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1 INTRODUCTION

The aim of this policy is to ensure that all adult prisoners (aged 18 or over) are protected from abuse and neglect. It describes the processes HMP Ashfield has put in place to ensure that prisoners receive a level of protection that is equivalent to that provided to adults in the community with the care and support needs of those who are at risk of abuse or neglect.

2 OBJECTIVE

The objective of this policy is to ensure prisoners are protected and kept safe from abuse and neglect. Staff have a common law duty of care to prisoners that includes taking appropriate action to protect them. The policy ensures that those who are unable to protect themselves as a result of care and support needs are provided with a level of protection that is equivalent to that in the community.

The key objectives are:

- Ensure Prisoners are safeguarded against abuse
- Raise awareness about the abuse of vulnerable adults
- Reduce the risk of abuse in the Prison environment
- Ensure that when allegations of abuse come to light appropriate actions are taken

The Safeguarding policy works alongside the Mental Capacity Act 2005. The underlying philosophy of the MCA is to ensure that those who lack capacity are empowered to make as many decisions for themselves as possible and that any decision made, or action taken, on their behalf is made in their best interests.

The five key principles in the Act are:

1. Every adult has the right to make his or her own decisions and must be assumed to have capacity to make them unless it is proved otherwise.
2. A person must be given all practicable help before anyone treats them as not being able to make their own decisions.
3. Just because an individual makes what might be seen as an unwise decision, they should not be treated as lacking capacity to make that decision.
4. Anything done or any decision made on behalf of a person who lacks capacity must be done in their best interests.
5. Anything done for or on behalf of a person who lacks capacity should be the least restrictive of their basic rights and freedoms.

3 RESPONSIBILITIES

Serco, along with its partner agencies are committed to the safe running of HMP Ashfield. Within the Safeguarding process responsibilities are as follows:

Serco	- providing the facilities and staff to ensure a duty of care is given to the prisoners
Catch 22	- Offender management
AWP	- Mental Health and Drug services provisions.
Bristol Community Health (BCH)	- Primary healthcare provision
Social Care	- South Gloucestershire Council
IMB	- Independent Monitoring Board
Turning Point	- Interventions / Programmes delivering

DEFINITIONS

Defining words and phrases used within this Local Operating Procedure which may have varying interpretation

- Physical abuse – including any form of assault; misuse of restraint or inappropriate physical sanctions; withholding food or drink; force-feeding; wrongly administering medicine; failing to provide physical care and aids to living;
- emotional or psychological abuse - including verbal abuse; threatening abandonment or harm; isolating; taking away privacy or other rights; harassment or intimidation; blaming; controlling or humiliation;
- financial or material abuse - including withholding money or possessions; theft of money or property; fraud; intentionally mismanaging finances; borrowing money and not repaying; discriminatory abuse - including verbal harassment or other maltreatment due to a prisoner's protected characteristics
- Institutional abuse - including the use of systems and routines which lead to neglect of a prisoner.
- Sexual abuse - including sexual assault, rape, inappropriate touching, molesting; pressuring a prisoner into sexual acts and non-contact sexual abuse such as indecent exposure, inappropriate looking, harassment, teasing, innuendo and simulation.

5 PROCEDURE

5.1 Identifying and meeting need

In order to prevent abuse and neglect all staff at HMP Ashfield will ensure that a prisoner's needs are comprehensively assessed and that those needs are met. This process begins on reception to the establishment and continues throughout their time in custody.

On Reception all new Receptions will undergo a first night process which will include an interview with a member of staff and an initial health screening.

All new Receptions will be checked to ensure that there is an up to date Cell Sharing Risk Assessment (CSRA – Annex A). Unless there is intelligence /evidence such as adjudications, IRs etc. to suggest that the risk needs to be reviewed, the CSRA will remain in date and effective. If a CSRA arrives and does not appear to be at the required standard, the member of staff working in reception will complete a new CSRA.

The purpose of these processes is to ensure that prisoners are assessed for the level of risk they pose to themselves and / or others, any vulnerability is identified and to ensure that any of their immediate needs are addressed.

The first night and induction process is guided by the First Night and Induction Book (Annex G) which contains within it the interview templates, compacts and the induction timetable.

Staff conducting the interview will sit down with the prisoner and complete the required elements of the document with them, paying particular attention to any concerns or issues raised and ensuring that these are all recorded within the document. This interview will take place in the dedicated first night centre and in a room allowing for privacy.

