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## 1. Introduction

### Welcome to PSO 1700 - Segregation

This revised document now incorporates the changes introduced by PSI 17/06 and from the full review conducted in 2006/7. These changes have been necessary to keep up to date with changes that have been made to policy following various court judgements and reports from the Prison and Probation Ombudsman and HM Chief Inspector of Prisons.

In producing the revision Offender Health and Safer Custody Group have made valuable contributions.

The reports highlighted the number of self-inflicted deaths within segregated environments was disproportionate to that of the general population.

### Self Inflicted Deaths in Segregation Units

In the period 2001 - 2006 inclusive, there were a total of 59 self-inflicted deaths initiated in **segregation settings**\* (of which 10 died in outside hospitals). This accounts for 12% of self-inflicted deaths within prison. Of the 59 deaths a total of 32% were on an open ACCT/F2052SH. Prisoners undergoing clinical management of substance misuse are particularly vulnerable and self-harm early on in custody (particularly women prisoners). Therefore, cellular confinement or a similar award which would result in reduced time out of cell should be avoided during the sentence, but principally during the first week. As with prisoners on an ACCT plan, exceptions are unavoidable and in such circumstances must be carefully managed supported by a vulnerability management plan.

The following extracts are taken from the Prisons and Probation Ombudsman report on self-inflicted deaths in segregation units.

“Those prisoners who are the most ‘difficult’ are often the most vulnerable and it is acknowledged that very damaged people can also be very damaging to others. Staff are undoubtedly faced with difficult decisions as to where to hold some prisoners and frequently care for prisoners in segregation when all other options have been exhausted. However, there have been cases where prisoners have been held in segregation units and the justifications for doing so have not been convincing. There have been cases where alternative options to segregation have not been adequately explored.”

“Giving vulnerable prisoners something to occupy their time is likely to be a crucial part of safeguarding the welfare of those in segregation”

\* Includes those segregated on normal location not just segregation units

It is with this in mind that PSO1700 now places a greater emphasis on maintaining the safety of prisoners in segregated environments, Traditionally cellular confinement has been regarded as a type of segregation that requires a greater amount of attention than any other type of reason for segregation. This has been reviewed so all types of segregation (Cellular Confinement/Removal From Wing/GOoD/R53etc) are treated on a more equal basis.

Segregation should be used only as a last resort whilst maintaining a balance to ensure it remains an option for disruptive prisoners, this does include prisoners on an open ACCT plan, but only when they are such a risk to others that no other suitable location is appropriate and where all other options have been tried or are considered inappropriate. It is expected that segregation staff focus on helping prisoners manage their behaviour and problems rather than simply on punishment. It's desirable that there is greater interaction between staff and prisoners which in turn will alert staff to any concerns on mental health issues and/or risk of self-harm, as well as between segregation and wing staff which will assist planning for the prisoners return to normal location.

A history sheet has been developed which is especially designed to meet the needs of segregation and enable staff to be better informed about a segregated prisoner whilst providing a central point to hold all type of information appertaining to segregation.

Positive regimes and activities are encouraged as this will act as a diversion to the boredom and loneliness of segregation.

Throughout the review it became very apparent that PSO1700 cannot cover every angle for every type of establishment throughout the estate given their diverse nature. Therefore each establishment needs to develop their own segregation policy to reflect their own needs. This should be structured on PSO1700 and will adhere to Prison Standard 55 and be an integrated part of the local safer custody strategy.

**Contracted Prisons-** To avoid confusion the following should be used as equivalents. Governing Governor = Director, Governor in charge of the establishment = Director acting in charge, Duty Governor = Duty Director and all other Governor Grades = Assistant Directors

In Areas not yet overseen by a DOM references to 'Regional Managers Custodial Services/DOM' should be read by Directors of contracted prisons as referring to their Corporate Operational Director.

For high security prisons, references to Regional Manager Custodial Services should be read as meaning the Director of the High Security Prisons.

Where the terms 'Young Person' or 'Young People' are used in this PSO, they refer to young persons or people under the age of 18 and those who have reached the age of 18, but are held in YJB commissioned places.

## HELP

When using the segregation search facility, type a key word in the box at the top of the page and click GO button

## CONTACT

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## 2. Management Of Unit

### 2.1 Selection And Training Of Staff

Management of Segregation Units

Selection And Training Of Staff

#### Outcome

Staff who work in the segregation unit create and maintain a positive ethos within the unit and ensure that all prisoners are treated decently fairly and with dignity.

- Establishments have a published policy for the selection of staff who work in the segregation unit. Staff are selected on the basis of their competence to deal with difficult situations and their ability to form constructive relationships with prisoners positively and to encourage reasoned changes in prisoner behaviour.
- Staff working in segregation units need to be aware of diverse needs of prisoners in their care. Issues to consider would include religious observance and the need to explain to those with English not a first language.
- The in charge Governor/Director for contracted prisons personally endorses the selection of each member of staff.
- The recommended maximum length of time that officers should be appointed to work in the segregation unit is 3 years and should be reviewed on an annual basis.
- Governors/Directors may agree to a member of staff working for a longer period at their own discretion.

- Officers who work in the segregation unit are competent to carry out their duties and ideally have successfully completed their probation. ( There may be occasions where this would not be conducive to operational needs, e.g. in ensuring the segregation unit is suitably staffed this then means another area could not run efficiently through lack of experience)

Good practice is to have a display with named photographs of all staff working in the segregation unit which can be viewed by both prisoners and visitors.

- All officers working in the segregation unit are competent in basic C&R (Control & Restraint) including De-Escalation And Interpersonal-Communication Skills. All C&R basic training and refresher training is delivered by certified trainers.

During night state care should be given to the deployment of the patrolling officer. Wherever possible night staff should be familiar with segregation procedures and understanding of the prisoners needs. Consideration should be given to providing additional support and training to achieve this. Wherever possible it will be an officer with segregation experience.

Staffing levels in segregation units must be adequate to ensure prisoners located within the unit remain supervised during adjudications.

- Staff should also be competent (this may involve staff undergoing a training course) in:  
Race awareness / diversity  
Mental health awareness  
Suicide Prevention  
It is also recommended to have completed the following:  
Adjudication Liaison Course  
Trust for the Study of Adolescents – ‘Working with young people’, which includes an understanding of adolescent development and managing challenging adolescent behaviour (in young persons establishments)  
Child Protection Training, which should extend to an understanding of the impact of previous abuse upon behaviour (in young persons establishments)  
Pro-social modelling  
Basic First Aid (including night staff)
- There is a published induction policy for staff joining the unit.
- Working in a segregation unit environment can place particular demands and challenges on segregation unit staff, establishments need to recognise this and develop an appropriate support plan which is not defined as managerial supervision.
- There is a clearly defined line of accountability to the Governor/Director.

## **2.2 Management And Support Visits**

### **Management And Support Visits**

#### **Outcome**

Prisoners held in segregation are visited regularly by prison management and others who work in the prison.

The visits ensure that prisoners are being treated fairly, with dignity and with decency as well as safely and fairly and that prisoners have the opportunity to raise any concerns they have.

Management visits also provide support to staff who work in the segregation unit.

The Segregation daily records are kept up to date.

- The Segregation Daily records consist of 4 documents: (i) Segregation Daily Diary Sheet (ii) Segregation Unit Daily Log (iii) Daily Adjudications Record (iv) Segregation Daily Memo Notes. These documents may be completed and stored electronically but one hard copy should be printed off, signed and filed in case of future enquiries. The Segregation Daily records must be kept for 3 years.

- The Segregation Daily Records can be tailored to suit individual needs within each prison. For example, category C prisons do not need to include any references to category A or E list prisoners. As long as the core information recorded on the suggested forms is captured, establishments are free to develop their own forms.
- The form **Segregation Daily Diary Sheet** is intended to record which staff are on duty in the Segregation Unit and official and ad-hoc visitors to the unit.
- The Segregation Unit Daily Log details individual prisoners and the daily activities they may have had access to. It is not intended to replace individual prisoner's History Sheets but is an easy way for staff to ensure that key tasks e.g. exercise, showers, cell clean etc. are done. It also highlights important information such as whether the prisoner is category A / E list or if they are on an open ACCT.
- The Daily Adjudications Record gives details such as name of prisoner, charge, outcome/award, and adjudicator for all of the adjudications heard each day. It should be completed by segregation staff at the end of the adjudication process.
- The Segregation Daily Memo is intended to be used to note any significant events that happen within the segregation unit during the day e.g. C&R, special accommodation, completion of the Initial Segregation Health Screen and to provide a handover guide for staff.

**A designated /personal officer(s) is to be allocated to each prisoner. Whilst continuity is ideal there may be a need to change the designated officer on a daily basis for reasons such as meeting staffing requirements. The designated officer should engage into purposeful dialogue and record this on the segregation history sheet. At least 3 quality entries are required daily (am/pm/eve)**

- All prisoners must have a **Segregation History Sheet** opened once it has been confirmed that they are to remain in segregation.
- The following people visit and speak to all staff and prisoners in the segregation unit. Whenever possible and where it is also safe to do so the visits should be conducted in such a manner that offers the prisoner a chance to speak confidentially. Their visit is recorded on form **Segregation Daily Diary Sheet**

A Competent manager or contractors duty manager (daily visit)  
 Governing Governors, controllers and Director or person designated as in charge of the establishment (visit at least once per week)  
 Members of the Independent Monitoring Boards  
 Member of the healthcare team (doctor, registered nurse or healthcare officer) (daily visit)  
 A member of the Chaplaincy team (daily visit)  
 ACCT case manager/safer custody officer if on an open ACCT plan  
 Listeners (when they are asked to visit someone in segregation)  
 Regional Managers Custodial Service's /DOMs or Operational Director's (in contracted prisons) do not have to speak to all prisoners located in Segregation as part of their programme of scheduled visits. However they must receive a briefing on the occupants in order to monitor and evaluate the unit. Where concerns are raised they should engage with the prisoner/s. A record of the visit (including prisoners seen and spoken to) must be entered in the Segregation Daily Log.  
 Whilst it is not mandatory, involvement from wing staff should be encouraged and in particular the prisoners personal officer. This reinforces the aim of returning the prisoner to normal location and that although located in segregation they do not become forgotten nor become the segregation units 'problem'.

### **2.3 Healthcare Visits**

#### **Healthcare Visits**

#### **Outcome**

Healthcare visits and assessments (by the doctor and healthcare staff) take place regularly to ensure that there is no reason why prisoners should be removed from segregation on either physical or mental health grounds.

- 1 A doctor or registered nurse must complete the Initial Segregation Health Screen within 2 hours of the prisoner being segregated. This screen must be completed for all prisoners held in:
  - The Segregation Unit
  - Special Accommodation (including any located within healthcare)
  - Any other segregated environment within the prison

It must also be completed for any prisoner placed in segregation to await adjudication **for longer than 4 hours**.

- 2 A registered nurse must complete the Health Algorithm before completing the Initial Segregation Health Screen. It is recommended that doctors not familiar with the prison environment, e.g. locums, also complete the Health Algorithm. A record of the Screen should be made in the prisoner's clinical record. NB Paragraph 8.
- 3 If a registered nurse or doctor is not available to complete the Screen within 2 hours (e.g. at night), the prisoner must be observed by prison staff every 30 minutes, or if the prisoner is on an open ACCT Plan including post-closure, at least 5 times an hour at irregular intervals or as stipulated on the front cover of the ACCT Plan if that is greater. The Screen must still be completed as soon as possible. In urgent cases, the out-of-hours health service must be contacted.
- 4 The doctor must visit each prisoner in segregation as often as their individual health needs dictate and at least every three days. A registered nurse or healthcare officer must make the assessment on all other days, so that a member of healthcare staff visits the prisoner on a daily basis. Healthcare staff must assess the physical, emotional and mental well being of the prisoner and whether there are any apparent clinical reasons to advise against the continuation of segregation.
- 5 If healthcare staff have any concerns about a particular prisoner, guidance may be sought from other healthcare colleagues or the Head of Healthcare. It might be necessary to have a multi-disciplinary case conference to consider all the issues.
- 6 A note of each visit (by a member of healthcare staff) must be made in the prisoner's clinical record.
- 7 A member of the healthcare staff must attend and contribute to the Segregation Review Board / Young Person Segregation Review Board (these authorise the continuation of segregation for prisoners held under Prison Rule 45 (YOI Rule 49)).
- 8 A doctor or registered nurse would normally complete the Initial Segregation Health Screen prior to an adjudication for prisoners who may be given a period of cellular confinement in order to advise the adjudicator if there are health factors that would indicate that cellular confinement would be unsuitable or unsafe. Where it has not been completed prior to the adjudication it must be done within 2 hours of location in the segregation unit. The ACCT CAREMAP must be taken into account if applicable.

## **2.4 Design And Construction**

### **Outcome**

Prisoners are housed in cells that provide safe and decent conditions. Segregation units are kept clean and reflect a positive atmosphere and ethos.



- Normal cells are well lit and equipped to a standard similar to that found on normal location within the prison (this includes integral sanitation, in-cell electrics and TV aerial points).
- Any restriction of facilities (e.g. cardboard furniture, no in possession lighter) is supported by a risk assessment.

### Regime for prisoners in segregation

Posters should be clearly displayed in the segregation unit that inform prisoners about the normal daily routine (eg. unlock times, meal times, exercise periods, library access etc.). Prisoners must also be made aware of how to make applications, how to use the Request And Complaints Procedure and how to access the IMB whilst being held in the segregation unit. They should be informed of the management, healthcare and chaplaincy visits they will receive, how they can have access to listeners/Samaritans and how they can request to see their offender supervisor if they are in scope of offender management. This information should be relayed to the prisoner within one hour of segregation and an officer should check to see it has been understood. (the regime will be of equal standard for those being segregated on normal location)

A notice will also be displayed about the searching policy within segregation e.g. when and under what circumstances full searches / rub down searches / cell searches will normally take place.

A restriction of normal facilities (e.g. substituting cell furniture with cardboard furniture / not allowing the prisoner a lighter or matches for cigarettes) must be supported by a risk assessment that clearly states why the restriction is being placed on that prisoner and how often the assessment will be reviewed; this must then be recorded on the segregation history sheet.

It has been reported that the new style 'blue' cardboard furniture (that was previously recommended over the parchment coloured cardboard cell furniture) has been involved in a cell fire and that it reacted in the same manner as the old furniture. Blue furniture is still currently in stock throughout the estate and care should be taken when using it. Governors/Directors should consider

- Limiting the furniture usage
- Removing the sources of ignition from the prisoner
- Increasing the level of supervision in order to ensure early detection of a fire

The current parchment colour furniture being produced has been treated with fire retardant chemical and is safer than the blue style and will be the only type available once the blue stock has been exhausted.

#### Use of Cardboard Furniture

#### Segregation under Prison Rule 45 (YOI 49)

Governors/Directors must ensure that the restrictions on prisoners segregated under Prison Rule 45 (YOI 49) are no more than are necessary to protect the prisoner concerned or to maintain the good order or discipline of the establishment.

The regime for segregated prisoners (under Prison Rule 45 (YOI 49)) should be as full as possible and only those activities that involve associating with mainstream prisoners should be curtailed. In-cell education or work that could be done in cell (e.g. packing) should be encouraged. Access to activities such as domestic visits, legal visits, use of the telephone, canteen, exercise and showers should be comparable to those for a

prisoner held on normal location. Certain regime elements, for example, TV, radio/CD player, association within the segregation unit, PE / gym access could be used as incentives / rewards for prisoners that comply with the targets set by the Segregation Review Boards. (Note: radios must not be routinely removed from young people who are kept in segregation). Guidance for Promoting Positive Behaviour in Segregation Units

## Segregation Review Boards

The Segregation Review Board form must be completed and signed by the operational manager/duty director.

If an Independent Monitoring Board member was present as an observer during the Board they must also sign the form and indicate whether or not they were satisfied that a reasonable decision was reached using correct procedures by the board in that individual case.

### 1. Who should chair and who should attend the Segregation Review Boards

- A competent operational manager should be chairing the Segregation Review Board. A person who is acting up / temporarily promoted to competent operational manager is able to give authority for the continuation of segregation. In a contracted prison, the Director or an operational senior manager should chair the Review Board.
- Establishments decide who the most appropriate person is to chair the Review Boards and whether the role should be rotated around all operational manager grades. In the interests of fairness and impartiality it is not advisable to have only one manager chairing all Review Boards.
- The initial Segregation Review Board for a prisoner must be held within the first 72 hours of a prisoner being placed in segregation. This first Board should comprise of at least a chairperson and a healthcare representative.
- Segregation Review Boards are held at a frequency to be decided locally (with the agreement of the Regional Manager Custodial Services or contractor operations director) – however, the maximum frequency is every 14 days. The Board should comprise of the following people:
  1. Chairperson (mandatory)
  2. Healthcare representative and/or Mental Health In-Reach Team (mandatory)
  3. Segregation Officer
  4. Wing/Unit personal officer
  5. Chaplain
  6. Psychologist
  7. Prisoner (for at least part of the Board)
  8. ACCT case manager (where prisoner is on an open ACCT plan including post-closure)

- Whilst it is not mandatory that a member of the IMB attends the review board, it is highly desirable that they do so in order to monitor that correct procedures are observed. As good practice review boards can be held at a consistent fixed day/time. However it would not be appropriate to do so if it delayed a prisoners return to normal location given the aim is to return prisoners to normal location as quickly as possible. The IMB member is not to be involved in the management decision. However, once a decision has been reached by the Review Board it is good practice for the chairperson to ask the IMB member to comment on the decision that has been reached and whether they are likely to raise an objection to it. (The prisoner would not normally be present during this stage of the proceedings). The chairperson will then make a final decision on the matter.

## 2. What the Review Board should consider

The Board will consider whether to authorise continuation of segregation under Prison Rule 45 (YOI Rule 49). The Board should look at:

- The initial reason(s) for segregation

The initial reason for the prisoner being segregated is an important element of defining what behaviour / attitudes need to be addressed before the prisoner may return to normal accommodation.

- **Behaviour and attitude of the prisoner since the last review**

At the previous review the prisoner should have been set certain behaviour / attitude targets in order to start to work towards returning to normal accommodation. The extent to which the prisoner has met these targets should be discussed in this section.

- Any concerns that may have come to light about how the prisoner is coping with segregation (mental health / self harm concerns)

This section is to specifically highlight the fact that research indicates that a person's mental health is very likely to decline when they are kept in segregation. The Board must consider any observations or concerns raised by a member of staff or the prisoner about their ability to cope in segregation. The Segregation Review Board must consider additional steps to safeguard the mental health of prisoners whilst in segregation.

Those segregated for more than 30 days should be subject to care plans that detail how their mental well being is to be supported.

Particular care should be given to authorising continued segregation of a prisoner on an open ACCT – continued segregation should occur only in exceptional circumstances

and an ACCT case review must take place at the same time as the Segregation Review Board. If a prisoner needs to be segregated from others, but is considered to be at a high risk of suicide then the Board should increase the frequency level of observations to a minimum of 5 times an hour at irregular intervals or otherwise as stated in the ACCT care plan.

- What the prisoner needs to demonstrate in order to be considered for a return to normal location or alternative accommodation (e.g. Vulnerable Prisoner Unit)

The prisoner should be set some targets that the Board feels will start to demonstrate a willingness and ability to change the behaviour that led to segregation in the first place.

The targets are:

reasonable (not beyond the grasp or understanding of the 'average' prisoner)

specific (clearly defined)

relevant (to the reason for segregation in the first place)

time bound (be able to be completed before the next Review Board)

For example: If the prisoner is in segregation for repeatedly losing their temper and shouting / threatening staff and other prisoners then behaviour targets may be:

not raising voice at any person for the next 7 days

not using aggressive/abusive language towards any person for the next 7 days.

