Her Majesty’s Inspectorate of Prisons

EXPECTATIONS

Criteria for assessing the conditions in prisons and the treatment of prisoners
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Introduction

This is the third published edition of *Expectations*: the Prisons Inspectorate’s detailed criteria for inspecting adult prisons. Like its predecessors, it is a tool for examining every aspect of prison life, from reception to resettlement.

This volume, and its companion volumes on juveniles and immigration detainees, represent the distilled experience of an inspectorate that is focused on one task: examining and reporting on the conditions in places of detention and the treatment of those held in them. As before, they apply to all adult prisons, though in some prisons certain areas will have a heightened profile.

This task now derives from an international, as well as a domestic, duty. In June 2006, the new Optional Protocol to the UN Convention against Torture came into effect. It requires states to have in place an independent expert preventive mechanism for regularly visiting and inspecting places of detention. It is therefore important to note that these *Expectations* draw on, and are referenced against, international human rights standards. And the Inspectorate’s four tests – safety, respect, purposeful activity and resettlement – are increasingly accepted, both domestically and internationally, as the cornerstones of a ‘healthy’ custodial environment.

The Joint Parliamentary Human Rights Committee* considers that independent, human rights based inspection criteria are essential to fulfil the requirements of the Optional Protocol. These criteria do not precisely mirror Prison Service or National Offender Management Service standards, service level agreements or private sector contracts; on occasions they go further. Sometimes they draw on best practice, which is not yet expressed in standards: for example, the 2004 expectations on foreign nationals pointed to a need, which is now recognised, for consistent policies and procedures to support this specific group of prisoners. Sometimes they point up the shortcomings of an overcrowded prison system: such as prisoners sharing cells meant for one, with inadequately-screened toilets. It is important that, just because something has become normal, it does not become normative.

This edition takes in the findings of recent Inspectorate thematics on race relations and older prisoners, as well as recent legislation: with a revised section on race, and a new section on diversity. As well as those specific sections, equality of opportunity, including gender equality, is checked across all subject areas. Expectations on health services and resettlement (including work, learning and skills) have been substantially rewritten to reflect the changing landscape, and the increased focus on these important areas. Other sections have also been revised to take into account our own, and others’, developing experience: such as the joint thematic inspection of courts and escorts.

* Twentieth Report of Session 2005-6 HL Paper 186, HC 1138

HMIP: *Expectations*
Introduction

This illustrates what I said in the introduction to the 2004 edition: that these documents are necessarily subject to revision: taking in new policy, legislation and expertise. However, they also provide a bedrock of consistent and human rights compliant criteria in a system that is increasingly under pressure, more diffuse, and subject to conflicting demands.

Like its predecessors, this document has benefited from the accumulated knowledge and experience of all my inspectors and team leaders; and particular thanks are due to those who worked on the most-revised sections. It could not have been produced, however, without the detailed and comprehensive work of Dr Louise Falshaw and the research team she heads. I am also grateful for the helpful comments of all those who responded to our consultation, and in particular to the staff of the International Centre for Prison Studies, who again mapped the legal and human rights references.

*Expectations* is the basis for robust, independent and evidence-based assessment of conditions in prisons and the treatment of prisoners. Its content and approach have proved helpful to others who are monitoring and examining prisons, here and in other jurisdictions. It is, and should remain, a core part of the methodology of effective prisons inspection in England and Wales.

**Anne Owers**  
August 2006

HMIP: *Expectations*
Courts, escorts and transfers

Prisoners travel in safe, decent conditions to and from court and between prisons. During movement prisoners’ individual needs are recognised and given proper attention.

Expectations

1. **Prisoners are held in cellular vehicles for the minimum possible period of time.**

   **Evidence**
   - **Documentation:** check a random selection of prisoner escort records from the last six months.
   - **Staff:** ask staff about maximum times prisoners are away from establishments during transfers or court visits.
   - **Escort staff:** ask about local procedures.

   **References**
   - CCLEO 6
   - SMR 45(2)
   - EPR 32(2)

2. **Prisoners are given 24 hours’ notice of planned transfers, in order to make a telephone call to their family, next of kin and/or legal adviser (subject to well-evidenced security considerations).**

   **Evidence**
   - **Prisoners:** interviews with those who are leaving in 24 hours.
   - **Staff:** ask about policy. Check these telephone calls are documented.

   **References**
   - SMR 44(3)
   - EPR 24(8)

3. **Prisoners can have a meal before going to court or being transferred.**

   **Evidence**
   - **Prisoners:** establish the last time those leaving ate a meal.
   - **Staff:** ask about policy.

4. **Prisoners have access to appropriate clothing so that they do not have to wear prison uniforms, for example for court appearances.**

   **Evidence**
   - **Prisoners:** interviews with prisoners leaving for court, hospital visits etc.
   - Check also arrangements in place for foreign national prisoners.
   - **Staff:** ask about policy.

   **References**
   - SMR 17(3)
   - EPR 97(1&2)

HMIP: Expectations
Section 1 – arrival in custody

5. Property and private cash accompanies unsentenced prisoners to court and sentenced prisoners who are being transferred.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> interviews with prisoners leaving for court.</td>
<td>EPR 31(1&amp;7)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about policy.</td>
<td>DPA Schedule 1,</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures.</td>
<td>Article 3 &amp; 4</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that property is bagged and sealed.</td>
<td>SMR 43(1) &amp; (2)</td>
</tr>
</tbody>
</table>

6. Embarkation is efficient and minimises waiting times.

<table>
<thead>
<tr>
<th>Evidence</th>
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</thead>
<tbody>
<tr>
<td><strong>Observation</strong></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask how long they have been waiting.</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about local procedures.</td>
</tr>
</tbody>
</table>

7. Prisoners are escorted in vehicles that are safe, secure, clean and comfortable, with adequate storage for prisoners’ property and with suitable emergency supplies and hygiene packs for women.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check vans at reception, e.g. for cleanliness and temperature, immediately after prisoners have disembarked.</td>
<td>CCLEO 6</td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td>SMR 45, 12</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews with prisoners at reception.</td>
<td>EPR 19(7) &amp; 32(2)</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures.</td>
<td></td>
</tr>
</tbody>
</table>

8. Appropriate vehicles are used to transport prisoners with special needs such as pregnant women, women with babies or prisoners with a disability in a dignified manner.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check prisoner files and clinical records for evidence of communication between relevant criminal justice agencies or between establishments before transfer to ensure individual needs are met.</td>
<td>SMR 45</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures. Check that appropriate transport is available for prisoners with diverse needs.</td>
<td>EPR 32(2)</td>
</tr>
</tbody>
</table>

HMIP: Expectations
**Section 1** – arrival in custody

**Prisoners:** interviews if possible.

*Cross-reference with health services inspector*

9. **Methods of restraint are only used if justified by risk assessment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong></td>
<td>prisoners leaving and arriving during inspection.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>ask about restraints used during transit.</td>
</tr>
<tr>
<td><strong>Documentation:</strong></td>
<td>check risk assessments.</td>
</tr>
</tbody>
</table>

*Cross-reference with discipline inspector*

10. **All relevant information travels with the prisoner.**

**Evidence**

**Documentation:** check for PERs and warrants for every prisoner.

Check sentenced prisoners are also transferred with their main prison record, health record and sentence plan. On return from court, check that escort staff bring back copies of any previous convictions, any pre-sentence report and an annotated PER providing a full record of events.

**Prisoners:** interviews with prisoners arriving.

**Escort staff:** check that they are given all relevant information when transporting prisoners.

11. **Prisoners in transit are treated according to their individual needs, based on oral briefings or written information accompanying the prisoner and staff observation.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>check that any concerns about risk of self-harm, medical or language needs are noted in the PER and taken into account during escort. A member of health services staff should accompany prisoners with a severe mental illness. Check medication is provided where necessary.</td>
</tr>
<tr>
<td><strong>Documentation:</strong></td>
<td>check local procedures. Prisoners should be monitored for signs of stress.</td>
</tr>
</tbody>
</table>

*Cross-reference with health services, self-harm and suicide, foreign national, race equality and diversity inspectors*

**HMIP:** Expectations
Section 1 – arrival in custody

12. **Prisoners are given comfort breaks at least every two and a half hours with additional stops when necessary.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 12 &amp; 45</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews – ask about frequency of comfort breaks or toilet facilities during transit, especially on long journeys.</td>
<td>EPR 32</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures and arrangements for prisoners with special needs e.g. pregnant or disabled prisoners.</td>
<td></td>
</tr>
</tbody>
</table>

13. **Escort staff consistently use respectful language in speaking to, or about prisoners.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 48</td>
</tr>
<tr>
<td>Observation</td>
<td>EPR 1</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> in groups.</td>
<td>RRAA 1(1) &amp; 2(1)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask reception staff about their experiences of working with escort staff.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with race equality and diversity inspectors*

14. **Escort staff take responsibility for ensuring that prisoners receive an adequate meal and drink at meal times.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td>SMR 20(1)</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures. Check account is taken of special diets, for instance for religious or cultural reasons.</td>
<td>EPR 22(4)</td>
</tr>
</tbody>
</table>

15. **Female and male prisoners are transported separately.**

<table>
<thead>
<tr>
<th>Evidence</th>
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</thead>
<tbody>
<tr>
<td>Observation</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about procedure.</td>
</tr>
<tr>
<td><strong>Escort staff:</strong> check local procedures.</td>
</tr>
</tbody>
</table>
Section 1 – arrival in custody  Courts, escorts and transfers

16. Escort staff are trained in child protection procedures and ensure that juvenile prisoners are kept apart from adult prisoners.

Evidence

Staff: check their understanding of child protection matters and their procedures for keeping juveniles and adults separate.

References

EPR 81(3)

17. Prisoners are produced at court on time.

Evidence

Documentation: prisoner escort records.

Prisoners: interviews.

Escort staff: check local procedures.

References

ICCPR 9(4)

18. Prisoners are held in court cells for the minimum possible period.

Evidence

Prisoners: interviews.

Documentation: prisoner escort records and local court liaison protocols.

Escort staff: check whether delays were caused by late warrants or late OASys forms.

References

EPR 1

19. Prison receptions remain open to receive prisoners over lunch time.

Evidence

Observation

Cross-reference with first days in custody inspector

References

EPR 15

20. Prisoners arrive at their receiving prison before 7pm. Any prisoners arriving later than this still receive essential reception and first night procedures.

Evidence

Documentation: prisoner escort records.

Observation: in reception, check time of last arrival of prisoners.

Cross-reference with first days in custody inspector

References

EPR 15

HMIP: Expectations
Section 1 – arrival in custody

Courts, escorts and transfers

21. Prisoners are given information at court about the prison to which they are being transferred in a language they understand.

Evidence
- Observation
- Questionnaire
- Prisoners: ask prisoners what information they were given.

References
- EPR 30(1)
- ICCPR 14(3)(a)(b)(c)
- & (f)

Documentation: check local court liaison protocols.

22. Prisoners are offered the option of using the video link for suitable hearings.

Evidence
- Prisoners: ask prisoners whether they were given this option and, if not, check whether there was a reason why e.g. listings issues.

Documentation: check reason for court appearance in escort records.
Check usage of video link.
First days in custody

Prisoners feel safe on their reception into prison and for the first few days. Their individual needs, both during and after custody, are identified and plans developed to provide help. During a prisoner’s induction into the prison he/she is made aware of prison routines, how to access available services and how to cope with imprisonment.

Expectations – reception and first night arrangements

1. **Escort staff pass on all information/official documentation arriving with a prisoner to reception staff.** This information is used to inform initial reception assessments of the prisoner. Sensitive information is dealt with appropriately.

   **Evidence**
   - **Documentation:** full information should include: offence, notification of any vulnerability or risk, pre-sentence reports, previous convictions, public protection status, police reports etc. Also check for evidence of suicide/self-harm warning forms where appropriate.
   - **Observation:** it should be evident that the information collected is acted upon in assessments, e.g. opening of care and support plans for those at risk of suicide/self-harm.
   - **Cross-reference with courts and escorts inspector**

   **References**
   - EPR 15(1) & 16

2. **A vulnerability strategy to protect vulnerable prisoners is in place, which includes directions to managers concerning reception and first night procedures.**

   **Evidence**
   - **Documentation:** strategy should start with the premise that all prisoners are potentially vulnerable and ‘at risk’.
   - **Staff:** ask staff on reception about strategy and how it applies to reception.

   **References**
   - EPR 12(2) & 52(1) & (2)

   **Cross-reference with bullying, substance use and self-harm and suicide inspectors**

HMIP: Expectations
Section 1 – arrival in custody

3. Prisoners are greeted courteously by prison staff. The gender ratio in the reception area is appropriate to receive prisoners and undertake procedures.

Evidence: Questionnaire, Observation
References: SMR 53(3), EPR 75 & 85

Prisoners: ask those recently received into custody.

4. Prisoners experience a safe, clean and welcoming reception environment which is fit for purpose.

Evidence: Observation
References: SMR 14, EPR 18(1), HSA 7

Prisoners: individual interviews.

Staff: ask staff about procedures for admission of prisoners, for example with disabilities.

5. Prisoners are always asked if this is their first time in prison and treated accordingly.

Evidence: Observation

Observation: prisoners who have not been to prison before should receive a thorough explanation of the initial process of imprisonment.

Prisoners: ask prisoners.

6. On arrival, prisoners’ details are confirmed and before first night lock-up their immediate individual needs are identified during a private meeting with an officer. Their individual circumstances and any special needs are documented and dealt with sensitively.

Evidence: Observation

Observation: all prisoners should have the chance of a meeting in private. Particular attention should be given to religious and ethnic monitoring, nationality, residence after custody, first and second languages, any disabilities. An appropriate translation service should be used for foreign nationals with poor English. All prisoners should be asked in reception whether they have any dependants and this should be documented in their record. Action should be taken to

HMIP: Expectations
Section 1 – arrival in custody

ensure individuals under their care have appropriate alternative support including the provision of free phone calls to prisoners to help them arrange this. The need for the information is explained to prisoners.

Documentation: check recording of personal data and action taken to meet any special needs. Check suicide/self-harm warning forms are opened appropriately by escort staff, check details are added to suicide/self-harm care and support plans if appropriate and that data is stored securely.

Prisoners: speak to prisoners.

Questionnaire

7. Reception staff take action to promote the safety of children or other dependants if they are informed or suspect that dependants may be at risk as a result of the carer’s imprisonment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: observe process with new arrivals.</td>
<td>EPR 83(b) &amp; 87(1)</td>
</tr>
<tr>
<td>Documentation: check child protection policy and procedures and those for other dependants. Check staff training records. Check child protection and other dependants referral register to see if any referrals had been generated from information obtained during the reception process.</td>
<td></td>
</tr>
<tr>
<td>Staff: check staff have contact details of local social services emergency duty teams and are aware of their role and when to contact them.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: speak to prisoners.</td>
<td></td>
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</tbody>
</table>

8. Prisoners with special needs, such as pregnant women, women accompanied with babies, older, and disabled prisoners receive priority treatment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check for suitable facilities in reception.</td>
<td>BOP 5(2)</td>
</tr>
<tr>
<td>Staff: ask about procedures.</td>
<td>EPR 1, 34(1) &amp; (3)</td>
</tr>
<tr>
<td>Prisoners: individual interviews if possible.</td>
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</tbody>
</table>

9. Prisoners entering custody are searched thoroughly but sensitively.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ICCPR 7 &amp; 17</td>
</tr>
<tr>
<td>Prisoners: interviews.</td>
<td>EPR 54(3)</td>
</tr>
</tbody>
</table>
**Section 1 – arrival in custody**

**First days in custody**

**Documentation:** check local searching strategy and any special procedures to respect religious/cultural needs. Check guidance on searching prisoners with a disability is part of the strategy.

**Staff:** ask about local searching strategy and any special procedures to respect religious/cultural needs or for the individual needs of prisoners with a disability.

**Observation:** check reception staff are aware that prisoners may previously have been subjected to physical or sexual abuse, or other forms of emotional cruelty.

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10. **Prisoners' hygiene needs are catered for in reception and they are able to have a shower before being locked up for the first night.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 13 &amp; 15</td>
</tr>
<tr>
<td>Observation: check shower facilities are available either in reception or the first night centre and whether prisoners are able to get clean clothes.</td>
<td>EPR 19(3) &amp; (4)</td>
</tr>
</tbody>
</table>

**Prisoners:** group discussion.

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11. **Prisoners are informed of their entitlement to letters, telephone calls and visits. It is made clear to them that mail is monitored and that all non-privileged telephone calls will be recorded.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>EPR 24(1) &amp; (2),</td>
</tr>
<tr>
<td>Documentation: prisoners should be entitled to visits within their first week (by completing a VO during the first day) and understand that calls and mail may be monitored, before they use either.</td>
<td>30 (1)</td>
</tr>
<tr>
<td>Entitlement to visits should be reinforced through use of posters etc. Prisoners should also be made aware of the official policy regarding inter-prison visits.</td>
<td>SMR 35(1)</td>
</tr>
</tbody>
</table>

**Prisoners:** ask in groups.

*Cross-reference with contact with the outside world inspector*
12. **Prisoners are able to make one free telephone call in private on reception or on their first night location. This opportunity is documented.**

**Evidence**
- Questionnaire
- Documentation: check records. This is separate from being issued with telephone credit in reception packs, which prisoners have to pay for. Check additional free phone calls are allowed in order to arrange alternative care for children.

**References**
- EPR 24(5 & 9)
- BOP 16

**Prisoners:** group discussion.

13. **Prisoners are held in reception for as short a period of time as possible.**

**Evidence**
- Observation: check time spent in reception and that all proper procedures are undertaken before prisoners are moved to their first night accommodation.

**References**
- EPR 1

**Prisoners:** speak to prisoners.

14. **Prisoners in reception are offered drinks and hot food.**

**Evidence**
- Questionnaire
- Observation: not necessary if prisoners leave reception quickly and are offered food in the first night centre.

**References**
- SMR 20(2)
- EPR 22(3) & (4)

**Prisoners:** group discussion.

15. **Prisoners do not have to spend long periods of time with nothing to occupy them in reception. Staff are proactive in engaging with prisoners.**

**Evidence**
- Observation: check that prisoners are provided with magazines/have access to a television to occupy them in reception, and are closely supervised by staff at all times.

**References**
- EPR 74

*Cross-reference with bullying inspector*
### Section 1 – arrival in custody

#### First days in custody

16. **All prisoners are seen and assessed by health services staff in private on arrival.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>BOP 24</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that all prisoners have an assessment and an inmate medical record is set up as a result.</td>
<td>SMR 24</td>
</tr>
<tr>
<td><strong>Health services inspector will assess details of reception assessment</strong> – see health services expectations.</td>
<td>EPR 42(1)</td>
</tr>
</tbody>
</table>

17. **Prisoners with substance-related needs are identified at reception and given information about services available.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> those with acute substance-related needs should be given symptomatic treatment.</td>
<td>R98(7), I.A.1</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check that all prisoners understood the information, e.g. foreign nationals.</td>
<td>SMR 24 &amp; 35</td>
</tr>
<tr>
<td><strong>Documentation:</strong> information leaflets.</td>
<td>EPR 42(1) &amp; (3d)</td>
</tr>
<tr>
<td><strong>Cross-reference with substance use inspector</strong></td>
<td></td>
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</table>

18. **All prisoners are given information about sources of help available, including the chaplaincy team, Listeners or Insiders and Samaritans, in appropriate languages.**

All prisoners are explicitly offered the chance to speak to a Listener or Insider and a member of the chaplaincy on their first night and the following morning.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>SMR 35</td>
</tr>
<tr>
<td><strong>Observation:</strong> individual interviews – speak to Listeners/Insiders. Languages covered should include sign language.</td>
<td>BOP 13</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check reception packs and whether an up-to-date database on sources of appropriate help is available.</td>
<td>EPR 7, 30(1)</td>
</tr>
<tr>
<td><strong>Cross-reference with self-harm and suicide inspector</strong></td>
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</table>
19. **Prisoners who may require protection** are given information about alternative locations confidentially. The duty governor interviews any prisoners applying for protection.

**Evidence**

- **Staff**: ask about procedures and whether the onus is on the prisoner or prison staff to identify the need for protection.  
  EPR 52(2)

**Documentation**: check number of prisoners applying for protection in last six months.

**Prisoners**: ask those on protection.

**Questionnaire**

20. **In reception prisoners are informed about what will happen next.** They receive written and/or verbal information, in a form they can understand, about the routines, rules and services of the establishment.

**Evidence**

- **Questionnaire**: individual interviews.  
  SMR 35

- **Prisoners**: individual interviews.  
  BOP 13

- **Observation/staff**: check what information is given and how it is given, e.g. video, booklets etc. and accessibility to prisoners with disabilities.  
  EPR 30(1) & (2)

21. **All information and documentation of assessments undertaken in reception are drawn together into a single prisoner history file and passed to first night staff.**

**Evidence**

- **Documentation**: including shared cell risk assessments (if carried out in reception), individual needs assessment, health assessment and any care/support plans or notification of vulnerability.  
  EPR 16

**Staff**: ask about normal policy of passing information to first night staff.

22. **All prisons have a specific strategy and, in local prisons a specific location, for helping first night prisoners to settle in.**

**Evidence**

- **Observation**: check provision of dedicated accommodation for first night prisoners.
**Section 1 – arrival in custody**

**First days in custody**

**Documentation**: check details of strategy – this is especially important in local prisons, which will be accepting people new to prison.

**Staff**: speak to staff in first night centre.

**Prisoners**: ask some newly arrived prisoners about their experiences. Ask what information/support they received during their first night and whether it was sufficient.

23. **Staff introduce themselves to new prisoners on the wing and wear identification that clearly displays their name and status. Information about prisoners' needs is communicated between staff sensitively.**

   **Evidence**
   - Observation: individual interviews.
   - Staff: ask staff to explain first night procedures.
   - **Documentation**: check level of information passed to first night staff.

   **References**
   - EPR 8 & 74
   - Cross-reference with bullying and self-harm and suicide inspectors

24. **Prisoners are supported on their first night in custody by staff who are conversant with a range of key procedures such as suicide prevention and mental health issues. These officers ensure that any particular needs or immediate anxieties are addressed before the prisoner is locked away for the night.**

   **Evidence**
   - Questionnaire
   - Observation: on night visit.
   - **Staff**: ask first night staff about, for example, suicide prevention and mental health issues.

   **References**
   - EPR 8, 52(1) & 81(1&3)
   - Cross-reference with self-harm and suicide, substance use and health services inspectors

25. **Prisoners will not be allocated to a cell until a cell sharing risk assessment has been carried out.**

   **Evidence**
   - **Documentation**: the risk assessment can be undertaken in reception or in the first night centre. Check that over the last six months all new arrivals have been assessed before allocation to a cell.

   **References**
   - SMR 9(2)
   - EPR 18(6)
   - ECtHR Edwards v UK

   **Assessment should be informed by all relevant information available.**
Section 1 – arrival in custody  

Check CSRAs are relevant to/validated for different categories of prisoner e.g. women. Staff should be alert to the arrival of racially-motivated offenders.

**Staff:** speak to staff who carry out initial assessments, either in reception or first night centre – if undertaken in reception, first night staff should review the documentation and update as necessary.

---

**26. Prisoners identified as vulnerable to bullying and/or self-harm receive special help and support to cope with imprisonment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check anti-bullying and self-harm strategy – check number of prisoners coming from reception who are identified as vulnerable. Ensure that support plans meet their individual needs.</td>
<td>EPR 52(1)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to first night staff about implementation of strategy during first night.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with bullying and suicide and self-harm inspectors</em></td>
<td></td>
</tr>
</tbody>
</table>

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**27. Prisoners are given a pack containing PIN phone credits and basic items. They are told how long the pack is expected to last, its cost and the system for repayment from their prison wages or private monies. Repayment methods ensure sufficient funds remain for family contact.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: items in the pack may include: tea, sugar, pen, prison letter, tobacco, with alternatives for non-smokers. Check to make sure telephone credit is included as well as tobacco in smokers’ packs.</td>
<td>EPR 24(1), (2) &amp; (5)</td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with prison shop inspector</em></td>
<td></td>
</tr>
</tbody>
</table>

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**28. Prisoners’ first night accommodation has been prepared, is clean and provides a comfortable environment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check facilities provided on induction wing and that there is a range of suitable activities to occupy prisoners in-cell.</td>
<td>SMR 14</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> individual interviews.</td>
<td>EPR 19(2) &amp; 21</td>
</tr>
<tr>
<td><em>Cross-reference with residential units inspector</em></td>
<td></td>
</tr>
</tbody>
</table>
Expectations – induction

29. **Induction starts on the first full working day following reception.**

   **Evidence**
   - Questionnaire
   - Documentation: check details of induction programme.

   **References**
   - EPR 103(1), (2) & (4)

30. **Prisoners are inducted by trained staff in a designated induction area that is quiet and free from interruption.**

   **Evidence**
   - Observation: check facilities on induction wing.
   - Documentation: check details of staff training, including whether there is a designated race equality liaison officer.

31. **All prisoners are told during induction how to make routine applications and formal complaints.**

   **Evidence**
   - Questionnaire
   - Documentation: check induction packs – prisoners should be encouraged to use informal channels before making official complaints.

   **References**
   - EPR 30(1) & 70(1)

   **Cross-reference with applications and complaints inspector**

32. **Prisoners are kept fully occupied through a comprehensive, structured and multi-disciplinary induction programme. They understand what the induction is trying to achieve and how to progress through it.**

   **Evidence**
   - Observation: check what the induction covers. The induction course should be engaging and stimulating. Check for use of multi-media/videos etc.

   **References**
   - EPR 103(2), (3) & (4)

   **Questionnaire**
   - Documentation: check written information that is distributed and check induction information pack. Prisoners should receive information packs in a suitable language. Check that induction information can be provided in alternative formats.
33. All prisoners’ resettlement needs are assessed and identified during induction and referrals to relevant agencies are made at this time. For example, prisoners are given practical help to:

- preserve their accommodation and employment
- pursue legitimate business and social interests where appropriate
- pursue their legal rights
- obtain help with personal problems
- exercise their responsibilities towards their dependants
- pursue a healthy lifestyle in custody

**Evidence**

**Questionnaire**
- prisoners should be informed of each area and told who to contact e.g. legal aid officers, bail information officers, throughcare workers and counsellors.

**Observation:**
- prisoners should be given the opportunity to talk about their initial feelings about imprisonment and they are asked about any suicidal thoughts or feelings of self-harm.

**Evidence**

**Questionnaire**
- prisoners should be informed of each area and told who to contact e.g. legal aid officers, bail information officers, throughcare workers and counsellors.

**Observation:**
- prisoners should be given the opportunity to talk about their initial feelings about imprisonment and they are asked about any suicidal thoughts or feelings of self-harm.

**Evidence**

**Cross-reference with resettlement, legal rights, learning and skills, and work, and resettlement inspectors.**

34. Prisoners are helped to understand the information through repetition and reinforcement by staff or Insiders. Induction information is provided in a range of accessible formats.

**Evidence**

**Documentation:**
- check induction information and formats.

**Prisoners:**
- groups – ask who provides induction information.
- talk to Insiders

**Staff:**
- ask wing staff if there is any specific policy for those with language needs, for example, foreign nationals, deaf or blind prisoners.

**Observation:**
- observe the induction programme.

35. During the induction programme, prisoners have the opportunity for individual interviews, which are recorded in their individual files. Prisoners’ initial feelings about imprisonment are addressed and they are asked about any suicidal thoughts or feelings of self-harm.

**Evidence**

**Documentation:**
- check prisoner records.

**Observation**

**HMIP:** Expectations
Section 1 – arrival in custody  First days in custody: induction

Prisoners: groups – ask about levels of interaction with staff and/or Insiders.
Cross-reference with self-harm and suicide inspector

36. By the end of induction prisoners have met relevant staff from different departments, and have been introduced to their personal officer. Prisoners know what work, education, vocational training or offending behaviour courses they may be involved in at the prison and are assisted to apply for them. They are aware of how to get information and deal with problems.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>EPR 30(1)</td>
</tr>
</tbody>
</table>

Documentation: in particular gym induction and health promotion advice should be included in overall induction.

Prisoners: individual interviews.
Cross-reference with personal officer, learning and skills and work, and resettlement inspectors
Residential units

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions.

Expectations

1. **Cells and communal areas are light, well decorated and in a good state of repair.**
   - **Evidence**
   - **References**
   - **Observation:** check all residential wings and communal areas.
     - SMR 10 & 11
     - EPR 18(1) & (2)

2. **All prisoners occupy accommodation that is suitable for the purpose and for their individual needs.**
   - **Evidence**
   - **References**
   - **Documentation:** check that cells have been properly certified as suitable (particularly the suitability of any double occupancy cells).
     - Check on allocation policies. Check cell sharing risk assessments.
     - **Prisoners:** ask whether cells are sufficiently warm in winter and cool in summer and whether adaptations meet needs.
     - **Observation:** cells are ventilated and have sufficient daylight, prisoners have their own bed, pinboard and lockable cupboard and use of a table and chair. Older prisoners in shared cells with bunk beds are given priority for lower bunks. Shared cells should have screened toilets.
     - SMR 9, 10, 11, 12, 14 & 67
     - EPR 17, 18(1-10)

3. **Reasonable adjustments are made to ensure that prisoners with disabilities and those with mobility problems can access all goods, facilities and services.**
   - **Evidence**
   - **References**
   - **Prisoners:** ask prisoners with disabilities and those with mobility problems where they are located and their ease of access to different locations and services.
     - BPTP 1
     - BOP 1
     - EPR 1
   - **Observation:** check disabled prisoners’ location is suitable. Check older, infirm and disabled prisoners are allocated to landings which hold most of the communal facilities. Check for relevant in-cell adaptations such as lowered light switches and those accessible from beds, cell call bells lowered. Older, less mobile and disabled prisoners should be in

HMIP: Expectations
Section 2 – environment and relationships

Residential units

cells with toilets and wash basins. Chairs in cells should have lumbar support, and TVs have teletext (for the hard of hearing). Check prisoners with medical conditions are provided with appropriate facilities (e.g. low beds, bed boards or special mattresses). Check for wheelchairs, induction loops, vibrating alarm clocks, ramps, grab rails, shower chairs, hoists, marking of steps, lowered telephones, cutlery grips, information to prisoners in a range of accessible formats (e.g. audio, visual, Braille, large print, pictorial format), interpreter usage.

Cross-reference with all inspectors

4. Any special accommodation unit for older prisoners has been designed based on advice from the NHS, social services and relevant voluntary agencies.

Evidence

Documentation: check for evidence of consultation.

5. There is a system whereby nominated volunteer prisoners on each residential unit are trained to help less able prisoners and they are paid for this work.

Evidence

Prisoners: check with known infirm or disabled prisoners about the level of regular assistance. Talk to any prisoner helpers about what they do, whether there is any support and whether they are paid.
Staff: ask whether there is a system in place and how volunteers are identified and vetted.

6. Residential staff are aware of prisoners within their care with disabilities and their location. Safe evacuation procedures are in place to assist those prisoners who may need help in an emergency.

Evidence

Documentation: check contingency plans/advice to staff on how to respond to emergency situations.
Observation: check for visible markers on cell doors.
Staff: check with staff whether there are any prisoners with disabilities and/or mobility problems on their residential unit and what system is in place to highlight to other staff that they may need assistance in an emergency.
Prisoners: speak to prisoners.

HMIP: Expectations
### Section 2 – environment and relationships

#### Residential units

**7. Prisoners have access to drinking water, toilet and washing facilities at all times.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td></td>
</tr>
<tr>
<td>Observation</td>
<td>BPTP 1</td>
</tr>
<tr>
<td>Staff</td>
<td>SMR 12, 13 &amp; 20(2)</td>
</tr>
<tr>
<td></td>
<td>EPR 19(3 &amp; 4) &amp; 22(5)</td>
</tr>
</tbody>
</table>

*Cross-reference with catering inspector*

**8. Age-appropriate risk assessments are in place to ensure the safety of young adults from any other prisoners, including those subject to CYPA 1972 Schedule 1.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation</td>
<td>EPR 11(1 &amp; 2), 18(8)</td>
</tr>
<tr>
<td></td>
<td>52(1) &amp; 104(1)</td>
</tr>
<tr>
<td></td>
<td>SMR 8d</td>
</tr>
</tbody>
</table>

**9. All prisoners have access to an in-cell emergency call bell that works and is responded to within five minutes.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ICCPR 6 (1)</td>
</tr>
<tr>
<td>Observation</td>
<td>ECtHR, Edwards v UK</td>
</tr>
<tr>
<td></td>
<td>EPR 52(4)</td>
</tr>
</tbody>
</table>

*Cross-reference with self-harm and suicide inspector*

**10. Where appropriate, prisoners have privacy keys to their cells/rooms.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>SMR 60</td>
</tr>
<tr>
<td></td>
<td>EPR 5</td>
</tr>
</tbody>
</table>

**11. Observation panels in cell doors remain free from obstruction.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>EPR 52(2)</td>
</tr>
</tbody>
</table>
### Section 2 – environment and relationships

#### Residential units

<table>
<thead>
<tr>
<th>12. All prisoners on standard or enhanced incentive and earned privilege scheme levels have televisions in their cells.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td><strong>Observation:</strong> check all residential units.</td>
<td>SMR 70</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check details of IEP scheme.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with IEP inspector</em></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>13. A clear policy prohibiting offensive displays is applied consistently.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check details of policy.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check all residential units.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14. Prisoners’ communal areas meet the needs of the prisoner population and are effectively supervised by staff.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td>SMR 14, 15 &amp; 33</td>
</tr>
<tr>
<td><strong>Observation:</strong> check areas such as association/activity and shower areas are clean and safe through active supervision. Check for any adaptations for older, infirm and disabled prisoners.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check needs assessments.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with time out of cell and bullying inspectors</em></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>15. Prisoners feel safe in their cells and in communal areas of the residential units.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td>BPTP 1 &amp; 4</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> prisoner groups.</td>
<td>BOP 7</td>
</tr>
<tr>
<td><strong>Observation:</strong> check for suitable design of residential units e.g. good sightlines, and supervision in high risk areas.</td>
<td>CCLEO 1 &amp; 8</td>
</tr>
<tr>
<td><em>Cross-reference with bullying inspector</em></td>
<td>EPR 49 &amp; 52(2)</td>
</tr>
</tbody>
</table>
### Section 2 – environment and relationships
Residential units

16. **Notices are displayed in a suitable way for the establishment’s population.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Observation:** check all residential units to make sure adequate provision is made for any prisoners who cannot read notices because of literacy, language or eyesight problems or any other disability. | CERD 7  
BPTP 2  
BOP 5, 13, 14, 28 & 33  
SMR 6(1), 35, 51 & 8  
BPRL 2 & 4  
CCLEO 8  
ECHR 14  
EPR 13, 30(1) & 87(2) |

17. **Prisoners are consulted about the routines and facilities of the residential unit on a monthly basis. Prisoners are informed of the outcome of the consultation and provided with justifiable reasons for any decision made.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Prisoners:** ask about prisoner representatives on each wing.  
**Documentation:** check for evidence of prisoner representation. | BPTP 1  
SMR 60(1)  
EPR 50 |

18. **Residential units are as calm and quiet as possible both to avoid incidents and to enable rest and sleep, especially at night.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Questionnaire**  
**Observation:** check noise levels on night visit. | SMR 57  
EPR 102(2) |

19. **Male and female prisoners are held in separate accommodation units. Where women prisoners are held in male prisons, rigorous safeguards are in place to ensure appropriate staffing and physical separation of prisoners.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Observation:** in shared accommodation, check for complete physical separation including curtains to windows, distinct separate management and staffing, separate visiting, health, education, employment and gym facilities. | SMR 8 & 53  
EPR 18(8)b |

HMIP: *Expectations*
## Section 2 – environment and relationships  Residential units: clothing and possessions

Expectations – clothing and possessions

### 20. Prisoners are given the option of wearing their own clothing.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check women and long-term prisoners in particular wear their own clothes.</td>
<td>SMR 88 (1) &amp; 57</td>
</tr>
<tr>
<td>Prisoners: groups or individuals.</td>
<td>EPR 3 &amp; 102(2)</td>
</tr>
<tr>
<td>Documentation: check official policy and whether wearing of own clothing is a privilege under IEP.</td>
<td></td>
</tr>
</tbody>
</table>

### 21. Prisoners have enough clean prison clothing of the right size, quality and design to meet their individual needs.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 17, 18 &amp; 26(d)</td>
</tr>
<tr>
<td>Observation: check women in particular are issued with non-uniform prison clothing.</td>
<td>EPR 20 &amp; 44(d)</td>
</tr>
<tr>
<td>Prisoners: in groups or individually ask whether the clothes meet their gender, age, employment, length of sentence and religious/cultural needs. Check older prisoners are provided with additional clothing and bedding, if required, without the need for medical permission – check for any specific instructions about this.</td>
<td></td>
</tr>
</tbody>
</table>

### 22. Prisoners have at least weekly access to laundry facilities to wash and iron their personal clothing.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners: ask in groups or individuals. Check women in particular have access to laundry/exchange facilities outside the weekly rota.</td>
<td>SMR 17(2), 18 &amp; 26(b) &amp; (d)</td>
</tr>
<tr>
<td>Staff: ask about access to laundry facilities.</td>
<td>EPR 20(3) &amp; 44(d)</td>
</tr>
</tbody>
</table>

### 23. Prisoners’ property held in storage is secure, and prisoners can access their property within one week of making an application.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners: ask in groups or individuals.</td>
<td>SMR 43(1)</td>
</tr>
<tr>
<td>Documentation: check complaint forms and adequacy of property</td>
<td>EPR 31(7)</td>
</tr>
</tbody>
</table>

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**HMIP: Expectations**
Section 2 – environment and relationships  Residential units: clothing and possessions

24. Prisoners are fairly compensated for clothing and possessions lost while in storage.

Evidence

Documentation: check recent complaint forms. Check compensation offers made.

Prisoners: case studies.

References

SMR 43(1)

25. A standard list detailing the possessions that women prisoners are allowed to keep is employed across all women’s prisons; a standard list is also employed for male establishments of the same security category.

Evidence

Documentation: check adequacy and consistency of list with other prisons of that type. Check prisoners have good access to the list.

Staff: ask residential units’ governor if generic list is used.

References

SMR 35
EPR 30(1)

26. Volumetric control of property takes account of the individual needs of different prisoner groups.

Evidence

Documentation: check details with particular reference to arrangements against the national standard of two boxes each for a diverse range of prisoners, eg. prisoners with disabilities, prisoners from different cultural groups and foreign nationals, those on distance learning courses. Check that refusals, particularly for prisoners who require extra items for a disability, are based on formal risk assessments.

Prisoners: case studies.

Cross-reference with first days in custody and diversity inspectors

References

SMR 57

HMIP: Expectations
Section 2 – environment and relationships

Residential units: hygiene

27. Suitable clothes and bags are available to discharged prisoners who do not have them.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check whether prisoners leave with clear plastic bags.</td>
<td>SMR 81(1)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about procedure for those without adequate clothing or bags, especially foreign national prisoners who are being deported.</td>
<td>EPR 33(8)</td>
</tr>
</tbody>
</table>

28. Facilities are available before discharge to launder clothes that have been in storage for long periods.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask staff in reception/storage areas.</td>
<td>SMR 81(1)</td>
</tr>
</tbody>
</table>

Expectations – hygiene

29. Prisoners are encouraged, enabled and expected to keep themselves, their cells and communal areas clean.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check wing files for comments on cleanliness.</td>
<td>SMR 13 &amp; 15</td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td>EPR 19</td>
</tr>
<tr>
<td><strong>Observation:</strong> check cells on all residential units. In particular, check that older and disabled prisoners are enabled to keep themselves and their cells clean.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask if hygiene is actively encouraged.</td>
<td></td>
</tr>
</tbody>
</table>

30. Prisoners have ready access to both communal and in-cell toilets, baths and showers in private.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> ask in groups or individuals.</td>
<td>BPTP 1</td>
</tr>
<tr>
<td><strong>Observation:</strong> check facilities on each wing and check for screened toilets in shared cells. Check all residential units have a shower</td>
<td>SMR 12</td>
</tr>
<tr>
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<td>ECHR 3</td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 2 – environment and relationships

Residential units: hygiene

- Cubicle adapted for use by older, less able or disabled prisoners as well as baths with grab handles.
- **Documentation**: check night sanitation arrangements where they exist and check for delays in access.

31. **Prisoners are able to shower or bath daily, and immediately following physical activity, before court appearances and before visits.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td><strong>Prisoners</strong>: ask in groups. Check whether they have access at any time during the day – particularly women prisoners. Ask if older, less able or disabled prisoners are helped to have a bath or shower every day. <strong>Cross-reference with PE inspector</strong></td>
</tr>
<tr>
<td><strong>Prisoners</strong>: ask in groups. Check whether they have access at any time during the day – particularly women prisoners. Ask if older, less able or disabled prisoners are helped to have a bath or shower every day. <strong>Cross-reference with PE inspector</strong></td>
<td></td>
</tr>
</tbody>
</table>

32. **Prisoners have access to necessary supplies of their own personal hygiene items and sanitary products.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check policy on distribution of stock and frequency of supplies.</td>
<td><strong>Prisoners</strong>: ask in groups or individuals. <strong>SMR 15</strong> <strong>EPR 19(6)</strong></td>
</tr>
</tbody>
</table>

33. **Freshly laundered bedding is provided for each new prisoner on arrival and then on at least a weekly basis. A system for the replacement of mattresses is in operation.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td><strong>Observation</strong>: check clean pillows are available for new prisoners as well as other bedding. Check clothing exchange stores, condition of bedding etc. <strong>Staff</strong>: ask for documentary evidence of exchanges. <strong>Prisoners</strong>: ask in groups or individuals. Check women in particular have access to laundry/exchange facilities outside the weekly rota. <strong>Cross-reference with arrival in custody inspector</strong></td>
</tr>
<tr>
<td><strong>SMR 19</strong> <strong>EPR 21</strong></td>
<td></td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
34. **Prisoners are allowed to have duvets and curtains as earned privileges.**

**Evidence**

- **Documentation:** check details of IEP scheme.
- **Observation:** prisoners on enhanced.
  - *Cross-reference with IEP inspector*

**References**

- SMR 70

35. **Prisoners’ valuable property is routinely security marked before it is issued.**

**Evidence**

- **Observation:** check stores.
- **Documentation:** check records over last six months.