Each prisoner will be given a health screening by a medical professional who will ensure that the medical needs of the prisoner are addressed including medication, booking of appointments, drug and alcohol issues and where appropriate communicated to all relevant departments. The healthcare professional will only communicate what they are able to without breaching the confidentiality of the prisoner's medical status.

Any concerns raised during the first night process, medical or otherwise, will be recorded and will have prompt referrals made to appropriate service's such as Turning Point, Chaplaincy, Catch 22, AWP, Healthcare, "Here to Hear" (Listeners) or any other any other suitable service.

All prisoners will be greeted by the duty "here to hear" who will be in reception to assist with any issues new receptions may have and give an understanding of the process's in place at Ashfield. (Full explanation of initial reception process can be found in LOP – First Night in Custody)

All staff who have contact with prisoners are trained in line with PSI 64/2011 Safer Custody, and are able to act accordingly from information received or behaviour observed. If either indicate a risk of suicide or self harm then an ACCT (Assessment, Care in Custody and Teamwork) plan will be opened

by completing the concern and keep safe form. (See LOP Management of Prisoners at risk of harm to self or others for full details relating to ACCT documents)

Throughout a prisoner's time in custody Residential staff will be the first point of contact for any problems prisoners might have in regards to prison life. Residential staff are responsible for reporting needs and issues to the appropriate parties who can resolve the issues raised.

It is expected that having received the required training Staff will be better equipped to deal with and Identify any signs of distress, anxiety or anger which might lead to prisoners harming themselves or others. To assist staff in their duties a database containing prisoner's triggers will be available to all staff allowing them regardless of working location to have an understanding of those prisoners in their care.

Social Care

Social Care at HMP Ashfield is provided by South Gloucestershire Council and Bristol Community Health (BCH) who are Ashfield's primary healthcare provision.

In the community, local authorities are responsible for meeting eligible care and support needs for people ordinarily resident in their area. Prisoners who are detained in HMP Ashfield are treated as if they were ordinarily resident in the area where the prison is located, regardless of where they have lived prior to imprisonment. Social Care at Ashfield will be delivered in line with PSI 03/2016

Any prisoner may have or develop needs for care and support. Only some levels of need will be sufficient to meet eligibility criteria for local authority services. It is for local authorities to determine, following needs assessment, whether or not an individual's needs meet the criteria for eligibility for services

Eligibility for care and support is set out in regulations under the Care Act; it is determined in line with the Care and Support (Eligibility Criteria) Regulations 2015 and statutory guidance. The threshold for eligibility for care and support services is the same as for people who are living in the community and does not change when a person enters custody, although the way in which needs are met may change. An adult may be eligible for care and support services if the adult's needs arise from, or are related to, a physical or mental impairment or illness and as a result of the adult's needs the adult is unable to achieve two or more outcomes set out in regulations, and as a consequence there is, or is likely to be, a significant impact on the adult's well-being.

These outcomes include:

- managing and maintaining nutrition
- maintaining personal hygiene
- managing toilet needs
- being appropriately clothed
- being able to make use of the prison safely
- maintaining a habitable environment
- developing and maintaining family or other personal relationships;
- accessing and engaging in work, training, education or volunteering;
- making use of necessary facilities or prison services and any recreational facilities or services

All staff working at Ashfield will make use of all available information to identify prisoners who may have care and support needs. There will be times when a prisoner arrives at Ashfield from another establishment where a prisoners care and support needs have already been identified; this will be communicated through PNOMIS social care alerts. Staff will ensure that South Gloucestershire Council are informed at the earliest opportunity should any support needs be identified.

Any prisoner at any point during their time in custody can be referred if there are concerns about their well being, in addition to the needs that are apparent upon reception, prisoners may develop needs at any point during a period of imprisonment, for example following a period in hospital or simply as a result of increasing age. Staff working at Ashfield are not to determine eligibility for care and support services; even if a prisoner does not meet the relevant criteria as listed above, all cases of concern in regards to the care and support of a prisoner are to be referred. A record of all referrals made must be kept.

Staff should seek the full involvement of the prisoner with the referral and gain consent of the prisoner to making the referral; however staff can proceed with a referral even if consent is withheld, if they consider that the individual is either unable to make an informed decision on the matter or is either placing themselves or others at an unacceptable level of risk by not giving consent.

