

HMP Woodhill



Independent Monitoring Board

**Annual Report
2012/2013**

Section 1

The Statutory Role of the Independent Monitoring Board

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and Immigration Removal Centre to be monitored by an independent board, appointed by the Minister for Justice, from members of the community in which the prison or centre is situated.

The board is specifically charged to:-

- (a) 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.
- (b) Inform promptly the Secretary of state, or any official to whom he has delegated authority as it judges appropriate, any concern it has.
- (c) The IMB at Woodhill submits a 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.

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Section 3

HMP WOODHILL

3.1 Role and Accommodation

HMP Woodhill is a core local prison within the High Security Directorate, with links to the South Central Area. Woodhill was built by the public sector and opened in 1992 as a publicly owned and run prison. The quality of accommodation at Woodhill is generally considered to be among the best in the prison estate.

One of the Establishment's main roles is that of a local prison serving the Crown and Magistrates' Courts. The Certified Normal Accommodation (CNA) is 660 and the Operational Capacity is 819.

It accommodates remand and convicted adult and young adult prisoners, who are categorised from category D to category A. It also accommodates some of the country's most difficult and disruptive prisoners managed under Close Supervision (CSC)/Rule 46 / Managing Challenging Behavior Strategy (MCBS).

House unit 6 is a separate, secure building in the prison grounds, containing the Close Supervision Centre (CSC) on A and B wings, the Managing Challenging Behaviour Unit (MCBU) on C wing and the Protected Witness Units (PWU) on D and E wings. Following a review of the provision of CSCs in the High Security Estate, B wing had changed function in September 2011 to become a management unit for CSC prisoners, and the MCBU had opened in October 2011. The CSC and MCBU house prisoners, administered and managed under a national strategy through the High Security Directorate, aim to provide secure units for prisoners who are highly disruptive or who demonstrate, or express a desire to demonstrate, violent and/or highly disruptive behaviour.

A major design fault when Woodhill was commissioned was the lack of sufficient and dedicated buildings for workshops to occupy prisoners. Although additional accommodation has been made available it remains well below what is required for the population.

Recent inspections by HM Prison's Inspectorate have acknowledged the prison's success in managing these competing pressures and in maintaining a proportionate approach to the very real challenges of security and that, despite its complex context, the prison continues to provide a decent, stable and safe environment.

3.2 Contractors, Agencies and Voluntary Organisation

- Milton Keynes College-Education contract
- Primary Care Trust & MKCHS-Healthcare
- Lead Psychiatrists (MHIT and CSC)
- Aramark -Kitchen contract
- DHL - Canteen
- Probation Service
- Police Liaison
- Samaritans
- Chaplaincy volunteers
- Prison Visitors
- Citizens Advice Bureau
- St Giles Trust

- PSO for Bail and HDC
- Tribal
- Pact (Prisoners Advice and Care Trust)
- Red Cross
- Age UK
- New Leaf

Section 4

EXECUTIVE SUMMARY

4.1 Overall Judgement

HMP Woodhill is a complex, diverse establishment and consequently very demanding to manage. In spite of this the Management Team have met the required efficiency savings, the required reduction in managers and at the same time coped with both Fair & Sustainable and Benchmarking.

The Board is increasingly concerned that the year on year increases in cuts and services may lead to a potential loss of control making the prison unsafe for both staff and prisoners. The resulting impact on regime will not aid rehabilitation.

Sickness levels have been managed in a robust manner throughout the year. Unfortunately there have been increasing levels of cross deployment and a loss of staff continuity on Units. The Senior Management Team (SMT) has lost three members which has inevitably increased their workload and responsibilities.

HMP Woodhill became a Level 3 prison during the reporting year, largely due to the HMIP report and the escape from Cambridge Crown Court.

From a poor situation in 2011/12 the number and quality of staff in Healthcare has improved. There is more consistent attendance and better general management of staff. There have been substantial improvements in the delivery of Healthcare in Healthcare Inpatients (CIP) with 24hour nursing care in place.

All strands of Diversity continue to be developed through the work of the Equality Team. Older prisoners and those with disabilities are well cared for. Foreign national prisoners, who comprise 17.5%% of the Woodhill population, receive excellent services through the regular clinics and the support they receive from translators.

Prisoner Consultative Meetings continue to be well supported by Governors, Kitchen staff, other staff and a good representation from prisoners from most Wings.

The Board is pleased to see the many improvements that have been made during the year to the fabric of the prison, including further refurbishment of showers, ongoing painting of Units, and new flooring in dilapidated areas. The outdoor environment has seen further development with additional faith gardens, a variety of amazing wildlife, and the development of a large greenhouse. All are a great credit to the staff and prisoners working there.

The Board is concerned about the number of incidents at height during the reporting period requiring the attendance of the National Technical Resource Group. There have been more kettling incidents, and cell damage has amounted to over £80,000.

Most House Units in the prison are specialised other than HUs 2 and 3. This means that disruptive prisoners can only be dispersed between these two.

There was some concern during the reporting year about the cleaning contract in Healthcare Inpatients when cells were not adequately cleaned. After discussion with prison and Healthcare staff the situation improved.

4.2 Issues of excellence not requiring a response

Plans were swiftly implemented to address the HMIP criticisms.

The Mosaic Workshop has completed many private commissions.

A Woodhill Handler became the Prison Service Passive Drug Dog Champion, another Handler was third in the Patrol Dog Category, and a third was fifth in the Active Drug Dog Trial.

The Board was pleased that a Local Policy for the Management of Palliative & End of Life Care was produced during the reporting year to meet the needs of terminally ill prisoners in HMP Woodhill.

The Board was relieved to learn that no disciplinary action was to be taken against any member of staff following the escape from Cambridge Crown Court.

The Board welcomed the introduction of a clear Policy on the use of televisions in the Segregation Unit cells. This has removed the discord of prisoners and staff when punishments were inconsistent.

4.3 Issues of concern requiring a response

4.3.1. Matters on which a response is requested from the Minister for Justice

The Board is increasingly concerned that the year on year increases in cuts and services and facilities may lead to a potential loss of control making the prison unsafe for both staff and prisoners. The resulting impact on regime will not aid rehabilitation.

As highlighted in the 2008-9, 2009-10, 2010-11 and 2011-12 Annual Reports the Board remains deeply concerned about the extended period of time taken for Counter Terrorist and other security checks. This needs to be addressed as a matter of urgency. Recruitment of staff and IMB members remains a constant challenge.