**References**

- SMR 33(1) & 70
- EPR 31(7)
- PR 8(1)
Staff–prisoner relationships

Prisoners are treated respectfully by all staff, throughout the duration of their custodial sentence, and are encouraged to take responsibility for their own actions and decisions. Healthy prisons should demonstrate a well-ordered environment in which the requirements of security, control and justice are balanced and in which all members of the prison community are safe and treated with fairness.

Expectations

1. **All prisoners are treated with humanity, and with respect for the inherent dignity of the person.**

   **Evidence**
   - Questionnaire
   - Staff: ask officers what they see their role as - staff should be aware that the prison has a duty of care for all prisoners, to ensure no prisoners are at risk of physical or emotional abuse by staff or prisoners, and that prisoners are to be held in decent and humane conditions.

   **References**
   - BOP 1
   - SMR 46(1)
   - EPR 72(1) & (7)

   **Observation:** throughout inspection.

2. **Staff are aware that they should set a personal example in the way they carry out their duties at all times.**

   **Evidence**
   - Observation: throughout inspection.
   - Staff: speak to officers on all residential units especially personal officers and those working in segregation.
   - Prisoners: ask in groups.

   **References**
   - SMR 48
   - EPR 75
   - CCLEO 2

3. **Staff are always fair and courteous in their day-to-day working with prisoners.**

   **Evidence**
   - Questionnaire
   - Observation: check that staff are respectful to and about prisoners e.g. how staff talk about prisoners in their care. Check for evidence of pro-social modelling. Check for fair treatment of prisoners by staff.

   **References**
   - BPTP 1 & 2
   - BOP 1 & 5
   - SMR 6(1) & (2)
   - CCLEO 2

**HMIP:** Expectations
Section 2 – environment and relationships

Staff–prisoner relationships

**Prisoners**: ask groups or individuals whether they feel they are treated fairly and courteously – ask for examples.

**EPR 1, 13, 74 & 75**

4. Staff positively engage with prisoners at all times and interaction between staff and prisoners is encouraged by the senior management team.

**Evidence**

**Observation**: throughout inspection, but especially during association, mealtimes and movements. Check staff help and encourage older and less able prisoners to participate in and access all facilities offered across the prison.

**Prisoners**: ask in groups or individuals.

**Questionnaire**

**EPR 74 & 75**

5. Staff routinely knock before entering cells, except in emergencies.

**Evidence**

**Observation**: throughout inspection.

**Prisoners**: ask in groups or individuals.

**Staff**: speak to staff.

6. Prisoners are encouraged by staff to engage in all activities and routines, promoting punctuality, attendance and responsible behaviour.

**Evidence**

**Observation**

**Staff**: speak to staff about the methods they use to encourage prisoners to get involved.

**Documentation**: check entries in wing files.

**Prisoners**: speak to prisoners and ask if they are encouraged and how.

*Cross-reference with time out of cell and learning and skills and work inspectors*

**SMR 27 & 57**

**EPR 27(6), 49, 50 & 52(3)**

**HMIP: Expectations**
### 7. Inappropriate conduct on the part of prisoners is challenged.

**Evidence**
- **Observation:** if possible, observe staff interacting with prisoners on wings – staff should demonstrate skill in confronting low level disputes without using official disciplinary measures.
- **Documentation:** check entries in wing files.
- **Staff:** speak to wing staff about challenging inappropriate conduct.

**References**
- SMR 27
- EPR 52(2) & 56(2)

### 8. Prisoners are encouraged and supported to take responsibility for their actions and decisions.

**Evidence**
- **Observation:** watch staff–prisoner interactions, for example prisoners could have privacy keys for their rooms, or be given a choice of work opportunities or training. Also check for support and encouragement from prisoner support roles e.g. Listeners, wing representatives etc.

**References**
- EPR 102(1)
Prisoners’ relationships with their personal officers are based on mutual respect, high expectations and support.

Expectations

1. Prisoners know the name of their personal officer and are able to access him/her as an initial point of reference. Frequent changes of personal officers are avoided.

   **Evidence**
   - Questionnaire
   - **Prisoners:** case studies.
   - **Staff:** ask staff about personal officer (or locally named e.g. case officer) scheme.
   - **Observation:** check for publicising of personal officers on residential units, e.g. name tags outside cells.

   **References**
   - EPR 74 & 87

2. Personal officers are aware of the individual needs of their prisoners and help them to access the services they require or respond to any matters they raise.

   **Evidence**
   - Questionnaire
   - **Prisoners:** interviews.
   - **Staff:** ask wing staff about some of the prisoners they are acting for. Ask personal officers about the directories of external service providers and whether they use them to help their prisoners.

   **References**
   - EPR 74 & 87

3. Personal officers know the personal circumstances of their prisoners and are open to contact with prisoners’ families and encourage appropriate links with them.

   **Evidence**
   - **Documentation:** check prisoner history files for use of information from friends or family e.g. family birthdays.
   - **Staff:** ask officers about recent examples of such links being maintained.
   - **Families:** ask families if personal officers have ever contacted them.
   - **Cross-reference with resettlement inspector**

   **References**
   - EPR 74 & 87

HMIP: Expectations
Section 2 – environment and relationships

Personal officers

4. Personal officers maintain an accurate chronological diary of contact with their prisoners using wing history sheets, identifying any significant events affecting them, on at least a weekly basis.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records maintained by personal officers are balanced and monitored by managers.</td>
<td>EPR 74 &amp; 87</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> check they have an understanding of their role and responsibilities as personal officers and that they are aware of the detail of the establishment's written personal officer scheme.</td>
<td></td>
</tr>
</tbody>
</table>

5. Where appropriate, older prisoners and prisoners with disabilities have care plans as part of wing files and there is evidence those care plans are monitored.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask residential and health services staff for care plans e.g. for older prisoners with specific age or health-related needs</td>
<td>EPR 83b</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check entries in wing files for evidence of monitoring.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with health services and diversity inspectors</em></td>
<td></td>
</tr>
</tbody>
</table>

6. Personal officers provide input and advice on all matters relating to their prisoners.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records maintained by personal officers across all wings. Check prisoners are able to change their personal officers where they feel the relationship is not supportive.</td>
<td>EPR 74 &amp; 87</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff about recent involvement in sentence planning, offender management, applications and meetings, decisions on IEP, self-harm and resettlement matters. Personal officers should be fully trained in resettlement and cultural awareness issues.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with resettlement, good order, bullying, self-harm and suicide, learning and skills, and work inspectors</em></td>
<td></td>
</tr>
</tbody>
</table>
Bullying and violence reduction

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Active and fair systems to prevent and respond to violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

Expectations

1. The prison has developed an effective strategy to reduce violence and intimidation which has earned the commitment of the whole prison and has drawn on multi-disciplinary consultation including feedback from prisoners.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check violence reduction strategy is widely publicised. Check that monitoring is part of the strategy and that, as a minimum, it covers feelings of safety among prisoners, incidents of bullying (verbal and physical), number of assaults, number of racist incidents, location of incidents and action taken.</td>
<td>EPR 49, 50 &amp; 52(2 &amp; 3)</td>
</tr>
<tr>
<td><strong>Staff:</strong> determine the extent to which staff understand their duty to maintain a safe environment and what they do to promote this. Check whether staff are alert to threats to a safe environment and whether they confront all forms of victimisation.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check prisoners are consulted as part of the strategy development and maintenance. Check how effective the strategy is at promoting safer custody and violence reduction.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with arrival in custody and race equality inspectors

2. Prisoners are consulted and involved in determining how their lives in the prison can be made safer, how bullying, verbal and physical abuse, racial abuse and threats of violence are confronted, how conflicts can be resolved and what sanctions are appropriate.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check for records of consultation in last six months. An annual confidential survey to all prisoners about bullying should be undertaken.</td>
<td>SMR 65 EPR 49, 50, &amp; 52(2 &amp; 3)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups about existence of wing representatives.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with race equality inspector

HMIP: Expectations
Section 3 – duty of care

3. **Staff supervise and protect prisoners throughout the prison from bullying, verbal and physical abuse, racial abuse and threats of violence. Staff are consistent in challenging these behaviours.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>EPR 52(2), 72(1)</td>
</tr>
<tr>
<td>Observation: level of shouting from windows, management of queues, all prison movements and during exercise, education, gym, work or workshops, supervision near showers and during association etc.</td>
<td>&amp; 75</td>
</tr>
<tr>
<td>Documentation: check records of incidents in last six months. Check survey of bullying noting particular areas where prisoners feel vulnerable to bullying. Check policies for specific mention of protection of vulnerable prisoners.</td>
<td>SMR 48</td>
</tr>
<tr>
<td>Staff: staff should lead by example in the way they treat their colleagues/prisoners and understand that their duty is to foster a safe environment, by confronting unacceptable behaviour quickly and fairly. Ask about the arrangements for movement, exercise, mealtimes and discharge especially for those who are considered vulnerable. Check particular attention is given to prisoners who have asked for protection from other prisoners or those who may be victimised because of the nature of their offence or other individual circumstances.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with other inspectors</td>
<td></td>
</tr>
</tbody>
</table>

4. **Prisoners’ families and friends are encouraged to make suggestions about how the prison could better protect prisoners from victimisation and to provide information to help identify those prisoners likely to be at risk.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check prisoners’ history files for evidence of such information. Prisoners’ families should also be encouraged to come forward if they feel they are being bullied to bring drugs into prison. A visitors’ survey should be distributed systematically.</td>
<td>EPR 70(5)</td>
</tr>
<tr>
<td>Staff: check on policy and how often intelligence is sought.</td>
<td></td>
</tr>
<tr>
<td>Observation: check with some visiting families to see if they know about reporting procedures and whether they think that visits staff are approachable and sympathetic. There should be posters in visits centres.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with contact with the outside world and race equality inspectors</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 3 – duty of care  Bullying and violence reduction

5. An effective strategy is in place to deal with bullying which is based on an analysis of the pattern of bullying in the prison and is applied consistently throughout the prison.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> should be in evidence throughout from induction to release. Strategy should be informed by systematic consultation with prisoners across the prison. A central log of bullying is kept and incidents of bullying are reviewed regularly by a multidisciplinary committee.</td>
<td>BOP 13</td>
</tr>
<tr>
<td><strong>Staff:</strong> check whether they are alert to potential bullying and whether they confront all forms of victimisation. Check that all sources of information including security reports, accidental injuries etc. are used for evidence of bullying/intimidation. Ask staff in all areas how they contribute to the strategy. Check for a coordinated approach by all departments.</td>
<td>SMR 27</td>
</tr>
<tr>
<td><strong>Cross-reference with arrival in custody inspector</strong></td>
<td>EPR 49 &amp; 52(2)</td>
</tr>
</tbody>
</table>

6. Allegations of bullying behaviour are treated consistently and fairly. They are investigated promptly. Outcomes of investigations are recorded and the prisoner who reported the bullying is supported.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records of recent bullying incidents. Look at investigation outcomes, and how they are recorded – formal charges and adjudication should be used in serious cases, but all investigations should be in line with natural justice.</td>
<td>SMR 36(1) &amp; (4)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff how they deal with situations of bullying.</td>
<td>EPR 70(1) &amp; (3)</td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check procedures are implemented as stated.</td>
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</tbody>
</table>

7. Prisoners are made aware of behaviour that is unacceptable through a well-publicised policy and are made aware of the consequences of bullying. Inappropriate behaviour is consistently challenged.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check for bullying posters throughout the prison.</td>
<td>SMR 35</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check what information is distributed with induction packs – see if bullying is clearly defined to prisoners.</td>
<td>EPR 30(1), 49 &amp; 56(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> staff should be aware of both direct and indirect forms of bullying.</td>
<td></td>
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</tbody>
</table>

HMIP: Expectations
8. **Anti-bullying measures support the victim and take the victim’s views about their location into account.**  

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records of bullying incidents and actions.</td>
<td>BOP 13</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> individual interviews.</td>
<td>EPR 49, 50 &amp; 56(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> staff understand the link between bullying and aggressive and disruptive behaviour generally.</td>
<td></td>
</tr>
</tbody>
</table>

9. **Appropriate interventions are in place to deal with bullies and support victims.**  

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check what interventions are available to challenge bullies and to support victims of bullying. Check that interventions are aimed at achieving sustained and agreed changes in behaviour. Check prisoner records contain comprehensive updates on how bullied and bullying prisoners have been supported and/or challenged. <strong>Cross-reference with race equality inspector</strong></td>
<td>EPR 5, 56(1 &amp; 2) &amp; 102(2)</td>
</tr>
</tbody>
</table>
Self-harm and suicide

Prisons work to reduce the risks of self-harm and suicide through a whole-prison approach. Prisoners at risk of self-harm or suicide are identified at an early stage, and a care and support plan is drawn up, implemented and monitored. Prisoners who have been identified as vulnerable are encouraged to participate in all purposeful activity. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

Expectations

1. A safer custody strategy is in place that recognises the risks to prisoners, particularly in the early days in custody and sets out procedures which help to reduce the risk of self-harm. The specific needs of different prisoner groups are recognised, as are the levels of risk in different areas of the establishment.

   **Evidence**
   
   **Documentation:** check for implementation of the strategy in all areas of prison. Check that the strategy recognises the specific needs of the population e.g. women and minority groups, those with substance misuse problems and those not on normal location.

   Check staff training is appropriate. Check availability and use of safer cells, particularly in areas of the prison where risks of self-harm are higher. Check that a protocol is in place which recognises the need for continued interaction and which avoids an over reliance on the safer cell as a preventative measure.

   **Staff:** interviews.

   **Prisoners:** groups.

   *Cross-reference with substance use inspector*

   **References**
   
   EPR 39 & 47(2)
   R98 (7), III.D.58
   SMR 24

2. A multi-disciplinary committee effectively monitors the prison’s suicide prevention policy and procedures. The committee is chaired by a manager responsible for the policy and membership includes prisoners, staff representatives from a range of disciplines and a member of the local community mental health team.

   **Evidence**
   
   **Documentation:** check recommendations from committee and attendance. Check the committee in women’s prisons ensures

   **References**
   
   ICCPR 2
   EPR 40(1) & 47(2)
Section 3 – duty of care

that reviews are not attended by an all male staff group.  
Staff: interviews with staff on the committee.

3. Prisoners’ families, friends and external agencies are encouraged, through local arrangements, to provide sources of information which may help identify and support those prisoners likely to be bullied or who have a history of self-harming behaviour.

Evidence

Documentation: check prisoners’ history files for evidence of such information. Check there are posters in visits about who to contact with concerns and that information is sent out with visiting orders alerting families to the help available.  
Staff: check policy and how often intelligence is sought.  
Cross-reference with bullying and resettlement inspectors

References

EPR 47(2) & 87(1)

4. A detailed care and support plan is prepared with input from the prisoner, which identifies need as well as the individuals responsible including a key worker. Personal factors or significant events which may be a trigger to self-harm have been identified. Regular reviews take place involving staff from a range of disciplines and family and friends as appropriate, which provide good support and care for all prisoners at risk. Arrangements are in place for following up after a care and support plan has been closed.

Evidence

Documentation: check care and support plans and the quality and frequency of entries – check that need is being met and support provided and that insightful comments are made by staff. Check training records for all staff making assessments. Look for evidence of involvement of family and friends in reviews. Look for number of people attending reviews and continuity of attendance.  
Prisoners: check with prisoners whether they believe their needs have been identified and then addressed.  
Staff: interview residential officers with regard to knowledge of policy and knowledge of support plans. Ask about the level of training they have received.

References

ICCPR 2  
EPR 43(1) & 47(2)  
R98(7), III.D.53

HMIP: Expectations
5. **Prisoners at risk of suicide and self-harm are held in a supportive and caring environment with unhindered access to sources of help including peer supporters. A care suite is available to support the work of Listeners.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ICCPR 2</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups, and speak to Listeners and Insiders.</td>
<td>BOP 13</td>
</tr>
<tr>
<td><strong>Documentation:</strong> see how often the care suite has been used during the last six months. Check access to counsellors, the chaplaincy team, Listeners and the Samaritans at all times. Check support available for Listeners. Check that appropriate free telephone helplines/interventions are available, in particular, to address specific aspects of women’s prior victimisation such as rape crisis, domestic violence and others.</td>
<td>EPR 46(2) &amp; 47(2) R98(7), III.D.53, 55 &amp; 58</td>
</tr>
</tbody>
</table>

6. **Prisoners are encouraged to express any thoughts of suicide and/or self-harm, and are encouraged to take part in all purposeful activities as part of the support plan.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> case studies with any prisoners being monitored.</td>
<td>EPR 43(1) R98(7), III.D.58</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check documentation and care and support plans. Check prisoners are given the opportunity and assistance to make a written contribution to their review. <strong>Staff:</strong> check prisoners are encouraged to identify their own support needs and that they are able to draw on opportunities for informal support from other prisoners if they wish.</td>
<td></td>
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</tbody>
</table>

7. **All staff, including night staff, are fully trained in suicide prevention and are clear what to do in an emergency. A programme of refresher training is in place.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> interviews with night staff, staff should have access to first aid kits and anti-ligature shears or equivalent. <strong>Observation:</strong> during night visit. If establishment does not have a first night centre, check if night staff know where first night prisoners and those at risk are located. <strong>Documentation:</strong> check training records, contingency plans and instructions to night staff.</td>
<td>ICCPR 2 EPR 39 &amp; 41(4)</td>
</tr>
</tbody>
</table>

HMIP: Expectations
8. Incidents of self-harm are closely monitored and analysed at regular intervals to establish any trends and to implement preventive measures. Serious incidents are properly investigated to establish what lessons could be learnt and to promote good practice. Where appropriate family or friends of the prisoner are informed through a family liaison officer.

**Evidence**

**Documentation:** check for the most recent incidents of self-harm and assess thoroughness of examination and whether findings were appropriate and acted upon.

**Staff:** any staff who have recently carried out investigations.

*Cross-reference with bullying and health services inspectors*

**References**

R98(7), III.D.58

EPR 24(9)

9. An action plan is devised and acted upon promptly as a result of an investigation into an apparent self-inflicted death. This is reviewed following subsequent findings of an inquest jury.

**Evidence**

**Documentation:** check action plans and investigations and their timeliness, how far points have been implemented, and if there are attempts to understand underlying causes and/or trends. Check to see whether there have been any reviews of recommendations from previous deaths in custody. Check for evidence that the prison has exercised sensitivity in informing families.

**Staff:** interviews with staff who have recently been involved in an investigation.

**References**

10. All information about prisoners at risk of self-harm or suicide is communicated to people who are able to offer support in the community.

**Evidence**

**Staff:** speak to offender management and resettlement staff.

**Prisoners:** follow through cases of prisoners facing imminent release.

**Documentation:** support plans in the community should involve CMHS, NPS and the voluntary sector as appropriate.

*Cross-reference with resettlement inspector*

**References**

EPR 5 & 107(4)

R98(7), III.D.58 & 59

Cross-reference with resettlement inspector
All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all prisoners have equal access to all facilities. Multiple diversity needs should be recognised and met.

Expectation

1. The establishment’s diversity policy outlines how the diverse needs of prisoners will be met, and is effectively managed by a multi-disciplinary diversity management committee. The diversity management committee, or equivalent, coordinates activities, including those by any relevant committee, under each aspect of diversity, namely:
   - race equality
   - nationality
   - disability
   - age
   - religion
   - gender, including transgender/transsexual issues
   - sexual orientation.

Evidence

Documentation: check that the committee is chaired by the governor or deputy governor and is attended by other senior managers. Check that meetings are held frequently enough to be effective and include all functional managers, wing and diversity prisoner representatives, the catering manager, librarian, education manager, chaplaincy, a health services representative and external community representatives. Check that action plans covering all diversity strands are in place, implemented and reviewed through quarterly reports submitted to the committee, e.g. on race, nationality, etc.

Staff: ask about their knowledge of the diversity policy, diversity management committee and the individual diversity committees, if in place, and their impact. Ask what their level of involvement is in the management of diversity and how they support prisoners to ensure their involvement.

Prisoners: ask diversity representatives about the support and training
Section 3 – duty of care

Diversity: race equality

provided. Ask about their input to the diversity policy and the diversity management committee and whether their views are listened to and addressed.

Cross-reference with health services, learning and skills, catering and faith and religious activity inspectors.

Expectations – race equality

2. The governor* promotes race equality.

Evidence

Governor: ask if s/he is aware of the Race Review 2008 and how the findings relate to their prison. Ask the governor to describe the current state of race equality in the prison, and the benefits of race equality. Ask them if they take immediate and appropriate action in response to racist incidents, giving the race equality officer (REO) sufficient time to exercise their duties effectively. Ask them about their priorities and recent actions to promote race equality.

Staff: ask them to describe the benefits of racial equality and how they think the governor promotes it.

3. Race equality is effectively managed by a race equality action team (REAT), or equivalent, chaired by the governor or deputy governor and includes other senior managers, prisoner representatives and external community representatives.

Evidence

Questionnaire: perception of victimisation due to race/ethnic origin.

Documentation: check that meetings are held frequently enough to be effective and that they include all functional managers, wing and diversity prisoner representatives, the catering manager, librarian, education manager, chaplaincy, a health services representative and an external community representative. Check that a race equality action plan (REAP) is in place and is monitored by the REAT, and that quarterly reports are given to the SMT. Check that all race issues are dealt with, including those relating to Travellers and Gypsies.

Staff: ask the REO, or equivalent, about the level of senior

* Or the director in a privately managed prison.
Section 3 – duty of care  

Diversity: race equality

Management support s/he receives. Ask how s/he supports prisoners to ensure that they are able to make a useful contribution.

**Prisoners:** speak to diversity representatives and ask about the support provided, their input to REAT/DMT and whether their views are listened to and addressed. Speak to members of the Traveller and Gypsy communities.

*Cross-reference with health services, learning and skills, catering and faith inspectors.*

4. **All staff in all units are trained in race equality, which enables staff to understand and respond appropriately to race and cultural issues, as well as to positively promote race equality.**

**Evidence**

**Questionnaire**

**Documentation:** check training figures for staff and whether there is any training for prisoners. Check training materials, if available.

**Observation:** check that staff and managers provide a good model.

**Staff:** ask staff and managers why they think it's important that they take account of race issues and what they see as the benefits to both prisoners and staff. Ask staff and managers how race equality impacts on their work and their understanding of the different race equality processes, e.g. impact assessment, monitoring, consultation. Ask them what issues they find difficult to resolve and whether they have the appropriate support and training to help them to do so. Ask what they believe constitutes a racist incident and how they would respond. Ask whether staff appreciate that prisoners of different racial, ethnic and religious groups, including Travellers and Gypsies, have differential experiences of prison and how they engage with this. Ask the REO, or equivalent, what proportion of the REAT are trained in race equality.

*Cross-reference with health services and learning and skills inspectors.*

5. **Staff attempt to understand and actively engage with all racial and ethnic groups.**

**Evidence**

**Questionnaire**

**Documentation:** check wing history sheets and applications for evidence that staff are responsive to all prisoners.

**Observation:** observe staff interaction with prisoners of different racial and ethnic backgrounds, including Travellers and Gypsies. Observe the

HMIP: Expectations
use of language by staff and the willingness of prisoners from
different racial and ethnic groups to approach staff.

**Staff:** speak to staff and the REO. Ask if they are aware of cultural
differences in gesture, body language and expression of emotion
and how they manage these differences. Ask if they understand the
significance of unconscious bias.

**Prisoners:** ask prisoners from different racial and ethnic backgrounds
how staff respond to them.

6. **Inappropriate language or conduct is challenged.**

**Evidence**

**Documentation:** check the RIRF log for evidence of inappropriate
language being reported by staff and action taken.

**Observation:** check the language used by staff and prisoners, in
particular the names used to address black and minority ethnic
prisoners and staff.

**Staff:** ask staff how they would define inappropriate language/conduct
and ask for examples.

**Prisoners:** check with groups of black and minority ethnic prisoners,
including Travellers and Gypsies, how they and their visitors are treated
by staff and other prisoners and how this is responded to.

*Cross-reference with staff-prisoner relationships and contact with the
outside world inspectors.*

7. **A committed and trained REO is appointed with sufficient time and support to
effectively manage race equality.**

**Evidence**

**Staff:** ask the REO and REO assistant(s) about their duties and if they
work to a race equality manager who is a member of the SMT,
particularly if they are of a junior grade. Ask if they have sufficient
time to do the job properly, what support they are given and what
support they need to do the job. Ask if there are any difficulties that
prevent them from doing the job better. Ask if the REO is encouraged
to become a member or associate member of RESPECT.
8. **Prisoners know the identity of the REO and race equality representatives, and are easily able to contact them.**

**Evidence**

**Observation:** check for photographic displays with details of how to contact the REO and race equality representatives, and that they are up to date.

**Staff:** ask staff who the REO and race representatives are.

**Prisoners:** ask prisoners who the REO and race representatives are, what they do and how easy they are to contact. Ask them if they feel confident that the representatives would be able to represent their views, and if they feel the REO can actually assist them with their concerns.

9. **The REO takes action to identify and minimise racist bullying.**

**Evidence**

**Documentation:** check that any evidence of racial bias in the reporting of, or responses to, violence or bullying is raised within the REAT/DMT. Check the outcomes.

**Staff:** speak to the representative for race equality (e.g. the REO) about their role in the violence reduction strategy. Check that they monitor violent incidents for any racial element, what action they take and that the strategy has been impact assessed and does not disadvantage any racial group.

**Prisoners:** ask those who have been affected by racist bullying if they thought it was appropriately handled.

*Cross-reference with the bullying inspector.*

10. **Equality of treatment is effectively monitored by ethnicity, the results are communicated in an easy-to-understand format to prisoners and staff and appropriate action is taken where necessary.**

**Evidence**

**Documentation:** check that the black and minority ethnic population, including Travellers and Gypsies, is entered accurately in monthly monitoring. Check that monthly monitoring is undertaken of those activities that take place with sufficient numbers each month for the range setting analysis to be valid. Check that local monitoring (blank)

**HMIP:** Expectations
fields are used to monitor aspects of particular interest to the establishment beyond mandatory areas. Check the areas identified as a priority and whether monitoring is taking place quarterly or six monthly, or if annual analysis takes place of less frequent activities or of activities with small numbers. Check that analysis of the distribution of racial groups is also carried out periodically, particularly in relation to the use of force, adjudications, segregation, use of unfurnished accommodation, rewards and sanctions, ROTL and HDC, work allocation and of incidents of self-harm. Referrals to primary and secondary health services are also monitored. Check that figures are considered with regard to all ethnic groups, not just using the white/black and minority ethnic prisoner comparison. Check that the REAT/DMT are aware of the differential results for race equality in the MQPL survey. Check for action on the basis of the monitoring.

Staff: ask if they are aware of the results of ethnic monitoring and the action to be taken.

Prisoners: ask if the results of ethnic monitoring are displayed in an easy-to-understand format in accommodation areas. Ask if there is a member of staff or young person representative they can speak to if they have any questions or concerns about the information.

Cross-reference with all inspectors.

Managing racist incidents

11. There is an effective system in place for reporting and dealing with racist incidents and external validation of racist incident investigations.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check the quality of RIRF investigations and that investigating officers are trained. Check specifically for polite and timely responses to prisoners; a response that deals with the prisoner's concern and adopts a problem-solving approach; an outcome that is based on the balance of probabilities rather than the burden of proof; the protection of the complainant's anonymity as far as is possible, ensuring the prisoner is made aware of the limits to this; clarity about the process, including highlighting when external scrutiny is used; and use of different languages and formats to aid understanding. Check that RIRF investigations are subject to quality</td>
<td>CERD Art 1, 2, 5, 6</td>
</tr>
<tr>
<td></td>
<td>SMR 6, 35, 36</td>
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<td>EPR 13, 70</td>
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</table>

HMIP: Expectations
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assurance, e.g. overseen by an external organisation, are timely, that witnesses are followed up if they have moved, that a complaint is pursued to its conclusion even if the complainant has moved, and that the results are always communicated to the complainant. Check that initial stage investigations take into account that racism can be unintentional. Check that the investigation of complaints raised by staff defending themselves against an accusation of racism goes beyond establishing the original reason for the accusation. Check that action is taken against staff found guilty of racist misconduct. Check the racist incident log for any trends and track a sample through wing files. Check what proportion of complaints made are upheld and what proportion are upheld but without the racist aspect.

**Staff:** ask the REO about his/her views on the effectiveness of the system. Speak to advocates about their role in assisting prisoners who have learning difficulties/disabilities or whose first language is not English with complaints about racist incidents.

**Prisoners:** ask prisoners if they feel confident in making a race complaint without any negative repercussions, whether forms are freely available and whether help is available for making complaints. Check their understanding of the role of advocates in this regard. Check if there are repercussions from submitting a form, and follow up individual cases. Also talk to Travellers and Gypsies about their experiences.

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**Section 3 – duty of care**

**Diversity: race equality**

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**12. Interventions for challenging racism and protecting victims of racist bullying are in place.**

**Evidence**

- **Documentation:** check the outcome of a sample of RIRFs, what remedial action is taken when staff are found guilty of racist misconduct, and what protections are in place for victims and those who report racist incidents. Check for evidence that they are effective.

**Staff:** ask REOs, or equivalent, what interventions are available for prisoners found guilty of racist misconduct, e.g. diversity training programmes, and what support is available for victims. Ask whether prisoners found guilty of racist misconduct are subject to ongoing monitoring by staff. Ask staff what protections are in place for victims or those who report racist incidents.

**Prisoners:** ask victims who are subject to protections whether these have been effective.

*Cross-reference with the bullying inspector.*

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**HMIP: Expectations**
Section 3 – duty of care

Race equality duty

13. **Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to race equality.**

   **Evidence**

   **Documentation:** check impact assessments and ensure they take into account all races, including Travellers and Gypsies. Check what remedial action has been undertaken if problems have been identified.

   **Staff:** speak to the head of the REAT/DMT about progress in and understanding of impact assessments and correlation with ethnic monitoring.

14. **A process is in place to identify any prisoner convicted of a current or previous racially aggravated offence or of an incident of racist bullying in prison and to draw the attention of staff to these individuals.**

   **Evidence**

   **Documentation:** check that cell sharing risk forms are adequately completed and based on sufficient and relevant information.

   **Observation:** check that such action has been taken. Check for photos of these prisoners in staff-only areas and on the prison intranet.

   **Staff:** speak to the REO, or equivalent, as well as staff responsible for public protection, reception, first night and admin procedures and ask whether this is current practice.

   *Cross-reference with first days in custody and resettlement inspectors.*

15. **There is frequent and effective involvement from and communication with black and minority ethnic prisoners.**

   **Evidence**

   **Documentation:** check that involvement occurs in areas such as catering, canteen, use of force, adjudications, complaints, good order and discipline and incentives and earned privileges as part of impact assessment. Check for evidence of involvement and communication via forums, through groups as well as surveys.

   **Staff:** speak to the head of REAT/DMT about how this is organised.

   Ask how diversity representatives are able to communicate with and represent other black and minority ethnic prisoners, including Travellers...
and Gypsies. Ask whether any race forums have taken place, whether diversity representatives are involved in impact assessments and whether advocates have a role in consultation arrangements.

Prisoners: ask race equality representatives whether they are supported, given facilities in which to operate and replaced in a timely fashion. Ask how prisoners are involved and whether they feel able to raise concerns with staff.

16. Regular events are held to celebrate racial, ethnic and cultural diversity and external organisations are invited to take part.

Evidence

Documentation: check the frequency and focus of events – ensure they reflect the population.

Staff: ask the REO, or equivalent, about the celebration of black history month or other events and the level of support provided in the prison. Ask about the level of involvement of outside organisations.

Staff/prisoners: ask about their experiences of events to celebrate cultural diversity.

17. Displays throughout all areas of the establishment portray images that reflect the racial diversity of the population and the local community.

Evidence

Observation: check all units and areas, including the visits area. Cross-reference with residential units and contact with the outside world inspectors.

18. The governor ensures that his/her general duty under the RR(A)A 2000 is discharged by any contractors who offer services directly to prisoners or by any employer of prisoners who work out on temporary licence.

Evidence

Documentation: check that pre-employment checks have enquired about race equality policies that cover the avoidance of discrimination and the promotion of good race equality.

Prisoners: speak to black and minority ethnic prisoners about their treatment by outside contractors (e.g. escort staff) and outside employers. Cross-reference with health services and learning and skills inspectors.

HMIP: Expectations
Expectations – foreign nationals

19. **There is a coherent and distinct foreign nationals policy or action plan with a coordinator who is fully conversant with the needs of prisoners who are foreign nationals and is supported by the senior management team.**

   **Evidence**

   **Documentation:** check that the policy/action plan gives attention to the primary problems of family contact, immigration and language and reflects local needs assessments, such as provision of toiletries, ability to send money to and receive money from family, childcare, allocation to employment, etc. Check that actions are implemented and monitored with progress against agreed objectives recorded and evaluated.  
   **Staff:** ask whether the coordinator has a clear appreciation of the main problems facing foreign nationals, and is committed to the role. Ask what their contribution to the policy/action plan is, if they have attended any training or courses and whether they feel confident and competent to carry out their role. Ask if they attend race equality/foreign national/diversity committee meetings. Ask how much time is allocated to the role and if there are barriers to carrying it out.

20. **A multi-disciplinary foreign nationals committee, or equivalent, is in place to ensure that the needs of foreign national prisoners are represented, and that the foreign nationals policy/action plan is fully implemented.**

   **Evidence**

   **Documentation:** check the meeting minutes and see who attends on a regular basis. Check that the chair is a senior governor, especially in prisons with high numbers of foreign nationals. Check that particular issues of concern are discussed at the meetings and actions are put in place and followed up.  
   **Staff:** speak to members of the committee and the foreign nationals coordinator.

21. **Staff are aware of foreign national prisoners’ distinct needs.**

   **Evidence**

   **Staff:** ask staff about the content of training and whether it covers the diversity of experience among different foreign nationals, e.g.
Section 3 – duty of care

Diversity: foreign nationals

according to nationality, ethnicity, place of residency and religion. Ask whether they felt the training was useful and if it enables them to conduct their job properly.

Prisoners: ask foreign nationals if they feel their needs are taken into account and met by staff.

22. Prisoners have access to accredited translation and interpreting services wherever matters of accuracy and/or confidentiality are a factor.

Evidence

Documentation: check the frequency of use of the telephone interpretation service. Check that health leaflets are available in different languages and formats.

Staff: ask what translation and interpretation services are available, when they would be used and by whom. Ask if they are used by health services and during care and support plan reviews.

Prisoners: ask if they know how to access translation services, and their entitlements.

Cross-reference with the health services inspector.

23. Regular liaison takes place with the UK Border Agency and all prisoners are informed as early as possible in their sentence whether they are being considered for removal or deportation.

Evidence

Documentation: check committee meeting minutes for evidence of UKBA consultation. Check wing history files for any detainees held in the prison.

Staff: ask the foreign nationals coordinator about arrangements and if contact has also been made with relevant embassies or consulates.

24. Administrative staff responsible for managing immigration paperwork and liaison are trained and provided with guidance.

Evidence

Staff: speak to administrative staff to ascertain their knowledge and level of training.

HMIP: Expectations
25. Immigration detainees held solely under administrative powers are not held in prisons other than exceptionally following risk assessment.

Evidence

Documentation: check the numbers of foreign nationals held beyond the end of their sentence. Check that the prison is in regular contact with the UKBA to progress cases and, if necessary, to arrange transfer to immigration detention facilities.

Staff: speak to the residential units governor and the foreign nationals coordinator.

Prisoners: case studies with any prisoners held under dual powers.

Cross-reference with the resettlement inspector.

26. Foreign national prisoners are provided with information about immigration status and procedures in different languages and helped to understand them.

Evidence

Documentation: check the information provided and the language and formats in which it is provided.

Staff: ask administrative staff and foreign national coordinators what information they provide and in what languages. Ask how they work with prisoners to ensure they understand the information and that it does not cause further anxiety.

Prisoners: ask about the information provided on removal and deportation and possible detention.

27. Accurate records of staff and prisoners able to speak languages other than English are kept.

Evidence

Documentation: check that there is an up-to-date list of this information and that it is accessible. Check that there are prisoner information books in 20 different languages. Check the use of peer support and translation facilities, and what guidance, if any, is given to staff about appropriate usage, i.e. prisoners should only be used as peer support, not for formal interpretation.

Staff: ask whether staff know what languages are spoken within the prison, by whom, and how to access these people.
Section 3 – duty of care

28. Foreign national prisoners and immigration detainees are properly identified so that service provision can be targeted.

Evidence

Documentation: check that the prison knows how many foreign nationals it discharges into the community and to immigration custody.

Documentation/staff: ask staff to identify all foreign nationals and immigration detainees across the prison and cross-reference this to ensure record-keeping is accurate.

Prisoners: check that the status recorded is correct.

29. There is regular contact with available accredited, independent immigration advice and support agencies.

Evidence

Documentation: check for any official advice/correspondence with external agencies.

Staff: ask the foreign nationals coordinator about which groups are contacted and how often. Ask residential staff what help is given to foreign nationals in order for them to access immigration advice.

Prisoners: ask who they would contact for specialist immigration advice.

30. Prisoners know the identity of foreign national prisoner representatives within the prison and are able to contact them.

Evidence

Observation: check the residential units for photographic displays with details of how to contact prisoner representatives.

Prisoners: ask foreign nationals if they can identify their representatives and how easy it is to contact them.

31. Foreign national prisoner support and information groups are held at least monthly. Areas of concern are regularly fed back to senior managers.

Evidence

Documentation: check for regularity of meetings. Check the minutes of the last three meetings, and whether issues have been acted on by the senior management team.

HMIP: Expectations
Section 3 – duty of care

Check that staff and outside agencies attend on a regular basis to answer queries.
Observation: foreign national orderlies will be a sign of good practice.
Prisoners: ask prisoners if support groups exist and how often they meet.

32. There is active promotion of peer support for young people who are foreign nationals, and this work is appropriately rewarded.

Evidence

Documentation: examples of how this work could be recognised include sentence plans, IEP scheme credits, etc.
Staff: ask about peer support for foreign nationals and the use of prisoners as interpreters.

33. There is routine involvement from and communication with the foreign national population and any significant issues raised are acted on.

Evidence

Staff: speak to the foreign nationals coordinator about involvement and how this is organised. Anonymous surveys and/or focus groups should be undertaken at regular intervals.
Prisoners: ask prisoners who are foreign nationals how they are involved and whether the issues they raise are acted on.

Expectations – disability

34. The establishment has a policy or action plan in place that meets the requirements of the Disability Discrimination Act (DDA 2005) and specifically the Disability Equality Duty.

Evidence

Documentation: check the disability policy/action plan and assess the quality of content. Is the content sufficient to enable the establishment to carry out its positive duty under the DDA? How have prisoners with mental, physical and learning disabilities been involved in the development of the action plan? Is the content based on evidence? How has the evidence been used to form the actions and how are they delivering against them?

References

DDA 1995

HMIP: Expectations
Staff: ask what the key issues are around disability and what steps are being taken.
Prisoners: ask those with disabilities whether prisoners were involved in the development of the policy/action plan, and whether they feel their needs are being met.

35. The needs of prisoners with disabilities are effectively managed by a disability committee, or equivalent.

Evidence References
Documentation: check that meetings are held frequently enough to be effective and are attended by senior management and relevant prisoners’ representatives. Look for a dedicated disability committee or a standing agenda item for the diversity management committee meetings. Check the minutes for evidence that disability issues are discussed, monitoring information is analysed and actions are taken and reviewed where appropriate; reasonable adjustments are agreed; and equality impact assessments are signed off. Check that quarterly reports are submitted from a disability committee and discussed at the diversity management committee meetings.
Staff: ask staff if they know who the disability liaison officer is, and how they support prisoners who act as representatives.
Prisoners: speak to disability representatives and ask about the support provided, input to the committee and whether their views are listened to and addressed.

36. Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to those with a disability.

Evidence References
Documentation: check recent impact assessments, their action plans and reviews. If problems are identified check what remedial action has been taken.
Staff: speak to the chair of the diversity management committee and the disability committee about progress in and understanding of impact assessments and correlation with diversity monitoring. Ask whether disability representatives are involved in impact assessments. Cross-reference with all other inspectors.