Referrals can be made through a number of methods be it a referral form, telephone call, or by e-mail. A record must be kept that the referral was made, to whom and when. Prisoners are able to refer themselves.

Prisoners will not experience any delays when they are in urgent need of care and support. Priority will be given to meeting any urgent and immediate needs which may put the prisoner at risk, including assistance with toileting, nutrition, severe mobility issues and managing medication. It is for South Gloucestershire Council to provide services to meet urgent eligible needs for which they are responsible, including needs for equipment. This will be negotiated with Ashfield taking into account the role of the establishment and its population. Upon arrival if an urgent need to adapt buildings is indicated, this will be considered by Ashfield and consideration may need to be given to moving the prisoner to a more suitable location. In the event of urgent needs arising and local authority services not being available, staff will need to seek assistance from healthcare or exceptional arrangements may be put in place on a case by case basis for staff or contracted agency staff to provide care and support.

Ashfield will enable South Gloucestershire Council to arrange and complete assessments in a timely manner, in some cases the prisoner may present a risk to social workers completing assessment and it is the responsibility of Ashfield to manage this risk appropriately.

If a prisoner refuses an assessment the local authority is not required to carry out the assessment unless:

- The prisoner lacks the capacity to refuse and the local authority believes that the assessment will be in their best interests or;
- The prisoner is experiencing or is at risk of abuse or neglect

If a prisoner refuses an assessment and staff believe there is any level of risk of abuse, or if a prisoner's needs are such that the absence of a care and support service might be considered neglect, staff must

request from the local authority that an assessment be completed and ensure a record is kept of the details of this request.

Where abuse or neglect are suspected this is to be reported as documented within this LOP or refer to PSI 16/2015 Safeguarding Adults.

Timings for an assessment are assumed to vary depending on both the prisoner's individual circumstances and the nature of the assessment. An assessment may require up to one or two hours at one sitting. However, depending on the individual prisoner, there may need to be two to three shorter meetings rather than one longer one

Ashfield will identify the contribution of custodial services to the care and support for a prisoner in negotiation with the assessor and prisoner, where an individual care and support plan requires care staff or others to have access to the prisoner during the night state, these access requirements are understood and agreed by Ashfield and service providers and are consistent with the Local Security Strategy.

Following a needs assessment, if the prisoner has eligible needs the local authority along with the prisoner, care and support providers, and in some cases other professionals such as specialist social workers or healthcare staff, will prepare a care and support plan which sets out how the identified needs will be met and will set out how those eligible needs will be met by the local authority (or its contracted services). A prisoner's care and support plan is a confidential document, but can be shared with services with the consent of the prisoner, including any others involved in the care and support of the prisoner. The care and support plan can be provided to those who need to see it for the purposes of carrying out their statutory functions even without the prisoner's consent. A care and support plan to which prison staff have access can be shared with the Assistant Director responsible for the "Buddies" scheme (Prisoners Assisting other Prisoners scheme – See 5.3 Peer support). ***An individual's care and support plan must not be shared with other prisoners.***

Prisoners will be encouraged to consent to sharing their full care and support plan with staff working at Ashfield. If a prisoner is not willing to consent to sharing the full details of the plan, then consent may be given to sharing the parts of the plan which relate to the provision of custodial or other services (such as Learning & Skills) or services from other prisoners. If the prisoner does not consent to sharing any of the plan information, then staff can request sight of the plan from the local authority and explain to the prisoner that if the staff are not aware of the care and support plan, that it may limit the contribution to the care and support the prison is able to provide and will exclude any contribution to care under a "Buddies" scheme.

Care and support plans may be shared by local authorities and their providers without consent when:

- the prisoner lacks the capacity to consent as defined in the Mental Capacity Act and the local authority or their agent believes it will be in their best interests;
- the prisoner is experiencing or is at risk of abuse or neglect;
- others may experience harm as a consequence;
- others need to see it for the purposes of carrying out their statutory functions.

Both Ashfield and the local authority will work together in the delivery of the care and support plan, for example Ashfield will need to continue to provide meals for a prisoner, but the local authority may

provide assistance with eating, the prisoner may need to attend the gym for specific remedial exercise and care services might provide assistance with movement. The care and support may also indicate requirements to prevent the escalation or worsening of needs. The plan may also indicate services which might reasonably be provided by voluntary sector services or by the buddies' scheme that is in place at Ashfield.

