



# **Annual Report of the Independent Monitoring Board at HMP/YOI Askham Grange**

**For reporting years  
1 July 2019 – 30 June 2021**

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## Introductory sections 1 – 3

### 1. Statutory role of the IMB

The Prison Act 1952 requires every prison to be monitored by an independent board appointed by the Secretary of State from members of the community in which the prison is situated.

Under the National Monitoring Framework agreed with ministers, the Board is required to:

- satisfy itself as to the humane and just treatment of those held in custody within its prison and the range and adequacy of the programmes preparing them for release
- inform promptly the Secretary of State, or any official to whom authority has been delegated as it judges appropriate, any concern it has
- report annually to the Secretary of State on how well the prison has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively, its members have right of access to every prisoner and every part of the prison and also to the prison's records.

The Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that states designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detainees and to make recommendations for the prevention of ill-treatment. The IMB is part of the United Kingdom's National Preventive Mechanism.

## **2. Description of establishment**

- 2.1 HMP/YOI Askham Grange is a women's open prison in the rural village of Askham Richard just south of York. The overriding ethos is for resettlement and preparation of the prisoners for their return to the community via its 'interventions and pathways' regime, which encompasses all aspects of the needs of the residents. The prison has provision for up to 10 mothers with their babies, enabling them to maintain full time care of their child up to 18 months whilst in prison, and it is complemented by a nursery which is run by Barnardo's. A family team works with them and all other mothers in Askham to prepare for life on release.
- 2.2 The baseline certified normal accommodation (CNA) is 128, and Askham Grange has an operational capacity of 128.
- 2.3 The regime is focused on reducing reoffending by developing a wide range of skills to enhance the women's opportunities on release. All departments contribute to this in their separate ways.

### **3. Executive summary**

#### **3.1 Background to the report**

3.1.1 This report covers two reporting years. It is based on observations made on visits, contact with prisoners and staff and scrutiny of records. Where visits have been unable to take place because of Covid restrictions, information has been gleaned from the daily orderly officer reports and telephone contact with staff.

3.1.2 The threat of possible closure remains, with no final decision being made by the Minister.

#### **3.2 Main judgements**

##### **How safe is the prison?**

3.2.1 The Board considers that Askham Grange is a safe establishment for both prisoners and staff. Incidents of violence or self-harm are rare, due in no small part to the good working relationships between staff and the women in their care. The buildings and surrounding grounds are kept in a good state of repair, ensuring that prisoners are physically safe within the establishment.

##### **How fairly and humanely are prisoners treated?**

3.2.2 It is the view of the Board that prisoners are treated both fairly and humanely. Where issues arise, they are dealt with by staff and prisoners working together, wherever possible, to achieve an acceptable solution. Staff have been particularly sensitive to the extra difficulties caused by the pandemic (including the restrictions on visits, illness or death of family members, loss of outside work due to closure of businesses) all of which can have a detrimental impact on prisoners' wellbeing.

##### **How well are prisoners' health and wellbeing needs met?**

3.2.3 Healthcare provision has been assessed as being at least as good as that found in the community. The pandemic has forced some restrictions (mainly in dental treatment) which mirrors what has happened in the community, but everyday healthcare services have continued to provide a good service to the women at Askham. There are very few concerns regarding treatment or service provision from the prisoners.

##### **How well are prisoners progressed towards successful resettlement?**

3.2.4 HMP/YOI Askham Grange has a good record of success in preparing prisoners for resettlement. This was greatly disrupted by the Covid pandemic and the lockdown measures imposed both in the community and in prisons. In 2021 the employment hub started to rebuild contacts with potential employers and the voluntary sector. However, the situation has not been helped by the low number of prisoners transferring to Askham.

### **3.3 Main areas for development**

#### **TO THE MINISTER**

3.3.1 A decision concerning the future of HMP/YOI Askham Grange is long overdue and should be a priority in order that Askham Grange can formulate plans for its future appropriately.

