



1 September 2020

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Tēnā koe s9(2)(a)

Thank you for your email of 28 May 2020, requesting a copy of the operational review into lockdown hours at Auckland Region Women's Corrections Facility. Your request has been considered under the Official Information Act 1982 (OIA). I apologise for the delay in responding to you, and would like to thank you for your patience.

In accordance with section 69 of the Corrections Act 2004, every person in prison is afforded a number of minimum entitlements. These entitlements include the provision of at least one hour of physical exercise on a daily basis. In practice most are normally unlocked for much longer periods, at multiple times a day for a number of reasons.

Staff must assess and manage a range of operational requirements on a daily basis relating to people in prison who can be unlocked together, including whether they are remand or sentenced, whether they are segregated, their security classification and other dynamic issues such as gang tensions and the association of co-offenders.

Since early March, Corrections has recognised the importance of doing our part to reduce the spread of COVID-19 in both prisons and our wider communities. Corrections has taken a deliberately cautious approach. We are also absolutely committed to ensuring that we're operating safely, lawfully and humanely.

Like many New Zealanders, people in prison were impacted by the temporary measures to eliminate COVID-19 between March and June of this year. Throughout the temporary measures, safety has always been Corrections' top priority.

The requirement for all New Zealanders to keep our bubbles small and practice physical distancing throughout Alert Levels 4, 3 and 2 also existed in prisons, with restrictions in place around the number of people in prison that can associate together at any one time. There are a limited number of secure spaces at each prison that prisoners can safely use for recreation, and with smaller groups using them and enhanced cleaning measures taking place, these spaces were being used more frequently, impacting their availability.

At Alert Level 2, face-to-face visits with people in prison resumed for friends and family, as did aspects of prison operations that had been temporarily suspended, such as guided and temporary release (for example, reintegration activities outside prison), temporary removal, face-to-face rehabilitation programmes and non-essential prison industries.

Following the transition to Alert Level 1 in June, most restrictions affecting prison operations ended, but were reintroduced following the changes to Alert Levels in August when our sites in the Auckland region moved to Alert Level 3 and the rest moved to Alert Level 2. At all Alert Levels we continue to ensure the health, safety and wellbeing of our staff and the people we manage is our first priority.

Safety measures continue to be in place for all visitors to all sites, including contact tracing, health screening, increased hand hygiene measures, the use of thermal imaging cameras on entry, and personal protective equipment (PPE) use. Corrections has been progressively increasing the total number of visitors able to attend each visit session.

You requested:

- *whether that review into lockdown hours at ARWCF has been completed as I wanted to request it, either as a matter of course if you can release it – or as an OIA if required.*

Please find attached as 'Appendix One' an operational review into ARWCF which incorporated the review of minimum entitlements. Corrections has balanced your interest in this information against and the withholding provisions of the OIA. We have determined that some information must be withheld in accordance with the following sections of the OIA

- 9(2)(a), to protect the privacy of natural persons.
- 9(2)(h), to maintain legal professional privilege; and

In accordance with section 9(1) of the OIA we have also considered whether there are countervailing public interest considerations favouring the release of this information. We do not believe such considerations are present in this case.

You will note that there are several recommendations made in the review. Corrections is committed to the continuous improvement of our practices and ultimately, operating in a way that will achieve better outcomes for those in our custody. As such, each recommendation is connected to a solution or a plan to achieve each necessary improvement. The implementation of the solutions and plans is led by the Prison Director who has now been appointed permanently. They will be supported in this by their management team which also includes a number of managers recently confirmed permanently into their roles.

There is an ongoing focus for the leadership group on enhancing capability and creating a culture of shared learning. Site culture has improved with an emphasis on staff welfare and wellbeing. Reflective practice has been introduced into safer custody panel meetings, and a lessons learnt culture and feedback model amongst the leadership group is being encouraged.

Practice lab sessions are being undertaken, delivered by a lead advisor for leadership, with the intention of developing and strengthening leadership skills for middle and senior leaders on site. To date these have focused on leadership through COVID-19 and preparation for development opportunities. Future sessions include skills for effective development conversations, performance management and values led leadership. The staff taking part are from a range of disciplines, helping to further strengthen relationships on site.