Where a person is not eligible for services they will receive written information relevant to their needs. If following an assessment, a prisoner does not meet the threshold of eligibility for services, the local authority will provide the prisoner information about what can be done to meet or reduce needs and what services are available; and information about what can be done to prevent or delay needs from developing or getting worse.

Prisoners cannot be compelled to accept care and support services. If a prisoner refuses care and support services Ashfield will carefully consider the risks this presents to the prisoner, staff and the wider regime. Where there is a significant concern over the wellbeing of the prisoner, Ashfield will seek advice from local authority adult safeguarding teams.

If a prisoner is in receipt of care and support, or may require care and support on transfer or discharge, Ashfield will give timely notice to local authorities, and to care and support service providers when a decision is made to transfer a prisoner to another establishment and will advise local authorities of planned discharge dates. Ashfield will identify the contribution it makes and any contribution under the buddies' scheme as part of the information provided, so that appropriate arrangements can be made for the new location.

Ashfield will inform local authorities and their providers of decisions to move or release prisoners to enable a local authority to meet its duties for continuity of care, subject to security restrictions, or for other prisoners where this information creates unacceptable risk. Local authorities should review an individual's care and support plan each time they are released from custody.

Staff at Ashfield will contribute to reviews of care and support plans for prisoners with care and support needs. Local authorities are responsible for monitoring delivery of services against care plans and local authorities or their providers are required to review care and support plans regularly, and to involve in the review the prisoner, and any person that the prisoner asks the authority to involve. Timings for reviews of assessments will depend on whether the prisoner's situation is stable or if circumstances or needs have changed.

As a guide, the main triggers for review by a local authority are likely to be:

- Planned reviews by the local authority;
- Transfer
- Change to a prisoner's condition, for example following a period in hospital;
- Leaving prison to live in the community or in approved premises

5.2 Preventing abuse or neglect by staff

Staff at Ashfield are in a position of authority and in order to prevent abuse and neglect it is expected that standards of behaviour are set and maintained. All staff recruited to work at HMP Ashfield are security checked and vetted prior to their appointments.

All staff employed by Serco and working at HMP Ashfield will have a clear understanding of the professional behaviour expected. All new employees at Ashfield will complete Serco's Code of conduct, this will include the standards of professional and personal conduct, including being courteous, reasonable and fair in their dealings with prisoners, and treating them with decency and respect. It is the responsibility of the managers to ensure these standards are met and maintained, a means for measuring this will be through the annual completion of computer based learning modules including an annual refresher in Serco's Code of conduct. Other modules included in this area are Think Privacy, Health & Safety, Data Protection and Equality & Diversity.

Whilst working at HMP Ashfield it is expected that staff will establish positive relationships with prisoners, and will treat prisoners with respect and dignity. It is expected staff will be open, honest and transparent, especially within the role of personal Officer, it is an important part of work that staff undertake to support rehabilitation and assist offenders in reducing their risk of re-offending meaning they are able to reintegrate successfully back into society.

Although positive relationships are encouraged professional standards make it clear that staff must not have any sexual involvement with a prisoner and must ensure that their dealings with prisoners, former prisoners and their friends and relations are not open to abuse, misrepresentation or exploitation on either side.

There may be times when staff working at HMP Ashfield are required to use force, be it to prevent injury to self or injury to a third party. In this instance staff must not use unnecessary or unlawful force or assault a prisoner. PSO 1600 describes the circumstances, in which force may be used, explaining that it will be justified, and therefore lawful, only where it is reasonable in the circumstances and necessary and if no more force than is necessary is used and it is proportionate to the seriousness of the circumstances.

Failure to comply with these standards can lead to disciplinary action being taken, which may result in anything ranging from a verbal warning through to dismissal. Serious cases of abuse or neglect will be referred to the police.

5.3 Preventing abuse or neglect by other prisoners

For abuse and neglect to be prevented, standards of behaviour must be set and maintained for the prisoners. Prison Rules will provide the basis for this, and these will be enforced through either the adjudication process (LOP for adjudication process contains details in regards to placing a prisoner on report) or IEP policy. There is a range of other methods available in regards to ensuring the good order and discipline of the establishment are maintained and prison staff enforce these and ensure that standards of behaviour are maintained

Incentives and Earned Privileges (IEP) policy here at Ashfield & PSI 30/2013 describes how positive behaviour including helping and assisting other prisoners is encouraged. It also sets clear expectation in regards to the action taken for failure to comply with the basic expectations of a prisoner.

