



**Independent Monitoring Board
HMP Wymott**

**Annual Report 2012-13
for
HMP Wymott**

**Reporting Period
June 2012-May 2013**

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 concerns 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
4. 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 the prison's records.

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This report has been constructed using the contributions of all members

Section 1

DESCRIPTION OF THE PRISON

1.1 HMP Wymott is a male Category 'C' closed training prison which houses both vulnerable prisoners and prisoners on main location.

1.2 The vulnerable prisoners are held in separate accommodation that has its own range of workshops and education and training facilities. Wymott is, therefore, to all intents and purposes two separate prisons within one compound.

1.3 The prison opened in 1979. Prisoners on main location are housed in relatively new accommodation built in 1996 with a high standard of facilities and security. Vulnerable prisoners are mainly housed in the two remaining original house blocks. Unlike the new blocks these do not provide integral sanitation; there are adequate arrangements, however, for night sanitation.

1.4 In 2004 the prison opened a new residential block of two wings (G and H). These were initially used as the prison's Induction Unit but are now used as standard residential units. G Wing provides lock-up cellular accommodation for vulnerable prisoners (as distinct from the older style VP accommodation on A and B Houses) and H Wing houses main location prisoners.

1.5 In September 2008 the prison opened a further residential unit, K Wing, with 64 cells and an operational capacity of 70. The layout of F Wing was modified to make it suitable for use as the prison's induction unit with separation of vulnerable and main location prisoners. D wing has been dedicated as a drug therapeutic community providing an Integrated Drugs Treatment Strategy whilst K wing operates as a self-contained therapeutic community for prisoners wishing to become drug-free. C wing acts as a 'drug free' wing for prisoners who are not taking any drugs.

1.6 The current operational capacity of the prison has not changed from 1176 with certified normal accommodation (CNA) of 1103. CNA represents the good, decent standard of accommodation that the Prison Service aspires to provide for all prisoners. The prison operated at or close to its operational capacity throughout the year. This means that the prison is generally operating at 107% of decent capacity.

1.7 I Wing provides a specialist elderly and disabled community

1.8 The Lancashire Care Foundation Trust provides healthcare services at HMP Wymott. Education (Offender Learning and Skills Service – OLASS4) is provided by The Manchester College. Phoenix Futures run the drug therapeutic community.

N.B. The information given in Section 1 above refers to the reporting year and may not be currently accurate

Section 2 Overall Summary

(a) Overall Judgement

Despite senior management's creative and inventive approaches in efforts to meet imposed financial stringencies, the changes demanded have been observed by the Board to impact adversely on the morale of staff. This directly results from the difficulties they face in being spread thinly across the activities required as a consequence of staffing reductions and also in the significant number of role changes. However the Board considers that management and staff have worked hard to maintain Wymott as a prison that holds prisoners with safety, decency, respect and security but very concerned that the outcome of staffing changes and reductions may make this satisfactory position more difficult to maintain.

(b) Issues requiring a response

(note: numbers refer to paragraphs in the report)

For the attention of the Justice Secretary

- The shift of policy in qualifying for the higher rate of accommodation allowance being increased from 25 to 35 is causing problems for under-35s seeking accommodation, a situation that is likely to escalate since there will be fewer unoccupied family bedrooms in social housing for released relatives to occupy in due to recent Government rules. (3.5.1.3)

For the attention of the Director of NOMS

- I wing contains 7 double cells with the result that elderly prisoners in those cells need to climb a ladder to access their bunk bed. Despite a 'buddy' system being in operation the requirement for elderly prisoners to climb ladders emphasises the unsuitability of this wing for elderly prisoners, particularly given the fact that wheelchair access to cells is impossible due to door widths. Additionally the access door to I wing exercise yard is too narrow to accommodate a standard size wheelchair. In the event of an emergency an elderly prisoner in such a wheelchair could not be rapidly evacuated. (3.1.5 & 3.1.7)
- The Board is concerned about the delay in connecting a sufficiently high-speed Internet connection to the prison to allow access to the 'Virtual Campus'. (3.2.5)

For the attention of Lancashire Care Foundation Trust

- The Board is concerned about the inconsistency of the provision of GP services (3.3.1)
- The Board is concerned regarding the circumstances in which visits by the doctor to CSU are conducted. The Board is concerned at the erosion of the confidentiality of healthcare provision in these circumstances. (3.3.3)
- CSU reviews are now held every 14 days. The attendance of mental health nursing staff at such intervals cannot be seen as providing an appropriate frequency of routine monitoring as required by the international standards to which HM Government subscribes. (3.3.4)

For the attention of the Governor

- There is concern that I wing is frequently without access to the Disability Liaison Officer due to this officer being frequently assigned to other duties. (3.1.2)
- The Board is concerned that there may be insufficient time for induction to allow prisoners to make a well-informed choice between work and education given the complexity and volume of information an induction prisoner has to assimilate in a short time. (3.2.1)

Section 3 Reporting Areas

3.1 Equality and Inclusivity

3.1.1 The Board is concerned that Equality Action Team (EAT) meetings are sporadic and liable to be cancelled with little notice. EAT meetings are poorly attended by prisoner representatives with consequential delays in their Equalities training and lack of discussion of issues. Additionally the minutes of some meetings were not circulated. The Board understands that the Governor and the Head of Safer Prisons is addressing these issues.

3.1.2 Three officers are designated as Disability Liaison Officers but shift patterns often result in only one being on duty and frequently re-assigned to other roles. However the Board is pleased that in the absence of a Prison Service Order for elderly prisoners, the Prison has devised its own older prisoner policy.

3.1.3 Prisoners undergoing or having completed gender re-assignment agree a compact with the Prison. There is an officer specially trained in gender re-assignment. In the event of a reduction of IEP status all of the in-possession items allowed for transgender prisoners will be retained except at Basic level where nail accessories will not be allowed. Transgender prisoners have their privacy protected whilst showering and have access to specialised counseling.

3.1.4 The Prison usually has a very small Traveller population and in the past these prisoners have been considered as a separate group. However this grouping has ceased and these prisoners are now included with the general population.

3.1.5 The Prison has a significant population of elderly prisoners, which is likely to grow. At the time of writing there are 67 prisoners over the age of 65 with 31 over 70 years old and 5 over 80 years. The majority of these are held on I wing which the Board considers unsuitable for such prisoners. This was stated in two previous annual reports. The wing contains 7 double cells (actually single cells converted to double by the introduction of bunk beds). The result is that elderly prisoners have been required to climb a ladder to access their bed. To reduce the possibility of accidents to elderly prisoners whilst trying to access their upper bunk, the Prison has introduced a 'buddy' system whereby younger prisoners (who do not really need to be on I wing) are accommodated in the top bunks. This emphasises the unsuitability of this wing for elderly prisoners. The Board maintains its concern regarding elderly prisoners as it did in its last annual report.

3.1.6 Elderly prisoners are unlocked, with free association for the core day and some are able to access light work. The Salvation Army runs educational and social activities and there is a specially equipped gym available on the wing. Social Services are alerted a few months prior to an elderly prisoner's release.

3.1.7 At the insistence of the Board one evacuation chair has been placed on each wing of the Prison for use by elderly or disabled prisoners in the event of an emergency. This quantity is considered insufficient.