The Board remains concerned about the number of foreign national prisoners remaining in Woodhill years after their sentence has expired. Currently one prisoner is nine years over tariff.

The Board remains concerned as reported in the 2011-2012 Annual Report about the lack of spaces for Vulnerable Prisoners throughout the estate, which has impacted on the First Night Centre in Woodhill.

The Board is concerned that HMP Woodhill holds 22 IPP prisoners; 10 are post-tariff, and 5 are held under the pre-2008 law. The Government abolished the current IPP sentence as part of the Legal Aid, Sentencing and Punishment of Offenders Act 2012.

4.3.2. Director/Area Manager

The Board would ask that urgent consideration is given to a refurbishment of the Kitchen now serving an average of 763 prisoners. Equipment is obsolete, cannot be repaired and continually breaks down. 5.8.1.4

The Board requests that the issuing of razors purchased through the Canteen be managed effectively to prevent their use as lethal weapons. The Board appreciates that the cost of supplying electric razors would be prohibitive, although this has been requested by HMP Frankland. 5.6.5.

The Board would ask that sterilisation of hair clippers be introduced to prevent the spread of viruses, such as Hepatitis, prevalent amongst drug users.

4.3.3 Matters on which a response is requested from the MKCHS

The Board would ask that terminally ill prisoners will be accommodated in appropriately adapted/constructed cells. 5.3.24

The Board would ask that the time taken to answer external complaints that may be litigious be addressed. Some have taken up to six months. 5.3.17.

The Board would ask that attention is given to the recurring incidents of lost medical charts. 5.3.15.

The Board would ask that where staff have arranged meeting appointments with prisoners that they are unable to attend they telephone to re-arrange the appointment. 5.3.10

4.3.4 Matters on which a response is requested from the Prison

The Board would ask that sufficient cells appropriate for terminally ill prisoners be adapted/constructed. 5.3.24

The Board requests that Management endeavour to reduce the incidence of prisoners being accommodated on the FNC for lengthy periods of time. 5.6.10

The Board requests that Management endeavour to meet the agreed start time for Reviews and to ensure that a staff member of Healthcare is present. 5.3.10 and 5.3.20

The Board requests that it is notified whenever the Command Suite is opened.

The Board requests that Education facilities are reinstated in the CSC. 5.7.1.12

The Board requests that consideration is given to developing a proactive approach to prisoners held locally under MCBS. 5.7.1.24

The Board has concerns that cross deployment of staff has an adverse effect on some areas, such as CSC and HCIP 5.7.1.8 and 5.3.33

The Board feels there is unequal access to interventions on HU6C and short-staffed local psychiatric services are not providing the level of support needed by some of the prisoners. 5.7.1.26 and 30

The Board requests that it is informed whenever a prisoner is placed in a body belt.

The Board requests that it is informed whenever an Inquest is scheduled.

The Board requests that there should be a regular Adjudications Standards Meeting to prevent delays in procedure.

The Board requests that more is done to improve the Visits Booking procedure.

The Board is concerned that there is not always a consistent approach by staff when using the IEP and/or ABS processes. The ABS paperwork would benefit from being simplified with a clearer difference in strategy to manage/monitor perpetrators, and support victims.

The Board requests that attention is given to reduce the loss of work opportunities for VPs. 5.6.10.

The Board requests that the issue of cancelled/delayed hospital appointments is addressed. 5.3.29 and 5.7.CSC 28

The Board has concerns that prisoners serving CC on the Wing are not always monitored appropriately, and that Governors, doctors, and Chaplaincy do not make the requisite daily visits. There has even been an occasion when a prisoner was let off the Unit to go to work. 5.7.3

The Board has raised concerns about razors purchased through the Canteen. The allocation and return of safety razors provided by the prison service is managed effectively, and the Board would ask that this is also extended to those purchased privately to reduce the risk of self harm and injury to others. 5.6.5.

Section 5

1. Equality and Inclusion

1. The Board is satisfied that the Management team and Staff at HMP Woodhill are committed to the equitable treatment of all prisoners.
2. Equality and Inclusion (Diversity) meetings are held monthly. They are chaired by the Governor or Deputy Governor
3. Reports are given by the Race Equality Officer, Foreign National Co-ordinator, Disability Officer, Chaplaincy, Equality Manager and Prisoner Diversity Representatives.
4. All new prison staff now have Diversity training and staff Equality Representatives have specific training on the Protected Characteristics.

5. Foreign National Prisoners.

At the end of this reporting year there were 132 foreign national prisoners in Woodhill of 37 different nationalities .An increasing number of these prisoners come from Eastern Europe.

Many of the FN prisoners have little or no English speaking or writing skills and translating is often a problem. Applied Language Solutions (ALS) is used and HMP Send can help with translations although they are rather slow. Not all languages are easy to translate and prisoners are encouraged to attend English as a Second Language (ESOL) classes to increase their knowledge of English.

Monthly clinics are held with a United Kingdom Border Agency (UKBA) representative in attendance; if there is any paperwork for prisoners who cannot read English, copies translated into the prisoner's own language will be brought to the clinic.

UKBA currently has a backlog of prisoners to be deported so there are very few moves to Detention Centres. There are 9 prisoners in HMP Woodhill who have finished their sentences and are waiting to be deported.

6. BME Prisoners.

During the last year there was a well publicised Black History Month with displays on every Wing, in the Education Department and the Administration area. There was a concert by a Gospel Choir and on one day each week there was a Cultural meal choice which was available to all prisoners.

The food for Muslim Prisoners during Ramadan is presented in containers which keep the food hot until the permitted time to eat. The Kitchen prepares special menus for these prisoners for the month and trained Muslim prisoners cook the food

7. Older Prisoners

As in most prisons, the number of Older prisoners in Woodhill is increasing. There are now 70 prisoners over 50 years old, 12 over 60, 8 between 65 and 70 and 1 over 70.

Separate Gym sessions are available for these prisoners if they wish.

8. Prisoners with Disabilities.

The total number of prisoners declaring a disability is around 14%.

Mental Health issues are the highest number followed by Reduced Capacity and Reduced Mobility.

All prisoners who are referred to the Disabled and Older Prisoners Liaison Officer (DOPLO) have access to some form of activity as long as all induction has been completed.