#### **TO THE PRISON SERVICE**

3.3.2 The arrival of pods at the beginning of the pandemic meant that no one had to share rooms and that women were kept as safe as possible. The contract for keeping the pods runs out in February 2022 and they are, we are told, to be removed from the prison. The pandemic has not gone away and the women are rightly concerned about moving back into shared accommodation. Whilst accepting that there is a budgetary concern in prolonging the contract, would it not be circumspect to do so in the circumstances?

3.3.3 Despite this being raised in previous reports, there are still prisoners with very little time left to serve being transferred in to Askham Grange. This has an impact on the level of work that can be undertaken with them prior to release and is not to their benefit. Would the Prison Service ensure that only those with sufficient time left to serve are transferred to open conditions in order that resettlement plans can be fully implemented?

#### **TO THE GOVERNOR**

3.3.4 There are no issues to raise with the Governor.

### **3.4 Progress since the last report**

Progress has been hampered by the imposition of restrictions relating to Covid-19.

## **Evidence sections 4 – 7**

### **4. Safety**

#### **4.1 Reception and induction**

4.1.1 Since the start of the pandemic, women transferring in from elsewhere are required to isolate for an initial period, and reception and induction procedures are conducted individually in their pods. This has had an impact on the previous 'buddy' system for new arrivals.

#### **4.2 Suicide and self-harm, deaths in custody**

4.2.1 There has been one death in custody at the prison on 19 August 2020. The IMB monitored the process which follows a death in custody. This was the first death in custody since 1980 and several prisoners commented on how supportive the officers had been. The Prison and Probation Ombudsman (PPO) report, published 22.12.2021, said 'The clinical (care) reviewer was satisfied that Ms X received healthcare equivalent to that which she could have expected in the community...The support offered by the mental health nurse was flexible and responsive' and 'The care given to Ms X was of a good standard'. Three recommendations were made, two of which were directed to the Governor and head of healthcare. Both have been implemented and are in operation. The recommendations were in relation to (a) provision of and training in the use of NOMIS accounts for healthcare staff and (b) assessment, care in custody and teamwork (ACCT) V6 training/refresher training for all healthcare as well as all prison staff.

4.2.2 The number of ACCTs has risen over the reporting period, and this may be accounted for by the uncertainties and restrictions relating to the pandemic:

2018/19	14 ACCTs
2019/20	23 ACCTs
2020/21	26 ACCTs

4.2.3 ACCT documents were monitored as and when the IMB members were able to do so (there were long periods when members were not going into the prison due to Covid restrictions). Documents were kept up to date and relevant, reviews were conducted regularly, and ACCTs were closed when it was deemed safe to do so. Prisoners were actively encouraged to participate in their ACCT reviews and the decisions made therein.

#### **4.3 Violence and violence reduction, self-isolation**

4.3.1 Violent incidents were rare at Askham Grange and those that occurred were dealt with swiftly and effectively.

#### **4.4 Use of force**

4.4.1 Use of force only occurred once during the reporting period. This was reported to the IMB within the agreed timescale and a review/audit meeting was conducted involving the IMB Chair. The IMB assessment was that reasonable force had been used during the incident to ensure the safety of the prisoner and officers.

#### **4.5 Preventing illicit items**

4.5.1 Owing to the restrictions imposed by the pandemic, outside working and mandatory drug testing were halted, as were visits, for the majority of the reporting period. Equally, transfers in from other prisons were minimal during this time.



## **5. Fair and humane treatment**

### **5.1 Accommodation, clothing, food**

5.1.1 It is the Board's view that the various types of accommodation throughout the prison are up to a good standard; the rooms are fully furnished with TVs and lockable cabinets. The prisoners are encouraged to take personal responsibility for themselves and their possessions.

5.1.2 The Board was pleased to see the refurbishment of the showers and lavatories along with internal and external painting across the prison.