3.1.8 The access door to I wing exercise yard is too narrow to accommodate a standard size wheelchair and in the event of an evacuation a standard wheelchair would have to be placed either side of this door with the prisoner manoeuvred across from one to the other.

3.1.9. The Board sampled 5 of the 25 DIRF complaints submitted by prisoners over the reporting period. The Board found that all records were correctly completed and filed in logging order with responses by staff and governors attached. There was a clear audit trail apart from acknowledgment of receipt (see below). Written responses to prisoners were clear and fully addressed each grievance. In each case a formal, formatted, written response was provided to the Deputy Governor. The Board considers that the management and operation of these complaints had improved considerably when compared with its past audits. However the Board noticed that one DIRF form audited had been delayed on a wing for 19 working days before being submitted to the Safety Prisons Governor and the Board is given to understand that this event was not unusual. Although the Board acknowledges that this Governor personally responds to submitted DIRF forms as soon as possible, it may not always be the case given the pressure of other duties, and because of this there can be delays in the initial responses. The Board suggests that consideration be given to the introduction of an automatic written acknowledgment of receipt of DIRF forms

3.1.10 Foreign national prisoners with less than 12 months to serve are invited to attend a 'surgery' each month. Two immigration officers from HMP Risley provide these surgeries with prisoners being seen on a one-to-one basis.

3.2 Education, Learning and Skills

3.2.1 The Board is concerned that there may be insufficient time for induction to allow prisoners to make a well-informed choice between work and education given the complexity and volume of information an induction prisoner has to assimilate in a short time. Currently the 'Resettlement and Interventions Board' sits on the Wednesday of induction week at which work choices will be made but education information is provided to new prisoners in the week following. The Board understands that negotiations are taking place to try and address this situation.

3.2.2 The Board is concerned that prisoners appear to be encouraged into accepting work over education, even though they may have poor literacy or numeracy skills. This may possibly be driven by the need to meet commercial contracts. Adding to this problem is the need to shift prisoners off the induction wing as soon as possible. Another strong factor is that prisoners will choose work given the attraction of earning higher wages even though they may lack, and need, basic skills to progress in employment on release. There is also a concern expressed that some workshop staff may have a 'work experience is more useful than education' attitude. The concomitant concern of the Board is that under OLASS4 education funding is determined by attendance and achievement and the outcome of fewer prisoners attending education will lead to a funding reduction that may make its provision uneconomic. There are arrangements to provide literacy and numeracy within the industries funded through OLASS4 but there is no provision for this funding to support those on longer working hours who may need these skills. However prisoners working long shifts in the laundry are allowed a 'rest day' each week and. currently very

few of these prisoners take up education and the Board considers that the Prison could do more to encourage this.

3.2.3 The Board is also concerned that some prisoners may be deterred from entering education because there is often a long wait to take some courses due to the limitations in staffing and classroom space. Some prisoners have informed the Board that student services staff do not provide sufficient information on course content, often leading to disappointment (and disruption) upon taking the first session. Gym times may also mean that some prisoners will choose gym above classes occurring at the same time.

3.2.4 The Board considers that classroom accommodation is suitable for educational purposes but is given to understand there is insufficient space to cater for induction sessions as well as running education classes or ad-hoc courses since every classroom is utilized. Prisoners are escorted for classes in good time to attend sessions. Over the reporting period the Board received only 3 Applications regarding education but none concerned teaching staff or teaching quality.

3.2.5 The Board is concerned about the delay in connecting a sufficiently high-speed Internet connection to the prison to allow access to the 'Virtual Campus'. The Virtual Campus, if fully working, can be a potential power in the education and training of staff as well as prisoners and would be a great resource in helping prisoners prepare for release and employment, for example accessing job adverts. Of more immediate concern is that the lack of a high-speed Internet connection is preventing prisoners who are on construction courses achieving final NVQ2 assessments or being able to gain site safety certificates, without which they cannot enter a construction site.

3.2.6 During the reporting year education staff suggested forming a prisoner group to promote education to other prisoners. Sufficient enthusiastic prisoners were interested and the Student Council was formed, one council for VPs and one for normal location prisoners. Each wing now has an education representative, identifiable by their yellow jerseys, who promote learning. The Student Council produces 'Wise Up' a newsletter launched in April 2013 and distributed on the wings. The Board welcomes this initiative especially when it is prisoners encouraging other prisoners.

3.3 Healthcare and Mental Health

3.3.1 The Board remains concerned with regard to certain issues regarding GP services. It is unable to agree with the Minister's view, as expressed in his letter to the Board in response to the Annual Report of 2011-2012, that the fact that the same locum service has been engaged for 18 months provides an appropriate level of consistency. The Board was advised in the Minister's letter (18 December 2012) that the GP delivery model at Garth, Preston and Wymott prisons was being reviewed by Lancashire Care Foundation Trust. The Board has not seen evidence of the outcome of that review.

3.3.2 In the Board's view, the current arrangements can lead to standards being compromised. In some cases nurses have been asked to sit in on GP consultations, undermining the confidentiality that the prisoner/patient is entitled to expect.

3.3.3 The Board has also observed directly what it regards as less than satisfactory screening of prisoners held in the Care and Separation Unit. On occasions, the interaction between doctor and prisoner appears to be cursory, particularly where the doctor may be less familiar with the CSU context. This is a matter of great concern to the Board at a time

when prisoners are being held in CSU for longer periods as regular professional screening of their emotional and mental wellbeing must be an essential element of their care. This role in monitoring the wellbeing of prisoners in CSU appears to be unclear to GPs. General nursing staff currently visit CSU each day but it is not clear to the Board that their role includes monitoring and reporting on the mental wellbeing of prisoners.

3.3.4 The circumstances in which these visits by the doctor to CSU are conducted are also not conducive to the confidentiality to which patients are entitled. The checks on wellbeing take place at an open door in earshot of any prison staff or visitors to CSU, leading to the danger that prisoners will not want to voice their concerns. On one occasion the doctor was observed, by the Board, conducting a check on prisoners accompanied by a nurse and a prison officer. The presence of an officer in such interviews must be seen as wholly inappropriate. The Board is concerned at the erosion of the confidentiality of healthcare provision in these circumstances.

3.3.5 On a positive note, nursing staff from the Mental Health In-reach Team now attends all Rule 45 reviews in CSU. However, those reviews are now held every 14 days. The attendance of mental health nursing staff at such intervals cannot be seen as providing an appropriate frequency of routine monitoring as required by the international standards to which HM Government subscribes. (Council of Europe, *European Prison Rules, Rule 43.2*). The Board does not doubt that staff respond appropriately to any concerns with regard to mental wellbeing that are brought to their attention and its concerns are specifically to do with the arrangements for the routine monitoring of wellbeing in conditions of segregation.

3.3.6 Dispensation of medication remains a concern to the Board. That concern is primarily to do with the arrangements rather than the professional conduct of nursing staff.

3.3.7 In his response to the Board's Annual Report for 2011-2012, the Minister gave the Board to understand that the problems with availability of repeat prescriptions would be resolved by the introduction of electronic prescribing, scheduled for March 2013. At the end of the reporting year (31 May 2013) that had not been introduced. The Board is aware that electronic prescribing has now been introduced, but not without its teething problems. It is unclear whether the review of pharmacy services by Lancashire Care Foundation Trust, as promised in the Minister's response, has brought improvements to the service.