HMIP: Expectations
37. **Prisoners’ disabilities, including learning disabilities, are identified as soon as possible after arrival and information relating to their needs shared with relevant staff. Regular reassessments are carried out to ensure prisoners’ changing needs continue to be met.**

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<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check wing files for evidence of initial assessments and reassessments and the action taken as a result. How soon after arrival are the assessments undertaken, e.g. on reception? Do the assessments cover all aspects of disability, i.e. mental, physical and/or learning disabilities? Are immediate needs identified and dealt with before prisoners are locked up for the first night? Are other/more thorough assessments carried out during induction? Check for formal protocols for staff, including health services staff, to share relevant information with the disability liaison officer and vice versa. How is confidentiality maintained? Check that arrangements are in place to inform the receiving establishment of a prisoner’s specific needs when transferred. Check that a needs analysis is conducted on at least an annual basis and any resulting actions followed up. <strong>Observation:</strong> check reception procedure and induction for self-disclosure of physical, mental and/or sensory disabilities. Check that disclosure of information is voluntary and disabilities are not assumed. Check formal screening for learning disabilities or difficulties. Check that the outcomes of the assessments are recorded on LIDS, including the lack of disability or failure to disclose. <strong>Staff:</strong> ask staff if they are aware of the specific needs of prisoners on their location and what procedures are in place for sharing this information with those who need to know. <strong>Prisoners:</strong> ask if they were assessed and how it was conducted.</td>
<td></td>
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<tr>
<td>DDA 1995</td>
<td>SMR 24, 25</td>
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<td>EPR 15.1, 42</td>
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38. **Formal procedures for declaring a disability after arrival are in place which are promoted and known to staff and fully explained to prisoners.**

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<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check wing files for evidence of declarations during custody. Check for formal procedures for prisoners and staff to follow. <strong>Observation:</strong> check for information presented using appropriate</td>
<td></td>
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<tr>
<td>DDA 1995</td>
<td>EPR 15.1, 16, 30</td>
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<tr>
<td>SMR 35</td>
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language and media explaining how prisoners can declare a
disability during custody.
**Staff:** ask staff what subsequent formal procedures are in place
for prisoners to declare a disability, if LIDS is updated with new
information where relevant, and if they are aware of the specific
needs of prisoners on their location.
**Prisoners:** ask if they understood the information they were given
and if they know how and feel able to declare a disability during
their custody. Ask those who did declare a disability if they felt their
needs were met.
*Cross-reference with the residential units inspector.*

39. **Staff are aware of all prisoners with disabilities who would need help in the event of an emergency.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</table>
| **Documentation:** check for lists on the residential units and for Personal Emergency Evacuation Plans (PEEP) for those who require them. | DDA 1995  
EPR 74, 81.3 |
| **Staff:** ask who on their wing would need help and why, and what arrangements are in place to alert and evacuate those who would need help. Ask the fire officer if they are aware of those who would need help. | |
| **Prisoners:** speak to those with an identified sensory or physical disability and ask whether they know what arrangements are in place to help them in an emergency. | |

*Cross-reference with the residential units and health services inspectors.*

40. **Information is provided to prisoners in a format and language they can easily understand.**

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<th>Evidence</th>
<th>References</th>
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</table>
| **Documentation:** check the language, format and content of information provided on reception and induction. All information should be in easy read format. | EPR 30  
SMR 35  
PR 10 |
| **Observation:** of reception and induction and information on display. | |
| **Staff:** ask in what format prison information is available. | |
| **Prisoners:** speak to those with an identified sensory or learning disability and ask in what format they were given relevant information. | |

*Cross-reference with first days in custody, health services and residential units inspectors.*

**HMIP:** Expectations
41. Dedicated cells adapted for use by prisoners with disabilities are available on main location and adaptations made if the occupant or the needs of the occupant change.

**Evidence**
- **Observation:** check that the location of dedicated cells is appropriate and that adaptations made for those with a disability are relevant, e.g. can they be accessed by a wheelchair, do adaptations cater for those with sensory disabilities, etc?
- **Staff:** ask what arrangements are in place to ensure prisoners with a disability are not automatically located in the health services centre.
- **Prisoners:** ask where their cells are and what adaptations have been made to meet their needs.

*Cross-reference with residential units and health services inspectors.*

**References**
- DDA 1995
- R (98) 7 50

42. Reasonable adjustments are made to allow prisoners with disabilities full access to the regime and facilities. These adaptations are maintained and reviewed according to updated needs assessments.

**Evidence**
- **Observation:** check for adaptations on different locations, e.g. are there lifts/stair lifts for wheelchair users, are there hearing loops in visits for both prisoners and visitors, etc?
- **Staff:** ask what alterations have been made for prisoners with disabilities to ensure they have access to all areas of the prison.
- **Prisoners:** ask whether they have access to all facilities and activities.

*Cross-reference with residential units and all other inspectors.*

**References**
- DDA 1995
- R (98) 7 50

43. All staff understand, respond appropriately to and promote awareness of disability issues.

**Evidence**
- **Documentation:** check that all staff are trained in how to deal with the various disabilities, including learning disabilities and difficulties. Check that the content of the training reflects the needs of the population in that establishment. Check whether there is any training for prisoners.
- **Observation:** check that staff and managers provide a good model and that staff engage with prisoners with disabilities in an appropriate

**References**
- DDA 1995
- EPR 74, 81.2
- SMR 47.3

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manner. Check that inappropriate language and conduct is challenged. Check for displayed information in different languages and formats that promotes equality of opportunity for and an anti-discriminatory approach to those with a disability.

**Staff:** ask staff and managers if there are barriers to progress and what they are doing to overcome them. Ask them whether staff appreciate that prisoners with disabilities have a different experience of prison, which may include bullying or unfair treatment by other young people associated with their disability, and how they engage with this. Ask if they feel equipped to identify prisoners who need help with basic tasks such as using the phone, setting up PIN numbers, filling in food, canteen and visitor forms, etc. Ask if complaints relating to discrimination due to disability can be made and if they are dealt with appropriately.

*Cross-reference with staff-prisoner relationships, bullying, complaints and residential units inspectors and all others.*

### 44. Designated and trained disability liaison officers (DLOs) are in post and are provided with sufficient time, support and resources to meet the needs of prisoners with disabilities in their establishment, including support from named prisoner representatives.

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<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check for the allocation of a dedicated staff member for disability. Check training records for the DLO. Check SPAR forms to ascertain facility time for the DLO.</td>
<td>DDA 1995</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that there are notices in a variety of accessible languages and formats, e.g. easy read, informing prisoners who the DLO is and how they can get to see them.</td>
<td>EPR 81.3</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask if they know who the disability liaison officer and prisoner representatives are. Ask disability liaison officers if they feel they have enough time and are provided with sufficient support to meet their duties. Ask how they work with prisoners who act as representatives and ensure that they are sufficiently trained and supported to make a useful contribution.</td>
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<tr>
<td><strong>Prisoners:</strong> ask if they know who the DLO and prisoner representatives are and how easy it is to get hold of them. Speak to prisoners who act as representatives. Are they sufficiently trained and supported to make a useful contribution?</td>
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</table>

*Cross-reference with the residential units inspector.*
45. **Equality of treatment is monitored and analysed by disability, and appropriate action taken to rectify any inequalities.**

**Evidence**
- Documentation: check the minutes of the disability committee and/or diversity management committee meetings to ensure statistics are routinely collected, analysed by disability and acted on. Check which areas of victimisation or exclusion have been highlighted through analysis. Check that the terms of reference for the disability committee and diversity management committee include diversity monitoring by, for example, access to regime activities and facilities, e.g. access to education, PE, association and outside exercise, etc, and themes from complaints, bullying, RIRFs, deaths in custody, self-harm, use of force, adjudications, use of segregation, rewards and sanctions, etc.
- Staff: ask the DLO what information is collated and for what purpose, and what action is taken to rectify problems. Ask how it is ensured that prisoners with disabilities have equality of access to all regime activities.
- Prisoners: ask those with a disability about equality of treatment and access to all regime activities and how they are involved in improving their experience of custody.

**Cross-reference with all other inspectors.**

46. **All prisoners with a disability have, and are involved in the development and regular update of, a multi-disciplinary care plan that sets out how their needs, including their social care needs, will be met.**

**Evidence**
- Documentation: check that care plans exist for all prisoners with disabilities and are included in wing files. Are they based on a thorough assessment of individual need? Do they outline the additional support a prisoner requires? Are there regular reviews that are described in wing files? Is there evidence that the prisoner was involved in the development of the care plan and do they influence the reviews? Do key staff, including community YOT workers, have the opportunity to contribute to the care plan and is relevant information shared with those who need to know? Are there links to those in the community who can provide help and is there an effective referral system? Are assessments updated on at least an annual basis to monitor any change in need? Is there evidence of

**References**
- DDA 1995
- EPR 81.3
- RG (98) 7 50
effective multi-disciplinary working to meet the care plan? Does the care plan include health, social care, custodial and resettlement needs? Is it linked with their training plan? Check for provision of specific aids, e.g. hearing loops, mobility aids, social care aids, etc. Check for access to speech and language therapy.

**Staff:** ask staff from different areas of the prison what involvement they have in prisoners’ care plans.

**Prisoners:** ask how prisoners are consulted about their care and what help they are given to make a contribution.

*Cross-reference with personal officers, health services and training planning inspectors.*

### 47. A recognised carer/mentor scheme exists for prisoners with a disability.

**Evidence**

*Documentation:* check that there is a well-managed prisoner carer scheme in place that provides training and proper pay for the carer role. Check that such a scheme includes help with basic social care needs such as collecting food, using cutlery, etc. Check that a mentor scheme is also in place to provide help to those with learning disabilities/difficulties in completing forms, using the telephone, writing letters, etc. There is a formal procedure for selecting mentors and rewarding them.

*Observation:* check for displays in different languages and formats that advertise different types of support.

**Staff:** speak to the DLO about how the scheme is run and how both carers and the cared for are supported and protected.

**Prisoners:** ask individuals with specific needs what schemes are on offer and how they found out about them. Ask them if they feel supported and empowered rather than over-protected.

*Cross-reference with the residential units and health services inspectors.*

### 48. Prisoners who are unfit to work due to a disability are unlocked during the day and provided with appropriate and sufficient regime activities.

**Evidence**

*Observation:* see how many prisoners with a disability are left on the DDA 1995 wing during the day.

**Staff:** ask staff what activities are provided for those who do not work.

**Prisoners:** ask relevant individuals if they are routinely unlocked during

**References**

DDA 1995

EPR 25

R (98) 7 50

*HMIP: Expectations*
the day. Ask them what choice of activities are provided and how often. Ask them if they receive some form of disability pay if they are unable to work. 

Cross-reference with the residential units and learning and skills and work activities inspectors.

49. The specific resettlement needs of prisoners with disabilities, including any social care needs, are accurately assessed and provided for on release.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check that sentence plans for prisoners who have a disability take full account of their resettlement needs.</td>
<td>DDA 1995</td>
</tr>
<tr>
<td><strong>Staff</strong>: ask what assessments are carried out pre-release and how far in advance of release. Ask what arrangements are put in place for those who have been identified as having specific needs.</td>
<td>SMR 80, 81</td>
</tr>
<tr>
<td><strong>Prisoners</strong>: ask relevant individuals who are coming up to release if their needs have been assessed, and what choice of activities are provided and how often.</td>
<td>EPR 33</td>
</tr>
</tbody>
</table>

Cross-reference with the resettlement, training planning and health services inspectors.

50. There is frequent and effective involvement from and communication with disabled prisoners.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check for regularity of meetings. Look at the minutes of the last three meetings, and whether issues have been acted on by the senior management team. Check that staff and outside agencies attend on a regular basis to answer queries. Check that involvement occurs in areas such as catering, canteen, use of force, adjudications, complaints, good order and discipline, incentives and earned privileges, etc, as part of impact assessment. Check for evidence of involvement and communication via forums, through groups as well as surveys.</td>
<td>DDA 1995</td>
</tr>
<tr>
<td><strong>Staff</strong>: speak to DLOs about how this is organised. Ask how prisoner representatives are able to communicate with and represent other prisoners and whether any discussion forums have taken place. Ask whether prisoner representatives are involved in impact assessments.</td>
<td>EPR 74</td>
</tr>
</tbody>
</table>

| | R (98) 7 50 |

HMIP: Expectations
Prisoners: ask representatives if they are supported. Ask if they are involved in the equality impact assessment processes and if those with particular disabilities can also get directly involved. Ask if they are given facilities to hold meetings, etc., if they can identify prisoners with different disabilities and needs, and feel they can accurately represent their views. Ask if they are replaced in a timely fashion. Ask other prisoners how they are consulted and whether they feel able to raise concerns with staff.

*Cross-reference with the residential units inspector.*

Expectations – older prisoners

51. The establishment has a policy or action plan for identifying and meeting the needs of older prisoners, with a designated lead.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check that the policy/action plan is outcome-focused with clear timelines for delivery. Check that there is a named lead, with the training, time and support to carry out his/her role sufficiently, who has contact with the Prisons Health Promotion Action Group. Check that there is evidence of involvement of older prisoners, especially those with age-related disability, during development and subsequently. Check that older prisoner issues are represented at the diversity management committee meetings and acted on. | BOP 2  
EPR 74, 81.3  
SMR 21  
R (98) 7 50 |
| **Staff:** ask what the main priorities for the establishment are for improving outcomes for older prisoners. | |
| **Prisoners:** ask whether there are older prisoner representatives. Ask whether older prisoners, especially those with age-related impairment, were involved in developing the action plan and if they have contributed to the actions. Ask whether they feel their needs are being met and how this is achieved. | |
52. The specific needs of older prisoners are identified as soon as possible and information relating to their identified needs shared with relevant staff. Regular reassessments are carried out to ensure prisoners’ changing needs continue to be met.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check wing files for evidence of initial assessments and reassessments and the action taken as a result. How soon after arrival are the assessments undertaken? Do the assessments cover all age-related impairments and identify social care needs? Are immediate needs identified and dealt with before prisoners are locked up for the first night? Are other/more thorough assessments carried out during induction? Check that arrangements are in place to regularly assess older prisoners to identify and meet any needs they may have during their time in custody. Check for formal protocols for staff, including health services staff, to share relevant information with the designated older prisoner lead and vice versa. How is confidentiality maintained? Check that arrangements are in place to inform the receiving establishment of a prisoner’s specific needs when transferred and that an up-to-date care plan is made available to the receiving prison. Check that a needs analysis is conducted on at least an annual basis. Check that actions have been identified and implemented as a result of the above procedures.</td>
<td>BOP 2</td>
</tr>
<tr>
<td><strong>Observation:</strong> check reception procedure and induction for self-disclosure of age-related needs. Check that disclosure of information is voluntary and that age-related impairments and/or needs are not assumed. All age-related impairments are recorded on LIDS.</td>
<td>EPR 15.1, 16</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff what subsequent formal procedures are in place for prisoners to declare an age-related impairment. Ask if there is an age benchmark for carrying out assessments for age-related impairments for those growing old in custody. Ask if they are aware of the specific needs of prisoners on their location and what procedures are in place for sharing this information with those who need to know.</td>
<td>SMR 24, 25</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask if they were assessed and how it was conducted. Ask what arrangements are in place for declaring age-related impairments acquired during custody and how confident they feel in declaring these needs and having them met.</td>
<td>R (98) 7 50</td>
</tr>
</tbody>
</table>

*Cross-reference with the first days in custody and health services inspectors.*
53. **Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to those with age-related impairment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check recent impact assessments. If problems are identified check what remedial action has been taken.</td>
<td>BOP 2, EPR 1, 4, 5, 74, 81.3</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to the chair of the diversity management committee about progress in and understanding of impact assessments and the correlation with diversity monitoring. Ask whether the designated lead for older prisoners is involved in impact assessments.</td>
<td>SMR 69, R (98) 7 50</td>
</tr>
</tbody>
</table>

*Cross-reference with all other inspectors.*

54. **Staff are aware of all older prisoners who would need help in the event of an emergency.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check for lists on the residential units and for Personal Emergency Evacuation Plans (PEEP) for those who require them.</td>
<td>BOP 2, R (98) 7 50</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask who on their wing would need help and why, and what arrangements are in place to alert and evacuate those who would need help. Ask the fire officer if s/he is aware of those who would need help.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to those with an age-related impairment and ask whether they know what arrangements are in place to help them in an emergency.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with the residential units and health services inspectors.*

55. **Accommodation and facilities are adapted to meet the needs of ageing prisoners and are kept in good repair.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check for appropriate location of older prisoners, e.g. on the ground floor and the bottom bunk, and that adaptations have been made where necessary, for instance, can a prisoner with limited mobility access the cell call bell without having to get out of bed?</td>
<td>BOP 2, EPR 18.1, SMR 66(1), 69</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask what efforts staff make to ensure older prisoners are allocated an appropriately placed cell and bunk. Ask what arrangements are in place to ensure that prisoners who are having</td>
<td>R (98) 7 50</td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
difficulty coping within the prison environment due to their age are not, by default, located in the health services centre.

**Prisoners:** ask where their cells are and what adaptations have been made to meet their needs. Ask if they have easy access to all regime activities and facilities.

*Cross-reference with the residential units and health services inspectors.*

### 56. All staff working with older prisoners know how to recognise the signs of mental health problems and the onset of dementia.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check training logs for the number and type of staff trained and how recent the training was. Check that training includes health and social care aspects.</td>
<td>BOP 2</td>
</tr>
<tr>
<td><strong>Observation:</strong> check for information in different languages and formats, such as easy read, that describe to both prisoners and staff the signs to look for and where to find support.</td>
<td>EPR 81.3</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff and managers what the signs of mental health problems and dementia are. Ask if they feel confident that they/the establishment are able to support these prisoners and what barriers there are to providing necessary support. Ask if they are aware that age-related conditions can come under the disability legislation and what the consequences of this are.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with staff-prisoner relationships, residential units and health services inspectors.*

### 57. Equality of treatment is monitored and analysed by age, and appropriate action taken to rectify any inequalities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the minutes of the diversity management committee meetings to ensure statistics are routinely collected, analysed by age and acted on. Check what areas of victimisation or exclusion have been highlighted through analysis. Check that the terms of reference for the diversity management committee include monitoring by age in terms of access to regime activities and facilities, e.g. access to education, PE, association and outside exercise, etc, and themes from complaints, bullying, RIRFs, deaths in custody, self-harm, use of force, adjudications, use of segregation, IEP, etc. Check that the monitoring evidence is acted on.</td>
<td>BOP 2</td>
</tr>
<tr>
<td></td>
<td>SMR 69</td>
</tr>
<tr>
<td></td>
<td>EPR 13, 81.3</td>
</tr>
<tr>
<td></td>
<td>R (98) 7 50</td>
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</tbody>
</table>
Section 3 – duty of care

Diversity: older prisoners

**Staff:** ask the designated older prisoner lead what information is collated and for what purpose, and what action is taken to rectify problems. Ask where the problem areas are.

**Prisoners:** ask older prisoners about equality of treatment and how they are involved in improving their experience of custody.

_Cross-reference with all other inspectors._

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**58.** All older prisoners who require it have, and are involved in the development and regular update of, a multi-disciplinary care plan that sets out how their needs, including their social care needs, will be met.

**Evidence**

**Documentation:** check that care plans exist for all older prisoners with specific age and health-related problems and are included in wing files. Are they based on a thorough assessment of individual need? Do they outline the additional support a prisoner requires? Are there regular reviews that are described in the wing files? Is there evidence that the prisoner was involved in the development of the care plan and do they influence the reviews? Do key staff have the opportunity to contribute to the care plan and is relevant information shared with those who need to know? Are there links to those in the community who can provide help and is there an effective referral system? Are assessments updated on at least an annual basis to monitor any change in need? Is there evidence of effective multi-disciplinary working to meet the care plan? Does the care plan include health, social care, custodial and resettlement needs? Check provision of specific aids where necessary.

**Staff:** ask staff from different areas of the prison what involvement they have in prisoners’ care plans.

**Prisoners:** ask how older prisoners are consulted about their care.

_Cross-reference with personal officers and health services inspectors._

**References**

BOP 2
EPR 50, 69
R (98) 7 50

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**59.** A recognised prisoner carer scheme exists for older prisoners who require it.

**Evidence**

**Documentation:** check that there is a well-managed prisoner carer or peer support scheme in place that provides training and proper pay for the carer/peer support role. Check that such a scheme includes help with basic social care needs such as collecting food, using cutlery, etc. Check the method for recruiting carers to the role and the identification of older prisoners who would benefit.

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Section 3 – duty of care

Observation: check for posters, leaflets, etc, advertising different types of support and how prisoners can apply.
Staff: speak to the designated lead for older prisoners about how the scheme is run and how carers and the cared for are supported and protected.
Prisoners: ask older prisoners what schemes are on offer and how they found out about them. Ask if they feel sufficiently supported.
Cross-reference with residential units and health services inspectors.

60. Older prisoners who are retired or unfit to work are unlocked during the day and provided with access to appropriate and sufficient regime activities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: see how many older prisoners are left on the wing during the day.</td>
<td>BOP 2</td>
</tr>
<tr>
<td>Staff: ask what activities are provided for those who do not work.</td>
<td>EPR 25</td>
</tr>
<tr>
<td>Prisoners: ask older prisoners if they are routinely unlocked during the day, and what activities are provided and how often. Ask whether they feel they can participate in what is on offer and whether it meets their requirements.</td>
<td>R (98) 7 50</td>
</tr>
</tbody>
</table>

Cross-reference with residential units, learning and skills and work activities and PE inspectors.

61. Minimum retirement pay is set at a level that is sufficient for those who do not have another source of income.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check the level of retirement pay against the cost of canteen items.</td>
<td>BOP 2</td>
</tr>
<tr>
<td>Staff: ask at what level retirement pay is set.</td>
<td>EPR 5</td>
</tr>
<tr>
<td>Prisoners: ask retired prisoners what retirement pay they receive.</td>
<td>R (98) 7 50</td>
</tr>
</tbody>
</table>

Cross-reference with the learning and skills and work activities inspector.

62. Prisoners over retirement age do not have to pay for their TV.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check what the policy is for retired prisoners.</td>
<td>BOP 2</td>
</tr>
<tr>
<td>Staff: ask the clerk responsible for prisoner monies what the cost is to retired prisoners.</td>
<td>EPR 5</td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 3 – duty of care

**Diversity: older prisoners**

**Prisoners:** ask retired prisoners what they pay for their TV.

*Cross-reference with the residential units inspector.*

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**63. The specific resettlement needs of older prisoners, including any social care needs, are accurately assessed and provided for on release.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Staff:** ask what assessments are carried out pre-release and how far in advance of release. Ask what arrangements are put in place for those who have been identified as having specific needs. | BOP 2
B[T] 10 |
| **Prisoners:** ask relevant individuals who are coming up to release if their needs have been assessed, and what choice of activities are provided and how often. | EPR 107
SMR 80 |

*Cross-reference with resettlement and health services inspectors.*

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**64. There is frequent and effective involvement from and communication with older prisoners.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check for regularity of meetings. Look at the minutes of the last three meetings, and whether issues have been acted on by the senior management team. Check that staff and outside agencies attend on a regular basis to answer queries. Check that involvement occurs in areas such as catering, canteen, use of force, adjudications, complaints, good order and discipline, incentives and earned privileges, etc, as part of impact assessment. Check for evidence of involvement and communication via consultation forums, through groups as well as surveys. **Staff:** speak to the designated lead of older prisoners about how this is organised. Ask if there are prisoner representatives and, if so, how they are able to communicate with and represent the views of other older prisoners. Ask whether any discussion forums have taken place. Ask whether prisoner representatives are involved in impact assessments. **Prisoners:** ask older prisoners how they are consulted and whether they feel able to raise concerns with staff. Ask representatives if they are supported, given facilities to hold meetings, etc, and replaced in a timely fashion. | BOP 2
EPR 74
R (98) 7 50 |

*Cross-reference with the residential units inspector.*

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**HMIP: Expectations**
Expectations – religion

65. **The establishment has a policy or action plan describing how the religious needs of all prisoners will be met.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check the policy/action plan and the implementation of the objectives. Check that the policy/action plan includes the requirement to record and monitor the religious faith of the population, including the number, description and reasons for any religious conversions. Check for evidence of routine assessment of the faith needs of the population and the employment of chaplains of different faiths in order to meet those needs. Check that there is evidence of the involvement of prisoners in the development of the policy/action plan. Check that religious issues are represented by chaplains at the diversity management committee and acted on – check the minutes of meetings. Check that the policy/action plan includes developing and maintaining links with external and community groups.  
**Staff:** ask how the establishment meets the needs of prisoners from different religious groups.  
**Prisoners:** ask prisoners from different religious groups whether they were involved in the development of the policy/action plan. Ask if their religious needs are met as much as possible. If not, what are the problems and what are the issues preventing the problems from being dealt with?  
*Cross-reference with the faith and religious activity inspector.* | DEDRB 6  
SMR 42  
EPR 29.2 |

66. **All staff are trained in religious diversity and the way this interacts with cultural and racial identities.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check training logs for the number of staff trained and how recent the training was. Check the breadth of training.  
**Observation:** observe the interactions between staff and prisoners.  
**Staff:** ask staff and managers what training they have had and what they learnt from it. Ask them what their understanding is of the interaction between religion, race and culture.  
*Cross-reference with staff-prisoner relationships, faith and religious activity and residential units inspectors.* | EPR 74, 81  
SMR 59 |
67. **Equality of treatment is monitored and analysed by religion, and appropriate action taken to rectify any inequalities.**

**Evidence**

**Documentation:** check the minutes of the diversity management committee meetings to ensure statistics are routinely collected, analysed by religion and acted on. Check that community groups are involved in identifying any potential areas of discrimination and disadvantage. Check what areas of victimisation or exclusion have been highlighted through analysis. Check that the terms of reference for the diversity management committee includes monitoring by religion in terms of access to regime activities and facilities, e.g. access to education, PE, association and outside exercise, etc, and themes from complaints, bullying, RIRFs, deaths in custody, self-harm, use of force, adjudications, use of segregation, IEP, etc. Check that the interplay between religion, race and culture is recognised in any analysis.

**Staff:** ask chaplains what their involvement is in the collation of information, what information is collated and for what purpose, and what action is taken to rectify problems.

**Prisoners:** ask prisoners from different religious groups about equality of treatment and how they are involved in improving their experience of custody.

*Cross-reference with the faith and religious activity inspector and all other inspectors.*

---

68. **Strategies exist for preventing and dealing with discrimination on the grounds of religion.**

**Evidence**

**Documentation:** check what prevention strategies are in place. Check that allegations are treated consistently and investigated thoroughly, and the outcome of any complaints/reports. Check that incidents are routinely recorded and any patterns/trends identified and discussed at the diversity team meeting. Check what protections are in place for victims and those who report incidents – check for evidence that they are effective.

**Observation:** check that staff and managers are good role models and that any discrimination is challenged.

**Staff:** ask what measures the establishment has in place to prevent religious discrimination from occurring. Ask what strategies are in place.
place for identifying perpetrators and what kind of ill-treatment is covered, e.g. verbal abuse, physical abuse, etc. Ask what interventions are available for prisoners found guilty of this type of misconduct and what support is available for victims. Ask whether prisoners found guilty are subject to ongoing monitoring by staff, and what protections are in place for victims or those who report such incidents.

Cross-reference with the bullying and faith and religious activity inspectors.

**Expectations – gender**

*Expectations for women that differ from those for men are located throughout the Expectations document.*

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**69. Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to women.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check recent impact assessments, action plans and reviews. If problems are identified check what remedial action has been taken. Are policies and procedures written with women, transsexual and transgender prisoners in mind, rather than merely adapting those created for men?</td>
<td>CEDAW 2</td>
</tr>
<tr>
<td>Cross-reference with all other inspectors.</td>
<td></td>
</tr>
</tbody>
</table>

**70. All staff working in women’s establishments are trained to work with them.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check training records.</td>
<td>EPR 81.3</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff what specific training they have received and how long ago they received it, and if there is training information on transsexual and transgender prisoners. Ask if they understand the issues related to gender dysphoria. Ask whether there is a timetable of booster training sessions and if they have attended those. Ask how effective the training was.</td>
<td></td>
</tr>
</tbody>
</table>

**71. Prisoners who are transsexual or transgender are supported via specific support groups/schemes within the establishment and through referral to external support networks.**

**HMIP: Expectations**
## Section 3 – duty of care

### Diversity: sexual orientation

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check that prisoners with gender dysphoria have an individualised care plan that meets their specific needs and requirements. Check that one-to-one support or counselling is provided where there are small numbers of individuals. Check for links to community groups and the number of referrals.</td>
<td>SMR 80, EPR 5, 7, 13</td>
</tr>
<tr>
<td><strong>Observation</strong>: check that prisoners can access information about community groups through a range of accessible means. Check for displays in different languages and formats advertising different types of support. Check how prisoners can apply.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff</strong>: speak to designated diversity officers about how they support prisoners in transition. Ask how diversity representatives are involved.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners</strong>: ask individuals with specific needs what support groups/schemes are on offer and how they found out about them. Ask how they get access to external support groups. Ask if they feel supported, including obtaining gender recognition certificates and gender reassignment surgery.</td>
<td></td>
</tr>
</tbody>
</table>

_Cross-reference with residential units and health services inspectors._

### Expectations – sexual orientation

72. **The establishment has a policy or action plan for supporting and meeting the needs of prisoners who are gay, lesbian or bisexual.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
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<tbody>
<tr>
<td><strong>Documentation</strong>: check that the policy/action plan includes the delivery of staff awareness training. Check that the policy/action plan involves prisoners who are gay, lesbian or bisexual, both during development and as part of reviews. Check that the issues identified are represented at the diversity management committee meetings and acted on.</td>
<td>EPR 13, 74</td>
</tr>
<tr>
<td><strong>Staff</strong>: ask how the establishment meets the needs of prisoners who are gay, lesbian or bisexual.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners</strong>: ask whether those who are gay, lesbian or bisexual were involved in the development of the policy/action plan. Ask whether they feel their needs are being met.</td>
<td></td>
</tr>
</tbody>
</table>
### Section 3 – duty of care

#### Diversity: sexual orientation

**73. Prisoners who are gay, lesbian or bisexual are supported via specific support groups/schemes within the establishment and through referral to external support networks.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the range of support groups on offer, the frequency of meetings and the number of attendees. Check that one-to-one support or counselling is provided where there are small numbers of individuals. Check for links to community groups and the number of referrals.</td>
<td>SMR 80, EPR 5, 7, 13</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that prisoners can access information about community groups through a range of accessible means. Check for displays in different languages and formats advertising different types of support. Check how prisoners can apply.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to designated diversity officers about how support groups are organised. Ask how diversity representatives are involved.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask individuals with specific needs what support groups/schemes are on offer and how they found out about them. Ask how they get access to external support groups, and if they feel supported.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with the residential units inspector.*

**74. Strategies for preventing and dealing with discrimination on the basis of sexual orientation are in operation.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check what prevention strategies are in place. Check that allegations are treated consistently and investigated thoroughly. Check the outcome of any complaints/reports. Check that incidents are routinely recorded and any patterns/trends identified and discussed at the diversity team meeting. Check what protections are in place for victims and those who report incidents – check for evidence that they are effective.</td>
<td>BPTP 2, EPR 13, 70</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that staff and managers are good role models.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask what strategies are in place for identifying bullies and what kind of ill-treatment is covered, e.g. verbal abuse, physical abuse, etc. Ask what interventions are available for prisoners found guilty of this type of misconduct and what support is available for victims. Ask whether prisoners found guilty are subject to ongoing monitoring by staff. Ask what protections are in place for victims or those who report such incidents.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with the bullying inspector.*

**HMIP: Expectations**
Mothers and babies are provided with a safe, supportive and comfortable environment which prioritises the care and development of the child. Pregnant women receive appropriate support.

Expectations

1. **Mother and baby units (MBUs) provide a comfortable, safe and stimulating environment suitable to the ages and stages of development of the children.**

   **Evidence**
   - Observation
   - Staff: speak to visiting and on site experts such as nursery managers, health visitors, midwives etc.

   **References**
   - SMR 23
   - ICCPR 23(1)

2. **Mattresses, bedding, clothing and all other equipment are checked to ensure they are in appropriate condition.**

   **Evidence**
   - Observation
   - Documentation: review the policy and records of mattress replacement and laundry/washing facilities.

   **References**
   - SMR 14, 17, 19
   - SMR 23

3. **Care planning starts from the earliest knowledge of pregnancy or following the mother’s admission to custody. Initial planning meetings and review meetings are attended by the mother.**

   **Evidence**
   - Documentation: check records of meetings and subsequent plans for pregnant women on residential units as well as on the MBU.

   **References**
   - SMR 23
   - SMR 23
Section 3 – duty of care

4. Provision is made for co-parents to be involved in ante-natal care and preparation with their pregnant partners in prison.

Evidence
Observation

Documentation: check notices or other methods of informing prisoners within the establishment. Check the availability of women doctors.

Prisoners: ask groups

Staff: ask staff how this provision is managed.

Cross-reference with health services inspector

References
EPR 34(3)
SMR 23

5. Planning and review meetings focus on the child’s needs and how the mother can best be helped and supported to meet them. The mother’s sentence plan complements and supports the child’s care plan.

Evidence
Observation: if possible attend an admissions board.

Documentation: review the policy and records of prisoners and babies.

Prisoners: ask prisoners located on the mother and baby unit.

References
EPR 102 & 103
SMR 23

6. Mothers are able to exercise parental responsibility through informed choices.

Evidence
Observation

Documentation: review the policy and records of women prisoners and their babies. Check history sheets of women on the unit.

Prisoners: ask prisoners located on the mother and baby unit.

References
EPR 34(3)
SMR 23

7. Provision of care for the mother and baby is consistent with the standards and procedures provided in the community.

Evidence
Observation

Documentation: review the policy and local agreements with community services. Check attendance of external services in unit log book or gate book. Check the extent to which these professionals share relevant information with residential staff – in history sheets or

References
EPR 40
R 98(7) 10

HMIP: Expectations
Section 3 – duty of care

Mothers and babies

care plans. Records of prisoners and babies. Check for contingency plans for death of infant in custody.
Staff: contact staff from external providers and discuss partnership work and provision of services.
Prisoners: ask prisoners located on the mother and baby unit.

Cross-reference with health services inspector

8. There is a clear, effective and fair admissions policy. Women have access to easily understood information about the MBU, its statement of purpose and function and written procedures and documentation for application, admission and separation.

Evidence
Observation: if possible attend an admissions or review board.

References
EPR 13

Documentation: review the policy and records of prisoners and babies. Check length of time between application and admission and whether there is an appeals system. Check the MBU handbook is readily available.

Prisoners: ask prisoners located on the mother and baby unit. Ask prisoners in general if they were asked if they might need the mother and baby unit and if necessary whether they were offered relevant information.

9. Admission, review and separation policies and childcare and protection arrangements are agreed with the Local Safeguarding Children Board.

Evidence
Documentation: check policies and arrangements for pregnant women throughout the establishment.

References
EPR 87(1)

Staff: speak to child protection coordinator and other staff.

10. Mothers from black and minority ethnic backgrounds and with differing childcare traditions are supported and the facilities and decor reflect a multiracial and multicultural community.

Evidence
Observation

References
EPR 5

Documentation: review the unit’s policy in relation to diversity.

Prisoners: ask prisoners located on the mother and baby unit.

Cross-reference with race equality inspector

HMIP: Expectations
### Section 3 – duty of care

**Mothers and babies**

11. Children have opportunities to experience community activities and are prepared to leave the prison in accordance with their development needs and best interests.

**Evidence**

**Observation**

**Documentation:** review the unit’s policy and provision of community experiences for babies. Check mothers are encouraged to enable their children to have these opportunities. Check daily log to see the frequency of these events. Check that this is provided by extended family or other appropriate security cleared voluntary or statutory agencies.

**Prisoners:** ask prisoners located on the mother and baby unit.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPR 24(4 &amp; 5)</td>
<td>EPR 24(4 &amp; 5)</td>
</tr>
</tbody>
</table>

12. Visiting arrangements are as natural as possible for co-parents visiting their children, for grandparents and for the child’s own siblings.

**Evidence**

**Observation**

**Documentation:** review the unit’s policy in relation to visits including arrangements for co-parents who are in prison or living far from the prison.

**Prisoners:** ask prisoners located on the mother and baby unit.

*Cross-reference with contact with the outside world and resettlement inspectors*

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>EPR 34(1)</td>
<td>EPR 34(1)</td>
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</table>

13. Where a child is separated from its mother before the mother’s discharge date, the mother is fully supported both emotionally and practically in making the arrangements for separation.

**Evidence**

**Observation**

**Documentation:** review the unit’s policy in relation to separation and preparation records in individual case records.

**Prisoners:** ask prisoners located on the mother and baby unit and any who have moved off the unit after undergoing separation.

*HMIP: Expectations*
14. Childcare plans and support plans are provided for mothers whose applications for mother and baby places are unsuccessful to ensure proper contact between mother and child is maintained and the mother supported.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>EPR 87(1)</td>
</tr>
<tr>
<td>Documentation:</td>
<td></td>
</tr>
<tr>
<td>review the unit’s policy in relation to failed applications, separation at birth and ongoing contact for babies born prior to the mother arriving in prison, particularly with reference to nursing mothers.</td>
<td></td>
</tr>
</tbody>
</table>

| Prisoners:     |            |
| ask prisoners located on the mother and baby unit and any who have had failed applications. This should be checked in all women’s prisons as they may contain women who have had a failed application to another establishment. |

15. All staff working with children have undergone specific recognised training including child protection issues and infant resuscitation and have been subject to enhanced CRB checks.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>EPR 81(3)</td>
</tr>
<tr>
<td>Documentation:</td>
<td></td>
</tr>
<tr>
<td>review the establishment’s training record and which training packages are used. Check enhanced CRB checks have been completed for every member of staff who comes into contact with children.</td>
<td></td>
</tr>
</tbody>
</table>
Prisoners are encouraged to maintain contact with the outside world through regular access to mail, telephones and visits.

Expectations – mail

1. **Prisoners can send as many letters as they can afford and no restrictions are placed on the number of letters that can be received.**

   **Evidence**

   **Questionnaire**

   **Staff:** ask residential staff about wing policy.

   **Documentation:** check that foreign national prisoners can exchange two ordinary letters for one airmail letter and two airmail letters for one phone call. Check that free letters are available to prisoners, including specific children's letters to primary carers (particularly in women's establishments).

   **Prisoners:** speak to foreign national prisoners in particular about their understanding of their entitlements.

   Cross-reference with foreign nationals inspector

   **References**

   BOP 19

   SMR 37 & 79

   EPR 24 (1)

   PR 35

2. **Prisoners’ outgoing mail is posted within 24 hours (48 hours when received on Saturday) and incoming mail is received within 24 hours of arrival at the prison, including registered and recorded mail.**

   **Evidence**

   **Questionnaire**

   **Documentation:** check instructions to landing staff. Check how long it takes for credit to appear in prisoners’ accounts.

   **Staff:** speak to staff on wings about normal procedure, especially with regard to incoming parcels.

3. **Prisoners’ mail is only opened to check for unauthorised enclosures or to carry out legitimate or targeted censorship.**

   **Evidence**

   **Documentation:** check instructions to censors – 5% of mail should be randomly opened and read unless there is targeted searching

   **References**

   ICCPR 17

   ECHR 8

**HMIP: Expectations**
Section 3 – duty of care

Contact with the outside world: telephones

relating to specific incidents or prisoners.  
Staff: speak to censors, whether officers on wing or OSGs off the wing. Ask staff if they have received specific training in public/child protection and harassment issues in order to identify any threats/concerns including racist or other discriminatory language or threats.  

4. Legally privileged correspondence is not opened by staff.  

Evidence

Questionnaire
Prisoners: groups.  
Documentation: if legally privileged mail is opened by staff, check this is recorded systematically.  
Cross-reference with legal rights inspector

References

ICCPR 17  
BOP 18(3)  
PR 39  
ECtHR, Campbell v UK  
ECtHR, Demirtepe v France  
ECtHR, Labita v Italy  
ECtHR, Puzinas v Lithuania

Expectations – telephones

5. Prisoners have daily access to telephones and calls are charged at the cheapest possible national rates. Prisoners can conduct their phone calls in private.  

Evidence

Observation: check for use of phone hoods or booths. Check for any delays to the activation of telephone credit.  
Documentation: check documented access to telephones. Check that foreign national prisoners can spend a minimum of £10 over their IEP level on telephone credit. Check foreign national prisoners can buy the cheapest available international phone cards. Check lack of credit does not prevent primary carers from contacting their children.  
Prisoners: ask in groups, speak to foreign national prisoners.  
Cross-reference with residential units and foreign national inspectors

References

SMR 37  
EPR 24(1)

HMIP: Expectations
Section 3 – duty of care

Contact with the outside world: visits

6. There is at least one telephone per 20 prisoners on each wing. Telephones are located in quiet areas with effective privacy hoods.

Evidence

Questionnaire
Prisoners: ask groups or individuals if telephones are sufficiently private.
Observation: check all residential units. Check at least one telephone on each residential unit is suitable for use by a prisoner in a wheelchair and for any prisoner with hearing difficulties e.g. phones sited at lower level, use of text phones and evidence of loop systems.

References
BOP 15 & 19
SMR 37
BPRL 7 & 8
ECHR 8

Cross-reference with residential units inspector

7. There is a notice next to all telephones advising prisoners that their calls may be monitored.

Evidence

Observation: check phones on all residential units.
Staff: ask staff if they have received any specific training in public/child protection and harassment issues in order to identify any threats/concerns including racist language.

References
EPR 24(2)

Cross-reference with residential units inspector

Expectations – visits

8. Prisoners are able to receive their first visit within one week of admission and thereafter are able to receive at least one visit a week for a minimum of one hour. There is no upper limit set on the number of visits a remand prisoner is entitled to.

Evidence

Questionnaire
Documentation: check that prisoners are informed of their visits entitlement within 24 hours of arrival. Check visits schedule. Check that foreign nationals are able to exchange their visits entitlements for telephone calls – 1 x 10 min call per visit. Check whether prisoners on the basic level of IEP scheme get their legal requirement.
Staff: speak to visits staff.
Prisoners: speak to foreign national prisoners in particular.

References
BOP 19
SMR 37
EPR 24(1) & 24(4)

Cross-reference with first days in custody and foreign national inspectors

HMIP: Expectations
Section 3 – duty of care

Contact with the outside world: visits

9. Vulnerable prisoners who are voluntarily segregated are not disadvantaged in their access to visits.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check for separate visits accommodation or an efficient rota system, which gives the same access as for all other prisoners.</td>
<td>SMR 37 &amp; 79</td>
</tr>
<tr>
<td>Prisoners: interviews.</td>
<td>BOP 19</td>
</tr>
<tr>
<td></td>
<td>EPR 24(5)</td>
</tr>
</tbody>
</table>

10. Prisoners are not deprived of their entitlement to visits as a punishment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check with those on basic regime and in segregation.</td>
<td>ICCPR 17</td>
</tr>
<tr>
<td>Staff: speak to staff about policy on punishments.</td>
<td>ECHR 8</td>
</tr>
<tr>
<td>Cross-reference with IEP inspector</td>
<td>SMR 32(2) &amp; 57</td>
</tr>
<tr>
<td></td>
<td>EPR 60(4)</td>
</tr>
</tbody>
</table>

11. The visits booking system is accessible and able to deal with the number and needs of visitors. Visitors can book the next visit before the current visit ends.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check visits booked in advance during visits.</td>
<td>SMR 79</td>
</tr>
<tr>
<td>Observation: during or before inspection, call visits line to check accessibility.</td>
<td>EPR 24(1) &amp; (5)</td>
</tr>
<tr>
<td>Visitors: speak to visitors about their experiences.</td>
<td></td>
</tr>
</tbody>
</table>

12. Prisoners’ visitors are given information about how to get to the establishment, its visiting hours and details about what to expect when they arrive.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check the information that is distributed.</td>
<td>SMR 37 &amp; 79</td>
</tr>
<tr>
<td>Observation: check access for visitors with disabilities.</td>
<td>EPR 24(5)</td>
</tr>
<tr>
<td></td>
<td>PR 4(1)</td>
</tr>
</tbody>
</table>
13. If public transport stops some distance from the establishment, transport arrangements are in place for visitors to get to and from the prison.