5.1.3 An area of exceptional quality is the mother and baby unit, which is bright and safe. It is a pity that it was unused for its purpose during the pandemic, serving instead as a place for vulnerable women to live away from the main population. The unit has recently reverted to its original purpose of accommodation for mothers and their babies.

5.1.4 During the pandemic, single occupancy rooms were increased by the addition of 48 temporary pods on the rear lawn, thus ensuring that social distancing measures were easier to maintain. These have proved very popular with most of the prisoners, who have appreciated having their own space.

5.1.5 Women wear their own clothing.

5.1.6 Food is generally of a high standard and comments received from the prisoners indicate that the few complaints are noted and acted upon.

### **5.2 Segregation**

5.2.1 The prison does not have a segregation unit as such, but does have a bedsit where prisoners who are considered 'at risk' (of self-harm, because of illness or who just need some time away from others) can be accommodated and observed. Those who warrant segregation because of poor behaviour are sent back to closed conditions following adjudication.

### **5.3 Staff - prisoner relationships, key workers**

5.3.1 It is acknowledged that staff-prisoner relationships are generally very good and that prisoners feel able to talk freely to staff. However, there have been occasions when prisoners have come to the IMB with concerns that staff have not always been straightforward with them. Upon investigation, it transpires that there has been a misunderstanding or a lack of communication rather than anything more sinister. Matters are usually resolved without delay.

5.3.2 Personal officers completed their roles wherever staffing levels and Covid infections/isolation permitted.

## **5.4 Equality and diversity**

5.4.1 After the end of the reporting period, a new post of equalities manager was created in October 2021 and 60% of her time is dedicated to equality and diversity activity. Additionally, two officers have a total of 15 hours allocated to support the equalities manager in her work.

5.4.2 Each protected characteristic had a manager allocated as lead with a member of staff to support, and there are nine resident representatives spread across the protected characteristics. Attendance at the quarterly meeting of resident representatives has increased and residents are taking the opportunity to influence decisions in a positive manner. This transfers to their attendance at the diversity, and equality action team (DEAT) meetings where as many as five have attended at any one time. Two equalities resident representatives support all the protected characteristics representatives.

5.4.3 A priority was updating the action plan which incorporates the Lammy recommendations as well as protected characteristics and departmental actions. Progress was reported and recorded at every DEAT meeting. The plan was active and dynamic, and actions were achieved and completed. However, some action points had to be put on hold due to Covid. An older resident has taken on the role of older people's representative, and some craft activities for the over-50s had started but had to be curtailed due to the restrictions imposed by Covid. The race representative took the initiative in running a sickle cell disease awareness event, which proved to be both popular and informative.

5.4.4 The calendar of events continued throughout the lockdowns, whilst having due regard to Covid restrictions. Key to this has been the cooperation between staff and residents, who have worked together to produce activities and events throughout the reporting period.

5.4.5 The use of discrimination incident reporting forms (DIRFs) has been encouraged and a dedicated post box for DIRFs is available, with only members of the equalities team having access to it. There were 14 DIRFs submitted in the reporting period, seven of which were from a single resident regarding disability issues which were successfully resolved. Others were allegations against different members of staff but, on examination and after discussion with both sides, were deemed to be caused by a lack of understanding and consideration. All were resolved to each party's satisfaction.

5.4.6 At the time of reporting, 9.57% of residents identified as black, Asian or minority ethnic (BAME). Lammy recommendations are being followed up and the monitoring of incentives and earned privileges (IEP) shows nothing disproportionate.

5.4.7 A transgender policy has been incorporated into the action plan. It is planned that work will be undertaken in the future to develop a young people's policy, which will then be incorporated into the Action Plan.

