

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP SWALESIDE

TIMETABLE	DATE	STATUS OF THIS RETURN
Unannounced inspection	29 March – 8 April 2016	
Report published	26 July 2016	
Action Plan Submitted	11 October 2016	Attached

ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP SWALESIDE

POSITION AS AT: OCTOBER 2016

1. Rec. no	2 Recommendation	3. Accepted/ Rejected	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	Main recommendations to the governor				
5.1	The violence reduction strategy should be reviewed. It should: include input from relevant agencies; be informed by accurate data, security intelligence, prompt and robust investigations and prisoners' views about safety; and draw existing initiatives together in a coherent way. (S36)	Accepted	The violence reduction policy and strategy are being revised to include recent initiatives to improve the management of violence at HMP Swaleside. The review will include input from relevant agencies, including Mental Health In-Reach Team, psychology department, Enhanced Support Services, Custodial Violence Management Model Team (CVMM) and Probation, Offender Management Unit. A process has been developed which manages information received from security, observation books, incident reporting system (IRS), safer custody rounds and other sources. This information is graded and appropriate action taken depending on the severity/risk posed. This is intended to ensure that resource is directed to managing the greatest risks and create a manageable workload for Band 4/5 staff in relation to violence reduction investigations. IRS entries are audited weekly to make sure that violent incidents are investigated and are cross referenced with the security department to ensure they have been recorded on Mercury (VDT Record Metric). Prisoner consultative safer custody meetings enable feedback directly from the prisoner group which will inform the violence reduction strategy.	Head of Safer Custody	31 December 2016
5.2	Segregated prisoners should be held in decent, respectful conditions and provided with a reliable daily regime to meet their basic needs; managers should ensure proper planning takes place to support reintegration into a mainstream wing. (S37)	Accepted	The general standard of cleanliness of the unit has improved; there is a deep cleaning programme in place which takes place every month by the industrial cleaning team. The daily regime to meet basic needs is now being met following the re-profiling of staffing levels. There is also work to introduce an enhanced regime and individual care plan to provide a constructive approach to managing individuals in the segregation unit which supports re-integration back into	Head of Safer Custody	31 December 2016

			mainstream accommodation within the establishment.		
5.3	Designated staff should cover health care and ensure the environment is safe and secure for all prisoners. (S38)	Accepted	Profiled staff are now detailed to work in the healthcare department and this has been deemed a non-flexible task. Daily monitoring takes place.	Head of Residence - Healthcare	Completed
5.4	Prisoners should have a good amount of predictable time out of their cells and should be moved around the prison promptly to maximise the working day and prisoners' access to other constructive activities. (S39)	Accepted	A new and revised core day with a supporting staffing profile will be introduced and will allow the lifting of regime restrictions. In addition, work is underway to provide activities conducive to a long term adult population.	Deputy Governor & Head of Reducing Re-offending	31 March 2017
5.5	Prisoners should have regular contact with an offender supervisor and an up-to-date OASys document to help them address their offending behaviour and ensure their progression is monitored effectively. (S40)	Accepted	Due to resourcing issues, regular contact with offender supervisors is not being facilitated at present. However, this will be possible and actioned under the prison's new profiles. There is no requirement for an annual Offender Assessment System (OASys) review; offenders will only be reviewed following a significant change or risk event. This has been communicated to both staff and offenders. In line with anticipated resource increases, HMP Swaleside will seek to review all OASys in line with HMIP's expectations.	Head of Offender Management Unit (OMU)	Completed
	Recommendation To the National Offender Management Service				
	Reintegration planning				
5.6	Prisoners who are not being released to Kent should be transferred for local discharge. (4.27)	Accepted Subject to Resources	<p>The National Offender Management Service (NOMS) remain committed to, wherever possible, releasing prisoners from a resettlement prison (which may also be an open prison, rather than necessarily a local prison) allocated to their 'home' Community Rehabilitation Company. Progressive transfers of prisoners is, however, subject to space in the appropriate part of the prison estate becoming available. The speed of transfers reflects this constraint. Consequently there may be occasions where a prisoner starts their resettlement journey in a non-resettlement establishment. Population Management Unit at headquarters does however endeavour to book transport for prisoner transfers in a timely fashion once the appropriate spaces are available.</p> <p>Although the vast majority of offenders are to be released from a resettlement prison, there will still be times when HMP Swaleside will discharge an offender. Although the prison is not</p>	NOMS Prison Estate Transformation Programme	Completed and ongoing

