is, therefore, no way of assessing their level of risk and means they are stuck in limbo which is an unacceptable situation.

## **Section 6 (a)**

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### **STATISTICS**

#### ***Applications***

During the reporting period there were a total of 609 applications to the Board, a slight reduction on last year's figure of 704.

Prisoner complaints through HMP were recorded at 3,644, markedly lower than last year. Nevertheless, the Board continues to receive applications which we feel could have been sorted out at wing level.

Property loss and ensuing possible compensation claims continue to make up a considerable proportion of applications, of note are the rising number of transfer and visits queries.

Last year's observations concerning the limits on transporting prisoners property by the prisoner movement contractor remain as, any property in excess of two bags can be excluded.

<b>SUBJECT</b>	<b>2011/12</b>	<b>2010/11</b>	<b>2009/10</b>
(A) Accommodation	29	17	28
(B) Adjudications	18	22	9
(C) Diversity Related	3	3	9
(D) Education / Employment / Training	33	38	35
(E) Family / Visits	32	22	24
(F) Food / Kitchen Related	16	12	8
(G) Health Related	75	78	72
(H) Property	82	119	117
(I) Sentence Related	75	102	73
(J) Staff / Prisoner / Detainee Related	11	10	3
(K) Transfers	77	23	79
(L) Miscellaneous	153	274	265
<b>TOTALS</b>	<b>608</b>	<b>704</b>	<b>722</b>

### **Segregation Unit**

There are still ongoing problems with the material and build quality and these will not go away in the foreseeable future resulting in availability of cells issues.

On a more positive note, exercise equipment is now provided in the exercise yards.

Board members attended 73.1% of segregation reviews and all paperwork for reviews that the Board were unable to attend were signed off during rota visits.

The Board believes that the unit works well due to the efforts of segregation staff.

Segregation Unit monitoring statistics for the reporting period:



***Use of Force***

Use of Force was used on 132 occasions. Copies of the documentation are sent to the Board for recording.

***Use of Special Accommodation***

The special accommodation was used on five occasions.

***Use of Mechanical Restraints***

Mechanical restraints were used on 63 occasions. It should be noted that this is mandatory when prisoners are moved to the Segregation Unit across open ground.

## ***Adjudications***

The breakdown of adjudications during the reporting period was as follows:

- Proven 781
- Dismissed 276
- Referred / NPW 277
- ADAs 1849

Fights, assaults and abusive behaviour:

Fights	85	(109)
Assaults	89	(99)
Threat and Abusive Behaviour	250	(258)

(Last reporting period figures in brackets.)

## ***IEP Matters***

A Board member regularly attends the IEP meetings at which prisoner wing representatives put their issues for consideration.

## Section 7

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### CHAIR'S SUMMARY

It is always important to state that our role is to monitor the prison to ensure that people in custody are treated fairly and humanely. We must also consider the effect that bad behaviour has on the officers who work so hard to manage the prisoners.

Wayland, during the last reporting year, has been allocated some difficult prisoners with records of behaviour that give cause for concern. Offences of some violence have led staff to question the validity of their initial categorisation.

Within Wayland there is now a dedicated Cat D wing with approximately 60 prisoners.

Again this year the IMB raises the issue of local sourcing of food. Wayland is a prison situated within a rural community where the benefits of obtaining locally grown foods would be enormous. Food costs for the prison are massive and local purchasing would help reduce these and benefit the community around the prison. We rely on the goodwill of the community and we believe the Ministers overlook this.

Staff morale is not exactly at its peak. There is to be pension reforms and changes are to be implemented under the umbrella of Fair and Sustainable. A really important issue to staff has been the change from self-rostering to fixed shifts.

We appreciate that in this present economic climate there must be cuts, but we believe that they are just too far to maintain safety in a prison environment.

We have to thank our Clerk who works tirelessly on our behalf. I would like to record my thanks to all Board members, in particular this year to BDO and the Vice Chairmen. Support has been 100% and everyone plays a part in the IMB team at Wayland.

SHEILA AMEY

Chair

<b>BOARD STATISTICS</b>	<b>2011/12</b>	<b>2010/11</b>	<b>2009/10</b>
Recommended complement of Board Members	20	20	20
Number of Board members at the start of the reporting period	15	16	16
Number of Board members at the end of the reporting period	18	19	16
Number of new members joining during the reporting period	3	5	2
Number of members leaving during the reporting period	1	2	2
Number of attendances at meetings other than Board meetings	95	90	90
Total number of visits to the prison including all meetings	355	420	420
Total number of applications received	704	722	664
Total number of segregation reviews held	N/A	N/A	168
Total segregation reviews attended	238	250	120

# GLOSSARY OF PRISON-RELATED ABBREVIATIONS USED

To ensure that all readers understand the abbreviations used in the report, the list below should be added to or subtracted from as required.