Intervention targets may be:

seeing the psychologist once in the next 10 days to discuss anger management techniques

listening to a relaxation recording provided by the library at least 3 times in the next 10 days

It is imperative that staff of all disciplines work with the prisoner during the period between reviews and provide interventions if necessary

The Board may feel that targets set for a particular week / specified time period may need to be repeated several times before the Board will believe that a real change / willingness to change has been demonstrated by the prisoner. Willingness to

comply with the targets set however, should lead to improved regime / privileges being offered to the prisoner.

- Privileges or incentives to be awarded or removed

The Segregation Review Board assesses the extent to which the prisoner has met or been willing to meet some / all of the targets set at the last Review Board. The Board decides whether to award any improvements to the regime & privileges that the prisoner is currently offered. These may be granted either as rewards or incentives to encourage better behaviour.

The Review Board may feel that the prisoner has failed to meet or make any effort to meet the targets set at the last meeting. In this case, the Board may decide to remove privileges or elements of the segregation regime that the prisoner currently has.

Examples of things that may be used as rewards/incentives are in cell TV sets, attending the gym, having 'mini' association with other prisoners in the segregation unit, in cell hobbies and a radio/CD player. A decision to remove a radio should be given careful consideration and is one that should not be taken lightly. Further consideration should be given to the period of time the radio is removed and any changes in the behaviour/mental health the removal may have on the prisoner.

- Transfer to another establishment

The Segregation Review Board should consider whether they think that the prisoner needs to be transferred to another establishment. This may be inevitable if the prisoner has become so disruptive / dangerous/ notorious that they will be unable to return to normal location in their current establishment or if they have been unwilling to make any progress whilst in segregation.

Prisoners are normally told if they are being considered for transfer to another establishment (except Category A and E list prisoners).

If a transfer is to take place then a copy of the Segregation Review Board notes and pre-transfer form are sent in advance of the transfer to the Head of Custody at the receiving prison.

### 3. Decision of the Segregation Review Board

The Review Board decides, after considering all of the factors detailed in section 2, whether or not to authorise segregation to continue for a certain period of time (up to the maximum of 14 days).

The operational manager chairing the Board has the final authority as to whether to authorise continuation of segregation under Rule 45 (YOI Rule 49) and must sign the relevant part of the form Segregation Review Board – Governor's Continued Authority for Segregation. The role of the representative of the Independent Monitoring Board is to monitor and oversee the decision making process and to be satisfied that the laid down procedures have been followed and that a reasonable decision has been reached by the Review Board (defined as reasons which are rational and understandable). The Independent

Monitoring Board member who is present will sign the relevant part of the form Segregation Review Board – Governor’s Continued Authority for Segregation to indicate that they were present at the Review Board and whether or not they were satisfied that a reasonable decision had been reached by the Board. If the representative does not agree with the decision of the Review Board and has been unable to resolve the matter satisfactorily with the operational manager chairing the Board then they should follow the procedures for IMB objection to continued segregation.

If the decision of the Review Board is that the prisoner does not need to be segregated any longer then the Board decides whether to:

- Locate the prisoner in an ordinary location wing/unit
- Locate the prisoner in a designated Vulnerable Prisoner Unit (where applicable)
- Locate the prisoner in a Higher Supervision Unit (where applicable)
- Adopt a phased return to ordinary location

There is no direct right of appeal against the decision of the Segregation Review Board. The Independent Monitoring Board member is there as an observer. If the prisoner wishes to complain he/she must do so in the first instance via the laid down Complaint And Request Procedures.

4. Paperwork the Segregation Review Board must complete

- a. The form Segregation Review Board – Governor’s Continued Authority for Segregation will be completed by the Board and provides a record of the Board meeting and what was discussed and decided. This document is signed by an operational manager or duty director in a contracted prison for continued segregation to be authorised.
- b. The member of the Independent Monitoring Board (where present) signs the Review Board form to demonstrate their attendance as an observer. The IMB member should also indicate their satisfaction, or otherwise, with the procedures of the review board and the decision reached – Governor’s Continued Authority for Segregation
- c. The form Segregation Privileges and Behaviour Targets is completed by the Board and a copy given to the prisoner. This form tells the prisoner what regime / privileges they will have access to whilst in segregation, the date of the next Review Board and the targets that the Board have set for the intervening period.
- d. A self harm / suicide case review will be completed on all prisoners who are on an open ACCT at the time of the Segregation Review Board.

**High Supervision Unit (HSU)**

Governors/Directors of certain establishments (for example, large locals) may want to consider allocating a particular wing / unit / landing as a ‘High Supervision Unit’. The function of a HSU is one that is supportive and not

punitive. A HSU should not form part of a segregation unit. Such a unit may be useful in accommodating prisoners who require more supervision than prisoners on the main wings. The HSU would be run as normal location accommodation but would have increased officer supervision / more time for personal officer work / lower numbers of prisoners on association / more structured unlock periods etc. The High Supervision Unit would be a useful resource to accommodate prisoners who were in transition between segregation and normal location or perhaps for those who had been in segregation for a long period of time and it was felt that they should have the opportunity to prove that they are able to live alongside other prisoners again. (The unit could also be used to accommodate other prisoners who may benefit from a greater staff presence).

#### Segregation under Prison Rule 55(e) / YOI Rule 57(c) – cellular confinement

The regime that a prisoner will have access to if they are serving a period of cellular confinement as part/all of a disciplinary award under Prison Rule 55(e) (YOI Rule 57(c)) will be as laid down in PSO 2000 (chapter 7)

(para. 7.30) Prisoners serving a punishment of cellular confinement will be located in an ordinary cell set aside for the purpose. A bed and bedding, a table and a stool or chair must be provided in the cell and there must be access to sanitary facilities at all times. Other furnishing and fittings may be provided at the governor's discretion.

(para. 7.31) Prisoners serving a punishment of cellular confinement will be allowed all normal facilities except those which are incompatible with cellular confinement unless a punishment of forfeiture of facilities has also been imposed. Facilities which should normally be compatible are a reasonable number of personal possessions, cell hobbies and activities, entering public competitions, and own clothes and footwear where these have already been allowed. Use of canteen and private cash will also be compatible where canteen purchases are delivered direct to the prisoner.

(para. 7.32) Prisoners' entitlements to correspond, to exercise, and to make applications to the governor, seconded probation officer, chaplain and Independent Monitoring Board, are unaffected by cellular confinement. Prisoners will be allowed to attend the main service of their religion unless prevented under PSO4550 (Para 1.2). Prisoners will be allowed to have books within the limits set out in PSO 1250 (prisoner's property). Visits and access to a telephone should be allowed unless the prisoner's behaviour and attitude make removal from cellular confinement impracticable or undesirable. Visits should take place at a time or place away from other prisoners.

(para. 7.33) A prisoner serving a punishment of cellular confinement is subject to the observational requirement applying when segregated under the provisions of PSO1700

- Prisoners who are on an open ACCT including post-closure (thought to be at risk/recent risk of self harm or suicide) are located in safer cells (ligature free furniture and fittings) if at all possible. Safer cells are regarded as normal accommodation.
- There are shower or bathing facilities in the unit for prisoners.
- Consideration is given as to the decoration of the segregation unit which should be kept clean and reflect a positive atmosphere for staff and prisoners. For example, the colour of the walls, quality of accommodation & furniture, type of flooring and use of pictures around the unit.
- Wherever possible attempts should be made to improve the environment of the exercise yard.
- Segregation staff work in decent conditions and facilities.

- Use of Special Accommodation is in accordance with the instructions provided in chapter 9.
- Prisoners under suspicion of swallowing or secreting drugs are not held in empty cells without toilet / washing facilities. Further guidance on appropriate methods of dealing with prisoners who are known or suspected of holding drugs internally is found under Prison Rule 45.
- A cell that has been temporarily emptied of normal furniture and had it replaced with chairs for the purpose of holding several prisoners pending adjudication is not regarded as a Special Accommodation.

In-charge Governors / Directors of contracted out establishments give careful consideration as to the most appropriate name to call the area within the prison that accommodates prisoners removed from association. 'Separation & Care' is sometimes preferred to the traditional title of 'Segregation Unit'

### **3. Purpose/Authority To Segregate**

**Purpose of and Authority for Segregation Under Prison (YOI) Rules**

*This section covers:*

- (i) *The authority to hold prisoners in segregation*
- (ii) *The purpose of holding prisoners in segregation under Prison (YOI) Rules*

#### **3.1 Authority to hold prisoners in segregation**

Outcome: Prisoners are only held in the segregation unit under the proper authority. Authority is provided by the Prison (YOI) Rules

- Under Prison Rule 45 (YOI Rule 49) – Good Order Or Discipline/Own Protection
- Under Prison Rule 46 - Close Supervision Centre of a prison.
- Under Prison Rule 53(4) (YOI Rule 58(4)) – Prisoner awaiting an adjudication to start may be kept apart from other prisoners pending the governor's first inquiry.
- Under Prison Rule 55(e) (YOI Rule 60(f)) – Cellular confinement for a prisoner found guilty of an offence against discipline. Cellular confinement is not permitted for Young People.
- Under Prison Rule 55(h) (YOI Rule 60(g)) – Removal from wing or living unit for a prisoner found guilty of an offence against discipline.
- This PSO also covers the procedures to apply in relation to prisoners on dirty protest. A prisoner on dirty protest is moved to special accommodation in the segregation unit or other fit for purpose accommodation. Prisoners engaged in a dirty protest are normally held under Rule 45 (YOI Rule 49) Good Order or Discipline.

### **3.2 Purpose and reasons for segregation**

#### **3.2.1 Rule 45 (YOI Rule 49) Good Order or Discipline (GOoD)**



Outcome: Prisoners are only segregated for reasons of Good Order or Discipline when there are reasonable grounds for believing that the prisoner's behaviour is likely to be so disruptive or cause disruption that keeping the prisoner on ordinary location is unsafe.

- The decision to segregate a prisoner is reasonable and appropriate. Below are examples of when segregation might be appropriate:

**Segregation: Rule 45 (YOI Rule 49) – Good Order or Discipline**

Some examples of occasions where segregation under Prison Rule 45 (YOI Rule 49) may be appropriate:

- situations where there is evidence of a planned or imminent breach of security
  - a prisoner incites others to breach security or prison discipline
  - there is a risk to the safety of staff or other prisoners or a risk of damage to prison property
  - it is believed (and this belief is based on reasonable grounds, eg. CCTV evidence, drug dog indication coupled with intelligence) that the prisoner is holding drugs internally (through secreting or swallowing) that they intend to take themselves or distribute to other prisoners. The prisoner should be kept on GOoD until it is believed that he/she no longer holds the drugs (eg. by implementing daily passive drug dog visits until the dog no longer gives an indication). Note: If there is sufficient evidence of drugs being passed (eg. CCTV on a visit / staff observations) then the prisoner should be charged with an offence against discipline and adjudicated on in the normal way. This does not prevent the prisoner additionally being held in segregation on the grounds of GOoD for possession of drugs.
  - where an initial adjudication hearing is inconclusive, but the need for segregation is still felt to exist (ie. the authority provided under Prison Rule 53(4) / YOI Rule 58(4) has expired.)
  - Efforts to manage the prisoners behaviour on normal location have been unsuccessful
  - prisoners who embark on dirty protests (to protect others)
  - where the prisoner is subject to police or internal investigations into serious offences that occurred while in prison custody, particularly when the offence was committed against another prisoner
- The competent operational manager /Duty Director considering or authorising segregation assesses whether the situation could be better addressed by adopting alternative arrangements such as transfer to another wing, closer supervision on ordinary location, transfer to another establishment etc.
  - Segregation under Rule 45 (YOI Rule 49) GOoD is for the shortest period of time consistent with the reason for separation in the first place.

- When **Young People** are located in the Segregation Unit, Duty Governors/Duty Directors must consider allowing them to make representations against Segregation. This process is described here.

## Young People

### Segregation Under Young Offender Rule 49 For The Maintenance Of Good Order Or Discipline Or In A Young Person's Own Interests

#### Guidance on providing the opportunity for a Young Person to make representations

On the 21 December 2004, the Court of Appeal rejected an appeal lodged by the Prison Service concerning a Young Person's right to make representations following a decision to segregate them. As a result of this, the guidance issued in September 2004 is now a permanent requirement for all Young People segregated under Young Offender Rule 49.

The policy for providing an opportunity to make representations is as follows:

1. When considering whether to segregate a Young Person under Young Offender Rule 49 or Prison Rule 45, Governors/Directors must consider whether the Young Person can be given the opportunity to make representations against segregation before a decision to segregate is made.
2. In deciding whether the opportunity to make representations can be provided, Governors/Directors must take account of all the circumstances, including the risks to the Young Person and others, the availability of staff and the behaviour and competence of the Young Person to make representations at that moment in time.
3. If the Governor/Director decides that the Young Person can be given the opportunity to make representations, that opportunity must be given.
4. The representations may be made in writing or verbally as circumstances allow (although Governors/Directors should take account of the level of literacy skills of the Young Person).
5. Where the representations are made verbally, the gist of the points made should be noted on the segregation forms (both Governor's/Director's Authority for Initial Segregation up to 72 hours and Reasons for Initial Segregation).
6. The Governors/Directors response to the representations should also be noted briefly on the form.
7. Governors/Directors must consider the help the advocacy service can give to a Young Person when making representations.
8. If the Governor/Director decides that circumstances do not permit the Young Person to be given the opportunity to make representations then the decision to segregate should be proceeded with.
9. The fact that representations could not be entertained should be recorded on the relevant segregation forms together with brief reasons.
10. The Governor/Director should be ready to explain the reasons if challenged later.
11. The Young Person should be given the existing opportunities to make representations after being segregated.

#### **3.2.2 Rule 45 (YOI Rule 49) Own Interest**

Outcome: Prisoners are segregated in their own interests when there are good and sufficient reasons for believing that the prisoner's safety and well being cannot reasonably be assured by other means.

- Segregation in a prisoner's own interests is normally only considered when there are reasons for believing that the prisoner is known or suspected to be at risk of assault. Alternative methods such as change of wing/unit or a vulnerable persons unit should firstly be considered.
- It is not necessary that a prisoner should already have been assaulted nor requested Rule 45 protection. It is sufficient for the Governor/Director to be satisfied that the prisoner is at risk and that his or her safety cannot reasonably be assured by other means.

**Points to consider before granting Rule 45 (YOI Rule 49) own protection**

**Duty of care**

The Prison Service, the Governor, Director and all members of staff concerned owe a duty to the prisoner to take "reasonable care in the circumstances" to protect him or her from injury.

- Staff are liable in law for damages if they fail to take all reasonable precautions to prevent an attack on a prisoner by another prisoner or prisoners. This is a matter of civil law in which the Home Secretary has no discretion to waive or limit legal liability. This duty is re-enforced by Article 2 of the European Convention on Human Rights, which imposes a positive obligation to take preventative operational measures to protect an individual whose life is at risk.
- The Prison Service however, accepts full responsibility for the actions of its staff taken in good faith in the proper performance of their duties. Staff who carry out their duties conscientiously and make management decisions within the authority delegated to them can be assured of the support, assistance and financial backing of the Service in relation to any litigation which might arise from injuries incurred by a prisoner as a result of any such decision.
- Where claims are made against members of staff or members of Independent Monitoring Boards, the Service will take over conduct of the cases and make decisions as to whether they should be defended or settled. They would also seek to have the name of the Prison Service substituted for any member of staff.

**Exercise of reasonable care**

"Reasonable care in the circumstances" means that prison managers will have to exercise their judgment as to the nature and extent of the threat and not simply

- A failure by a prisoner to take reasonable care to protect him or herself does not absolve the Prison Service and its staff from their own obligations.
  - It is accepted that what is reasonable care will vary with the circumstances of each case and from establishment to establishment. A decision on the appropriate steps to take to prevent an attack upon a prisoner must in the main rest with local management.
  - The judgment of the operational manager must be made in light of all the circumstances known at the time of the decision. The Violence Reduction Strategy should be referred to. Risk prediction factors that should be considered before deciding to segregate a prisoner in their own interest are given below:
    1. Has the prisoner been threatened / assaulted / bullied?
    2. Is the nature and extent of any actual threat sufficient to justify the use of Rule 45?
    3. Would improved supervision on the wing / transfer to another wing / transfer to another establishment be better options for dealing with the situation?
    4. Does the prisoner seem unable to cope with normal location?
    5. Has the prisoner been convicted of an offence that attracted media attention and is likely to give rise to resentment amongst other prisoners?
    6. Has the prisoner come under pressure to bring drugs or other contraband into the prison?
    7. Is the prisoner an informant / suspected of being an informant by other prisoners?
  - If Rule 45 were to be imposed, would the prisoner's mental health deteriorate (leading to an increased risk of self injury or suicide)?
- A prisoner may request segregation under Rule 45 but this may be denied by the Governor/Director if after investigation, he or she believes that there are not sufficient grounds to justify it.
- If a prisoner's fear of assault appears unfounded but is so great as to cause concern about their mental state on normal location, this is sufficient to justify considering segregation. The prisoner may also exceptionally request own interest segregation for reasons other than a fear of assault by other prisoners eg. genuine inability to cope on normal location for a specific time period (eg. mental health reasons, period of stress / bereavement, with home domestic circumstances). The operational manager assesses the explanation given for the segregation request and decides whether to grant own interest segregation.
- Where the prisoner indicates reluctance to be segregated in his or her own interest, but the Governor/Director considers such a move still to be necessary or desirable, a decision to go ahead with segregation will be on the grounds of maintaining Good Order or Discipline. This is clearly documented on the relevant form – Governor's Authority for Initial Segregation / Governor's Authority for Initial Segregation (Young Person).

- A prisoner can be segregated on initial reception or at any subsequent stage of their time in custody.
- For young adults and young People, removal from association under YOI Rule 49 (especially for own protection) is an exceptional step (particularly for those prisoners under the age of 18). The traditional emphasis on the induction, assessment and supervision of Young People and the maintenance of a healthy climate are important in preserving this situation.
- The regime offered should be as full as possible and as close to the regime offered on normal location having taken into consideration the original need for segregation/own protection i.e. it would be acceptable (and desired) that if safe to do so the prisoner attended an activity such as work or offending behaviour programme.  
Where a prisoner is being held in segregation awaiting a space on a vulnerable person unit/wing or alternative then he/she should be given the opportunity to attend the unit/wing on a daily basis to participate in association or other available activities.
- When **Young People** are located in the Segregation Unit, Duty Governors/Duty Directors must consider allowing them to make representations against Segregation.

### **3.2.3 Segregation Under Prison Rule 53(4) (YOI Rule 58(4)) – awaiting an adjudication to Start**

**Outcome:** Prison Rule 53(4) / YOI Rule 58(4) can only be used for the period between the alleged offence and the initial hearing. It will not be used as an automatic measure but only where there is real need, such as the risk of collusion or intimidation relating to the alleged offence which segregation of the accused might prevent.