			a designated resettlement prison, this will not interfere with an offender's right to access resettlement services. The community resettlement company in the prisoner's 'home' contract area is contractually obliged to provide appropriate resettlement services.		
	Recommendations To the governor				
	Courts, escort and transfers				
5.7	Prisoners should not be routinely handcuffed on and off escort vehicles without an individual risk assessment. (1.2)	Accepted	<p>Prisoner Escort and Custody Services (PECS) contract staff must comply with the local security strategy of the prison. Where there are specific risks associated with the movement of a prisoner from a vehicle to reception escort staff must liaise with the prison staff in order to agree the level of restraints for this.</p> <p>A new and revised process will be introduced by the prion to meet this recommendation.</p>	Head of Security / PECS	31 October 2016
	Early days in custody				
5.8	New arrivals should only be subjected to a strip-search when justified by a risk assessment. (1.8, repeated recommendation 1.15)	Rejected	There are circumstances in which prisoners are required to be routinely full-searched as a matter of routine, as set out in Prison Service Order (PSI) 07/2016, <i>Searching of the Person</i> – this includes full-searching of prisoners on initial entry to prisons. All prisons must comply with the PSI's minimum requirements. Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. NOMS has a duty of care to prevent and deter illicit items from entering establishments which could be used by a prisoner to harm themselves or others.	NOMS Security Policy Unit / Head of Security	
5.9	First night and induction arrangements should ensure prisoners are held in decent conditions, given the basics items required for their first few days, kept safe and provided with relevant information about life at the prison. (1.9)	Accepted	The strategy for both first night and induction will be reviewed, with decency and safety underpinning the changes. There will be a requirement for regular quality inspections by senior leads. Peer support workers will work alongside other providers to deliver a quality service.	Head of Residence	31 December 2016
	Self-harm and suicide				
5.10	All prisoners at risk of self-harming should receive consistently good care and serious near fatal incidents should be adequately investigated so lessons about	Accepted	Assessment, care in custody and teamwork (ACCT) reviews are now managed to ensure they are completed with a multi-disciplinary team, promoting an improved standard of care. These are completed by a roving multi-disciplinary team each morning, ensuring consistently good care. Complex case reviews will be held after any serious or near fatal incident to	Head of Safer Custody	31 December 2016

	how support could be improved can be learned. (1.25)		assess the support given and identify any lessons to be learned.		
5.11	Intelligence should be properly analysed and appropriate security objectives set every month and communicated to all staff. (1.35)	Accepted	A new approach has now been implemented to analyse intelligence data and extra resources secured to carry out this task. The monthly security meeting is now subject to a pre-meeting which produces the Tactical Intelligence Report. The security meeting has now become a tasking meeting with objectives set and prioritised. The Agency Intelligence Model has been previewed recently at HMP Swaleside and will be introduced in due course.	Head of Security	31 December 2016
5.12	Prisoners should only have their visits restricted for incidents directly related to visits; they should also receive information on what steps they should take to have the restrictions lifted. (1.36)	Partially Accepted	<p>PSI 15/2011, <i>Management of Security at Visits</i>, provides that closed visits may be imposed in the absence of specific visits-related activity.</p> <p>Closed visits may be imposed as an administrative measure where necessary in accordance with Prison Rule 34 (1) and (3), i.e. for reasons of securing good order and discipline or for the prevention of crime or in the interests of any persons. They should be applied where prisoners are proved or reasonably suspected of involvement in smuggling prohibited items through visits, or are considered to pose a reasonable risk of involvement, or when the application of closed visits is otherwise necessary for the grounds specified in the Prison Rules. In considering the imposition of closed visits, establishments should be able to demonstrate that in deciding to apply closed visits they: (a) have taken into account all the individual circumstances of the case; (b) have acted proportionately; and, (c) have kept the requirement for the closed visit under review.</p> <p>All relevant information, including means of appeal will be made readily available to those on closed visit restrictions.</p>	<p>NOMS Security Policy Unit</p> <p>Head of Security</p>	31 October 2016
	Incentives and earned privileges				
5.13	The IEP scheme should encourage good behaviour, set behavioural targets when necessary, and provide adequate safeguards for prisoners being downgraded to and managed on the basic level of the scheme. (1.41)	Accepted	<p>The incentives and earned privileges (IEP) scheme at HMP Swaleside has been reviewed and is now being used as a more effective tool in managing prisoners within the residential setting. The targets set are to encourage good behaviour and are reviewed by the wing custodial manager at the scheduled IEP case meeting.</p> <p>The system has an avenue of appeal which will be directed to the relevant head of residence. All evidence will be considered</p>	Head of Residence	31 December 2016