Work is ongoing to embed the principles of the Hōkai Rangi strategy through briefings and team meetings, and the adoption of practices to support humanising and healing outcomes for the women. Positive progress has been made with regard to strengthening relationships with Iwi in relation to the cultural support they offer to the site. The leadership team are also being supported to develop their own cultural competency.

The Health Centre Manager and nurse practitioner have also been appointed, with work ongoing to strengthen the professional relationship between health and custodial staff. The new Health Centre Manager has set up new systems to encourage a better process around appointments. The introduction of telehealth appointments in the near future will reduce the number of women needing to leave the prison to access health services, easing operational pressures.

The site has implemented a new way of recording and monitoring assurance that prisoners are receiving their minimum entitlement of unlock time, overseen by the Deputy Prison Director. Residential Managers review the information captured daily and ensure the data aligns with the daily compliance log books held in all units. If a woman declines her entitlement, this is recorded via the staff member's on body camera and notes in her electronic file. A second check is carried out each month by the Regional Operational Performance Team.

With regard to the complaints process, a recent focus has seen the majority of outstanding complaints on site resolved, with only six remaining outstanding. There is an expectation that Residential Managers take ownership of this for their units and ensure they are checking daily that all complaints have been loaded and receipted. The site has scheduled training for the regional principal corrections officer group. Each prison site in the region has nominated site leads who complete the refresher training and support their sites. Regional refresher training to site leads on 15 October.

In addition to the operational review at ARWCF, Corrections undertook a broader review into the lockdown hours at all prisons over the period between 24 April 2020 and 30 April 2020. This review was summarised in briefing B4024 entitled *Minimum Entitlements – one hour of daily exercise*.

As you might be aware, the Office of the Prime Minister issued a directive that all advice received by Ministers related to COVID-19 be proactively released. A number of documents have been released to date, at www.uniteforrecovery.govt.nz/updates-and-resources/legislation-and-key-documents/proactive-release/.

The above-mentioned document B4024 *Minimum Entitlements - one hour of physical exercise*, falls within the scope of this directive, and therefore has been proactively released.

I trust the information provided is of assistance. Should you have any concerns with this response, I would encourage you to raise these with Corrections. Alternatively, you are advised of your right to also raise any concerns with the Office of the Ombudsman. Contact details are: Office of the Ombudsman, PO Box 10152, Wellington 6143.

Ngā mihi nui



Rachel Leota
National Commissioner

Operational Review

Date:	25 May 2020
Prepared By:	S9(2)(a) [REDACTED], Practice Manager Custodial, Northern Region
Review Commissioner:	S9(2)(a) [REDACTED], Regional Director Practice Delivery
Subject:	Focus on various areas of custodial practice across Auckland Region Women's Correctional Facility (ARWCF) over a four-month period (January-April 2020)

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EXECUTIVE SUMMARY

This operational review outlines the management of minimum entitlements and wider issues relating to custodial practice and site culture at Auckland Region Women's Corrections Facility (ARWCF).

The writer travelled to ARWCF and spoke with managers, custodial and support staff, and people in our care. Procedures and processes were also perused, as were logs and diaries from the site for the period January-April 2020. The writer found instances of both positive and negative interaction at the site, as well as areas of concern around site culture.

Key areas for improvement have been identified, particularly relating to team work, mutual cooperation between teams (i.e Custodial and Health), and site culture.

PURPOSE

1. The purpose of the review is to investigate custodial practice and wider issues at ARWCF following a request from an investigative journalist from Radio New Zealand for information in relation to an article he is writing relating to lockup hours.
2. Further, a broader focus on current custodial practice across specific areas of interest in light of the COVID-19 situation and how this has affected current practice on site. This review will also consider how current custodial practice on site contributes to the overall culture of the site and is intended for the purpose of learning to prevent recurrence of negative issues.

SCOPE OF REVIEW

3. To review specific areas of custodial practice with a focus on minimum entitlements; the complaints process (PC.01); access to primary and mental health care; site culture; and an overview of unit daily regimes and whether this reinforces the principles of Hōkai Rangī.