Ashfield is committed to the elimination of anti-social behaviour of any description. Both Ashfield's Anti-Bullying policy and Violence Reduction Strategy involves everyone in the prevention of such actions. Management and staff must encourage prisoners to take responsibility for promoting pro-social behaviour and for discouraging anti-social behaviour. Emphasis will be placed on providing support and encouragement to prisoners and others who may become victim to bullying and anti social behaviour.

Definition of anti-social behaviour is as follows:

"Any Incident, in which a person is abused, threatened or assaulted. This includes explicit or implicit challenge to their safety, well being or health. The resulting harm may be physical, emotional or psychological; includes fighting, spitting and verbal abuse"

This local policy follows PSI 64 / 2011. The policy will be communicated to all prisoners during their induction programme and will be displayed throughout the prison.

Serious cases of abuse or neglect will be referred to the police in accordance with the protocol on the appropriate handling of crimes in prisons. In this instance the incident will be immediately reported to the Duty Operations Manager who will take the appropriate action considering each case on its merit and if needed consider the need for segregating prisoners for the purposes of maintaining good order or discipline / and or for their own protection. (LOP for the segregation of prisoners and PSO 1700 will set out the procedure for this).

Before Segregating prisoners it is worth considering that inappropriate segregation of prisoners not in accordance with the relevant policy may also be regarded as incidents of abuse or neglect.

Peer Support

Buddies

There are forms of support at Ashfield that are in relation to prisoners assisting prisoners, it is important that this form of support has the appropriate measures in place to ensure that it is free from abuse or neglect. (PSO 17/2015)

Where a prisoner has eligible needs, the local authority is responsible for meeting them. Where the prisoner does not meet the eligibility criteria the needs of that prisoner will be the responsibility of the prison. Other Prisoners may be involved in the delivery of this support.

The prisoners who undertake this role at Ashfield are known as "Buddies", the role of those employed within this role is to help prisoners at Ashfield with their daily routine, below is the types of activities that are acceptable for the prisoners to undertake when assisting other prisoners:

- Transportation – to help prisoners move from one area of a prison to another due to physical impediment permanent or temporary.

- Transportation of food to and from the designated kitchen areas
- Helping to keep a prisoners cell tidy and accessible
- Providing reminders about the need for hygiene to be maintained
- Helping to reorganise prisoners cells so that necessary items are accessible
- Accessing work, training, education, volunteering or recreational activities that are available in the establishment
- Helping prisoners to raise concerns regarding abuse and neglect where there impairment prevents them from doing so
- Moving and handling, including manual lifting where appropriate
- Helping prisoners to read and have an improved understanding of instructions that are labelled throughout the establishment.

It is stressed to those undertaking this role that they will not be able to help with any intimate or personal care needs, nor handle or administer any medication.

All prisoners assessed as suitable to do so are risk assessed to undertake the activities involved. Working to meet the care and support needs of other prisoners puts a prisoner in a responsible position. All prisoners applying for the role need to be of enhanced IEP status, and before being accepted for the role must have been at Ashfield for at least 3 months, Offender Management will also be consulted reference their suitability, security cleared and suitably trained. Support and supervision will be given at two week intervals allowing for any issues or concerns to be raised and addressed.

All prisoners engaged in providing assistance to other prisoners will be made aware of the definitions of abuse and neglect, as wilful failure of the prisoner providing assistance to perform their duties could be seen as neglect or abuse.

All prisoners providing and receiving assistance are made aware of methods and means to raise any issues or concerns relating to any abuse, neglect or mistreatment.

Before undertaking the role the appointed prisoner will read, agree and sign the Buddy compact (Annex B) this ensures that the prisoner is clear about the role, the duties expected and behavioural expectations are made clear. The limitations of the role will also be read and understood. Alongside this will be a buddy recipient agreement (Annex C) this outlines the expectations of the Ashfield Buddy and receiving prisoner. The buddy will also be issued a best practice document (Annex D) that will give clear and transparent guidance on expectations within the role.