9. Chaplaincy

The pastoral needs of prisoners are addressed *in part* through Chaplaincy Provision; all staff contribute to pastoral needs. All prisoners have access to a member of the Chaplaincy team on their first Reception into the establishment.

There are prisoners of many different Faiths and Beliefs in Woodhill and they do not all have a permanent Chaplain, but leaders of Minority faith groups regularly visit the prison.

Prisoners located in the Segregation Unit or Healthcare Unit have the opportunity for corporate worship or meditation for one hour per week.

10. Work

All prisoners must attend induction sessions to assess their ability to work and to allocate appropriate work and activities for them. Only convicted prisoners are required to work, but all new prisoners, convicted or remand, must attend the induction sessions if they wish to use the gym or other off-wing activity. Prisoners may request particular jobs or activities and jobs are allocated on the basis of risk and health assessments.

Prisoners who are of retirement age or classified as Long Term sick are not normally required to work unless some purposeful activity is part of their sentence plan.

11. Prisoner Equality Representatives

Prisoner equality representatives are invited to all meetings. They are paid £1 each week if they send in a time sheet.

- 12.** The Equalities group conducted a survey in April 2013 and their findings were positive. 56% of prisoners feel safe at Woodhill with 16% feeling unsafe. 52% are happy that the perpetrator is moved as part of the Anti Bullying Strategy.

13. Recruitment to the Board

During this reporting year the Board has advertised for new Members using the advertisements provided by the Secretariat. These were placed in Local newspapers and Volunteer Bureaux. All the applicants were interviewed after a visit to the prison and appointments were recommended on the ability and commitment of each one. The Board currently has three BME members.

5.2 Education, Learning & Skills

- 1.** Milton Keynes College is now responsible for the delivery of Education.

The Department is fully staffed although one member of staff has been seconded to HMYOI Aylesbury to support their delivery of Skills for Life for a considerable amount of time and the Head of Education has been absent for several weeks on sick leave
- 2.** The Skills for Life syllabus is being developed beyond English and Maths to include IT, social development and basic living skills such as cookery. All classes that are delivered can result in a qualification if completed.
- 3.** Since December 2012 attendance has improved from 74% to more than 80%. This is thought to be associated with a new labour policy being implemented in the prison. It has become easier for prisoners to attend English and maths courses although music, cookery and art do require greater security clearance.

4. The department has been running OLASS 4 in parallel with the current programme prior to its full implementation in August 2013 and it appears to be running well. The full implementation of OLASS 4 will be more focussed on payment by results.

5.2.1. Physical Education

The PE department holds 5 sessions daily which are well attended.

The evening session is for workers who cannot attend during the day, and there are special times for older prisoners. There are also 2 sessions each week for prisoners working with the WDP who feel vulnerable if they mix with others.

The staff run several certificated courses for prisoners including

Principles of Health and Fitness – Entry Level

Active, Healthy Living – Level 1

Assisting Health Related Activities – Level 1

Leading Health Related Activities – Level 2

Fitness Instructing – Level 2

First Aid at Work – Level 2

Many of the prisoners in Woodhill are serving short sentences, so few can progress further than Level 2 but the pass rate is good.

5.3 Healthcare

1. Health services are commissioned by The East Midlands Health and Justice Commissioning Team and are provided by MK Community Health Services (MKCHS), and Resuscitate supply 24 hour medical cover. MKCHS supply mental health services for the main prison. Oxford Health NHS Foundation Trust supply Mental Health services for House Unit Six (Close Supervision Centre).
2. On the 1st April 2013 Central and North West London NHS Trust (CNWL) took over the MKCHS contract for three years. Their business plan is to acquire inner and outer London contracts and control/reduce expenditure with economies of scale. Staff have been TUPE'd across.
3. Milton Keynes Clinical Commissioning Group (MKCCG) acquired authority to commission services in Milton Keynes on 1st April 2013 and has formed collaborative commissioning agreements as part of the East Midlands area.
4. **Staff**

While there are currently several vacancies, eight new staff are awaiting security clearance.

5. Extra staff are available on the zero-hours contract and the use of agency staff has fallen to 2/4 per day.
6. Sickness has reduced to 2.13%.
7. From a poor situation in 2011/2012 the number and quality of staff has improved, with a more consistent attendance and much better general management of Healthcare.
8. Copies of prison healthcare policies and procedures are available for all staff to read and sign in acknowledgment that they have understood what is expected and staff training is on-going.
9. Daily staff meetings occur and staff are represented at the daily prison management meetings.
10. Where staff have meeting appointments it is important to those they are meeting that they attend or telephone to re-fix the appointment if they are unable to attend. Unfortunately this does not always happen.
11. Waiting times for physiotherapy, dentistry and ophthalmology are up to four weeks.
12. A random check at the dentist showed a very poor attendance rate of 40%.
13. The waiting time to see a doctor is between two and seven days, but there is no wait to see a nurse.
14. Telemedicine is being looked into with the obvious advantages in a high security prison.
15. Tracking is a problem. Prescribing charts when doctors see patients and when nurses issue drugs on the Units are frequently missing and there are recording errors on patients' notes. The introduction of electronic prescribing later in 2013 should counteract these problems.
16. All patients' records are audited annually.
17. Healthcare has its own complaints system and most complaints are answered within five days. Those that need answering by MKCHS which may be potentially litigious can take up to six months to answer.
18. In the reporting year there were issues around cancelled external consultant appointments, some extending over months and usually for "security reasons" with no other information on the record. The Board requested the Security Department to amplify the reasons for cancellation or failure on their own records. An example was given of a photograph of a prisoner's suspected cancer shown to a consultant who offered an appointment the next day but it took over six months for the prisoner to go to an appointment. Another prisoner had a succession of appointments cancelled in a period of over a year.
19. Regular fortnightly meetings between Healthcare and Security have now resulted in a sharing of risk assessment decisions and a consequent reduction of cancellations. A typical month might show that out of forty-one

appointments booked, thirty-two were attended. Some of the failures to attend are the responsibility of the prisoners themselves.

20. Healthcare are able and willing to supply a nurse, with knowledge of the prisoner in question, to attend reviews on Segregation if such reviews take place at the time called. Experience shows that not all reviews take place when called and the nurse cannot wait. This becomes a problem for the Board as, if the nurse is not present, the Board member cannot sign the Review paperwork.

21. Nurses attend ACCT reviews and some Segregation Reviews.

22. A new Local Policy for the Management of Palliative and End of Life Care has been introduced and training given to respond to the increasing number of older prisoners.