3.3.8 The Board has been aware of conflicts in prescribing which have caused concern to prisoners. These conflicts arise where the prison GP appears to overrule a hospital specialist's prescription or a prescription already held by a prisoner transferring in from another prison. The Board does not seek to question the clinical decision of the doctor but is concerned at the issues raised by what prisoners may perceive to be a lack of consistency.

3.3.9 Arrangements for daily dispensing of medication on the wings are generally handled by nursing staff as sensitively as is possible. However, they present a potential for prisoners to be bullied for their medication, as has been reported to the Board directly and in CSU Rule 45 reviews. Early lock-up on weekend evenings also means that prisoners may be required to take medication at an inappropriate time. This is a matter of concern where the side effects include drowsiness. Prisoners are understandably reluctant to take such medication too early in the evening.

3.3.10 The Board is particularly concerned at one area of apparent intransigence in the dispensing of medication. On more than one occasion (and on different wings) the Board has been made aware that prisoners attending Chapel on Sunday morning may miss their medication because nursing staff attend the wing when they are at Chapel. On one

occasion prisoners were told that they should have waited on the wing and not gone to Chapel. The Board understands the constraints under which Healthcare staff may be working at weekends but finds this to be unacceptable.

3.3.11 The question of waiting times for GP appointments remains a vexed issue. At times it has been difficult to establish clearly what the waiting times are, with different figures apparently being available at the same time. The triage system operated by the nurse-practitioner ensures that urgent cases are seen promptly but there appears to have been an increase in the waiting time for non-urgent GP appointments.

3.3.12 That situation has not been helped by an increase in non-attendance at appointments at one stage during the year. The Healthcare Manager had previously been successful in reducing considerably the non-attendance rate, as noted in a previous Annual Report. A part of the problem appears to have been that appointment slips have been delivered late to the wings and not distributed in time for prisoners to attend. Such non-attendance due to unawareness of the appointments may then have been recorded as failures to attend.

3.3.13 The Board has been made aware that conditions in the Healthcare waiting room and the limited availability of escort staff have caused distress to some prisoners. The waiting room can be crowded at times with prisoners having to wait some time to return to their wings or workplace after their appointments and can become stuffy and overheated as a result. It was also reported to the Board that prisoner toilets are kept locked which means that prisoners cannot gain access when escort staff are elsewhere.

3.3.14 The Board was also concerned to note an apparent inflexibility in requiring an I Wing patient to attend Healthcare rather than the doctor attending the Wing. This seemed inappropriate, given the prisoner's reported confused condition and it seemed that it would have been more appropriate for the doctor to make a 'home' visit. Requiring the prisoner to leave the wing only added to his confusion and distress. The prisoner's location on I Wing was close enough to the Healthcare Centre for little inconvenience to the doctor.

3.3.15 The Board has received fewer formal applications with regard to Healthcare provision although it continues to receive informal applications. The reduction in formal applications may be attributable to a greater awareness of the Healthcare Department and the Foundation Trust's own complaints procedures. The Board has noted, however, that these do not appear to be adequately publicised on wing noticeboards and that healthcare complaint forms are not always readily available.

3.3.16 Because of the nature and age of the Wymott prison population there will inevitably be several prisoners who suffer long-term illness and die in custody of natural causes. The Healthcare Department has submitted an application for funding to establish a palliative care suite to allow prisoners to be treated with dignity and the Board supports this positive step in elderly care.

3.3.17 The Healthcare Manager has raised a number of concerns with regard to the way in which waiting times for dental treatment are recorded and monitored. Her concerns arise from the application of Prison Health Performance and Quality Indicators, which do not reflect adequately the particular circumstances of HMP Wymott. The Board is not qualified to comment on the detail of those concerns but for some time it has held the view that the provision of dental services does not reflect the significant differences in oral health and oral neglect in the prison population as against the general population.

3.4 Purposeful Activity and Work

3.4.1 The introduction of the 'working prisons' concept has meant that some of the workshops have been more strongly dedicated to commercial activities and thus to some extent prone to market forces. This has meant that much purposeful activity provided by them is subject to the vagaries of these forces. There is a reluctance to lose workers to education when outside contract demand falls causing some prisoners to be idle during these periods. However if these prisoners were allowed to enrol on education classes and subsequently the workshop load increases, re-transferring them to the workshops and the consequential drop in class attendance would lose the Prison money because of the funding arrangements of OLASS4. The Board commends the Prison in working hard to achieve the development and maintenance of contracts and the changes needed to meet their demands.

3.4.2 The Board praises the work of the Salvation Army in its running of the 'Cameo Centre' in offering a wide variety of social and other activities for elderly and disabled prisoners on I wing.

3.4.3 There has been less progress with contract employment on the main location side of the prison in contrast to that provided for prisoners on the VP side. As a consequence the Board has noted periods of reduced activity for main location prisoners and the Board is disappointed that development of the 'working prisons' initiative has not been pursued as actively as the VP side of the prison.

3.4.4 Towards the end of the reporting period the Laundry made a successful transition to a full 7-day operation. The Board has been impressed by the increase in prisoner engagement making the new Laundry contract a success, with prisoners working flexibly seven days a week, and up until 8pm in the evening

3.5 Resettlement and Reducing Offending

3.5.1 Pathways Overview

3.5.1.1 The Board considers the reducing re-offending pathways are providing a focus for staff and management around which to plan and operate actions to help prisoners on release and to reduce re-offending, with each pathway providing a set of criteria against which developments and actions can be made and outcomes measured. Short as well as long-term prisoners are included in appropriate reducing re-offending arrangements. The introduction of the 'Working Prisons' concept and the concomitant introduction of the working week is, the Board considers, a positive step towards helping prisoners to gain the employment experience and skills essential to avoiding re-offending (see section 3.4 above) including developing a work ethic. There are, including vocational workshops, a total of 617 workplaces for VP's and 557 for prisoners on normal location. At the time of writing 55 places were unallocated. The introduction of the 'longer working day' to meet the 'working prison' concept presented logistical problems caused by variations in the length of the working day. The Board considers that the Prison has successfully met this challenge. A prisoner consultative group for re-settlement does not exist but consideration is being given to the formation of one

3.5.1.2 The pathway criteria dealing with accommodation appears to be hardest to fulfil. The Board understands that the Government is developing a system whereby prisoners would make accommodation registering and bidding applications using the Internet. There

is a problem in developing this service at Wymott because Internet access for prisoners is very limited and the existing connection is too slow. Additionally the Board is concerned that such a system for obtaining accommodation would present difficulties for the many prisoners who are illiterate, dyslexic or unsure of using the technology. The Board understands that some local housing authorities are developing this method as the only route to seeking accommodation and are likely to unduly delay paper applications.

3.5.1.3 An additional difficulty that prisoners encounter when seeking accommodation on release is a lack of appropriate supporting infrastructure in the community. Due to the financial climate there has been a decrease in the number of housing charities, support workers and centers for homeless people. Additionally the shift of policy in qualifying for the higher rate of accommodation allowance being increased from 25 to 35 is causing problems for under-35s seeking accommodation (the 'bedroom tax' will exacerbate the problem since there will be fewer unoccupied family bedrooms for released relatives to occupy). The Board acknowledges that this is a matter for the Minister.

