



HM Prison &
Probation Service

Cohorts in prison: An Awareness Guide

National Prison Safety Team
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OVERVIEW

Our prisoner population has individual and often quite complex needs. In this guide you will find information about a range of different prisoner cohorts that we have identified within our population through our safety learning. We have also included links to guidance which can help to address some of the known safety risks to help manage the risk of harm to self, to others, and in some cases, both.

It is important to remember that people are individuals, and cohorts are fluid. It is possible to belong to more than one cohort at any point in time, and so the needs and risks of prisoners are likely to change in custody.

As we know, information sharing is essential to manage risk. It is important that staff share and record safety risk information about prisoners with their colleagues and use the relevant case management processes such as [Assessment, Care in Custody, Teamwork \(ACCT\)](#) and the [Challenge, Support, and Intervention Plan \(CSIP\)](#) to support anyone who is at risk of self-harm and/or violence in prison.

The guidance is not structured to be read from beginning to end – you can move to relevant sections by scrolling through the document or using the direct links in the [contents page](#).



ISOLATING INDIVIDUALS

Making every interaction count

Time pressures on staff may impact on the level and frequency of contact with prisoners. This in turn can lead prisoners who are isolating themselves for various reasons, to feel even more isolated, which can increase their risk of self-harm, self-inflicted death, or involvement in violence. It can also have a negative impact on their mental health and wellbeing.

Meaningful conversations

- Meaningful conversations with a prisoner who is isolating themselves and at risk, are essential.
- Use scheduled interactions such as delivering meals or medication as an opportunity to check on their wellbeing.
- Consider other ways to conduct a daily ‘check-in’, for example, a daily round by a member of staff, or by using in-cell telephony (where available).
- Consider discreet ways that those isolating can flag to staff that they need additional support. This could be through a traffic light card system, or note slips, for example.
- Remember to record all communication on Prison Nomis so that other colleagues and Keyworkers can see the level of engagement.

Coping strategies

- Giving access to advice on coping techniques and stress management techniques can help prisoners to cope better and to communicate their feelings and thoughts. This could include mindfulness exercises, breathing techniques, and providing information on available avenues for support.
- A link to distraction and in-cell activity resources is provided in the [resources and further support section](#) at the end of this document.



PRISONERS WITH DRUG DEPENDENCY ISSUES

There are many ways that staff can help support and manage the risks of this cohort. It is important that staff remain extra vigilant regarding prescribed medication and trading. Other things that staff can do to help prisoners in this group are:

Everyday interactions and wellbeing checks

- We know that clear, frequent, and caring communication between staff and prisoners is important for prisoner wellbeing. Carry out regular well-being checks during long periods of lock-up, and also at unlock periods in the morning and after lunch.

Key work sessions

- Enquire about substance misuse and dependency through Key work sessions and follow up with a referral.

Living environments

- Ensure their living environment is clean through Accommodation Fabric Checks for living space and having clean landings for the environment.

Multi disciplinary working with healthcare and substance misuse services

- Continue to work together with prison healthcare and substance misuse services, and ensure appointments are attended.
- Ensure there is a suitable area for one to one sessions and support interviews.
- Support attendance at all SMS interventions and clinics to support abstinence including mutual aid (peer led delivery).
- Consider the use of rehabilitative/diversionary adjudications for drug related offences.

Support contact with family and significant others

- Engage with Family services to support contact with and increase support for behaviour.

PRISONERS WITH DRUG DEPENDENCY ISSUES (2)

Purposeful activity and access to education

- Ensure the offer of employment/education is available (and encouraged for convicted prisoners) or there are distraction packs to help with boredom.
- Engage with gymnasium sessions to assist with wellbeing.

Drug free living

- For those prisoners who have desisted from drug taking and wish to continue to do so, staff should use the Keyworker interview to communicate with the prisoner through recovery and support them.
- Engage with any incentive programmes, for example the Incentivised Substance Free Living (ISFL) programme, in the establishment to support behaviour or encourage participation in SMS Recovery programmes including voluntary drug testing programmes.

Further information

[Drugs in prisons - HMPPS Intranet](#)



IMPRISONMENT FOR PUBLIC PROTECTION (IPP) AND LIFE SENTENCED PRISONERS

The impact of the sentence

An indeterminate sentence is known to be accompanied by feelings of uncertainty, hopelessness, loss and despair. This is especially true of the IPP sentence which has subsequently been abolished.

Some of the remaining prisoners serving an IPP sentence are now significantly over their tariff date and experience a number of barriers to progression. We know that incidences of self harm are higher amongst IPP prisoners than the general population. Recall rates are high for IPP prisoners (with approx. 30% being recalled within 12 months). Recall is known to be an important risk factor for suicide and self harm.