			<p>and a written response provided to the prisoner and wing manager.</p> <p>This process has been in operation for a number of months and has resulted in a significant downward trend shown in the violence diagnostic tool data and also a drop in the number of daily adjudications compared to this period a year previously.</p> <p>The local IEP policy will be reviewed to make sure it is fit for purpose and reflects the changes made to improve the process.</p>		
	Discipline				
5.14	A regular adjudication standardisation meeting should be implemented. (1.45)	Accepted	An adjudication standardisation meeting will be held quarterly. This forum will be attended by key stakeholders, including prisoners.	Head of Safer Custody	31 December 2016
5.15	All force should be proportionate and used only as a last resort. Managerial oversight of the process should be sufficient to ensure this is the case. (1.51)	Accepted	A review will take place of the current process. A use of force (UoF) co-ordinator has been appointed who monitors compliance with supporting documentation. Additionally, a UoF committee will be established to further improve performance.	Head of Safer Custody	31 December 2016
	Substance misuse				
5.16	The SDTP should be organised to support men effectively and the prison should ensure the discipline staff group understands and supports the ethos of the work being done. (1.61)	Accepted	The location for the substance dependence treatment programme will be examined to enable an environment that is conducive to treatment and recovery. Regular staff briefings will take place to promote a better understanding and awareness of substance misuse.	Head of Residence (Healthcare Lead)	31 March 2017
	Residential units				
5.17	Prisoners should be provided with decent and respectful living conditions. (2.7)	Accepted	<p>A programme of wing refurbishment has commenced on C wing. The wing is currently decanted and the refurbishment has commenced. This will involve:</p> <ul style="list-style-type: none"> • Painting all cells • Painting all generic areas • Showers fully refurbished • Self-cooks fully re-fitted • New CVMM day room for cognitive behaviour therapy classes • New in-reach day room for mental health assistance • New cardio theatre • New curtains for every cell 	Heads of Residence	<p>C Wing completion: 31 October 2016</p> <p>All other refurbishment will be subject to a rolling 12-18 month programme</p> <p>Capital/Major Maintenance bids submitted</p>

			<ul style="list-style-type: none"> • New bedding and towels for every prisoner (per cell) • Re-launched Control of Substances Hazardous to Health processes • New regime plan <p>In addition new cleaning equipment (including heavy duty machinery for larger areas) has been procured. This includes industrial steam cleaning machines to assist with improving cleanliness and hygiene.</p> <p>Following on from the refurbishment of C wing a continuation programme will be adopted. Subject to population pressure, it is envisaged that all the old style wings will receive a similar standard of refurbishment.</p> <p>Capital and major maintenance bids have been submitted to replace all the self-cook facilities and showers and install CCTV.</p> <p>A new and revised Governor/senior lead inspection process will be introduced to monitor progress and compliance.</p>		Inspection process: 31 October 2016
5.18	Stocks of prison-issue bed linen, towels and clothing in the residential stores should be increased to meet the population's needs. (2.8)	Accepted	<p><u>Bed linen and towels:</u> A new set of bed linen and towels have been purchased for every cell and will be rolled out on a wing by wing basis. The existing bed linen and towels will be collected, laundered and marked with the Swaleside / wing identifier and returned to the central stores. The establishment will then have three sets of linen which will provide the capability to provide weekly kit change by having one set in issue; one set in the stores and one set in the laundry process.</p> <p><u>Clothing:</u> Each wing now has a defined and allocated budget to order what clothes they need on a monthly basis. This system is monitored by the heads of residence from a financial perspective to ensure whatever is needed has been provided.</p>	Heads of Residence	30 November 2016
5.19	Management oversight of the applications process should be introduced to monitor the quality and timeliness of responses. (2.9)	Accepted	A new system will be implemented to enable management oversight. This will in the first instance be led by wing managers, with oversight by senior leads. Progress and compliance will be a regular agenda item for the prisoner consultative meeting.	Heads of Residence	31 December 2016
	Staff-prisoner relationships				
5.20	Prisoners should have regular meaningful contact with a personal officer or member of	Accepted	The personal officer scheme will be reviewed and a new system introduced. This will include consistency and continuity of staffing. There will also be a focus to ensure profiled periods for	Heads of Residence	31 March 2017