23. Healthcare staff have regular meetings with those from the Westminster Drugs Project, who have taken over the contract for IDTS and operate on House Unit Five.

24. **In-patient Healthcare -HCIP**

Although there is a Policy for the Management of Palliative and End of Life Care there are inadequate facilities to accommodate more than one terminally ill patient. The only specially adapted cell has been occupied by the same patient for over four years as the prison has been unable to facilitate a move for him. This has meant that a terminally ill patient was accommodated in a normal cell with inadequate space for the necessary equipment and space for the treatment that he needed.

25. During this reporting year the criteria for admission to the wing have been established.

26. There is twenty-four hour nursing cover, except for breaks, and uniformed staff comment on better quality care from better quality nurses.

27. Medication works well apart from problems when charts are not present, which may be solved with the introduction of online records and prescribing next year.

28. The presence of Mental Health staff and their response to patient problems has improved.

29. Psychology and Psychiatry attendance on the unit is good.

30. While it still takes some time to attend hospital appointments, the referral of patients to secure hospitals has improved and is in the order of two months from assessment.

31. Staffing consists of two uniformed officers and there may be a Custodial Manager in the building.

32. There is a problem when one officer has to leave the wing and there are no spare officers on the Segregation Unit next door to cover.

33. Staff redeployment can be a problem in In-patients where knowledge of and rapport with patients is vital.

34. While uniformed staff have always delivered a good service in this Unit, it is good to see a substantial improvement in the delivery of overall Healthcare services during the last year.

35. **Integrated Drug Treatment System**

The year commenced with an up- to- date drug and alcohol strategy, informed by an up- to- date needs analysis. The department marked time with the expectation of the Westminster Drugs Project (WDP) taking over on 1st October. This did not happen and the majority of the staff left, leaving an almost non-functional department before WDP started on the 1st April 2013.

36. The total WDP staffing is now thirteen medical staff including a manager, plus two doctors, a visiting consultant, nine psycho-social staff, a manager and the use of two uniformed staff. WDP staff shortage is made up with agency staff.

37. IMB understood that all IDTS staff had been security cleared but this was not the case.

38. WDP staff have struggled to work in cramped conditions on the House Unit, as their porta-cabin is well behind schedule for occupation. WDP have found it challenging to fit in with the prison routine and this will take some time to resolve, as will learning prison craft in a high security prison. Experienced discipline staff have a lot to offer in this regard. The Board finds it surprising that this was not researched and resolved given the time available before WDP started in April 2013.

39. The Board is not privy to the WDP contract so is unable to comment on delivery, except to say that the original IDTS programme is not being delivered. There is a need for clarity as to what the new system is aiming to achieve and what KPTs will be measured.

40. WDP stabilise the prisoners in the few weeks they are in the House Unit and then they are transferred to another House Unit where compacts, detox, psycho-social help and VDTs occur.

41. **Psycho-social Services**

CARATS continued to run one- to- one advice and appropriate classes to help prisoners towards their recovery from drugs and alcohol. The Prison and PCT produced a contract to bring all CARATS and IDTS together in one organisation and this three year contract was won by Westminster Drug Project (WDP) who took over services on 1st October 2012 but were unable to start the IDTS side until 1st April 2013. The new service is called ROOTS, Recovery Orientated Offender Treatment Service. The PCT no longer exists and its place is taken now by Public Health England.

42. A new porta-cabin was built as an office for WDP to use and will come into use when the appropriate phone and computer lines are installed.

43. There are six full-time equivalent staff in CARATS and a Manager. It is good that there has been no staff turnover since WDP started in October 2012.
44. WDP have their own screening tool for prisoners in their care in addition to the prison's screening tool on entry. Many WDP prisoners are referred to Mental Health, where a number require oversight or treatment.
45. Prisoners remain on House Unit Five until stabilised when they move to other house units.
46. Prisoners are encouraged to decide the rate of reduction for themselves with the help of staff. The hope is that prisoners may be more likely to keep their compact agreements in the new system.
47. Classes such as anger management, self awareness, thinking skills, alcohol awareness, triggers and cravings are run for suitable groups of prisoners on House Unit Two.
48. Two peer support groups of ten to fifteen prisoners occur weekly and there is a monthly service users forum on House Unit Two which is minuted.
49. Education runs a drug and alcohol course on House Unit Five every two to three weeks.
50. Key-workers have an individual case load and co-ordinate care through assessment and a prisoner's objectives to produce individual care plans.

5.4 Purposeful Activity

1. The plots in the gardens are providing the opportunity for some prisoners to gain an NVQ in Amenity & ornamental Horticulture. Some prisoners have been involved in creating a faith garden.
2. Prisoners care for the wildlife in the grounds and some who work with the birds of prey are working towards a qualification.
3. Prisoners working in the greenhouse grow and propagate plants for the Woodhill estate and to be sold to other establishments. They also work with the Heritage Seed Bank, growing plants from their seeds and returning seeds from the mature plants to increase the stock.
4. The workshops continue to provide opportunities for more than 80 prisoners.

The Mosaics workshop has been successful in obtaining a variety of commissions from private individuals, although the Tutor has not been able to advertise externally for other commissions as happened last year.

Woodwork appears to be very limited and uninspired, concentrating on types of joint rather than actually making a product of value eg nest boxes. This is due to the fact that many of the men are only here for a very short time.

The IT workshop, PICTA, provides prisoners with useful computer skills, and a qualification.

5. The Laundry, Recycling and Waste Disposal workshops provide some spaces for VPs.

6. Many prisoners have jobs on the Units, such as Wing Cleaners and Orderlies.
7. Up to 28 prisoners can be employed in the Kitchen where they gain the Level 2 Hygiene qualification.
8. In total there now 386 work places available in the prison.