If the buddy is found to be wilfully neglecting their responsibilities then appropriate action will be taken, this could include the issuing of an IEP warning or the use of the adjudication report. Each case will be judged on its severity and either the Equality manager or Duty Custodial Operations Manager will be consulted to ensure that required course of action is taken.

Here to Hear

Another form of peer support available at HMP Ashfield is a scheme known as "Hear to Here". This is a scheme similar to the commonly known "listeners" scheme used at other establishments, it allows for prisoners to support other prisoners in dedicated rooms on each houseblock when sometimes all a prisoner needs is someone to talk too.

There is an unambiguous disclosure policy which Here to Hear representatives sign-up to. They are bound to remind any prisoner requesting this service of the three circumstances under which they are bound to make disclosures to prison staff. They are when a prisoner discloses:

- Intention to take their life
- Intention to cause harm to another (prisoner or staff)
- Involvement in terrorism

Here to hear representatives are not duty bound to disclose any other content from their discussion with the prison

The Here to Hear scheme is managed by the Safer Custody Lead who will monitor the scheme on an ongoing basis. The Safer Custody Lead will also:

- Publish the eligibility and selection process of peer supporters
- Organise training and retain training records
- Facilitate ongoing staff supervision and support of peer supporters, including debriefing arrangements
- Will publicise the operation of schemes, the rules of disclosure and how the service can be accessed
- Will manage the de-selection and appeals processes
- Will produce a rota ensuring all Here to Hear representatives get sufficient time off of the rota

It should be noted that whilst HMP Ashfield operates its own scheme, all prisoners have access to the Samaritans by telephone 24 hours a day from their in-cell telephones at no cost.

Here to hear reps needing to debrief after a call-out, or needing confidential support must have the facility to contact Samaritans by telephone privately. Alternatively during the core day they may access the Mental Health Team.

When a prisoner, who is assessed as high risk for cell sharing, requests to see a Here to Hear representative, staff must make an assessment on a case by case basis as to whether or not the scheme can offer support to the prisoner. In some cases, such as at night, it may be considered appropriate for two representatives to be present. This decision will be taken by the Duty Operations Manager. If it is decided that the prisoner should not be given access to a representative, the prisoner should be reminded they can access the Samaritans by telephone.

5.4 Preventing abuse or neglect by others

To ensure that prisoners are not subject of abuse by others, either during visits or any other forms of communication including mail and the use of in cell telephone all contact will be subject to the guidelines set out in the following Local Operating Procedures and Policies.

- Public Protection (LOP)
- Visits Policy

- Local Security Strategy

These policies are in line with PSI 15/2011 Management and Security of Visits and PSI 16/2011 Providing Visits and Services to Visitors.

5.5 Protecting particular groups

Abuse can occur within all sections of society and there should be no discrimination based on assumption about impairment, age, class, gender, sexual identity, family relationships, religion, ethnic background, race, or culture.

Some people can be more vulnerable to abuse and exploitation than others because of their impairments. This includes people with physical, sensory and mental impairments. However the care they receive whilst at HMP Ashfield will remain at the same level.

Where a prisoner's disability increases the risk of them being subject to abuse or neglect reasonable adjustments will be made to prevent this. This could be through social care support or peer support (Buddies). Disabled prisoners who having been assessed may be housed in one of seven purpose built disabled cells that are Disability Discrimination Act compliant.

Regardless of disability any abuse or neglect within Ashfield will be reported as documented within this policy.

5.6 Reporting suspected abuse or neglect

Prisoners

There is a range of options for prisoners who wish to raise concerns about abuse or neglect by others. The prisoners who are most at risk of abuse or neglect by others include those least equipped to report it, and it is important that all prisoners are made aware of the support that is available to them in taking any of the following actions. This can include assistance from other prisoners or staff, or from the Independent Monitoring Board.

At the lowest level, prisoners are able to raise issues by talking to a member of staff, be it through Personal Officer or any member of staff working the Residential Unit that day. This is the appropriate means for prisoners to raise relatively low level issues that can be resolved quickly by frontline staff.