- The term segregation is not applied if a prisoner is being held prior to and on the same day as an adjudication. However if the prisoner is held for longer than 4 hours then this is segregation under rule 53 and an Initial Segregation Health Screen must be completed. (good practice for prisoners on an open ACCT or in post-closure is to hear their adjudication first and return to normal location when appropriate as quickly as possible)
- Between an alleged offence and the adjudication it is good practice to locate the prisoner/s on normal location where risks permit. E.g. two prisoners that have been fighting maybe located in their own cells and managed accordingly to prevent contact.
- Prison Rule 53(4) or YOI Rule 58(4) segregation and the reasons for it are recorded on the prisoner's main record (F2050).
- If the Governor's/Directors initial hearing is inconclusive, but the need for segregation is still felt to exist, it may only then be authorised under Prison Rule 45 (YOI Rule 49) - Good Order or Discipline.
- If continued segregation is necessary and the adjudication cannot take place for some time, the Governor considers the need to transfer the prisoner temporarily elsewhere where he or she may be held on normal location pending the adjudication getting underway again. In contracted prisons, where the directors conduct adjudications, the contractor's duty manager is to be informed so a decision can be made as to how to manage the prisoner concerned.
- If legal representation has been granted and the Governor/Director believes that temporary transfer would be appropriate, he or she seeks the views of the prisoner's solicitor. If and when a transfer is arranged, the solicitor is informed of the prisoner's new location.

### **3.2.4 Segregation Under Prison Rule 55(e) (YOI Rule 60(f)) – cellular confinement**

**Outcome:** An adjudicator may impose a punishment of cellular confinement following a finding of guilt at an adjudication. If a doctor or registered nurse has advised that this would be inappropriate due to the prisoner's health, then the adjudicator must take this into account when making his/her decision.

- The maximum period of cellular confinement that can be imposed is 21 days for adult prisoners and 10 days for young adults.
- Young people / under 18 prisoners may not be given a punishment of cellular confinement following adjudication
- If a pregnant woman is serving a punishment which involves segregation there is no reason why she should not be located in the segregation unit during the day, provided that there is a bell and she is observed at regular intervals. Governors must ensure that only a minimum loss of facilities results. The adjudicator would, however, normally be expected to impose a punishment which does not include segregation.

### **3.2.5 Segregation under Rule 55(h) YOI Rule 60(g) – Removal from wing/unit**

- The maximum period of removal from wing/unit is 28 days for adults and 21 days for young adults/ persons.
- Whilst on removal from wing/unit the prisoner must take part in normal compulsory regime activities including work, education, physical education and training with other prisoners but will be held in a cell/room away from his/her 'home' wing or living unit for the remaining time. Adjudicators must ensure that only the minimum loss of privileges results and does not become cellular confinement under another name.
- Young people must be segregated only when absolutely necessary and then must always be accompanied by a strategy of intervention through advice and counselling.

## **4. Process of Segregation**

This section covers:

- (a) Initial Segregation of Prisoners
- (b) Continuing Segregation (Under Prison Rule 45 / YOI Rule 49)
- (c) Completion of segregation or transfer to another establishment / Vulnerable Prisoner Unit

### **4.1 Initial Segregation of Prisoners**

#### a. Initial Segregation

- The Initial Segregation Health Screen is completed for all prisoners placed in the segregation unit.

1. Under Prison Rule 45 (YOI Rule 49) –Good Order or Discipline

**Initial Process of  
Segregation (Prison Rule 45  
- YOI Rule 49)**



Under Prison Rule 45 (YOI Rule 49) – Good Order Or Discipline OR Own Interest

The Initial Segregation Health Screen will be completed by a registered nurse or doctor within 2 hours of a prisoner being placed in segregation.



The duty governor /duty manager or director (contracted Prison) must make a decision as to whether to authorise continuing segregation based on the outcome of the Health Screen, discussions with staff, healthcare and the prisoner.



If a doctor or registered nurse indicates that there are healthcare reasons to advise against segregation and the duty governor/director considers that segregation is appropriate for operational reasons, the duty governor or competent manager/director must immediately chair a case review (OTO22) to determine the prisoners location



Prisoners on an open ACCT should only remain in segregation in exceptional circumstances. In such circumstances the governor/director must document this on the Initial Segregation Health Screen.



Measures will be put in place to safeguard the mental health of prisoners who are kept in segregation which will include observations and dialogue. Listeners (or other appropriate prisoner support group) must be able to attend the segregation unit where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4)



If segregation is to continue under Prison Rule 45/ YOI Rule 49 (GOoD or own interest) then the following forms must be completed:

1. Governor’s Authority for Initial Segregation Up to 72 Hours / Governor’s Authority for Initial Segregation (Young Person)
2. Reason for Initial Segregation Under this Rule (Rule 45 / YOI Rule 49) / Reason for Initial Segregation Under YOI Rule 49.(Young Person)
3. Self harm/ suicide case review (for prisoners on an open ACCT) within 24 hours

2. Under Prison Rule 45 (YOI Rule 49) – Own protection

**Initial Process of Segregation (Prison Rule 45 - YOI Rule 49)**

Under Prison Rule 45 (YOI Rule 49) – Good Order Or Discipline OR Own Interest

The Initial Segregation Health Screen will be completed by a registered nurse or doctor within 2 hours of a prisoner being placed in segregation.



The duty governor /duty manager or director (contracted Prison) must make a decision as to whether to authorise continuing segregation based on the outcome of the Health Screen, discussions with staff, healthcare and the prisoner.



If a doctor or registered nurse indicates that there are healthcare reasons to advise against segregation and the duty governor/director considers that segregation is appropriate for operational reasons, the duty governor or competent manager/director must immediately chair a case review (OTO22) to determine the prisoners location



Prisoners on an open ACCT should only remain in segregation in exceptional circumstances. In such circumstances the governor/director must document this on the Initial Segregation Health Screen.



Measures will be put in place to safeguard the mental health of prisoners who are kept in segregation which will include observations and dialogue. Listeners (or other appropriate prisoner support group) must be able to attend the segregation unit where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4)



If segregation is to continue under Prison Rule 45/ YOI Rule 49 (GOoD or own interest) then the following forms must be completed:

1. Governor's Authority for Initial Segregation Up to 72 Hours / Governor's Authority for Initial Segregation (Young Person)
2. Reason for Initial Segregation Under this Rule (Rule 45 / YOI Rule 49) / Reason for Initial Segregation Under YOI Rule 49.(Young Person)
3. Self harm/ suicide case review (for prisoners on an open ACCT) within 24 hours

3. Under Prison Rule 53(4) (YOI Rule 58(4)) – Prisoner awaiting an adjudication to start may be kept apart from other prisoners pending the governor's first inquiry.

### **Initial Process of Segregation (Pending Adjudication)**

Under Prison Rule 53(4) (YOI Rule 58(4))  
Prisoner awaiting an adjudication to start may be kept apart from other prisoners pending the governor's first inquiry.

The Initial Segregation Health Screen will be completed by a registered nurse or doctor within 2 hours of a prisoner being placed in segregation. This does not apply to prisoners located on the day/immediately prior to an adjudication unless they remain in segregation longer than 4 hours.



The duty governor / operational manager/director must make a decision as to whether to authorise continuing segregation (up until the adjudication) based on the outcome of the Health Screen, discussions with staff, healthcare and the prisoner.





The prisoner should not be kept in segregation at this stage if he/ she is calm and it is thought that they could return safely to normal location eg. prisoner has calmed down after a fight and it is thought that the situation has been resolved. Where there is a risk of collusion or intimidation relating to the alleged offence it may still be necessary to keep the prisoner in segregation, although alternatives should be considered



If a doctor or registered nurse indicates that there are healthcare reasons to advise against segregation and the duty governor/ competent manager or director (contracted prisons) considers that segregation is appropriate for operational reasons, the duty governor or duty manager/duty director must immediately chair a case review (OTO22) to determine the prisoners location



Prisoners on an open ACCT plan or in post closure should only be placed in segregation if they are such a risk to others that no other suitable location is appropriate, and then only remain in exceptional circumstances. In such circumstances the authorising governor/duty manager or director must document this on the Initial Segregation Health Screen and ACCT document.



Measures will be put in place to safeguard the mental health of prisoners who are kept in segregation which will include observations and dialogue. Listeners (or other appropriate prisoner support group) must be able to attend the segregation unit where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4)



If segregation is to continue under Prison Rule 53(4) / YOI Rule 58(4) until the governor's first inquiry at adjudication –then this should be noted in the Segregation History Sheet.



Prisoners on an open ACCT plan or in post-closure phase of ACCT must have within 24 hours of segregation being imposed a full ACCT case review. The ACCT case manager (or suitably trained nominee if not available) will chair the review.

4. Under Prison Rule 55(e) (YOI Rule 60(f)) – Cellular confinement for a prisoner found guilty of an offence against discipline

### Initial Process of Segregation (Cellular Confinement )

This flowchart refers to **Cellular Confinement or removal from wing/unit (RFW/RFU)** imposed as a punishment under Prison Rule 55(e/h) or YOI Rule 60(f/g), on a prisoner found guilty of an offence against discipline under Prison Rule 51 or YOI Rule 55

A prisoner being considered for a period of segregation must be seen and assessed by a doctor or registered nurse.

The Initial Segregation Health Screen will normally be completed before a punishment of cellular confinement is imposed but in any case within 2 hours of the commencement of the punishment.  
(in cases of a suspended punishment being activated the health screen will need to be completed again)



If a doctor or registered nurse indicates that there are healthcare reasons to advise against segregation and the duty governor/director considers that segregation is appropriate for operational reasons, the duty governor or competent manager/duty director must immediately chair a case review (OTO22) to determine the prisoners location



The doctor or registered nurse and adjudicator will take particular care over a decision regarding segregation where the prisoner is on an open ACCT or is pregnant.  
Where an ACCT plan is open, the Care Map must be consulted.



A prisoner given a period of segregation who is on an open ACCT plan or in the post closure phase of ACCT must have a full ACCT case review chaired by the ACCT case manager(or their nominee if not available) within 24 hours of the punishment being imposed.



Measures will be put in place to safeguard the mental health of prisoners who are kept in segregation which will include hourly observations and dialogue. The regime that the prisoner should have access to will be all normal facilities except those which are incompatible with Cellular Confinement or RFW/RFU. Listeners (or other appropriate prisoner support group) must be able to attend the segregation unit where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4)  
Adjudicators may wish to consider the punishment of Cellular Confinement being executed on normal location where a prisoner may continue to share a cell if on an open ACCT  
In such cases the same procedures would apply as if based in a segregation unit.

5. Under Prison Rule 55(h) (YOI Rule 60(g)) – Removal from wing/unit for a prisoner found guilty of an offence against discipline

### Initial Process of Segregation (Cellular Confinement )

This flowchart refers to **Cellular Confinement or removal from wing/unit (RFW/RFU)** imposed as a punishment under Prison Rule 55(e/h) or YOI Rule 60(f/g), on a prisoner found guilty of an offence against discipline under Prison Rule 51 or YOI Rule 55

A prisoner being considered for a period of segregation must be seen and assessed by a doctor or registered nurse.

The Initial Segregation Health Screen will normally be completed before a punishment of cellular confinement is imposed but in any case within 2 hours of the commencement of the punishment.  
(in cases of a suspended punishment being activated the health screen will need to be completed again)



If a doctor or registered nurse indicates that there are healthcare reasons to advise against segregation and the duty governor/director considers that segregation is appropriate for operational reasons, the duty governor or competent manager/duty director must immediately chair a case review (OTO22) to determine the prisoners location



The doctor or registered nurse and adjudicator will take particular care over a decision regarding segregation where the prisoner is on an open ACCT or is pregnant.  
Where an ACCT plan is open, the Care Map must be consulted.



A prisoner given a period of segregation who is on an open ACCT plan or in the post closure phase of ACCT must have a full ACCT case review chaired by the ACCT case manager(or their nominee if not available) within 24 hours of the punishment being imposed.



Measures will be put in place to safeguard the mental health of prisoners who are kept in segregation which will include hourly observations and dialogue. The regime that the prisoner should have access to will be all normal facilities except those which are incompatible with Cellular Confinement or RFW/RFU. Listeners (or other appropriate prisoner support group) must be able to attend the segregation unit where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4)  
Adjudicators may wish to consider the punishment of Cellular Confinement being executed on normal location where a prisoner may continue to share a cell if on an open ACCT  
In such cases the same procedures would apply as if based in a segregation unit.

- **All** prisoners located in the segregation unit must be observed by an officer at a frequency which is relevant to the individuals' circumstances and will be based upon a case management approach. The observation level should be decided by the person authorising segregation. There are some prisoners that are familiar with segregation and may be at ease with it whilst a prisoner that is not familiar with it may need to be observed on a more regular basis which ideally would be at least hourly. All prisoners subject to Cellular Confinement must be observed at least hourly (unless on an open ACCT plan and this states more frequently). Where practical the segregation officer should engage in dialogue when making observations. Other observations/visits must be completed as stated in **Management and Support Visits, such observations must be noted on the segregation history sheet.**
- Prisoners on an open ACCT should only remain in segregation in exceptional circumstances where by they are such a risk to others that no other suitable location is appropriate and where all other options have been tried or are considered inappropriate. A mental health assessment must be undertaken by Healthcare/Mental Health In-Reach staff of all prisoners on an open ACCT (or in the post-closure phase of ACCT) who are placed in a segregation unit or awarded a period of cellular confinement in another part of the establishment. This must take place within 24 hours as should an ACCT case review. A Safer Cell is used to accommodate a prisoner on

an open ACCT whenever possible. The use of overt CCTV should also be considered.

Outcome: A decision to segregate a prisoner is taken by a competent operational manager or similar management grade in a contracted prison, having regard to the individual

### **Use of overt CCTV in cells**

#### **Establishments may wish to consider installing CCTV in some cells within the segregation unit.**

The observation of prisoners by means of an overt closed circuit television system is detailed in Prison Rule 50A (YOI Rule 54).

50A – (1) Without prejudice to his other powers to supervise the prison, prisoners and other persons in the prison, whether by use of an overt closed circuit television system or otherwise, the Governor or Director for contracted prisons may make arrangements for any prisoner to be placed under constant observation by means of an overt closed circuit television system while the prisoner is in a cell or other place in the prison if he considers that-

- a. such supervision is necessary for-
  1. the health and safety of the prisoner or any other person
  2. the prevention, detection, investigation or prosecution of crime or
  3. securing or maintaining prison security or good order and discipline in the prison and
- b. it is proportionate to what is sought to be achieved.

(2) If an overt closed circuit television system is used for the purpose of this rule, the provisions of rules 35C and 35D shall apply to any material obtained. (Disclosure and retention of material).

Any recordings relevant to a period when there is an act of intervention in a case of self harm or when use of force is used should be securely retained.

CCTV can be useful in cases where prisoners are moving off constant observation (refer to PSO 2700 (8.7.1-8.7.7) for further detail). A decision whether to locate someone in a cell with overt CCTV should take into account the following:

- a. CCTV is an aid to staff supervision, not an alternative and must not be used as a substitute for face to face observation (it doesn't allow the proper interaction that should occur during constant observation).
- b. It can be useful to have some accommodation available without CCTV as there may be cases where a care plan indicates that the prisoner would find this so disturbing as to increase the risk.
- c. Where a prisoner is on an open ACCT plan (inc post-closure) the decision to use CCTV must be taken by the ACCT case review team, authorised by the in-charge Governor/Director (who must sign an entry to this effect in the CAREMAP) and must be for the shortest time possible.

There must be local protocols in place to ensure someone is actually watching the monitor (prisoners have 'played-up to the camera' and if there's no one at the other end the result could be fatal). Within the protocol there should be guidance on informing the prisoner about how frequently they are to be monitored.

circumstances of the prisoner concerned. The safety of the prisoner whilst in segregation is of paramount importance.

- The contents of an open ACCT plan will need to be checked as early as possible to provide a safety check.
  - In July 2003 the High Court held that it is not lawful to deny access to regime activities while a young person is held in a segregation unit. “The young person must be provided with a full regime as far as possible, subject only to the constraints imposed by the need to keep the young person separated from others” – Lord Justice Jack. In cases where the prisoner is a young person a separate risk assessment must be made to identify the regime activities in which they can safely participate with others. The basic levels of privileges include legal visits, education, canteen, PE, work, religious services, showers, library, exercise and telephones. These basic rights can only be removed as a disciplinary punishment and where the assessment has identified a risk to the young person or other persons.
  - Segregation can only be authorised by a competent operational manager authorised by the Governor (or duty director in a contracted prison). A person who is acting up / temporarily promoted to an operational manager post is able to give authority to initially segregate a prisoner. Consideration should be given to a multi-disciplinary approach (healthcare, wing manager orderly officer etc) before making this decision
  - If the operational manager / director is not in the establishment (eg. at night) he or she may give verbal authority for segregation over the telephone after having had the opportunity to consider the Initial Segregation Health Screen recommendation and views of staff. This is noted on form Governor’s Authority for initial segregation up to 72 hours. Special consideration will need to be given in the event that healthcare recommend that the prisoner should not be segregated in which event a case review will be required to take place within 2 hours and chaired by a governor/director.
  - Measures are put in place to safeguard the mental health of prisoners who are kept in segregation.

**Promoting and Safeguarding the  
Mental Health of Prisoners held in  
Segregation Units**

### Research

Research into the mental health of prisoners held in solitary confinement indicates that for most prisoners, there is a negative effect on their mental well being and that in some cases the effects can be serious. A study by Grassian & Friedman (1986) stated that, “Whilst a term in solitary confinement would be difficult for a well adjusted person, it can be almost unbearable for the poorly adjusted personality types often found in a prison.” The study reported that the prisoners became hypersensitive to noises and smells and that many suffered from several types of perceptual distortions (eg. hearing voices, hallucinations and paranoia). The study also found that many of the prisoners were prone to losing their temper easily and committing random acts of violence against themselves and others. Most prisoners had not experienced any of the above observations prior to entering solitary confinement.

The importance of treating prisoner’s as individuals and taking into account their personal circumstances when making decisions was emphasised in the judgment of the European Court of Human Rights in *Keenan v. the United Kingdom* (April 2001). The court held that Article 3, “No one shall be subjected to torture or inhuman or degrading treatment or punishment” had

been breached. It said, “The lack of effective monitoring of Mark Keenan’s condition and the lack of informed psychiatric input into his assessment and treatment disclose significant defects in the medical care provided to a mentally ill person known to be a suicide risk. The belated imposition on him of a serious disciplinary punishment (cellular confinement)... is not compatible with the standard of treatment required in respect of a mentally ill person.”

### **Lack of awareness of the impact of segregation.**

“The effect of segregation on an already vulnerable person’s state of mind can be severe. There have been instances of failures to implement safety mechanisms particularly for prisoners at risk of self-harm. For some of those prisoners who have died in segregation, the required case conferences and mental health assessments appear not to have taken place, yet it is in precisely these extremely complex and vulnerable cases that professional advice and a multi-disciplinary approach is essential. In addition, all segregated prisoners should be observed at least hourly, but there have been examples where these checks have not been carried out.”

Extract taken from a report of themes into deaths in segregation units by Prisons and Probation Ombudsman

### Promoting mental health

The importance of safeguarding and promoting the mental health of prisoners held in segregation can be clearly concluded from the research evidence and the Mark Keenan case.

A prisoner on an open ACCT plan must only be kept in segregation under exceptional circumstances where by they are such a risk to others that no other suitable location is appropriate and where all other options have been tried or are considered inappropriate. A mental health assessment must be undertaken by Healthcare/Mental Health In-Reach staff of all prisoners on an open ACCT (or in the post closure phase of ACCT) who are placed in a segregation unit or are awarded a period of Cellular Confinement in another part of the establishment. This must take place within 24 hours. Ideally the person conducting the mental Health check will have had access to learning disabilities training as many prisoners with mental health problems may also experience communication difficulties.

The following list provides some suggestions as to how establishments can put measures in place to safeguard / promote the mental health of all prisoners held in segregation. The operational manager (or duty director in a privately managed prison) who authorises initial or continuing segregation must show on forms Governor’s Authority for Initial Segregation / Governor’s Authority for Initial Segregation (Young persons) or Segregation Review Board – Governor’s Continued Authority for Segregation (up to a maximum of 14 days) what measures they are putting in place.