3.5.1.4 The issues above highlight the difficulties that Wymott has in obtaining accommodation for prisoners and the Board considers that the single housing officer provided by 'Shelter' is insufficient to satisfactorily meet both the needs of prisoners and liaise with housing agencies, especially when accommodation is one of the major strands in the prevention of re-offending. The Board doubts that the Prison will be able to maintain a 10% improvement in sustainable accommodation as set out in its *Establishment Priorities 2012-13* document. The current KPT is met but since it measures only accommodation provided at the time of release and not longer-term accommodation, it appears not to be a very useful measure to measure the long-term accommodation that is vital to preventing re-offending.

3.5.1.5 Trained peer mentors are effective in providing prisoners with assistance and a link with a housing officer but there appears to be insufficient staff to deliver sufficient relevant pre-release courses.

3.5.1.6 There appears to be little communication and joint working between the Prison and the Probation Service regarding pathways outcomes. It is understood that the Probation Service appears to be concerned singularly with prisoners achievement of offender behaviour programmes and ignoring the additional information, vital to successful rehabilitation, that prisoners have achieved through education, improved literacy and numeracy and the important skills and work-ethic attitudes gained from the 'working prison'. The Board urges that there needs to be an improvement in the scope of Offender Managers in this respect through the transfer of information so that Offender Managers have a complete picture of an offender.

3.5.1.7 The Board understands that Market intelligence shows much of the work in the region is leisure, tourism and retail. These are difficult, if not impossible to replicate in real work situations in Wymott. Catering is an industry that may provide local jobs, but the Prison does not deliver any vocational qualifications in this industry (apart from food hygiene). An NVQ used to be provided but was cut during the benchmarking process. However the Education section assists prisoners in gathering a portfolio of evidence towards gaining a qualification in the future.

3.5.1.8 The '*Establishment Priorities 2012-13*' document states that an external Wymott Enterprises Shop will be established to sell local products from October 2012. This has now been established with a portacabin adjacent to the visitors' centre selling items produced by prisoners including joinery items. A small market garden area has been

established to provide goods for the shop. This shop, at the time of writing, is not yet open.

3.5.1.9 The priorities document also promised that the specialist skills of all workshop staff would be increased by January 2013 and onwards. The purpose of this was to multi-skill workshop staff allowing for increased flexibility of sickness or holiday cover in workshops to prevent prisoners being returned to wings. This is ongoing.

3.5.1.10 Monthly family forums give relatives an appreciation of what life is like in Wymott. Additionally there are a number of family days within the year when families can have a social meeting with their prisoner relative. These are always oversubscribed and the Board considers that the number of occurrences should be increased to help effect resettlement. The Board understands that although much is being done to help prisoners to resettle nothing is done in preparing families to receive a released relative and how to assist in the ex-prisoner's resettlement.

3.5.1.11 The Board is concerned that at the time of writing around 200 prisoners are awaiting assessment for the Sex-Offender Treatment Programme but there are only around 40 places available at any time. This shortage of places is exacerbated by the need to ensure that there is a range of index offences represented in each programme group.

3.5.2 Visits

3.5.2.1 The purpose-built visitors' center, operated by POPS has a warm and welcoming atmosphere with excellent facilities for refreshments. Additionally it includes a children's play area operated by suitably qualified POPS volunteers. Access can be gained to advice and guidance leaflets covering various aspects of interest to prisoners' relatives. Visits booking, also operated by POPS, has become easier due to the introduction of a second telephone line and the introduction of on-line booking.

3.5.2.2 Visitors with disabilities can gain access to the visits area within the Prison via a lift. The Board has noted that the security searching of visitors is conducted with respect.

3.5.2.3 In its last report the Board complained of the poor ventilation and lack of air conditioning in the main visiting hall. The Board is disappointed to report that this condition remains unchanged making for unpleasant visiting in hot and humid weather. However the Board is pleased to report that the prisoners' visits holding area has been refurbished.

3.5.2.4 The Board is concerned that closed visit cubicles are located on the VP side of the visits area causing main location prisoners on closed visits to cross this section.

3.5.2.5. Every six weeks a 'Family Forum' is held allowing the discussion of issues of importance to relatives. Lifer days are held twice per year. Family visit days are held monthly allowing each prisoner to have up to 15 family members present. The Therapeutic Community holds its own family days and a parenting course is held 5 times per year.

3.5.3. Offender Management

3.5.3.1 In its previous annual report the Board noted its concerns regarding the high case load held by Offender Supervisors and stated that in some cases supervisors were responsible for as many as 90 prisoners. This caseload allocation has deteriorated even further over the reporting period with some staff having to manage over 50 cases but may often rise to nearly 100. The Board considers that such high caseloads make it very difficult for supervisors to give the attention demanded to ensure that every prisoner's sentence plan is executed most effectively.

3.5.3.2 Of concern to the Board is that OMU staff shift patterns were changed requiring them to work weekends and share wing and escort duties. This new pattern caused problems which were addressed with the intention that staff should not be required to cover this work. In reality this proved impractical and there remain many occasions when staff have to be taken from their own work to cover other duties. Working weekends necessitates rest days being taken mid week making it more difficult for OMU staff to contact necessary agencies and attend Category Boards, MAAPA meetings and Parole Hearings. Again this impacts upon prisoners' sentence progress. The need to attend these Boards and Hearings has been resolved by the good will of staff negotiating their time to accommodate such meetings.

3.5.3.3 The introduction of '*Fair and Sustainable/A New Way of Working*' has caused considerable difficulty as only 3 of the 14 OMU staff have opted to sign the new contracts and as a consequence will be leaving the work they have undertaken for many years. With them goes the experience and good practice that the Offender Supervisors have perfected over a lengthy period of time. Yet again it will be prisoners who will feel the effects. The Board notes that there has been an increase in OMU staff long-term sickness, which it understands, is due to stress generated by difficulty in balancing their caseload and still maintain high standards and quality. The Board has noted over the reporting year that staff complain of staffing changes and reductions leading to 'fire fighting' crisis management (and which the Board has noted in other areas across the Prison). There has been an increase, noted by the Board, in prisoners complaining they do not see their Offender Supervisor and other prisoners who do not know who their Offender Manager is. Many Offender Supervisors complain that they are frustrated by the lack of contact time they now have with prisoners.

3.5.3.4 Offender Managers are now also required to deal with transfers applications, video conferencing and legal correspondence. As a consequence of the introduction of 'Single Case Administration' these managers have been required to change the way in which they work, now being responsible for a group of prisoners throughout the whole of their time in the Prison. Consequently Custodial Administration staff have been trained in the supervisor role and vice versa. The Board has concerns that in the future new staff will have to take on these responsibilities without the guidance of experienced personnel.