The impact of delayed parole hearings

Prisoners serving an IPP sentence may continue to be at an increased risk of suicide and self-harm if their parole hearings are delayed. Although the Parole Board are doing everything possible to review cases, understandably some cases will be delayed. Such delays are likely to bring additional frustrations and could increase feelings of hopelessness and despair for many prisoners serving an IPP. There may also be prisoners serving an IPP or Life sentence who have been approved for a progressive move to Open conditions and who may experience a longer wait before a transfer can take place.

Remote hearings and risks

For those cases that are being heard remotely by the Parole Board it is vital for staff to be aware of the prisoners serving IPPs within their establishment, including those that are part of the national IPP cohort, and for staff to have identified additional structures and activities to support this group.

Staff should remain alert after a prisoner has attended a remote meeting, particularly where bad news may have been given as this may increase their risk. It is also important to continue discussions with IPP prisoners about any concerns and anxieties that may occur as a result of lack of access to interventions and the ongoing challenges to completing risk reduction work and sentence planning objectives during the phased return to normal. Psychology and programme staff are contactable for support around such areas, alongside the safety plans in place within each establishment.

Further information: [Indeterminate Sentence Operational Support - HMPPS Intranet \(gsi.gov.uk\)](https://www.gov.uk/government/organisations/ministry-of-prisons-and-justice/operational-support-for-prisoners-with-indeterminate-sentences)

Contact: OMPPG.IPP.Queries@justice.gov.uk

PRISONERS AT RISK OF DUAL HARM

Prisoners who have a history of dual harm (those who have been violent to others and harmed themselves) may be at an increased risk to themselves and others.

Consistency is key

It is important that we take a consistent approach with these individuals, and in particular that we do not use punitive or restrictive measures in response to their violent behaviour that increase their risk of self-harm or suicide.

Managing both risks at the same time can be challenging, as there is a tendency to respond to an incident of violence or self-harm in isolation, without considering the full picture of the person's behaviour or the underlying reasons for it. But many of the risk factors and triggers are the same, so if we adopt a joined up approach we can expect a more successful outcome that will benefit the individual and those living and working with them.

Prisoners who are known to pose a risk to both themselves and others who are on ACCT and CSIP should be case managed by the same member of staff where possible. This is important as it ensures consistency across both plans, and a single member of staff taking responsibility means that they will receive more effective support.

Staff should consider that instances of violence by prisoners can be evidence of distress or a risk to self, and approaches to reducing risk should not be solely punitive.

Further information

More information on supporting prisoners at risk of dual harm can be found [here](#).

EARLY DAYS PRISONERS

Entering custody for the first time, or as a result of transfer from another custodial setting, is a proven period of increased risk of self-harm and violence so it is important to be aware of the following:

Cell sharing risk assessments

Cell sharing risk assessments ([CSRA](#)) are an essential part of the method to measure the level of risk that new prisoners may present to allow decisions to be made that minimise that threat to others.

Risk of self-harm and/or violence

Staff should assess the risk of harm to self during the reception process and provide the necessary support wherever possible, even if an individual is moved to isolation on their arrival as a result of COVID-19. If the reception processes make it difficult to properly assess people at risk, consider what flexible approaches may be used to support this, such as the use of in-cell telephony, or other discreet means of communication.

Risk of harm to others should also be assessed in the early days beyond completion of CSRA. Staff can use the [Risk Profile](#) template to record a prisoner's risk information so that this is easily accessible in one place and can be shared with all relevant staff. The [Risk Identification Toolkit](#) provides detailed guidance on identifying risk of harm, both to self and others.

Peer support and self-help

Peer support should be made available to early days prisoners, and a flexible approach taken to ensure this can be delivered safely (for example, repurposing rooms in which adequate distancing can take place). More information on Peer support is available [here](#).

Consider providing a [Wellbeing Plan - Safety and Support \(hmppsintrtranet.org.uk\)](#) – This is a self-help tool created with input from mental health charity [Mind](#), and prisoner focus groups. It includes a safety plan and can be used by prisoners to reflect on their triggers and coping strategies, as well as actions they could take to improve their mood and look after themselves at difficult times.

EARLY DAYS PRISONERS (2)

Providing the right level of information, at the right time

Whilst it is important prisoners are provided with all relevant information, this must be done at the right time and in a way that allows them to retain the information. Overloading people with lots of information on their first night especially while they may be coping with feelings and emotions of entering a new prison or prison for the first time. [First Night booklets](#) can be issued to every new arrival on their first night focusing on this key information, the booklet is available in a [variety of languages](#).