**Evidence**
- Staff: ask about use of coach/mini-bus if appropriate.
- Observation: check transport is in operation and coincides with visits times.

**References**
- EPR 24(5)
- PR 4(1)

14. All procedures for prisoners and visitors are carried out efficiently before and after visits, to ensure that the visit is neither delayed nor curtailed.

**Evidence**
- Prisoners: ask in groups.
- Observation: check actual opening times of visits against the scheduled times. Ask visitors and check booking in procedures.

**References**
- BOP 19
- EPR 24(1) & (2)
- PR 4(1)

15. The searching of prisoners, visitors and their property is conducted in a religiously and culturally sensitive way. The searching of children is undertaken with particular sensitivity. Strip-searching of prisoners is carried out only for well-evidenced security reasons.

**Evidence**
- Observation: observe normal searching procedures, including that undertaken by drugs dogs. Check that a baby can be safely searched or left safely while their carer is searched.
- Staff: check specific training and culturally/religiously sensitive searching is available.
- Prisoners: ask in groups.

**References**
- BOP 19
- EPR 24(1) & 54
- SMR 27
- PR 4 (1) & 41(2) & (3)

16. If visitors have not arrived within 15 minutes of the start of the visit, visits staff try and find out why and inform the prisoner. Visitors arriving late are allowed to continue with their visit.

**Evidence**
- Staff: ask visits staff about procedures in relation to this.
- Prisoner: interviews if appropriate.

**References**
- BOP 19
- EPR 24(4 & 5)
- PR 4(1)
17. Closed and no-contact visits are authorised only when there is a significant risk justified by security intelligence. They are not used as a punishment and allocations to closed and no-contact visits are reviewed at least monthly.

**Evidence**

**Documentation:** check duration and reasons behind use of closed and no-contact visits. Check whether any allowance is made for child visitors e.g. open/supervised visit if children are involved. Check whether those on closed visits can access refreshments.

**Prisoners:** interviews.

**Cross-reference with security and rules and substance use inspectors**

**References**

SMR 27 & 57

EPR 24(2), 51(1)

& 60(4)

18. Prisoners can request a visit from a volunteer prison visitor who should be trained and well supported.

**Evidence**

**Documentation:** check formal system of applications, check on the use of prison visitors and the arrangements for foreign nationals who do not speak English.

**Staff:** ask about recent use of volunteer prison visitors.

**References**

BOP 19

EPR 24(1)

19. Visitors and prisoners are able to give staff feedback on the visit, suggest improvements and, if necessary, complain using an available complaints procedure.

**Evidence**

**Documentation:** check for evidence of feedback forms and that feedback is considered and acted upon appropriately by the prison.

**References**

BOP 33

SMR 36(1) & (3)

& 46(1) & 79

EPR 50 & 70(1, 3 & 5)

PR 11(1)
Section 3 – duty of care

Contact with the outside world: visits

20. A well-run and properly equipped visitors’ centre is available alongside the establishment and is open at least an hour before and an hour after advertised visiting times.

Evidence References

Observation: check that a range of relevant information is available to visitors in the visitors’ centre such as how to apply for assisted visits etc.
Staff: ask about normal procedure.

21. During, after and while waiting for visits, prisoners and visitors, whether with disabilities or able-bodied, have access to toilet facilities.

Evidence References

Observation
Staff: ask about normal procedure.

22. Visits areas are staffed, furnished and arranged to ensure easy contact between prisoners and their families or friends. Security arrangements in visits do not unnecessarily encroach upon privacy.

Evidence References

Observation: check levels of supervision are not excessive and general layout of visits area is appropriate. Furniture should be in a good condition. Check the suitability of the environment of the holding room used by prisoners. Check the visits area, including the search areas, are accessible to prisoners and visitors with disabilities e.g. check wheelchair access, including lifts and stair lifts, check acoustics and availability of induction loops.
Staff: check that visits staff know those prisoners subject to public/child protection and harassment procedures, and check how they would respond to any concerns.
Prisoners and visitors: ask if they have encountered any problems.
23. **Children are safe and can enjoy family visits in an environment that is sensitive to their needs.** A children's activity area is provided where children can be supervised by trained staff and where prisoners can play with their children.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check activity area is suitable and speak to staff.</td>
<td>ICCPR 23</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check for arrangements to ensure that Schedule one offenders and others subject to public protection measures do not come into contact with children during visits.</td>
<td>EPR 24(4)</td>
</tr>
<tr>
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<td>PR 4(1)</td>
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</table>

24. **Prisoners’ families can buy a range of refreshments during visits.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check snack machines/shop are sufficiently and appropriately stocked and in operation.</td>
<td>EPR 24(4)</td>
</tr>
</tbody>
</table>
Applications and complaints

Effective application and complaint procedures are in place, are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

Expectations

1. Information about applications and complaints is reinforced through notices and posters that are produced both in English and other languages and displayed across the establishment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>Observation: check for promotional posters in prominent places on all residential wings, including posters for the Ombudsman, and that foreign nationals, those with literacy problems and those with disabilities understand and are able to access these procedures. Some prisoners, e.g. foreign nationals, may need to be specifically told about the whole process of entitlements and rights. Check there is a single channel of contact or clear information on how to make an application or complaint about any agency working with prisoners, within NOMS or commissioned bodies.</td>
<td>SMR 35 EPR 30(1)</td>
</tr>
<tr>
<td>Documentation: check that the policies and procedures relating to applications and complaints have been impact assessed.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: check with prisoners that information on wings is always displayed and that they understand it. Check the procedures for blind prisoners.</td>
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</table>

Cross-reference with residential units inspector

2. Prisoners are encouraged to solve areas of dispute informally, before making official complaints.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: speak to personal officers, other wing staff and offender supervisor. Speak to personal officers and other wing staff about their role in dispute resolution.</td>
<td>EPR 56(2) &amp; 70(2)</td>
</tr>
<tr>
<td>Prisoners: ask in groups. Check for any wing representatives, consultative committees or prisoner surveys and whether prisoners know about them.</td>
<td></td>
</tr>
</tbody>
</table>
Section 3 – duty of care

Applications and complaints

3. Prisoners can easily and confidentially access and submit application and complaint forms.

Evidence

Observation: check that application forms are not required to access complaint forms. There should be forms, envelopes and at least one yellow box on each wing and the boxes should be emptied daily by a designated officer and dispensers kept stocked with forms. Files should be maintained on a limited access basis.

References

- BOP 33(3)
- SMR 36(1) & (2)
- EPR 70(1)

Questionnaire

4. Prisoners make use of the procedures and are not pressurised to withdraw any applications or complaints.

Evidence

Documentation: check number and outcome of application and complaint forms for the last six months. Check procedures for prisoners with learning or other disabilities.

References

- BOP 33(4)
- SMR 36(3)

Questionnaire

Prisoners: interviews or groups.

5. All applications and complaints, whether formal or informal, are dealt with fairly and responded to within three days, or 10 days in exceptional circumstances, with either a resolution or a comprehensive explanation of future action.

Evidence

Prisoners: in groups, ask whether requests/complaints are resolved and whether reasonable requests are responded to.

References

- BOP 33(4)
- SMR 36(4)

Questionnaire

Documentation: applications/complaints should be responded to within three working days, or within 10 days in exceptional circumstances. Forms should not be sent back to prisoners because of technicalities in procedure (complaints should be referred to the relevant member of staff, not back to the prisoner). Check target return times are published and that letters to the governor from third parties, such as legal representatives, family or voluntary organisations, are logged.

HMIP: Expectations
6. **Prisoners receive responses to their applications and complaints that are respectful, legible and address the issues raised. Formal applications are signed and dated by the respondent.**

**Evidence**

- Prisoners: case studies.

**References**

- SMR 36(4)

**Documentation**

- Check there is a quality assurance system in place.
- Check quality of responses, and that the member of staff who dealt with the complaint has clearly printed their name on the reply sheet.
- Check responses to confidential complaints are returned in sealed envelopes.

7. **Prisoners feel able to ask for help in completing their application or complaint and in copying relevant documentation.**

**Evidence**

- Prisoners: ask how responsive staff are to requests for help with applications.
- Staff: ask if translation services are provided for foreign nationals and what the arrangements are for prisoners with literacy problems and those who are blind.

**References**

- SMR 36(3)

8. **Any declaration of urgency by prisoners is fully assessed and responded to.**

**Evidence**

- Prisoners: ask how responsive staff are to requests for urgent help.
- Documentation: check if urgent requests are prioritised.

**References**

- SMR 36(4)
- BOP 33(4)

9. **Prisoners who make complaints against staff and/or other prisoners are protected from possible recrimination.**

**Evidence**

- Questionnaire
- Documentation: check any such recent complaints and follow up.

**References**

- BOP 33(4)
- EPR 70(4)

**Protection measures should be in place and put into practice. Check the response is objective and factual, and conclusions are based on evidence rather than supposition.**
Prisoners: ask about any adverse effects of complaint. Ask if prisoners know that there are protection measures if they complain about staff or other prisoners.

10. **Prisoners know how to appeal against decisions. Appeals are dealt with fairly and responded to within seven days.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BOP 33(1) &amp; (4)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check number of appeals, what the outcome was and how promptly they were responded to. Check prisoners are reminded to appeal against adjudications using the relevant form, and how many have been made in last six months.</td>
<td>EPR 70(4)</td>
</tr>
</tbody>
</table>

11. **All prisoners know how to contact members of the Independent Monitoring Board (IMB) and can do so in confidence.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 36(2)</td>
</tr>
<tr>
<td><strong>Observation:</strong> check wings for IMB contact information. Speak to IMB clerk to ascertain whether there are any difficulties with prisoner access to the IMB application system.</td>
<td>BOP 29(2)</td>
</tr>
</tbody>
</table>

12. **Prisoners receive help to pursue applications and grievances with the prison management, area/regional managers or other senior managers in headquarters, if they need to.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check for recent complaints that have gone to management within the establishment and beyond. Check for any examples of 'specialist' support being used e.g. probation workers, REO or social worker.</td>
<td>BOP 33(1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>SMR 36(3)</td>
</tr>
<tr>
<td></td>
<td>EPR 70</td>
</tr>
</tbody>
</table>
### Section 3 – duty of care

#### Applications and complaints

13. **All prisoners know how to apply to the Prison and Probation Ombudsman.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>EPR 70(1)</td>
</tr>
<tr>
<td>Observation: check wings for the Ombudman’s contact details and information.</td>
<td>BOP 33(1)</td>
</tr>
<tr>
<td>Prisoners: speak to prisoners.</td>
<td>SMR 36(3)</td>
</tr>
</tbody>
</table>

14. **Prisoners receive help to pursue grievances with external bodies if they need to. They also receive help in contacting legal advisers or making direct applications to the courts.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ICCPR 2(3)(a) &amp; 17</td>
</tr>
<tr>
<td>Documentation: check with Ombudsman and IMB how many complaints they receive each month, what they tend to be about and what proportion they can resolve. Check access to external bodies such as escorts, MPs and Information Commissioners Office.</td>
<td>BOP 17, 18 &amp; 33(1)</td>
</tr>
<tr>
<td>Prisoners: follow up cases.</td>
<td>SMR 36(3)</td>
</tr>
<tr>
<td></td>
<td>ECHR 6</td>
</tr>
<tr>
<td></td>
<td>ECtHR, Niedbala v Poland</td>
</tr>
<tr>
<td></td>
<td>ECtHR, Cotlet v Romania</td>
</tr>
</tbody>
</table>

15. **Prison managers analyse complaints (both upheld and refused) each month, by ethnicity, disability, wing, prisoner type etc, and if necessary make any appropriate changes.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check to see whether the data is further interrogated and if action is taken when strong patterns/trends emerge.</td>
<td>EPR 72</td>
</tr>
</tbody>
</table>

*Cross-reference with race equality inspector*
Legal rights

Prisoners are told about their legal rights during induction, and can freely exercise these rights while in prison.

Expectations

1. **Staff are proactive in enabling prisoners to pursue their legal rights, and no formal or informal sanctions operate to deter prisoners from doing so.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BOP 13 &amp; 17</td>
</tr>
<tr>
<td>Prisoners: groups.</td>
<td>SMR 35 &amp; 93</td>
</tr>
<tr>
<td><strong>Documentation:</strong> find out how many staff are trained in legal services/acting as foreign national coordinators, and if there is any refresher training. Also find out if these staff are regularly redeployed to other duties, and any evidence of a backlog of cases that has arisen as a result.</td>
<td>EPR 23, 98</td>
</tr>
<tr>
<td>Cross-reference with foreign nationals inspector</td>
<td></td>
</tr>
</tbody>
</table>

2. **All prisoners can readily access effective advice from trained legal services staff and are referred to specialist practitioners if necessary. Available advice or referral schemes should include:**

   - bail for unsentenced prisoners
   - the Criminal Cases Review Commission
   - immigration status for foreign nationals at risk of deportation/removal
   - confiscation orders and civil penalties

<table>
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<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BOP 13, 17 &amp; 39</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check how many hours bail information and legal aid officers spend on these duties.</td>
<td>BPRL 5</td>
</tr>
<tr>
<td>Prisoners: speak to remand prisoners about the level of service they receive.</td>
<td>EPR 23, 98</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to bail information and legal aid officers.</td>
<td>SMR 93</td>
</tr>
<tr>
<td>Cross-reference with foreign nationals inspector</td>
<td></td>
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</tbody>
</table>
### Section 3 – duty of care

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>3.</strong> Prisoners understand their sentence, including the opportunities and terms of early release, and the consequences of breach of licence. Recalled prisoners are quickly identified, and promptly receive documented explanation about reasons for recall, their right to make representations or appeal and the possibility of an oral hearing.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check how many hours are spent on these duties. Check that recall dossiers for recalled prisoners arrive promptly and the information they contain is accurate. <strong>Prisoners:</strong> speak to prisoners, especially those recalled, about the level of service and information they receive. Check prisoners have a good understanding of what they have been told. <strong>Staff:</strong> speak to staff.</td>
<td></td>
</tr>
<tr>
<td>EPR 30(3)</td>
<td></td>
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</table>

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<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>4.</strong> Any prisoner requiring help with reading/writing legal correspondence is offered help.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners in groups – especially foreign nationals. <strong>Staff:</strong> ask about literacy levels, and foreign nationals, in prison intake and normal procedure. <strong>Cross-reference with foreign nationals inspector</strong></td>
<td></td>
</tr>
<tr>
<td>BOP 5, 14, 17 &amp; 18</td>
<td></td>
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</table>

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<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>5.</strong> Prisoners are provided with verbal and written information about child care proceedings and how to access advice services in relation to their parental rights and children’s welfare.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check notice boards and information given to prisoners. Check availability of information and its quality and relevance. Check if there is a family support worker.</td>
<td></td>
</tr>
<tr>
<td>EPR 23</td>
<td></td>
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</tbody>
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<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>6.</strong> Prisoners who choose to represent themselves in court are given extra stamps and writing materials free of charge as required in pursuing their case.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about normal procedure. <strong>Prisoners:</strong> in groups, ask if establishment allows access to computers to pursue their case, and if they have access to the internet.</td>
<td></td>
</tr>
<tr>
<td>SMR 93, EPR 23, 98(2)</td>
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</table>

HMIP: Expectations
Section 3 – duty of care

7. Private legal visits are permitted, and suitable facilities to accommodate these are provided.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check facilities for private visits.</td>
<td>BOP 18</td>
</tr>
<tr>
<td><strong>Documentation</strong></td>
<td>SMR 93</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners using video facilities, on laptops, if they understand the process and have the opportunity to talk to their legal representative in private.</td>
<td>BPRL 8</td>
</tr>
</tbody>
</table>

*Cross-reference with contact with outside world inspector*

8. Prisoners subject to licence conditions on release have the requirements of the licence explained to them and have an opportunity to discuss their rights and responsibilities prior to release.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> interviews if appropriate.</td>
<td>BPTP 1</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about routine procedure and check records.</td>
<td>EPR 107(3)</td>
</tr>
</tbody>
</table>
Prisoners with substance-related needs, including alcohol, are identified at reception and receive effective treatment and support throughout their stay in custody. All prisoners are safe from exposure to and the effects of substance use while in prison.

Expectations – clinical management

1. **Substance dependent prisoners are provided with first night symptomatic relief following screening and testing. Subject to confirmation, existing prescribing regimes are continued or an equivalent provided.**

   Evidence
   - **Documentation:** check clinical protocols and procedures, staff training record.
   - **Prisoners:** interviews.
   - **Staff:** interviews.

   References
   - SMR 24
   - EPR 42(1 & 3d)

   Cross-reference with health services inspector

2. **Specialist staff complete a comprehensive assessment the day after a prisoner’s arrival to determine a suitable stabilisation, maintenance, or detoxification programme.**

   Evidence
   - **Documentation:** check clinical protocols and procedures, staff training record.
   - **Prisoners:** interviews.
   - **Staff:** interviews.

   References
   - SMR 24
   - EPR 42(3d)

   Cross-reference with health services inspector

3. **Prescribing regimes are flexible, conform to national clinical guidelines, adequately meet the needs of substance dependent prisoners, and are provided by specialist staff in a safe environment.**

   Evidence
   - **Documentation:** check prescribing policy and protocols, medical records (checked by health services inspector), guidelines

   References
   - R98(7), I.B.10
   - R98(7), I.D.19

HMIP: Expectations
Section 3 – duty of care

Substance use: clinical management

for in-patient admission.  
**Observation:** location of detox unit/wing.  
**Staff:** interviews.  
**Prisoners:** check availability of specialist clinical input/advice.  
*Cross-reference with health services inspector*

4. Specialist dual diagnosis services are provided for prisoners who experience both mental health and substance-related problems.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check accessibility/waiting lists/referral criteria of mental health team.  
**Prisoners:** interviews.  
**Staff:** interview service providers.  
*Cross-reference with health services inspector* | EPR 40(5) & 47(2) |

5. There is appropriate treatment and support for pregnant women with substance dependency.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check policy and practice, review relevant health services records.  
**Prisoners:** ask groups. | SMR 23(1)  
EPR 34(1) |

6. Prisoners receive effective support during and post-clinical intervention. Clinical treatment is integrated with psycho-social interventions.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check regime and programme details, joint care planning protocols.  
**Observation**  
**Prisoners:** interviews.  
**Staff:** interviews. | R98(7), III.B. 43, 44 & 47  
EPR 40(5) |
Section 3 – duty of care  Substance use: drug testing

7. **Prisoners are informed about blood-borne viruses and other problems that may arise from substance use, and are given access to specialist services.**

   **Evidence**

   **Observation:** availability of clinics and specialist staff.  
   *Cross-reference with health services inspector*

   **References**

   R98(7), II.27, 28, 42

8. **A range of effective alcohol, drug and tobacco avoidance strategies are in operation.**

   **Evidence**

   **Observation:** drug and alcohol awareness courses, smoking cessation programmes and nicotine replacement.  
   **Prisoners:** interviews.  
   **Staff:** interviews.

   **References**

   R98(7), II.B. 27, 29 & 44

**Expectations – drug testing**

9. **Mandatory drug testing (MDT) is clearly separated from VDT, conducted consistently in line with protocols which ensure the fairness and validity of procedures, and takes place in a suitable environment. Target testing is based on evidence. Prisoners testing positive are referred to the CARAT service.**

   **Evidence**

   **Documentation:** check protocols, level of testing and results, CARAT referrals.  
   **Observation:** MDT suite.  
   **Prisoners:** interviews.  
   **Staff:** interviews with MDT officers.

   **References**

   R98(7), I.C.14
Section 3 – duty of care

Substance use: drug testing

10. Effective intelligence and security measures are in place to guard against the trafficking of drugs or alcohol.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check rate of MDT positives, SIRs, searching strategy, finds, number of closed visits/banned visitors.</td>
<td>SMR 27</td>
</tr>
<tr>
<td><strong>Observation:</strong> visits arrangements, use of intelligence (inc. use of dogs).</td>
<td>EPR 49</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> interviews.</td>
<td></td>
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</tbody>
</table>

Cross-reference with security and contact with outside world inspectors
Prisoners should be cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive in the community.

Expectations – general

1. **Health services are informed by the assessed needs of the prison population and is planned, provided and quality assured through integrated working between the prison and its local health economy.**

   **Evidence**
   - Staff: prison staff, primary care trusts, prison leads in strategic health authorities, social care services, other health providers.
   - Documentation: check prison health development plan, PCT commissioning plan, prison health steering group meeting minutes, clinical governance meeting minutes, anonymised reports to SMT, REAT etc about use of services, referral patterns etc.

   **References**
   - R98(7), I.B.10
   - EPR 40(1, 2, 3)
   - SMR 21(1)
   - SFBH D5a, D11, C22a, C22b, C22c
   - HSfW 1, 2, 3, 25

2. **The joint working arrangements between the prison and the relevant primary care trust take account of and adhere to Department of Health quality and regulatory frameworks.**

   **Evidence**
   - Documentation: joint policies, SLA. Check for recent joint training and involvement in areas such as self-harm and suicide, substance use and admissions procedures. Assessment for social care needs, NSFs.
   - Staff: health services managers. Check staff are aware of NSFs and that they being used.

   **References**
   - R98(7), I.B.10
   - EPR 40(1, 2, 3)
   - SFBH C1a, C2, D5a
   - HSfW 14, 12
   - SMR 22(1)

3. **All prisoners have equity of access to health services.**

   **Evidence**
   - Observation
   - Prisoners: speak to prisoners.

   **References**
   - SFBH D11, C18
   - HSfW 4, 6, 10

HMIP: Expectations
## Section 4 – health services

### General

**Documentation:** Check monitoring of prisoners who have had appointments with all health services professionals and analyse by ethnicity, status, age, wing or foreign national groups etc. Any disproportionate imbalances should be investigated. *Cross-reference with race equality inspector*

### 4. Patients are cared for in conditions that are accessible to all and that maintain decency, privacy and dignity.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>SfBH C18, C20a, C20b, D12a, HSfW 6, 7, 8, ECHR 3, EPR 72(1) R 98(7), I.B.10, 11, 12</td>
</tr>
<tr>
<td>Prisoners: speak to prisoners.</td>
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</table>

### 5. The decoration and cleanliness of all rooms used for health services are consistent with the promotion of health and well being and have appropriate infection control facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: cleaning schedules.</td>
<td>R98(7), I.B10, 11 &amp; 12, SMR 22(2)</td>
</tr>
<tr>
<td>Prisoners: health services wing cleaners.</td>
<td>SfBH, C4a, C21</td>
</tr>
<tr>
<td>Staff: wing cleaning officer.</td>
<td>HSfW 5</td>
</tr>
<tr>
<td>Documentation: infection control policy.</td>
<td>EPR 19(1) &amp; 44b</td>
</tr>
</tbody>
</table>

### 6. Services promote well being and meet the health and social care needs of the population.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check current health needs assessment, prison health development plan and health promotion documentation.</td>
<td>R98(7), I.D.19, BOP 5, SfBH D11, HSfW 29</td>
</tr>
</tbody>
</table>
Section 4 – health services

7. Patients are treated with respect in a professional and caring manner that is sensitive to their diverse needs.

**Evidence**
- **Observation:** e.g. appropriateness of language/setting.
- **Staff:** health services managers, PCT staff, health services staff.
  - Check staff are aware of the range of black and minority ethnic groups, foreign nationals, older and disabled prisoners, and potential specific medical and social care needs of these groups.
- **Prisoners:** interviews.

**References**
- BOP 1 & 5(1)
- EPR 1, 13 & 72(1)
- SFBH D2b, D11, C13a
- HSfW 1, 2, 6, 8, 10
- PME 1

8. Each health services centre has a lead nurse or manager, with sufficient seniority and knowledge, who has responsibility for the overall care of older prisoners (all adult establishments).

**Evidence**
- **Staff:** ask individuals about their responsibilities. Check staff are aware of their responsibilities as set out in the NSF for Older People.
- **Documentation:** check policy documents and commissioning arrangements. Check older people are specifically mentioned.

**References**
- HSfW 11, 12
- R 98(7), III.C.50
- BOP 5(2)
- EPR 39

9. Prisoners are given information about prison health services, in a format they are able to understand, which explains how to access services.

**Evidence**
- **Documentation**
- **Prisoners:** check how prisoners who are unable to read English or have problems with literacy are made aware of services.

**References**
- R98(7), II.B.26
- SMR 35(1)
- SFBH C16
- HSfW 6

10. Patients are involved and consulted when planning their own care and treatment.

**Evidence**
- **Observation**
- **Documentation:** check if there are consent forms, compacts etc., check for impact assessment, health surveys, individual health action plans (for prisoners with learning disabilities).

**References**
- R98(7), I.C.14
- AA IV
- SFBH C13b, D9a, D9b, D10

HMIP: Expectations
Prisoners: check if there are prisoner/patient forums. Ask for evidence of patient participation/involvement in care planning.

Valuing People – DoH guidance HSfW 7

11. Patients receive health services that are not unnecessarily restricted by security procedures.

Evidence

Staff: see whether any appointments (internal and/or external) have been cancelled for security reasons in the last three months.

References

EPR 3, 40(3)

Observation

Prisoners: speak to prisoners

Cross-reference with security and rules inspector

Expectations – clinical governance

12. Clinical governance arrangements are in place, which include the management and accountability of staff.

Evidence

Documentation: check senior management team reports, minutes of clinical governance meetings, serious untoward incident (SUI) policy, evidence of serious untoward incident/critical incident investigations, evidence of PCT involvement in SUIs and deaths in custody, reviews, reports etc.

Staff: all staff have job descriptions, which are subject to appraisal and attend regular meetings to discuss clinical and organisational issues.

References

R98(7), I.D.21
EPR 41(1–3)
SfBH C7, D3, D4, D5b
HSfW 27, 28

13. Staffing levels and skills mix include appropriately trained medical, nursing, reception, administrative, discipline and other ancillary or specialist staff to reflect prisoners’ needs.

Evidence

Observation

R98(7), I.A.2 & I.B.11
SMR 22(1)
SfBH C11a

Documentation: staff profiles, professional registration details, ‘detail’/SPARs, training needs analysis, skill mix reviews, use of prison health toolkit.

Staff: skills mix of staff is sufficient to cover all prisoners held

HSfW 22, 24

HMIP: Expectations
Section 4 – health services

Clinical governance

including older prisoners, black and minority ethnic groups, foreign nationals, those with physical or mental health problems or learning disabilities. Discipline staff are detailed to health services to support health services staff.

14. Patients are treated by staff who receive on-going training, supervision and support to maintain their professional registration and continue their professional development.

Evidence References

<table>
<thead>
<tr>
<th>Documentation</th>
<th>R98(7), II.D.33, 34 &amp; 35</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: check training records, arrangements for clinical supervision.</td>
<td>SMR 47(3)</td>
</tr>
<tr>
<td>Ensure CPD includes relevant training for population – e.g. emergency childbirth in women’s establishments; aetiology of sickle cell disease in prisons with BME prisoners etc.</td>
<td>EPR 41(4)</td>
</tr>
<tr>
<td>Staff:</td>
<td>SfBH C5c, C10a, C10b, C11b, C11c</td>
</tr>
<tr>
<td>Staff:</td>
<td>HSfW 22, 24, 28</td>
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</table>

15. Training is undertaken by all health services staff who work with older prisoners, including how to recognise the signs of mental health problems and how to identify social care needs.

Evidence References

<table>
<thead>
<tr>
<th>Evidence</th>
<th>R 98(7), II.D.35 &amp; III.C.50</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: ask staff.</td>
<td></td>
</tr>
<tr>
<td>Documentation: check training records, dementia screening, depression screening.</td>
<td></td>
</tr>
</tbody>
</table>

16. Patient safety during clinical activity that requires specialist equipment meets standards laid down by regulatory bodies. All equipment (including resuscitation kit) is regularly checked and maintained and staff understand how to access and use it effectively.

Evidence References

<table>
<thead>
<tr>
<th>Evidence</th>
<th>R98(7), I.B.10 &amp;11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check equipment, including availability of an automated external defibrillator. Check an emergency childbirth kit is available in all prisons that hold women.</td>
<td>SMR 22(2)</td>
</tr>
<tr>
<td>Documentation: equipment logs, registers, training registers, medical equipment alerts.</td>
<td>SfBH C1b C4b, C4c</td>
</tr>
<tr>
<td>Staff: check they are aware of the location of the equipment.</td>
<td>HSfW 19, 14</td>
</tr>
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<td></td>
<td>EPR 40(5)</td>
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</tbody>
</table>
Section 4 – health services

17. There are formal arrangements with local health and social care agencies for the loan of occupational therapy equipment and specialist nursing advice to ensure that patients and prisoners are able to access mobility and health aids.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about what aids they have. Look in cells.</td>
<td>R98(7), I.B.10, 11 &amp; 12</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check SLA with outside agencies includes the provision of OT equipment and aids. Commissioning arrangements – reference to OT services, training records.</td>
<td>SMR 22(2)</td>
</tr>
<tr>
<td><strong>Observation:</strong> of equipment e.g. hoist, aids to daily living.</td>
<td>HSfW 7, 12, 24</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff at all grades.</td>
<td>EPR 40(5)</td>
</tr>
</tbody>
</table>

Cross-reference with residential units inspector

18. Every prisoner has a clinical record containing an up-to-date and comprehensive assessment and care plan (if required), including health and social care history, which conforms to professional guidance from the regulatory bodies.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that a sample of clinical records from the previous six months and inpatient care plans include a record of problems, diagnoses, investigations, treatment and referral letters.</td>
<td>BOP 26</td>
</tr>
<tr>
<td></td>
<td>SfBH C9</td>
</tr>
<tr>
<td></td>
<td>HSfW 7, 26</td>
</tr>
<tr>
<td></td>
<td>EPR 42(3)</td>
</tr>
</tbody>
</table>

19. All clinical records (including dental and pharmacy) are kept securely in accordance with Data Protection and the Caldicott principles. Access is limited to those with a demonstrable need to know.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check the storage area.</td>
<td>R98(7), I.C.13</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to health services manager.</td>
<td>OA 4</td>
</tr>
<tr>
<td></td>
<td>SfBH C9</td>
</tr>
<tr>
<td></td>
<td>HSfW 8, 25, 26</td>
</tr>
<tr>
<td></td>
<td>CP 4</td>
</tr>
<tr>
<td></td>
<td>BOP 26</td>
</tr>
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<td></td>
<td>EPR 42(3a)</td>
</tr>
</tbody>
</table>

HMIP: Expectations
20. Clinical records of prisoners who have left the prison should be stored in accordance with Data Protection and the Caldicott principles, in a way that enables retrieval and amalgamation with a current clinical record if the prisoner returns.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: ask how these records are stored.</td>
<td>R98(7), I.C.18</td>
</tr>
<tr>
<td>Observation: of the storage areas.</td>
<td>BOP 26, SfBH C9, HSIW 20</td>
</tr>
</tbody>
</table>

21. There is evidence of treatment plans for patients which reflect national clinical guidance, such as that provided by NICE, NSFs etc. Such treatment plans are subject to clinical audit.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: local protocols show reference to evidence-based practice. Check clinical records.</td>
<td>SfBH C3, C5a, C5d, D2a, D2d</td>
</tr>
<tr>
<td>Staff: speak to doctors, staff, pharmacists etc and assess awareness of national guidelines etc.</td>
<td>HSIW 11, 12, 28, EPR 40(1), R 98(7), I.B.10</td>
</tr>
</tbody>
</table>

22. There is a patient forum that is representative of the current prison population.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: prison population statistics, minutes/notes of meetings.</td>
<td>C17, D8, D11</td>
</tr>
<tr>
<td>Observation</td>
<td>HSIW 1, 2</td>
</tr>
<tr>
<td>Prisoners: speak to prisoners.</td>
<td>EPR 70(1), AA IV</td>
</tr>
</tbody>
</table>

23. Prisoners know how to comment/complain about their care and treatment. They are not discouraged from doing so and are supported to do so when necessary.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check requests and complaints received by health services during last three months and any letters and responses. Check information on how to complain is available in the department. Complaints about clinical care linked to NHS complaints system. Prisoners: groups.</td>
<td>AA IV, EPR 70(1) &amp; (4), PR 11, SfBH C14a &amp; b, HSIW 15</td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 4 – health services

24. Systems are in place for prevention of communicable diseases. In the event of an outbreak of a communicable disease, the response is prompt and effective, in liaison with local NHS services, including the identification and tracing of contacts.

Evidence

Documentation: check policy document.
Staff: should be aware of the policy and know the named point of contact at the PCT.

References

R98(7), I.B.10 & III.A.41, 42
SfBH D12b, D13c
HSfW 30, 31
EPR 40(2)

25. Confidentiality is interpreted in the best interests of the patient and the requirements of public protection.

Evidence

Documentation: protocols that reflect current statutory and professional requirements.
Staff: health services staff are aware of the protocols (if in existence) and are aware of their responsibilities.
Observation

References

R98(7), I.C.13
EPR 42(3a)
SfBH C13c
HSfW 14, 17, 27

26. Information sharing protocols exist with appropriate agencies to ensure efficient sharing of relevant health and social care information.

Evidence

Documentation: protocols with local health and social care communities, protocol with discipline staff, health services staff and others. Ensure protocols cater for prisoners at risk.
Staff: check understanding of protocols with discipline staff.

References

SfBH C13c
HSfW 25
R 98(7), I.B.7
EPR 40(2)

Expectations – primary care

27. During reception, immediate health and social care needs such as stabilisation or detoxification of those with substance misuse withdrawal needs, mental health problems, disability or ongoing treatment or care are identified, documented and responded to promptly and effectively using a reception screening tool.

HMIP: Expectations
Section 4 – health services

Evidence

**Documentation**: check clinical records. Check that ethnicity is recorded at reception.

**Observation**: of the reception procedure.

**Prisoners**

*Cross-reference with first days in custody and substance use inspectors*

Evidence References

- R98(7), I.A.1
- SMR 24
- EPR 42(1 & 3)
- SfBH C 19
- HSW 8, 11, 26

28. Following reception screening, a further health assessment is carried out and recorded by trained staff no later than 72 hours after the prisoner’s arrival in custody.

Evidence

**Documentation**: check clinical records include an assessment of any mental health needs, social care needs and drug withdrawal.

**Observation**: of the process. Check how long each interview lasts and quality of assessment. Potential self-harm or suicidal behaviour should be assessed and other specialists i.e. drugs counsellors, social workers or probation officers should also be contacted where risk is identified. Check that medication being used is noted and followed up.

**Staff**: ask about procedures in reception.

*Cross-reference with first days in custody inspector*

Evidence

**Documentation**: check details of contract/SLA.

**Staff**

*Cross-reference with applications and complaints inspector*

Evidence References

- R98(7), I.A.1
- BOP 24
- SMR 24
- EPR 42(1)
- EPR 41(2)
- SfBH C 6
- HSW 2, 3

30. All prisoners (including those in high risk groups) receive information about health promotion (including oral health) and the control of communicable disease. They also have access to disease prevention programmes and screening programmes that mirror national and local campaigns.

HMIP: Expectations
### Section 4 – health services

**Primary care**

#### Evidence

**Documentation**: check range of information available and its relevance.

**Observation**: visible information and leaflets and evidence of and uptake of e.g. well person clinics, genito urinary medicine services, smoking cessation, hepatitis B immunisation clinics, mammography, cervical screening, oral health promotion, oral cancer screening. 

Check how clinics (especially for high risk groups) are actively promoted.

**Staff**: check availability of clinics.

**Prisoners**: speak to prisoners.

#### References

R98(7), II.B. 26 – 29  
SfBH C23  
HSfW 30

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31. **Barrier protection is freely available to all prisoners.**

#### Evidence

**Documentation**: check if there is a policy reference to the issuing of barrier protection.

**Observation**: see if availability of barrier protection is advertised.

**Staff**: speak to health services staff to see what the working practice is.

**Prisoners**: ask if condoms or dental dams and water-based lubricants are easily accessible, and on an anonymous basis.

#### References

R 98(7), III.A.36

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32. **The prisoner’s GP and any relevant care agencies are contacted at the beginning of custody, with the prisoner’s consent, to provide relevant information to ensure continuity of care.**

#### Evidence

**Documentation**: clinical records.

**Prisoners**: speak to those newly arrived.

*Cross-reference with first days in custody and resettlement inspectors*

#### References

HSfW 8, 25  
EPR 40(2), 83b, 87(1)

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33. **The amount and range of primary care services provided reflects the needs of the prison population.**

#### Evidence

**Documentation**: check clinic timetables, registers of long-term conditions etc., practice leaflets.

**Observation**: surgeries, practice nurse appointments, nurse-led chronic disease management clinics and ancillary service provision such as opticians, physiotherapists, podiatrists, dentists and pharmacists.

**Staff**: speak with administrative staff, visiting staff and health services managers.

#### References

R98(7), I.B.10, 11  
SMR 22  
HSfW 1, 2, 29  
EPR 40(5)

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HMIP: **Expectations**
34. Appropriately trained nurses undertake triage and prisoners’ care is supervised by a qualified nurse.

**Evidence**

- **Documentation**: check nurses’ qualifications, training records, triage protocols/algorithms.
- **Observation**: check nursing supervision.
- **Staff**: ask staff.

**References**

- R98(7), I.B.11 & I.D.21
- EPR 41(4)
- SFBH C5b
- H5FW 11, 22

35. An effective appointment system is in operation, which ensures that consultations take place at times that allow enough patient contact time.

**Evidence**

- **Documentation**: check appointments book or equivalent over last six months and length of waiting lists. Ensure that appointments are not missed because prisoners are not able to get there on time.

**References**

- R98(7), I.B.10
- EPR 43(3)
- PR 20(1) & (2)

**Prisoners**: ask in groups.

36. Women prisoners can see a woman doctor.

**Evidence**

- **Prisoners**: ask prisoners.
- **Staff**: ask staff.

**References**

- BOP 5(2)

37. Ante natal services equivalent to those provided in the community are available for pregnant women.

**Evidence**

- **Observation**: midwifery clinics.
- **Documentation**: shared care arrangements.
- **Staff**: speak to staff.

**References**

- BOP 5(2)
- EPR 34(3)
- SMR 23(1)
38. **Effective systems, including regular review, in line with good practice, are in place for the management of patients with long-term conditions.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> ‘chronic disease registers’, clinical records of patients with known long term conditions.</td>
<td>R98(7), I.B.10</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to administrative staff, nurses, management.</td>
<td>EPR 46</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to administrative staff, nurses, management.</td>
<td>SfBH C23</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to administrative staff, nurses, management.</td>
<td>HSfW 7, 11, 12</td>
</tr>
</tbody>
</table>

39. **Health services staff provide a community-based service on the wings for prisoners with long-term physical or mental health conditions which supports and promotes their independence.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to discipline staff and health services staff.</td>
<td>R 98(7), I.A.7</td>
</tr>
<tr>
<td><strong>Observation:</strong> of how frequently health services staff visit wings.</td>
<td>EPR 40(2), 46</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> any on wings with physical or mental conditions.</td>
<td>SMR 22(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> clinical records, wing history sheets.</td>
<td></td>
</tr>
</tbody>
</table>

40. **Stable long-term medical and physical conditions, such as insulin-dependent diabetes or epilepsy, do not prevent prisoners from being transferred.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong></td>
<td>BOP 5(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> including OCA staff.</td>
<td></td>
</tr>
</tbody>
</table>

41. **Prisoners who require it are given help with continence needs.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> aids and equipment held in stock.</td>
<td>EPR 44b</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners.</td>
<td>BOP 11</td>
</tr>
<tr>
<td><strong>Documentation:</strong> clinical records/care plans.</td>
<td>R 98(7), I.B.11</td>
</tr>
</tbody>
</table>
42. **Practitioners complete prisoners’ clinical reports on time so their release from prison is not delayed.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check a random selection of medical reports and records over last six months to ensure no delays have occurred.</td>
<td>R98(7), I.D.19</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff about the completion of clinical records and potential for delays.</td>
<td>EPR 33(1)</td>
</tr>
</tbody>
</table>

43. **Discharge letters outlining care and treatment are provided for all prisoners.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check clinical records including evidence of relevant social care needs.</td>
<td>EPR 42(3h &amp; j)</td>
</tr>
<tr>
<td><strong>Staff:</strong> check details of information provided.</td>
<td>SBH C6</td>
</tr>
<tr>
<td><strong>Observation</strong></td>
<td>HSW 12</td>
</tr>
<tr>
<td><em>Cross-reference with resettlement inspector</em></td>
<td></td>
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</tbody>
</table>

**Expectations – pharmacy**

44. **All prisoners receive a pharmacy service equivalent to that in the community, which includes direct access to advice by appropriately trained pharmacy staff, information about the benefits and risks of medications, and the self-administration of medication.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>R98(7), I.B.10</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check SLA.</td>
<td>EPR 40(1)</td>
</tr>
<tr>
<td><strong>Observation:</strong> observe pharmacy/dispensing arrangements.</td>
<td>DoH SBH C16, C18</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check arrangements for prisoners who are unable to attend the health services department – e.g. those in segregation, prisoners with disabilities, older prisoners. See whether most medications are given in possession. Check whether there is a suitable risk assessment for in-possession medications.</td>
<td>HSW 19</td>
</tr>
</tbody>
</table>
Section 4 – health services  

45. Prisoners prescribed long-term medications receive them without gaps or delays including when going to court or when transferring from one prison to another.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check prescription charts.</td>
<td>HSfW 7</td>
</tr>
<tr>
<td>Prisoners: speak to prisoners receiving long-term medications.</td>
<td>EPR 40(3)</td>
</tr>
<tr>
<td>Cross-reference with courts and escorts inspector</td>
<td></td>
</tr>
</tbody>
</table>

46. A medicines and therapeutic committee with PCT involvement ensures accurate, evidence-based prescribing and agrees protocols, including disease management guidelines, ‘special sick’ policies and a local formulary for the administration of medicines either by health services staff or when prisoners self medicate.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check minutes of meetings from last three months, policies, local formulary etc. Check arrangements for implementing NICE guidelines.</td>
<td>R98(7), I.B.10</td>
</tr>
<tr>
<td>Staff: health services managers and pharmacist. Check security and the SASH coordinator are represented.</td>
<td>EPR 40(1 &amp; 2)</td>
</tr>
<tr>
<td>Prisoners: ask if they are able to have in-possession medications.</td>
<td>DoH SfBH C4 (d)</td>
</tr>
</tbody>
</table>

47. Systems are in place to ensure that medicines are handled safely and securely. There is safe pharmaceutical stock management and use.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check arrangements for storage, check for appropriately labelled stock, arrangements for stock rotation, disposal of unwanted medications.</td>
<td>EPR 39</td>
</tr>
<tr>
<td>Staff: ask staff about procedure for dispensing stock.</td>
<td>DoH SfBH C4 (d)</td>
</tr>
<tr>
<td>C4 (e)</td>
<td></td>
</tr>
<tr>
<td>HSfW 19</td>
<td></td>
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</table>

48. The prison has a system to collect quality aggregated prescribing data to inform effective medicines management and clinical governance, and to demonstrate value for money.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check for procedures regarding data for the prescribing of medicine. Check M&amp;TC receives aggregated prescribing data.</td>
<td>HSfW 25, 27</td>
</tr>
<tr>
<td>Staff: speak to pharmacist.</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 4 – health services

Expectations – dentistry

49. Prisoners receive oral health promotion, dental checks and treatment at least to a standard and range equal to that in the NHS.