<b>AA</b> Administrative Assistant	<b>Gold Commander</b> Headquarters controller for serious incidents
<b>ABS</b> Anti-Bullying System	<b>GOoD</b> Good Order or Discipline – Segregation under Rule 45/49 (historically GOAD)
<b>ACCT</b> Assessment, Care in Custody & Teamwork – replacement for F2052SH	<b>HCC</b> Healthcare Centre
<b>ACR</b> Automatic Conditional Release	<b>HDC</b> Home Detention Curfew – the tag
<b>AO</b> Administrative Officer	<b>HDCED</b> Earliest Date of Release on HDC
<b>ARD</b> Automatic Release Date	<b>HEO</b> Higher Executive Officer
<b>ATOS</b> Company responsible for assessing long-term sick	<b>HMCIP</b> Her Majesty's Chief Inspector of Prisons
<b>BCU</b> Briefing and Casework Unit – PS unit handling adjudication appeals	<b>ICA1/2</b> Initial Categorisation and Classification Forms for Adults/YOIs
<b>BME</b> Black and Minority Ethnic	<b>ICM</b> Intensive Case Management
<b>BOV</b> Board of Visitors – now IMB	<b>IDTS</b> Integrated Drug Treatment System
<b>Bronze Commander</b> Local Sub Commander for serious incidents	<b>IDU</b> Inmate Development Unit
<b>C &amp; R</b> Control and Restraint	<b>IEP</b> Incentive and Earned Privileges – Prisoners can be on Basic, Standard or Enhanced
<b>C2W, CTW</b> Custody to Work – pre-release focus on housing, employment and lifestyle issues	<b>IG</b> Instruction to Governors
<b>CADS</b> Community Alcohol and Drug Service	<b>IMB</b> Independent Monitoring Board
<b>CARATs</b> Counselling, Assessment, Referral, Advice and Throughcare Scheme – drug and alcohol team	<b>IND</b> Immigration and Nationality Department
<b>CBDT</b> Compact Based Drug Testing	<b>IPP</b> Indeterminate detention for Public Protection
<b>CC</b> Cellular Confinement – a punishment	<b>IRC</b> Immigration Removal/Reception Centre
<b>CCD</b> Criminal Casework Department (Croydon)	<b>ISMG</b> Interventions and Substance Misuse Group
<b>CLAIT</b> Computer Literacy and Information Technology	<b>JSA</b> Job Seekers Allowance
<b>CCT</b> Criminal Casework Team (part of Home Office Immigration and Nationalities Department)	<b>JSAC</b> Job Simulation and Assessment Centre (for officers seeking promotion to SO)
<b>CMU</b> Case Management Unit – work on sentence planning and progress	<b>KPI/KPT</b> Key Performance Indicator/Target
<b>CAN</b> Certified Normal Accommodation	<b>LDR</b> Latest Date of Release
<b>CRD</b> Conditional Release Date	<b>LED</b> Licence Expiry Date
<b>CSB</b> Cognitive Skills Booster	<b>LIDS</b> Local Inmate Database System – IMB can use this to check location, dates etc
<b>CSH</b> Contracted Service Hours (pre-agreed paid overtime)	<b>LSC</b> Learning and Skills Council
<b>CSU</b> Commissioning Support Unit	<b>MAPPA</b> Multi-Agency Public Protection Arrangements
<b>DAAT</b> Drug and Alcohol Action Team	<b>MDT</b> Mandatory Drugs Testing
<b>DASU</b> Drug and Alcohol Support Unit	<b>MSL</b> Minimum Staffing Level
<b>DH</b> Dog Handler	<b>MQPL</b> Measuring Quality of Prison Life
<b>DIP</b> Drug Intervention Programme	<b>NACRO</b> National Association for Care and Resettlement of Offenders
<b>DPSM</b> Developing Prison Service Manager	<b>NC</b> The National Council for IMBs
<b>EDR</b> Earliest Date of Release	<b>NEC</b> National Exchange Centre – building between VTC and Boiler House used for ETE
<b>EMU</b> Estates Management Unit	<b>NOMS</b> National Offender Manager Service – amalgamation of the Prison and Probation Services
<b>EO</b> Executive Officer	<b>OASys</b> Offender Assessment System – computerised risk and needs assessment
<b>EPDG</b> Estates Planning and Development Group	<b>OBP</b> Offending Behaviour Programme
<b>EGP</b> Ex Gratia Payment	<b>OCA</b> Observation, Classification and Allocations – a Reception task
<b>ETA</b> Employment and Training Allocation	<b>OLASS</b> Offender Learning and Skills Service (part of LSC)
<b>ETE</b> Employment / Training / Education	<b>Operation Tornado</b> System to provide extra staff and resources for serious incidents
<b>ETS</b> Enhanced Thinking Skills – an OBP	<b>P-ASRO</b> Prisons Addressing Substance-Related Offending – an OBP
<b>F2050</b> Prisoner's basic record	<b>PCO</b> Prison Custody Officer
<b>F2050A</b> Prisoner's wing record	
<b>FLED</b> Facility Licence Eligibility Date (when prisoner may be considered for ROTL)	
<b>FOCUS</b> Financial Outstations and Central Unified Systems – the PS accounting system	

**PCT** Primary Care Trust – National Health component responsible for Healthcare

**PE/O** Physical Education Instructor / Officer

**PER** Prisoner Escort Record

**PESO/PEPO** Physical Education Senior/Principal Officer

**PHOF** Prison Health Operational Forum

**PHPB** Prison Health Partnership Board

**PIN** Personal Identification Number

**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

**RAPt** Rehabilitation for Addicted Prisoners trust

**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 – eg 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

**Silver Commander** Person in establishment in charge of serious incidents

**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

**SOTP** Sex Offender Treatment Programme

**SPDR** Staff Performance and 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