Fear of the unknown

Much of the anxiety in moving wings/units is fear of the unknown. Effective communication with prisoners prior to their move from first night/induction units can do much to alleviate this fear. They should be informed of their allocated wing/unit at the earliest opportunity and told when this move will take place. This allows them to prepare for the move as well as raise any legitimate concerns they may have about their allocated location. It is also important to ensure that prisoners have regular contact with family or significant others as soon as possible, and that families are aware of the local Safer Custody Hotline if they want to flag any concerns.

Getting the basics right from the start

Keeping in contact with family and significant others and maintaining positive relationships is important. Staff should ensure that PIN phone accounts are set up with approved numbers and PIN credit added without delay. Granting access to canteen and first night packs as soon as possible can also help to prevent debt.

Clear communication, particularly with those who do not speak English

Early days staff have a responsibility to ensure people who do not speak English fluently (such as Foreign Nationals), deaf people or those with other communication difficulties understand what is said to them and what is expected of them.

Actions to help achieve this include:

- Assessing an individual's level of English when they arrive at the prison to understand what support they may need,
- Staff routinely using Big Word or Clarion interpreting services, or making other reasonable adjustments during reception, first night and induction.

PRISONERS WITH LEARNING DIFFICULTIES OR AUTISM

People with learning disability and learning challenges (LDC) may require help and support in their everyday living and coping with the Criminal Justice System. For those with learning difficulties or autism, uncertainty around regime changes can make life especially difficult. Change may not be well received by some prisoners, and further explanation may be necessary.

Communicating regime changes

It is always important for staff to communicate any regime changes carefully and clearly to prisoners with autism, but even more so when changes to the prison processes and environment are occurring at a fast pace.

Printed copies of timetables, for example, can be an effective tool, as can allowing individuals with autism plenty of time to process information and space to ask questions – especially important given that difficulties with social interaction may make it more difficult to explain how they are feeling. If possible, any change to routines may be best explained by someone who already has a strong relationship with the individual, such as a Keyworker or familiar staff teams.

Easy read

Where written information is provided to prisoners, consider whether an [easy-read](#) version should also be made available. Try to also ensure peer support is available to those who would benefit from messages being explained by a peer.

Further information

To help you understand how we can identify individuals with potential LDC, and what you can do to be responsive to these needs visit [Learning disability and learning challenges - HMPPS Intranet \(gsi.gov.uk\)](#)



PRISONERS IN DEBT

Staff should look for any changes in behaviour/signs that prisoners are in debt and be ready to support them.

For example: prisoners who choose to continue to isolate may be doing so to avoid interaction with other prisoners to whom they are in debt.

It is important that staff are aware of any changes in the illicit economy and the impact on debt.

For example during the pandemic the conveyance of certain drugs was disrupted by the restrictions in place for social visits and movement of prisoners. Staff should be vigilant and share intelligence through appropriate local systems such as Mercury information reports and Safety intervention meetings.

Staff should remain alert to the impact that lifting of any restrictions can have on debt and the illicit economy.

For example: additional allowances have made restrictions more manageable, but there may be an impact on debt when they are withdrawn. These include:

- Suspension of the Basic incentives level
- Access to TV and TV rent holiday and other in-cell resources such as radios, reading and distraction packs
- Pay without work or education attendance
- Increased PIN credit and letter allowances
- Enhanced food offer and canteen allowance, and allocation of additional snack packs
- Increased access to personal clothes and relaxation of rules relating to clothing

When any of these allowances are changed or removed, due consideration should be given to the impact it may have on debt, and in particular on the most vulnerable prisoners who are judged to be most susceptible to debt.

Further information

[Prisoner Debt Resources](#)

TRANSGENDER PRISONERS

Transgender prisoners are a recognised vulnerable group in custody at risk of self-harm and self-inflicted death, and can be targeted by others leading to incidents of assault, bullying and harassment. It is important that staff continue to follow the relevant policy and guidance, and ensure they consider all risks, posed both to and from the prisoner as well as any risks they may pose to themselves, when considering their care and management.

It is likely that establishments will take longer to return to normal than prisoners may have initially expected. However, transgender prisoners must continue to be managed via the Local Case Board process. This is a mandatory policy requirement and ensures that this cohort continues to be supported and managed safely.

Prisons should try to be clear about the potential impact of the pandemic on medical treatment linked to a prisoner's transition by seeking input from healthcare partners, and including them in the Local Case Board process, where possible and appropriate.

Staff should also consider any gender-affirming activities (for example, gender identity support or consultation groups) that are important to transgender prisoners and which may have been disrupted by the pandemic. Prisons should enable these activities to restart as soon as it is safe to do so and keep prisoners updated on progress.