Evidence

- Questionnaire
- Documentation: check dental records and dental waiting lists over last six months.
- Staff: speak to health services manager, dentist and any PCDs (professionals complementary to dentistry).

References

- R98(7), I.A.6 & I.B.10
- EPR 41(5)

50. Prisoners’ dental health services, including the safety of the practising environment and quality of care are assured by independent inspection and monitoring under the same arrangements used by the PCT for other dentists in primary dental care.

Evidence

- Documentation: check record of dentist’s qualifications and most recent audit reports/evaluation and any other documentation relating to clinical governance issues, including copies of any recent inspection by another body.
- Staff: speak to dentist and health services manager. Discuss liaison with PCT and dental practice adviser.

References

- R98(7), I.B.10
- EPR 41(5)

51. Out of hours and emergency dental cover is well organised, responsive and effective.

Evidence

- Documentation: check details of contract/SLA - ensure the cover is already established, well-arranged, well-structured and coordinated. Check cost-effectiveness.
- Staff: speak to dentist and health services manager. Check that staff, particularly health services staff, know that this service is available and that they know the protocols/procedures to access it when necessary.

References

- R98(7), I.B.11
- EPR 41(2 & 5)
- DoH SfBH C6
- HSfW 3

HMIP: Expectations
Expectations – inpatient care

52. **Health services bed spaces should not form part of the prison’s certified normal accommodation (CNA) and admission should only be on assessment of clinical need.**

**Evidence**

**Documentation:** check recent admissions to health services and any overcrowding drafts.

**Staff:** health services manager.

**References**

R 98(7), I.B.11

53. **Inpatient facilities are not used by default to accommodate prisoners with disabilities or those having difficulty coping within the prison.**

**Evidence**

**Documentation:** check records for disabled prisoners on normal location.

54. **Inpatients have access to day care that provides constructive activity, with access to the same range of activities as other prisoners unless their clinical condition precludes it.**

**Evidence**

**Observation:** check range of activities being undertaken by inpatients, specifically the equality of provision and access for those with mental health problems.

**Documentation:** including time out of cell, inpatient regime.

**Prisoners:** speak to prisoners.

**References**

EPR 25(1) & 52(3)

Expectation – secondary care

55. **Prisoners who have appointments and continuing treatment with specialist services are not moved unless appropriate arrangements are available in the new establishment to ensure continuity of care.**

**Evidence**

**Documentation:** check numbers of cancellations of external appointments and reasons for cancellations.

**Staff:** health services and discipline staff.
Section 4 – health services

Expectations – mental health

56. Uniformed staff have the appropriate training to recognise and take appropriate action when a prisoner may have mental health problems, and work effectively with health staff to ensure a prisoner’s care.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: training programmes and schedules, evaluations showing changed attitudes to and understanding of mental health problems.</td>
<td>MHA 2007 R (98) 7 I.A.7, II.C.33</td>
</tr>
<tr>
<td><strong>Staff</strong>: speak to mental health staff who have delivered training. Speak to discipline staff, particularly those in the segregation unit. <strong>Prisoners</strong>: speak to prisoners about their experiences with staff on the wings and in health services.</td>
<td>EPR 81(2) (3)</td>
</tr>
</tbody>
</table>

57. Day services are available to prisoners who need additional therapeutic support for emotional, behavioural and mental health problems.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: extent of provision of and access to facilities (check audit information), courses, groups, and one-to-one options for people experiencing mental health and related difficulties in prison, including learning disability and personality disorder. Check services are linked with education, regimes and resettlement to help with integration and throughcare. <strong>Staff</strong>: health services staff including mental health staff, also education staff etc. <strong>Prisoners</strong>: talk to prisoners about their experience.</td>
<td>MHA2007 PPPMI 1(1) R (98)7 I.A.7, I.B.10 SMR 62 SfBH D12 a, b HSfW 4a-d</td>
</tr>
</tbody>
</table>

* This section amended April 2008
58. **Multi-professional primary, secondary and tertiary mental health services are available from staff with appropriate skills.**

**Evidence**

**Documentation:** service level agreements (SLAs), clinical records and care programme approach (CPA) documentation, staffing levels and skill mix (including visiting clinicians), referrals, waiting times, caseloads, evidence of multi-professional team meetings, multi-agency cooperation and day-to-day working that enhances patient care.

**Staff:** speak to different staff. Check there are staff with knowledge of mental health and substance use, and mental health and learning disabilities/difficulties.

**Prisoners:** ask about their experiences of care and involvement in care planning.

*Cross-reference with substance use inspector*

**References**

- MHA 2007
- PPPMI 8(1), 20(1)
- R 98(7), I.B.10
- EPR 42
- SfBH C5 c
- HSfW 11c

59. **Primary mental health services include talking and other appropriate therapies and guided self-help for people with mild to moderate mental health problems.**

**Evidence**

**Documentation:** strategies, agreements and plans based on national guidelines covering, for instance, access to talking therapies and guided self-help. Referrals, waiting times and caseload information for talking therapists and other primary mental health staff. Clinical audit reports. Ensure equality of access to therapies, including prisoners with substance use problems. Check continuity of care for prisoners who have just arrived or have been transferred, where relevant. Check guided self-help packages are appropriate for the prisoner population.

**Staff:** talking therapists (psychologists, counsellors) with a primary care focus and skills in brief interventions, primary care mental health workers (graduate workers).

**Prisoners:** talk to prisoners about their experience.

*Cross-reference with substance use inspector*

**References**

- MHA2007
- PPPMI 8(1), 20(1)
- R (98)7 I.A.7, I.B.10
- EPR 42
- SfBH D2 a, d
- HSfW 12a, b
60. **Prisoners with severe mental health problems receive multidisciplinary case management that includes their health, drug and alcohol misuse, social, custodial, resettlement, and advocacy needs.** Prisoners are encouraged to take an active part in their own care planning.

**Evidence References**

- **Documentation:** information-sharing protocols. Check that CPA documentation and clinical records indicate effective and comprehensive multidisciplinary input that covers all identified needs (e.g. primary care and mental health in-reach services, uniformed staff, other disciplines, external agencies, advocacy). Check that care plans are signed by patient and case conferences are attended by relevant professionals, including the advocate. Evidence of contacts with family. Check CARATs and OASys documentation for correlation of information.

- **Staff:** ask all disciplines about involvement in case reviews.

- **Prisoners:** ask prisoners who is involved in their care and the impact.

*Cross-reference with all other inspectors, in particular substance use and resettlement inspectors*

61. **Where it is identified that a prisoner has had previous contact with mental health services in the community, a referral to the mental health in-reach team (MHIRT) is always made, and information about previous history actively sought and subsequently used.**

**Evidence References**

- **Documentation:** check that clinical records, including receptions screening documentation, contain MHIRT referrals and assessments, signed consents to access previous medical records and clinical summaries, letters etc from elsewhere.

- **Staff:** speak to mental health in-reach staff about procedures.

62. **When transferred from another establishment, prisoners receive a comprehensive reception screen, including a review of all previous interactions with health services.**

**Evidence References**

- **Documentation:** clinical records.

- **Observation:** of the reception procedure.
Section 4 – health services

63. **Prisoners with mental health problems are transferred under the Mental Health Act to specialist secondary and tertiary care if clinically indicated. If they have to be moved to another prison their care is not compromised.**

Evidence
- **Documentation:** policies and procedures on prison transfers, SLA/contract, clinical records, CPA and/or care plan documentation.
- **Staff:** speak to primary care and mental health staff about transfers in and out of prison.
- **Prisoners:** talk to prisoners about their experience.

References
- EPR 46, 47
- PR 21(2)

64. **Prisoners needing assessment by specialist mental health services are seen within seven days and are transferred expeditiously to secondary and tertiary care as clinically indicated.**

Evidence
- **Documentation:** SLAs, policies and systems for mental health referrals, monitoring reports of waiting times for assessment and transfer to external NHS facilities, current waiting list, clinical records.
- **Staff:** ask about their experience and their knowledge of prison health guidance on transfer times.

References
- MHA2007
- R98(7), I.A.3, I.D. 19
- EPR 43(1)
- PR 21(2)
Learning and skills provision meets the requirements of the specialist education inspectorate’s Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

Please note that all matters relating to the provision of learning and skills and work activities are inspected by the specialist education inspectorate. The expectations included below are those that have an impact on other areas of the prison’s regime, which we routinely inspect. All other expectations, such as those relating to safety and respect, apply to learning and skills and work activities, and we include these in our sections covering bullying and good order. For information on how the education inspectorate inspects prison education, please see the Common Inspection Framework.

Expectations

1. All prisoners are assessed to provide a clear understanding and record of their learning and skills needs including literacy, numeracy and language support, employability and vocational training, and social and life skills.

   **Evidence**
   - Documentation: look at assessment/diagnostic material, sentence/custody/learning plans, staff qualifications and experience.
   - Staff: interviews with key staff.
   - Prisoners: interviews.

   **References**
   - EPR 28(1)(2) & (3); 26(6), 106(1)
   - SMR 71(4), (5) & (6); 77(1)
   - PR 32(1)(2) & (3)

2. The learning and skills and work provision in the prison is informed by and based on the diverse needs of prisoners and provides prisoners with both the opportunity of and access to activities that are likely to benefit them.

   **Evidence**
   - Observation
   - Documentation: check learning and skills strategy, needs analysis, prisoner surveys, feedback from stakeholders, prisoner participation in learning and skills, timetables, performance data, establishment

   **References**
   - EPR 25
   - SMR 71(5); 77(1)
   - PR 32(1)
Section 5 – activities

Learning and skills and work activities

role, prisoner throughput and population statistics. Check provision meets the needs of older, young adult, disabled and BME prisoners.

Staff: interviews with stakeholders.

3. There are sufficient activity places to occupy the population purposefully during the core working day.

Evidence

| Observation: check how many prisoners are locked up during the core day. Check how many are formally registered as unemployed. |
| Documentation: check number of activity places, broken down by area. Find out how many prisoners the establishment can occupy at any particular time. |
| Prisoners: ask prisoners how easy it is to get a job. |

References

| BPTP 8 |
| SMR 71(3) |
| EPR 4, 26(2) |
| PR 31 |

4. Activities which fall outside the learning and skills provision are purposeful and are designed to enhance prisoners’ self-esteem and their chances of successful resettlement.

Evidence

| Documentation: check provision of non-accredited programmes such as Toe-by-Toe, Storybook Dads etc. and number of places offered/occupied. Check attendance recorded in prisoners’ resettlement |
| Staff: speak to tutors of these programmes about the level of support they and prisoners receive and the level of recognition afforded to these programmes. Speak to HoLS about provision of these programmes. |
| Prisoners: ask participants about the programmes. |

References

| SMR 78 & 80 |
| EPR 25(1), 103(4) |
| PR 5 |
| BPTP 6 |

5. Facilities and resources for learning and skills and work are appropriate, sufficient and suitable for purpose. All prisoners are able to access activity areas.

Evidence

| Observation: check access for older and disabled prisoners. Look at workshop and classroom facilities generally. |
| Prisoners: ask them if there are any inaccessible areas because of poor mobility and insufficient help to get to them. |
| Staff: check with departments about access, especially if classes, group rooms etc are located upstairs. |
| Documentation: check equal opportunities policy. |

References

| BPTP 6 & 8 |
| EPR 26(2) & 28(1), 106(1) |
| SMR 71(2) |
| R 1990/20b |

HMIP: Expectations
Section 5 – activities

Learning and skills and work activities

6. Every prisoner who wishes to is able to engage fully with all regime activities offered by the establishment, and nobody is excluded from participation, other than as a result of a disciplinary punishment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check a full regime is available to all prisoners, including remands.</td>
<td>EPR 25, 52(3)</td>
</tr>
<tr>
<td>Documentation: check local regimes policy, SLA, and check participation of BME prisoners and those with learning and other disabilities.</td>
<td>SMR 27</td>
</tr>
<tr>
<td>Prisoners: interviews.</td>
<td></td>
</tr>
</tbody>
</table>

7. Allocation to activity places is equitable and transparent and is based on identified sentence planning needs. Prisoners can apply for job transfers and are given written reasons for any decisions.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check whether the establishment has an activities allocation board. Look at how this board operates. Look for evidence of case management and links with the sentence planning process. See whether prisoners with identified learning needs are working in higher-paid, low-skilled, production line work rather than the relevant classes identified through OASys/sentence planning. Look at how wing-based jobs (cleaners/painters/servery workers etc) are allocated, as these often bypass formal procedures and look for any evidence of favouritism or queue jumping.</td>
<td>EPR 103(2, 3 &amp; 4)</td>
</tr>
<tr>
<td>Documentation: check equal opportunities policy, ethnic monitoring stats.</td>
<td>EPR 13</td>
</tr>
<tr>
<td>Staff: interview labour allocation clerk, wing staff.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: interviews.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with race equality inspector</td>
<td></td>
</tr>
</tbody>
</table>

8. Local pay schedules do not provide disincentives for prisoners to engage in education or training activities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: see whether unskilled jobs with no links to learning offer more pay than education and training activities.</td>
<td>R 89(12)5</td>
</tr>
<tr>
<td>Documentation: check local pay policy.</td>
<td>EPR 28(4)</td>
</tr>
<tr>
<td>Staff: speak to head of learning and skills.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: interviews.</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 5 – activities

Learning and skills and work activities

9. **Sentenced prisoners who do not work because they are exempt (retired/maternity leave/long term-sick etc), receive sufficient weekly pay.**

   **Evidence**

   **Documentation**: look at local pay policy, check records of retired prisoners for weekly pay, maternity pay arrangements should reflect statutory arrangements in the community.

   **Prisoners**: talk to relevant prisoners.

   **References**

   SMR 76(1)

   BPTP 8

10. **Prisoners who are unemployed through no fault of their own or who are exempt from working (retired, maternity, long-term sick etc) are unlocked during the core day and provided with access to the library and other regime activities.**

   **Evidence**

   **Observation**

   EPR 25

   **Documentation**: check local regimes policy document.

   **Prisoners**: talk to prisoners not assigned to regular activity placements.

11. **The establishment has an effective strategy to ensure that learners are able to regularly and punctually attend those activities which meet their needs and aspirations, including community-based activities.**

   **Evidence**

   **Observation**: look for evidence of regime slippage (late unlocks etc). Check what systems are in place for managing punctuality and encouraging attendance at regime activities.

   **Documentation**: check regime practices including pay structure, attendance, punctuality, publicity material, methods of delivery, staffing levels and experience, deployment of resources, contract performance.

   **Staff**: interviews with key staff.

   **Prisoners**: interviews.

   **References**

   BPTP 6

   EPR 28(1)

   SMR 77(1)

   PR 32(1) & (2)
12. **All prisoners are given accurate information, advice and guidance about prison activities which support their learning and sentence plans and link to their reintegration into the community.**

**Evidence**
- Documentation: check promotional material, IAG processes, learning plans, check access for those with learning and other disabilities.
- Staff: interviews with key staff.
- Prisoners: interviews.

**References**
- R 89(12) 8 & 9
- BPTP 8
- EPR 103
- SMR 71(4) & (5) & 72(1)

13. **The assessment and provision of individual learning and skills form an effective part of prisoners’ sentence plans and are used effectively to record and review overall progress and achievement.**

**Evidence**
- Documentation: check learning and skills provision, learning plans, sentence/custody plans, regime practices, achievements, progress, recognition and recording of progress and achievement (RARPA), assessment results, arrangements for informing staff of assessment results, staffing levels, performance data, reviews of learning plans, accredited and non-accredited learning, development of literacy, numeracy and language support and independent living and employability skills, waiting lists, lesson plans, learning plans, assessment and accreditation arrangements.
- Staff: interviews with key staff.
- Prisoners: interviews.

**References**
- EPR 104(2)

14. **Work placements provide purposeful and structured training for prisoners and wherever possible vocational qualifications can be obtained alongside their work. In the absence of such qualifications, developed skills are recognised and recorded.**

**Evidence**
- Documentation: check work placement records, allocation process, training records, records of accredited and non-accredited skills development.

**References**
- R 89(12)9
- SMR 71(5)
- EPR 26(3, 5 & 6)
- R 1990/20f

HMIP: **Expectations**
Section 5 – activities

15. Prisoners are helped to continue on their courses when transferred or to progress to further education, training or employment on release.

**Evidence**

**Documentation:** check promotional material, advice and guidance, records of progress and achievement, transfer arrangements, collaborative and partnership arrangements, policies and procedures, licensing arrangements, community sentencing arrangements.

Check transfer of records.

**Staff:** interviews with in-reach and outreach key staff.

**Prisoners:** interviews.

*Cross-reference with resettlement inspector*

**References**

R 89(12)16
SMR 77(2) & 80
EPR 28(7a)
PR 5

16. Establishments accurately record the purposeful activity hours that prisoners engage in and don’t include non-purposeful activities in their calculations.

**Evidence**

**Observation**

**Documentation:** check Psimon returns, whether KPT returns are accurate and realistic, based on actual events, rather than scheduled events. Check that published figures don’t greatly overstate the true position for the majority of prisoners. Look for over-inflated claims for hours for activities such as cell-cleaning which often don’t take place in practice.

**Staff:** KPT/regime monitoring clerk, wing managers responsible for submitting regime monitoring returns.

**Prisoners:** interviews.

**Expectations – library**

17. The establishment has an effective strategy for maximising access to and use of a properly equipped, organised library, managed by trained staff.

**Evidence**

**Observation:** library induction for prisoners, prisoner movement.

**Documentation:** check timetables, usage records, strategies for prisoner engagement, performance indicators, staffing levels and qualifications, inter-library loan arrangements, unit arrangements

**References**

R 89(12)10
BOP 28
SMR 27 & 40
EPR 28(5 & 6)

HMIP: Expectations
e.g. C&S, health services etc., prisoner surveys, loan records, bookstock.

**Prisoners:** speak to those who have mobility problems and ask how they get access

**Questionnaire**
*Cros-reference with discipline and health services inspectors*

### 18. Library materials should be broadly reflective of the different cultures and needs of the prison population, including Braille, talking books and foreign language books.

**Evidence**
- Observation: check library materials and provision of international newspapers, journals etc. Check the library stocks a textbook explaining immigration law and procedure for foreign nationals.
- **Prisoners:** speak to prisoners.

**References**
- R 89(12)10
- EPR 28(5 & 6)

### 19. All prisoners have access to a range of library materials which reflect the population’s needs and support learning and skills including literacy, numeracy and languages, employability and vocational training and social and life skills.

**Evidence**
- **Observation:** access arrangements, check library facilities and materials. Check for provision of positive fiction and non-fiction relevant to the population.
- **Documentation:** check routines etc., needs analyses, reviews of sentence plans, evidence of discussions between learning and skills and library staff.
- **Staff:** interviews.
- **Prisoners:** interviews.

**References**
- EPR 28(5 & 6)
- BOP 28
- SMR 40 & 77

### 20. Library materials include a comprehensive selection of up-to-date legal textbooks and Prison Service Orders (PSOs).

**Evidence**
- **Observation:** check library materials.
- **Prisoners:** speak to prisoners.

**References**
- BOP 28
- EPR 28(5) & 98(2)

**HMIP:** Expectations
Physical education and health promotion

Physical education and PE facilities meet the requirements of the specialist education inspectorate’s Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

Please note that all matters relating solely to the provision of physical education and PE facilities in adult prisons are undertaken by the specialist education inspectorate. The expectations included below are those that have an impact on other areas of the prison’s regime, which we do routinely inspect. All other expectations, such as those relating to safety and respect, apply to physical education and health promotion, and we include physical education in our sections covering bullying and good order. For information on how the education inspectorate inspects prison physical education, please see the Common Inspection Framework.

Expectations

1. **Health promotion and personal fitness are explicit programme objectives for prisoners and are part of sentence planning.**

   **Evidence**
   - **Observation:** check promotional materials on all wings and at gym. A schedule of gym opening times and other fitness activities should be advertised. Cardio-vascular exercise should be encouraged as well as weight training.
   - **Documentation:** check the written contributions on sentence plans and whether the needs of prisoners are being met.
   - **Staff:** ask about integration of sentence plans with gym regime.

   **References**
   - EPR 27(3)
   - PR 29(2)

2. **Before using the gym or undertaking strenuous exercise, all prisoners, especially older prisoners, are assessed by health services staff.**

   **Evidence**
   - **Staff:** ask PE and health services staff about formal arrangements.

   **References**
   - EPR 39

HMIP: Expectations
Section 5 – activities

Physical education and health promotion

3. All prisoners have the opportunity to use the physical education facilities at least twice a week.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>EPR 27(1) &amp; (4)</td>
</tr>
<tr>
<td>Staff: check normal weekly regime.</td>
<td>PR 29(2)</td>
</tr>
<tr>
<td>Prisoners: ask in groups.</td>
<td>SMR 21</td>
</tr>
<tr>
<td>Documentation: check there is not disproportionate access.</td>
<td></td>
</tr>
<tr>
<td>Check on access for older and disabled prisoners.</td>
<td></td>
</tr>
</tbody>
</table>

4. Recreational physical exercise is encouraged by staff and the prison has suitable facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check whether prisoners can use outside exercise areas, or gym facilities during evenings, or association times.</td>
<td>EPR 27(3), (4) &amp; (6)</td>
</tr>
<tr>
<td>Staff: speak to residential staff.</td>
<td>SMR 21</td>
</tr>
</tbody>
</table>

5. Daily exercise outside is not substituted for the opportunity to use the physical education facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 21</td>
</tr>
<tr>
<td>Staff: check normal weekly regime.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: ask in groups.</td>
<td></td>
</tr>
</tbody>
</table>

6. Physical education facilities are broadly reflective of the nature of the population.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check suitable facilities/options exist for older prisoners, the disabled, pregnant women, new mothers etc or other minority groups forming part of the population.</td>
<td>EPR 27(3) &amp; (5)</td>
</tr>
<tr>
<td>Prisoners: speak to any who do not use the facilities regularly.</td>
<td></td>
</tr>
</tbody>
</table>
Section 5 — activities

Physical education and health promotion

7. All prisoners who use the gym are provided with a clean gym kit and towel on at least a weekly basis.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BPTP 1</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about normal wing routine.</td>
<td>EPR 19(3 &amp; 4),</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>20(1 &amp; 3)</td>
</tr>
</tbody>
</table>

8. Prisoners are able to shower after each PE session and changing and showering facilities are effectively supervised by staff while affording prisoners some privacy. Prisoners feel safe from harm when using the changing and showering facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BPTP 1</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about normal routine when using the gym.</td>
<td>EPR 19(3)</td>
</tr>
<tr>
<td><strong>Observation</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with bullying inspector</em></td>
<td></td>
</tr>
</tbody>
</table>

9. Records of accidents, injuries, assaults and self-harm are monitored monthly and changes made to staff supervision to ensure prisoners' safety.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records of incidents over last six months and the responses given.</td>
<td>MHSW 5(1)</td>
</tr>
<tr>
<td><strong>Observation</strong></td>
<td>EPR 52(3 &amp; 5)</td>
</tr>
<tr>
<td><em>Cross-reference with self-harm and suicide and bullying inspectors</em></td>
<td></td>
</tr>
</tbody>
</table>
Faith and religious activity

All prisoners are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to prisoners’ overall care, support and resettlement.

Expectations

1. **All prisoners have access to corporate worship/faith meetings each week and access to chaplains of their faith, in private every week.**

   **Evidence**
   - Questionnaire
   - Documentation: check the number of different religions in the prison population against the different chaplains available, and the frequency of visits. Check adequacy of access – check that prisoners do not have to apply to go to services.
   - Observation: check that less able and disabled prisoners can access the chapel, multi-faith rooms and communal worship areas. Check that worship/faith meetings are not interrupted or cut short.
   - Staff: ask staff about the procedure for attending services. There should be an understanding among staff that some prisoners, especially foreign nationals, may practise less well-known religions, which will not be represented by the chaplaincy team, but should still be respected. Check with the chaplaincy team that disabled prisoners’ individual needs are catered for.

   **References**
   - SMR 41(2)
   - EPR 29(2)
   - PR 15 & 16

2. **Chaplains are involved immediately when a prisoner is near to death or has died, to support the dying prisoner, relatives, other prisoners and staff.**

   **Evidence**
   - Staff: speak to members of chaplaincy team.
   - Observation: look for examples of good practice.
   - Cross-reference with self-harm and suicide inspector

   **References**
   - SMR 44(1)
   - EPR 24(9)
   - PR 22(1)
Section 5 – activities

3. Chaplains demonstrate religious tolerance and cooperation with one another.

   Evidence

   Observation

   Documentation: check committee notes, frequency/membership of team meetings etc. and whether all chaplains share generic duties.

   Staff: speak to chaplains of different faiths.

4. Chaplains work closely with other staff in the prison for the benefit of prisoners.

   Evidence

   Observation

   Documentation: check whether all members of the chaplaincy team regularly draw keys, and whether they are invited/attend wider establishment meetings etc.

   Staff: speak to different faith chaplains and staff responsible for race equality, suicide and self-harm etc. Check the extent to which chaplains play a part in prison life.

   Cross-reference with race equality and self-harm and suicide inspectors

5. Prisoners know the timings of religious services and these are well advertised. Timings are appropriate to the different religions.

   Evidence | References

   Prisoners: interviews.
   Observation: posters on wings etc. Check times of services, e.g. Friday prayers for Muslim prisoners.
   Documentation: check there is a published programme of religious services and activities.

6. Alternative or additional provisions are made where it is deemed unsuitable for prisoners to attend religious services.

   Evidence | References

   Observation: check health services and segregation units to see if prisoners have access to religious services. Check if there are enough rooms/places for religious activity for those who want to attend.
### Section 5 – activities

**Faith and religious activity**

**Prisoners:** interviews.  
*Cross-reference with discipline and health services inspectors*

**Evidence**

<table>
<thead>
<tr>
<th>Observation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>places of worship, rooms and times if they are available.</td>
<td>SMR 42</td>
</tr>
<tr>
<td>Chapel can be used by non-Christian faiths if multi-faith room or other worship areas are too small to adequately cater for services.</td>
<td>EPR 29(2)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>BPTP 3</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak with chaplains of different faiths.</td>
<td>DEDRB 6a</td>
</tr>
</tbody>
</table>

7. **Chapels, multi-faith rooms and worship areas are equipped with facilities and resources for all faiths and are accessible for all prisoners to allow contemplation, reflection and prayer.**

**Evidence**

<table>
<thead>
<tr>
<th>Observation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>check times of all activities – times of main services should not clash with key regime activities.</td>
<td>SMR 41(2) &amp; 42</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>EPR 29(2)</td>
</tr>
</tbody>
</table>

8. **Regime activities are arranged so that prisoners are able to attend corporate worship.**

**Evidence**

<table>
<thead>
<tr>
<th>Observation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>BPTP 3</td>
</tr>
</tbody>
</table>

9. **Searches of staff, visitors, prisoners and their property are conducted in a religiously and culturally sensitive manner.**

**Evidence**

<table>
<thead>
<tr>
<th>Observation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>PR 41(2)</td>
</tr>
<tr>
<td><strong>Cross-reference with reception and contact with the outside world inspectors</strong></td>
<td>EPR 54(3)</td>
</tr>
</tbody>
</table>

10. **Prisoners are able to obtain, keep and use artefacts that have religious significance, provided they do not pose a risk to security.**

**Evidence**

<table>
<thead>
<tr>
<th>Observation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>UDHR 18</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff and chaplains of different faiths.</td>
<td>DEDRB 1 &amp; 6</td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
Section 5 – activities

Faith and religious activity

**Observation:** look in cells, and at prisoners' possessions.  
**Documentation:** check appropriate artefacts are allowed.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the access arrangements and for evidence of a published programme.</td>
<td>SMR 42</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask chaplaincy staff about the regime and access to services during the core day and evenings.</td>
<td>EPR 29(2)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>PR 19</td>
</tr>
</tbody>
</table>

11. **Prisoners are able to attend classes and groups in addition to corporate worship for the purposes of nurturing faith.**

**Evidence**  
**References**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> check all staff are aware of the major religious festivals and ask about catering facilities during festivals such as Ramadan, Passover or Lent.</td>
<td>UDHR 18</td>
</tr>
<tr>
<td><strong>Observation/documentation:</strong> check to see if any festivals have been celebrated, and if there are plans to celebrate more, and that there are posters etc. Check provision of festivals against annual PSI of religious festival dates.</td>
<td>DEDRB 1 &amp; 6(h)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>SMR 78</td>
</tr>
<tr>
<td><strong>Observation:</strong> look in cells, and at prisoners' possessions.</td>
<td>BPTP 3</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check appropriate artefacts are allowed.</td>
<td>PR 16</td>
</tr>
<tr>
<td><strong>Evidence References</strong></td>
<td>ICCPR 27</td>
</tr>
</tbody>
</table>

12. **Prisoners are able to celebrate all major religious festivals and these are actively promoted by the prison.**

**Evidence**  
**References**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> check all staff are aware of the major religious festivals and ask about catering facilities during festivals such as Ramadan, Passover or Lent.</td>
<td>UDHR 18</td>
</tr>
<tr>
<td><strong>Observation/documentation:</strong> check to see if any festivals have been celebrated, and if there are plans to celebrate more, and that there are posters etc. Check provision of festivals against annual PSI of religious festival dates.</td>
<td>DEDRB 1 &amp; 6(h)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>SMR 78</td>
</tr>
</tbody>
</table>

13. **Chaplains establish and maintain links with faith communities outside the prison according to prisoners’ individual needs.**

**Evidence**  
**References**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to chaplaincy team, particularly about community connections for those at risk of suicide and self-harm and on release.</td>
<td>DEDRB 1 &amp; 6</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>EPR 29(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask chaplaincy team, particularly about community connections for those at risk of suicide and self-harm and on release.</td>
<td>SMR 80</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask chaplaincy team, particularly about community connections for those at risk of suicide and self-harm and on release.</td>
<td>BPTP 1</td>
</tr>
</tbody>
</table>

HMIP: Expectations
14. Chaplains are consulted about prisoners they are involved with, at appropriate times, for example when sentence plans are reviewed, or release on licence is being considered.

**Evidence**

- **Staff**: speak to chaplaincy team.
- **Documentation**: check sentence plans, ROTL and recategorisation forms etc.

**References**

- EPR 87(1) & 107(4)
Time out of cell

All prisoners are actively encouraged to engage in out of cell activities, and the prison offers a timetable of regular and varied extra-mural activities.

Expectations

1. **Prisoners spend at least 10 hours out of their cells on weekdays, except in exceptional circumstances.**

   **Evidence**
   - Questionnaire
   - Observation: verify levels of actual time out of cell against recorded levels and conduct a stand-still roll check during core day. Check prisoners are purposefully occupied during unlock i.e. involved in activities, association, exercise etc.
   - **Prisoners:** case studies.

   **References**
   - EPR 25(1) & (2)

2. **Daily routines for prisoners, including association and exercise, are publicised on every wing, and adhered to consistently.**

   **Evidence**
   - **Observation:** check all residential units.
   - **Documentation:** check recent wing records for recorded use of association and exercise.

   **References**
   - SMR 35(1)

3. **Out of cell activities, including association and exercise, are not cancelled unnecessarily. Reasons for cancellation are explained to prisoners.**

   **Evidence**
   - Documentation: check recent wing records for any cancellations and check justification and whether authorisation was made at an appropriate level.
   - **Prisoners:** ask about frequency of cancellations on each wing, and whether reasons were explained.

   **References**
   - SMR 57
   - EPR 4, 27(6 & 7)
Section 5 – activities

4. **Prisoners with physical, sensory, mental and learning disabilities as well as retired prisoners have the opportunity to participate in activities that meet their needs.**

   **Evidence**

   **Observation:** check these prisoners are able to participate in out-of-cell activities.
   **Prisoners:** interviews if appropriate. Ask whether they have been consulted about the activities they would like to be involved in.
   **Staff:** ask about facilities available.

   **References**

   BPTP 2
   BOP 5(1)
   EPR 25(3 & 4)

5. **Prisoners are encouraged to take part in recreational education.**

   **Evidence**

   **Observation:** check use of evening classes.
   **Staff:** ask about number of prisoners on each wing participating in self-taught/evening classes.

   **References**

   BPTP 6
   EPR 28(1)

   Cross-reference with learning and skills and work inspector

6. **All prisoners are encouraged to engage in out of cell activities and a record is kept of prisoners’ non-participation in out of cell activities.**

   **Evidence**

   **Documentation:** check recent prisoner files for evidence of those not associating and the reasons given for this.
   **Observation:** check staff supervision during association and speak to those prisoners not engaging in activities.

   **References**

   EPR 25(1) & (2)

   Cross-reference with bullying and suicide and self-harm inspectors

7. **Prisoners attending any out of cell activity are enabled to attend regularly and punctually.**

   **Evidence**

   **Documentation:** check daily routine allows enough time for prisoners to attend education, training, work, interventions, visits and all other out of cell activities. Ensure staff are proactive in enabling prisoners to attend punctually and delays in returning roll etc are not commonplace.

   **Prisoners:** speak to prisoners.

   **References**

   HMIP: Expectations
8. Prisoners, including those in health services and segregation, are given the opportunity for at least one hour of exercise in the open air every day.

Evidence

Questionnaire

Documentation: check wing history files, including segregation. Check to see if movement to and from education/work is included as outside exercise time.

Observation: outdoor areas should be free of litter, and preferably more than just a small yard. Check seating is available in exercise areas and that older, infirm and disabled prisoners have priority use. Check older, infirm and disabled prisoners can return to the wing before the exercise period ends.

Cross-reference with segregation and health services inspectors

References

SMR 21
EPR 27(1)

9. Prisoners are given the opportunity of at least one hour of association every day, except where in temporary segregation.

Evidence

Questionnaire

Observation: check recorded figures with actual times.

Documentation: check wing history files.

Prisoners: case studies.

Cross-reference with segregation inspector

References

EPR 25(2)

10. Out of cell activities, including association and exercise, are supervised effectively by staff, and prisoners feel safe, especially those who may be at risk of self-harm or bullying.

Evidence

Questionnaire

Observation: check staff supervision during association and speak to those prisoners not engaging in activities.

Cross-reference with bullying and self-harm and suicide inspectors

References

SMR 27
EPR 49 & 52(2)
Section 5 – activities  Time out of cell

11. All prisoners have the use of properly equipped areas for association and exercise.

**Evidence**
- Observation: check areas used for outside exercise are sufficient to meet needs of population and seating is provided.
- Check areas used for association have adequate activities and seating, including seating with lumbar support for use by older prisoners and those with known back problems.
- Cross-reference with residential units inspector

**References**
- EPR 27(4)

12. Staff actively engage with prisoners during association and exercise time, and contribute to the quality of prisoners’ free time.

**Evidence**
- Questionnaire
- Observation: observe staff engagement during association times, and contribution to extra-mural activities.

**References**
- EPR 50, 72(3) & 74

13. All prisoners are issued with enough warm, weatherproof clothing and shoes to go out in all weather conditions.

**Evidence**
- Questionnaire
- Observation: if inspecting during the winter.
- Staff: ask about access to winter clothing.

**References**
- SMR 17(1)
- EPR 20(1)

Cross-reference with residential units inspector
Security and rules

Security and good order are maintained through positive staff–prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well-publicised, proportionate, fair and encourage responsible behaviour. Categorisation and allocation procedures are based on assessment of a prisoner’s risks and needs; and are clearly explained, fairly applied and routinely reviewed.

Expectations – security

1. There are no obvious weaknesses or anomalies in the physical and procedural security of the establishment.

   Evidence

   Observation
   Documentation: check recent security audits, SIRs etc.

2. The elements of ‘dynamic security’ are in place:
   - staff–prisoner relationships are positive
   - prisoners receive personal attention from staff
   - there is constructive activity to occupy prisoners.

   Evidence
   Questionnaire
   Observation: observe staff–prisoner relationships especially during association/exercise. Check whether staff cluster during association, and whether there are enough staff on wings to facilitate good personal officer work.
   Prisoners: ask about relationships and attention from staff.
   Cross-reference with personal officer and staff–prisoner relationships inspectors

   Reference
   BPTP 6
   SMR 21(2) & 48 & 78
   EPR 25(1), 74 & 75
### Section 6 – good order

#### Security and rules: security

<table>
<thead>
<tr>
<th>3. Effective security intelligence safeguards prisoners’ well-being.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check recent security reports and incident sheets – assess whether staff comply with security requirements in terms of filing reports.</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about recent incidents where security reports have led to action.</td>
</tr>
<tr>
<td><strong>Cross-reference with bullying and substance use inspectors</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Prisoners’ access to regime activities is not impeded by an unnecessarily restrictive approach to security.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
</tr>
<tr>
<td><strong>Observation:</strong> observe control of prisoners on all units including segregation.</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to security governor and staff.</td>
</tr>
<tr>
<td><strong>EPR 49, 51(1) &amp; 52(3)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Strip and squat-searching of prisoners is carried out only for sound security reasons. Prisoners are strip or squat searched only in the presence of more than one member of staff, of their own gender.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about usual policy. If squat searches are used, their incidence and authorisation need to be logged and regularly checked.</td>
</tr>
<tr>
<td>Squat searches should only be used in exceptional circumstances.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check all strip-searches are logged and specify the process involved.</td>
</tr>
<tr>
<td><strong>Cross-reference with first days in custody and contact with the outside world inspectors</strong></td>
</tr>
<tr>
<td><strong>PR 41 (3)</strong></td>
</tr>
</tbody>
</table>

| 6. The criteria to ban or otherwise restrict visitors are visible and unambiguous, with an appeal process available. Those visitors subject to bans or restrictions are reviewed every month. |

**HMIP: Expectations**
### Section 6 – good order

**Security and rules: rules**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check records of those who have been banned or who are subject to closed or no-contact visits and the regularity of reviews.</td>
<td>BOP 19</td>
</tr>
<tr>
<td><strong>Staff</strong>: ask about use of criteria and occasions recently when it was necessary to invoke policy.</td>
<td>SMR 32(2) &amp; 57</td>
</tr>
<tr>
<td>Cross-reference with contact with the outside world inspector</td>
<td>EPR 60(4)</td>
</tr>
</tbody>
</table>

#### Required outcomes from security information reports (SIRs) such as target searches and reasonable suspicion MDT tests are routinely completed.

<table>
<thead>
<tr>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: cross-reference relevant SIRs with search and/or MDT register.</td>
</tr>
<tr>
<td><strong>Staff</strong>: speak to security and MDT staff</td>
</tr>
<tr>
<td>Cross-reference with substance use inspector</td>
</tr>
</tbody>
</table>

#### Expectations – rules

#### 8. Local rules and routines are publicised prominently throughout all residential and communal areas.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners</strong>: ask about level of information given throughout their time in the prison.</td>
<td>BOP 13</td>
</tr>
<tr>
<td><strong>Observation</strong>: check to see if rules and routines are publicised on wings – and are accessible to those with language and literacy needs.</td>
<td>SMR 35(1) &amp; (2)</td>
</tr>
<tr>
<td>Cross-reference with first days in custody and residential units inspectors</td>
<td>EPR 30(1) &amp; (2)</td>
</tr>
</tbody>
</table>

#### 9. Rules and routines are applied openly, fairly and consistently, with no discrimination.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check that rules and routines have been impact assessed.</td>
<td>BOP 5</td>
</tr>
<tr>
<td><strong>Prisoners</strong>: groups – particularly any voluntarily segregated prisoners and those from black and minority ethnic groups.</td>
<td>SMR 27</td>
</tr>
<tr>
<td>Cross-reference with applications and complaints inspector</td>
<td>EPR 13</td>
</tr>
</tbody>
</table>

**HMIP**: Expectations
## Section 6 – good order

**Security and rules: categorisation**

### 10. Staff use only the level of authority necessary to ensure a prisoner’s compliance with the rules. When rules are breached, staff take time to explain how and why to the prisoner concerned.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:</td>
<td>if possible, observe staff interacting with prisoners on wings. SMR 27 EPR 3, 49, 51(1)</td>
</tr>
<tr>
<td>Prisoners:</td>
<td>groups.</td>
</tr>
<tr>
<td>Staff:</td>
<td>ask wing staff how they would deal with certain sets of circumstances.</td>
</tr>
<tr>
<td>Documentation:</td>
<td>disciplinary reports and IEP warnings. Cross-reference with discipline and IEP inspectors</td>
</tr>
</tbody>
</table>

### 11. When decisions are conveyed to prisoners, appeal arrangements are explained and made available.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:</td>
<td>interviews. BOP 33</td>
</tr>
<tr>
<td>Documentation:</td>
<td>check written information given to prisoners. SMR 36 EPR 70(1) &amp; 3</td>
</tr>
</tbody>
</table>

### Expectations – categorisation

### 12. Categorisation and allocation decisions are clear, objective, fair and can be challenged.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation:</td>
<td>check paperwork relating to decisions made. EPR 17(2 &amp; 3)</td>
</tr>
<tr>
<td></td>
<td>Check for appeals against decisions over the last six months.</td>
</tr>
<tr>
<td></td>
<td>Check for impact assessment.</td>
</tr>
<tr>
<td></td>
<td>Prisoners: interviews.</td>
</tr>
</tbody>
</table>

### 13. Allocation decisions are made following consultation with staff who know the individual prisoner and with the prisoner themselves.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation:</td>
<td>check paperwork of decisions made. Check categorisation paperwork for older and disabled prisoners ensuring EPR 17(2 &amp; 3)</td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 6 – good order

Security and rules: categorisation

documentation includes information on age, health and disability. Check allocation decisions take into account sentence plans. Check account is taken of medical needs and that there is a distinction between the need for 24-hour medical care and the need for social care and support. Check how many are on ‘medical hold’.