5.5 Resettlement

1. Every prisoner coming to Woodhill completes a Resettlement Induction, following the current RIP (Resettlement Intervention Plan) document that was reviewed and updated in 2012 as required by the labour policy. This covers all pathways associated with Reducing Re-offending and the initiatives available for the individual prisoner..
2. The Resettlement team continue the management of prisoners serving 12 months or less whilst those with a longer sentence, or deemed to be a risk, come under the OMU (Offender Management Unit).
3. The Resettlement team work with a variety of different pathways. A particularly important one is Debt Advice that covers Finance, Benefits and Debt matters. The lead for this pathway is undertaken by CAB (Citizens Advice Bureau) who run Debt Clinics that are often oversubscribed and have a substantial waiting list for interviews. The Open Mornings are successful, allowing a wider selection of prisoners to access all the facilities offered by the CAB.
4. Career Advice is undertaken by TRIBAL who see all prisoners at their Resettlement Induction and set them short, medium and long-term goals for their future work/careers. Some custody goals are also set, dependant on their sentence.
5. The Job Centre Plus (JCP) team work closely with prisoners, delivering the Work Programme that helps prisoners find employment on release and obtain benefits once they sign on. This Pathway will be further boosted by a new initiative, Job Deal that is currently going through the clearance system to allow them the chance to provide their services within Woodhill.
6. Over the last year the Resettlement team have found that working closely with TRIBAL, CAB and JCP has allowed them to achieve favourable KPTs with respect to not just gaining training/employment on release but also retaining employment.
7. A key element in reducing re-offending is access to a bank account Cheltenham and Gloucester (C&G) agreed to become involved last year. Although progress has been slow Woodhill is now able to forward letters and arrange appointments for prisoners with C&G prior to their release. This is a major step forward in allowing prisoners access to funds and benefits due to them which are usually payable into a bank account. There is also positive news that HSBC is interested in providing banking services for the prison.

8. Another key element is securing accommodation on release. The Woodhill team is achieving above the 82% KPT targets of previous years.
9. The St Giles Trust remain as Housing Advisors but some prison officers have been taking on some more of the housing work. Prisoners with No Fixed Abode (NFA) are flagged up by the team at Induction and have appointments arranged with the Housing Team as soon as possible to try to resolve this problem.
10. The Resettlement and Reducing Re-offending team are further boosted by the input of the Resettlement Chaplain, recent winner of the Prison Officer of the year award for Resettlement within the High Security Estate. The award was in recognition of the excellent work he carried out in making inroads and strong links with the local community. This has allowed outside charitable organisations, like New Leaf and BACO, Bucks Association for the Care of Offenders, to help with the care of prisoners who may still be homeless on release. They also provide support in the form of clothing and tools that prisoners may need to commence their employment once released.
11. The Resettlement and Reducing Re-offending team at Woodhill are constantly working to improve the services they can provide. A new Pathways Action Plan is currently being formulated.

5.6 Safer Custody, Violence Reduction and Suicide Prevention

1. HMP Woodhill maintains a strong focus on Safer Custody. The monthly Safer Custody meetings are very well attended. Data is collated and compared with that of previous years and other similar Establishments.

The PSO requires a strategy for identifying and supporting individuals with complex needs. A referral system has been devised but it has resulted in some confusion as MCBS is already in place.

2. Deaths in Custody

The Board is saddened to report two deaths in custody, both of which occurred during the last month of the reporting period. Dates for inquests have not yet been set. Prior to this there were no outstanding inquests.

Following an inquest in November 2012 HMP Woodhill was subject to a Rule 43. A closed ACCT document had not followed a prisoner when he had been transferred. The jury identified that this was a factor that contributed to the prisoner's death. There are now systems in place to ensure that the ACCT document is filed in a prisoner's main core record (F2050). Following an inquest in February 13 Healthcare at HMP Woodhill was subject to a Rule 43. All resulting actions have been put in place.

The DIC (Death in Custody) Action Plan is up to date.

3. There have been three Near Miss incidents recorded in the reporting year. Internal investigations were completed and reports sent to Head Office. No additional work was identified by Head Office

4. There are currently three prisoners in the Establishment who have instructed 'Do Not Resuscitate'. Each has a Family Liaison Officer appointed. The number of trained FLOs is reported to the Safer Custody meeting each month.

5. **Self Harm Incidents**

Numbers of these incidents and a wide range of factors including age, sentence and ethnicity are closely examined each month.

28% of self-harmers in Woodhill fall in the 30-39 year old age bracket. It is suggested that possibly Woodhill holds a high number of prisoners who fall into that age category. However this is not consistent with National data. Safer Custody will examine this data in greater depth.

28% of prisoners who self harmed were Life Sentenced/ISPP prisoners.

The Board has raised concerns with the access prisoners have to razors purchased through the Canteen. The allocation and return of safety razors provided by the prison service is managed effectively, but is not extended to those purchased privately.

The IMB at HMP Frankland raised a similar concern in their Annual Report 2011 – 2012. They requested consideration be given to supplying electric razors. The Board at HMP Woodhill appreciates the cost implication of such an initiative is prohibitive, but would welcome a more robust system of management for items that can become lethal weapons.

6. **Assessment Care in Custody Teamwork ACCT**

The quality of documentation is under constant scrutiny in order to maintain standards. ACCT training is up to date with the number of ACCT assessors being maintained.

Monthly Average ACCTs opened for 2013 was 17. With an average Roll of 770 this is 2.27%. Monthly Average ACCTs opened in 2012 was 38. With an average roll of 789 this is 4.81%.

This shows a decrease in ACCT documents compared to the same period of last year. This is attributed to the needs of the population and the drive by both Safer Custody and Mental Health Teams to manage ACCTs more effectively.

39% of individuals supported by ACCT were aged 21-29 years old, remaining consistent over the year. A further 36% were aged between 30-39.

47% of ACCT documents initiated were for unconvicted Prisoners.

Concern is the primary reason for ACCT initiation. The majority are opened in the First Night Centre (FNC).

The number of trained ACCT assessors is reported at the monthly meeting.

7. Listeners

The numbers are being maintained with regular well-advertised training courses. A new Listener Suite has been built. The number of active Listeners is reported at the monthly meeting

The Safer Custody Group is not always informed when prisoners who are Listeners are being transferred.

Listeners have raised concerns that they have to do the work of Insiders in addition to Listening.

8. Violence Reduction

The Equalities group conducted a survey in April 2013 and their findings were positive. 56% of prisoners feel safe at Woodhill, with 16% feeling unsafe. 52% are happy that the perpetrator is moved as part of the Anti Bullying Strategy.

High Risk Cell Share (HRCS) reviews are monitored to ensure they are up to date.

As more of the Units at Woodhill have become specialised, HU2 and HU3, which hold the general population, have become more challenging to manage. There are fewer options to re-locate prisoners to other areas to release tension.

Information is collated to try and identify 'hot spots' which need a strong management focus.