Further information

['The Care and Management of Individuals who are Transgender' Policy Framework](#)

['The Care and Management of Individuals who are Transgender' Operational Guidance](#)

Additionally, all establishments have a transgender Specific Point of Contact (SPOC) who staff can speak to regarding the management of transgender prisoners. The operational framework team can also be contacted at HMPPStransgender@justice.gov.uk for any questions or further support.



OLDER PRISONERS AND THE EXTREMELY VULNERABLE

The older prisoner population has increased by 80% since 2009, with around 1 in 6 prisoners now over 50. Older prisoners often have different needs to the rest of the population, particularly in areas such as health and social care and wellbeing.

Here are some of the key areas to consider in managing this section of the population.

Clear communication

Clearly communicate the safety measures in place to protect vulnerable prisoners and answer their concerns.

Support mechanisms

Consider discreet or additional means of talking to vulnerable prisoners about their wellbeing. For example, whether daily wellbeing conversations could be implemented by a member of staff, in-cell telephony used for additional conversations, or a discreet traffic light coloured card system/note slips could be implemented if prisoners want to quietly highlight to staff that they need some additional support.

Identifying healthcare needs on reception or during early days

Early identification of those who have sight, hearing and/or mobility impairments will help in identifying the most appropriate location within the prison for those individuals, taking into consideration their ability to move around the prison and to be able to access workshops or healthcare.

Dementia and cognitive impairment

Some older prisoners may present with early signs of dementia. Whilst these changes may be mild, lack of activity and stimulation will lead to further deterioration over time. It is important to note that mood changes are common, including outbursts of anger or anxiety, or becoming overly emotional. Think, before you place an older prisoner on report for not complying with an order, could it be because they have a cognitive impairment?



OLDER PRISONERS AND THE EXTREMELY VULNERABLE

Purposeful activity

Opportunities for social interaction, older prisoner forums, exercise, library access and education are important and can help in preventing further physical/cognitive decline. The charity RECOOP have some excellent resources available on their website for prisons to use
<https://www.recoop.org.uk/>

Distraction activities can be found here [Pact Packets | Prison Advice and Care Trust](#)

The Wellbeing Plan is also a useful self-help in-cell resource [Wellbeing Plan - Safety and Support \(hmppsintranet.org.uk\)](#)

Maintaining contact with family and significant others

Contact with family and friends is important for all prisoners. An individual coming into prison in later life and serving a lengthy sentence, will be acutely aware that their bonds with significant others are more fragile, and bereavements may also occur more frequently for this group. Older prisoners are likely to have older families and friends, who may also be struggling with physical/cognitive impairments. Some older prisoners might well have been carers to other family members. Consider what can be done to maintain contacts e.g. keep families updated about medical concerns, hospital admissions, and offering more flexibility in relation to visits.

Release planning

Preparation for release will need careful planning and likely to require early input from other colleagues, such as Probation, Healthcare and the third sector. For example, does the individual have health and social care needs that community providers need to be aware of? Are they registered with a GP to ensure continuity with medicines? How has technology moved on during their time inside, do they know how to use card payments, self-service check-outs etc?

End of life planning

For those whose health deteriorates, planning for end-of-life care may also need to be considered. See The Dying Well in Custody Charter [Dying Well in Custody Charter - endoflifecareambitions.org.uk / dying-well-in-custody-charter-endoflifecareambitions-org-uk.pdf / PDF4PRO](#)

Further information

See the [resources and further support](#) section at the end of this guide.

WOMEN PRISONERS

Staff awareness of the different needs of women in prison

Women in prison have a disproportionately higher level of mental health, and self-harm and other health needs compared to men in prison. They are also more likely to have experienced trauma, and that trauma is more likely to have been caused by someone close to them.

Positive and consistent relationships can have a significant impact on women. Identifying and supporting women to understand their experience of trauma (including domestic violence and sexual abuse), and address their substance misuse, mental health and issues relating to separation from, and loss of children are particularly important in reducing self-harm.

ACCT

Women prisoners should be managed appropriately to their current risk level and complexities of need. Women who self-harm are to be supported and cared for according to their individual needs. Staff should open an ACCT document if they feel a prisoner is at risk of self-harm or suicide and the ACCT process should be used to support the prisoner and mitigate risk.

Supportive measures

Some measures to support this population include:

- Ensuring there is appropriate use peer support arrangements including the Listener Scheme.
- Encouraging and facilitating quality family contact to maintain valuable family ties.
- Providing them with opportunities to access purposeful activities such as education, skills (including parenting skills), and employment.
- Providing consistency in the support offered to women.