1. **Removal from segregation** – if the mental health of the prisoner is so at risk as to suggest that they will be totally unable to cope with segregation then they should not be kept in the segregation unit. A suggested method of identifying these prisoners who are most at risk is given in the Initial Segregation Health Screen. Prisoners who are awaiting transfer to a secure NHS facility should not normally be kept in the segregation unit.
2. **Management of significant cases** – where individual cases pose one or more difficult issues the nurse, doctor or governor/director may wish to seek further advice before deciding on any action. This may best be achieved by holding a case conference of appropriate professionals who can consider the balance of the issues and agree a way forward (which may involve seeking other opinions eg. from a psychiatrist, in-charge governor, Offender Management Team (where a prisoner in scope of offender management)).

3. **Increasing the level of healthcare support** – If there are concerns about how a prisoner is coping in segregation the number of visits by a registered nurse or doctor should be increased and a care plan initiated as appropriate.
4. **Increased staff observations** – As a minimum all prisoners in segregation must be observed at a frequency which is relevant to the individual's circumstances and will be based upon a case management approach; however segregation staff could be asked to observe and speak to the prisoner at increased intervals. For prisoners on an open ACCT the level of observation should be as stipulated on the front cover of the ACCT plan if a greater frequency is stated. The frequency of observations will be recorded on the segregation history sheet.
5. **Opening an ACCT** – In the event of any incident of self harm or cause for concern that the prisoner may be at risk, an ACCT document must be opened.
6. **Listeners** – Prison Listeners should be made available where appropriate. i.e. risk assessed (see PSO 2700 - 7.2.4) to prisoners in the segregation unit on a rota system. This needs to be advertised clearly within the segregation unit and include how prisoners should go about requesting a Listener. (Listeners are not used for Young persons).
7. **Use of dedicated Samaritan phone** – some establishments now have mobile telephones that connect directly to the Samaritan's. This telephone should be made available to prisoners in segregation on request.
8. **Keeping in touch** – prisoners should be encouraged to keep in touch with their families and friends as they will be able to provide support through difficult periods. Establishments must ensure that prisoners in segregation are able to receive visits, use the telephone and write letters (with assistance where necessary).
9. **Exercise** - prisoners should be encouraged to take any exercise periods that are offered to them and where safe and appropriate to do so the exercise can be mixed with other prisoners in segregation. Establishments should consider allowing a prisoner in segregation to attend some PE / gym sessions in addition to the minimum daily exercise requirement in the open air. This is particularly important for young persons and young adult offenders. Wherever possible attempts should be made to improve the environment of the exercise yard.
10. **Relaxation** - prisoners' mental well being will benefit from having access to things that they enjoy doing eg. Watching TV, listening to the radio/CD's, reading magazines/newspapers. Consideration must be given to allowing prisoners in segregation access to some of these things (which may represent privileges / incentives as detailed in Segregation Review Board – Governor's Continued Authority for Segregation (up to a maximum of 14 days)
11. **Education / hobbies** – prisoners should be encouraged to do in-cell education or in-cell hobbies whilst they are in segregation if there are any concerns about their mental well being. This can help prisoners to avoid becoming bored.
12. **Talking to someone** – prisoners must be encouraged to talk about how they feel (particularly if they are feeling low or worried) to someone that they trust or feel able to confide in. This could be a segregation officer, personal officer, chaplain / religious leader, psychologist or any other person in the prison. Particular thought should be given towards prisoners that are non English speaking.
  - The period of initial segregation under Prison Rule 45 (YOI 49) (ie. without a Review Board) is for a maximum of 72 hours.
  - Due to the purpose of segregation it is envisaged that there will be a need to conduct a full search on prisoners on initial location to segregation in many



cases. However, a full search should not be conducted as a matter of routine but as part of an immediate risk assessment (to others or self) based on the information currently available at the time. The authority for the search must be given by a Governor or Director. However if in seeking authority this delayed the search and as such would undermine a very clear need for the search (e.g. to prevent disposal of evidence/weapon or to prevent an act of violence to themselves or others etc) then the most senior officer present may give the authority but must be able to justify this decision. A record of the decision and reasons must be made on the segregation history sheet.

- A prisoner located in segregation will remain on the same IEP level unless such time an IEP review board takes place and states otherwise. Within two hours of being located in segregation they will be informed of the regime and reasons in writing.
- Research has shown that a prisoner will react in a positive manner when treated with respect and decency; therefore a prisoner should be addressed by first name, preferred name or by the prefix MR/MRS etc before their surname. Unit roll boards, history sheets and cell cards should all record first names. This will encourage improved relations between prisoners and staff which will give the perception that staff are approachable as well as encouraging positive behaviour from prisoners.

#### **Guidance For Promoting Positive Behaviour In Segregation Units**

Prisoners should be actively encouraged or supported to change their behaviour and such attempts should be recorded in the prisoner's segregation history sheet. Special consideration should be given to the management of those prisoners at risk of self-harm (PSO 2700 chapter 9).

There are some establishments that have successfully introduced a system to encourage positive behaviour during time spent in segregation and other establishments may wish to develop a similar system which will suit their own needs. The system allows a prisoner to start with a clean slate each day and works on the basis where points are issued depending on the all-round behaviour and co-operation of the prisoner. Once earned the points can be spent on rewards that may not normally be permitted or on privileges that have been removed. Points can be accumulated in order to secure an early return to normal location by having days remitted. (this is consistent with PSO2000 Para 8.4).

Types of privileges would be items such as publications, radio CD's, televisions, in cell games, extra letters etc. Where situations allow 'association' periods enable prisoners to mix socially. Rewards should be for a set period of time such as 24hrs, lunchtimes, overnight etc. All rewards should be ones that can readily be removed where the behaviour is no longer consistent with required standards.

When establishing such a system it is necessary to develop a tariff which is available to prisoners in order that they can see what can be achieved, the tariff must be attainable and realistic in order to encourage participation.

Where such systems are adopted the rates of success (or otherwise) should be fed into the Segregation Monitoring and Review Group.

- All prisoners who are to remain in segregation have a Segregation History Sheet opened. This history sheet is kept up to date and will be filed in the prisoners F2050 once segregation is completed.

**Outcome:** All relevant people are told about the segregation of the prisoner as soon as is practicable.

The Healthcare Centre is informed that a prisoner is in segregation within 30



minutes of being located in the unit. The Initial Segregation Health Screen is completed within 2 hours.

If the Initial Segregation Health Screen cannot be completed within 2 hours of the prisoner being placed in the segregation unit because **no registered nurse or doctor is on duty** then:

1. Prisoners on an open ACCT must continue to be observed at not less than intermittent supervision (at least 5 times an hour at irregular intervals) or as stipulated on the front cover of the ACCT plan if that is greater
2. Other prisoners must be observed every 30 minutes until the Initial Segregation Health Screen can be completed.

The screen still needs completing as soon as possible. In urgent cases, the out of hours health service should be contacted.

- The Independent Monitoring Board is informed within 24 hours (and informed of the date / time of the first Review Board meeting).
- When authorising segregation for a person aged under 18 years old, the operational manager informs the supervising officer of the relevant Youth Offending Team (YOT) within 24 hours.
- The Suicide Prevention Co-ordinator / Safer Custody Team leader are informed of any prisoner who is in the segregation unit on an open ACCT.
- Where a prisoner is in scope/subject to offender management arrangements, his/her offender supervisor should be informed as this will have an impact on planned interventions, reviews etc

#### **4.1.1 For Prisoners Segregated Under Prison Rule 45 (YOI 49)**

**Outcome:** The prisoner is kept informed about his/her segregation and told when reviews will take place so that they do not feel isolated from the process / system of segregation, nor from staff.

- The prisoner is told the reason(s) why they are being held in segregation under Prison Rule 45 (YOI 49). This should be done orally and in writing using form Reason for Initial Segregation Under this Rule / Reason for Initial Segregation Under Rule 49 (Young People). The reason(s) should be the same as those written on form Governor's Authority for Initial Segregation / Governor's Authority for Initial Segregation (Young People).
- The prisoner is told when the first review of their segregation will take place and whether or not they will have the opportunity to attend this meeting. Use form Reason for Initial Segregation Under this Rule / Reason for initial segregation under rule 49 (young person). The first Review Board is held within 72 hours of initial segregation.

- The prisoner is told what regime he/she will have access to pending the first Review Board. These are shown clearly on the form Reason for Initial Segregation Under this
- Prisoners on open ACCT's must unless there are specific reasons why this would not be possible or appropriate be invited to attend all case reviews. See PSO 2700 for instructions where the prisoner refuses to attend or is not able to do so for another reason. Rule/ Reason for initial segregation under rule 49 (young person)

## 4.2 Continuing Segregation

### **Continuing Segregation Under Prison Rule 45 / YOI Rule 49**

Outcome: A decision to continue the segregation of a prisoner under Prison Rule 45 / YOI Rule 49 is taken by a Segregation Review Board (chaired by a competent operational manager or duty director in a contracted prison), having regard to the individual circumstances of the prisoner concerned. The aim is to return a prisoner to normal location as soon as it is practicable to do so. The safety of the prisoner whilst in segregation is of paramount importance.

- The initial Segregation Review Board for a prisoner is held within the first 72 hours of a prisoner being placed in segregation. Subsequent Review Boards are held at a frequency to be agreed locally (between governor and area manager) but at least every 14 days.
- The form Segregation Review Board – Governor's Continued Authority for Segregation is completed by the Board when it considers whether to continue segregation under rule 45 (YOI 49) or not. Those attending the boards, including IMB and chaplaincy should where safe to do so offer the prisoner an opportunity for a private interview between reviews to determine whether there is anything they can contribute to his/her care and management.
- Particular consideration is given to safeguarding the mental health of prisoners in segregation under Prison Rule 45 (YOI 49).

Outcome: The prisoner is kept informed about his/her segregation and told when Review Boards will take place so that they do not feel isolated from the process / system of segregation, nor from staff.

- The prisoner is told the outcome of the Segregation Review Board and whether their segregation is to continue.
- If segregation is to continue the prisoner is told the reason(s) why both orally and in writing using form Segregation Privileges and Review Targets. The reason(s) should reflect the discussions held during the Segregation Review Board and noted on the form Segregation Review Board – Governor's Continued Authority for Segregation

- The prisoner is given a copy of the behaviour and intervention targets that they have been set at the Review Board via form Segregation Privileges and Review Targets
- The prisoner is told what regime he/she will have access to after each Segregation Review Board. This is shown clearly on the form Segregation Privileges and Review Targets which is given to the prisoner.
- The prisoner is told when the next review of their segregation will take place. They normally have the opportunity to attend the meeting (at least for some of the time), and be given the opportunity to present their views.

## **4.3 Completion of segregation or transfer to another establishment / Vulnerable Prisoner Unit**

### **4.3.1 Return to normal location**

Outcome: Prisoners return to normal location as soon as the Review Board feel that it is appropriate and safe (for the prisoner, staff and other prisoners) to do so.

- The prisoner is told the decision of the Segregation Review Board to return them to normal location and when this will take place (unless they are a Category A prisoner) within 12 hours of the Board.
- The Segregation Review Board decides whether to:
  1. return the prisoner directly back to ordinary location
  2. adopt a phased return to ordinary location – this is considered for prisoners who have been in segregation for a long period of time (over 1 month)
  3. return to ordinary location via a High Supervision Unit.
- When the prisoner is ready to leave segregation a summary of the prisoner's behaviour and progress whilst in the unit is written on the main wing history sheet that accompanies the prisoner to his/her next location. The Segregation History Sheet and the detailed information it contains (e.g. Review Board notes) is stored in the prisoner's main record (F2050). A cell share risk assessment review is completed prior to the new location following violent or threatening behaviour. (Refer to PSO 2750 para 32)
- Any prisoner on an open ACCT has a case review prior to discharge from the segregation unit. The timing of this case review must not delay the return of the prisoner to normal location (or transfer to a more suitable location), but it must be held as soon as possible following that decision, and no longer than two hours after it. A member of the segregation unit staff must update the relevant part of the ACCT.
- The governor/director will fully consider and act on advice from the healthcare team that a prisoner should leave segregation on health grounds. See Guidance on medical recommendation against segregation.
- A prisoner is not required to sign any form of consent when being returned to normal location. This decision to end segregation rests solely with the Segregation Review Board and the operational manager chairing the Board.

- The operational manager in charge of the segregation unit decides a general policy that will be followed for any prisoner that refuses to leave the Segregation Unit once their period of Rule 45 (YOI 49) / cellular confinement comes to an end.

### **4.3.2 Location on a Vulnerable Prisoner Unit**

Outcome: The Segregation Review Board allocates prisoners to a Vulnerable Prisoner Unit if they feel that it would be in the best interests and safety of the prisoner to do so.

- The prisoner is told that the Segregation Review Board is considering placing him/her on a vulnerable prisoner unit and be given the opportunity to comment / express their views. The prisoner should normally agree to being allocated onto a Vulnerable Prisoner Unit.
- Allocation to a Vulnerable Prisoner Unit may involve the prisoner being transferred to a different establishment.
- Where a group of prisoners, in their own interests, are kept apart from the rest of the population on a separate wing or landing, it does not follow that segregation under Rule 45 applies. Prisoners are not subject to Rule 45 controls if they have normal social contact with others in the group and are able to participate within the group in recreation (including physical education), education, entertainment and work.

### **4.3.3 Transfer to another establishment**

Outcome: Prisoners in segregation are transferred to another establishment if it is no longer appropriate for the prisoner to remain in the current establishment.

- The Segregation Review Board decides whether to transfer a prisoner to another establishment. Reasons why a prisoner might need to be considered for transfer are given below:

#### **Transfer to another establishment**

Segregation should not be seen by prisoners as a gateway to gaining a transfer to another establishment nor should it be a means of avoiding a normal routine transfer when this reflects a planned allocation or where a return to normal location in the holding establishment is not operationally feasible. Particular care must be taken with prisoners subject to the ACCT process. Except for routine allocations those prisoners moving from segregation to other establishments should be the exception rather than the norm. The aim must be to return the prisoner from normal location to his/her normal wing or unit and wing staff should work with segregation staff to achieve this. Where a move of location is necessary this should be within the same establishment wherever possible and the reasons for this must be recorded. If it does become necessary to move a prisoner from segregation to another establishment the aim must be to manage the prisoner on normal location in the receiving establishment. If in exceptional

circumstances the behaviour of a prisoner means that attempting to manage him/her on normal location following transfer would present too great a risk to safety and order, the decision to place in segregation must be taken by the Duty Governor/Duty Director with a Case Review taking place within 24 hours.

Whilst being held in segregation it may become necessary to arrange the transfer of a prisoner to another establishment.

Arrangements for transferring a prisoner who is on an open ACCT (inc post-closure) must be in accordance with the relevant section of PSO2700.

Temporary absence from the prison (to attend court, hospital etc.) does not constitute a transfer and the authority for segregation is not suspended.

### **Reasons for Transfer**

A prisoner may be transferred out of segregation to another establishment for several reasons. Examples of these are given below:

1. The prisoners' attitude and behaviour has become such that staff and others have lost confidence in the prisoner's ability to change in their current environment.
2. The prisoner has been recategorised & upgraded and therefore needs to be transferred to a more secure establishment
3. The prisoner has refused to leave the segregation unit at the end of their period of removal from association. The prison policy may be to transfer out prisoners who take this course of action.

**Policy to adopt for prisoners who refuse to leave the Segregation Unit at the end of their period of confinement.**

The operational manager in charge of the Segregation Unit must decide upon and publish a general policy that will be adopted for prisoners who refuse to leave the segregation unit at the end of their period of segregation.

The policy should consider:

1. The reason(s) that the prisoner is giving for refusing to leave segregation. If there is a genuine and realistic fear of assault / reprisals if the person returns to normal wing accommodation then consideration should be given to placing the prisoner on Rule 45 (YOI 49) own interest segregation/ moving them to a Vulnerable Prisoner Unit / different wing in the prison.
2. Whether it would be advantageous to give the prisoner a direct order to return to the wing and then place him/her on a governor's report if they fail to do so. This may actually be to the benefit to the prisoner as they may receive a cellular confinement award for refusing a direct order and thereby be able to remain in segregation for a further time period. However further measures such as loss of privileges, down grading of level under Incentives and Earned Privileges or a reduction in the use of the telephones may achieve the desired effect.
3. Whether the prisoner should be transferred to another establishment. Prisons may decide to adopt a transfer policy for prisoners who refuse to leave segregation. Establishments should consider the most appropriate transfer

location for prisoners who refuse to comply with the policy on segregation on an individual basis. When a prisoner is in scope/subject to offender management arrangements the offender manager through the prison based offender supervisor, should be advised of any impending transfer. Special consideration is required before enforcing a transfer as this may encourage other prisoners to use this as a route to manipulate a transfer to suit their own needs.

A notice of the policy should be issued to a prisoner refusing to leave segregation explaining what the consequences of the refusal are. This should be clearly marked out explaining each stage and therefore hopefully dissuading this course of action.

4. The prisoner's status has changed (e.g. they have been classified as a vulnerable prisoner) and the prison does not have any suitable accommodation
5. The prisoner is being transferred under the 'Management Strategy for Disruptive Prisoners' policy (PSO 1810 Maintaining order in prisons).
6. The prisoner is being transferred to a DSPD (Dangerous & Severe Personality Disorder) unit or a CSC (Close Supervision Centre).
7. The prisoner is believed to represent such a danger to another prisoner or a member of staff that they cannot be reasonably returned to the main accommodation of the prison for the foreseeable future.
8. As a progressive move for the prisoner with the incentive for a fresh start.
9. If it is recommended by an ACCT case review

#### **Arrangements for transfer**

Transfers may be arranged and executed between the two establishments concerned (or with Area Manager support) except for category A prisoners, life sentence prisoners and young persons who may only be transferred upon the authority of the relevant Headquarters group:

In the rare event of a segregation to segregation move this must be authorised by the Governing Governor or Director in contracted prisons (or deputy in their absence) at both the transferring and receiving establishments.

The intention to transfer a prisoner must be discussed with the receiving establishment; a record must be retained in the segregation history sheet by the sending establishment to show this has been done.

A Pre-Transfer of Information Form OT028 must be completed by the sending establishment in all cases of prisoners being transferred from a segregation unit to a segregation unit and in all other cases where a prisoner had spent more than 14 days in segregation prior to the transfer to normal location.

Where prisoners have mental or physical health problems, consideration for transfer must include assessments from healthcare staff as part of the segregation review board. Any plans made by the board should include any required support at the receiving establishment and any action needed to ensure the support is immediately available.

The offender management unit (OMU) in the prison should be advised when a transfer is being considered. This would only apply where the OMU are not already represented on the segregation review boards.

- Prisoners will normally be told if they are being considered for transfer to another establishment (except Category A and E list prisoners) and which establishment they will be transferred to once this has been finalised.
- If a transfer is to take place then a copy of the Segregation Review Board notes will be sent / faxed / e-mailed in advance of the transfer to the Head of Custody at the receiving prison (see pre-transfer-form) OT028. The Head of Custody ensures that those people within the establishment that need to be given background information about the arriving prisoner eg. Governor authorising any possible continuation of segregation,
- **Segregation at the receiving establishment** - It is for the governor of the receiving establishment to decide whether the prisoner should continue to be removed from association. Forms:
  - (1) Governor's Authority for Initial Segregation /Governors Authority for Initial Segregation (Young Persons) and
  - (2) Reason for Initial Segregation Under this Rule /Reason for Initial Segregation (Young Persons) Reason for Initial Segregation Under Rule 49 (Young People)are completed if segregation is to continue. The authorising governor considers the vulnerability of the arriving prisoner and what steps need to be put in place to aid the prisoner in adjusting to his/her new environment (see measures to safeguard the prisoner's mental health). A Review Board is then to be held within 72 hours of the transfer.