Prisoners: interviews.

Staff: speak to personal officers. Check OCA staff are aware of older and disabled prisoners and their individual needs.

Cross-reference with health services and personal officers inspectors

14. Unsentenced prisoners are held in the most convenient local prison for their domestic and legal visits.

Evidence

Documentation: check prisoner records.
Prisoners: interviews.

Cross-reference with resettlement inspector

References

BOP 20
EPR 17(1)

15. Sentenced prisoners are allocated according to their individual needs.

Evidence

Documentation: check that the following aspects have been considered: prisoners’ home area, overcrowding drafts, security requirements, sentence plans, prisoners completing courses.
Prisoners: groups.

Cross-reference with resettlement inspector

References

SMR 58 & 67(b)
EPR 17(2)

16. Categorisation and allocation decisions are explained in writing and verbally, in a language that the prisoner understands.

Evidence

Documentation: check decisions.
Observation: check for use of Language Line/interpreters/use of signing where appropriate.

References

EPR 30(1)
SMR 35

HMIP: Expectations
Section 6 – good order

Security and rules: categorisation

17. Prisoners who are subject to Rule 45/3, and those for whom support plans are in place, have their plans/Rule 45/43 status taken into consideration on allocation.

Evidence

Documentation: check history files of those in segregation or vulnerable prisoner units.

Prisoners: case studies of those in separate accommodation.

Cross-reference with bullying inspector

References

CCLEO 5 & 7
SMR 9(2)
EPR 3, 53, 60(5)

18. Prisoners serving sentences of four years and more have planned progressive moves in accordance with their sentence plan targets.

Evidence

Documentation: check sentence plans.

Prisoners: individual interviews with those serving four years or more.

Cross-reference with resettlement inspector

References

BPTP 10
SMR 69
EPR 103(2)

19. Prisoners are placed in the lowest appropriate security category.

Evidence

Documentation: check assessments and any official complaints made regarding categorisation.

Cross-reference with applications and complaints inspector

References

EPR 3, 51(1)
SMR 27
R 82)17, 2
Lord v Sec State

20. Prisoners have their category reviewed annually and are also recategorised whenever there is a change in risk.

Evidence

Documentation: check individuals’ paperwork for evidence of at least annual reviews and for ad hoc changes.

Staff: ask staff about normal policy.

References

Lord v Sec State
EPR 51(5)

HMIP: Expectations
Disciplinary procedures are applied fairly and for good reason. Prisoners understand why they are being disciplined and can appeal against any sanctions imposed on them.

### Expectations – disciplinary procedures

<table>
<thead>
<tr>
<th>1.</th>
<th><strong>No ‘ unofficial’ or ‘ collective’ punishments are used either individually or systematically.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence</td>
<td>References</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that no unofficial or group punishments are in operation.</td>
<td>EPR 60(3)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check for clear policies describing procedures, including differences between types e.g. adjudications and minor reports in YOIs. Ensure policies appear lawful, reasonable and fair and encourage staff to use disciplinary procedures only when necessary.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask about use of discipline and procedures for punishment, especially in relation to staff using discretion in awarding punishments.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.</th>
<th><strong>Checks are made to ensure that prisoners understand the charges and procedures they face.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence</td>
<td>References</td>
</tr>
<tr>
<td><strong>Observation:</strong> check adjudication processes.</td>
<td>SMR 30(2) &amp; (3)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff about procedures for prisoners who are less able to read, write and understand English and those who have a disability which may inhibit their understanding.</td>
<td>EPR 59</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check recent adjudication forms and use of Language Line over last six months.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about adjudications to ascertain general levels of awareness.</td>
<td></td>
</tr>
</tbody>
</table>

* This section amended April 2008
Section 6 – good order

Discipline: disciplinary procedures

3. Prisoners facing serious charges are seen by an independent adjudicator within one month of the opening of the hearing.

   Evidence
   Staff: ask if all serious charge cases are referred to the independent adjudicator.
   Documentation: check adjudication records.
   Prisoners: case studies.

   References
   BOP 30(2)

4. All prisoners facing disciplinary charges are given time to prepare their case and can receive legal advice. During adjudication hearings prisoners are provided with paper and a pen so that they can make notes.

   Evidence
   Prisoners: case studies.
   Documentation: check for evidence of legal advice being used.
   Check assistance is provided to those who have difficulty with reading or writing.

   References
   SMR 30 (2)
   EPR 59, b, c & d
   ECHR, Ezeh & Connors v UK

5. All prisoners are medically fit for adjudication.

   Evidence
   Documentation: check for evidence of medical assessments before adjudications are carried out/check evidence for lack of assessment and check entries made on the record of hearing.
   Prisoners: speak to any prisoners who have received an adjudication/cellular confinement in the last six months.

   References
   BOP 6 & 24
   SMR 32 (3)
   EPR 39 & 43(1)

6. Adjudication proceedings, whether conducted by the Prison Service or district court judges, are conducted in non-intimidating surroundings in a clear and fair manner. Adjudication hearings are always properly written out and recorded.

   Evidence
   Documentation: check recent adjudication records and that patterns of adjudications are monitored by the prison for ethnic imbalance etc.
   Adjudications should be monitored by the IMB.
   Documentation: where there is evidence that prisoners require extra support, this is provided (e.g. vulnerable prisoners, and those with

   References
   EPR 59
   SMR, 30 (2) & (3)
Section 6 – good order

Discipline: disciplinary procedures

Severe mental illness, disabled prisoners). Check that adjudication procedures and policies have been impact assessed.

Observation
Prisoners: case studies.

7. Prisoners play an active role during adjudication hearings.

Evidence

Observation: check that prisoners are allowed to hear all evidence against them, give reasons for their actions and question the officer laying the charges and relevant witnesses.

Documentation: last six months of adjudication reports.

Prisoners: ask how actively engaged prisoners felt during adjudication.

Evidence References
BOP 30 (1)
EPR 59
SMR 30 (2) & (3)

8. Findings and punishments are made fairly and consistently on the evidence available and mitigating circumstances are considered. The results are explained to the prisoner.

Evidence

Documentation: check last six months of adjudication reports (e.g. for selected offences and minimum and maximum punishments), check also with prisons of the same type and across different prisoner groups, especially voluntarily segregated prisoners, minority ethnic groups and foreign nationals. Check that awards are sensitive to the needs of prisoners such as those with a disability.

Observation
Staff: ask staff.

Evidence References
SMR 30 (2)

9. Prisoners are made aware of the appeals procedure during their adjudication hearing.

Evidence

Prisoners: any prisoners who have appealed in the last six months.

Documentation: check number of appeals in last six months and information given during initial hearing.

Evidence References
BOP 30 (2)
EPR 61
**Section 6 – good order**

**Discipline: the use of force**

### Expectations – the use of force

#### 10. Force is only used legitimately and as a last resort.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> ensure that use of force forms are completed correctly and properly authorised (especially medical records) and the number of instances of use of force is recorded. Check that use of force policies and procedures have been impact assessed. Check for evidence that de-escalation techniques are used before force is applied.</td>
<td>SMR 54(1) CCLEO 3</td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Observation</strong></td>
<td></td>
</tr>
</tbody>
</table>

#### 11. The use of force is monitored by the prison by, for example, ethnicity, disability, location, and emerging patterns acted upon.

<table>
<thead>
<tr>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check monitoring reports for last six months, for total number of incidents, type of incidents, whether use of force is used on a range of prisoners or repeat offenders, location of incidents and compare across prisons of same type.</td>
</tr>
</tbody>
</table>

#### 12. Where force is used, trained staff use only approved techniques with no more force and for no longer than is necessary.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> if force is being used. <strong>Prisoners:</strong> case studies. <strong>Documentation:</strong> refer to staff training records. Check that staff in women’s prisons are specifically trained in the control and restraint of pregnant women and in appropriate de-escalation methods. Check use of force records.</td>
<td>CCLEO 3 SMR 27 &amp; 54(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to a selection of staff to establish whether they have a consistent sense of the reasons force was required. Speak to IMB representative.</td>
<td>EPR 49, 64(2) &amp; 66</td>
</tr>
<tr>
<td><strong>Cross-reference with health services inspector</strong></td>
<td></td>
</tr>
</tbody>
</table>
Section 6 – good order

Discipline: the use of force

13. IMB representation is specifically invited, with adequate notice, for all GOOD reviews and on the use of force committee.

Evidence

Documentation: check the minutes of GOOD (good order or discipline) review meetings for IMB input and authorisation for use of special cells or restraints.

IMB: check IMB level of involvement with segregation.

References

EPR 59
SMR 30 (2) & (3)
BOP 29(1)
PR 79

14. Control and restraint equipment is in good order, and a careful inventory and record of its use is kept.

Evidence

Documentation: check inventory and recent records of usage.

Observation: check equipment.

References

EPR 65
SMR 33(c)

15. Video cameras are used to record planned interventions. Segregation staff are not routinely used for planned removals.

Evidence

Documentation: check details of recent planned interventions.

View video evidence.

Staff: ask about recent interventions.

16. Handcuffs are only used when there is evidence to support their use and with the proper authority.

Evidence

Documentation: check circumstances in which they have been employed.

Staff: ask about general usage.

References

EPR 68(2)
SMR 27 & 33
R (82)17, 2

17. An appropriately qualified health services professional attends all planned control and restraint (C&R) removals occurring within normal hours. Prisoners subject to spontaneous C&R procedures or those occurring outside normal hours are seen as soon as possible after force is removed.
## Section 6 – good order

### Discipline: the use of force

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check use of force documentation, also check medical assessments before adjudications are carried out and check entries made on adjudication hearing records.</td>
<td>CCLEO 6</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> any prisoners subjected to control and restraint within the last six months.</td>
<td>EPR 43(1), SMR 32(1) &amp; (3)</td>
</tr>
</tbody>
</table>

**Cross-reference with health services inspector**

### 18. Use of force documentation is certified by an appropriate manager who was not involved in the recorded incident.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check use of force documentation.</td>
<td>EPR 65</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about normal procedures for certification of use of force documentation.</td>
<td></td>
</tr>
</tbody>
</table>

### 19. The use of any cell from which the normal furniture has been removed, or which contains a person in anti-ligature/strip clothing, is authorised and recorded as use of special accommodation.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask managers and staff about policies.</td>
<td>EPR 47(2), 49, 51(1), 53(1&amp;2)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check whether any cell other than a designated special cell is used for this purpose.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask whether furniture or bedding is removed during the day.</td>
<td></td>
</tr>
</tbody>
</table>

### 20. The use of special cells and mechanical restraints is properly authorised, they are only used as a last resort, and until the prisoner is no longer violent and refractory. Initial authorisation is for a period not exceeding two hours, and then if necessary for subsequent two-hour periods. Prisoners are always released as soon as it is no longer justified. Concerns about possible self-harm are documented and addressed.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check use of force forms and use of special cell.</td>
<td>ECHR 3, EPR 68</td>
</tr>
<tr>
<td>Are reasons for use recorded and valid? Was the prisoner removed as soon as they were calm? Were concerns about possible self-harm recorded and managed?</td>
<td>SMR 27, 33 &amp; 34</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to any prisoners who have been held in the special cell.</td>
<td></td>
</tr>
</tbody>
</table>

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HMIP: Expectations
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Discipline: the use of force

21. Prisoners are not automatically strip searched or deprived of their normal clothing on placement into special or unfurnished accommodation. In circumstances where such actions prove necessary, reasons are recorded and normal clothing is returned at the earliest opportunity.

Evidence

Observation: check special or unfurnished accommodation does not routinely contain protective clothing.

Documentation: check documentation for use of force and use of special/unfurnished cell. Prisoners should not be routinely strip searched or deprived of their normal clothing.

Prisoners: any prisoners who have been placed in special/unfurnished accommodation within the last six months.

Staff: ask about normal procedures for use of special/unfurnished accommodation.

References

EPR 53

22. Monitoring of prisoners in special or unfurnished accommodation is carried out at frequent and irregular intervals and at a minimum of every 15 minutes unless more frequent checks are authorised. A full record of all monitoring checks is maintained.

Evidence

Documentation: check documentation for use of special/unfurnished accommodation.

Staff: ask staff about normal monitoring arrangements for prisoners located in special/unfurnished accommodation.

References

EPR 39

23. Suicidal or self-harming prisoners are only held in unfurnished cells in exceptional circumstances, and after all other methods, including continuous engagement, have failed.

Evidence

Documentation: check documentation for use of unfurnished accommodation.

Staff: ask staff about normal procedures.

Prisoners: speak to prisoners about their experiences.

Cross-reference with suicide and self-harm inspector

References

R (98)7, III.D.58
EPR 39 & 47(2)
Section 6 – good order

Discipline: segregation unit

24. The authorisation for staff wearing personal protective equipment (PPE) to manage prisoners is made on an individual basis each day by a senior manager. The use of PPE is monitored.

Evidence

Documentation: check frequency and level of authorisation for use of PPE. Check monitoring figures.
Staff: ask staff about usual arrangements, including chaplains and IMB representatives.
Prisoners: speak to prisoners about their experiences.

Expectations – segregation unit

25. The design and build of the segregation unit is suitable for its purpose and offers well maintained and clean facilities.

Evidence

References

Observation: check whether the unit is fit for purpose, and the communal areas clean
EPR 18(1–4)
SMR 10

26. Prisoners are received into the segregation unit with the proper authorisation and are located for appropriate reasons. A safety algorithm is completed by a member of healthcare staff within two hours of segregation.

Evidence

References

Documentation: check records for last six months. Ensure that use is valid and appropriate and that safety algorithms are completed.
R (98)7, III.E.66
EPR 43(2) & 51(1)
Staff: enquire about any prisoners with mental health needs and judge whether their location and treatment are appropriate.

27. Transfers of prisoners from one segregation unit to another are exceptional and only take place when authorised by the governors of the sending and receiving establishments or the area managers.

Evidence

References

Managers: check procedures and frequency of segregation-to-segregation moves.
EPR 51(1)
## Section 6 – good order

### Discipline: segregation unit

#### 28. Prisoners in the segregation unit are searched thoroughly and respectfully. Strip searches are only required where the need has been identified through risk assessment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> if possible, although the inspector must be the same gender as the prisoner. Strip and squat searches should not be routinely used.</td>
<td>EPR 54 (1-7)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask those currently or recently in segregation about their experiences.</td>
<td></td>
</tr>
</tbody>
</table>

#### 29. Prisoners are informed of the reasons for their segregation in writing, taking into account their ability to read English.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check paperwork.</td>
<td>R (82)17, 3</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners, especially those who are less able to read, write or speak English.</td>
<td>EPR 59 (a) SMR 30(2 &amp; 3)</td>
</tr>
</tbody>
</table>

#### 30. Prisoners are provided with an easy-to-read booklet describing the regime and routines that operate in the segregation unit. A statement of purpose is prominently displayed and a photo-board provides pictures of the multidisciplinary team who review segregation.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check any information booklets in use.</td>
<td>EPR 30 (1 &amp; 2)</td>
</tr>
<tr>
<td><strong>Observation:</strong> check for a statement of purpose or photo-board.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask whether they were provided with easy-to-read material on arrival.</td>
<td></td>
</tr>
</tbody>
</table>

#### 31. The establishment has a published staff selection policy for the segregation unit, and those selected have been personally authorised by the governor and trained for their role.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Managers:</strong> check the selection and training policy.</td>
<td>EPR 77</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that the unit is run by a dedicated group of staff who know one another and receive close managerial attention.</td>
<td></td>
</tr>
</tbody>
</table>
32. As a minimum, staff are trained in de-escalation, race equality, suicide prevention, mental health, personality disorder and motivational interviewing.

**Evidence**

**Managers:** check the training policy.

**Staff:** ask who has been trained and what they remember.

**References**

EPR 76, 77, 81(3 & 4)

33. Staff are provided with high levels of support for their wellbeing, both as individuals and in their work groups.

**Evidence**

**Managers:** check the policy on providing staff support.

**Staff:** ask whether they feel sufficiently well supported. For example, is there a peer support scheme?

**References**

EPR 86 & 87(1)

34. Governor’s rounds are conducted in such a way that segregated prisoners are able to speak to the governor out of the hearing of staff.

**Evidence**

**Observation:** observe the governor’s rounds.

**Prisoners:** ask prisoners how governor’s rounds are conducted.

**References**

SMR 36(1)

35. Cell cards and the unit roll board list the first and second names of individual prisoners. Staff do not address prisoners by their surname only.

**Evidence**

**Observation:** check roll board and cell cards. Listen to staff talking to prisoners.

**Prisoners:** ask them whether they are addressed by their surnames.

**References**

ICCPR 10, EPR 75

36. All prisoners in segregation under Rule 45 are allocated a personal officer within 24 hours of arrival who acts as a caseworker and makes daily records of their prisoner’s behaviour on individual history sheets and/or monitoring forms. The personal officer liaises with the prisoner’s wing staff to facilitate their return to normal location.

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### Section 6 – good order

#### Discipline: segregation unit

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check entries in wing history sheets or monitoring forms (HS segregation).</td>
<td>EPR 74 &amp; 87</td>
</tr>
<tr>
<td><strong>Managers:</strong> ask how the personal officer scheme operates.</td>
<td>PR 42(1)</td>
</tr>
<tr>
<td><strong>Personal officers:</strong> ask them about their role.</td>
<td></td>
</tr>
</tbody>
</table>

37. **Prisoners in segregation for control purposes are unlocked with two staff as a norm, and those in segregation for own protection or punishment are unlocked with a single member of staff as the norm, with any additional staff authorised on the basis of a risk assessment that is reviewed daily.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> observe unlock levels.</td>
<td>EPR 51(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check risk assessments for high unlock levels, and frequency of review.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask them about their personal experiences</td>
<td></td>
</tr>
</tbody>
</table>

38. **Prisoners are held in segregation for the shortest possible period, and progressive plans to return them to normal location are made at the earliest opportunity. A prisoner’s segregation status is reviewed within 72 hours and then fortnightly by a multidisciplinary review group, chaired by a governor. Segregated prisoners are actively involved in the review process.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> attend segregation review meetings and check prisoners’ attendance.</td>
<td>BOP 30(2)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check paperwork on recent reviews.</td>
<td>EPR 53(1-5) &amp; 60(5)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask whether they attend reviews and are able to contribute.</td>
<td>SMR 27 &amp; 57</td>
</tr>
</tbody>
</table>

39. **Staff attending review boards offer individual contact with the prisoner between reviews.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask uniformed staff, specialists and IMB whether this is the case.</td>
<td>EPR 75</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check paperwork on recent reviews.</td>
<td></td>
</tr>
</tbody>
</table>
**Section 6 – good order**

**Discipline: segregation unit**

40. All disciplines of staff having contact with a segregated prisoner record relevant details of their contact in individual history sheets.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask staff whether they annotate wing history sheets.</td>
<td>PR 42(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check wing history sheets.</td>
<td></td>
</tr>
</tbody>
</table>

41. Prisoners are provided with activities to occupy and stimulate them in their cells, and if segregation continues beyond the second review date a care plan is put in place to prevent psychological deterioration.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check for the presence of care plans; check that care plans are put together sooner for the more vulnerable.</td>
<td>EPR 43(2) &amp; 49</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners what they do in their cells.</td>
<td>SMR 59</td>
</tr>
</tbody>
</table>

42. Prisoners have daily access to a senior manager, chaplain and a health services professional, in private if requested, and a record of these visits is maintained. A member of the IMB team visits at least once a week.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> ask who visits and frequency.</td>
<td>BOP 29(2)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check segregation log for records of visits.</td>
<td>EPR 29(2) &amp; 43(2)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check who visits and frequency.</td>
<td>SMR 32(3) &amp; 41(2 &amp; 3)</td>
</tr>
</tbody>
</table>

43. Prisoners have the same access to facilities and services within the segregation unit as are provided for prisoners on normal location:
- telephones and visits
- showers and outside exercise
- canteen and approved property (unless temporarily denied as an adjudication punishment)
- incentives and earned privileges scheme
- meals wherever possible collected from a servery.
44. Within the constraints of security and good order, prisoners can have the same access to activities, as is provided for prisoners on normal location:
   - library
   - education
   - in-cell exercise
   - work
   - religious services
   - offending behaviour programmes.

The regime in segregation never falls below a basic level of regime.

Evidence References

Staff: ask about normal arrangements. R (82)17, 1 & 3
Observation: observe daily routines. EPR 19(3), 20(3), 22, 24(1), 27(1), & 29(2)
Documentation: check published regime and segregation log for occurrence of regime activities. SMR 13, 15, 20(1 & 2), 21(1), 37, & 42
Prisoners: ask about their experiences.

45. Prisoners in segregation are granted access to mainstream activities where a risk assessment allows, and phased returns are practised to encourage prisoners to return to normal location.

Evidence References

Staff: ask managers and staff about policies and for examples. EPR 49 & 51(1)
Prisoners: ask about their experiences.
Section 6 – good order

46. For those on long-term GOOD activities are provided in association wherever possible.

Evidence References
Staff: ask staff and managers about policies and for examples. EPR 49, 51.1
Prisoners: ask about their experiences.

47. Prisoners who have been assessed as meeting the criteria for transfer to a secure psychiatric facility under the Mental Health Act do not wait more than 14 days for such a move. In the meantime, they are supported by mental health services staff.

Evidence References
Staff: check the experiences of managers and staff. R (98)7, III.D.55
Cross-reference with health services inspector EPR 43(2), 46, & 47

48. A multidisciplinary staff group monitors adherence to PSO1700, and trends in the use of segregation. There is evidence that they are able to satisfy themselves that the staff culture supports the aim of individual management and care for segregated prisoners. Quarterly reports for the governor and area manager include:

- the number in segregation
- the length of stay
- individual reports on those held for less than three months
- the use of close confinement as punishment
- the use of personal protective equipment
- the proportion of black and minority ethnic prisoners under adjudication and in segregation
- the number failing the algorithm
- the number of upheld complaints
- the number of segregation-to-segregation transfers
- the use of special accommodation.

Evidence References
Managers: ask about segregation policy. EPR 72(3), 74, & 83
Documentation: check the segregation policy, minutes of SMARG (seclusion monitoring and review group) meetings and quarterly reports to the area manager.
Incentives and earned privilege schemes are well-publicised, designed to improve behaviour and are applied fairly, transparently and consistently within and between establishments, with regular reviews.

**Expectations**

1. **Staff and prisoners are clear about the IEP scheme and its criteria for promotion and demotion.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 35</td>
</tr>
<tr>
<td><strong>Documentation</strong></td>
<td>EPR 30(1 &amp; 2)</td>
</tr>
<tr>
<td>Staff: ask staff about details of all levels of the scheme and the policy of promotion and demotion.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check prisoners’ understanding of the IEP scheme especially those whose first language is not English.</td>
<td></td>
</tr>
</tbody>
</table>

2. **There is sufficient difference between the levels to encourage responsible behaviour and compliance with sentence planning targets.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check criteria for different IEP levels and check IEP records.</td>
<td>SMR 70</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td>EPR 25, 102</td>
</tr>
<tr>
<td>Questionnaire</td>
<td></td>
</tr>
</tbody>
</table>

3. **Prisoners do not receive different levels of pay for the same job. Enhanced prisoners may receive a financial bonus which is unrelated to their work pay.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners on different IEP levels who hold the same post about pay differentials.</td>
<td>EPR 26(10)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check pay records for prisoners on different levels of the IEP scheme with the same jobs.</td>
<td></td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
Section 6 – good order  Incentives and earned privileges

4. Prisoners are able to retain their enhanced status on transfer from another prison.

Evidence

Prisoners: individual interviews if possible.

Documentation: check whether IEP level is recorded on the prisoner escort record and if there are delays in establishing the enhanced status of transferred prisoners.

5. The IEP scheme is operated consistently and fairly across the prison.

Evidence

Questionnaire
Observation: check groups such as vulnerable prisoners, disabled prisoners, black and minority ethnic groups etc., are not disadvantaged directly or indirectly.

References

Questionnaire BPTP 2
Observation BOP 5
SMR 6(1) & 70
EPR 25

6. The IEP scheme is not linked with voluntary drug testing used for therapeutic purposes.

Evidence

Documentation: check details of scheme.

Cross-reference with substance use inspector

7. The regime for prisoners on the lowest level provides sufficient opportunity and support for them to demonstrate improvement in their behaviour.

Evidence

Documentation: check details of basic level of scheme.

Prisoners: case studies.

References

Documentation SMR 70
Prisoners EPR 102

8. The availability of accommodation does not restrict a prisoner’s progress or access to privileges under the IEP scheme.

Evidence

Observation: check that enhanced status is not limited by lack of suitable accommodation, and that if enhanced prisoners are outside designated ‘enhanced’ accommodation, they do not lose out on other enhanced privileges.

Staff: ask residential governor.

HMIP: Expectations
### Section 6 – good order

#### Incentives and earned privileges

<table>
<thead>
<tr>
<th>9.</th>
<th>Prisoners are promoted or demoted on the basis of their behaviour over a period of time rather than as a consequence of individual acts.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td>Documentation: check recent reviews of demoted or promoted prisoners.</td>
<td>SMR 70</td>
</tr>
<tr>
<td>EPR 102</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10.</th>
<th>Older prisoners and those with a disability are not penalised under the IEP scheme if they are unable to meet privilege level requirements because of age and health limitations.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td>Documentation: check IEP assessments of older prisoners and those with a disability.</td>
<td>EPR 13</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11.</th>
<th>Prisoners who are likely to be demoted are warned in writing beforehand. Staff consult prisoners and inform them in writing of the findings of any review.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td>Staff: ask about those demoted in the last month and how the procedures account for those who are less able to read and write in English.</td>
<td>BPTP 1</td>
</tr>
<tr>
<td>BOP 1</td>
<td></td>
</tr>
<tr>
<td>SMR 70</td>
<td></td>
</tr>
<tr>
<td>Prisoners: interviews or case studies.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12.</th>
<th>Prisoners do not experience the double jeopardy of receiving a disciplinary award and being placed on a basic regime.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evidence</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td>Staff: ask about disciplinary procedures.</td>
<td>SMR 30 (1)</td>
</tr>
<tr>
<td>Documentation: check records of those on basic and outcomes of adjudications.</td>
<td>EPR 63</td>
</tr>
<tr>
<td>Prisoners: groups.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with discipline inspector</td>
<td></td>
</tr>
</tbody>
</table>

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HMIP: Expectations
### Section 6 – good order

Incentives and earned privileges

13. **Prisoners can appeal against IEP decisions and are helped to do so.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> groups.</td>
<td>BOP 33(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check recent appeals.</td>
<td>EPR 70(1)</td>
</tr>
</tbody>
</table>

14. **The IEP scheme is monitored and reviewed at least annually by senior managers to check for fairness and to encourage responsible behaviour.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>BPTP 2</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check for evidence of recent reviews and subsequent changes in scheme. Check awards are motivating for a diverse range of prisoners and that they have been developed in consultation with them.</td>
<td>BOP 5 &amp; 7</td>
</tr>
<tr>
<td></td>
<td>SMR 6(1)</td>
</tr>
</tbody>
</table>
Catering

Prisoners are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

Expectations

1. All areas where food is stored, prepared or served conform to the relevant food safety and hygiene regulations.

   **Evidence**
   - **Observation:** check areas such as kitchens, serveries, communal eating areas, and waste disposal areas, and that appropriate protective clothing is worn. Check storage of food and cleanliness on night visit.
   - **Documentation:** check health and safety reports and environmental health officer reports.

   **References**
   - HSA 2(1), 7
   - SMR 14, 26(1) & (2)
   - PR 24(2) & (3)
   - EPR 22(3)

2. Religious, cultural or other special dietary requirements relating to food procurement, storage, preparation, distribution and serving are fully observed and communicated to prisoners.

   **Evidence**
   - **Observation:** check menus/records for past month, and use of e.g. halal meat. Check halal certificates are displayed where prisoners can see them. Check use of appropriate serving utensils to avoid cross-contamination.
   - **Documentation:** check for impact assessment.
   - **Staff:** ask kitchen staff about special arrangements for different types of food, and special dietary requirements for e.g. pregnant women, specific religions, foreign nationals, prisoners with disabilities etc.
   - **Prisoners:** ask prisoners who specify special diets if they have confidence in the preparation and content of specialist meals.

   **References**
   - ICCPR 18 & 27
   - EPR 22(1)
3. **All areas where food is stored, prepared or served are properly equipped and well managed.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong></td>
<td>HSA 2(1) &amp; 7</td>
</tr>
<tr>
<td>check management</td>
<td>SMR 20(1) &amp; 26(1)</td>
</tr>
<tr>
<td>of catering</td>
<td>EPR 22(3)</td>
</tr>
<tr>
<td>facilities and</td>
<td></td>
</tr>
<tr>
<td>condition and use</td>
<td></td>
</tr>
<tr>
<td>of equipment</td>
<td></td>
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<tr>
<td>during day and</td>
<td></td>
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<tr>
<td>night visits.</td>
<td></td>
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<tr>
<td>Check food</td>
<td></td>
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<tr>
<td>temperature</td>
<td></td>
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<tr>
<td>is logged at</td>
<td></td>
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<tr>
<td>point of serving.</td>
<td></td>
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<tr>
<td><strong>Staff:</strong></td>
<td></td>
</tr>
<tr>
<td>speak to catering</td>
<td></td>
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<tr>
<td>managers.</td>
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</tr>
</tbody>
</table>

4. **Prisoners and staff who work with food are health screened and trained, wear proper clothing and prisoners are able to gain relevant qualifications.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong></td>
<td>HSA 2(1) &amp; 7</td>
</tr>
<tr>
<td>check that all</td>
<td>SMR 26(1), 71(4) &amp;</td>
</tr>
<tr>
<td>kitchen workers</td>
<td>EPR 22(3), 26(3, 5</td>
</tr>
<tr>
<td>are wearing the</td>
<td>13)</td>
</tr>
<tr>
<td>proper clothing.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong></td>
<td></td>
</tr>
<tr>
<td>check qualifications/medical clearance forms</td>
<td></td>
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<tr>
<td>of servery workers</td>
<td></td>
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<tr>
<td>and training</td>
<td></td>
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<tr>
<td>courses offered.</td>
<td></td>
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<tr>
<td><strong>Prisoners:</strong></td>
<td></td>
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<tr>
<td>ask about training</td>
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<tr>
<td>offered.</td>
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</tbody>
</table>

5. **Prisoners’ meals are healthy, varied and balanced and always include one substantial meal each day.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>SMR 20(1)</td>
</tr>
<tr>
<td>check menus/records for past month.</td>
<td>EPR 22(1) &amp; (4)</td>
</tr>
<tr>
<td><strong>Observation:</strong></td>
<td>PR 24(2)</td>
</tr>
<tr>
<td>prisoners should</td>
<td></td>
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<tr>
<td>be encouraged to</td>
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<tr>
<td>eat healthily and</td>
<td></td>
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<tr>
<td>are able to eat</td>
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<tr>
<td>five portions of</td>
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<tr>
<td>fruit or vegetables a day.</td>
<td></td>
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<tr>
<td>Prisoners on</td>
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<tr>
<td>transfer or at</td>
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<tr>
<td>court do not miss</td>
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<tr>
<td>out on their main</td>
<td></td>
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<tr>
<td>meal.</td>
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</tbody>
</table>

6. **Prisoners have a choice of meals including an option for vegetarian, vegan, religious, cultural and medical diets. All menu choices are provided to the same standard.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>EPR 22(1)</td>
</tr>
<tr>
<td>check menus/records for past month and that</td>
<td>PR 24(2)</td>
</tr>
<tr>
<td>there are a wide variety of cultural options broadly representative of the population.</td>
<td></td>
</tr>
</tbody>
</table>
**Section 7 — services**

**Catering**

**Prisoners:** ask if options for religious or cultural groups are open to all and not just those who practise their religion officially.

*Cross-reference with faith and religious activity inspector*

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**7. Prisoners are consulted about the menu and can make comments about the food.**

**Evidence**

- **Prisoners:** ask in groups about consultation.
- **Staff:** ask about recent prisoner consultation and use of prisoner comments. If logs of comments are kept, ask how frequently they are consulted.
- **Documentation:** check food comments book.

**References**

- EPR 50

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**8. The breakfast meal is served on the morning it is eaten.**

**Evidence**

- **Observation:** check breakfast packs are not distributed the day before.

**References**

- SMR 20(1)

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**9. Lunch is served between noon and 1.30pm and dinner between 5pm and 6.30pm.**

**Evidence**

- **Observation:** check servery times for all wings.

**References**

- SMR 20(1)
- EPR 22(4)

---

**10. Prisoners have access to drinking water (including at night time), and the means of making a hot drink after evening lock-up.**

**Evidence**

- **Observation:** check access to drinking fountains on the wing and during the night, and whether prisoners can use flasks for hot water.

**Staff:** check with night staff if no access in cells.

**References**

- SMR 20(2)
- EPR 22(5)
- PR 24(4)
Section 7 – services

Catering

11. Prisoners are able to dine in association (except in exceptional circumstances).

**Evidence**

Observation: check any areas suitable are in use.

**References**

- SMR 27
- EPR 3–8(10), 25(2), & 49

12. Staff supervise the serving of food in order to prevent tampering with food and other forms of bullying.

**Evidence**

Observation: check supervision of servery and queues.

**References**

- HSA 8
- EPR 39

Cross-reference with bullying inspector

13. Where prisoners are required to eat their meals in their cells, they are able to sit at a table with the cell toilet fully screened off.

**Evidence**

Observation: check cells on all units.

**References**

- ICCPR 10(1)
- SMR 10
- EPR 22(2)

14. Pregnant prisoners and nursing mothers receive appropriate extra food supplies.

**Evidence**

Observation: check facilities and health and hygiene arrangements.

**References**

- SMR 20(1)
- EPR 22(6) & 34(1)
- PR 12(2)

15. All prisoners in training prisons are given the opportunity to cater for themselves.

**Evidence**

Observation: check facilities and access, particularly for long-term prisoners.

**Staff**: check on level of supervision and how staff ensure that bullying and restricted access does not occur.

**Prisoners**: ask groups and in interviews.

**References**

- PR 3
- SMR 71(3 & 6)

Cross-reference with bullying inspector

HMIP: Expectations
Prison shop

Prisoners can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely, from an effectively managed shop.

Expectations

1. **Prisoners have access to a wide range of all products on offer and the range and cost of items are comparable to that of a local supermarket.**

   **Evidence**
   - Questionnaire
   - Documentation: check canteen lists. Check for impact assessment.
   - Observation: fruit and other healthy snacks should be available as well as crisps and confectionery.

   **References**
   - SMR 60(1)
   - EPR 31(5)

2. **The list of goods available to prisoners is publicised prominently on every residential wing, any price changes during the last six months can be justified by changes in prices outside the prison and any restrictions on products are based on sound evidence.**

   **Evidence**
   - Observation: check promotion of lists on wings is in a format accessible to all prisoners.
   - Documentation: check records of price changes – price changes should be kept to an absolute minimum as wages do not go up in line with price rises and those without access to private money, e.g. foreign nationals, may suffer disproportionately. Check the evidence for any restrictions on products sold in the prison shop.

   **References**
   - SMR 35 & 60(1)
   - EPR 30(1)

3. **The range of goods available reflects the diverse needs of the prisoner population.**

   **Evidence**
   - Questionnaire
   - Documentation: look at the proportion of disabled prisoners and those from black and minority ethnic backgrounds and the range catered for. Check canteen lists, e.g. the sale of airmail letters, and that newspapers/magazines reflect the diversity of the population.

   **References**
   - BPTP 3
   - SMR 6

**HMIP: Expectations**
Section 7 – services

Prison shop

4. Prisoners are able to buy items from the prison shop within 24 hours of arrival.

   Evidence

   Questionnaire
   Observation: check procedures during reception and induction.
   Cross-reference with first days in custody inspector

5. Any prisoner who arrives at reception without private money is offered an advance of up to one week’s pay, to use in the prison shop, with repayment staged over a period of time.

   Evidence

   Observation: check procedures during reception and induction.
   Cross-reference with first days in custody inspector

6. If prisoners are away from the prison on any form of authorised absence on the day they would normally use the shop, they are able to order purchases on the same day, and receive all items ordered by the following day.

   Evidence

   Prisoners: speak to any prisoners to whom this may have applied.
   Staff: ask staff in shop about normal procedure.

7. Prisoners can use the prison shop or place orders with it at least once a week.

   Evidence

   Prisoners: groups
   Documentation: procedure of shop.
   Observation: ensure weekly access applies to all wings.

   References

   SMR 60(1)

8. All prisoners are able to access accurate and up-to-date records of their finances.

   Evidence

   Documentation: check records are maintained and are offered in an accessible format.
   Prisoners: ask about any recent enquiries made.
Section 7 – services

Prison shop

9. Prisoners are able to order items from catalogues, and are not charged an administration fee if they do so.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check availability of catalogue and policy of orders.</td>
<td>SMR 60(1)</td>
</tr>
<tr>
<td>Prisoners: check any who have made such orders.</td>
<td>BOP 28</td>
</tr>
</tbody>
</table>

10. Attendance at the shop or delivery of bagged items have visible and active supervision by staff.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>SMR 27</td>
</tr>
<tr>
<td>Observation: observe supervision of shop when attended by prisoners.</td>
<td></td>
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</tbody>
</table>

11. Prisoners can buy a newspaper every day if they wish to, and can buy all approved magazines within one week of the publication date.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BOP 28</td>
</tr>
<tr>
<td>Documentation: check canteen lists and/or policy. Check that canteen list and/or policy offers access to publications available on the high street and caters for the diverse needs of all prisoners.</td>
<td>SMR 39N &amp; 60(1)</td>
</tr>
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<td></td>
<td>EPR 24(10)</td>
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</table>

12. A wide range of approved hobby materials is available, and prisoners can purchase approved hobby materials from external sources.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>BOP 28</td>
</tr>
<tr>
<td>Documentation: check canteen list and external sources of orders.</td>
<td>SMR 60(1)</td>
</tr>
<tr>
<td></td>
<td>EPR 27(6)</td>
</tr>
</tbody>
</table>
13. Staff systematically consult with prisoners/prisoner representatives at least every three months about what items they would like to see on the shop list or available through alternative means.

**Evidence**

**Questionnaire**

**Documentation:** verify recent changes in items on canteen lists are as a direct result of prisoner feedback and evidence of meetings, including input from prisoners from black and minority ethnic groups.
Resettlement underpins the work of the whole establishment, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need.

**Expectations**

1. **The prison has an up-to-date resettlement strategy that directly contributes to or supports the multi-agency regional strategy.** Prison staff work collaboratively with both statutory and non-statutory agencies to achieve agreed results and improve outcomes for prisoners.

   **Evidence**
   - **Documentation**: cross-reference action points in multi-agency regional strategies with local strategy and action plans and strategy for the resettlement of women prisoners. Look at notes of regional and inter-agency meetings for prison representation/input. Check prison strategies and action plans address all seven strategic pathways (contained in national reducing reoffending action plan) or give acceptable reasons for any omissions.
   - **Staff**: managers and staff (including non-prison staff) involved in resettlement work know about the regional strategy and what the prison is doing to contribute to it.

   **References**
   - SMR 58, 59, 60, 61 & 66
   - EPR 7, 83(b) & 107

2. **The type and range of resettlement services provided for prisoners is based on an up-to-date assessment of the resettlement needs of all categories of prisoner represented within the prison’s population. Adequate attention is paid to diversity issues and to meeting the needs of minority groups.**

   **Evidence**
   - **Documentation**: check for up-to-date (within 12 months) formal needs analysis of resettlement needs or evidence of ongoing monitoring. Check services cater for the needs of all groups of prisoners identified within the population profile.
   - **Staff**: check managers and staff have an accurate perception of the prison’s current population. Check staff working with specific groups such as women, indeterminate sentenced prisoners, foreign nationals, older prisoners, disabled prisoners, recalled and unsentenced prisoners are aware of the relevant services and how they apply to these populations.