Further information

[Women's Team - HMPPS Intranet \(gsi.gov.uk\)](#)

[Women's Policy Framework](#)

[Guidance on working with women in custody and the community](#)



RECALLED PRISONERS

People being recalled to prison are recognised as a risk group in terms of suicide and self-harm. Being recalled often leads to several risk factors, which includes feeling of shame and hopeless, a perception of unfairness and issues with mental health, substance misuse and debt.

Quite often this cohort of prisoners know little about why they have been recalled or how long they will remain in custody which only increases anxiety.

Supportive measures that staff can take to help reduce the risk for prisoners who fall into this category include:

- Recognising and understanding the loss and emotional distress experienced by recalls as well as their increased risk to self.
- Ensuring they are appropriately supported, explaining the prison system to them and monitoring them.
- Sharing information promptly with them and having frequent communication with them. Where there are concerns or doubts, opening an ACCT document will help ensure an accurate assessment of risk.
- Obtaining all relevant information about the prisoner, including probation and community health records.

Further information about remand and recalled prisoners is available in the [resources](#) section of this guidance.

REMAND PRISONERS

Support during the early days and weeks

People on remand have been identified as being at a heightened risk of harm to themselves, particularly during the pandemic where trials have been delayed, leading to long periods of uncertainty. Support for this cohort of prisoners is crucial, both in their early days and weeks in custody, and where their stay is longer than expected.

Be aware of the risks and how they may change over time

- **Known risk factors** - Staff working in prison receptions and first night centres need to be aware of the known risk factors for suicide and self-harm. They must actively identify relevant risk factors from the information and documents available to them.
- **Defensible decision making** - Evidence of risk should be fully considered and balanced against the prisoner's demeanour. Reception staff should record what factors they have considered and the reasons for their decisions.
- **Induction** - Prisons must ensure that new arrivals promptly receive an induction to equip them with information about how to meet their basic needs in prison.
- **Healthcare and Mental Healthcare** - Mental health referrals need to be made and acted upon promptly. Attention must be paid to the potential for increased risk when medication is changed, ended or otherwise disrupted. Arrangements should be in place to ensure healthcare information is shared where appropriate.
- **Make every interaction count.** Use Key work sessions to check in on this vulnerable group and consider prioritising those on remand for Key work sessions where possible. In addition, use other scheduled interactions such as delivering meals or medication as an opportunity to check on wellbeing.
- **Purposeful activity** - Provide opportunities for individuals to make constructive use of their time. Offer access to exercise, distraction activities etc. Use peer supporters. Encourage family contact.
- **Remain alert to significant dates** - Be aware of upcoming events that may be significant for the individual, such as legal visits and court appearances, and take an interest in their feelings about them.
- **Provide support** - After such events ask about the outcome and their reaction to it. Where the individual has been adversely affected, encourage them to seek support and if necessary open an ACCT.

CARE EXPERIENCED

Experience of trauma

This cohort of people are more likely to have experienced trauma in their lives either through the experiences that brought them into the care system or sometimes as a result of their care experience. Because of these experiences they may communicate their needs differently, present behavioural or anger management issues, have trust difficulties or display adverse reactions to authority. Their experiences may put them more at risk of self-harm and suicide when in prison. An understanding of these experiences can help staff to support them and reduce the likelihood of these behaviours.

Some things that can be done by staff to help those who fall into this category are:

- Identify those who have spent time in the care of the Local Authority within the establishment and ensure that they get the continued statutory support they are entitled to. This applies to under 25 only.
- Ensure the alert on NOMIS is made active for those that have experienced care.
- Provide support such as mental health referrals where necessary and be aware that some mental health needs may not yet have been identified.
- Ensure Key work sessions are being carried out or wellbeing checks are being completed in line with the Keyworker Exceptional Delivery Model.
- Utilise the support available from third sector organisations. Also use or adapt activities where possible from the organisations.
- Use a trauma informed approach as much as possible.

CARE EXPERIENCED (2)

- If the person is still the responsibility of the local authority they will have a personal advisor. They are likely to know the individual well and may have acted as their corporate parent. With the young person's consent they can be invited to provide support, attend ACCT reviews etc.
- It may be that this cohort regardless of their age will be more isolated than their peers. They may have difficult or no relationships and may receive no visits. Consider setting up peer support groups.
- Be aware that family may look very different for those with care experience and take into account the most significant people in their lives may be a foster carer, a personal advisor, or a friend's mum for example. Relationships with their birth family may still be in place, but may be difficult.
- Furthermore because of this some times of year may be more difficult for them. Religious celebrations or birthdays for example. Consider how support could be provided at these times, or activities to make them feel more included.
- Because of their experiences this group are often remarkably resilient but also very keen to support others. This may in turn help them so think about peer support roles.