## **5. Monitor & Review**

### **Monitoring & Reviewing**

**Outcome:** Monitoring arrangements are in place that ensures that prisoners are treated fairly and decently. The reasons for initial and continuing segregation are monitored so that prisoners do not spend longer in segregation than is necessary. The aim is to return prisoners to normal accommodation within the prison as soon as possible.

- All establishments have in place their own procedures to monitor and review the use of segregation (see Segregation Monitoring & Review document).

### **Segregation Monitoring & Review**

1. All closed establishments must have local procedures in place to monitor & review the use of segregation.
2. The outcome of the review procedures must be:
  - a. Monitoring the implementation and adherence to the PSO on Segregation

## Statistics

Below is a list of the roles that the segregation monitoring and review group (SMARG) are responsible for. Mandatory (**written in bold**) and other suggested statistics that the group may wish to look at are provided alongside each role. The chair of the review group will be responsible for ensuring remedial action is completed/analysed.

Much of the contents for SMARG cross over with the requirements for Safer Custody Team Meetings, therefore it would be good practice to forward the statistics to the Suicide Prevention Co-ordinator if they are not already part of the monitoring group.

- a. Monitor the implementation and adherence to the PSO on Segregation
  1. Quality control checks on a random sample of documents such as Initial Segregation Health Screen, Daily Occurrence Log, Review Board write-ups.
  2. **Percentage of Initial Segregation Health Screens completed within the 2 hour time period**
  3. **Percentage of Review Boards held within the specified time limit**
- b. Monitor and review the use of segregation throughout the prison. Monitor overall trends in the use of segregation
  1. **Number of prisoners held in the segregation unit on average each week**
  2. **Analysis of the Prison Rule that prisoners are held under e.g. Rule 45 GOoD / cellular confinement etc.**
  3. Analysis of the length of stay of prisoners in the segregation unit
  4. Percentage of adjudications that result in cellular confinement/removal from wing/unit awards \*
  5. **Number and percentage of prisoners from ethnic minorities held in segregation against the percentage in the prison as a whole and as a percentage of the total number held in segregation. (Investigate in cases of disproportion)**
  6. Number of upheld Request & Complaints relating to segregation
  7. Number of occasions where use of force has been used \* (**Record separately use of force used to prevent self-harm**)
  8. **Number of occasions that personal protective equipment is used**
  9. **Number of prisoners with registered disabilities**
  10. **Religion of prisoner**
  11. How many prisoners are subjected to a full search upon initial segregation \*
  12. How many prisoners are risk assessed and issued with cardboard furniture \*



- c. Reviewing and advising on the training and educational needs of staff
1. Length of time each member of staff has spent working in the segregation unit
  2. monitoring that staff are up to date with their training e.g. **race equality, C&R**, mental health training, **suicide awareness**
  3. Recommending training that staff should undertake
  4. **percentage of ethnic minority staff who work in the segregation unit against the percentage of ethnic minority staff who work in the prison as a whole.**
- d. Individual analysis is required for (points 1 – 5 below are all mandatory and must be assessed):
1. **Any prisoner who is held in segregation for a continuous period of 3 months or more**
  2. **Any prisoner who is transferred from another prison's segregation unit who is kept in this segregation unit for 1 month or more**
  3. **Prisoners held in special accommodation and/or mechanical restraints \***
  4. **Prisoners held in segregation whilst on an open ACCT** (consideration can be made into separating the figures of those that go into segregation whilst on an open ACCT against those that have one opened whilst in segregation) **and how many are removed from segregation as the risk of suicide is considered too high to remain in segregation.**
  5. **Prisoners who 'fail' the Initial Segregation Health Screen(record whether they remain in segregation or are located elsewhere)**
- \* = **Analyse the breakdown of ethnicity and religion**
- b. Monitoring and reviewing the use of segregation throughout the prison. Monitoring overall trends in the use of segregation
- c. Reviewing and advising on the training and educational needs of staff
- d. Conducting individual analysis on certain groups of prisoners. For example:
- Prisoners held in segregation for long continuous periods (eg. 3 months or more). Such prisoners should be considered for assessment for a DSPD (Dangerous & Severe Personality Disorder) unit or CSC (Close Supervision Centre) .Area managers/DOM or Operational Director (in a contracted prison)/Director of High Security Prisons will be advised of such prisoners along with clarification of what case management has been involved. A review (either by attending a case review or by reviewing the review paperwork) will be undertaken for

continued segregation beyond the 3 month stage (6 months in the High Security Estate). The timescales laid down are for consecutive periods of segregation which means where a prisoner transfers from one segregation unit to another then the total time in segregation should be taken into account.

- Prisoners who are transferred from another prison's segregation unit who are kept in segregation for a month or more
- Prisoners who have been held in special accommodation and/or mechanical restraints
- Prisoners who have been held in segregation whilst on an open ACCT
- Prisoners for whom the Initial Segregation Health Screen suggests there are healthcare reasons not to segregate (regardless of the prisoner's final location)

3. The reviewing and monitoring function may best be achieved by setting up a Segregation Monitoring & Review Group (SMARG). The following people should be considered for membership of the monitoring group:
  - a. Operational manager/Director with responsibility for the segregation unit
  - b. Segregation unit officer(s)
  - c. Chaplain
  - d. Member of the healthcare team
  - e. Psychologist
  - f. Probation and or an offender supervisor (particularly when the prisoner is in scope of offender management)
  - g. Suicide Prevention co-ordinator
  
4. A quarterly report should be submitted to the Governor and the Regional Manager Custodial Services (or contractor operations director and DOM office for contracted prisons) highlighting the key observations and summarising the use of segregation over the previous quarter. It is also advisable to send the report to the Suicide Prevention Co-Coordinator as much of the contents in SMARG crosses over with Safer Custody meetings. As a minimum, the report should:
  - a. Identify and investigate general areas of concern, for example, where the segregation unit is not meeting the PSO / Review Board timetable / where ethnic minority statistics give cause for concern due to being disproportionate to the general population etc. (see SMART data available from REO)
  - b. Identify individual prisoners that need scrutiny e.g. prisoners who have spent more than 3 months in continuous segregation, prisoners in the segregation unit on an open ACCT, prisoners who are medically recommended against segregation after completion of the Initial Segregation Health Screen etc
  
5. It is good practice for a member of the Independent Monitoring Board to be invited to attend the SMARG meetings (where held) / provided with a copy of the quarterly report. Members of the IMB carry out their role as observers / monitors and should take no part in any management decisions.

- Audit and Corporate assurance monitor the compliance of establishments with their own laid down procedures about segregation.
- Establishments have their own programme for self-audit of the segregation unit which will have been agreed with the Regional Manager Custodial Services.

## **6. IMB Role**

**Outcome:** The representatives of the Independent Monitoring Board satisfy themselves that they are confident that the establishment has followed the laid down procedures in regard to segregation of prisoners and that decisions in individual cases are reasonable in light of the available facts.

- The Independent Monitoring Board are notified within 24 hours of the segregation of any prisoner. Every effort should be made to gain a direct verbal response and only when this contact proves impossible should a message be left with a person designated by the board. Notification must be recorded on the segregation history sheet.
- A member of the IMB speaks to the prisoner and scrutinises the paperwork authorising initial segregation Initial Segregation Health Screen / Governor's Authority for Initial Segregation / Governor's Authority for Initial Segregation (Young People) / Reason for Initial Segregation Under this Rule / Reason for Initial Segregation Under Rule 49 (Young People). The IMB member should speak to the operational manager who authorised initial segregation if they have any concerns about the decision at this time. The operational manager should seek to clarify the reasons why he/she authorised segregation for the particular prisoner in question.
- All Independent Monitoring Board visits to the Segregation Unit and individual prisoners are recorded in the Occurrence Book/daily diary and the prisoner's Segregation History Sheet (where relevant).
- Prisoners in segregation are seen on each rota visit and any views or observations recorded on the prisoner's Segregation History Sheet and Board member's records.
- If at any time an Independent Monitoring Board member has a serious objection to the continued segregation of a prisoner they should approach the Duty Governor to express their concerns. If this fails to result in a satisfactory and reasonable outcome the IMB member should follow the laid down procedures for IMB objection to continued segregation.
- A member of the Independent Monitoring Board should aim to attend the Segregation Review Boards (the process of authorising continued segregation beyond the initial 72 hours). Their role is to:
  1. to monitor and oversee the decision making process
  2. to be satisfied that the laid down procedures have been followed
  3. to be satisfied that a reasonable decision has been reached by the Review Board. This is defined as reasons which are rational and understandable. (this does not necessarily mean that the individual member must agree with the decision)
- Where it has not been possible for a member of the IMB to attend a review board they have a duty (as does the Governor to facilitate) to review the paperwork and interview the prisoner and where necessary members of the panel at the earliest opportunity afterwards.

- If an Independent Monitoring Board member is present at the Review Board they should sign the relevant part of the form Segregation Review Board – Governor’s Continued Authority for Segregation (To indicate that they were present at the Review Board and that the decision reached was reasonable and used correct procedures.)
- If the representative does not think that the decision of the Review Board is reasonable in light of the circumstances known at the time and has been unable to resolve the matter satisfactorily with the operational manager chairing the Board then they must follow the procedures for IMB objection to continued segregation.

### IMB Formal Objection to Segregation and Use of Special Accommodation or Body Belt

If a member of the Independent Monitoring Board has a concern about the initial or continuing segregation, use of Special Accommodation or a Body Belt, and they have been unable to resolve the matter through approaches to the Duty Governor/Duty Director or authorising Governor/Director, then the following steps should be followed:

The IMB member must lodge in writing a paper detailing the objections they have to continuing segregation, use of Special Accommodation or a Body Belt. This paper must go to the in-charge Governor/Director of the establishment. The in-charge Governor/Director will make a written response to the Board member as soon as possible and in any case within 24 hours. Both in-charge Governors/Directors and members of the Independent Monitoring Board should make every effort to resolve the situation at local level.

If it has not been possible to resolve the issues raised in the formal objection, a copy of all the written paperwork should be sent to the Regional Manager Custodial Services/DOM for consideration. The Regional Manager Custodial Services should arrange to meet with a member of the IMB or discuss the case over the telephone and determine the action to take as quickly as possible, and in any event within 5 working days. The Regional Manager Custodial Services/DOM will then notify the Governor/Director, controller and IMB of his or her decision.

If the IMB are still concerned about the decision, they should bring it to the attention of the Chief Operating Officer NOMS

In the event of disagreement at this stage, the matter should be brought to the attention of the Minister and the Director General of NOMS

## **7. Special Accommodation**

### **7.1 Policy**

#### **7.1.1 Outcome**

Special accommodation is only used to hold, for the shortest necessary time, a **violent or refractory** prisoner to prevent that prisoner injuring (as a product of the **violent or refractory behaviour**) others, damaging property or creating a disturbance that hinders the maintenance of good order. Special Accommodation **is not** used as a punishment.

Additional precautionary measures are in place to care for prisoners at risk of self-harm or suicide who are located in Special Accommodation.

### **7.1.2 General**

- 1 Special Accommodation is a dedicated cell or improvised normal accommodation with any one (or more than one) of the following items removed in the **interests of safety**: furniture, bedding, sanitation. Special Accommodation can be located anywhere in a prison, including Healthcare and is not only found in Segregation Units or Care and Separation Units.
- 2 The removal of personal items such as normal clothing, shoelaces, belts and other individual items such as razors, lighters, plastic bags, cutlery or other items that a prisoner may use to harm him/herself must be part of the prisoners ACCT process, and should not be confused with Special Accommodation procedures. Additional instructions regarding removal of normal clothing and issue of alternative clothing are contained in PSO2700. Alternative solutions will therefore need to be considered by the case review if furniture is used to self-harm, for example use of cardboard furniture as if the furniture is not replaced then special accommodation procedures do apply.
- 3 Special Accommodation must only be used to manage prisoners who cannot be located safely in normal accommodation. If the prisoner can be held safely in normal accommodation, the use of Special Accommodation is not appropriate.
- 4 Prisoners identified as being at risk of suicide or self-harm must not be placed in Special Accommodation unless they are additionally identified as **violent or refractory**. Further precautionary measures must be taken based on their individual ACCT plan. These measures are included in the processes described below and are also summarised at the end of this document.  
It must be noted by everybody involved in managing prisoners in Special Accommodation that prisoners not already identified as at risk of self harm or suicide may still try to harm themselves.
- 5 Special Accommodation **must not** be used as a punishment.
- 6 Any prisoner who is placed in Special Accommodation must be taken out of it, or have conditions normalised, as soon as the reasons for its use no longer exist. Planning for the prisoner's return to normal location must begin as soon as he or she is placed in Special Accommodation.
- 7 Prisoners under suspicion of swallowing or secreting drugs must not be held in Special Accommodation without toilet and washing facilities. For further guidance on appropriate methods of dealing with prisoners who are known or suspected of holding drugs internally, please click [here](#).
- 8 When **Young People** are located in Special Accommodation in the Segregation Unit, Duty Governors/Duty Directors must consider allowing them to make representations against Segregation. This process is described [here](#).
- 9 Establishments must contact the Head of Placements at the Youth Justice Board and the relevant Youth Offending Team whenever a Young Person is located in Special Accommodation.
- 10 Women's Team & Young People's Group are currently working with the Youth Justice Board on the development of a central policy relating to calm down rooms. In the meantime, if a Young Person is locked in accommodation for behavioural reasons, and that accommodation has any one (or more than one) of the standard accommodation furniture, bedding and sanitation removed in the interests of safety, then the procedures for Special Accommodation must apply.
- 11 Prisoners held under Dirty Protest conditions are not considered to be located in Special Accommodation. Procedures for managing prisoners under Dirty Protest conditions can be accessed [here](#).

- 12 If normal residential accommodation is used as Special Accommodation, Population Management Unit must be informed so that they can take the change into account.
- 13 If normal residential accommodation is used as Special Accommodation for a period of four weeks or more the Governor/Director must amend the In Use Certified Normal Accommodation (CNA) and Operational Capacity to reflect the change. The procedure for this is described in PSO 1700.
- 14 Form OT013. 'Authority For Location In Special Accommodation', must be used to record all observations and decisions regarding the use of Special Accommodation. This form must be given a unique reference number and, when completed, retained at the establishment. A copy of the form must be placed with the prisoner's core record.

### **7.1.3 Monitoring**

- 15 Establishments must conduct a review of the use of Special Accommodation.
- 16 Monitoring must form part of the process described in PSO 1700.

### **7.1.4 Special Accommodation - Process for Placing a Prisoner in Special Accommodation**

- 17 The Duty Governor/Duty Director must give authority before a prisoner is located in Special Accommodation. If he or she cannot be contacted, the decision may be taken by the person in charge of the prison at that time. The Duty Governor/Director must then be informed of the incident at the earliest opportunity.
- 18 Authority will be valid for a maximum of 24 hours and must be recorded on Form OT013.
- 19 The reason for placing the prisoner in Special Accommodation must be explained to him or her at the earliest opportunity, making it clear that it is not a form of punishment. A full search should not be conducted as a matter of routine but should be individually risk assessed based on the information currently available. A record must be kept of the decision with the reasons and whether it was carried out under restraint. This must be recorded on OT013.

#### **Prisoners who are at Risk of Harming Themselves**

- 20 The Duty Governor/Duty Director must ensure that the prisoner's ACCT CAREMAP is consulted, if not before then as soon as possible after the decision to place him or her in Special Accommodation. The ACCT must be updated as soon as possible, and an enhanced ACCT Case Review (refer to PSO 2700) held within two hours of the decision (or before unlock if the decision is made during night state). The additional section on Form OT013, entitled 'Prisoners on Open ACCT' must also be completed.
- 21 Where the results of the ACCT Case Review are not already known to the prisoner (through their non-attendance at the review), they must be communicated to them as quickly as possible.
- 22 A mental health assessment must be carried out for every at-risk prisoner in Special Accommodation unless the Case Review specifically rules one out. For example, it may not be necessary to carry out a mental health assessment if there is already a very recent one in existence.
- 23 The ACCT CAREMAP must also make clear what alternatives to the use of Special Accommodation have been considered, and what plans are in place to end its use, with an envisaged timeframe.

- 24 The Duty Governor/Duty Director must nominate a Designated Manager who must be an operational grade of not less than Senior Officer rank or Contracted Prisons equivalent. The

Designated Manager must assess the prisoner's continued location in Special Accommodation at a frequency specified by the Duty Governor/Duty Director on Form OT013. These assessments must take place at least once every hour. The Designated Manager must also oversee the completion of Form OT013.

- 25 The Duty Governor/Duty Director must specify the frequency at which prisoners will be observed. As a minimum, this will be five times an hour, at irregular intervals.
- 26 If the Duty Governor/Duty Director authorises the use of Special Accommodation, Healthcare must be notified immediately and a doctor or registered nurse must attend.
- 27 The time that Healthcare were notified and the time that a doctor or registered nurse attended must both be recorded on Form OT013.
- 28 The doctor or registered nurse must complete the Initial Segregation Health Screen to determine if there are any apparent clinical reasons to advise against the use of Special Accommodation. Before completing the Screen, registered nurses must complete the Algorithm. Doctors unfamiliar with the prison environment, e.g. locums, are advised to follow the Algorithm.
- 29 If the Initial Segregation Health Screen states that there are apparent clinical reasons to advise against the use of Special Accommodation, but the Duty Governor/Duty Director considers that there are operational reasons that mean that location in Special Accommodation is necessary, then the Duty Governor/Duty Director must ensure that a Medical Recommendations Against Segregation Or Special Accommodation - Initial Case Review takes place within two hours, (or before unlock if the Screen is completed during night state).
- 30 An IMB member must be notified and invited to attend as soon as possible and in any case within 24 hours of the prisoner entering Special Accommodation.
- 31 The time that the IMB were notified and the name of the IMB Member must be recorded on Form OT013.
- 32 The IMB member must record his or her visit on Form OT013.
- 33 An IMB member should express any concerns over continued use of Special Accommodation to the Duty Governor/Duty Director. If this fails to resolve the matter, the IMB member must refer to the procedures described here.

### **7.1.5 Special Accommodation - Process for Holding a Prisoner in Special Accommodation**

#### **Hourly Assessments of Location, Observation and Communication, Managerial Visits**

- 34 Every effort must be made to keep the time a prisoner is held in Special Accommodation to a minimum, i.e. minutes rather than hours or days. Any special needs provision to the prisoner should be taken into account, in particular drinking water as well as religious needs e.g. washing facilities for Muslim prisoners
- 35 It is not necessary for a Review to be held in order for a prisoner to be removed from Special Accommodation. A prisoner may be removed from Special Accommodation at any time on the authority of an Competent Operational Manager.
- 36 The Designated Manager must ensure that all observations and decisions regarding the prisoner are recorded on Form OT013. He or she must also attend every ACCT Case Review and Location In Special Accommodation - 24 Hr Case Review that takes place.
- 37 The Designated Manager must assess the prisoner's continued location in Special Accommodation at the frequency recorded on Form OT013. He or she must make every effort to talk to the prisoner and de-escalate the situation to minimise the prisoner's time in Special Accommodation.



- 38 The Designated Manager must ensure that he or she hands over to an appropriate member of staff, designated by the Duty Governor/Duty Director, before going off duty. The handover must be recorded on Form OT013 and endorsed by the Duty Governor/Duty Director on his or her next visit.
- 39 A member of staff must observe the prisoner at least five times an hour, at irregular intervals. He or she must make every effort to talk to the prisoner and de-escalate the situation to minimise the prisoner's time in Special Accommodation.