METHODOLOGY / REVIEW PROCESS

4. The review was carried out by interviewing key staff across all services at the site, including Custodial (at all levels), Health, Case Management, and Psychology. Spreadsheets, databases and information from each area was also reviewed and considered as part of the review.

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FINDINGS

People

5. Custodial

Custodial staff at ARWCF were largely compliant with policy and procedures, with no significant gaps noted in the processes reviewed. In relation to practice on site during the Covid-19 period, it was clear efforts had been made to keep people informed and safe at the site. This effort was most visible at point of entry and common areas of the site where people would normally gather. In these areas, appropriate signage was in place. Staff were appropriately attired, and addressed the writer professionally. The greater concern was around site culture, and specifically the relationship between Custodial and Health, which is explained later in the review.

6. Health

The Health Unit has had an acting Health Centre Manager throughout this year and has also been under-staffed, with no Team Leader in place¹. The demand on Health staff and medical appointments at the site is disproportionately large in comparison to other sites in the Women's estate (i.e. alongside Arohata and Christchurch Women's Prisons (CWP)).

ARWCF has approximately three times the prison population of Arohata and CWP, but a disparity in the ratio of staff to prisoners:

Arohata: 1 nurse to 12 prisoners

CWP: 1 nurse to 11 prisoners

ARWCF: 1 nurse to 28 prisoners.

When the range of security classifications at ARWCF are also factored in, the team have the added demands of a maximum security prisoner group to logistically move safely and the demand as seen in the volume of health requests submitted. As Health are reliant on the Custodial team to assist them in meeting Health demand, the disparity then becomes more marked given the need to schedule custodial staff to assist, alongside other demands placed on Custodial staff's work.

When compared to other prisons in the region there is no such disparity in the prisoner / nurse ratio, but the demand is significantly higher at ARWCF.

Auckland Prison: 1 nurse to 44 prisoners

NRCF: 1 nurse to 39 prisoners

Another indicator of the demand on Health, and therefore Custodial staff as a result, is in responding to Health requests. The graph below indicates ARWCF has had the highest volume of health requests in the region for the first three months of 2020. Anecdotally, this trend has been in place historically. Having to process 5x the number of Health requests as Auckland Prison for instance, must be an additional burden on staff.

¹ Regional Health report ARWCF Health team staffing is generally sitting at 55% of FTE

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HEALTH REQUEST FORMS (HRF)

	JAN			FEB			MAR		
	HRF	MUSTER	%	HRF	MUSTER	%	HRF	MUSTER	%
AUCKLAND	128	540	24%	93	522	18%	77	513	15%
ARWCF	593	427	139%	540	418	129%	576	417	138%
MECF	515	1022	50%	507	1092	46%	518	1048	49%
NRCF	283	607	47%	294	600	49%	347	583	60%

Another impact on the workforce at ARWCF is the number of external medical transfers; both scheduled and emergency / urgent transfers. Below is a comparison between MECF and ARWCF for this year to date:

	JAN	FEB	MAR	APR	MAY	TOTAL
ARWCF	14	12	9	3	7	45
MECF	5	4	1	4	1	15

7. Case Management

The Principal Case Managers (PCMs) report they formerly had a fractious relationship with Custodial staff at the site but that this has improved greatly since they attended iLead alongside the Custodial PCO group. PCOs are now getting in touch with them and asking for assistance and advice, whereas previously there was little in the way of contact from them. The improved relationship at the 'Principal' level has in turn made it easier for case managers to effectively carry out their role in the units.

PCMs considered there were still issues at the 'manager' level and that they felt this level was not always reporting issues 'up' to the Prison Director, who they described as "so approachable, with an open door policy".

They indicated Hokai Rangi was gaining momentum at the site and had become a regular item at morning staff briefings, but that Covid-19 Level 4 had significantly impacted on progress, as the focus shifted to the need to respond to the requirements of the Covid-19 lock-down.