5.4.8 A package for equalities has been developed for staff induction.

5.4.9 The two BAME staff sit on the race forum.

5.4.10 Residents who are neurodiverse have been supported by the adoption of the I AM care plans, with specific needs being identified and appropriate support put in

place. Quarterly neurodiversity meetings have been held and an action plan is being developed which will focus on creating a neurodiverse environment.

5.4.11 For residents with mobility issues or serious specific disabilities, there was a buddy system. Staff have received appropriate training, and care and management plans have been introduced which are discussed weekly by multi-disciplinary teams and circulated to all staff.

## **5.5 Faith and pastoral support**

5.5.1 The chaplaincy team is based at HMP New Hall and, whilst they were unable to deliver any services or group work throughout the pandemic, they continued to offer pastoral support to individuals.

## **5.6 Incentives schemes (IEP)**

5.6.1 Super-enhanced status was launched towards the end of the year, with one resident receiving the super-enhanced status.

## **5.7 Complaints**

5.7.1 During the reporting period, and particularly since the beginning of the pandemic, there was a reduction in the number of complaints received. It would appear that this may be due to the lack of transfers in and the, often attendant, issues of property going missing.

5.7.2 There were a total of 57 complaints, although a proportion of these were to be redirected to other prisons where the complaints arose. Complaints were dealt with within the time limits allowed.

## **5.8 Property**

5.8.1 As stated above, there have been very few issues regarding property, due mainly to the lack of transfers into Askham Grange. Those that have arisen have been referred to the sending prisons for resolution where appropriate. As women are currently not sharing rooms, there have been no issues with loss of property on site.

## **6. Health and wellbeing**

### **6.1 Healthcare general**

6.1.1 Healthcare services are provided by Practice Plus Group (PPG, previously Care UK), although they do not offer 24-hours per day coverage. Some services are provided in the community, namely dentistry, optometry, podiatry and physiotherapy. X-rays, hospital appointments and in-patient care are usually provided by York District Hospital.

6.1.2 Staffing at the commencement of the reporting period was four, and there was reliance on agency/bank staff to maintain the appropriate level of service. Since July 2020 there has been a full complement of nine staff in post.

### **6.2 Physical healthcare**

6.2.1 Due to the Covid-19 pandemic, for more than 15 months of the reporting period, the establishment has been subject to lockdown. It is worth noting that in the period covered by this report, only two prisoners contracted Covid-19.

6.2.2 Other matters to note include:

- Urgent face to face healthcare appointments have been maintained with GP, psychology and psychiatry services, the community psychiatric nurse (CPN) and psychosocial support.
- Healthcare services provided in the community have remained the same with the exception of some dental procedures.
- Vaccinations have been offered to all prisoners at Askham Grange and the take-up rate has been consistently high.
- High-risk, vulnerable women shielded and were housed in the mother and baby unit away from the main population of the prison.
- Isolation and accommodation policies to deal with those prisoners who are symptomatic, have been in contact with a confirmed Covid-positive person, or who have newly arrived at the establishment, have been in place since the first lockdown and continue to be implemented

6.2.3 Askham Grange, together with its sister prison HMP New Hall, are in the top 5% of prisons for the number of Covid-19 vaccinations completed. This is due in no small part to the working together of both healthcare and prison staff to reinforce the importance of keeping safe and keeping others safe also.

6.2.4 A healthcare patients forum was introduced in May 2021. Resident representatives are invited to attend and can raise topics for discussion in addition to those put forward by healthcare management. The forum has been well received by residents. The IMB member on rota duty attended one of these meetings in June as an observer and found it to be inclusive, lively and a genuine opportunity for residents' issues to be addressed and ideas to be discussed.

6.2.5 In the 12 months up to 30 June 2021, healthcare received two complaints, both of which were resolved and closed within a month after face to face meetings. In contrast, some 14 compliments about healthcare provision were received.