**Prisoners who are at Risk of Harming Themselves**

- 40 A member of staff must observe the prisoner at least five times an hour, at irregular intervals, or more frequently if this is the level agreed in the ACCT Plan, and stipulated on the front cover of the ACCT Plan.

- 41 The Governor in Charge/Director must visit any prisoner in Special Accommodation at least twice in any 24 hour period.
- 42 A doctor or registered nurse must visit the prisoner at least twice in any 24 hour period. A note of each visit must be made in the prisoner's clinical record.

**Location In Special Accommodation - 24 Hr Case Review**

- 43 The prisoner must be reassessed at a Location In Special Accommodation - 24 Hr Case Review (OTO19) within 24 hours of being placed in Special Accommodation to decide whether he or she needs to remain there. If the prisoner is to remain in Special Accommodation, the reasons for this must be documented as well as the alternatives that were considered. The 24 Hr Case Review must include an Operational Manager or Director as chair, a doctor or registered nurse, the Designated Manager, the ACCT Case Manager/delegate or Unit Manager, if applicable, and staff from Segregation or wherever the Special Accommodation is located. Further reviews must take place at least every 24 hours where continued use of Special Accommodation is necessary. Visits from the Governor/Director and Doctor/nurse should be recorded on form Location in Special Accommodation Visits for Subsequent 24 Hour Period (OTO21).
- 44 The Independent Monitoring Board must be informed about the 24 Hour Case Review and invited to attend as quickly as possible. If present, the IMB member must complete the relevant section of Form OT013.
- 45 An IMB member should express any concerns over continued use of Special Accommodation to the Duty Governor/Duty Director. If this fails to resolve the matter, the IMB member must refer to the procedures described here.
- 46 Other staff, such as the prisoner's personal officer, psychologist, CARATS or a member of the Chaplaincy team, could also attend, if considered helpful.
- 47 The decision of the 24 Hour Case Review must be communicated to the prisoner as quickly as possible.
- 48 The Competent Operational Manager or Director chairing the 24 Hour Case Review has final authority on the continued use of Special Accommodation. This decision must be recorded on Form OT013. For prisoners located in Special Accommodation longer than 24 hours, a copy of Form OT013 must be copied to the Area Manager/DOM for information purposes.
- 49 If the prisoner remains in Special Accommodation following the 24 Hour Case Review, the frequencies of assessments of location and observations that must take place must be restated. As a minimum, there will be an hourly assessment by the Designated Manager and five observations an hour, at irregular intervals. Form Location in Special Accommodation



Occurrence Log-Continuation (OTO20) is available to be used to record observations where space no longer permits on OTO13.

### **Changing Role of the IMB Member**

- 50 The Independent Monitoring Board member does not play a part in authorising the use of Special Accommodation. However, he or she plays an important role in overseeing use of the Special Accommodation and the prisoner's welfare.
- 51 Although their presence is not mandatory, an IMB member should aim to attend the 24 Hour Case Review to oversee the decision-making process and satisfy him or herself that the use of Special Accommodation is reasonable and consistent with PSO 1700. An IMB member should express any concerns over continued use of Special Accommodation to the Duty Governor/Director. If this fails to resolve the matter, the IMB member must refer to the procedures described here.

### **Prisoners who are at Risk of Harming Themselves**

- 52 The role of the IMB member does not change when managing prisoners who are at risk of harming themselves, although he or she may appraise the ACCT CAREMAP and participate in the ACCT Case Review.

### **Use of Cardboard Furniture**

- 53 Any decision to use cardboard furniture in Special Accommodation must be made by an Competent Operational Manager and fully documented on Form OT013.
- 54 When Cardboard furniture is used in Special Accommodation, it must be as part of a de-escalation plan. It must be noted that adding any sort of furniture to Special Accommodation tends to prolong its use.
- 55 Health and Safety guidance for using cardboard furniture must always be followed.

### **Use of Alternative Clothing**

- 56 Where a prisoner is located in Special Accommodation and it is considered that his or her behaviour is life threatening, a case review team, or if they are not available an Operational Manager may authorise that the prisoner is deprived of normal clothes. The prisoner must be provided with alternative clothing (formerly known as protective clothing) so that he or she can be decently dressed. (refer to PSO2700 – section on the removal of items in possession, including the removal of clothing)
- 57 An immediate enhanced ACCT Case Review refer to PSO 2700) must be held to determine a plan to end the use of alternative clothing within a stated timeframe.
- 58 The aim must be for the prisoner to remain in alternative clothing for the shortest possible period and the prisoner's normal clothes must be returned to him or her at the earliest opportunity.
- 59 A record of the time the prisoner was provided with protective clothing, and the time normal clothes were returned, must be made on Form OT013.
- 60 Alternative clothing may be used in normal accommodation. **(refer to PSO2700 – section on the removal of items in possession, including the removal of clothing)**

### **7.1.6 Special Accommodation - Process for Removing a Prisoner From Special Accommodation**

- 61 Once the reasons for using Special Accommodation no longer exist, the Duty Governor/Duty Director must be contacted as soon as possible. If the Duty Governor/Duty Director agrees, he or she must complete the relevant section of Form OT013, and arrange for Healthcare and the IMB to be notified.
- 62 The Duty Governor/Duty Director must ensure that the prisoner is relocated to appropriate accommodation following a period of time in Special Accommodation. This is likely to be Segregation or Healthcare but may be another location. If a Review has recommended a particular location, then that recommendation must be followed. The prisoner's Cell Sharing Risk Assessment must be reviewed.

#### **Prisoners who are at Risk of Harming Themselves**

- 63 The Duty Governor/Duty Director must ensure that a review of the prisoner's ACCT CAREMAP takes place. The timing of this ACCT Case Review must not delay the return of the prisoner to normal location (or transfer to a more suitable location), but it must be held as soon as possible following that decision, and no longer than two hours after it.

- 64 **Reporting-** A copy of the completed OTO13 must be placed in the segregation history sheet the prisoner's clinical record (IMR) and sent to the IMB.

### **7.1.7 Special Accommodation - Summary of Further Precautionary Measures for the Management of Prisoners at Risk of Self-Harm or Suicide in Special Accommodation**

#### **Special Accommodation - General**

- 4 Prisoners identified as being at risk of suicide or self-harm must not be placed in Special Accommodation unless they are additionally identified as violent or refractory. Further precautionary measures must be taken based on their individual ACCT plan. These measures are included in the processes described below and are also summarised at the end of this document.

**It must be noted by everybody involved in managing prisoners in Special Accommodation that prisoners not already identified as at risk of self harm or suicide may still try to harm themselves.**

#### **Special Accommodation - Process for Placing a Prisoner in Special Accommodation**

- 20 The Duty Governor/Duty Director must ensure that the prisoner's ACCT CAREMAP is consulted, if not before then as soon as possible after the decision to place him or her in Special Accommodation. The ACCT must be updated as soon as possible, and an ACCT Case Review held within two hours of the decision (or before unlock if the decision is made during night state). The additional section on Form OT013, entitled 'Prisoners on ACCT' must also be completed.
- 21 Where the results of the ACCT Case Review are not already known to the prisoner (through their non-attendance at the review), they must be communicated to them as quickly as possible.
- 22 A mental health assessment must be carried out for every at-risk prisoner in Special Accommodation unless the Case Review specifically rules one out. For example, it may not be necessary to carry out a mental health assessment if there is already a very recent one in existence.
- 23 The ACCT CAREMAP must also make clear what alternatives to the use of Special Accommodation have been considered, and what plans are in place to end its use, with an envisaged timeframe.

#### **Special Accommodation - Process for Holding a Prisoner in Special Accommodation**

- 40 A member of staff must observe the prisoner at least five times an hour, at irregular intervals, or more frequently if this is the level agreed in the ACCT Plan, and stipulated on the front cover of the ACCT Plan.

### **Changing Role of the IMB Member**

- 52 The role of the IMB member does not change when managing prisoners who are at risk of harming themselves, although he or she may appraise the ACCT CAREMAP and participate in the ACCT Case Review.

### **Special Accommodation - Process for Removing a Prisoner From Special Accommodation**

- 63 The Duty Governor/Duty Director must ensure that a review of the prisoner's ACCT CAREMAP takes place. The timing of this ACCT Case Review must not delay the return of the prisoner to normal location (or transfer to a more suitable location), but it must be held as soon as possible following that decision, and no longer than two hours after it.

## **7.2 Flowcharts**

### **7.2.1 Special Accommodation Flowchart**

## **7.3 Forms**

### **7.3.1 Form OT013 Authority For Location In Special Accommodation**

### **7.3.2 Form OT020 Location In Special Accommodation Occurrence Log (Supplementary)**

### **7.3.3 Form OT021 Location In Special Accommodation Visits for subsequent 24 hour period (Supplementary)**

### **7.3.4 Form OT015 Location In Special Accommodation 24 Hour Case Review**

## **8. Body Belts**

### **8.1 Policy**

#### **8.1.1 Outcome**

A Body Belt is only used in extreme circumstances when all other options have failed or are considered unsafe, to prevent a violent or refractory prisoner engaging in life-threatening behaviour, either towards another person or him or herself.

A Body Belt **is not** used as a punishment.

A Body Belt **is not** used for prisoners under the age of 18.

#### **8.1.2 General**

- 1 *A Body Belt must only be used to prevent a violent or refractory prisoner causing self-injury, injuring another prisoner or member of staff or damaging property, when all other options have failed or are considered unsafe.*
- 2 *Every effort must be made to avoid the use of a Body Belt. The option to use Special Accommodation must be considered first. This does not preclude the use of a Body Belt in addition to Special Accommodation, where the circumstances of the case so demand, and where a prisoner cannot safely be left unrestrained in Special Accommodation.*
- 3 *Its use must be a last resort, when other methods (calming and de-escalation techniques, use of Special Accommodation, etc) have been tried and have failed. For further information on de-escalation techniques and communication skills, refer here. This includes guidance on managing aggression, interpersonal and communication skills and diffusion strategies. If it is necessary to fit a Body Belt in an emergency, refer to these documents once the situation is under control.*

- 4 A Body Belt may be used in conjunction with other methods of managing the risk.
- 5 *Calming and de-escalation techniques must always be employed when a Body Belt is used and **the prisoner must be constantly observed by a member of staff in close proximity (face to face) and never by CCTV.** (see pso2700 – 8.8 constant supervision)*
- 6 A Body Belt **must not** be used as a punishment.
- 7 A Body Belt **must not** be used on a prisoner under the age of 18.
- 8 *Before, during and after the application of the Body Belt, all possible steps must be taken to preserve the prisoner's dignity. Any person that does not need to be in the vicinity of the prisoner must be moved away. The prisoner must be spoken to calmly and respectfully at all time.*
- 9 *Any prisoner who is placed in a Body Belt must be taken out of it as soon as the reasons for its use no longer exist.*
- 10 Body Belts must be obtained from an authorised provider. Contact Facilities Management (Locking) for advice.
- 11 *Form OT012. 'Authority For Location In Body Belt', must be used to record all observations and decisions regarding the use of a Body Belt. This form must be given a unique reference number and, when completed, retained at the establishment. A copy of the form must be placed with the prisoner's core record.*

### **8.1.3 Monitoring**

- 12 *Establishments must conduct a monthly review of the use of Body Belts through SMARG and linking in with the Safer Custody Team Meeting.*
- 13 *Monitoring must form part of the process described elsewhere in PSO1700.*

### **8.1.4 Placing a Prisoner in a Body Belt**

- 14 *The Governor in Charge/Director must give authority **before** a prisoner is put in a Body Belt. In an emergency, the Duty Governor/Duty Director can give this authority, but the Governor in Charge/Director's authority must be sought as soon as possible.*
- 15 *Authority will be valid for a maximum of 24 hours and must be recorded on Form OT012.*
- 16 *All other actions taken or considered prior to the use of the Body Belt must be recorded under 'Reasons' in the Governor's/Directors Authority section on Page 1 of Form OT012.*
- 17 *The reason for placing the prisoner in a Body Belt must be explained to him or her at the earliest opportunity, making it clear that it is not a form of punishment.*

#### **Prisoners who are at Risk of Harming Themselves**

- 18 *If a Body Belt is used for an at-risk prisoner, the ACCT CAREMAP must be consulted, if not before then as soon as possible after, the decision to use the Body Belt. The Governor in Charge/Director must chair a Case Review within 60 minutes of the decision being made. This must involve telephone consultations if absolutely necessary during night state. The ACCT must be updated as soon as possible.*
- 19 *A mental health assessment must be carried out at the very earliest opportunity (within 24 hours) for every at-risk prisoner in a Body Belt unless the Case Review specifically rules one out. For example, it may not be necessary to carry out a mental health assessment if there is already one in existence and it has been recently*

reviewed. It is important to ensure that current behaviour is compatible with current assessment.

20 *The enhanced ACCT Case Review (refer to PSO 2700) and CAREMAP must make clear what alternatives to use of the Body Belt have first been considered, and explain what plans are in place to end its use. It is the responsibility of the Governor/Director to ensure this is completed.*

21 *The Duty Governor/Duty Director must nominate a Designated Manager who must be an operational grade of not less than Senior Officer rank or equivalent. The Designated Manager must assess the prisoner's continued location in a Body Belt at a frequency specified by the Duty Governor/Duty Director on Form OT012. These assessments must take place at least once every hour. The Designated Manager must also oversee the completion of Form OT012.*

22 *If the Governor in Charge/Director authorises the use of a Body Belt, Healthcare must be notified immediately and a doctor or registered nurse must attend.*

23 *The time that Healthcare was notified and the time that a doctor or registered nurse attended must both be recorded on Form OT012.*

24 *The doctor or registered nurse must assess the prisoner to determine if there are any apparent clinical reasons including disabilities to advise against the use of a Body Belt. This assessment should be made using the Initial Segregation Health Screen. The authorising Governor/Director must fully consider healthcare advice before deciding the most appropriate course of action.*

25 *At this stage or at any subsequent stage, the prisoner must be released from the Body Belt if a doctor or registered nurse considers that there are clinical reasons why the prisoner should not be restrained. The release from the Body Belt must be managed to meet the clinical and security needs of the situation. In an emergency, the Body Belt must be removed immediately. This must be recorded on Form OT012.*

26 *The Regional Manager Custodial Services (and Operational Director for Contracted Prisons) must be informed within 24 hours if any prisoner is placed in a Body Belt.*

27 *An IMB member must be notified and invited to attend as soon as possible and in any case within 24 hours of the prisoner being placed in a Body Belt.*

28 *The time that the IMB were notified and the name of the IMB Member must be recorded on Form OT012.*

29 *The IMB member must record his or her visit on Form OT012.*

### **8.1.5 Holding a Prisoner in a Body Belt**

#### **Hourly Assessments of Location, Observation and Communication, Managerial Visits**

30 *Every effort should be made to keep the time a prisoner is held in a Body Belt to a minimum, i.e. minutes rather than hours.*

31 *The Designated Manager must ensure that all observations and decisions regarding the prisoner are recorded on Form OT012. He or she must also attend every ACCT Case Review and 4 Hour and 24 Hour Case Review that takes place.*

32 *The Designated Manager must assess the prisoner's continued location in a Body Belt at the frequency recorded on Form OT012. This will be at least once an hour. He or she must talk to the prisoner and calmly de-escalate the situation to minimise the prisoner's time in a Body Belt. Advice must be sought from Healthcare where appropriate.*

- 33 *The Designated Manager must ensure that he or she hands over to an appropriate member of staff, designated by the Duty Governor/Duty Director, before going off duty. The handover must be recorded on Form OT012 and endorsed by the Duty Governor/Duty Director on his or her next visit.*
- 34 *A prisoner in a body belt must at no time be left alone. The member of staff must talk to the prisoner and calmly de-escalate the situation to minimise the prisoner's time in a Body Belt.*
- 35 *A prisoner restrained in a Body Belt must be provided with refreshments, particularly water (a straw may be required), regularly. A record of refreshments offered and taken must be made on Form OT012.*
- 36 *The Governor in Charge/Director must visit any prisoner held in a Body Belt at least twice in any 24-hour period.*
- 37 *A doctor or registered nurse must visit the prisoner at least twice in any 24-hour period. A note of each visit must be made in the prisoner's clinical record.*
- 38 **It is not necessary for a Review to be held in order for a prisoner to be removed from a Body Belt. A prisoner may be removed from a Body Belt at any time on the authority of an Operational Manager.**

#### **4-Hour Case Review**

- 39 *The prisoner must be reassessed at a Case Review within 4 hours of being placed in a Body Belt (or immediately prior to unlock the following morning if the prisoner has been placed in a Body Belt during the night) to decide whether he or she needs to remain there. The 4 Hour Case Review must be chaired by the Governor in charge/director as chair, and must include a doctor or registered nurse, the Designated Manager, the ACCT Case Manager/delegate (if the prisoner is on an open ACCT Plan or in the post-closure stage), and staff from Segregation or wherever the prisoner is located. Further reviews must take place at least every 4 hours thereafter for the remainder of that establishment's core working day where continued use of a Body Belt is necessary.*
- 40 *The Independent Monitoring Board must be informed about the 4 Hour Case Review and invited to attend as quickly as possible. If present, the IMB member must complete the relevant section of Form OT012.*
- 41 *Other staff, such as the prisoner's personal officer, psychologist or a member of the multi-faith Chaplaincy team, could also attend, if considered helpful.*
- 42 *The Governor in charge/Director will ensure completion of Form OT012. If a doctor or registered nurse considers that there are clinical reasons why the prisoner should not be restrained, the release from the Body Belt must be managed to meet the clinical and security needs of the situation. This must be recorded on Form OT012.*
- 43 *If the Case Review considers that the use of a Body Belt needs to exceed 24 hours, a recommendation must be sent to the Regional Manager for Custodial Services or DOM (Contracted Prisons) on Form OT010 along with OT015 location in body belt 24 hour case review. The Regional Manager for Custodial Services /DOM must give written authority on Form OT010 to allow the use of a Body Belt to exceed 24 hours.*
- 44 *If the prisoner remains in a Body Belt following the Case Review, the Review must set out the frequency at which the Designated Manager must assess the prisoner's continued location on a Body Belt. As a minimum there will be an hourly assessment by the Designated Manager.*

#### **Changing Role of the IMB Member**

- 45 *The Independent Monitoring Board member does not play a part in authorising the use of a Body Belt. However, he or she plays an important role in overseeing use of the Body Belt and the prisoner's welfare.*



- 46 Although their presence is not mandatory, an IMB member should aim to attend the review to oversee the decision-making process and satisfy him or herself that the use of a Body Belt is reasonable and consistent with PSO 1700. An IMB member should express any concerns over continued use of a Body Belt to the Duty Governor/Duty Director. If this fails to resolve the matter, the IMB member must refer to the procedures described in PSO 1700.