	staff who should know enough about prisoners' circumstances to provide assistance if required, and to support work to reduce their risks and encourage progression. (2.12)		staff to complete this important work. Training will be given to key workers. A compliance and monitoring process will support the revision. Further improvements to the "Community Hub" (which is led by staff and prisoners) will be made to provide information and act as a conduit for prisoner/ staff communications to encourage progression.		
	Equality and diversity				
5.21	Senior managers should prioritise equality and diversity work to ensure the needs of those with protected characteristics are addressed. (2.18)	Accepted	Improving equality has been identified as a top priority. All senior management team members have been assigned as a protected characteristic lead. Additionally, a prisoner representative has been assigned to assist. A dedicated supervisory officer has been appointed to the equalities role.	Head of Safer Custody/ Equalities	31 December 2016
5.22	All minority groups should be systematically identified, supported and consulted, to ensure their needs are assessed and where possible met; their negative perceptions should be understood and unequal treatment addressed. (2.26)	Accepted	The equalities lead is working to identify and promote minority groups. The outcome of the HMIP survey will be fully examined to assist with improving negative perceptions. There is ongoing work to expand an area which is currently used as the community hub; this will become the equalities hub for the prison and will allow prisoners to have access to a wide range of information and the opportunity to discuss issues with staff and representatives from the prisoner populations. Protected characteristic forums will be held in this area.	Head of Safer Custody/ Equalities	31 March 2017
5.23	Prisoner carers should be adequately trained for their role; oversight and support should be developed to ensure adequate safeguarding systems are in place. (2.27)	Accepted	All prisoner carers will receive appropriate training, supervision and support. All existing safeguarding procedures will be reviewed.	Head of Residence/ Healthcare Lead	31 December 2016
	Faith and religious activity				
5.24	All prisoners should be able to attend corporate worship regularly and on time. (2.32)	Accepted	A new and revised core day will be introduced. There will be a close focus upon timeliness of attendance at all activities, including faith.	Deputy Governor / Head of Chaplaincy	31 March 2017
	Complaints				
5.25	The prison should deal with complaints about staff more rigorously. (2.38)	Accepted	All complaints about staff are referred to the Deputy Governor for direction on whether an investigation is needed, and if so, the type of investigation and who should lead. A monthly quality assurance process will be introduced to review the subject of complaint and quality. This will include 100% check on complaints about staff.	Head of Corporate Services/Deputy Governor	31 October 2016
	Legal rights				
5.26	Provision to support prisoners in exercising their legal rights	Accepted	A review will be conducted of the existing provision. The outcome of the review will be examined and, working with	Head of OMU	31 December 2016

	should be improved. (2.40)		partners, improvements will be introduced.		
	Health services				
5.27	Sufficient discipline staff should be trained in the use of automated external defibrillators. (2.49, repeated recommendation 2.67)	Accepted	The current risk assessment will be revised. Additional training will be identified with an annual refresher to ensure continuity of agreed coverage. The risk assessment will be reviewed on a quarterly basis.	Head of Business Assurance	30 November 2016
5.28	Did not attend rates and waiting numbers and times should be driven down, and be subject to constant scrutiny by the partnership board. (2.58)	Accepted	All aspects of did not attend (DNA) and waiting times will be the subject of an agenda for a newly created operational healthcare meeting. This will occur monthly and for Governance purposes will feed in to the partnership board. A much closer daily focus will be adopted to minimise DNAs.	Head of Residence/ Healthcare Lead / Partnership Board	31 March 2017 (to allow a period of bedding in and to feed into the Partnership Board meeting)
5.29	Escort arrangements should be adequate and effective to meet the health care needs of the prison population. (2.59, repeated recommendation 2.74)	Accepted	A review will be conducted to examine the effectiveness of the current profiled staffing arrangements. The outcome of this review will be shared with NHS commissioners, providers and NOMS. Should there be a requirement for additional staff, a benchmark adjustment notice will be submitted for approval. Progress will be monitored at the newly created operational healthcare meeting. A cancellation form has been developed to inform Governors of the risk of the decision making process. Healthcare staff will continue to consider the clinical urgency of each external appointment to ensure rapid access to urgent referrals. Additional services have been commissioned to reduce the number of external escorts required; these include urologist, geriatrician, endocrinologist and diabetic specialist.	Head of Residence/ Healthcare Lead / Partnership Board	31 March 2017
5.30	The in-possession policy should be reviewed and followed to ensure that the type and quantity of medicine is suitable for patient treatment in a secure environment; the partnership board should regularly scrutinise in-possession prescribing. (2.66)	Accepted	The in-possession policy will be subject of review. This policy will be underpinned by a strict risk assessment process. The operational healthcare meeting and partnership board will monitor progress. A clearer focus by the partnership board (& Clinical Governance) will be adopted.	Head of Residence/ Healthcare Lead	31 March 2017
5.31	Prisoners should have satisfactory access to dental	Accepted	A review will be carried out to review current waiting times. The outcome will be discussed with providers and NHS England.	Head of Residence /	31 January 2017