Further information

[Care experienced prisoners resources](#)

[HMPPS intranet care leavers page](#)

[Toolkit for Supporting Care Leavers in Custody - NICCO](#)



FOREIGN NATIONAL PRISONERS

Feeling isolated

Foreign nationals are more likely to experience feelings of social and cultural isolation in prison, as well as a lack of family support. There may be uncertainties about their immigration status which can add to their levels of anxiety and can increase their risk as the date of deportation approaches.

Immigration detainees

Those detained under immigration powers (IS91s) can also have more complex needs, especially in relation to their immigration status. The Home Office must be kept updated with any concerns during their detention and can be contacted via the contact details below.

Language

Language barriers can make it very difficult to adjust to prison life and to communicate with staff and peers, increasing their feelings of isolation. It is crucial that staff log the prisoner's primary spoken language on NOMIS and use the translations services to explain day to day prison life and procedures.

The Big Word currently provide establishments with telephone interpreting service on-demand. Each person that needs to use the interpreting service, should be registered with a personal profile to [Wordsync](#).



FOREIGN NATIONAL PRISONERS (2)

Actions that prisons can take to support this cohort include:

- **Maintaining a record of all the foreign nationals held:** highlighting their nationality and those who are not fluent in English. Ensure that the information is made widely available.
- **Consider the effect of prisoner moves on a foreign national's ability to communicate** - will they lose someone on whom they rely? How can that help be continued or replaced?
- **Promote a sense of community** - if prisoners share the same language, ask them if they would like to be accommodated together (subject to a risk assessment) or close by.
- **Liaise with the Home Office** to ensure that immigration staff provide regular updates about those who are, or are about to be, held on an IS91. Home Office Duty Desk can be contacted at CCDPORTDUTYOFFICER@HOMEOFFICE.GOV.UK or on 0208 196 4315
- **When displaying information** use pictures and Easy Read formats where possible. A lack of understanding can impact on behaviour. Prisons should also have access to the Picture It dictionary.

Further information

A [foreign national offender information hub](#) is available to provide support for all HMPPS staff working with Foreign Nationals to help ensure that they are managed efficiently and consistently.

Contact the FNO hub team: FNOOperationalDelivery@justice.gov.uk



YOUNG ADULTS

Young adults are a vulnerable group that tend to be overrepresented in incidents of violence in prisons. Also, in some prisons they have been disproportionately involved in self-harm incidents. Research shows that young adult men between the ages 18-25 are more likely to be impulsive, have problems regulating their emotions and impulses, lack insight into the consequences of their actions and can be heavily influenced by others.

Transition from youth to adult custody can be an overwhelming time for a young adult and can be a period of increased risk of harm to self and or others. The new transitions Framework and guidance provides a person centred and consistently applied approach, to ensure that the specific needs of the individual are met. This process will also improve the sharing of information between both estates to ensure more streamlined and comprehensive sentence and care planning.

The Maturity Screening tool and the Choices and Changes resource pack

The [Maturity Screening Tool and the Choices and Changes Resource Pack](#) are initiatives that have been developed for young adult men and are now widely being used across prisons. The Maturity Screening Tool can be used to identify cases of low psychosocial maturity. The Choices and Changes Resource pack is a flexible non accredited resource to be used on an individual basis to support positive maturity and pro social choice.

Supporting young adults

Staff can work with this cohort by:

- Showing them understanding, empathy and compassion.
- Having an awareness of situations that may be traumatising for them and knowing how to adapt or de-escalate situations (e.g., body searches, C&R, Cellular Confinement and punishment).
- Creating a safe environment in the prison, also within interactions (physical and psychological safety).

YOUNG ADULTS (2)

Supporting young adults (continued from previous page)

Staff can work with this cohort by:

- Making a referral to mental health or psychology if there are any concerns about how a young adult is coping.
- Having conversations that emphasise a ‘future orientation’ (e.g., thinking about goals, making and achieving plans).
- Promoting family/significant others including personal advisors where applicable.
- Providing encouragement and positive reinforcement using praise to motivate and recognise change (a young adult’s brain will also respond better to this approach than punishment).
- Providing regular Key worker engagement (building rapport and trusting relationships with staff).
- Working collaboratively and empowering them e.g., giving them a voice, choice and control wherever possible.
- Encouraging wellbeing and self-care e.g., through activities such as yoga and mindfulness.