   **References**
   - SMR 66(1)
   - EPR 103(2)
   - PR 5
Section 8 – resettlement

3. The provision of interventions and programmes, especially those intended to address offending behaviour, is appropriate and sufficient to meet the needs of the prisoner population. Prisoner access to interventions and programmes is fair and well managed.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check how managers decide which interventions are to be provided. Check what data is available about the offence-related needs of the population. Check that interventions are informed by OASys/ASSET and other shared information. See what alternatives there are to groupwork programmes. Check how many places are provided and how access to those places is determined/prioritised. See how many prisoners there are on waiting lists – check they will realistically be able to access the intervention. Ensure targets are completed and courses are finished before release/transfer. Check shared information system is updated. Check that any offending behaviour programmes delivered in women's prisons are validated for use with women offenders. Check older and disabled prisoners can access and participate in interventions.</td>
<td>EPR 6 &amp; 102(1) SMR 61</td>
</tr>
<tr>
<td><strong>Prisoners</strong>: groups; case studies – cross-referencing to targets in sentence plans.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff</strong>: check they understand criteria for selection/prioritisation. Check accuracy of justifications for exclusions. Seek evidence of collaboration between offender, offender supervisor and offender manager.</td>
<td></td>
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</table>

4. Senior managers provide the strategic overview and direction necessary to ensure the resettlement strategy is implemented, monitored and reviewed in the most effective way. Service providers are able to share information, discuss progress and contribute to developments in policy and practice.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: notes of resettlement policy committees and associated meetings; notes of senior management meetings/internal audit reports.</td>
<td>EPR 83(b)</td>
</tr>
<tr>
<td><strong>Staff</strong>: managers and staff involved in the planning and delivery of resettlement services are clear about areas of responsibility and lines of accountability. Check all staff feel able to contribute in an appropriate way.</td>
<td></td>
</tr>
</tbody>
</table>
Section 8 – resettlement

Strategic management of resettlement

5. Monitoring of the quality and outcome of resettlement services and the development of policy and practice includes taking account of the views and experiences of prisoners, ex-prisoners and offender managers.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> look for evidence of consultation with prisoners, ex-prisoners and offender managers through surveys, forums and meetings. Check notes of prisoner consultative meetings. Look for evidence of action on the basis of feedback.</td>
<td>EPR 103(3) &amp; 104(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask managers and service providers for examples of how user perspectives are sought and used. Ask how they evaluate prisoners’ achievements once they have been released.</td>
<td></td>
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</tbody>
</table>
Offender management and planning

All prisoners have a sentence or custody plan based upon an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved in drawing up and reviewing plans.

Expectations

1. **All prisoners, including unconvicted prisoners, have their individual risk and resettlement needs assessed by suitably trained staff. Where relevant, prisoners have an up-to-date offender assessment system (OASys) assessment.**

   **Evidence**
   - **Documentation:** check monitoring data and document checks made on reception and in custody office.
   - **Staff:** check allocation to offender manager/supervisor as appropriate.
   - **Observation:** sample of prisoner records, completed assessments.

   **Cross-reference with first days in custody inspector**

   **References**
   - EPR 51(3) & 52(1)
   - SMR 80

2. **All prisoners have a written plan that specifies how their specific resettlement needs will be met during and post custody. Sentence/custody plans take account of existing risk and needs assessments and plans relating to the management of the prisoner.**

   **Evidence**
   - **Questionnaire**
   - **Observation:** attend sentence planning board. Look at sample of prisoner records – use should be made of available information such as existing OASys assessment/information in pre- and post-sentence reports, SIRs, observations in custody and child protection or MAPPA plans where applicable. Check that sentence plans and OASys assessments take into account the diverse needs of the prisoner population e.g. older and disabled prisoners etc.
   - **Staff:** check how staff in a variety of departments (e.g. probation, education, PE, chaplaincy) contribute to sentence planning.

   **References**
   - EPR 103
   - SMR 69
Section 8 – resettlement

3. Assessments and sentence/custody plans are completed within an appropriate or pre-determined time scale, depending on the probable length of time spent in custody. Reviews take place at suitable intervals and following any significant change in circumstances.

**Evidence**

**Documentation:** look at policy documents or published targets covering completion of sentence plans and reviews — targets either meet national requirements or are reasonable given the needs of the prisoner population. Check monitoring data, schedules for sentence planning and review boards. Check that indeterminate sentenced prisoners have at least annual reviews.

**Observation:** look at a sample of prisoner records to evidence whether plans and reviews take place and are timely.

**References**

EPR 103 & 104(2)
SMR 69

4. Assessments and sentence/custody plans are produced and reviewed jointly with the prisoner and all staff or agencies directly involved with the prisoner. Prisoners are enabled to actively participate in the sentence/custody planning process including attendance at boards.

**Evidence**

**Questionnaire**

**Observation:** attend sentence planning board and see who is attending – where appropriate prisoners’ families should also attend. Check that the location of the board is suitable for older and infirm or disabled prisoners or that a suitable alternative is offered.

**Documentation:** check specifically for contribution of multi-disciplinary staff to reviews for indeterminate sentenced prisoners.

**Staff:** check arrangements for involving families and outside agencies with knowledge of or involvement with the prisoner. Check whether the organisation of sentence planning encourages and enables staff from other agencies to actively participate. Discuss with staff from a range of departments/agencies as well as sentence planning staff.

**Prisoners:** check their knowledge and experience of the sentence planning process and whether they have access to copies of their sentence plan or targets. Ask whether they get the opportunity to see their reports in advance of any board/review meeting and if so, how far in advance (should be at least 24hrs).

**References**

EPR 103(3) & 104(2)
SMR 69
5. Sentence/custody plans contain SMART, outcome-focused targets that identify appropriate interventions to address reduction of harm and risk of reoffending and to promote community reintegration.

**Evidence**
- **Documentation**: look at a sample of completed sentence plans. Check whether targets relate to the whole sentence or just to what is available in this prison. Check time-scales are clearly identified and responsibilities allocated. Check that targets include learning and skills targets.
- **Staff**: discuss quality and appropriateness of targets with sentence planning staff and managers.

**References**
- EPR 102(1) & 103(4)

6. Prisoners subject to public protection measures or assessed as presenting a high risk of harm to others are informed of the arrangements for managing their risk, the implications for them personally and the avenues available to them for challenge.

**Evidence**
- **Documentation**: check information to prisoner, case records and sentence plans. Check arrangements for child visitors to those who pose a risk of harm to children.
- **Prisoners**: individual interviews.

**References**
- SMR 35
- EPR 30(1) & 71(1)

7. Interventions with prisoners are delivered on time and in an appropriate sequence, in a suitable environment and meet professional or other agreed quality standards.

**Evidence**
- **Documentation**: check service level agreements about provision of rooms and other resources and IQR reports for offending behaviour programmes. Ensure interventions are validated from research with the offenders that are participating.
- **Observation**: of groups or interviews.

**References**
8. **Requirements for prisoners to participate in activities or interventions and any restrictions placed upon them are proportionate to the risk they present, justifiable and subject to appropriate oversight.**

**Evidence**

**Documentation:** check public protection policy and notes of public protection or risk management meetings including external MAPPA meetings. Check that requirements are responsive to individual circumstances and there is no blanket application of requirements/restrictions.

**Observation:** attend public protection or risk management meetings. Check information and intelligence is provided from a range of sources and appropriate attention paid to meeting the resettlement needs of the prisoner.

**Prisoners:** case studies.

*Cross-reference with activities, contact with the outside world and resettlement pathways inspectors*

9. **A quality assurance system is in place to monitor the quality of assessments and sentence/custody plans and to ensure sentence planning meets the needs of individual prisoners throughout their sentence.**

**Evidence**

**Documentation:** evidence of independent quality assurance assessments and of feedback to staff.

10. **Each prisoner works in conjunction with an identified member of staff who is responsible for ensuring that sentence/custody plan targets are prioritised, implemented and achieved.**

**Evidence**

**Documentation:** check policy document or written guidance that specifies this role for sentence planning staff, personal officers or other designated staff (including offender supervisor and manager where applicable).

**Staff:** check staff understand the role and are given training and support to carry it out.

**Prisoners:** ask whether they can name their nominated officer and what work is being done to progress their sentence plan targets.

**References**

**EPR 72(3) & 74**
11. There is a high level of integration between sentence/custody planning and other functions within the prison. Key decisions about an individual prisoner and how they will spend their time in custody are always based on or take account of the sentence/custody plan.

**Evidence**

**Observation:** see whether all relevant staff have access to a prisoner's sentence plan targets – check how targets are distributed/stored (computer systems/prisoner wing history files/agency files) for a selection of departments.

**Staff:** ask about processes such as labour allocation, recategorisation, transfers and consideration for early release – check they make active use of the current sentence plan.

*Cross-reference with activities, resettlement pathways and substance use inspectors.*

**12.** Information about prisoners is managed and stored with respect for confidentiality. Staff in all departments are aware of public protection and risk management issues and there is prompt and accurate communication regarding individual prisoners.

**Evidence**

**Documentation:** check public protection policy and procedures including inter-agency protocols on information exchange, notifications to external agencies and monitoring data.

**Staff:** check their training records. Check staff awareness of the risk presented by prisoners with whom they have contact.

**Observation:** see where information is stored and who has access to it. Check whether staff are discreet in their handling of written and verbal information about prisoners.

*Cros-reference to residential units, health services, activities and resettlement pathways inspectors*

**13.** Prisoners can remain at their current prison or transfer to another prison in order to complete sentence plan targets. Sentence and care planning and preparation for release are not jeopardised by unplanned transfers.

**Evidence**

**Documentation:** check policy on ‘holding’ prisoners and statistics for

*HMIP: Expectations*
transfers out of the prison.

**Staff:** check arrangements for transferring information between prisons.

*CROSS-REFERENCE WITH CATEGORISATION, LEARNING & SKILLS, RESETTLEMENT PATHWAYS, HEALTH SERVICES AND SUBSTANCE USE INSPECTORS*

14. **Prisoners experience continuity in the delivery of interventions especially following transfers between establishments and on release into the community. Decisions to depart from the agreed sentence or care plan are made as a last resort and are recorded and justifiable based on the prisoner’s needs and changing circumstances.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check sentence plans completed on prisoners following transfer for any significant changes to the targets – see whether reasons for changes are recorded.</td>
<td>EPR 102(1) &amp; 107(4)</td>
</tr>
<tr>
<td><strong>Staff:</strong> check personal officers/offender supervisors’ work with offender managers to plan supervision arrangements post release.</td>
<td>SMR 81(1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> case studies.</td>
<td></td>
</tr>
<tr>
<td><em>CROSS-REFERENCE WITH HEALTH SERVICES, SUBSTANCE USE AND RESETTLEMENT PATHWAYS INSPECTORS</em></td>
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</table>

15. **All prisoners risk assessed and approved for home detention curfew and parole are released on the earliest eligible date. Prisoners are not transferred unnecessarily between establishments while their risk assessments are being carried out.**

<table>
<thead>
<tr>
<th>Evidence</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check MAPPA cases are flagged up to decision makers before awarding periods of home detention curfew. Check records.</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners about process.</td>
</tr>
</tbody>
</table>

16. **Recalled sentenced prisoners or revokees are transferred to prisons with full regimes for such prisoners as soon as possible after recall and are subject to sentence planning procedures.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> reception and induction staff promptly identify recalled</td>
<td>SMR 66 &amp; 69</td>
</tr>
</tbody>
</table>

HMIP: **Expectations**
Section 8 – resettlement

prisoners and make appropriate referrals. Speak to wing staff and check that recalled or revoked prisoners have sentence plans.

**Prisoners:** speak to any recalls or revokees.

*Cross-reference with arrival in custody, categorisation and allocation and legal services inspectors*

17. **Wherever possible, prisoners are given the opportunity to spend their last months in custody in the area where they will be discharged.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check local and area resettlement policy.</td>
<td>SMR 80</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to OCA staff.</td>
<td>EPR 17(1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check whether any prisoners have transferred for local release.</td>
<td></td>
</tr>
</tbody>
</table>

Expectations – indeterminate sentenced prisoners

18. **Prisoners who face an indeterminate sentence are identified on remand, given support and have the elements and implications of an indeterminate sentence explained to them and, where appropriate, to their families.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check records of potential indeterminate sentenced prisoners on remand, e.g. check home probation officer has been contacted.</td>
<td>EPR 30(1)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to allocated officers.</td>
<td>SMR 35(1)</td>
</tr>
</tbody>
</table>

19. **Indeterminate sentenced prisoners and, where appropriate, their families are told about and have their tariffs explained by a suitably trained officer.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to allocated officers and ask about training.</td>
<td>SMR 35(1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td>EPR 30(1) &amp; 81(3)</td>
</tr>
</tbody>
</table>

HMIP: Expectations
20. **Indeterminate sentenced prisoners are transferred to first stage prisons as soon as practicable after the prison has contributed to the multi-agency risk panel.**

**Evidence References**

<table>
<thead>
<tr>
<th>Documentation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>SMR 69</td>
<td></td>
</tr>
<tr>
<td>EPR 51(4) &amp; 103(1)</td>
<td></td>
</tr>
</tbody>
</table>

21. **At all training, dispersal or open prisons holding indeterminate sentenced prisoners a minimum of two days per year are designated for events that will enable them to understand and engage with risk reduction and their eventual reintegration.**

**Evidence References**

<table>
<thead>
<tr>
<th>Documentation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPR 102(1) &amp; 107(4)</td>
<td></td>
</tr>
<tr>
<td>SMR 69</td>
<td></td>
</tr>
<tr>
<td>EPR 51(4) &amp; 103(1)</td>
<td></td>
</tr>
</tbody>
</table>

**Prisoners:** speak to indeterminate sentenced prisoners about provision.

**Staff:** speak to staff responsible for the delivery.
Prisoners’ resettlement needs are met under the seven pathways outlined in the Reducing Reoffending National Action Plan. An effective multi-agency response is used to meet the specific needs of each individual offender in order to maximise the likelihood of successful reintegration into the community.

Expectations – Pathway One: accommodation

1. **Prisoners are able to access specialist services that provide assistance and advice in finding accommodation after release. Services are widely advertised.**

   **Evidence**
   - Questionnaire
   - Documentation: check resettlement strategy, SLAs and publicity notices.

   **References**
   - SMR 81(1)
   - EPR 33(7)

   **Staff:** check residential staff are aware of different services available.
   Ask whether specialist providers are proactive in approaching prisoners, i.e. on induction or pre-release, or whether they only see clients following referrals/applications. Speak to specialist providers.
   **Prisoners:** groups. Check prisoners know who in the prison can give them assistance with accommodation issues and whether they can access them when necessary.

2. **Specialist accommodation advice meets the diverse needs of the prisoner population.**

   **Evidence**
   - Documentation: check resettlement strategy, SLAs and publicity notices. Check services cater for the differential needs of women, older prisoners, prisoners with disabilities, black and minority ethnic prisoners and those with mental health needs.

   **References**
   - SMR 81(1)
   - EPR 33(7)

   **Staff:** speak to specialist providers and ascertain what services they are able to provide to prisoners with different needs including awareness of landlords’ duties under the DDA.
   **Prisoners:** groups.
Section 8 – resettlement

Pathway Two: education, training and employment

3. **Specialist accommodation services are effective in maintaining existing housing for prisoners and in finding new accommodation for those who have no fixed abode on release.**

**Evidence**

**Documentation:** check for evidence that the services make a difference. Ascertain how the establishment gauges its success against this pathway. Check whether the KPT target is meaningful and based on the population profile and linked into the area strategy for reducing homelessness. Check records are kept of the number of clients for whom accommodation is secured.

**Staff:** speak to specialist providers and resettlement manager.

**Prisoners:** speak to prisoners approaching release dates, plus prisoners who have recently completed their induction in locals. Check no prisoners from the resettlement estate are released without accommodation to go to.

**References**

SMR 61 & 81(1)

EPR 33(7)

4. **Prisoners in the resettlement estate who wish to relocate on the basis of local employment they have secured while at the establishment are assisted to do so.**

**Evidence**

**Documentation:** check resettlement strategy and exit surveys. Check the opportunities for all category C and D prisoners (and equivalent from the young adult/women’s estate). Check whether prisoners had to give up work that they’d wanted to keep because they were unable to relocate locally.

**Staff:** speak to specialist housing providers, resettlement manager, probation staff/offender managers.

**Prisoners:** speak to prisoners on working-out schemes.

**References**

SMR 61

Expectations – Pathway Two: education, training and employment

*Cross-reference with learning and skills and work expectations*

5. **Prison regimes provide a suitable training/learning environment to prepare prisoners for work, training or education after release. Activities available for prisoners are relevant and based on a needs assessment of the population profile and an understanding of skills shortages and vacancies in the relevant labour market.**

HMIP: Expectations
Section 8 – resettlement

Pathway Two: education, training and employment

Evidence

Documentation: check resettlement strategy, resettlement needs assessment, self assessment report and development plan. Look at the quality of the regime activities available - check they are geared around learning and skills acquisition rather than generating revenue for the establishment. Look for evidence of good links between the learning and skills department, residential units and the resettlement department.

Staff: speak to resettlement manager, head of learning and skills, and specialist providers (i.e. Connections, Jobcentre plus).

Cross-reference with activities inspector

Evidence

References

Documentation: check resettlement strategy, resettlement needs assessment, self assessment report and development plan. Look at the quality of the regime activities available - check they are geared around learning and skills acquisition rather than generating revenue for the establishment. Look for evidence of good links between the learning and skills department, residential units and the resettlement department.

Staff: speak to resettlement manager, head of learning and skills, and specialist providers (i.e. Connections, Jobcentre plus).

Cross-reference with activities inspector

6. Prisoners are able to access services that provide assistance, advice and information on finding employment, training or education after release. Services are widely advertised.

Evidence

Questionnaire

Documentation: check resettlement strategy, SLAs, induction material and publicity material. Services will vary but typically include specialist careers advice services, jobs skills courses, information on vacancies/help with job searches, assistance with the cost of job applications through provision of stationery/stamps, liaison with potential employers etc.

Staff: speak to specialist providers and residential staff – check they are aware of services available.

Prisoners: groups. Check prisoners know who they can go to for help/advice and whether they can access the services when necessary.

Evidence

References

Questionnaire

SMR 81(1)

EPR 33(7)

Documentation: check resettlement strategy, SLAs, induction material and publicity material. Services will vary but typically include specialist careers advice services, jobs skills courses, information on vacancies/help with job searches, assistance with the cost of job applications through provision of stationery/stamps, liaison with potential employers etc.

Staff: speak to specialist providers and residential staff – check they are aware of services available.

Prisoners: groups. Check prisoners know who they can go to for help/advice and whether they can access the services when necessary.

Evidence

References

Documentation: check resettlement strategy and exit surveys. Check SMR 80 & 81 records are kept of achievements and trends are analysed and used to inform practice. Check whether the secured employment is actual and viable. Check for evidence that the services make a difference. See how the establishment gauges its success against this pathway. Check the KPT target is meaningful and linked to the area resettlement strategy.

Evidence

References

Documentation: check resettlement strategy and exit surveys. Check SMR 80 & 81 records are kept of achievements and trends are analysed and used to inform practice. Check whether the secured employment is actual and viable. Check for evidence that the services make a difference. See how the establishment gauges its success against this pathway. Check the KPT target is meaningful and linked to the area resettlement strategy.

HMP: Expectations
**Section 8 – resettlement**

Pathway Two: education, training and employment

**Staff:** speak to Jobcentre plus, other specialist providers and the resettlement manager. Check staff are aware of employers’ duties under disability legislation.

**Prisoners:** speak to prisoners approaching release dates.

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8. **Prisoners are assisted to find employment, in their home areas, which can be retained after release.**

**Evidence**

**Documentation:** check resettlement strategy and exit surveys. Check the opportunities for all category C and D prisoners (and equivalent from the young adult/women’s estate). Look for local links with national employers, particularly for prisons where prisoners undertake paid work before release.

**Prisoners:** ask how many prisoners retain their jobs on release.

**References**

SMR 81(1)
EPR 33(7) & 107(1 & 4)

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9. **All prisoners in the resettlement estate complete a job skills course before commencing outside placements in the community.**

**Evidence**

**Documentation:** check resettlement strategy, course content material and course feedback sheets. Check prisoners are being adequately prepared to begin community placements.

**Staff:** speak to those who deliver the course. Check the course is accredited.

**Prisoners:** ask whether the course was helpful and whether everyone got the opportunity to participate.

**References**

EPR 107(1)

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10. **Subject to risk assessment and identified need as part of a formal resettlement plan, all category C and D prisoners (and equivalent from the young adult/women’s estate) have the opportunity to apply for work or education in the community during at least their last three months of sentence.**

**Evidence**

**Documentation:** check resettlement strategy, local ROTL policy statement, ROTL applications and sentence plans/OASys assessments. Look for proactive use of ROTL to facilitate resettlement. Check sentence plans are focused on long-term objectives and if the prison allows prisoners the opportunity to complete their targets. Check ROTL

**References**

EPR 107(3 & 4)

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HMIP: Expectations
Section 8 – resettlement  

Pathway Three: mental and physical health

is not dismissed for security reasons – check MAPPA cases are flagged up to ROTL decision makers. 

Staff: speak to offender managers and offender supervisors.

11. All prisoners undertake a pre-release resettlement course. Courses are tailored to meet the needs of the population.

Evidence References

<table>
<thead>
<tr>
<th>Documentation</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>check resettlement strategy and exit surveys. See whether courses are relevant for the particular population i.e. information is suitable for older and retired prisoners, women prisoners, prisoners with disabilities, BME prisoners etc.</td>
<td>EPR 107(1 &amp; 3) SMR 66(1)</td>
</tr>
</tbody>
</table>

Prisoners: talk to prisoners who have done the course, if one exists.

Expectations – Pathway Three: mental and physical health

Cross-reference with health services expectations

12. Before prisoners are discharged, when necessary, a single multi-disciplinary assessment identifies needs and staff make contact with health, social service and voluntary agencies that assist ‘at risk’ prisoners during their first weeks in the community.

Evidence References

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>SMR 83</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation</td>
<td>EPR 42(2) &amp; (3j)</td>
</tr>
</tbody>
</table>

Staff: speak to staff. 

Prisoners: speak to prisoners due for release.

13. Prisoners are given information and assistance to access health and social care services on their release, and support in accessing the services if required.

Evidence References

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>R 98(7), I.A. 7,10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation</td>
<td>SMR 83 EPR 42(2) &amp; (3j)</td>
</tr>
</tbody>
</table>

Staff: speak to staff, including resettlement and voluntary organisations. 

Prisoners: check with those due to be released in the next month.

HMIP: Expectations
14. **Pre-release arrangements include contact with the external probation service for monitoring health and social care needs of prisoners released to hostels.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> check with probation staff that formal arrangements are in place.</td>
<td>EPR 107(4 &amp; 5)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check prisoners’ files, especially older prisoners, due for release. Check support plans for prisoners at risk.</td>
<td>SMR 61</td>
</tr>
</tbody>
</table>

15. **Health services staff work closely with other areas of the prison regime and with external agencies working within the prison to ensure integration of prisoner-focused care.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check multi-disciplinary meeting minutes, SMT minutes, management of self-harm documentation, injury forms, movements between health services and the segregation unit etc. Check health services staff are consulted about ROTL decisions where appropriate.</td>
<td>R 98(7), II.A.24, 25</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask health services managers about levels of integration of prisoner focused care. Speak to other prison staff e.g. PEs, catering staff, chaplains, security. Speak to representatives of local agencies e.g. MIND, Age Concern, social workers, occupational therapists. Check health services are part of regime monitoring meetings.</td>
<td>EPR 83b, 87(1)</td>
</tr>
</tbody>
</table>

*Cross-reference with self-harm and suicide, PE, security and rules, faith and religious activity inspectors*

16. **There is a palliative and end of life care policy that has been developed in partnership with local care services.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check policy, clinical records and commissioning arrangements. See what the arrangements are for palliative care.</td>
<td>EPR 40(1, 2 &amp; 3)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff.</td>
<td></td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
17. **Prisoners identified as suffering from serious and enduring mental illness are managed within the Care Programme Approach framework.**

**Evidence**

**Documentation:** check policy, clinical records and mental health team records if separate from the clinical record.

**Staff:** check arrangements for liaison with community mental health teams.

**References**

R 98(7), III.D.52 & 53  
EPR 42(3b) & 47  
PR 21(2)  
SfBH C6

**Expectations – Pathway Four: drugs and alcohol**

*Cross-reference with substance use expectations*

18. **A multi-disciplinary substance use strategy team implements and monitors a written substance use strategy, which is informed by regular population needs assessments.**

**Evidence**

**Documentation:** check policy document and annual needs analysis – check this and action plan include alcohol. Check minutes of meetings and that membership of strategy group includes all relevant service providers. Check members of strategy group attend local DATs/DIPs or invite them in. Check joint working protocols. Check systems are in place to integrate supply and demand reduction. Find out if resources are allocated appropriately (see budget).

**Observation:** check management of substance use strategy and leadership. Look at training and supervision arrangements for staff delivering services. Observe multi-disciplinary team meetings and joint working arrangements.

**References**

R 98(7)III.B43, 44, 45

19. **Prisoners are informed of substance-related services at the beginning of and throughout their time in custody and are encouraged by all staff to seek help according to their needs.**

**Evidence**

**Questionnaire**

R 98(7)II.B27 & 29

**Documentation:** check information leaflets, posters on wings, referral procedures and induction programme.

**References**

R 98(7)II.B27 & 29

**HMIP: Expectations**
Section 8 – resettlement  

Pathway Four: drugs and alcohol

Staff: check staff awareness of services.  
Prisoners: check prisoners’ understanding of the information, e.g. foreign nationals.  
Observation: observe referral patterns and induction input.  
Cross-reference with ‘first days in custody inspector’

20. Prisoners have prompt access to a range of psycho-social treatment and support, which meets their identified needs. Prisoners are actively involved in the care planning and reviewing process.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check waiting times, casework files, care plans, frequency of contact, retention, mechanisms for user feedback, priority categories of CARAT service, arrangements for foreign national prisoners, monitoring of ethnicity, availability of short group work modules e.g. harm reduction, drug/alcohol awareness, relapse prevention. Check availability of care-planned one-to-one intervention, confidentiality/information sharing agreement, referrals to counselling and mental health in-reach services.</td>
<td>R 98(7)III.B44 &amp; 45</td>
</tr>
<tr>
<td>Staff: interviews with CARAT/programme staff.</td>
<td></td>
</tr>
<tr>
<td>Prisoners: prisoner interviews.</td>
<td></td>
</tr>
<tr>
<td>Observation: observe a range of available interventions. Check accessibility of CARAT staff e.g. wing-based, offering drop-in sessions etc.</td>
<td></td>
</tr>
</tbody>
</table>

21. Treatment programmes are appropriate to the requirements of the particular population served, taking account of substance use, age, gender, ethnicity, disability, length of time in custody etc. Where a prison does not provide a suitable treatment programme, prisoners can transfer to another establishment which is able to meet their needs.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check programme details, selection criteria, completion rates, transfer plans, waiting times, monitoring of ethnicity, monitoring outcomes for prisoners, number of prisoners transferred to other programmes.</td>
<td>R 98(7)III.B43, 44, 45 &amp; 47</td>
</tr>
<tr>
<td>Prisoners: interviews with programme participants and those excluded from the programme.</td>
<td></td>
</tr>
<tr>
<td>Staff: programme management and staffing structure.</td>
<td></td>
</tr>
<tr>
<td>Observation: programme location and facilities.</td>
<td></td>
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</tbody>
</table>
Section 8 – resettlement

22. Substance-related work is integrated and coordinated, and linked to custody/sentence planning. Resettlement needs are addressed by linking prisoners with DIPs and community service providers so they can access appropriate support and continued treatment on release.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td></td>
</tr>
<tr>
<td>check custody/sentence/pre-release plans, care pathways with DIPs, joint working arrangements between CARATS/programme/health services providers, joint working arrangements with DIPs/community providers.</td>
<td>R 98(7) III.B47</td>
</tr>
<tr>
<td><strong>Staff:</strong></td>
<td></td>
</tr>
<tr>
<td>check CARATS/programme staff contribute to relevant sentence planning boards.</td>
<td>EPR 103(3 &amp; 4)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td></td>
</tr>
<tr>
<td>interviews.</td>
<td>SMR 59</td>
</tr>
</tbody>
</table>

Cross-reference with offender management and planning inspector

23. Prisoners are able to participate in voluntary drug testing programmes where available, and those who choose not to are not discriminated against. Appropriate testing arrangements are in place.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td></td>
</tr>
<tr>
<td>check VDT compact is different from compliance testing and not linked to IEP. Look at number of compacts. Check testing frequency, referral procedures/CARAT involvement and annual needs analysis to ensure demand can be met.</td>
<td>R 98(7) IC 14</td>
</tr>
<tr>
<td><strong>Staff:</strong></td>
<td></td>
</tr>
<tr>
<td>interviews with testing officers. Check prisoners can access VDT regardless of their location. Look at exclusion criteria/sanctions.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td></td>
</tr>
<tr>
<td>interviews.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong></td>
<td></td>
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<tr>
<td>testing arrangements (facilities, staffing procedures) and quality of VDT unit if in place (location, regime, support services).</td>
<td></td>
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</table>

24. Prisoners can continue their treatment regime at another establishment and on release.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td></td>
</tr>
<tr>
<td>check transfer and pre-release plans, care pathways/links with DIPs, community services and GPs.</td>
<td>R 98(7) III.B43</td>
</tr>
</tbody>
</table>

HMIP: Expectations
Expectations – Pathway Five: finance, benefit and debt

25. **Prisoners’ financial situations are assessed at induction. Specialist assistance with debt management/reduction is available at this point.**

**Evidence**
- Documentation: check resettlement strategy, induction pro formas, referral documents, publicity material. Check records are kept of client contacts and outcomes.
- **Staff:** speak to induction staff and specialist providers.
- **Prisoners:** check prisoners are aware of services and whether they were offered any assistance on induction. Check for provision for them or their families to get advice about family finance problems.

*Cross-reference with first days in custody inspector*

**References**
- EPR 16d

26. **Prisoners can get assistance during induction, where necessary, to close down existing rental/housing agreements in order to prevent debt accrual from rent arrears.**

**Evidence**
- Documentation: check resettlement strategy, copies of letters sent on prisoners’ behalf and that records are kept of achievements.
- **Staff:** speak to specialist providers and induction staff.
- **Prisoners:** speak to prisoners who have been through induction.

*Cross-reference with first days in custody inspector*

**References**
- EPR 16d

27. **All prisoners have access to specialist services providing advice and information about benefits entitlements. Services are widely advertised. Necessary appointments are made for prisoners before they are released.**

**Evidence**
- Questionnaire
- **Documentation:** check publicity material, SLA. Check records of appointments are usually kept.
- **Staff:** speak to Jobcentre plus staff. Check staff are aware of the range of benefits available to prisoners with diverse needs.
- **Prisoners:** see whether prisoners know about services and whether they can access them when necessary.

**References**
- EPR 107(4 & 5)

*HMIP: Expectations*
Section 8 – resettlement

Pathway Six: children and families of offenders

28. All prisoners can access courses on budgeting and finance if required.

Evidence References

Documentation: check resettlement strategy and education timetable. EPR 33(3)
Check that provision meets the diverse needs of the population.
Staff: speak to education staff.
Cross-reference with learning and skills and work inspector

29. All prisoners are encouraged to open a bank account before their release, if necessary. Assistance is provided with this.

Evidence References

Questionnaire EPR 33(3) & 107(4)
Documentation: check resettlement strategy.
Staff: speak to resettlement staff. Check whether any links have been established with local banks and staffs’ awareness of banks’ duties under the DDA.
Prisoners: speak to prisoners due for release.

Expectations – Pathway Six: children and families of offenders

Cross-reference with contact with the outside world expectations

30. Prisoners are encouraged to remain in contact with their children, partners and families, where appropriate. Families are invited/encouraged to participate with key aspects of the sentence, where appropriate.

Evidence References

Documentation: check whether the resettlement strategy sets out how the establishment plans to deliver against this pathway. Check promotional literature – on wings and in visitors’ centres. Look for evidence beyond normal visits/mail/phones etc. e.g. recording of stories on tape etc. Check that gay and lesbian prisoners can participate in civil partnerships and that the policy provides clear guidance and procedures that allow objective judgements about entitlements.
Observation: check that prisoners with family members who are also in custody are able to maintain telephone contact. Check a range of accessible formats can be used to maintain contact that is suitable for

HMIP: Expectations
both the prisoner and the recipient. Check all prisoners, including gay and lesbian prisoners are allowed to embrace and kiss their partners in visits.

**Prisoners**: interviews. Also talk to visitors to check whether families are encouraged to participate in sentence planning boards, SASH, etc.

### 31. Prisoners and their immediate family or partners, with appropriate instructions or permission, are sensitively informed of significant news about each other within 24 hours.

**Evidence**

- **Staff**: ask about recent examples and procedures used. Check what constitutes ‘significant news’.
- **Prisoners**: individual interviews if appropriate.

**References**

- SMR 44
- EPR 24(8 & 9)

### 32. Prisoners and their families have easy access to accurate information about all the resettlement services provided by the prison.

**Evidence**

- **Documentation**: check that leaflets, posters and other printed materials are up-to-date and accurate. See whether key information about the Prisoners’ Families Helpline and Assisted Prison Visits Scheme is visible and available.
- **Observation**: see whether written information is easy to locate and if staff provide correct answers to prisoners’ queries.

**References**

- EPR 30(1)
- SMR 35(1)

**Cross-reference with first days in custody and contact with the outside world inspectors**

### 33. Prisoners have the opportunity to undertake general relationship counselling with their immediate family, where necessary.

**Evidence**

- **Documentation**: check availability of counselling and take-up. Check promotional material.
- **Staff**: check awareness among staff.
- **Prisoners**: check whether prisoners are aware of this provision and how easy it is for them to access.

**References**

- SMR 61 & 79

HMIP: Expectations
34. Prisoners with an identified need can access accredited programmes/interventions aimed at improving parenting skills and relationships.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check sentence plans. Look for promotional material.</td>
<td>SMR 61 &amp; 79</td>
</tr>
<tr>
<td><strong>Staff:</strong> check awareness among staff, especially those responsible for sentence plan targets.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about their awareness and ease of access.</td>
<td></td>
</tr>
</tbody>
</table>

35. Prisoners can take advantage of an accumulated visits scheme to facilitate contact with their children and families.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check policy especially in dispersal prisons and category B prisons, and for vulnerable prisoners, foreign nationals and gay and lesbian prisoners. Compare how many applications are made for accumulated visits against how many actually take place and whether specific groups are being disadvantaged.</td>
<td>EPR 24(4) SMR 79</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> interviews – check whether prisoners are aware of this facility.</td>
<td></td>
</tr>
</tbody>
</table>

36. Evening visits and children/family days are available.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check if available and check the frequency, timing and number of prisoners involved. Check flexibility of timetabling to meet needs of visitors.</td>
<td>EPR 24(4) SMR 79</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about procedure.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask those involved about their experiences.</td>
<td></td>
</tr>
</tbody>
</table>

37. Arrangements are in place for prisoners to receive additional visits from their children or immediate family.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> interviews.</td>
<td>EPR 24(4) SMR 79</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about recent additional visits. Ask whether other venues are available, apart from the visits hall, for additional/special visits.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check for extended or all day visits for prisoners with young children. See whether information about the Assisted Prison Visits Unit and Prisoners’ Families Helpline is prominently displayed.</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
### Section 8 – resettlement

**Pathway Six: children and families of offenders**

#### 38. Visits staff are aware of the concerns facing prisoners’ families, especially the impact of visits on children and any emotionally charged situations that may occur during or after a visit.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> assess how well visits are handled by staff. Check during visits that efforts are made to make visits a positive experience, especially for children.</td>
<td>SMR 46(1) &amp; 79 PR 4(1)</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff how they react to certain sets of circumstances and whether there is any specific training available for visits staff.</td>
<td>EPR 24(5)</td>
</tr>
</tbody>
</table>

#### 39. Visitors are able to share any concerns they have about the prisoner with visits staff or visitors’ centre staff.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> watch the interaction between staff and visitors.</td>
<td>SMR 46(1) &amp; 79</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff if this has occurred.</td>
<td>PR 11(1)</td>
</tr>
<tr>
<td><strong>Visitors:</strong> ask visitors if they consider staff approachable and what they would do if they had concerns.</td>
<td>EPR 24(5)</td>
</tr>
</tbody>
</table>

#### 40. Efforts are made to assist prisoners who have family a long way away, or in other countries, to maintain good family contact. Any prisoner who doesn’t receive ordinary visits is able to exchange their visiting orders for phone credits.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> interviews – especially with those who do not receive many/any visits and those with family abroad.</td>
<td>SMR 79</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to resettlement manager. Ask whether unused VOs can be exchanged for extra phone credit for those living a distance away or for those older or disabled visitors who have difficulty visiting.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with foreign national and diversity inspectors*

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HMIP: Expectations
Section 8 – resettlement

41. Prisoners who are carers are provided with additional free letters and telephone calls specifically to maintain contact with their children. Information about this is included in the induction literature, and reiterated during the induction programme.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong></td>
<td>SMR 37 &amp; 79</td>
</tr>
<tr>
<td><strong>Documentation:</strong></td>
<td></td>
</tr>
<tr>
<td>check whether prisoners are informed in induction or other documents. Check how this is administered and monitored to ensure that all entitled prisoners receive the facility. Check if alternatives are available for those with literacy problems and those with hearing/sight difficulties.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with first days in custody inspector</td>
<td></td>
</tr>
</tbody>
</table>

42. Prisoners can use the telephone at times that are arranged in advance and will be convenient to the recipient of the call (including those abroad).

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>SMR 79</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>EPR 24(1)</td>
</tr>
<tr>
<td>interviews. Ask those receiving inter-prison calls how well the system operates.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong></td>
<td></td>
</tr>
<tr>
<td>ask about normal policy and special circumstances e.g. foreign national prisoners and emergencies. Ask about policy and procedure for inter-prison phone calls e.g. how do they prove the relationship.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with foreign nationals inspector</td>
<td></td>
</tr>
</tbody>
</table>

43. Provision is made for prisoners to receive incoming telephone calls from children or to deal with arrangements for children.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong></td>
<td>SMR 79</td>
</tr>
<tr>
<td>check how this is done and how prisoners know that this provision is available.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td></td>
</tr>
<tr>
<td>ask groups.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong></td>
<td></td>
</tr>
<tr>
<td>ask staff.</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
Section 8 – resettlement  Pathway Six: children and families of offenders

44. ROTL is used appropriately for primary carers to keep in contact with their children and be present at important events.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check information made available to prisoners. Check ROTL applications and the number successful. Check MAPPA cases are flagged up to decision makers before awarding ROTL.</td>
<td>SMR 79</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask in groups.</td>
<td></td>
</tr>
</tbody>
</table>

45. There is a qualified, family support worker to arrange children’s visits, supervise visits when required by court order, arrange for carer’s representation or attendance at child care hearings, support those undergoing separation and advise on child protection issues and on the use of ROTL to fulfil parental responsibilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check whether there is a specific person allocated to this role. If not, see how these specific services are provided and how information is shared between relevant staff. <strong>Documentation:</strong> check relevant job descriptions and information made available to prisoners. Check MAPPA cases are flagged up to decision makers before awarding ROTL.</td>
<td>SMR 61 &amp; 79</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask groups.</td>
<td></td>
</tr>
</tbody>
</table>

46. Subject to risk assessment, all category C or D prisoners (or equivalent from the women’s/YO estate), particularly those with children, should be granted appropriate periods of temporary release agreed as part of a structured resettlement plan, to enable them to spend extended time with their families in at least the three months before their release. For those prisoners with children who are not suitable for release on licence, appropriate in-house arrangements are made for extended pre-release contact with their children and families, where appropriate.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check MAPPA cases are flagged up to decision makers before awarding periods of temporary release. Check arrangements for those who are not suitable for release on licence. Look at sentence plans for those coming up to release. <strong>Staff:</strong> speak to staff about arrangements. <strong>Prisoners:</strong> speak to prisoners coming up for release.</td>
<td>EPR 107(2, 3 &amp; 4) SMR 79</td>
</tr>
</tbody>
</table>

HMIP: Expectations
47. Prisoners are motivated and encouraged to participate in interventions designed to change attitudes, thinking and behaviour. Alternative interventions are provided for prisoners who are assessed as unsuitable for the available programmes or who are in denial regarding their offending behaviour.

**Evidence**

- **Observation:** observe discussions between staff and prisoners. See whether there are any disincentives to attendance (labelling/conflict with other activities/pay rates etc).
- **Documentation:** check selection of interventions available, attendance rates at programmes/reasons for non-attendance/follow-up action taken.
- **Staff:** speak to interventions/programmes staff.
- **Prisoners:** speak to prisoners.

**References**

- EPR 102(1)
- SMR 66(1)

48. Preparation for interventions takes account of each prisoner’s learning style, motivation and capacity to change. Diversity and other individual needs such as learning disabilities are actively assessed and plans put in place to minimise the impact of potentially discriminatory or disadvantaging factors.

**Evidence**

- **Documentation:** check diversity strategy, OASys assessments, criteria for inclusion/exclusion from interventions, post-course feedback forms and evaluation reports.
- **Staff:** see what staff running interventions know about the particular needs of the prisoners who will be attending and whether pre-intervention planning takes account of these needs. Check on arrangements for prisoners with disabilities, especially those with learning disabilities.
- **Prisoners:** groups, talk to course participants.

**References**

- SMR 66(1)
49. **Prisoners experience an environment, especially in residential areas, that supports the objectives of the intervention/programme. There are opportunities for prisoners to consolidate any learning and to practise newly acquired skills. All staff positively reinforce prisoners’ learning and progress.**

**Evidence**

**Observation:** observe the nature and subject of discussions between staff and prisoners. Listen to staff comments about prisoners in private. Check for reinforcement of learning on residential units.

**Staff:** check on awareness of interventions provided by the prison and their objectives. Ask about written contributions to sentence plans/prisoner records.

**Prisoners:** case studies/groups.

*Cross-reference with residential units inspector*

**References**

SMR 59 & 60

50. **Prisoners moving to open, semi-open or resettlement conditions are given support to reduce institutional dependence and are able to prepare for reintegration into the community.**

**Evidence**

**Staff:** speak to personal officers and induction programme staff.

**Prisoners:** groups.

*Cross-reference with first days in custody inspector*

**References**

SMR 60(2)

EPR 107
Prisoners held in a close supervision system (CSC) are managed according to their individual needs with a high level of staff contact and specialist input with the goal of assisting them to progress. Any restrictions and restraints imposed to control their behaviour do not result in treatment or conditions that are so impoverished that mental or physical health is compromised.

**Expectations**

1. **CSC prisoners are given written reasons for their allocation to CSC and are provided with written feedback from monthly casework reviews.**

   **Evidence**
   - Prisoners: check with prisoners whether they have anything in writing and what.
   - Documentation: look at case management plans.