3.5.3.5 All prisoners meet with their Offender Supervisor within the first three months of arriving at Wymott. Each prisoner should then meet with their Personal Officer every month in order to discuss progress and work towards the completion of all elements of their sentence plan and the RC1, when appropriate. However the Board understands that '*Fair and Sustainable/A New Way of Working*' and the recent Benchmarking exercise have affected staff numbers and shift patterns making prisoner contact with their Personal Officer more difficult. Additionally there are many occasions when Personal Officers are required to work on other wings and so do not have as much contact with their quota of prisoners during association time as would be expected. It is not unusual for a Board member to find that out of six staff working on a wing only 1 or 2 may be actually assigned to that wing on a permanent basis.

3.5.3.6 Despite the above concerns the Board considers that the OMU team has continued to work effectively over the reporting year and met the majority of its KPTs. Currently there is a fall in the KPT for Correspondence to 75.39% from the target of 95% and the 3 monthly assessment in the area of Public Protection is down to 87% from the target of 90%. In all other areas KPTs have been met. However Board considers that these KPT figures do not reflect the importance of the interpersonal relationships which are created through close working between the prisoner and his Offender Supervisor and Personal Officer; relationships with an impact that cannot be measured but may well show true

value in reducing re-offending. Positive personal contact is vital in this area of work and the concerns stated above may detract from this.

3.5.4 Drug and Alcohol Strategy

3.5.4.1 Although the drug and alcohol strategy at the Prison continues largely on the same three strands as in previous years; the Therapeutic Community (TC), the Integrated Drug treatment Service (IDTS) and the Counselling, Assessment, Referral, Advice and Through-care programme (CARATS), there have been a number of factors which have impacted in a significant manner on their delivery. At the time of writing, the contracts for delivery of the services in this area are out to tender. The Board hopes that this may lead to a more integrated approach with one agency being in charge of all three areas.

3.5.4.2 The Building Skills for Recovery (BSR) programme ceased as from the 13 March, although there is some funding until the end of September. This was a programme which only started in the previous reporting period and the Board is concerned that currently there are no plans to replace it. During the reporting period there were 80 starters and 71 completers on this programme.

3.5.4.3 Smart Recovery (SR) continues, but the Board is disappointed that there are no longer drop-in centers on Friday afternoons. The changes to the core day and longer working hours have had a very significant impact in this area. SR groups are still being delivered on A, B and K wings with 8 to 9 groups per month, but post September it is unclear to the Board how these will continue. There are problems accessing the training materials for the facilitators from the Internet. The number of prisoner 'Recovery Champions' varies due to movements on and off the wing and at the time of writing the Board considers that numbers are insufficient.

3.5.4.4 The CARAT team have changed their working hours in order to function more effectively within the new core day. However there are currently longer intervals between prisoner interviews due to staff on sick leave, meaning that fewer prisoners can benefit from the scheme. The Board will monitor any adverse effects that 'Fair and Sustainable' or 'Benchmarking' may have on this area. The team are working with the Lancashire User Forum to ensure that *Narcotics Anonymous* will have a presence in the Prison. Good contacts have been built with the Lancashire User Forum and meetings have been attended by members of staff. Several prominent members of the Forum are graduates of the TC at Wymott.

3.5.4.5. Although all data has now been imputed onto the NDTMS system, and the system is easier to use, there are ongoing problems. The Board has detected that the two healthcare organisations involved (NHS Lancashire and Lancashire Care) do not appear to be working as closely as they should causing CARATs staff to access data via the nurse's office rather than their own PC.

3.5.4.6 There have been a number of factors which have affected C (Drug Free) and D (IDTS) wings. The total reduction in numbers of prisoners dependent on Methadone has meant that some on D wing are no longer methadone dependent. However the Prison is being pro-active in its search for new IDTS residents. There is also a new IDTS nurse on the wing and there were 59 prisoners who detoxed in the last year. The Wings are also linking with the gym to promote detox. Both C and D wings have been affected by the necessity to decant prisoners from H wing because of building modifications on that wing. C wing is also being promoted for use in conjunction with the longer working hours initiative. It remains to be seen what impact this will have on its drugs free/recovery status.

3.5.4.7 K wing the TC community is the cause of some concern to the Board. During the reporting year, and in particular the last 6 months, there has been a significant increase in the number of incidents on the wing and some prisoners report that they do not feel safe. The geography of the building is such that there are a number of areas which are difficult to keep under observation. The uniform staff have an office on the ground floor, the upstairs offices all being occupied by Phoenix Futures. The Board is of the opinion that the two groups of staff do not seem to be working as closely as they need to do to ensure a more successful wing. Members of the Board report that at the time of visits there are always numbers of prisoners, seemingly unoccupied, sitting or wandering the corridors. During a recent IMB Rota visit a number of prisoners expressed their boredom stating that they had too much free time.

3.5.4.8 The Board has observed that disruption has been caused by the presence of 'lodgers' on the wing. These 'lodgers' are usually prisoners at the end of their sentences but due to a number of factors, the wing is now also used to house servery workers and cleaners from C wing. This was not only disruptive to the TC regime, but also to the residents, as the workers in question were not members of the community. Officers from the wing were required for escort duty in order to get them to and from work.

3.5.4.9 Whilst the Board considers that the TC does useful work, and has had a number of successful initiatives in the last year including 'Virtual Rehab.' days, Family days and Recovery Awareness days, the Unit is still rarely used to full capacity. In April there were only 51 prisoners in treatment. During the reporting year there were 77 starters and 42 completers. Whilst the Board accepts that success is measured in terms of 'personal change' this would seem a surprisingly high percentage given the number of incidents on the wing.

3.5.4.10 Drugs and misuse of medication remain on the list of security objectives. All incidents are logged and mapped showing that there have been searches yielding 'positive' finds of illicit substances. Visits are a focus for drug transfers and dogs are used on a regular basis. MDT and CBDT testing continue in line with the guidelines. Statistics are in line with what could normally be expected. Misuse of medication is monitored by healthcare and checks are carried out. Those suspected of trying to profit from this are targeted by security.

3.6 Safer Custody

3.6.1 The Board considers that during the reporting year HMP Wymott continued to acknowledge the importance of ensuring a safe environment for its prisoners, staff and visitors. Safer Custody continues to be given a high priority reflected in the allocation of senior management roles and responsibilities and in the strategic priorities and targets set by the strategic management team. This supports the development begun in 2009 when safety was upgraded to an establishment priority. The Board considers this to be an important, sustained and successful development over the last 4 years leading to an improved and safer environment for prisoners, staff and visitors. In 2012-2013 the Safer Custody team have achieved all the key performance and local targets set. This has resulted in the award of a Green rating in the Safer Custody Audit February 2013. The action plan resulting from the audit has already been completed.

3.6.2 A significant feature of the progress made has resulted from the emphasis placed on joint working with other departments in the prison including Healthcare (particularly the Mental Health team), Security, the Chaplaincy and support services such as CARATS and Education. Joint working has continued to expand during the reporting period, an example being that a Chaplaincy member now attends ACCT reviews whenever possible. This joint working has resulted in improved care for those prisoners with high dependency needs.

Discussions are also taking place concerning the role prisoners' families could play in helping prisoners on ACCT documents.