8. Psychology

The Manager Psychological Services hasn't seen the changes in cooperation with Custodial to the same extent as Case Management, and noted that during the Covid-19 period Case Management, like Psychology and others who work external to the site, have struggled in getting information from the site when requests are made. She considered that inconsistent practice and a problem with communication to be two of the biggest inhibitors in working together with the Custodial team, especially for those stakeholders who are not based on site.

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Tools and Resources

9. Use of additional Phone and AVL during COVID-19

The site reports that Cisco phones were placed in all Units on the Low Side, Remand, Programmes Assessment, and Motivation/Management Units, and that custodial unit staff schedule all calls.

Additionally, the "prisoner contact" team who prepare PAC reports, as well as lawyers, are referred to the Unit PCOs to add into their daily schedule of calls.

AVL is prioritised for court appearances, lawyer meetings, cultural interviews, psychology, and Mason Clinic interviews.

At ARWCF the AVL facilities were not used for the wahine to contact families while in Level 3 & 4. It appears the focus was on court appearances. Residential units were provided with additional Cisco phones and \$5 phone cards were also provided weekly to the wahine. Note that at other sites AVL facilities were used for prisoners to contact family during the Covid-19 lockdown period.

Additional Cisco phones were placed in residential units on or about 3 April. The Intel Unit report that phone usage at ARWCF for the period 11 March (two weeks prior to Level 4 lock down) until 12 May, by which time had eased to Level 2, showed a peak of 8132 calls in the week 18-24 March (the week prior to Level 4) with call usage between 6700-7350 during Level 3/4. The call usage total in early March was less than at any time since, which is a likely indicator that wahine were able to access phones during the lock down period without issue.

Policies and Procedures

10. Minimum Entitlements

The Prison Operations Manual (POM) states that:

Every prisoner (other than a prisoner who is engaged in outdoor work) may, on a daily basis, take at least one hour of physical exercise. The exercise may be taken by the prisoner in the open air if the weather permits. This entitlement should be denied if:

- a. the prisoner has been temporarily released, removed, or is attending court, and
- b. a PCO or other authorised delegate, has determined that it is impracticable to provide this entitlement during the time the prisoner is in the prison, and
- c. the prisoner has not been denied this entitlement on the two previous consecutive days.

Staff spoken to in residential units indicated there were often difficulties with prisoners being allowed their minimum entitlements regarding exercise, and this was often due to unplanned staff absences resulting in short staffing, and the difficulty staff face with the different categories of prisoners who cant be mixed.

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The regional Operational Performance team conducted a review of unlock regimes in two of the high security units at the end of April to determine whether prisoners were receiving the minimum entitlements of one hour of physical exercise per day². The review indicated it is likely prisoners either received or were offered their one hour's exercise, but that they did not then accurately record the occasions when prisoners didn't want to exercise.

In May 2020 the regional Operational Performance team conducted a review of Minimum Entitlements across the region. The Prison Operations Manual states that "every prisoner may, on a daily basis, take at least one hour of physical exercise. The exercise may be taken by the prisoner in the open air if the weather permits".

The team conducted a review of unlock hours and physical exercise and reported that compliance and associated documentation met legal responsibilities at ARWCF; however there were gaps in the documentation that needed to be addressed.

Each unit had their own system for recording unlock and lock times, prisoner names were not always captured and times were not always recorded. Each unit also had different ways to record when a prisoner refused to be unlocked, or wanted to be locked early.

The Operational Performance team recommended they add a check to monthly Second Line of Defence (SLOD) reporting to ensure that these entitlements continue to be delivered and recorded. They would also review unit records and report on compliance and any gaps in the records. The team also recommended that as each unit had a number of different unlock regimes, to implement a recording sheet that records unlock and lock times (or yard times) for each prisoner to allow for accurate reporting. The team provided a template to achieve this.

9(2)(h)
[Redacted text block]

It is possible some of the wahine who have made complaints about minimum entitlements did not fully appreciate what the requirement was for the site to follow.

11. Complaints

²² The units recently started to file-note on IOMS refusals and requests to be locked early

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The Prison Operations Manual states that prison sites should deal with complaints at the lowest level; for instance with the assistance of custodial staff in the residential unit. The process is for staff to enter a file note on IOMS once this has been achieved. Failing this, the process requires staff to provide the prisoner with a PC.01 form to complete, and to also provide the prisoner with a copy of the form.