### **6.3 Mental health**

6.3.1 In the first year of the pandemic, prisoners' mental wellbeing was described as 'declining slightly'. This seems to be in no small part due to the fact that all family and friends visits to prisoners, as well as all community and paid work opportunities, were suspended during lockdown. In order to mitigate the negative effects of this, various measures were implemented by the senior management team (SMT), including the extra £5 per week phone credit (which was given to all prisoners) and the introduction of Purple (video) Visits twice weekly to maintain contact with family and friends.

6.3.2 Additionally, a mental health awareness week on the theme of 'kindness' was strongly promoted and a mindfulness room was set aside for the use of the women from May 2020.

6.3.4 Mental health and psychosocial staff worked during the Covid-19 lockdowns to deliver mindfulness and cognitive behavioural therapy (CBT) based interventions to prisoners to manage anxieties and, in particular, the CPN has intervened to assist women identified as being at risk.

### **6.4 Exercise, regime**

6.4.1 Askham Grange is an open prison and so prisoners are not locked in their rooms and are free to walk in the grounds, although not in the hours of darkness or in the time they should be working.

6.4.2 With the onset of the pandemic, exercise regimes were curtailed and the on-site gym was closed. The women were also prohibited from using the outdoor exercise equipment initially, although that was allowed again in June 2020, with the proviso that everyone using the equipment followed the strict guidelines for preventing the spread of possible infection.

6.4.3 Although various initiatives were proposed and introduced, take-up was poor. This is also the case for the various initiatives set up for those aged over 50. For those whose health indicates that a fitness programme would be of benefit, there is a process for individuals to be assessed by healthcare and referred to the physical education instructor (PEI) for a tailored programme of exercise. At the end of this reporting period, no women were on an exercise referral programme.

### **6.5 Drug and alcohol rehabilitation**

6.6.1 Recovery-based programmes were provided and at the end of the reporting period, 22 women were on the substance misuse worker's caseload.

### **6.6 Soft skills**

6.7.1 Dietary advice and sessions on mindfulness, wellbeing and yoga were all provided at Askham Grange by various departments, including healthcare and the PEI.

## **7. Progression and resettlement**

### **7.1 Education, library**

7.1.1 Education maintained a high standard of remote delivery to learners during Covid-19 lockdowns. On 29 March 2021 there was a return to restricted face to face teaching, which allowed just four residents in the classroom for an hour at a time.

7.1.2 The education manager became learning and skills manager in May 2019 and is working more strategically, with greater involvement in the delivery of the service across the prison. She played a key role in integrating the new neurodiversity agenda with the I AM programme (Askham Grange being the second prison, after Leeds, to adopt this programme) and the new key worker sessions. There was a neurodiversity forum that met monthly. One resident is producing a PowerPoint presentation aimed at deepening understanding of the subject, which includes personal experiences of both staff and residents of living with neurodiversity.

7.1.3 The learning and skills manager held wellbeing meetings with residents in response to concerns about residents' emotional, spiritual, physical and academic wellbeing during lockdown. She tried to meet with every resident and carried out review meetings as often as required. Small practical issues were raised which could be resolved, and the discovery of hidden talents amongst the residents was a revelation. One resident wrote a poem and sent it to David Attenborough, and received a highly complimentary reply.

7.1.4 The biggest impact on education this year was having to deliver training to residents remotely during Covid-19. There was good participation from most learners, but some struggled with independent learning. As a direct result of Covid-19 and a lack of education provision in sending prisons, 30% of new residents arriving are below entry level 3. The prison re-engaged with the Shannon Trust to support lower-level reading and introduced a 'times two' initiative for lower-level maths learners. These initiatives offered support from a mentor in order to gradually build confidence in these subjects before starting classes in education. The prison purchased a support programme for lower-level learners consisting of DVDs and booklets which they could use in their own rooms. The aim was to ensure that all residents would be up to level 1 prior to release.