### **8.1.6 Removing a Prisoner from a Body Belt**

- 47 *Once the reasons for using a Body Belt no longer exist, the Duty Governor/Duty Director must be contacted as soon as possible. If the Duty Governor/Duty Director agrees, he or she must complete the relevant section of Form OT012, inform Healthcare and notify the IMB.*
- 48 It is not necessary for a Review to be held in order for a prisoner to be removed from a Body Belt.
- 49 *The Duty Governor/Duty Director must ensure that the prisoner is relocated to the appropriate accommodation following a period of time in a Body Belt. This is likely to be Segregation or Healthcare but may be another location. If a Review has recommended a particular location, then that recommendation must be followed. The prisoner's Cell Sharing Risk Assessment must be reviewed.*

### **8.1.7 Escorting a Prisoner in a Body Belt**

- 50 *A prisoner should only ever be escorted in a Body Belt in extreme circumstances if considered absolutely necessary. In such rare cases, the Prison Service must undertake the escort.*
- 51 *Calming and de-escalation techniques must be used whilst the escort is underway. If the Officer in charge of the escort considers that the reasons for using the Body Belt no longer exist, he or she must contact the Duty Governor/Duty Director. If the Duty Governor/Duty Director authorises the removal of the Body Belt, then normal cuffing procedures will be applied before the Body Belt is removed.*
- 52 *A doctor or registered nurse must assess a prisoner being held in a Body Belt before he or she is transferred. **A member of Healthcare staff must accompany any prisoner being transferred in a Body Belt.***
- 53 *At the receiving prison, a copy of Form OT012, and Form OT010 where appropriate, must be made, showing the handover of the prisoner, to return to the sending prison.*
- 54 Further details on the management of non-compliant and / or violent prisoners on transfer can be found in PSO 1810 (Maintaining Order in Prisons).
- 55 **Reporting** – A copy of the completed OTO12 must be placed in the segregation history sheet, and Clinical record (IMR).

## **8.2 Forms**

- 8.2.1 Form OT012 Authority For Location In Body Belt**
- 8.2.2 Form OT017 Location In Body Belt Occurrence Log**
- 8.2.3 Form OT016 Location In Body Belt 4 Hour Case Review**
- 8.2.4 Form OT015 Location In Body Belt 24 Hour Case Review**
- 8.2.5 Form OT010 Regional Manager Custodial Services/Operational Director Authority for continuing location in a Body Belt**
- 8.2.6 Form OT018 Location In Body Belt Visits (for subsequent 24 hour period)**

## **9. Cardboard Furniture**

### **Cardboard Furniture**

1. The use of Cardboard Furniture must be authorised by a competent Operational Manager /Assistant Director.
2. The use of Cardboard Furniture must be risk assessed as part of the overall management of the prisoner. A timescale for its planned removal must be prepared.
3. The use of Cardboard Furniture and the timescale for its planned removal must be reviewed by a competent Operational Manager /Assistant Director.
4. The use of Cardboard Furniture must not be routine, but must be risk assessed on each occasion.

## **10. Amendments To PSO**

PSI	Title	Date

## **11. Dirty Protests**

### **11.1 Definition of a dirty protest**

#### **Definition of a dirty protest**

A dirty protest is where a prisoner has chosen to either defecate or urinate in a cell or a room without using the facilities provided. In virtually all cases the walls, floor or ceiling are affected. Some prisoners may choose to cover their clothing and their body with faecal waste. Although these actions may be undertaken as a protest, they may also be as a result of mental health problems.

#### **Dirty Protest Policy**

All closed establishments must have in place a written policy for managing prisoners on dirty protest. Under the Human Rights Act 1998 it is necessary to have a justifiable and proportionate response to dealing with dirty protests.

Health & Safety at Work Act 1974 and COSHH Regulations 1999 are considered and incorporated into the Dirty Protest Policy.

Initial action to take on discovering a prisoner who is on a dirty protest ensures that relevant people are informed and that the prisoner is put into appropriate accommodation.

### **11.2 Initial action on discovering a prisoner who is on a dirty protest**

#### **Initial Action to Take on Discovering a Prisoner Who is on a Dirty Protest**

The dirty protest policy will state which staff are to be informed. This will include:

1. unit or wing manager



2. Governor or operational manager (Director/Duty Director in a contracted prison)
3. Doctor or registered nurse
4. Establishment security department - The details of the protest must be recorded on the Incident Reporting System.
5. The Independent Monitoring Board (IMB) must be informed within 24 hours of the commencement of the dirty protest. There is no legal requirement upon them to attend a prisoner on dirty protest.
6. ACCT case manager (if at risk of self-harm)

2. Every effort should be made to ascertain the reasons for the protest. Appropriate encouragement should be given to the prisoner to withdraw the threat or end the protest.

3. On the authority of the Governor or operational manager, a prisoner on dirty protest will be moved to designated accommodation in the segregation unit or other fit for purpose accommodation. Prisoners engaged in a dirty protest will normally be held under Rule 45/ YOI Rule 49 (Good Order Or Discipline) or an offence against discipline. This will include Young Persons on dirty protest.

4. Governors/Directors must nominate a cell for use in the event of a dirty protest. Care should be taken in deciding which cell should be used. The selection should be based on:

- location in the segregation unit
- ventilation
- access to toilet and bathing facilities
- preferably a sealed floor with well painted walls
- drinking water

Rubber or heavy duty plastic door curtains should be considered for use around doors where there is the danger of urine or faeces leaking. Consideration should also be given to the fitting of sealer bars to prevent leakage of urine from cells.

5. If the site of the protest was not in the segregation unit then the cell must be sealed until arrangements can be made for cleaning. All furniture in the cell should be removed, bagged and sealed and marked clearly as contaminated waste. The prisoners personal property must be the subject of an individual risk assessment and procedures followed as laid down in the section on prisoner's personal property.

An individual record must be kept of the progress of the dirty protest on a dirty protest log. The log will be used to record daily activities / visits. Examples of the activities that should be recorded on the Dirty Protest Log.

- Visits by the Governor/Director or other nominated manager, doctor or registered nurse, Chaplain, IMB, Legal Advisors. Personal officer or other appropriate person.
- When the prisoner leaves the segregation unit at any time for visits by family, friends, legal advisors etc.
- Details of discussions with the prisoner.
- Details of any demands made by the prisoner
- Any offers the prisoner makes to end the protest. Staff must give encouragement for the prisoner to end the protest and must formally record asking him/her to do so each day.
- Meals provided and taken.
- When an offer to bathe or shower is made by staff.
- When an offer to exercise is made by staff.

A copy of the log will be placed on the prisoners segregation history sheet and the original held securely within the segregation unit.

### **11.3 Mandatory visits that must be made**

The written policy will ensure that the prisoner is visited daily by:

1. An operational manager and
2. The Doctor/Registered nurse

A record of these visits will be made in the segregation unit log / occurrence book and the individual dirty protest log.

The doctor/nurse will assess the prisoner at each visit. It will not be necessary for the doctor/nurse to enter the cell every time, nor to undertake physical examinations: the prisoner's mental state can to an extent be assessed by observation and brief interviews through a hatch. If the doctor/nurse has any concerns about the prisoner's mental health, and/or if there is any record on the clinical record of previous mental health problems, the doctor will arrange for a specialist psychiatric assessment to be undertaken as soon as possible.

### **11.4 Dirty Protest Log**

Prisoners will be encouraged to end the protest and should be asked at least once a day to do so. A record of this and the prisoners reply should be noted on the dirty protest log.

### **Health & Safety of staff and others**

The policy on managing dirty protests must incorporate due regard to the health and safety of staff, other prisoners and anyone else who may come into contact with the protester.

### **11.5 Safe systems of work**

Safe systems of work will be in place for staff and visitors to follow when dealing with a prisoner who has embarked on a dirty protest.

#### **Safe Systems of Work**

Safe systems of work must be put into place for staff and visitors to follow when dealing with someone who has embarked on a dirty protest. See example of a Safe System of work .

The procedures should consider arrangements for:

1. Screening the area around the protest cell into dirty and clean zones
2. Access to shower facilities for staff
3. The provision and use of protective clothing and a dirty and clean zone to enable the safe removal and destruction of the clothing.
4. The collection and destruction of bio-hazardous waste, which must be bagged, securely sealed and marked as such. These bags should be stored in a safe place whilst awaiting removal. Specialist firms exist to manage the destruction of this waste.
5. Staff in the segregation unit should undertake continuous risk assessments to identify the health and safety issues and develop strategies to reduce risk to:
  - a. Staff, other prisoners and other persons who may come into contact with the prisoner.
  - b. Prisoners on protest

When the prisoner is visited in, or leaves the cell, protective clothing and equipment for staff (and where necessary other visitors) will be made available and the means to dispose of it safely will be provided.

**Protective Clothing and Equipment for Staff dealing with dirty protests.**

The protective clothing should comprise of:

- Disposable overalls capable of preventing contamination by particles or splashes
- Disposable gloves
- Plastic overshoes (similar to those used in operating theatres)
- Active charcoal face mask
- Face shield / Goggles

A risk assessment must be done in order to determine a safe procedure for unlocking a prisoner. "Back wall" unlocking arrangements should be considered when meals are provided.

Staff and visitors who have been in close proximity to the prisoner should be given the opportunity to shower.

**Health & Safety of the prisoner**

The policy will incorporate due regard to the health and safety of the prisoner on protest and the potential hazard that their property represents.

**11.6 Prisoner's personal property**

The policy will set out those items that a prisoner on dirty protest will be permitted to keep in their cell.

**11.7 Property to be provided for the prisoner whilst on protest**

**Items that a prisoner on dirty protest will be permitted to keep in cell.**

The Dirty Protest policy document must set out those items that a prisoner will normally be allowed to keep in their cell.

The minimum allowance should be:

- Mattress & bedding
- Table and chair (these should only be removed subject to a risk assessment)
- Clothing, including footwear
- Reading and writing materials
- Basic toiletries such as soap, shampoo, towel, toothbrush and toothpaste and (subject to a risk assessment) shaving equipment

The policy document must state any other items that may be permitted and whose authority must be sought before the item is issued to the prisoner. Consideration should be given to PSO 2700 'removal of items in possession for those at risk'

The prisoner will be offered materials to clean the cell they are in on a daily basis. A record of this should be kept in the dirty protest log.

A prisoner on dirty protest will be informed both orally and in writing that any property within a cell where there has been a dirty protest will be destroyed if the Governor has reason to believe that it has been contaminated and cannot be properly cleaned by the prisoner.

A risk assessment must be made in respect of each item in the cell to determine the level of contamination. The following options should be considered:

- Destruction as bio-hazardous waste.
- Decontamination by way of sterilisation.
- Placed in sealed bags and stored in reception.

Legal correspondence can only be destroyed when there is obvious contamination.

Prisoners will be given the opportunity to clean their property e.g. watches, jewellery, rings etc., and if as a result of a risk assessment further cleaning is required, the prisoner will meet the cost.

Photographs will be taken of the property that is to be destroyed. The photographs should be stored in an envelope with the prisoner's property card and the prisoner notified that this action has taken place.

## **11.8 Regime**

Regime for the prisoner

The policy for a prisoner on a dirty protest must include reference to the regime that will be offered to the prisoner (activities & meals) and their ability to communicate with outside parties. The regime available should help to encourage the prisoner to end the dirty protest.

### **11.8.1 Activities**

#### **Routine activities**

The dirty protest policy document should state that routine activities such as showers, exercise, using pin phones and visits will be permitted for prisoners who agree to shower and wear clean clothing. Other activities may be permitted at the Governor's/Directors discretion.

Prisoners must have the opportunity to have a shower at least 3 times per week. Where there would not be an adverse impact on the regime and the other prisoners in the unit a shower will be offered on a daily basis.

When a prisoner has showered prior to an activity, staff must ascertain whether the prisoner intends to give up the protest before he/she is returned to their cell.

In cases where a legal advisor wishes to see his client and where a prisoner refuses to shower, the legal advisor may visit the prisoner in the segregation unit. The legal advisor must be advised of the conditions in which the visit will take place and provided with full protective clothing and other facilities to clean up in the same way as a member of staff.

Prisoners can make oral applications which must be recorded by a member of staff.

### **11.8.2 Meals**

Disposable plates, cups and cutlery will be used. All disposable eating equipment and refused/left over food and drink must be disposed of securely (e.g. in sealable waste bags).

Prisoners will be offered the opportunity to wash their hands prior to receiving their food.

### **11.8.3 Communications**

#### **Letters**

Royal Mail have recently changed their policy and whilst previously they accepted mail in suitable packaging this is no longer the case as they consider that outgoing mail from a prisoner on dirty protest is contaminated and under their definition is classed as "filth". Unless a prisoner can obtain the services of an alternative delivery agency using suitable packaging they will not be permitted to send out mail. The prisoner should be notified of this at the commencement of the dirty protest and recorded on the dirty protest log. In a situation where a prisoner wishes to send correspondence to his/her legal team under Rule 39 then the letter must be sealed in suitable packaging and stored for a limited period only.

The legal advisors should be contacted and advised that there is a letter and of the condition it has been stored under. It should be explained that it is not possible to post the letter and the legal advisors will need to make arrangements for its collection should they wish to receive it. A reasonable time limit for collection of the correspondence should be set. If the solicitor has not responded within the time limit to make arrangements for collection then the package should be destroyed at the commencement of a dirty protest a prisoner should be advised of this procedure.

### **11.9 Procedure for vacating the cell when the protest comes to an end**

#### **Ending The Dirty Protest**

The procedure for vacating the cell when a protest comes to an end must ensure that staff are not put at risk of contamination and that the prisoner is able to shower and be provided with a clean environment and clothes.

An example safe procedure is shown below:

- a. The prisoner will wear overshoes
- b. Staff in protective clothing will unlock the prisoner and conduct a rubdown search and escort the prisoner to the shower.
- c. At the shower area the prisoners clothing and overshoes will be bagged and sealed for disposal.
- d. Clean clothes will be provided to wear once the prisoner has had a shower
- e. The prisoner will be escorted to a clean cell by staff in normal uniform. The Governor or operational manager will review the prisoner's continual location in the segregation unit once the dirty protest has come to an end.
- f. If the prisoner gives up the protest after refusing a meal and requires food, every effort should be made to provide the prisoner with a meal / sandwich.
- g. After showering the prisoner must be examined by a doctor or registered nurse as soon as possible (and in any event, within 24 hours).

## **11.10 Cleaning arrangements at the end of the protest**

- h. Once a dirty protest has ended / prisoner has moved to a new cell, arrangements must be made to have the affected cell properly cleaned by a competent person/s that have been appropriately trained in the specialist techniques required.
- i. On completion of a dirty protest consideration needs to be given as to whether the prisoner should be placed on report for endangering the health and safety or damaging prison property. Each case must be treated on its merits as in some cases immediately resorting to the use of disciplinary procedures may be inappropriate and counter productive. Where it has been decided to place the prisoner on report, PSO 2000 should be consulted in determining an appropriate charge and reporting officers are advised to frame the charge according to the local situation (and in consultation with the adjudication liaison officer)
- j. [Click here to access the Health & Safety Guidance Note \(01 / 2004\) concerning Cleaning Cells after a Dirty Protest.](#)

## **11.11 Example forms / letters**

### **12.11.1 Dirty protest log**



Dirty Protest Log

HMP : \_\_\_\_\_

Name of prisoner: \_\_\_\_\_

Prison Number: \_\_\_\_\_

Date dirty protest commenced: \_\_\_\_/\_\_\_\_/\_\_\_\_

Segregation officers on duty today:

\_\_\_\_\_  
\_\_\_\_\_

<b>Time</b>	<b>Occurrence</b>	<b>Signature of officer (&amp; print name)</b>


**11.11.2 Safe system of work**

**EXAMPLE SAFE SYSTEM OF WORK**

Safe System Of Work: Number 5
Prison: HM Prison Lowmoor
<b>Department: Segregation Unit</b>
<b>Task/Process: Dirty Protest Personal Hygiene Procedures</b>
Particular Hazards: Danger of Infection
Special Equipment, Precautions or PPE needed
<p>STEPS TO FOLLOW:</p> <p><b><u>Aim:</u></b> To promote a high standard of hygiene and prevent the transmission of infection.</p> <p>Organisms can be transmitted from an infected prisoner source to a previously uninfected person.</p> <p>Transmission can occur through the air or by contact with contaminated equipment or clothing</p> <p>The most common vehicles of transmission are the hands of staff</p> <p>Hands can easily be contaminated by contact with a prisoner, particularly if no special precautions are taken</p> <p>Contaminating organisms may die in a short time or survive to become part of the skin fauna</p> <p>Although hands cannot be sterilised, the majority of transient fauna are easily removed through thorough washing</p> <p>Unless an appropriate hand washing technique is used it is likely that some part of the hand will be missed.</p> <p>Chemicals used inappropriately may harm the skin and directions should be carefully followed.</p> <p>Careful drying removes remaining organisms and protects the skin from soreness</p>
Type of washing required: Social hand washing performed to remove transient organisms
<b>Procedure:</b>

Wet hands and apply soap Rub palm to palm Rub the back of both hands Rub palm to palm with the fingers interlaced Rub the backs of the fingers ( interlocked) Rub all parts of both hands Rub both palms with finger tips Rinse hands under running water and dry on a clean towel/hot air dryer
Emergency Contact Point:
Personnel Contact Point:

**11.11.3 Written warning about prisoner's personal property**

**EXAMPLE WARNING LETTER TO SEND TO PRISONER ON DIRTY PROTEST**



The Governor/Director (delete as required)  
HM Prison Lowmoor

To:  
Name: \_\_\_\_\_

Number \_\_\_\_\_

**Dirty Protest**

At the end of your protest the cell will be sealed with all the contents.

We will make a full Risk Assessment of each item in your cell to decide whether there has been any contamination. If a risk is identified then a decision will be made as to how the risk will be reduced. The overall purpose will be to protect the health, safety and welfare of all concerned.

The options are:

- Destruction as bio-hazardous waste.
- Decontamination by sterilisation.
- Sealed in bags and issued to you on release.

Some or all of the items in your cell may have to be destroyed to avoid contamination including any legal correspondence where there is obvious contamination. A photographic record of items destroyed will be placed with your property card. If it is decided that cleaning is all that is necessary, you will be required to meet the costs of specialist cleaning.

**Governor/Director (delete as required)**

**12. Frequently Asked Questions**



1. Do prisoners need to be fitted for adjudication by a doctor?

No, prisoners do not need to be 'fitted' for adjudication. An Initial Segregation Health Screen must be completed in cases where a prisoner is located in segregation pending adjudication (rule 53) or when a prisoner awaits an adjudication for a period exceeding 4 hours, The health screen can be completed by either a Doctor or a registered nurse.

2. Do prisoners undergoing a punishment of cellular confinement need to be seen by a doctor daily?

No, the new procedures require a member of the healthcare team to visit those in segregation on a daily basis. A doctor will see prisoners in segregation 'as often as their individual health needs dictate' (which may be assessed as daily) but must visit at least once every 3 days.

3. A prisoner is on GOoD and during the period of the 14 day sign up he is placed on report and awarded 2 days CC. The punishment ends but he is still within the 14 day sign up. Do we have to re-sign the prisoner with a new initial sign up or does the original 14 day sign up cover until the next Review Board?

The answer to your question is that you would not have to re-sign a prisoner under the 'initial procedures' so long as the original 14 days you authorised for GOoD had not run out. However, a sensible policy would be to consider bringing the next 14 day review forward, given that the prisoner's circumstances had changed significantly.

4. Can someone who is acting up / temporarily promoted to a competent manager role (manager F) authorise segregation of prisoners?

Yes – the member of staff will carry out the full range of duties of the post in the higher grade. In acting a member of staff up / temporarily promoting them to an operational competent manager role, the authorising person (at least one grade above the grade to which the person is to be temporarily promoted) will need to satisfy him/herself that the person is capable of doing the job and that they have the necessary competencies to act at the higher grade. The same applies to appropriate management grades in contracted prisons.

5. How do I complete the forms electronically / print them off?

The forms need to be saved within WORD / EXCEL in order to allow you to print them off and/or complete them on-line. Within the Segregation website, open the form you want to print off / then go to 'FILE' (top left) and click on 'SAVE AS' / save the form as a document (eg. Special Accommodation in WORD or EXCEL / exit the website / open WORD or EXCEL / then open the document (Special Accommodation) / this should allow you to complete on line & print off as required.