3.6.3 The monthly Safer Custody meeting (violence reduction and suicide/self-harm) monitors the effectiveness of the prison's safer custody strategy. This is chaired by a senior governor, emphasising its high profile. Its success lies in the diversity of staff attending and contributing to the meeting, the presence of prisoners for part of the meeting (who are encouraged to contribute) and in the provision and discussion of relevant and extensive statistics drawn from across the prison. The monthly Safer Custody Report introduced during 2011-2012 has been developed further and continues to provide extensive and relevant information to the meeting. For example, it identifies the total number of ACCT documents opened, their location, the reasons for opening those documents, a comparison with previous months and the number of prisoners on ACCTs entering Wymott. Similar extensive statistics are made available on the numbers of TAB documents opened, proven Adjudications and the number and location of assaults. The Board recognises the monthly Safer Custody report as an important tool in the maintenance of a safe environment and in the identification of prisoner need. The Board has attended 80% of these meetings during the reporting period and its representative provides a report to the whole Board at its monthly meeting. The MQPL Survey Research carried out at HMP Wymott in August 2012 found that only 24% of prisoners felt that the prison was not good at delivering personal safety and only 11.6% strongly agreed that they feared for their physical safety. 52.1% strongly agreed with the statement 'I feel safe from being injured, bullied or threatened by other prisoners in Wymott'.

3.6.4 In its previous report the Board drew attention to the need for improved consistency in the application of the TAB system. A need was identified to facilitate the identification of incidents of bullying and to establish an agreed prison-wide definition of bullying. A training package was developed by July 2012 and was rolled out to staff during the second half of the reporting period. That training is ongoing and has led to improvements in the application of the system. TAB documents are now completed with greater detail and perpetrators' offending behaviour is addressed with greater rigour. TAB documents continue to be checked weekly by a member of the Safer Custody team and by wing managers. Reports on both victims and perpetrators are made at the Safer Custody meeting and action is decided where appropriate. Following the audit in February 2013 which identified the need to inform perpetrators of the accusations against them, the TAB document has been amended. The MQPL survey of July 2012 showed that 33% of prisoners felt that victims of bullying did not get the help they needed to cope, suggesting that Wymott could do more to help prisoners who are bullied. However, the survey was carried out before the changes identified were introduced as in response the Safer Custody team have introduced new monitoring methods; for example, statistics on whether the number of incidents of self-harm can be linked with the number of TAB documents opened.

3.6.5 The prison continues to monitor and improve the ACCT process to ensure that prisoners feel supported and receive the help they need. Family involvement in the ACCT process is under active consideration. Following the Safer Custody Audit in 2013 the ACCT document was amended to record that prisoners are asked if they wish to have a member of their family involved in reviews. ACCT documents are checked twice a week by the Safer Custody team and by wing managers. Individual prisoner's progress is discussed at the Safer Custody meeting. The need to improve the consistency and quality of the management of care plans identified during the reporting period of 2011-2012 has led to the introduction of an improved system with greater continuity of personnel involved. The Board considers that the Listener Scheme continues to provide an excellent service for prisoners. Difficulties have been experienced in the provision of listeners on the Cat C side of the prison, in particular for G wing. The prison's management are aware of these issues

and is addressing them. The Board congratulates the Samaritans on their work to ensure listeners are well-trained and supported.

3.6.6 The Board welcomes the recently announced review of the IEP system by a senior governor. Over the last two reporting periods the Board has highlighted the need for improvements in the scheme's consistency and application across the prison. There is evidence from the MQPL that prisoners feel staff do not use the system fairly.

3.6.7 In conclusion, the Board considers that, over the reporting period, safer custody activities have continued to improve to the benefit of prisoners, staff and visitors. There have been no deaths in custody except those from natural causes. Green scores in the audits throughout this period reflect the progress made and the standard achieved. However the Board is aware that the significant changes resulting from the application of 'Fair and Sustainable' and benchmarking, together with the financial stringencies introduced last year, may affect this important aspect of the prison's work. Staff at all levels with expertise in this area of work have been redeployed and the number of staff available for monitoring has been reduced by 33%. At the same time changes in other activities which contributed to a safer environment - the number of random cell searches, the availability of dog teams, the changes in MDT- have all impacted on the tools available to maintain a safe prison environment. The Board will monitor the impact of these changes very carefully.

3.7 Care and Separation (Segregation)

3.7.1 The Board considers that the Care and Separation Unit (CSU) at HMP Wymott is well-run and that officers who work in the Unit have a helpful, tolerant and caring approach towards segregated prisoners despite the effects on staffing and morale that 'Fair and Sustainable' and Benchmarking have had. All officers receive Mental Health and Diversity training. The Unit provides a clean and bright environment for prisoners but the exercise areas are small and uninspiring and the security razor wire fences are covered in debris. No seating is provided within these areas but as the two areas are close together they do allow prisoners to converse during exercise periods.

3.7.2 Board members are satisfied that prisoners are segregated appropriately and that proper procedures are in place to ascertain the suitability of a prisoner for segregation. Every day the Duty governor, a member of the Healthcare team and the Chaplaincy visit the Unit and see each prisoner. A doctor visits the Unit every three days as a matter of routine. Prisoners have access to a telephone, showers and exercise every day. A note is taken of any prisoner who refuses showers or exercise. Participation by prisoners in activities is well documented. In-cell education and library books are available to prisoners. Prisoners in the Unit are not allowed access to the gym or other activities.

3.7.3 Board members visit the Unit once a week as part of rota visits. During these visits they speak with every prisoner and any issues raised are noted and pursued with the relevant prison staff. During the reporting period there is no evidence that the number of issues raised by prisoners has increased. The Board is aware however, that in the MQPL Survey of August 2012, of the 18 participants who had spent time in the Unit, 4 agreed and 6 disagreed that prisoners are treated decently whilst in the Unit. The Board also attends the initial 72-hour review with Rule 45 prisoners and at any subsequent reviews. During the reporting period 2011-2012 there were occasions when the Board was not informed when a review was to take place, but in 2012-2013 communications have improved and a set time for reviews has been introduced. Over the reporting period the Board considers that the reviews it observed were conducted in a professional, fair and prisoner-centred manner. The Board has also observed that prisoners were provided with the reasons for their segregation, the progress made to arrange transfers if appropriate and the

behaviours needed to allow them to return to normal location. Attendance by Healthcare at reviews has improved, particularly with the involvement of the Mental Health team.

3.7.4 A new regime has been introduced during the latter part of the reporting period which allows transfers from the Unit to other prisons only for security reasons or being expelled from the Therapeutic Community. This could lead to prisoners spending longer in the Unit than the Board would consider appropriate. However, Senior Management have taken all precautions to offer prisoners every support to return to normal location and communication to prisoners about the new regime has been clear and precise.

3.8 Residential Services

3.8.1 The Board noted that throughout the reporting period there were numerous reports of rat infestations in both A and B houses. Even though action was taken there were some reoccurrences during this period and the Board is concerned about this potential threat to prisoner health.

3.8.2 Over the reporting period there were six prisoners in I wing who required ongoing care to perform key activities such as washing, dressing and bathing; tasks that would be tended to by social care arrangements out in the community. Because of incontinence there were smell and sanitation problems on several occasions (exacerbated by the poor ventilation on the wing) causing complaints from other prisoners. The Board understands that the provision of social care is not the responsibility of the Prison, nor of Healthcare. However the Board applauds the fact that, despite constraints in finance, the Prison continues to provide a limited amount of appropriate care by employing careworkers to alleviate some of the problems associated with elderly people. This care is less than Social Services would provide in the community but is of great value in the wellbeing of elderly prisoners. This value is noticeable whenever the care workers are off duty and the care is provided by officers and other prisoners.