Further information

[Young adult strategy - HMPPS Intranet \(gsi.gov.uk\)](#)

[PSI 2012-08 - Care and Management of Young People](#)

[myLearning: Young Adults \(mydevelopment.org.uk\)](#)



ACTIONS THAT CAN HELP TO REDUCE SELF-HARM AND VIOLENCE IN PRISONS

Maintaining Procedural Justice

It is important that prisoners feel that they are treated fairly in custody. In the prison environment, when a person feels that their treatment is unfair they may become angry and resentful against “the system”. This could potentially give rise to conflict or assault. There is good evidence that when people feel processes are applied and decisions are made fairly, they are more likely to trust authority figures, respect rules and follow them.

Communication and meeting basic needs

Explaining any necessary changes in regime to prisoners will help to minimise frustrations caused over not knowing what is happening. Try to be as transparent as possible on why the changes are necessary and what the effect will be. More information is available [here](#). The necessary regime changes brought about by the pandemic has impacted on prisoners’ ability to have their basic needs met. Wherever possible, try to meet these basic needs. If this is not possible, be transparent in providing information or a solution.

Allowing prisoners to remain in touch with their support networks

Staff should help people to keep in contact with family and friends by phone or prison mail and remind them of the support available via Samaritans, the Listener Scheme and peer support. Helping prisoners to stay connected to the outside world via radio and TV and maintaining access to their support networks is particularly important.

Maintaining good staff-prisoner relationships

Maintaining positive relationships between those who work and live in our prisons is essential to reducing violence and maintaining wellbeing. In addition to Key work sessions, when engaging with prisoners, try to make every interaction, however short, meaningful. Use the principles of Five Minute Intervention and Every Contact Matters to inform these conversations. Use tasks such as delivering food or medication to a prisoner as an opportunity to check in and ask how they are doing and what they might need. More information is available [here](#) and on the [physical safety section](#) of the Safety intranet. More information about Key work, including a Key work toolkit with conversation prompts can be found [here](#)



ACTIONS THAT CAN HELP TO REDUCE SELF-HARM AND VIOLENCE IN PRISONS (2)

The cell sharing risk assessment (CSRA)

It is imperative that staff balance the risk posed by COVID-19 with the risk prisoners may pose to themselves or others. [CSRA](#) is essential in the identification of prisoners at risk of seriously assaulting or killing another prisoner in a locked cell.

Responding to instances of in-cell violence with a reassessment of risk should occur when believed necessary by staff. Staff should also make use of the knowledge and experience available to them when reducing risk. For example, discussing high-risk prisoners at the SIM meeting and identifying any protective factors that can feasibly be used to help mitigate the risk they pose to themselves or others.

Risk assessments

During recovery, there may be less time available to staff for paperwork. However, maintaining up-to-date risk assessments is an effective way to reduce violence and maintain prison safety during these exceptional circumstances. Staff can make a referral for a prisoner to be considered for a CSIP if they are concerned about the individual's behaviour. More information about CSIP is available [here](#).

Additional time in-cell may also increase the risk of self-harm for some prisoners. It is therefore important that all staff are aware of how to open an ACCT if they feel a prisoner is at risk of self-harm or suicide, and that the ACCT process continues to operate in order to support these prisoners and mitigate risk. More information about ACCT is available [here](#).

ACTIONS THAT CAN HELP TO REDUCE SELF-HARM AND VIOLENCE IN PRISONS (3)

Protecting staff

Processes are in place to support and protect staff from assaults at work. While we still live under the threat of COVID-19, deliberate coughing or spitting by prisoners is a common assault and may result in a charge through the CPS.

Addressing boredom

It is inevitable that with an increased amount of time spent in cell, prisoners will experience boredom. When left unresolved, this can increase the risk of violence or may negatively impact wellbeing and increase someone's risk of self-harm. Consider what you can provide prisoners with to combat this boredom. For example, hard copies of course materials that can be completed independently, distraction packs, weekly newsletters etc. These resources can be accessed [here](#)

Providing a wellbeing plan

[The wellbeing plan](#) has been created with input from Mind, and prisoner focus groups. It includes a safety plan and can be used by prisoners to reflect on their triggers and coping strategies, as well as actions they could take to improve their mood and look after themselves at difficult times.