The Board is concerned that there is not always a consistent approach by staff when using the IEP and/or ABS processes. The ABS paperwork would benefit from being simplified with a clearer difference in strategy to manage/monitor perpetrators, and support victims.

9. Young Adults

There are insufficient numbers of Young Offenders to accommodate them on a designated Unit. They are dispersed amongst the population. The numbers, locations and details of all Age Appropriate Risk Assessments for YOs are brought to the Safer Custody meeting each month. Any concerns are highlighted to staff involved with the individuals.

10. Vulnerable Prisoners

The designated Unit, HU4B, has again been full, and too frequently prisoners have been held on the FNC awaiting a place. This has a negative impact on the regime on FNC and inductions on the VP unit.

Population pressures are compounded by YOs not being able to be accommodated with adults, smokers not being accommodated with non smokers, own protection prisoners not being accommodated with sex offenders, and HRCS requiring single cells.

Facilities for visits for VPs have been improved.

The pressure to maintain attendance numbers in the Workshops has resulted in some loss of opportunities for VPs. However managers are negotiating work contracts, which will provide more work places.

5.7 Segregation, Care & Separation, Close Supervision

1. The Woodhill Segregation Unit is relatively small and can accommodate up to ten prisoners in Standard Accommodation. The Unit has two Safer Custody cells, two Dirty Protest cells, and two Special Accommodation cells for the use of disruptive and violent prisoners. Throughout the reporting period little use was made of the Special Accommodation.
2. The policy of the establishment is to ensure that prisoners are only located on this Unit for the minimum period of time.
3. On occasions when the Unit is full or cells are out of action, prisoners who have been adjudicated will be sent back to the Wing to serve their Cellular Confinement. The Board has concerns that these prisoners are not always monitored appropriately and that Governors, doctors, and Chaplaincy do not make the requisite daily visits. There has even been an occasion when a prisoner was let off the Unit to go to work.
4. The number of prisoners located on the unit for extended periods of time has been significantly reduced over the reporting period.
5. The Board is concerned that there is currently no facility in this Unit to provide Constant Watch for vulnerable prisoners on ACCTs.
6. The Board is pleased that a Television Policy is now in place for prisoners in this Unit. This has eliminated the discrepancies that occurred previously with the provision of televisions to some and not other prisoners.
7. All prisoners have the use of normal facilities whilst on the Unit such as exercise, telephone calls, and library use. The Board welcomed the addition of exercise equipment on the yard allowing prisoners the opportunity to participate in fitness programmes and continue to keep fit whilst in the Unit.
8. In response to HMIP the environment has continued to improve with redecoration and the introduction of pictures. It also has had the benefit of improved staff continuity.
9. During the reporting period there has been a considerable increase of cell damage and up to 5 cells have at times have been out of use. This has restricted the efficiency of the Unit particularly in the case of two Safer Custody cells which have been out of action, awaiting repair for over 3 months.
10. Board members have attended Reviews as often as possible bearing in mind the current very low number of experienced members. Board members are concerned that Healthcare staff are not always available to attend Reviews. This means that Board members are not able to sign the paperwork. Even

when a nurse attends s/he does not always have meaningful healthcare information about the prisoners. When reviews have taken place they have been conducted in an effective and professional manner, although they rarely start at the appointed time.

11. Adjudications are held each day and usually begin promptly.. It is not unusual to have in excess of ten adjudications in a day necessitating the need to continue into the afternoon.
12. The programming of Segregation and Monitoring Review Group (SMARG) meetings during the year has been somewhat erratic but this has now been addressed and will in future take place on a regular basis.
13. The Unit has continued to improve its performance in challenging times. The professionalism and commitment of the staff in the way they have interacted with prisoners has added greatly to this improvement.

5.7.1 HOUSE UNIT 6

1. **House unit 6/Close Centre (CSC)**
The Board is delighted to report that, after its comments in the 2011/12 Annual Report, HMIP will in future inspect the CSC and MCBS separately from the main prison.

House unit 6 comprises five wings, A to E.

A wing is the CSC wing and National Assessment Centre. The prisoners who are located here are deemed to be the most violent and disruptive within the whole prison system.

B wing was a post-assessment CSC Unit, but recently it has been decided to carry out assessments on this Unit also. C wing is the first national Managing Challenging Behaviour Unit (MCBS) and initially held both local and national MCBS prisoners, but changed during the reporting year to national only MCBS prisoners.

House units 6D and 6E hold Protected Witnesses.

Prisoners in HU6A and 6B are held under Rule 46.

2. The location of prisoners is determined by the CSC Management Committee. There are a mix of small units and designated Rule 46 cells in the High Security Estate. The total capacity is approximately 42. Prisoners may be referred to the CSC Management Committee from any establishment in the estate.
3. Each prisoner represents an extremely high risk to other prisoners, staff and themselves.
4. Some prisoners are awaiting transfer to a secure hospital. The Board is concerned at the length of time prisoners have to wait for a bed once they have been accepted by a secure hospital. The waiting time for a place can be many months, despite all efforts made by prison and psychiatric staff. Once accepted the hospital has 28 days to provide a bed.

5. All CSC prisoners will have been on normal location during their earlier sentence and because of their often severe behavioural problems they will arrive in Woodhill CSC from a Segregation Unit where they have been held for many months.
6. HU6A Unit is an Assessment Unit for the CSC system and also holds prisoners who are already accepted. The assessment period is 4 months.
7. The ratio of staff to prisoners is considerably higher than on normal location in order to provide the close supervision required.
8. Relationships between staff and prisoners are a vital component of the assessment process. Maintaining regular staff is an important part of this. Cross deployment is not helpful on this Unit although with the Re-profiling exercise staffing seems to have been more consistent. The regimes on the CSC and MCBS units are extremely sensitive to change, occasionally resulting in several single unlocks, which impact on association. The relationships built up between staff and prisoners are an integral part of the effective assessment/monitoring of prisoners and accurate risk assessments. Staff who do not know prisoners are less likely to challenge them, and as a result the stability of the unit may be put at risk.
9. Due to the unpredictability of the prisoners' behaviour staff may need to increase risk levels rapidly. The responsibility for increasing risk levels may be taken by the SO with the decision being reviewed by the Unit Governor.
10. Risk levels of all prisoners are managed and adjusted at a weekly multidisciplinary meeting – DRAM – Dynamic Risk Assessment.
11. The Unit has its own gym facilities. A dedicated member of the gym staff is detailed to HU6 to make weekly checks of equipment and log books, and has responsibility for gym induction on the Unit.
12. The Board is concerned that there are no opportunities for Education on the Unit. It appears that there was nothing built in the contract with Milton Keynes College for the CSC. The Board has received complaints from prisoners and staff about this.
13. There is no National policy for the use of High Control cells, but there is a local Woodhill policy. IMB are notified and invited to attend reviews when a prisoner is located in a High Control cell. The Board is pleased that there has been little use of these cells during the reporting period. Staff are working with difficult situations in a different way resulting in far fewer restraints.
14. After Re-profiling there has been more consistent staffing on the Unit, and the staff changes appear to have had a positive impact.
15. Staff on HU6A make full use of the Incentives and Earned Privileges (IEP) process.
16. Staff have a good knowledge and understanding of the prisoners in their care. They contribute on a regular basis to Assessments, and Care & Management Plans.