Prisoners have a number of methods of which they are able to report incidents relating to a safeguarding matter:

- Prisoner Incident Report Form
- Discrimination Incident reporting Form (DIRF) (PSI 32/2011)
- Request complaints system (PSI 02/2012)
- IMB request form
- Samaritans (Access 24 hours a day at no cost)

- Safer Custody line (Access 24 hours a day at no cost)
- Application system
- Prison Ombudsman (PSI 58/2010)

Prisoner Complaints is the process for prisoners to make formal complaints. This is likely to be the main way in which prisoners raise concerns about abuse or neglect. It includes an avenue of appeal, and a confidential access system that allows particularly serious or sensitive complaints to be routed directly to the Governor, the Deputy Director of Custody or the Chair of the Independent Monitoring Board.

Staff

There is a range of ways in which staff at Ashfield can challenge and report suspected abuse of a prisoner by another prisoner:

- Mercury Intelligence report (MIR)
- Discrimination Incident reporting Form (DIRF)
- Safer Custody Report form
- IEP warning (IEP policy & PSI 30/2013)
- Adjudication process (LOP Adjudications & PSI 47/2011)
- Social care referral form

Staff are also responsible for taking action to ensure that the needs of the prisoner who has been subject to abuse or neglect by others are met and that he is protected from further abuse or neglect using relevant processes methods of reporting noted above.

When a prisoner is found to be neglecting his own welfare it is the responsibility of staff to ensure that appropriate action is taken to ensure that his needs are met using any of the methods listed above and making the necessary referrals.

External partners

Staff are required to challenge and report misconduct by another member of staff to their manager. This includes reporting any suspected abuse or neglect of a prisoner by a member of staff. This is also the case where the suspected abuse or neglect is by a non-directly employed member of staff. In these cases the concerns must be reported to the Duty Custodial Operations Manager or the Manager responsible for that area.

Within Ashfield there are a number of external partners some of these are listed below:

- Turning Point – Programmes delivery
- Catch 22 – Offender management unit
- AWP – Avon and Wiltshire partnership (Mental health)
- Healthcare provider – Bristol Community Health (BCH)
- GP's – Hanham Health
- IMB – Independent Monitoring Board

Staff not directly employed by Serco are able to challenge and report suspected abuse or neglect of a

prisoner by another prisoner in the same way as staff employed by Serco.

Staff not directly employed by Serco are required to challenge suspected abuse of a prisoner by other members of staff directly employed by Serco or not. Any incident of abuse should be reported directly to an appropriate manager such as the Duty Custodial Operations Manager with the necessary paperwork completed.

Visitors, families and other individuals or organisations who are in contact with prisoners should report concerns about abuse or neglect to a member of staff (in person or by phone), or write to the Director.

Incidents that are of a more serious matter that require immediate action will be reported directly to the Duty Custodial Operations Manager who will ensure that the appropriate course of action is taken.

5.7 Responding to reports of suspected abuse or neglect

It is important that all reports of suspected abuse or neglect are treated seriously. There are various processes that it may be appropriate to follow with the aims of:

- Preventing further abuse or neglect;
- Supporting and protecting victims, witnesses and reporters;
- Investigating whether or not the suspected abuse or neglect took place; and
- Ensuring that appropriate sanctions are applied to the perpetrator(s):

5.8 Support and Protection for Victims and Witnesses

It is important that both the victim and witnesses of any abuse or neglect receive the correct level of post incident care. Both staff and prisoner may at some point require support following the reporting of an incident, this ensures that there is no further abuse or neglect and that the witnesses are protected and supported.

At HMP Ashfield prisoners who have been involved in an incident of abuse or neglect will have access to the following methods of support:

- Staff – All Staff who work at HMP Ashfield have a duty of care to all prisoners and will support them in line with professional standards.
- Peer support – “Here to hear” reps are available 24 hours a day
- Samaritans – A free phone number that can be contacted 24 hours a day from a prisoners in cell phone.
- Safer Custody Team – Will be accessible to all prisoners and will assist in ensuring the correct level of support is available.

Each incident will be treated on its own merit and other forms of support may be required and offered.

5.9 Information sharing

Where it is necessary information regarding incidents of abuse or neglect actions will be taken to ensure that the information is shared with any other departments or organisations who have a safeguarding responsibility for the prisoner concerned, such as health and social care providers, Offender Management who may in turn pass this onto those responsible for the safeguarding of the prisoner in the community upon release, including approved premises staff and the relevant local authority

5.10 Monitoring and analysis of safeguarding information

The safeguarding lead must ensure that all information is collected on all recorded suspected instances of abuse or neglect and that analysis of this informs actions to improve relevant practices and procedures.