The process is outlined in a flow chart within POM which all staff should be conversant with (PC.02). A booklet outlining the complaints process is also available for prisoners, and includes how to address any problem with the way the complaint has been dealt with by staff (i.e. discuss concerns with a Corrections officer; phone the Complaints Response desk; or contact the Corrections Inspector).

A scan of complaints at ARWCF was taken for the period January-May 2020 to identify how many related to Minimum Entitlements. The data indicates that 22 complaints were made during this period concerning Minimum Entitlements, with half of those from one person in our care, S9(2)(a) [REDACTED]. The vast majority related to insufficient periods of unlock and outside exercise. Of note, time delays in approving phone numbers and prison units being locked following incidents by individual prisoners (portrayed as 'collective punishment' were other related complaints of significance.

Concern was expressed by other services indicating the Complaints system is not being applied effectively at ARWCF, and that some residential units are not applying the nationally approved process correctly. It seems complaints made by prisoners concerning custodial issues are often being dealt with differently than those for instance concerning Health. Residential Unit Leaders (SCO/PCO) may be telling prisoners they will deal with the issue without committing it to the PC.01 process, while its possible prisoners are also being encouraged to use the process when it applies to Health concerns, rather than dealing with these issues at the lowest level. It is likely this extends to at times informing prisoners to contact the HDC regarding Health issues.

The Operational Performance Team's SLOD report for April 2020 indicated regression in the Complaints process when compared with the previous review in January 2020. For instance, only 36 of the 69 complaints sampled contained sufficient evidence to determine that the prisoner had been interviewed within three working days as required. The Team recommended that PCOs clearly note when the prisoner was interviewed and that PCOs complete this section within three working days of the complaint being lodged.

The SLOD report also indicated that *"(custodial) staff appear to be using non-compliance as a reason not to address the complaints and close them without resolving them. This could lead to more complaints and an escalation of the complaints to the Inspector or ombudsman"*. The site's Custodial Systems Manager considered that staff lack knowledge of the Complaints process and considered Practice discussions at unit team level would go some way to address this knowledge gap.

Environment

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12. Link between Custodial Practice and Culture

ARWCF may over the years have developed a culture where many staff take a 'punitive' approach to their work, rather than a 'humanising' approach. For example:

- Addressing wahine by their surnames rather than first names
- Applying use of force rather than first attempting to resolve issues with more appropriate tactical communications (i.e. TENR)
- Custodial and Health teams not always working together or in the best interest of the wahine
- Informing prisoners to formalize Health complaints rather than working with staff to deal with them at the lowest level
- A culture where by prisoners are encouraged to make health-related complaints to the Health & Disabilities Commission (HDC) rather than provide Health Services staff the opportunity to address them first
- Poor leadership in the Custodial and Health groups at PCO / manager and team leader level which has hindered trust and team work being established at lower levels

The Lead Advisor – Leadership Development for Northern Region stated when contacted by the writer that iLead was aimed at the principal level (PCO and PCM) at the request of senior leaders as part of ensuring capability was lifted within the next group of potential senior leaders on site. At the time the iLead programme was held at ARWCF the Health Team Leader (HTL) was acting Health Centre Manager (HCM), with the HTL position vacant. All Tier 5 managers, including the acting HCM, were able to register on the iLead programme in Wellington.

In terms of future focus the Leadership Development team are continuing to focus on the leadership pathway with the Principals (i.e. PCO / PCM /PI) on site as an ongoing commitment. This includes Practice Labs, which is a group session around a common development opportunity. 1:1 Development sessions will be another focus as part of this pathway. The philosophy behind Practice Labs is to create an opportunity for Leaders to come together in smaller groups to share experiences and learn from one another.