17. The personal officer scheme works well on HU6.
18. **HU6B**

The mix of prisoners on this Unit has resulted in the regime being less restricted than on HU6A.
19. The Board is concerned that there is little stimulation on the Unit.
20. IMB are invited to the monthly Management Committee meetings.
21. **HU6C**

This Unit had a mix of both local and national MCBS prisoners in the early part of the reporting year but now holds only national MCBS prisoners.
22. Prisoners whose risk assessments are appropriate have access to facilities in the main prison.
23. This is a small Unit and disagreements can escalate resulting in split regimes with reduced association for all the prisoners.
24. The Board is concerned about the lack of activities on the Unit, resulting in boredom for both prisoners and staff. In spite of a briefing from the Population Strategy & Specialist Units Manager, when the Board was informed about a variety of opportunities that would be available for the MCBS Unit, nothing has materialised.
25. The Board gives credit to individual staff who have made attempts to introduce minor activities and to interact more with prisoners.
26. The Board has some concerns that there is not equal access to interventions. Every prisoner on this Unit is entitled to a 1 hour session a week with the Psychologist and a 1 hour session with the Forensic nurse. It appears that local psychiatric services are too short staffed to provide the level of support needed by some prisoners.
27. IMB is invited to the monthly Local Panel MCBS meetings.
28. **HU6D and HU6E**

These Units have remained settled during this reporting period, although the Board has concerns that there is very little activity available to the Protected Witnesses.
29. The Board had concerns during the reporting year about the difficulties encountered by two prisoners in attending hospital appointments which were unacceptably delayed for several months.
30. **Healthcare on HU6**

Healthcare on the Unit is the responsibility of a Multi-Disciplinary Team composed of dedicated nursing staff, Psychologists, who are HMP Woodhill staff, Forensic Nurses, employed by Oxford NHS Foundation Trust, the

visiting Psychiatrist also employed by the Oxford NHS Foundation Trust, and an Offender Manager.

Members of the Team hold one-to-one sessions with prisoners in the CSC to discuss their issues and enable them to deal with difficult situations.

These specialist staff are involved in the comprehensive assessment, advice and support, care planning and review, and advising on staff skill mix and primary care needs.

MCBS prisoners are entitled to have weekly 1hour sessions with the Psychologist and the Forensic Nurse Specialist although this does not always seem to happen.

During the reporting year the psychiatrist left and both the MHIRT (Mental Health Inreach Team) support and intervention deteriorated markedly.

It is evident that there is not enough time within the prison regime for all the professionals who wish to see the prisoners to be able to do so. It is apparent that one- to-one sessions have to be interrupted on a fairly frequent basis losing continuity and much of the value of these important interventions.

5.8 Residential Services

1. Kitchen

1. The Kitchen requires 28 prisoners to rotate over 7 days, with 6 to 8 in reserve, all having been risk assessed for such employment.
2. The prisoners work as cleaners, in the stores and producing food. All kitchen employees are trained to Level 2 Hygiene, which ensures that they can be involved in food preparation if necessary. This means that cleaners can be moved to food preparation if they are short of numbers.
3. The Kitchen regularly finds itself short of the required number of prisoners. The kitchen staff feel supported by the prison in trying to get the correct numbers; however, following an incident with a missing knife in the kitchen towards the end of the reporting year, half of the prison kitchen workers were sacked. This has meant a considerable amount of work recruiting a new workforce. Since then staff have needed to rebuild numbers and, possibly due to the hot weather, not so many prisoners have applied to work here.
4. Non-functioning equipment, such as ovens, chillers and trolleys, is a major issue, with significant consequences for such a large kitchen. The prison has plans in hand to replace the ovens this financial year.
5. Reduction in the budget from £2.10 to £1.96 per prisoner per day has been challenging, but the Kitchen has done well to adapt.
6. The main budgetary problem concerns the over ordering of meals by the wings. Some 700 meals per week, 100 per day, have been over ordered. The Kitchen Manager has been empowered to talk directly to Custodial Managers in the prison with regard to this in the hope of improving the situation.

7. The Kitchen staff work hard to formulate individual specific diets for those with special requirements, which are then regularly reviewed. This is over and above the usual range of diets, such as vegetarian, vegan, nut-free, and Halal.
8. The response to the “Horse Meat Scandal” was rapid and the Kitchen reverted to making pies and dishes from scratch, which has led to better feedback from prisoners, but costs a little more. £6,000 of products had to be thrown away during this time. Savings to cover this additional cost are made elsewhere within the Kitchen by using lentils and other pulses which are enjoyed by the prisoners but are relatively cheap to provide.

5.8.2 Canteen

1. The Canteen at Woodhill has for the reporting year come from a central supply system based at HMP Long Lartin.
2. The main problem is the wait of approximately 10 days after the completion and submission by the prisoner of his Canteen order before the goods are received.
3. To make matters worse any new prisoners arriving after orders have been collected on a Tuesday cannot put in any Canteen order sheets until the following Tuesday. They then have to wait another 10 days before receiving their order. This means they could go up to 17 days before they receive any Canteen.
4. To overcome this delay in delivery, especially for the new prisoners unfortunately falling within this 17 day window, the First Night Centre holds a selection of pre- packed parcels each with different goods and at varying prices. These are available for purchase by prisoners there and then to tide them over this period.
5. Prisoners who run out of tobacco can also discuss the issue with their House Unit Governor who is authorised to supply an emergency pack at his/her discretion.
6. Catalogues, such as Argos, are available on each House Unit for prisoners to order from.
7. Fresh fruit and Vegetables are still not available.
8. The system has bedded in but still needs close monitoring. However, it is good to see that contingencies are regularly put in place by the Woodhill SMT to counter the problems as they surface.