RESOURCES AND FURTHER SUPPORT (1)

Isolated individuals

[Isolating individuals staff guidance](#), [Evidence-based practice summary on the impact of isolation and how to mitigate it](#)

Prisoners with drug dependency issues

[Drugs in prisons - HMPPS Intranet](#)

IPP and life sentenced prisoners

[Indeterminate Sentence Operational Support - HMPPS Intranet \(gsi.gov.uk\)](#)

[Parole Board Hearings – Prisons Exceptional Regime & Service Delivery \(hmppsintranet.org.uk\)](#)

Prisoners at risk of dual harm

[Dual Harm Guidance - managing and supporting those who present both a risk to themselves and to others. - HMPPS Intranet \(gsi.gov.uk\)](#)

[Self-harm safety toolkit: understanding and supporting someone who is self-harming \(gsi.gov.uk\)](#)

Early days prisoners

[Early Days and Transitions - HMPPS Intranet \(gsi.gov.uk\)](#)

Prisoners in debt

<https://intranet.noms.gsi.gov.uk/support/safety/prisoner-debt>

Prisoners with learning difficulties or autism

[Learning disability and learning challenges - HMPPS Intranet \(gsi.gov.uk\)](#)

[Easy read images - HMPPS Intranet \(gsi.gov.uk\)](#)

Alternative versions of distraction packs are available here: <https://hmppsintranet.org.uk/resources/in-cellmaterials/learning-disabilities-and-challenges-newsletter/>

RESOURCES AND FURTHER SUPPORT (2)

Transgender prisoners

[Safer Custody Learning Bulletin: Transgender Prisoners, Suicide and Self-Harm: Know the Risks - HMPPS Intranet \(gsi.gov.uk\)](#)

[Policy Framework: The care and management of individuals who are transgender](#)

Older prisoners and the extremely vulnerable

[PSI 2016-03 - Adult Social Care](#)

[PSI 2015-16 - Adult Safeguarding in Prison](#)

[Ageing prison population \(parliament.uk\)](#)

<https://www.theknowledgeexchange.uk>

[NHS England » Resources](#)

[NHS England » Identifying frailty](#)

<https://www.ageing-better.org.uk>

<https://www.ageuk.org.uk>

<https://www.dementiauk.org/>

<https://www.recoop.org.uk>

<https://www.clinks.org/>

<https://therestoretrust.org.uk>

<https://www.nacro.org.uk>

Introduction into Older People in Custody <https://mydevelopment.org.uk/course/view.php?id=3975>

RESOURCES AND FURTHER SUPPORT (3)

Women prisoners

[Women's Team - HMPPS Intranet \(gsi.gov.uk\)](#)

[Women's Policy Framework](#)

[Guidance on working with women in custody and the community](#)

Remand and recalled prisoners

[Safety Briefing – Increased risk of self-harm in those who have been recalled to custody - HMPPS Intranet \(gsi.gov.uk\)](#)

[Recall, Review and Re-Release of Recalled Prisoners Policy Framework](#)

[Working with Recalled Prisoners - Best Practice Guide](#)

Care experienced prisoners

[Care experienced prisoners resources](#)

[HMPPS intranet care leavers page](#)

[Toolkit for Supporting Care Leavers in Custody - NICCO](#)

Foreign Nationals

[How to access Language Services: Interpreting; Translation and Transcription; and Non-Spoken services](#)

[Information about Wordsynek,](#)

[FNO and cross border transfers,](#)

[Safety Learning – FNOs](#)

[Foreign national offender information hub](#)

[PSI 2011-65 - Foreign National Prisoners Liable to Deportation](#)

Young adults

[PSI 2012-08 -Care and Management of Young People](#)

[Young Adults Custodial Strategy](#)

RESOURCES AND FURTHER SUPPORT (4)

ACCT

[Assessment, Care in Custody, Teamwork \(ACCT\) Version 6 \(2021\) - HMPPS Intranet \(gsi.gov.uk\)](#)

Self-Harm Guidance

[Self-harm safety toolkit: understanding and supporting someone who is self-harming \(gsi.gov.uk\)](#)

CSIP

[Challenge, Support, and Intervention Plan - HMPPS Intranet \(gsi.gov.uk\)](#)

Risk Identification

[Risk Identification and Information Sharing - HMPPS Intranet \(gsi.gov.uk\)](#)

[Risk Profile](#)

[Risk Identification Toolkit](#)

Distraction Packs

[Yoga – HMPPS COVID-19 Resources \(hmppsintranet.org.uk\)](#)

[Arts & Creative Writing](#)

[Educational materials \(inc. ESOL\)](#)

[Translated materials](#)

[Physical Workouts](#)

[Activity/Distraction packs \(very varied contents including chess, puzzles, colouring\)](#)

[Wellbeing Plan and related packs \(inc. a 'help with isolation' pack\)](#)

[Learning Disabilities and Challenges \(LDC\) packs](#)

CONTACT US

Questions

If you have any questions please contact the
National Prison Safety Team:

SaferCustodyPolicyandLearning@justice.gov.uk

Visit our intranet page for more information:

[Safety - HMPPS Intranet \(gsi.gov.uk\)](https://Safety-HMPPS>Intranet(gsi.gov.uk))