	care and treatment, and measures should continue to reduce the number of patients on the waiting list. (2.68, repeated recommendation 2.87)		The expectation will be a significant improvement to both access and waiting times. Monitoring will be by the healthcare operational meeting and partnership board.	Healthcare Lead	
5.32	All discipline officers should receive regular mental health awareness training to recognise and take appropriate action when a prisoner has mental health problems. (2.73, repeated recommendation 2.92)	Accepted Subject to Resources	Training is currently only completed by pathways staff. Mental health training for prison staff is commissioned within the mental health provider's contract. Regime pressures have meant that few staff have been able to attend this, but the provider has devised a shorter bespoke training package that may be more accessible for prison staff.	Pathways Lead	31 October 2016
	Catering				
??	The food provided should be sufficient to meet prisoners' needs; serveries should be properly supervised to ensure all prisoners have equal access to food and to deter bullying; and staff involved in preparing and serving food should be adequately trained. (2.81)	Accepted	A new and revised procedure will be introduced. When implemented, each wing will have two trained cleaning officers to improve supervision of all prisoners, both serving and receiving the meal. Portion control will be monitored to make sure the serveries do not run out of food before all prisoners are served. The catering manager will also introduce a training programme that will ensure all kitchen staff are qualified and trained to a high standard.	Head of Residence / Catering Manager	30 November 2016
	Learning and skills and work activities				
5.33	The prison should introduce effective quality monitoring systems to ensure that teaching and learning improves in all areas. (3.10)	Accepted	Every member of the Novus team has an annual Observation of Teaching and Learning and are expected to achieve 'Good' to 'Outstanding'. Support through mentoring will be given to those that do not meet the required standards. There will also be the introduction of a collaborative approach between prison delivery and Novus. This will introduce peer observations and create a critical friend to improve quality.	Head of Reducing Re-Offending	30 November 2016
5.34	The range of vocational training courses should be increased. (3.11)	Accepted	A complete review of the curriculum plan will take place with the aim to improve the current offer and, where appropriate, increase the range of vocational training courses. In consultation with the Head of Learning and Skills, Novus will adjust their delivery plan to include full-time courses in business, catering and multi-skills.	Head of Reducing Re-Offending	31 December 2016
5.35	The prison should increase the provision of vocational qualifications in workshops	Accepted	Through the implementation of the Benchmarking process the staffing provision within industries has been increased. An additional 110 activity spaces will provide an opportunity for	Head of Reducing Re-Offending	31 March 2017