3.8.3 During the reporting period the VP side of the prison adopted the 'working prisons' concept, thus introducing a longer work hours regime. J wing and A house became dedicated to prisoners working in the print shop and laundry, whilst VP prisoners on B house and G wing did not work extended hours. This has caused a concentration of VP prisoners to be housed on G wing and the Board is concerned that the most vulnerable VP prisoners are now housed with higher risk VP prisoners.

3.8.4 The main location (Category C) accommodation is split between the drug treatment wing, substance free wing and induction wing, leaving only H wing as accommodation open for other prisoners. As a result, any prisoner needing to be moved off a wing is limited to accommodation in the induction wing or H wing. The Board considers that this has contributed to an increased number of prisoners on TAB documents, ACCT documents and higher risk prisoners being located on H wing. Throughout the reporting period there have also been occurrences of non-drug treatment prisoners being located on K wing. The Board considers that this may have a detrimental effect on the success of the programme offered on K wing.

3.8.5 Over the last four annual reports the Board has reported the poor state of the fabric of A and B houses. Unfortunately the Board has once again to report on the poor state of these buildings, and is disappointed that this continues to be the case, placing prisoners at risk of poor health, including no alternative but to sleep directly beneath windows that do not close properly. The overall temperature in cells during winter falls below acceptable levels and the Board wishes the Minister to provide evidence to support the claim made in his response to the 2012 Annual Report that the temperatures in these buildings are maintained above the minimum standard. Prisoners regularly reported to the Board the

need to wear multiple layers of clothing in an attempt to maintain a comfortable temperature whilst sleeping. The shower and toilet facilities on both A and B houses continue to be in a poor state of repair and in desperate need of upgrade, despite attempts to rectify the worst faults throughout the reporting period.

3.8.6 During the reporting period J wing showers and sink area were in state of disrepair for three months and three of the six showers were out of use over the same period (apparently awaiting parts). The Board is disappointed at the length of time it has taken to replace core elements of the bathing facilities on J wing when existing units were found to be leaking. Out of six shower cubicles three were out of use for three months whilst waiting for parts or to be made waterproof. For a wing of 40 prisoners the lack of facilities was less than acceptable and the Board urges that future repairs are completed within a short time period

Section 4 THE WORK OF THE INDEPENDENT MONITORING BOARD

4.1 During the reporting period the number of Board members over this period remained at 12. However during this period the Vice-Chair, together with Board members from Garth and Risleigh prisons, became a member of an interviewing panel. The outcome of this co-operation is that one of the members of the public interviewed has expressed an interest to join the Board of HMP Wymott. Three other members of the public had expressed an interest to join the Board and were interviewed and accepted as suitable. It is expected they will begin their training early in the next reporting period if recommendations are approved by the Secretariat.

4.2 The principal method used by the Board to meet its primary function of monitoring fairness and respect for those in custody is the weekly rota visit. The Board has been able to meet its commitment to weekly monitoring visits and, through the use of effective documentation, has been able to efficiently report on issues of concern and good practice identified at each of those visits. Prior to each Board meeting the Chair presents these issues to the Governor. The Governor continues to be active in promptly addressing the issues raised and reporting back to the Board. The Board is appreciative of this and the information provided by the Governor at each meeting. Important issues raised during the Board meeting are noted and followed up by members during their rota visits. The Board recognises the need to ensure that issues are not simply logged and forgotten and over the reporting year the worth of its 'Key issues log' in pursuing important issues has again been proven.

4.3 During the reporting period the Board, led by the Board Development Officer, reviewed its approach to the content and purpose of its programme of Rota visits. As a result of those meetings the Board formulated an action plan intended to improve its efficiency and effectiveness in reporting on the Prison and involving all members.

4.4 Board meetings are generally well attended, reflecting the level of commitment of members. The Governor or, on occasions, his deputy always attends the meetings to update members on current issues and developments and provides feedback on issues raised by the Board as a result of carrying out Rota visits. Board minutes are circulated to members via CJSM.

4.5 For reporting purposes each member of the Board is allocated to at least one specialist monitoring area thus improving the Board's overall knowledge and depth of monitoring. In addition, Board development is supported by regular pre-Board meetings at which either particular aspects of the Board's work are discussed or talks provided by members of Prison staff on particular areas of work. These meetings are also used to discuss other Board issues of concern. Several members of the Board attended the launch of the

Prison's Establishment Service Level Agreement for 2012-2013, copies of which were provided to all members by the Governor.

4.6 During the reporting year the Board reviewed and confirmed its Constitution.

4.7 The Board makes every effort to attend all Rule 45 reviews. There is an agreement with the Prison that, where possible, Rule 45 reviews, other than the initial 72 hour review, occur on Wednesday afternoons allowing the Board to attend reviews as part of a normal rota visit. The Board maintains its own record of individual reviews and is thus able to maintain a continuous overview of each prisoner held under Rule 45. The Board also attends a sample of internal and independent adjudications and has attended several incidents. The Board also attends Adjudications.

4.8 A team of six Board members take part in the induction programme for new prisoners and usually the induction of new staff in order to explain the work of the Board and how prisoners may make Applications. However some induction periods have been missed because the Board was not always informed of inductions occurring. During the year the Board has also attended, as observers, a range of Prison meetings in order to extend its depth of monitoring.

4.9 Table 1 below gives a detailed analysis of the work of the Board during the reporting year:

Table 1: The work of the Board over the reporting year

BOARD STATISTICS	
Recommended Complement of Board Members	16
Number of Board members at the start of the reporting period	10
Number of Board members at the end of the reporting period	10
Number of new members joining within the reporting period	0
Number of members leaving within reporting period	0
Total number of Board meetings during reporting period	12
Total number of visits to the prison (including all meetings)	480
Total number of segregation review sessions held (Rule 45) * No data available	*
Total number of segregation review sessions attended (Rule 45)	88
Date of Annual Team Performance Review	Nov 2012

Section 5

5.1 The following, table 2, shows an analysis of the issues raised by prisoners in their applications to the Board over the reporting period.