6. We hold vulnerable prisoners on a particular landing within a wing. They are held there under conditions which mean that they do not come in contact with prisoners on normal location. Do they need to have the segregation paperwork (Initial Segregation Health Screen / Review Boards etc.) completed on them?

No. Prisoners are not subject to the procedures in PSO 1700 if they have normal social contact with others within their particular group and are able to participate in normal activities within that group such as work, exercise, education, PE, association etc.

7. We average 14 adjudications a day and on some days this figure can be as high as 20. Consequently, for operational reasons, we routinely locate prisoners in the Segregation Unit prior to adjudications starting at 0800 hours. Do we need to conduct an Initial Segregation Health Screen and the subsequent assessments by operational managers in each case?

No, you do not need to complete the Initial Segregation Health Screen on prisoners who are purely located in the segregation unit in the morning, whilst awaiting their adjudication to start later on that

morning. However, prisoners should not be required to wait in segregation from 8am if it is not expected that the adjudication will actually be carried out until the afternoon (ie. on the days when you have 20 adjudications listed). Prisoners should be located in the Segregation Unit in such cases, after lunch. If a prisoner in segregation awaits an adjudication for longer than 4 hours then the Health screen must be completed.

8. At the moment, some prisoners are put into the Segregation Unit by Principal Officers, following incidents. They are not competent managers – does this practice need to cease?

The authority to keep a prisoner in segregation has always rested with a Competent manager (manager F or above/ the old governor 5 or above). The old PSO 1700 did not specify who can 'put' a prisoner into segregation following an incident.

Orderly Officers (at PO or SO level) should be asked to make a reasonable and defensible decision about where to locate a prisoner in the immediate aftermath of an incident. Sometimes segregation may be appropriate, in other circumstances the prisoner may go to their cell or back to their original activity.

For prisoners who are located in the segregation unit, it is then for the duty governor (manager F or above) to make a decision (once the Initial Segregation Health Screen has been completed), as to the continuing location of the prisoner. If the incident is over and the prisoner is calm he/she would normally be returned to their wing or unit.

- 9 How often must a prisoner on cellular confinement be observed?

A prisoner on CC must be observed on an hourly basis. Additionally all other prisoners located in the segregation unit should be observed at a frequency decided upon by the person authorising segregation, which will ideally be hourly except in cases where it is known the prisoner is comfortable with his/her surroundings (unless on an open ACCT plan and this states more frequently). Additionally efforts should be made by segregation staff to engage the prisoner in conversation when practical to do so and enter this on the segregation history sheet.

10. Why has PSO 1700 been issued as a website and why is there no hard copy of the PSO?

There are advantages & disadvantages with the new instruction being an intranet based order and it being issued in the form of a website.

The obvious disadvantage, as many of you will have already found out, is that it is not easy to print off. However, the reasons why it has been published as a website are as follows:

1. PSMB (Prison Service Management Board) have encouraged the use of the new IT system and are keen to see the development of how HQ issue policy
2. The instruction can be kept up to date very easily. There will be no need for PSI's to be written to change elements of the PSO. The website will simply be updated as necessary and the 'What's New' box on the home page will highlight the changes made.
3. Easy to search – the search facility will allow staff to find a particular section of the PSO easily. The search allows you to search on more than 1 criterion.
4. On line forms – the on line forms can be printed off for completion & signing by hand or completed using IT and then printed off for signing. This will enhance the professional appearance of paperwork (and readability).

### **13. General Information**

The following list is included to assist staff to quickly locate a particular section of PSO1700 that is not already included on the Home page. However, to gain a comprehensive understanding of PSO 1700 the entire document should still be read.

The title of each section listed (and hyperlinked) is followed by the relevant section where it is located and fuller information can be gleaned.

## 13.1 Alternatives to Segregation

### 13.1.1 Calm Down Rooms – Process of Segregation

#### Calm Down Rooms

Women and Young Peoples Group are currently developing the policy for calm down rooms. Below is a 'snapshot' of how a calm down room operates and once the policy has been completed PSO1700 will be updated accordingly.

Calm down rooms are used predominately in the Young Persons estate but may be used throughout the entire estate if it is appropriate at local level.

A calm down room is a cell/room where prisoners can go on a voluntary basis in order to help them control their behaviour and to de-escalate a situation in order to avoid C&R/segregation. A calm down room differs from segregation and special accommodation in as much as it will be a furnished cell in a less institutional manner (soft chairs, curtains etc) and will operate an open door policy. A member of staff will be available at all times to observe and support the prisoner/young person.

When a calm down room is used in this manner the process of segregation does not apply and documentation under initial segregation is not required. **However, should a calm down room be used to locate a violent/refractory prisoner and the door is locked and/or furnishings removed then this is classed as segregation and the process of PSO1700 must be applied for segregation and/or special accommodation.**

After use of the calm down room an entry onto the wing/unit observation book and prisoners history sheet is required.

### 13.1.2 De-escalation – Management of Segregation Units (selection and training of staff)

#### *De-Escalation and Interpersonal/Communication Skills*

##### **Outcome**

Staff employ communication and de-escalation skills to manage aggression and to prevent violence from escalating as far as possible.

This section includes:

- Managing Aggression
- Communication
- Non-verbal communication
- Defusing Strategies
- De-escalation Techniques
- Calm Down Rooms

##### **Managing Aggression**

Definition of Violence for the Prison Service:

'Any incident in which a person is abused, threatened, or assaulted. This includes an explicit or implicit challenge to their safety, well-being or health. The resulting harm may be physical, emotional or psychological.'

The effective handling of aggressive prisoners is one of the most demanding aspects of working in an establishment. It is an area where good interaction and communication skills are required.

The majority of situations, where there is a potential for violence, can be handled through good communication. However there will be issues surrounding non English speaking prisoners. Staff will need to take this into consideration as well as taking account of different cultural interpretations and use of body language.

Aggression can be defined as any behaviour that is perceived by the victim as being deliberately harmful and damaging either psychologically or physically.

Prison Service policy is that staff should try and prevent the aggression escalating into actual physical violence.

Signs of aggression:

- Standing tall
- Red faced
- Raised voice
- Rapid breathing
- Direct prolonged eye contact
- Exaggerated gestures

Prisoners may become aggressive for a number of reasons, including:

- Frustration
- Unfairness
- Humiliation
- Immaturity
- Excitement
- Learned Behaviour (it gets results)
- Reputation
- Means to an end
- Decoy

The following signs may indicate aggression:

- Any major change in behaviour that varies from what is normal for the prisoner
- Pale or flushed face
- Raising voice
- Focusing/narrowing of the gaze
- Tensing of muscles
- Increased agitation and disturbance in behaviour (e.g. pacing)

Staff faced with aggressive prisoners should assess the risk of violence by considering the following:

- Is the prisoner facing a high level of stress? (e.g. a recent bereavement, a pending court date)
- Does the prisoner seem to be drunk or on drugs?
- Does the prisoner have a history of violence?
- Does the prisoner have a history of psychiatric illness?

- Has the prisoner verbally abused staff in the past?
- Has the prisoner threatened staff with violence in the past?

## **Communication**

Communication is a two-way process that relates to verbal interaction (listening, speaking and hearing), non-verbal interaction (interpretation and observational skills - looking and seeing).

To minimise communication problems staff should use language appropriate to the prisoner (in his/her language if possible and using an interpreter where necessary), take time to communicate, check you have been understood, encourage and give feedback, and make sure the conversation takes place at an appropriate time and place (where possible). Evidence suggests that up to 50% of young prisoners have language and communication difficulties (taken from Speech and Language Therapy for Young People in Prison Project). While difficulties such as stammering or speech that is difficult to understand are reasonably obvious, difficulty putting information into words and difficulty in understanding information are less obvious. If a prisoner appears to be exhibiting negative or challenging behaviour consideration should be given to such possibilities.

Some of the common inhibitions to effective communication are:

- Noise
- Language
- Perception and prejudice
- Intrusion of personal space
- Hearing impairment
- ADHD or other attention/listening problems
- Lack of understanding of what is being said
- Difficulty in conveying information

We cannot necessarily avoid or overcome all these barriers but we need to find ways of minimising them.

### **Noise:**

Noise is a major distraction when trying to communicate. It's hard to hold a discussion against a noisy background.

### **Language:**

Officers need to express themselves in direct and explicit a manner as possible and avoid emotive language (for example – avoid 'power' words such) use short phrases and commonly used vocabulary. Prison 'jargon' and technical terms should be avoided. Always check back what has been understood as this may not always be the same as what was actually said.

### **Perception and Prejudice:**

Everybody has a unique background and history with influences and experiences that form our way of looking at the world. It is important to recognise our prejudices for what they are and to work round the prejudices of others. We have to maintain a professional attitude by not allowing our own perceptions to get in the way of our duties and responsibilities towards others, particularly in promoting equal opportunities, or to let our prejudices influence the way we communicate.

### **Intrusion of personal space:**

Avoid standing too close to the person

## Non-Verbal Communication

Staff should be aware of non-verbal messages that show how a prisoner is feeling or how he/she may respond. They should apply the techniques of non verbal communication they are taught in training to help defuse potentially violent situations.

### Defusing Strategies

Before anything else happens staff should seek to defuse the situation. A prisoner who is out of control will be under the influence of the adrenal cocktail. Staff should aim to do nothing to escalate their state of mind whilst being prepared to defend themselves if necessary.

You should seek to:

- Appear confident
- Display calmness
- Create some space
- Speak slowly, gently and clearly
- Lower your voice
- Avoid staring
- Avoid arguing and confrontation
- Show you are listening
- Calm the prisoner before trying to solve the problem

You should adopt a non-threatening body posture:

- Use a calm, open posture (sitting or standing)
- Reduce direct eye contact (as it may be taken as a confrontation)
- Allow the prisoner adequate personal space
- Keep both hands visible
- Avoid sudden movements that may startle or be perceived as an attack
- Avoid audiences – as an audience may escalate the situation

**NEVER THREATEN:** Once you have made a threat or given an ultimatum you have ceased all negotiations and put yourself in a potential win/lose situation.

### De-escalation Techniques

Explain your purpose or intention and check back what the person has understood.

- Give clear, brief, assertive instructions, negotiate options and avoid threats.
- Move towards a 'safer place', i.e. avoid being trapped in a corner.

Encourage a reasoning (for their behaviour)

- Encourage reasoning by the use of open questions and enquire about the reason for the aggression.
- Questions about the 'facts' rather than the feelings can assist in de-escalating (e.g. what has caused you to feel angry?).
- Show concern through non-verbal and verbal responses.
- Listen carefully and show empathy, acknowledge any grievances, concerns or frustrations. Don't patronise their concerns.
- Encourage reasoning by the use of open questions and enquire about the reason for the aggression.

Ensure that your non-verbal communication is non-threatening

- Consider which de-escalation techniques are appropriate for the situation.
- Pay attention to non-verbal clues (i.e. eye contact). Allow greater body space than normal.
- Be aware of your own non-verbal behaviour, such as body posture and eye contact.
- Appear calm, self controlled and confident without being dismissive or over-bearing.

If the de-escalation is successfully achieved, then the issues that caused the initial outburst will still need to be resolved otherwise there is a likelihood that the aggression and violence will re-emerge.

### **13.1.3 Guide to Promoting Positive Behaviour – Process of Segregation**

#### **Guidance For Promoting Positive Behaviour In Segregation Units**

Prisoners should be actively encouraged or supported to change their behaviour and such attempts should be recorded in the prisoner's segregation history sheet. Special consideration should be given to the management of those prisoners at risk of self-harm (PSO 2700 chapter 9).

There are some establishments that have successfully introduced a system to encourage positive behaviour during time spent in segregation and other establishments may wish to develop a similar system which will suit their own needs. The system allows a prisoner to start with a clean slate each day and works on the basis where points are issued depending on the all-round behaviour and co-operation of the prisoner. Once earned the points can be spent on rewards that may not normally be permitted or on privileges that have been removed. Points can be accumulated in order to secure an early return to normal location by having days remitted. (this is consistent with PSO2000 Para 8.4).

Types of privileges would be items such as publications, radio CD's, televisions, in cell games, extra letters etc. Where situations allow 'association' periods enable prisoners to mix socially. Rewards should be for a set period of time such as 24hrs, lunchtimes, overnight etc. All rewards should be ones that can readily be removed where the behaviour is no longer consistent with required standards.

When establishing such a system it is necessary to develop a tariff which is available to prisoners in order that they can see what can be achieved, the tariff must be attainable and realistic in order to encourage participation.

Where such systems are adopted the rates of success (or otherwise) should be fed into the Segregation Monitoring and Review Group.

### **13.1.4 Phased Return to Normal Location – Process of Segregation**

#### **Phased return of segregated prisoners to normal location**

Consideration should be given to implementing a phased return to normal location for prisoners who have spent a long period of time in segregation (eg. for 1 month or more). Prisoners who have spent a long period of time separated from the main prison population may find the transition back onto a normal busy, noisy wing difficult or overwhelming.

The Review Board should consider phasing the return to normal location over a period of time (up to a maximum of 7 days). This proposal should be discussed and agreed with the prisoner concerned during the Segregation Review Board. (If the prisoner is not in agreement then he / she will have to be placed directly back onto normal location.)

Where a prisoner is on an open ACCT plan (inc post-closure), the CAREMAP will set out actions to assist the prisoners return to normal location.

During this 'in between time' the prisoner will be located in the segregation unit but will spend periods doing activities with other prisoners from his/her wing.

These activities could include:

1. attending an education class
2. attending the workshop
3. going on exercise with prisoners from the wing
4. spending an evening on wing association
5. going to the gym / PE classes
6. attending the library
7. meeting his/her personal officer for a talk about the wing routine
8. being introduced to Listeners on the wing
9. attending a chaplaincy activity

Such activities will help to ease the transition from segregation to normal location.

Whilst a prisoner is on a 'phased return' to normal location he/she will not be classified as being held in segregation under Prison Rule 45 (YOI 49). The prisoner will be permitted those items in his/her cell that they would be permitted on normal location (for example, TV, radio/CD player, personal possessions).

### **13.1.5 Transfer to Another Establishment – Process of Segregation**

### **13.2 Lowering risk in Segregation**

#### **13.2.1 Guidance on Dealing with Medical Recommendation Against Segregation – Process of Segregation**

#### **Guidance on Dealing With a Healthcare Recommendation Against Segregation.**

#### Healthcare Action

A medical recommendation that a prisoner /Young Person should not be held in segregation may occur:

- After the Initial Segregation Health Screen has been completed
  - At any point during a prisoners' period of continuing segregation

If healthcare staff have any concerns about a particular prisoner, guidance must be sought from other healthcare colleagues or the Head of Healthcare. It might be necessary to have a multi-disciplinary case conference to consider all the issues.

If a doctor or registered nurse agrees that they do not think it suitable to keep a prisoner in segregation any longer then:

1. The duty governor / in-charge governor (director in a private prison) must be informed of the recommendation to remove a prisoner from segregation and be given a clear explanation as to why removal is being recommended.
2. A note should be made of the recommendation (and the time & reasons) on the prisoners clinical record.



## Prison Management Action

The Duty Governor/Duty Director must consider the advice received from Healthcare. If healthcare indicates that there are clinical reasons to advise against segregation and the Duty Governor/Duty Director considers that there are operational reasons that mean that location in Segregation is necessary, then the Duty Governor/Duty Director must ensure that a multi-disciplinary Case Review (OT022) takes place immediately, (or before unlock if the advice is received during the night state). The Competent Operational Manager chairing the Case Review has final authority on the continued use of Segregation.

Where a case review is held a record must be made and a copy:

1. Placed on the prisoners clinical record
2. Placed in the prisoners segregation history sheet
3. Placed in the ACCT document if on open ACCT plan

### **13.2.2 Promoting and Safeguarding the Mental Health of Prisoners Held in Segregation – Process of Segregation**

### **13.2.3 Self-Inflicted Deaths in Custody – Promoting and Safeguarding the Mental Health of Prisoners in Segregation & Home page**

#### **Self Inflicted Deaths in Segregation Units**

In the period 2001 - 2006 inclusive, there were a total of 59 self-inflicted deaths initiated in **segregation settings\*** (of which 10 died in outside hospitals). This accounts for 12% of self inflicted deaths within prison. Of the 59 deaths a total of 32% were on an open ACCT/F2052SH.

Prisoners undergoing clinical management of substance misuse are particularly vulnerable to suicide and self-harm early on in custody (particularly women prisoners). Therefore, cellular confinement or a similar award which would result in reduced time out of cell should be avoided during the first month of sentence, but principally during the first week. As with prisoners on an ACCT plan, exceptional cases are unavoidable and in such circumstances must be carefully managed supported by a very detailed management plan.

The following extracts are taken from the Prisons and Probation Ombudsman report on themes into deaths in segregation units.

“Those prisoners who are the most ‘difficult’ are often the most vulnerable and it is acknowledged that very damaged people can also be very damaging to others. Staff are undoubtedly faced with difficult decisions as to where to hold some prisoners and frequently care for prisoners in segregation units when all other options have been exhausted. However, there have been cases where prisoners have been held in segregation units and the justifications for doing so have not been convincing. There have been cases where alternative options to segregation have not been adequately explored”.

“Giving vulnerable prisoners something to occupy their time is likely to be a crucial part of safeguarding the welfare of those in segregation”

\* Includes those segregated on normal location not just segregation units

## **13.3 Monitoring**

### **13.3.1 Segregation Monitoring and Review – Monitoring and Reviewing (Home Page)**

### **13.3.2 Segregation Review Boards – Process of Segregation**

### **13.3.3 Segregation History Sheet – Management of Segregation Units (management and support visits)**

## **13.4 Miscellaneous**

13.4.1 Guidance on Providing the Opportunity for a Young Person to Make Representations - Purpose of Segregation

13.4.2 Policy to Adopt for Prisoners who Refuse to Leave the Segregation Unit – Process of Segregation

13.4.3 Points to Consider Before Granting Rule 45 – Purpose of Segregation

13.4.4 Prison Rules for Segregation – Purpose of Segregation

13.4.5 Regime for Prisoners – Process of Segregation

13.4.6 Use of overt CCTV – Process of Segregation

## 14. Forms

OT014 Initial Segregation Safety Screen

OT022 Medical Recommendations Against Segregation Or Special Accommodation - Initial Case Review

OT024 Segregation under Rule 45/YOI Rule 49 – Authority for segregation

OT025 Segregation under Rule 45/YOI Rule 49 – Authority for continued segregation

OT026 Segregation under Rule 45/YOI Rule 49 – Reason for Initial segregation

OT027 Segregation under Rule 45/YOI Rule 49 – Segregation Privileges and Behavioural targets

OT028 Pre-Transfer Information from Segregation

### 14.1 Segregation under Rule 49 - Young People

OT011 Authority For Initial Segregation Rule 49

OT023 Segregation Under YOI Rule 49 Reason For Initial Segregation

### 14.2 Special Accommodation

OT013 Authority For Location In Special Accommodation

OT020 Location In Special Accommodation Occurrence Log (Supplementary)

OT021 Location In Special Accommodation Visits for subsequent 24 hour period (Supplementary)

OT019 Location In Special Accommodation 24 Hour Case Review

### 14.3 Body Belts

OT012 Authority For Location In Body Belt

OT017 Location In Body Belt Occurrence Log

OT016 Location In Body Belt 4 Hour Case Review

OT015 Location In Body Belt 24 Hour Case Review

OT010 Area Manager/ROM Authority For Continuing Location In Body Belt

OT018 Location In Body Belt Visits (for subsequent 24 hour period)