	and work areas. (3.17)		introducing new qualifications and, in doing so, increase provision.		
5.36	The prison should record prisoners' personal development and employability skills. (3.18)	Accepted	Through the new induction process, progress is recorded through the introduction of a portfolio of progress. This will follow prisoners throughout their sentence plan. All achievements are recorded by Novus and entered onto the Learner Record System.	Head of Reducing Re-Offending	Completed
5.37	Novus should improve lesson planning to ensure that all learners make the progress of which they are capable. (3.26)	Accepted	Novus has completed the self-assessment report which addresses this action with additional support and training for teaching staff in all aspects of planning and reviewing all progress in team meetings and business meetings.	Head of Reducing Re-Offending	31 October 2016
5.38	The prison should ensure targets set for learners include broader personal development and English and mathematics. (3.27)	Accepted	Extensive work is taking place on individual learner plans (ILPs) to ensure that all ILPs are individualised and addressing the needs of the prisoner. Training has been planned throughout the year to help address this action.	Head of Reducing Re-Offending	31 December 2016
5.39	The stair lift should be repaired or replaced so disabled prisoners have access to all areas of the education department. (3.31)	Accepted Subject to Resources	The stair lift will be thoroughly examined by external contractors to determine the feasibility of sustained repair. Should the stair lift be condemned, a business case will be submitted for replacement.	Head of Reducing Re-Offending	31 October 2016
5.40	Retention and pass rates in mathematics and English classes should be improved. (3.34)	Accepted	There will be a clear focus by the provider to improve both retention and pass rates. There will be an evaluation of the allocation processes, incorporating entry requirements, initial assessments and diagnostics.	Head of Reducing Re-Offending	31 January 2017
	Physical education and healthy living				
5.41	Data analysis should cover participation by different groups and prisoners' views should be canvassed to inform the provision. (3.43)	Accepted	A questionnaire will be given to every prisoner to examine participation and to influence provision. The data will be analysed to inform any changes to the programme.	Head of Reducing Re-Offending	31 October 2016
5.42	The gym should operate in line with the published core day and provide the full range of activities available. (3.44, repeated recommendation 3.47)	Accepted	A new and revised core day will be introduced. There will be a focus upon timeliness of attendance at all activities, including physical education.	Head of Reducing Re-Offending	31 March 2017
	Strategic management of resettlement				
5.43	The prison should ensure men receive adequate support in reducing their risks by having	Accepted	A full review will take place to properly examine this expectation. To support delivery of the recommendation, a sequencing strategy will be introduced to enable a joined up whole prison	Head of OMU	31 March 2017

	a better understanding of the needs of the population and coordinating offender management work with other departments to provide a 'whole prison' approach. (4.4)		approach. This will link to the introduction of the revised personal officer/key worker initiative.		
	Offender management and planning				
5.44	Senior management should ensure that OMU staff have access to CPS documents to enable them to produce better OASys reviews. (4.12)	Accepted	A process will be introduced that will ensure access to CPS documentation.	Head of OMU	31 December 2016
5.45	Categorisation reviews should contain more detailed information, including contributions from other departments. (4.18)	Accepted	The current system will be revised. Contributions will be obtained from all relevant departments to properly inform the categorisation process.	Head of OMU	31 December 2016
	Reintegration planning				
5.46	Prisoner mentors should be adequately resourced to support prisoners with resettlement queries. (4.26)	Accepted	A new and revised peer mentor strategy will be introduced. This will ensure that all agreed support areas will be adequately resourced (including resettlement).	Head of Residence	31 January 2017
5.47	NCS advisers should have access to data on prisoners' education attainments and sentence length to enable them to target their service effectively. (4.30)	Accepted	Data will be made available to National Careers Service (NCS) advisers.	Head of Reducing Re-offending	31 October 2016
5.48	All prisoners should have access to accumulated visits. (4.38)	Accepted	All prisoners have access to accumulated visits in line with national policy. Through the community representatives, accumulated visits information will be displayed for a better understanding of the process.	Head of OMU	31 October 2016
5.49	Visits should start at the advertised time. (4.39)	Accepted	A much clearer focus will be given by senior leads and managers to ensure that all visits commence at the agreed times.	Head of Residence	31 October 2016
5.50	Prisoners should not have to wear sashes in the visits hall. (4.40, repeated recommendation (4.46)	Rejected	The wearing of high visibility clothing on visits is an integral aspect of security management. It assists in identifying prisoners during and after visits sessions and helps to prevent them from escaping. The management of security at visits requires that arrangements are in place to identify and account for prisoners both before and after visits. Where appropriate, Governors have the discretion to require prisoners to wear distinctive clothing to	Head of Security	

		aid staff supervising visits.		
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<i>Recommendations</i>	
Accepted	44
Accepted Subject to Resources /Partially Accepted	4
Rejected	2
Total	50
There is a recommendation with no number between 5.32 and 5.33. This recommendation is accepted	1