Information of relevance to safeguarding is collected through the various processes described in this instruction and in order to ensure effective protection from abuse or neglect this must be brought together in one place so that analysis of it can drive action to ensure that prisoners are effectively safeguarded.

Monthly safeguarding meetings will be completed to discuss any incidents relating to safer custody, this meeting will have minutes produced. The meeting must be chaired by a member of the safeguarding team and the Assistant Director of residence must also be in attendance. A representative from the following departments would also very often attend:

- Turning Point
- AWP
- IMB
- Healthcare
- Offender Management
- Public Protection
- Chaplaincy
- Equalities
- Security

The agenda for this meeting will consist of the following areas:

- Safer Custody Coordinator Representatives
- Minutes from Previous Meetings
- Safer Custody/Violence Reduction
- Death in Custody
- Training & Continuous Improvement
- Quick time Learning Bulletins (PPO)
- Safeguarding Adults
- NHS Report
- AWP Report
- I/P Medication

- AOB

Minutes from this meeting will be made available for all members of staff to see in a read only folder, the action plan derived from the meeting will be clear on who is responsible for an action and a completion time attached.

5.1 | Information & Training

In order to ensure this LOP is delivered to the desired level staff will undergo training and be annually refreshed in the following areas:

- First Night Procedures
- ACCT
- CSRA
- Safer Custody

6 RECORDS

Any requirements for documentation and retention protocols associated with this Local Operating Procedure

The following documentation / information will be generated throughout the safeguarding process and will be stored in accordance with the Data Protection Act (1998).

- First Night Booklets – Contains interviews, compacts and first night observations – to be kept on the wing and placed in the prisoners core record upon release or transfer – to be destroyed along with the core record as scheduled destruction date.
- ACCT Documents – Remain in possession of residence whilst active – Once closed stored by the safeguarding lead.
- CSRA – To be stored within the core record – to be destroyed along with the core record as scheduled destruction date.
- Any referral forms generated will be stored by the responsible agency / department in line with both local policies and the Data Protection ACT (1998)

7 REFERENCES

Other documents which should be referred to when applying this Local Operating Procedure

PSI 16/2015 – Adult Safeguarding in Prison
 PSI 07/2015 - Early Days in Custody
 PSI 20/2015 – The Cell Sharing Risk Assessment
 PSI 32/2011 – Ensuring Equality
 PSI 64/2011 – Management of Prisoners at risk of harm to self or others
 PSI 03/2016 – Adult Social Care
 PSI 30/2013 – Incentive and Earned Privileges
 PSI 17/2015 – Prisoners assisting other Prisoners

PSI 15/2011 – Management and Security of Visits
 PSI 16/2011 – Providing Visits and Services to Visitors
 PSI 02/2012 – Prisoner Complaints
 PSI 58/2010 – The Prisons and Probation Ombudsman
 PSI 47/2011 – Prisoner Discipline Procedures
 PSO 1600 – Use of Force
 PSO 3050 – Continuity of Healthcare
 PSO 1700 – Segregation
 First Night Induction Book
 Local Operating Procedure – First Night in Custody
 Local Operating Procedure – Management of Prisoners at risk of harm to self or others
 Local Operating Procedure – Adjudication Process
 Local Operating Procedure – Segregation of prisoners
 Local Operating Procedure – Public Protection
 Local Incentive and Earned Privilege Scheme
 Local Anti Bullying Policy
 Local Visits Policy
 Local Security Strategy
 Ashfield's Violence reduction strategy

8 MEASURES

How compliance with this Local Operating Procedure will be checked, audited or reviewed

Monthly Safer custody meeting
 Quality assurance checks
 Staff training records
 Internal Audits
 External Audits

9 APPENDICES

Any additional tables, charts, flowcharts etc which will enhance the Local Operating Procedure

Cell Sharing Risk Assessment – [Annex A](#)
 Buddy Compact – [Annex B](#)
 Buddy Recipient Agreement – [Annex C](#)
 Best practice document – [Annex D](#)
 Here to hear flow chart – [Annex E](#)
 Safer Custody Report form – [Annex F](#)
 First Night Induction Book – [Annex G](#)
 Social Care Staff Referral Form – [Annex H](#)
 Social Care Referral Instructions – [Annex I](#)
 Social Care Prisoner Referral form – [Annex J](#)