13. Access to Primary and Mental Health Services

Discussions with Custodial and Health staff indicate a very poor relationship between them at ARWCF. This has been a long-standing issue and was a recurring theme of the review. It is likely one of the main reasons for the poor relationship is how each entity view each other. Custodial is by far the largest group of staff on site, with Health the second largest, and with each group heavily reliant on the other to operate effectively. Issues identified during the review concerning the Custodial /Health interface included:

- Health consider Custodial staff tell prisoners to put in PC.O1 (complaint) forms for their health concerns. This extends to complaints made by prisoners to the Health Disabilities Commission (HDC) where it is perceived custodial staff tell prisoners to make formal complaints!

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- Health and Custodial rarely attend respective team meetings resulting in them working in silos and independent of each other³
- There is a large demand for Health services on site (see graph below), which requires custodial support in order for Health meet. The demand is considerably higher than all other prisons in the region, though there is not a corresponding higher ratio of Health and Custodial staff to respond to the higher demand
- Custodial 'movement' staff (runners) are not always available to meet this demand due to being required to replace unplanned staff absences, or because of competing operational requirements, which are prioritized by the Security (Duty) PCOs, usually without input from Health staff
- Some PCOs view Health in a poor light due to requests from Health for prisoner to attend external medical appointments, which requires considerable effort for Security PCO to cover as they require multiple custodial staff
- The Clinical Manager Mental Health indicated his team enjoyed a good relationship with the Custodial teams in each residential unit. He was satisfied a lot of progress had been made in recent months by the new Prison Director to foster a working relationship. He appreciated there were time constraints at times due to the unavailability of custodial staff to assist with appointments, but tried to ensure his team worked with the custody team to overcome these.

CONCLUSION

14. ARWCF is struggling under the constraints of needing to meet the requirements of different unlock regimes due to the various categories of prisoners who cannot mix together. On top of this ARWCF has a large demand for Health services, but doesn't seem to have the Health staff to match, or Custodial staff to get prisoners to and from Health appointments. It is likely this has led to a strained relationship between Health and Custodial, which has meant a lack of trust and goodwill exists between them.
15. Other relationships on site, such as between Case Management, ITL, and Mental Health with Custodial, has improved in recent months, largely through the work of the Prison Director and aided by the opportunities iLead gave the teams to work together.
16. The site has had many staff on secondment in recent years, often in key positions such as Tier 5 custodial manager, Health Centre Manager, Prison Director, and Deputy Prison Director. With the Prison Director recently being appointed, and other manager roles soon to be appointed, there is a great opportunity this year to re-set standards at ARWCF. The humanising aspect of Hokai Rangī, which is also due to be rolled-out on site will further assist the re-

³ HCM attends the monthly Safer Custody Panel meeting and weekly Site Management meetings

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set and go some way to changing the 'punitive' culture which currently exists in pockets at ARWCF.

RECOMMENDATIONS

- 17. The site needs to develop a culture which is open and honest about past mistakes and differences. This way everyone can learn from them and gain improvements. This can be achieved by creating a culture of continuous improvement; valuing practice observations; feedback; and reflective practice.
- 18. The site should re-energise the work that was started prior to the disruption caused by Covid-19 in embedding Hokai Rangi and build on the good things that are already happening at ARWCF to achieve better outcomes for the wahine.
- 19. Reviewing the Health/Custodial interface and processes, as well as staff numbers on site along with the demand for Health Services, will help to identify ways the Health and Custodial teams can operate better together in future.
- 20. By buying in to the Practice Lab sessions the Learning & Development team are fostering, the site will be well placed to develop leadership skills at the middle and senior management levels where it is currently lacking. This is best done in multi-disciplinary team format, as shown by the improved relationships between PCOs and PCMs following their joint attendance at iLead.
- 21. The review indicated it is likely prisoners either received or were offered their one hour's exercise, but that they did not then accurately record the occasions when prisoners didn't want to exercise. The site should address this issue through Practice reminders to staff.
- 22. The Complaints process on site needs addressing, especially with the PCO group. The site should address this issue through a Practice session for that group and also reminders to all staff.

a)	Note the contents of this review	Yes / No
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SIGN OFF

Approved By: (Review Commissioner)	S9(2)(a) _____,	RDPD	25/5/20
	(Name)	(Position)	(Date)

ⁱ Prisoners have access to two HDC phone numbers via the Global 0800 phone system

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