6.1 The Prison

It is to the credit of the management and all staff that Woodhill was the Number 1 Core Local prison at the end of the reporting year, and reached Number 2 in the HSE in the third quarter, and Number 3 in the fourth quarter. By the end of the reporting year Woodhill was ranked 35th in all prisons.

In total 35 of the 38 Service Level Agreements for 2012-13 were achieved or better with very strong performance noted for the sick absence measure.

Targets

- Requests and Complaints achieved 100% and general correspondence, 99.85%, the best results in the HSE.
- Against a target of 90% for discharge to court, 92.35% was achieved.
- Classroom attendance scored 78.77 against a target of 80
- Resettlement achieved 85.94% prisoners in settled accommodation against a target of 82%, 38.27% prisoners in employment on release against a target of 33% and 12.75% prisoners in education/training on release against a target of 9.5%.
- Living Skills were exceeded with 70 against a target of 69
- 89.71% of staff were C&R refreshed, against a target of 80%, and there were 43 advanced trained staff to meet the commitment to the Service of 42. This was the highest recorded by a core local prison.
- Sick absence rate was down to 7.46 days per member of staff, against a target of 9 days. Woodhill was the only Core Local to achieve this target.
- MDT finished on target of 6.52% against 8%. It was a challenging year for MDT in a core local with its associated transient population and medication abuse.
- The Security Audit achieved 95% against a target of 90%
- Self Harm Audit was Amber/Green
- Governance & Operational Audit which includes the Financial Control Audit was Amber/Green in spite of the fact that the prison did not have an accountant for the whole reporting year.

Throughout the reporting period the numbers of prisoners rose to 817, and the average number of prisoners was 763.

Section 7

THE WORK OF THE INDEPENDENT MONITORING BOARD

Board members have attended the following training courses organised by the Secretariat:

Foundation Course

Board members have attended the following training courses organised by HMP Woodhill:

Security Key Talk

Personal Protection

The Board has invited the following speakers to Board meetings:

Senior Officer, Security

Head of Education

Deputy Head of Business & Performance Unit –Information Assurance

Head of Secretariat & NC Support & Training Manager

National Council Area Representative

Population Strategy and Specialist Units Manager

The Chairs attended the IMB High Security Estate Chairs quarterly meetings.

The Chairs attended a CSC/MCBS meeting.

The Chairs attended South Central Area Meetings

The Chair attended a Cat A review meetings.

The Chair and another Board member attended an IMB London Area Chairs quarterly meeting.

The Board continued to work with 2 Co-Chairs to deal with the increased workload due to the shortage of members. During the reporting year the Board recruited 3 new members, another from a different Board, and selected 5 others who are currently waiting for Security Clearance.

The Board would like to particularly thank the outgoing IMB clerk for all her hard work and support during the year, and to welcome their new Clerk who has settled well in her new role. The Board also give thanks to members of the Admin team who provide cover if the clerk is away.

BOARD STATISTICS	
Recommended Complement of Board Members	20
Number of Board members at the start of the reporting period (incl. two members in their probationary year)	10
Number of Board members at the end of the reporting period (incl. four members in their Probationary year)	12
Number of new members joining within the reporting period	4
Number of members leaving within reporting period	2
Total number of Board meetings during reporting period	12
Average number of attendances at Board meetings during reporting period	9
Total number of visits to the prison/IRC (including all meetings)	701
Total number of applications received (General and Confidential)	617
Total number of segregation reviews held	249
Total number of segregation reviews attended	93

Section 7.1 Applications

Subject	2009/10	2010/11	2011/12	2012/13
Accommodation	6	6	15	8
Adjudications	2	12	9	8
Equality & Diversity (including religion)	4	17	11	2
Education/employment/training inc IEP	10	21	25	28
Family/visits inc mail & phone	15	41	51	42
Finance & Pay				10
Food/kitchen related	12	1	12	10
Health related	20	88	78	52
Property (within current establishment)	38	59	86	54
Property (during transfer/in another establishment)				20
Canteen, facilities, Catalogue shopping, Argos				8
Sentence related (inc HDC, ROTL, parole, release dates, re-cat, etc.	84	83	109	72
Staff/prisoner/detainee concerns inc bullying	19	13	54	52
Transfers				17
Miscellaneous	143	67	119	104
Total number of IMB applications	326	408	479	614

Of total: number of Confidential Access was:

127

The Board members at Woodhill have again worked exceptionally hard this year. The Board is eight members short of a full compliment and only has nine full members. This small number of fully trained members has undertaken all duties whilst providing mentoring for new members.

Section 8

GLOSSARY OF PRISON-RELATED ABBREVIATIONS USED

ACCT- Assessment, Care in Custody & Teamwork – replacement for F2052SH

ABS - Anti-Bullying System

BME- Black & Minority Ethnic

CARATS- Counselling, Assessment, Referral, Advice & Throughcare Scheme – drug & alcohol team

CNA- Certified Normal Accommodation

C & R- Control & Restraint

CSC -Close Supervision Centre

CM – Custodial Manager

FNC- First Night Centre

GOOD- Good Order or Discipline – Segregation under Rule 45/49

HCC- Health Care Centre

HCIP – Healthcare Inpatients

HMCIP- Her Majesty's Chief Inspector of Prisons

HU- House Unit

IEP- Incentives and Earned Privileges – Prisoners can be on Basic, Standard or Enhanced

IMB- Independent Monitoring Board

IRC- Immigration Removal/Reception Centre

JSA – Job Seekers Allowance

KPI/KPT- Key Performance Indicator/Target

MHIT- Mental Health Inreach Team

MKCHS – Milton Keynes Community Health Services

NOMS- National Offender Management Strategy

OMU – Offender Management Unit

PCT- Primary Care Trust

POA- Prison Officers' Association – the main trade union

PPO- Prisons and Probation Ombudsman

ROOTS – Recovery Orientated Offender Treatment Service

RRLO- Race Relations Liaison Officer

ROTL - Release on Temporary Licence – eg. to work in mess; town visits; home leave

SMT – Senior Management Team

SO- Senior Officer

UKBA – UK Border Agency

VP- Vulnerable Prisoner

WDP – Westminster Drug Project

YO- Young Offender