   **References**
   - EPR 30 (1 & 2), 53, 59 (a)
   - SMR 35

2. **The number of CSC prisoners located out of dedicated units in designated cells for control purposes is recorded and monitored closely. These prisoners are subject to ongoing care and management planning.**

   **Evidence**
   - Documentation: check on the numbers of CSC prisoners in designated cells, and the quality of CSC selection committee (CSCSC) monitoring and planning.

   **References**
   - EPR 53
   - SMR 27

3. **CSC prisoners are actively involved in their own care and management planning by a multidisciplinary team of staff. This includes attention to individual wellbeing and personal progress as well as to prisoner behaviour.**

   **Evidence**
   - Staff: speak to managers about multidisciplinary planning and the extent of prisoner involvement.
   - Documentation: check case management plans.

   **References**
   - BPTP 6
   - EPR 53, 72 (3) & 83 (b)
   - PR 6 (2 & 3)
Section 9 – specialist units

Close supervision system

4. CSC prisoners are able to submit their own evidence to their reviews, and their solicitors are encouraged to attend as appropriate.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisons: speak to prisoners about their contribution to their reviews and the attendance of solicitors.</td>
<td>EPR 53 (7) &amp; 59 PR 54 (2)</td>
</tr>
<tr>
<td>Staff: speak to managers about the arrangements for reviews.</td>
<td></td>
</tr>
<tr>
<td>Documentation: look at evidence in case management plans.</td>
<td></td>
</tr>
</tbody>
</table>

Evidence References

Prisoners: speak to prisoners about their contribution to their EPR 53 (7) & 59 reviews and the attendance of solicitors. PR 54 (2)

5. All CSC prisoners have personal officers who act as caseworkers and who make daily records of prisoners’ behaviour on monitoring forms and individual history sheets, and provide prisoners with verbal feedback.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners: ask prisoners about the frequency and quality of their interaction with their personal officers.</td>
<td>EPR 53, 83 (b), 87 (1)</td>
</tr>
<tr>
<td>Documentation: check quality and frequency of entries in history sheets and on behaviour monitoring forms.</td>
<td></td>
</tr>
<tr>
<td>Staff: speak to managers and staff about the expectations of personal officers.</td>
<td></td>
</tr>
</tbody>
</table>

Evidence References

Staff: speak to staff and managers about normal practice. EPR 53, 83 (b), 87 (1)

6. All disciplines of staff having contact with CSC prisoners record relevant details of their contact in individual history sheets and have the opportunity to attend their casework reviews.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: speak to staff and managers about normal practice.</td>
<td>EPR 53, 83 (b), 87 (1)</td>
</tr>
<tr>
<td>Documentation: check wing history sheets, case management plans and minutes of casework reviews.</td>
<td></td>
</tr>
</tbody>
</table>
Section 9  – specialist units

Close supervision system

7. All CSC prisoners have access to faith leaders, physical and mental health services staff, psychologists, the IMB, senior managers, teachers and probation staff, and are able to work one to one with specialist staff as per their care and management plan.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners:</td>
<td>EPR 29 (2) &amp; 89 (1)</td>
</tr>
<tr>
<td>Staff:</td>
<td>PR 46</td>
</tr>
</tbody>
</table>

Evidence References

Prisoners: speak to prisoners about their access to various staff members and the availability of one-to-one work.

Staff: speak to all staff, including specialists, about access to CSC prisoners.

Documentation: check case management plans.

8. Managers, IMB and other specialists are able to speak to CSC prisoners in the sight but not the hearing of staff.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff:</td>
<td>OA 4</td>
</tr>
<tr>
<td>Prisoners:</td>
<td>PR 79 (2)</td>
</tr>
</tbody>
</table>

Evidence References

Staff: speak to managers, specialists and IMB representatives about their experiences.

Prisoners: speak to prisoners about their contact with specialist staff and managers.

9. The following are not contingent on good behaviour but are provided to all CSC prisoners to preserve health, where necessary by means of higher staffing levels and/or the use of personal protective equipment (PPE) for staff:

- daily contact with staff
- daily outside exercise
- daily access to showers and cleaning materials
- in-cell activities and cardiovascular equipment, subject to proper risk assessment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation</td>
<td>EPR 49, 51.1</td>
</tr>
<tr>
<td>Prisoners:</td>
<td>EPR 49, 51.1</td>
</tr>
<tr>
<td>Staff:</td>
<td>EPR 49, 51.1</td>
</tr>
</tbody>
</table>

Evidence References

Documentation: check daily unit log and normal regime.

Prisoners: ask prisoners about the normal regime.

Staff: speak to staff and managers about the provision of daily activities.
10. All CSC prisoners are able to receive open visits in a comfortable environment that affords as much privacy as possible. Closed visits are only used where there is evidence of significant relevant risk, and not for punishment, and this decision is reviewed monthly.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:</td>
<td>EPR 24 (1, 2, &amp; 4), 53</td>
</tr>
<tr>
<td>Documentation:</td>
<td>check records of visits and risk assessments for closed visits.</td>
</tr>
<tr>
<td>Staff:</td>
<td>talk to staff about the normal arrangements for visits and the reasons for closed visits.</td>
</tr>
<tr>
<td>Prisoners:</td>
<td>speak to prisoners about their experiences.</td>
</tr>
</tbody>
</table>

11. Staffing levels in the CSC are sufficient to ensure that the regime, especially for prisoners held in the most restrictive environments, is not disproportionately curtailed.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff:</td>
<td>EPR 4 &amp; 53</td>
</tr>
<tr>
<td>Documentation:</td>
<td>check daily unit log.</td>
</tr>
</tbody>
</table>

12. Psychiatric input is overseen by a consultant forensic psychiatrist who contributes to casework management.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation:</td>
<td>R (98)7, III.D.52 &amp; 53</td>
</tr>
<tr>
<td>Staff:</td>
<td>EPR 47 (2)</td>
</tr>
</tbody>
</table>
13. **Staff relations with CSC prisoners demonstrate a high level of knowledge and understanding of individual prisoners, what triggers and what calms them, and all reasonable attempts are made to de-escalate conflict before physical force is used.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to staff and managers about the prisoners in their care.</td>
<td>EPR 52 (2), 53, 64 (1), 74, &amp; 75</td>
</tr>
<tr>
<td><strong>Documentation:</strong> look at records of use of force.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about their experiences and the reaction of staff to conflict situations.</td>
<td></td>
</tr>
</tbody>
</table>

14. **Wherever possible, if it is decided that a CSC prisoner should be segregated or placed in a special cell off the unit, they are moved by CSC staff who know them.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to managers and staff about the arrangements for moving CSC prisoners off the unit.</td>
<td>EPR 53 &amp; 87(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check records of use of force.</td>
<td></td>
</tr>
</tbody>
</table>

15. **Staff are provided with high levels of support for their wellbeing, both individually and in their work groups.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to managers and staff about the provision and the perceived effectiveness of support.</td>
<td>EPR 86 &amp; 87(1)</td>
</tr>
</tbody>
</table>
16. There is a monthly system-wide recording and scrutiny of management information concerning:
   • progressive, sideways, and/or regressive moves within the system
   • the use of designated cells
   • use of high control cells
   • use of closed visits
   • segregation
   • activity take up
   • use of ACCT
   • use of force
   • the use of PPE
   • complaints or appeals
   • prisoner or staff assaults
   • ethnic monitoring
   • lock downs (frequency and duration).

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: speak to managers about the procedures for monitoring information and any action taken based on the results.</td>
<td>EPR 53, 72(3), 74 &amp; 83</td>
</tr>
</tbody>
</table>

**Documentation:** check for the recording of information and evidence of monitoring.

17. Moves out of the CSC are well planned and supported, and where necessary a gradual reintegration is facilitated. Staff at receiving locations receive a detailed handover, and new personal officers have an opportunity to meet the prisoner before he is moved.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: speak to managers about the arrangements for preparing prisoners for moving out of the CSC.</td>
<td>EPR 53, 74 &amp; 83</td>
</tr>
</tbody>
</table>

**Documentation:** check for evidence of planning.
Designated cells in high security segregation units

Designated cells in high security segregation units are used as a temporary measure with due regard to the isolating impact of such a location.

Expectations

18. The care and management of CSC prisoners held in designated cells for more than a month becomes the responsibility of the host prison.

Evidence

Staff: speak to managers about lines of responsibility.

References

EPR 53 & 72(1)

Documentation: check for written evidence of responsibility.

PR 46

19. A detailed and clear progression plan for the prisoner to move to more permanent accommodation is in place, and reviewed monthly at the CSCSC.

Evidence

Documentation: check plans and minutes of CSCSC.

References

EPR 51(1) & 53

Staff: speak to managers.

20. Every effort is made to de-escalate the unlock levels of those transferred for control purposes.

Evidence

Staff: speak to managers.

References

EPR 51(1) & 53

Documentation: check records.

21. CSC prisoners in designated cells are able to access mental health support locally.

Evidence

Staff: speak to unit staff and health services staff.

References

R (98)7, III.D.52

Prisoners: check the arrangements for access to mental health support.

EPR 46 & 47

PR 21(2)

Cross-reference with health services inspector

HMIP: Expectations

April 2008
Section 9 – specialist units

22. CSC prisoners in designated cells are able to engage in meaningful activities and education, subject to proper risk assessment.

**Evidence**

**Documentation:** check logs and risk assessments.  
**Prisoners:** speak to prisoners about their access to the regime.

**References**

BPTP 6  
EPR 49, 51(1)

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23. Staff managing prisoners in designated cells receive a CSC awareness training package.

**Evidence**

**Staff:** speak to staff and managers about the training received.  
**Documentation:** check training records.

**References**

EPR 81(3)

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24. The wellbeing of CSC prisoners in designated cells is monitored by the IMB locally and any concerns are passed on to local managers.

**Evidence**

**IMB:** speak to IMB representatives about their access to CSC prisoners.  
**Prisoners:** ask about access to the IMB.

**References**

EPR 93(1)  
PR 79(2)

---

25. Any use of a high control cell or any removal of furnishings from an ordinary cell occupied by a CSC prisoner is documented and monitored by the IMB locally.

**Evidence**

**Documentation:** check records.  
**Staff:** speak to managers about procedure.  
**IMB:** ask about monitoring arrangements.

**References**

EPR 93(1)  
PR 79(2)
Dangerous and severe personality disorder (DSPD) prisoners and their representatives are fully informed of the aims and limitations of DSPD treatment and its likely duration and impact on them; they consent to treatment and are able to withdraw at any time. DSPD units provide an environment that is psychologically, emotionally and physically safe and in which clinical and offence-related need can be managed, assessed and treated.

Expectations – management

1. **Full information about the DSPD unit, the experimental nature of the treatment, its duration and its likely impact on them is given to prisoners in writing before a decision is made on allocation to the unit. They are advised in writing to discuss their move with family and legal representatives.**

   **Evidence**
   - **Prisoners:** check with prisoners that they have been provided with relevant information.
   - **Documentation:** check what information is provided.
   - **Staff:** speak to staff about normal procedures.

   **References**
   - R (82)17, 3
   - R (98)7, I.C.14,
   - EPR 17 (2 & 3)
   - & 30 (1)

2. **Where possible prisoners are located in the DSPD unit that is most accessible for their visitors.**

   **Evidence**
   - **Documentation:** check the process of referral, assessment and allocation and distance from home information for the population.
   - **Staff:** speak to managers.
   - **Prisoners:** ask them how far their visitors have to travel to see them.

   **References**
   - R (82)17, 1-5

3. **The host prison supports and maintains the fabric of the unit and its clinical goals.**

   **Evidence**
   - **Staff:** speak to the governor and the unit manager to see how the unit is perceived by the senior management team.

   **References**
   - R (82)17, 9

**HMIP:** Expectations

April 2008
Section 9 – specialist units

Dangerous and severe personality disorder units

4. All prisoners arriving on the DSPD unit are given a full induction to the prison and to the unit.

Evidence

Documentation: check the induction procedures.

Prisoners: speak to newly arrived prisoners and those who have been resident some time.

References

R (82)17, 1, 9

EPR 30 (1 & 2)

PR 10 (1)

5. Where possible, DSPD prisoners integrate with the general prison population, taking part in prisoner consultation committees, race relations committees and religious worship.

Evidence

Documentation: check what the regime allows. Look for evidence of unit prisoner representation on committees.

Observation: observe the regime.

Prisoners: speak to prisoners about their experience.

Staff: speak to staff about normal procedure.

References

R (82)17, 2 & 7

6. DSPD prisoners have equity of access to health services.

Evidence

Observation

Prisoners: ask prisoners about access to health services.

Documentation: check access is monitored and any imbalances investigated and corrected.

Cross-reference with health services inspector and check that all health services expectations apply to the DSPD population.

References

R (82)17, 6

R (98) 7, I.B.10

EPR 40

7. The following management information is routinely collected and scrutinised: moves (progressive, sideways, back to mainstream or to secure hospital); activity take up; suicide and self-harm; disciplinary offending; use of segregation or care suites; use of ACCT; use of force; complaints or appeals; prisoner or staff assaults; ethnicity.

Evidence

Documentation: check monthly monitoring information, and that relevant information is provided to the REAT and safer custody committee.

References

SMR 66 (2 & 3)
## Section 9 – specialist units

### Dangerous and severe personality disorder units

8. **Local safer custody committees routinely monitor incidents of self-harm and violence on the DSPD unit, and have a clear strategy for addressing elevated levels of risk and need that is detailed in the relevant strategy documents.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation:** check the safer custody strategy for references to the DSPD unit, and that incidents of self-harm or violence are referred to the safer custody committee. | R (82) 17, 4  
R (98)7, II.C.31  
EPR 7 |

9. **Staff are trained, at a minimum, in: de-escalation techniques; mental health and personality disorder awareness and management; record keeping; giving feedback; role modelling; and motivational interviewing.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check staff training package and records.</td>
<td>R (82)17, 10</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff whether they feel equipped for their role.</td>
<td>EPR 75 &amp; 81 (3)</td>
</tr>
</tbody>
</table>

10. **Staff of all disciplines are provided with supervision and support for their roles in the unit, and there is a mechanism for maintaining the cohesion of the staff group against divisive prisoner influences.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check what support is provided to the staff both individually and as a group.</td>
<td>EPR 72 (2) &amp; 74</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask what supervision and support is provided and how effective it is.</td>
<td></td>
</tr>
</tbody>
</table>

11. **There are established pathways on from DSPD treatment that build on or support the changes that have been made in treatment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check whether there is any strategic provision of pathways on from DSPD, and links across to special secure hospitals.</td>
<td>R (82)17, 2, 7, 8</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff about the pathways provided.</td>
<td></td>
</tr>
</tbody>
</table>
Section 9 – specialist units

12. Where a prisoner is detained on a DSPD unit for longer than three years, the DSPD central team reviews the prisoner’s case and considers whether their continued detention on a DSPD unit is valid or beneficial.

**Evidence**

**Documentation:** check for evidence of a review.  
**Staff:** check what currently happens in these circumstances.

**References**

R (82)17, 2-4

13. The IMB remains outside of the clinical process, management or treatment of DSPD prisoners, and monitors fairness and decency in their treatment in exactly the same way as it does with other prisoners.

**Evidence**

**IMB:** check with IMB members what service they provide.  
**Prisoners:** speak to prisoners about their access to the IMB

**References**

EPR 9  
PR 77

Expectations – treatment

14. Prisoners are treated by staff who receive ongoing training, supervision and support to maintain their professional registration and continue their professional development.

**Evidence**

**Documentation:** check the arrangements for continuing professional development.  
**Staff:** speak to staff about their experience.

**References**

R (82)17, 10  
EPR 81 (2 & 3)

15. Arrangements for clinical governance are clear and there are regular clinical audits.

**Evidence**

**Documentation:** check the clinical governance framework and the range of clinical audits undertaken.

**References**

R (82)17, 6  
EPR 43 (1 & 3)
Section 9 – specialist units

Dangerous and severe personality disorder units

16. Clinical staff meet regularly to discuss treatment integrity.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the arrangements for monitoring treatment integrity and review minutes of meetings.</td>
<td>R (82)17, 6</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff about regularity of meetings.</td>
<td>R (98)7, I.D.20 &amp; 23</td>
</tr>
</tbody>
</table>

17. It is explicit how the treatment for personality disorder is intended to reduce dangerousness.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that the programme is sufficiently comprehensive to address these separate domains, and that there are links with sentence planning.</td>
<td>R (98)7, I.C.14 BOP 6 EPR 39 &amp; 48</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff.</td>
<td></td>
</tr>
</tbody>
</table>

18. There is both in-house and independent evaluation of the treatment model in operation within each unit, and compliance with a minimum dataset.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the arrangements for in-house evaluation and for providing assessment data to evaluators.</td>
<td>R (82) 17, 6 R (98)7, I.D.21 EPR 9 &amp; 40 (1 &amp; 2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff.</td>
<td></td>
</tr>
</tbody>
</table>

19. Motivational work is undertaken before treatment commences, and the prisoner is supported to manage the impact of change as the programme progresses.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> check with programme providers how prisoners are prepared for treatment and supported in treatment.</td>
<td>R (82)17, 3 EPR 74</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about their experience.</td>
<td></td>
</tr>
</tbody>
</table>
Section 9 – specialist units  Dangerous and severe personality disorder units

20. The results of assessment are shared with the prisoner in a form that they understand within a week of the assessment being completed, and a written version is provided that can be shared with family and legal representatives.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong></td>
<td>R (82)17, 3</td>
</tr>
<tr>
<td><strong>Documentation:</strong></td>
<td>check for evidence of information sharing.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>check what prisoners say they are doing.</td>
</tr>
</tbody>
</table>

21. Prisoners can take reasonable periods of time out from the programme without formally withdrawing.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong></td>
<td>R (82)17, 3</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>speak to prisoners about time out arrangements.</td>
</tr>
</tbody>
</table>

22. Prisoners are able to undertake constructive activities, hobbies and educational programmes, as well as attend therapeutic programmes.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td>check what the regime allows.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>check what prisoners say they are doing.</td>
</tr>
</tbody>
</table>

23. Prisoners can partake in activities with other prisoners off the unit, such as at workshops, faith services etc.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td>check what the regime allows.</td>
</tr>
<tr>
<td><strong>Staff:</strong></td>
<td>EPR 3, 25 (1), &amp; 49 (1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong></td>
<td>check what prisoners say they are doing.</td>
</tr>
</tbody>
</table>
Section 9 – specialist units  Dangerous and severe personality disorder units

24. Where a DSPD prisoner is moved to the segregation unit, DSPD staff remain in daily contact.

Evidence

Staff: check how challenging behaviour is managed, and whether a therapeutic ethos is maintained.

Prisoners: ask prisoners about regularity of contact and with whom.

References

EPR 74

25. Where a prisoner withdraws their consent to treatment, steps are taken to reintegrate them back into the mainstream as quickly as possible, and the prisoner’s concerns or wishes in this respect are given due consideration.

Evidence

Staff: check how withdrawal is responded to and managed.

Prisoners: speak to prisoners about their experiences.

References

R (82)17, 3

26. Prisoners are invited to take part in case reviews on at least a quarterly basis, and the prisoners’ family and/or legal representatives are encouraged to attend these at least annually.

Evidence

Documentation: check the procedure for case reviews and the minutes of the meetings.

Staff: ask who is invited.

Prisoners: ask about the regularity of their reviews and who attends.

References

R (82)17, 8

27. Where a transfer to a special secure hospital under mental health legislation is being considered, the prisoner is made aware of their avenue of appeal through the Mental Health Review Tribunal (MHRT).

Evidence

Staff: check whether prisoners are informed of the role of the MHRT.

Prisoners: ask whether they are aware of the MHRT.

References

EPR 30(1)

SMR 36(3)
Section 9 – specialist units  Dangerous and severe personality disorder units

28. Moves out of the DSPD unit are well planned and supported, and based on individual needs. Staff at receiving establishments/units/ wings receive a detailed handover, and new personal officers have an opportunity to develop their relationship with the individual prisoner before the prisoner is moved. Where necessary, a gradual reintegration is facilitated.

Evidence

| Documentation: check the procedure for de-selection from DSPD treatment. Check for evidence of planning and support. | EPR 87(1) |
| Staff: ask staff what the normal procedure is for moves out of the unit. | SMR 57 |

References
Therapeutic communities

In recognition of the special nature of prisons which operate as democratic therapeutic communities or which have units within them operating as therapeutic communities we augment our standard expectations to take account of some of the differences we would expect to see.

The therapeutic community (TC) provides a safe environment which allows prisoners to confront their offending behaviour by operating together respectfully in an environment in which everyone supports one another. Group therapy and the day to day experience of the community is used for everyone’s therapeutic benefit.

Expectations – reception

1. **Prisoners understand that they are entering a TC and what that entails.**

   **Evidence**
   - **Documentation:** check the information prisoners were given before arrival.
   - **Prisoners:** ask prisoners what information they received.
   - **Staff:** check with staff what information is provided.

   **References**
   - SMR 35(1)
   - EPR 30

2. **Prisoners are referred to the TC and assessed according to published criteria.**

   **Evidence**
   - **Prisoners:** check what part prisoners play in their referral to the TC.
   - **Documentation:** check a period in a TC was included in sentence plans, check the assessment criteria.
   - **Staff:** check the process with staff, particularly those that go out to other establishments to encourage applications.

   **References**
   - SMR 69
   - EPR 17(2) & 103(1)
Section 9 – specialist units

Therapeutic communities

Expectations – first night/induction/assessment process

3. Newly-arrived prisoners are allocated appropriately to a unit and introduced to the community.

**Evidence**

**Staff:** check how decisions are made about the location of prisoners i.e. which units they are sent to and why. Check whether particular groups such as sex offenders are held separately and if so, why. Check how prisoners are introduced to their community.

**Documentation:** check for evidence of decision-making.

**Prisoners:** speak to prisoners about their allocation and introduction to their new unit/community.

4. There is a structured and supportive assessment process.

**Evidence**

**Documentation:** check the length of time that prisoners spend located in an assessment unit and what kind of regime provision is available - judgements on length of time should be guided by the establishment’s own objectives. Look for completion of initial assessments e.g. education, intelligence testing, personality testing and in some cases the completion of Hare’s psychopathy checklist to ensure the suitability of prisoners to the TC. If prisoners are moved on from the assessment unit quickly, check that the assessments are continued on the living unit.

**Prisoners:** speak to prisoners.

5. The rules and expectations of the TC are fully explained to all prisoners.

**Evidence**

**Observation:** observe induction, check for evidence of TC rules and expectations posted on unit noticeboards.

**Prisoners:** check prisoners’ understanding of the rules and expectations, how and when they were informed of them and how they would know if there were any changes to the rules and expectations.

**Staff:** talk to induction staff.

**Questionnaire**

**References**

SMR 35(1)

EPR 30(1)

PR 10(1)
Section 9 – specialist units

6. Information is provided to prisoners about the differences between the TC and more traditional regimes.

Evidence

<table>
<thead>
<tr>
<th>Observation:</th>
<th>SMR 35(1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners:</td>
<td>EPR 30(1)</td>
</tr>
<tr>
<td>Staff:</td>
<td>PR 10(1)</td>
</tr>
</tbody>
</table>

References

Expectations – residential units

7. There are sufficient and appropriate group rooms for small groups and a large room for the whole community.

Evidence

<table>
<thead>
<tr>
<th>Observation:</th>
<th>EPR 83b</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prisoners:</td>
<td>EPR 3, 13 &amp; 49</td>
</tr>
<tr>
<td>Staff:</td>
<td>SMR 27</td>
</tr>
</tbody>
</table>

References

8. Prisoners are not disadvantaged by differences or rivalries between different wings/communities.

Evidence

| Prisoners: | EPR 10, 13 & 49 |
| Staff: | SMR 27 |
| Documentation: | |

References

9. Therapeutic and residential staff work together in an interdisciplinary way.

Evidence

| Observation |
| Staff: | EPR 83b |
| Prisoners: | |

References

HMIP: Expectations

April 2008
Section 9 – specialist units
Therapeutic communities

10. All community issues are dealt with by prisoners and staff together.
   Evidence
   References
   Staff & prisoners: check whether there are issues around which prisoners exert their own control and if so, what these issues are. Check on the types of issues that are dealt with by staff only. EPR 50

11. All TC members are able to contribute equally.
   Evidence
   References
   Observation: attend community meetings, check for inter-prisoner tensions i.e. stronger prisoners taking the chairing roles within the community. EPR 50
   Staff & prisoners: check how chairs are elected and how long they maintain that role.

Expectations – personal officers

12. All prisoners have designated personal officers.
   Evidence
   References
   Staff: check what role they carry out and whether this complements the therapeutic model. EPR 74 & 87
   Prisoners: speak to prisoners.
   Questionnaire

Expectations – bullying

13. An anti-bullying (violence reduction) strategy is in place, which is applied consistently and fairly.
   Evidence
   References
   Documentation: see how incidents of bullying are managed within the community. Check whether the methods are effective. SMR 27 EPR 49, 52(2 & 3)
   Staff & prisoners: ask how victims are supported within the community. See how bullies are challenged.
Section 9 – specialist units

14. There are mechanisms for the protection of vulnerable prisoners from other members of the community.

Evidence

Staff: speak to staff.

Documentation: check how vulnerable prisoners are managed within the community or whether they are held separately.

Staff: ask how vulnerable prisoners are supported within the community.

Evidence References

Staff: speak to staff. EPR 52(1, 2 & 3)

Documentation: check how vulnerable prisoners are managed within the community or whether they are held separately.

Staff: ask how vulnerable prisoners are supported within the community.

Expectations – self-harm and suicide

15. There is a system for identifying and managing risk of self-harm and suicide.

Evidence

Observation: observe community meetings. EPR 47(2), 52(1)

Documentation: check what part the community plays in managing risk. R 98(7) III.D.58

Prisoners: check whether prisoners at risk benefit from sharing their vulnerability in the community.

Staff: check whether prisoners’ vulnerability can be kept confidential from other members of the community (note: this is not supposed to happen in a TC – disclosure is expected). See how Listener confidentiality is managed within the community (note: this confidentiality should be respected).

Evidence References

Observation: observe community meetings. EPR 47(2), 52(1)

Documentation: check what part the community plays in managing risk. R 98(7) III.D.58

Prisoners: check whether prisoners at risk benefit from sharing their vulnerability in the community.

Staff: check whether prisoners’ vulnerability can be kept confidential from other members of the community (note: this is not supposed to happen in a TC – disclosure is expected). See how Listener confidentiality is managed within the community (note: this confidentiality should be respected).

16. Prisoners at risk of self-harm or suicide are able to be accommodated within the TC.

Evidence

Documentation: check the records of those identified as at risk of self-harm or suicide.

Prisoners: speak to prisoners identified as at risk of self-harm or suicide.

Staff: speak to staff about location decisions.
**Section 9 – specialist units**

**Therapeutic communities**

### Expectations – substance use

17. **The TC policy on substance use is clear and consistently applied.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check policy and evidence of application.</td>
<td>R 98(7) II.B.27</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check whether members of the TC understand the implications of drug or alcohol use.</td>
<td>&amp; III.B.43, 44, 45</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to staff.</td>
<td></td>
</tr>
</tbody>
</table>

### Expectations – race equality

18. **Prisoners are not prevented from using the official racist incident reporting procedures.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> check whether potential victims feel that interventions are effective and whether they feel supported.</td>
<td>EPR 52(2 &amp; 3)</td>
</tr>
<tr>
<td><strong>Staff:</strong> check how the community interventions relate to the structure of the REAT and the role of the REO. Check that prisoners’ rights to confidential systems are protected even within the community context.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check whether monitoring reflects the expected proportion of black and minority ethnic prisoners in the community. Check whether black and minority ethnic prisoners are being selected out before admission due to the selection criteria.</td>
<td></td>
</tr>
</tbody>
</table>

### Expectations – contact with the outside world

19. **Families are informed and involved in the workings of the community.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check what special arrangements there are to involve families such as visitors’ days.</td>
<td>SMR 37</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to personal officers and other staff about family involvement and contact.</td>
<td>EPR 24(1)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners about family days – when the last one was and frequency.</td>
<td>PR 4</td>
</tr>
<tr>
<td><strong>Visitors:</strong> speak to visitors about their understanding and involvement.</td>
<td></td>
</tr>
</tbody>
</table>
Expectations – applications and complaints

20. **Prisoners are not prevented from using the official applications and complaints systems.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that prisoners’ rights to confidential systems are protected even within the community context. Check that there are appeal processes, external to the community.</td>
<td></td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask whether any pressure is exerted to prevent them from making applications or complaints, particularly to external bodies.</td>
<td></td>
</tr>
</tbody>
</table>

**Questionnaire**

Expectations – legal rights

21. **Members of the TC are free to raise any issues with their legal advisers.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> talk to prisoners about ease of access to their legal advisers via phone, letters and visits.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> talk to the legal aid officer(s).</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check access to legal visits.</td>
<td></td>
</tr>
</tbody>
</table>

**Questionnaire**

22. **There is no pressure on any members of the TC to forgo parole.**

<table>
<thead>
<tr>
<th>Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> look at a sample of prisoners who have passed their parole date.</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to these prisoners about the reasons why they have missed their parole date.</td>
</tr>
<tr>
<td><strong>Staff:</strong> talk to the personal officers of these prisoners to assess the reasons why parole was not granted.</td>
</tr>
</tbody>
</table>
Expectations – health services

23. **Prisoners’ rights to medical confidentiality are respected.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> check that prisoners’ rights to confidentiality are respected.</td>
<td>EPR 42(3a)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> ask prisoners whether they are compelled to disclose medical information during community meetings.</td>
<td>R 98(7) I.C.13</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check minutes of community meetings.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> observe community meetings.</td>
<td></td>
</tr>
</tbody>
</table>

Expectations – activities

24. **Prisoners’ educational and vocational needs are assessed separately from assessments for the TC.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check educational and general assessment documentation.</td>
<td>EPR 28(1, 2 &amp; 7)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to induction/assessment staff and education staff.</td>
<td>SMR 77(1) &amp; 71(5)</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to chaplaincy staff as well as staff on the units and senior management.</td>
<td>R 1990/20 B &amp; F</td>
</tr>
</tbody>
</table>

Expectations – faith

25. **The chaplaincy is seen as an integral part of the TC.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff:</strong> speak to chaplaincy staff as well as staff on the units and senior management.</td>
<td>SMR 41</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check input of chaplaincy team to community meetings, SMT meetings etc.</td>
<td>EPR 29</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> speak to prisoners.</td>
<td>PR 15(1)</td>
</tr>
</tbody>
</table>
26. Prisoners are not prevented from practising their religion or denied confidential access to a minister.

**Evidence**
- **Documentation:** check whether prisoners can attend religious groups, classes etc.
- **Staff:** check whether the community impinges upon the traditional chaplaincy role, e.g. personal problems, bereavements etc.
- **Prisoners:** speak to prisoners.

**References**
- SMR 42
- EPR 29(2)

**Expectations – security**

27. There is a clear policy on the handling of security incidents.

**Evidence**
- **Documentation:** check policy and minutes of community meetings.
- **Staff:** check whether there is a commonly understood distinction between incidents/events that are dealt with by security and those that are dealt with by the community, e.g. drugs, weapons, fights, assaults.

**References**
- EPR 52(2) & 53(2)

28. Staff–prisoner relationships within the community do not prevent the generation of security intelligence.

**Evidence**
- **Observation**
- **Staff:** speak to security staff and staff on the units.
- **Documentation:** look at number and content of SIRs and whether any patterns emerge.

**References**
- EPR 87(1)
- SMR 57
Section 9 – specialist units  Therapeutic communities

Expectations – rules of the establishment

29. Rules are clear and consistently applied by therapeutic and other staff across the TC.

Evidence References
Staff: speak to staff SMR 35(1)
Prisoners: speak to prisoners – particularly those from black and minority ethnic groups. EPR 30(1) PR 10(1)

Expectations – disciplinary procedures

30. There is a clear policy on the handling of infringements of the rules.

Evidence References
Documentation: check on the existence of protocols that detail which infringements of rules will be dealt with by the community and which by formal proceedings. Check there are no community actions which constitute private punishments. Check all offences are dealt with openly, equitably and consistently, irrespective of the community view of the offence or the offender.
Prisoners: speak to prisoners.

EPR 57 PR 53

Expectations – categorisation

31. Determinate sentenced prisoners will not have to forfeit their right to consideration for recategorisation upon entry to the community.

Evidence References
Documentation: check records of decisions made. Check for appeals against decisions over last 6 months.
Prisoners: speak to prisoners.

EPR 51(5)
Section 9 – specialist units

Expectations – segregation

32. **There is a clear policy on the use of segregation.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check policy.</td>
<td>SMR 27 &amp; 32(1)</td>
</tr>
<tr>
<td><strong>Staff &amp; prisoners:</strong> examine how the community deals with members who are segregated and if they can return after segregation.</td>
<td>EPR 51(1) &amp; 60(5)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> follow-up prisoners who have been segregated and speak to them about their experience.</td>
<td></td>
</tr>
</tbody>
</table>

Expectations – resettlement

33. **Sentence plans reflect the full range of prisoners’ assessed needs, whether or not they can be met by the TC.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check therapy meets identified needs, as determined by sentence plans. See if an assessment is made of when it is time for prisoners to move on. Check planning takes place for onward progression to an appropriate establishment to meet identified needs that cannot be met within the TC.</td>
<td>SMR 66(1) &amp; 69</td>
</tr>
<tr>
<td><strong>Staff:</strong> check liaison with receiving prisons for post-TC support.</td>
<td>EPR 103(2) &amp; (3)</td>
</tr>
<tr>
<td><strong>Prisoners:</strong> check prisoners are tutored in methods of self-support before moving on.</td>
<td></td>
</tr>
</tbody>
</table>

34. **Prisoners have access to appropriate interventions, as determined by their sentence plan.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check needs assessment of population. Check a sample of sentence plans. Check for therapeutic competition between the TC and other interventions.</td>
<td>EPR 103(2)</td>
</tr>
<tr>
<td><strong>Staff:</strong> see how issues of confidentiality are dealt with, e.g. TC and SOTP both separately stipulate confidentiality.</td>
<td>SMR 59</td>
</tr>
</tbody>
</table>
### Section 9 – specialist units

**Therapeutic communities**

35. **Prisoners are prepared for transfer or release from the TC.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prisoners:</strong> check what preparations are made for transfer/release and what support networks are being put in place to continue after release/transfer.</td>
<td>EPR 107(1)</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check sentence plans. Check the proportion of prisoners that are transferred and the proportion that are released to the community. Check the proportion of those who fail to complete therapy.</td>
<td>SMR 80</td>
</tr>
<tr>
<td><strong>Staff:</strong> check the input the outside community has in the TC and how others are commissioned to provide continuing support following a prisoner’s release/transfer.</td>
<td>PR 5</td>
</tr>
</tbody>
</table>
Glossary of abbreviations

International human rights instruments

**Legally binding**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
</tr>
<tr>
<td>Vienna</td>
<td>Vienna Convention on Consular Relations and Optional Protocols, 596 UNTS. 261 (entered into force 19 March 1967)</td>
</tr>
<tr>
<td>UNCAT</td>
<td>Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, G.A. res. 39/46, [annex, 39 UN GAOR Supp. (No. 51) at 197, UN Doc. A/39/51 (1984)] (entered into force 26 June 1987)</td>
</tr>
</tbody>
</table>

**Normative**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>DAA</td>
<td>Declaration of Alma-Ata (International Conference on Primary Health Care, Alma-Ata, USSR, 6 -12 September 1978)</td>
</tr>
<tr>
<td>BOP</td>
<td>Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment, G.A. res. 43/173, annex, 43 UN GAOR Supp. (No. 49) at 298, UN Doc. A/43/49 (1988)</td>
</tr>
</tbody>
</table>

HMIP: Expectations  April 2008
**Glossary of abbreviations**

<table>
<thead>
<tr>
<th>Abbreviation</th>
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</tr>
</thead>
<tbody>
<tr>
<td>BPTP</td>
<td>Basic Principles for the Treatment of Prisoners, G.A. res. 45/111, annex, 45 UN GAOR Supp. (No. 49A) at 200, UN Doc. A/45/49 (1990)</td>
</tr>
<tr>
<td>CCLEO</td>
<td>Code of Conduct for Law Enforcement Officials</td>
</tr>
<tr>
<td>DEDRB</td>
<td>Declaration on the Elimination of All Forms of Intolerance and of Discrimination Based on Religion or Belief</td>
</tr>
<tr>
<td>DEVAW</td>
<td>Declaration on the Elimination of Violence against Women</td>
</tr>
<tr>
<td>DPPED</td>
<td>Declaration on the Protection of All Persons from Enforced Disappearances</td>
</tr>
<tr>
<td>DRM</td>
<td>Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities</td>
</tr>
<tr>
<td>DRR</td>
<td>Declaration on the Right and Responsibility of Individuals, Groups and Organs of Society to Promote and Protect Universally Recognized Human Rights and Fundamental Freedoms</td>
</tr>
<tr>
<td>MTC</td>
<td>Model Treaty on the Transfer of Supervision of Offenders Conditionally Sentenced or Conditionally Released</td>
</tr>
<tr>
<td>MTT</td>
<td>Model Treaty on the Transfer of Proceedings in Criminal Matters</td>
</tr>
<tr>
<td>OA</td>
<td>The Oath of Athens (International Council of Prison Medical Services, 1979) (The International Council of Prison Medical Services was established in 1977. The first World Congress of Prison Medicine, which took place in Dijon in November 1978, was held under its auspices. The Oath of Athens was unanimously approved by the International Council the following year.)</td>
</tr>
<tr>
<td>PME</td>
<td>Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, G.A. res. 37/194, annex, 37 UN GAOR Supp. (No. 51) at 211, UN Doc. A/37/51 (1982)</td>
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Glossary of abbreviations

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<tbody>
<tr>
<td>PPPMI</td>
<td>Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care, adopted by General Assembly resolution 46/119 of 17 December 1991</td>
</tr>
<tr>
<td>R 1990/20</td>
<td>UN Economic and Social Council: Resolution 1990/20</td>
</tr>
<tr>
<td>UDHR</td>
<td>Universal Declaration of Human Rights</td>
</tr>
</tbody>
</table>

Regional human rights instruments

**Legally binding**

- **ECHR** Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 (Rome, 4.XI.1950)

**Normative**

- **ECHR** Judgements of the European Court of Human Rights
- **EPR** Recommendation Rec(2006)2 of the Committee of Ministers to member states on the European Prison Rules (Adopted by the Committee of Ministers on 11 January 2006 at the 952nd meeting of the Ministers’ Deputies)
- **R(82)17** Recommendation No. R (82) 17 of the Committee of Ministers to Member States Concerning Custody and Treatment of Dangerous Prisoners (Adopted by the Committee of Ministers on 24 September 1982 at the 350th Meeting of the Ministers’ Deputies)
Glossary of abbreviations

R(98)7 Recommendation No R (98) 7 of the Committee of Ministers to Member States Concerning the Ethical and Organisational Aspects of Health Care in Prison (adopted by the Committee of Ministers on 8 April 1998 at the 627th meeting of the Ministers’ Deputies)

R 89/12 Recommendation no. r (89) 12 of the Committee of Ministers to member states on education in prison (adopted by the Committee of Ministers on 13 October 1989 at the 429th meeting of the Ministers’ Deputies)

National legislation

DDA Disability Discrimination Act 2005
DPA Data Protection Act 1998
HRA Human Rights Act 1998
HSA Health and Safety Act 1974
HSfW Healthcare Standards for Wales 2005
MHA 2007 Mental Health Act 2007
MHSW The Management of Health and Safety at Work Regulations 1999 (Statutory Instrument 1999 No. 3242)
PA Prison Act 1952
PR The Prison Rules 1999 (Statutory Instrument)
RRAA Race Relations (Amendment) Act 2000
RRAAR Race Relations Act 1976 (Amendment) Regulations 2003
RRA Race Relations Act 1976
SfBH Standards for Better Health 2004

Case law

Campbell v UK Case of Campbell v. the United Kingdom: Application number 52/1990/243/314 Judgement of 25 March 1992 (breached Article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 as regards interference with correspondence)

Cotlet v Romania Case of Cotlet v. Romania, Application No. 38565/97, heard at the European Court of Human Rights (breached Article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 on account of delays in the delivery of correspondence and on account of the fact that correspondence was opened. Also violated Article 8 on account of the refusal to provide writing materials)
Glossary of abbreviations

Demirtepe v France  Case of Demirtepe v. France: Application number 00034821/97 (breached Article 8(1) of Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11, as regards interference with right to respect correspondence)

Edwards v UK  Case of Paul and Audrey Edwards v. the United Kingdom: Application number 00046477/99 (breached Article 2 of Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 as regards circumstances of the applicant’s son’s death and additionally as regards the failure to provide an effective investigation)

Ezeh & Connors v UK  Case of Ezeh and Connors v. the United Kingdom: Application Numbers 00039665/98 and 00040086/98 respectively (breached Article 6(1) of Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 as regards those charged with a criminal offence defend himself through legal assistance and the applicability of this to prison adjudication proceedings)

Labita v Italy  Case of Labita v. Italy: Application number 00026772/95 (breached, inter alia, Article 3 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 with regard to lack of effective investigation into suspected ill treatment and Article 8 as regards interference with correspondence)

Lord v Sec State  Case of Lord, R (on the application of) v. Secretary of State for the Home Department [2003] EWHC 2073 (Queen’s Bench Division, Administrative Court 1 September 2003 (breached Data Protection Act 1998, Section 29)


Niedbala v Poland  Case of Niedbala v. Poland: Application number 00027915/95 (breached, inter alia, Article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 with regard to as regards interference with correspondence)

Peers v Greece  Case of Peers v. Greece: Application number 00028524/95 (breached Article 3 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 with regard to degrading treatment)

Price v UK  Case of Price v. the United Kingdom Application number 00033394/96 (breached Article 3 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 with regard to degrading treatment)

Puzinas v Lithuania  Case Of Puzinas v. Lithuania: Application number 00044800/98 (breached Article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms, as amended by Protocol No. 11 with regard to interference with correspondence)