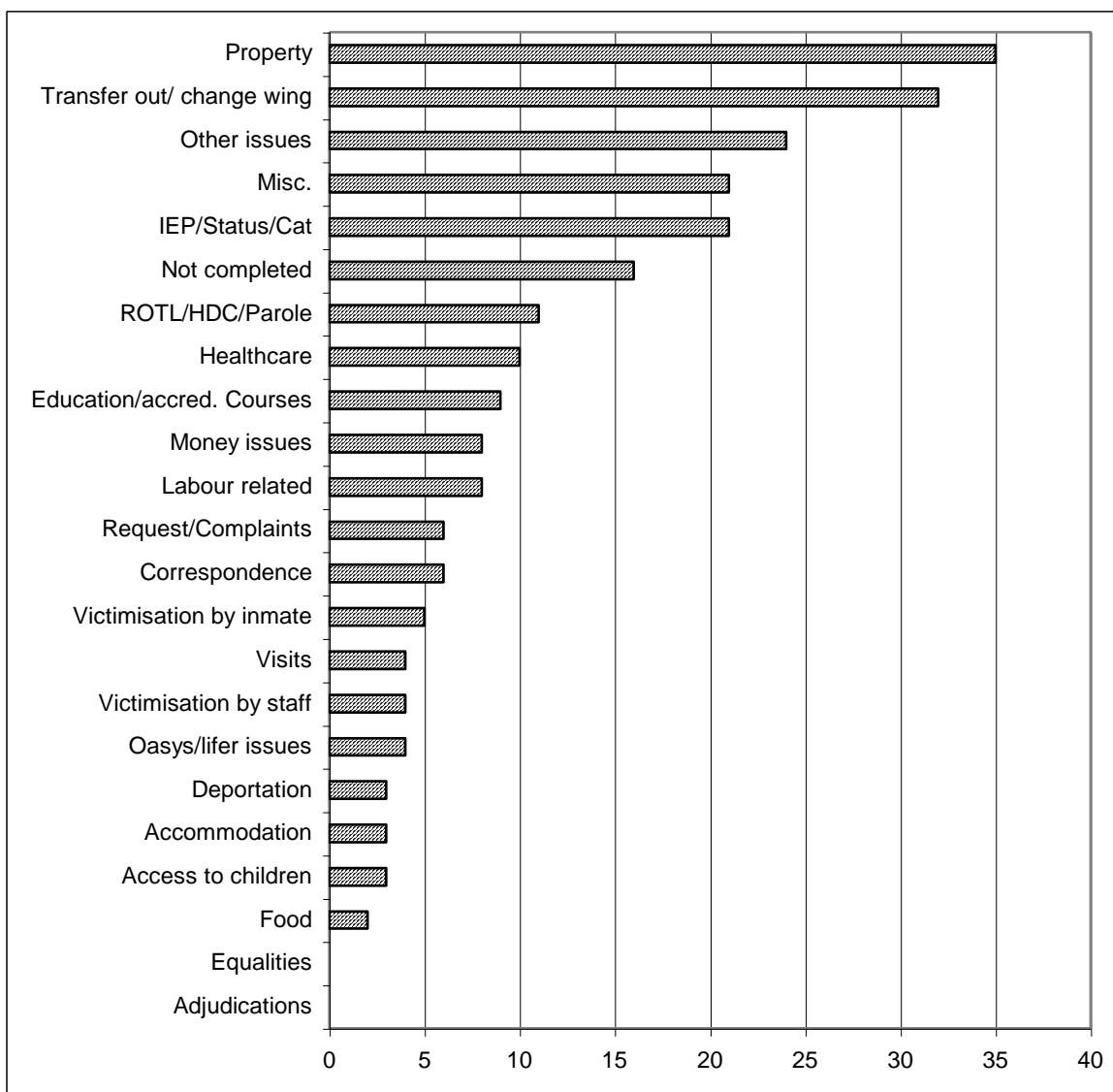
Table 2: Analysis of applications under national key headings

Subject	2009/10	2010/11	2011/12	2012/13
Accommodation	1	4	4	3
Adjudications	6	5	6	0
Correspondence	11	7	7	6
Equality related	2	0	2	0
Education/employment/training	21	22	25	17
Family/visits	18	21	7	7
Food/kitchen related	5	2	3	2
Health related	30	24	21	10
Property	62	27	43	43
Release/resettlement	21	13	18	11
Request/complaint procedure	2	7	2	6
Sentence related	23	25	18	25
Staff/prisoner related	7	10	10	9
Transfers	44	32	24	35
Miscellaneous*	58	75	62	61
Total number of applications	311	274	252	235
Total no. confidential access	Not avail.	Not avail.	Not avail.	12

* 'Miscellaneous' includes Applications regarding issues that had already been resolved, duplicated, withdrawn, prisoner did not wish to continue with application, duplicated applications or where a prisoner had not appropriately used the formal Request and Complaints procedure

5.2 Overall the number of applications to the Board has successively fallen over the past 4 reporting years. The Board does not have clear evidence why this should be so. However the number of prisoners requesting transfers has not significantly changed nor has that concerning property, and with sentence related applications these three account for nearly 50% of all applications. Family/visit complaints remain at a low level, possibly due to improvements in visits booking. Healthcare complaints have reduced year on year possibly as a result in Healthcare's own complaints system being more widely known. Figure 1, below shows detailed categories of applications by volume.

Figure 1: Detailed categories of applications by volume



N.B. 'Other issues' includes Applications regarding issues that had already been resolved, duplicated, withdrawn, prisoner did not wish to continue with application, duplicated applications or where a prisoner had not appropriately used the formal Request and Complaints procedure. Figure 1 not identical to table 1 since issues ungrouped to provide more detail

5.5 The 'Other issues' shown in figure 1 and are those applications that do not fall into any of the categories of table 2 and account for 26% of the Boards' work with applications. Some of these are listed below in table 3 to illustrate their diversity:

Table 3: 'Other' Issues

Delays in OMU (x 2)	Remedial gym
Paying for TV	Chaplaincy complaint
Pagan services	Cell sharing risk assessment
Draught from window	Missing canteen item
Security file query	Listener status
Closing bank account	Lost application form

Section 6 Abbreviations Used in the Report

ACCT	Assessment Care in Custody Teamwork
CARATS	Counselling, assessment, referral, Advice and Throughcare (related to drugs)
CAT C	Security categorisation of prisoners (Cat A highest, Cat D lowest)
CALM	Crisis, aggression, limitation and management
CNA	Certified Normal Accommodation (number of prisoners who can be accommodated without overcrowding)
CSRA	Cell Sharing Risk Assessment
CSU	Care and Separation Unit (Often known as Segregation)
DEAT	Disability Equality Action Team
DIRF	Diversity Incident Reporting Form
DLO	Disability Liaison Officer
FN	Foreign National prisoner
HMCIP	Her Majesty's Chief Inspector of Prisons
HRP	Human Relationships Programme
IDTS	Integrated Drug Treatment Service (Methadone maintenance)
IEP	Incentives and Earned Privileges
IMB	Independent Monitoring Board
IPP	Imprisonment for Public Protection (indeterminate sentence)
KPT	Key Performance Targets
MDT	Mandatory Drug Tests
MPQL	Measuring The Quality of Prison Life (survey of prisoners)
NACRO	National Association for the Care and Resettlement of Offenders
NOMS	National Offender Management Service
NVQ	National Vocational Qualification
OASys	Offender Assessment System
OFSTED	Office for Standards in Education
OLASS	Offender Learning and Skills Service
OMU	Offender Management Unit
PASRO	Prisoners Addressing Substance Related Offences
PCT	Primary Care Trust (Central Lancashire)
REAT	Race Equality Action Team
REO	Race Equality Officer
Rule 45	Removal from association either for own interest/own protection or in interests of good order or discipline
RIRF	Racist Incident Reporting Form
SIR	Security Information Report
SMART	Systematic Monitoring and Analysing of Race Equality Template
SMARG	Segregation Monitoring and Review Group
SOTP	Sex offenders' treatment programme
TAB	'Tackling Anti-Bullying' (Prison name given to anti-bullying policy and its documentation)
TC	Therapeutic Community (drug rehabilitation)
TSP	Thinking Skills Programme
VP	Vulnerable prisoners