7.1.5 The annual delivery plan was completely revised to meet the new needs of residents. Shorter courses were required to meet the needs of those wanting to go out to paid work as soon as they were risk assessed (following changes to release on temporary licence/ ROTL), as were courses that were more general in preparing residents to be valuable employees and support their wellbeing. Residents needed to have achieved at least level 1 maths and English and might also be required to undertake community work or work placements prior to starting paid work.

7.1.6 The curriculum focused on functional skills, open awards in physical health and mental wellbeing, financial awareness and employability and professional development, food safety and cleaning principles. There were some concerns expressed about the closure of the hair and beauty courses, particularly from residents arriving from other prisons, as they had anticipated being able to continue their courses. However, once the connection between ROTL and shorter courses had been explained, they accepted the changes.

7.1.7 Once it is possible to return to delivering practical courses, professional behaviours, understanding enterprise, hospitality, customer service and practical cleaning courses will be introduced. Courses incorporate a blended learning approach, with residents pursuing work in their own rooms as well as in class and with practical courses being assessed in 'real' work areas. This has given the residents greater ownership and responsibility for their learning.

7.1.8 Education staff undertook training during Covid-19 and were fully trained to embed digital literacy in all lessons. Additionally, there was an upgrade to Virtual Campus 2 and both prison and education staff received training.

7.1.9. The Leeds Beckett University 'psychology of the brain' course has continued and was popular during lockdown. The IT suite was open throughout lockdown so that women studying with the Open University were able to continue with tutor-marked assignments. There was an increase in Koestler entries this year and some work from Askham learners has been selected for exhibitions in Sheffield and Ripon.

7.1.10 The library was open two days per week, enabling two residents at a time to use it for up to 20 minutes. All residents had access to DVDs. An eight-week programme was purchased by the Governor (immune system optimisation, level 2) which links to activity in the gym and has the benefit of being able to be done in the residents' own rooms.

## **7.2 Vocational training, work**

7.2.1 Education, training and work were all affected by the restrictions imposed as a result of the pandemic. Prisoners who would normally have been working at placements in the community were unable to continue in that employment but were given work to do within the prison.

## **7.3 Offender management, progression**

7.3.1 Again, Covid restrictions had a significant impact on the work that was able to be done in relation to offender management and progression.

## **7.4 Family contact**

7.4.1 Family and significant others' meetings continued remotely during lockdown, with Prison Advice and Care Trust (Pact) and Barnardo's workers dialling in to join the meetings. Working towards agreed targets continued, although some had to be put on hold (e.g. the setting up of a families forum, which should have happened in December 2020). Family days were suspended but it is hoped that they will be restarted soon and that overnight visits in Acorn House will be reintroduced.

7.4.2 Restrictions on face to face visits, following the complete suspension of them initially because of the pandemic, caused a considerable amount of distress amongst the residents and their families. The use of FaceTime and the extra phone credit was appreciated by residents as the most effective and flexible way of maintaining contact with families. The Pact worker has been supporting those residents who needed it.

7.4.3 The Pact worker has been working remotely, delivering her service by telephone, contacting individual residents who have been referred via the offender management unit (OMU). The cases she has dealt with have been the more urgent ones, often linking to safeguarding and Children's Services. Her work has been hampered by Children's Services closing more cases than usual and consequently, family support has been withdrawn.

7.4.5 There has been an increase in the use of the national Prisoners' Families Helpline, with contacts and emails forwarded to the Pact worker. She has spent a considerable amount of time explaining the restrictions and the reasons for them to distressed family members.

## **7.5 Resettlement planning**

7.5.1 Monitoring of resettlement work has been severely limited due to the pandemic. The Pact worker was unable to deliver any group work throughout lockdown but is planning to resume group work with small groups of three or four women as soon as allowed. She prepared booklets for the women to work on, both as part of coursework and for self-study.

7.5.2 The Pact Welfare Grants fund started in May, providing things such as Asda vouchers, mobile phones for women on release to enable them to make FaceTime calls (subject to risk assessment), and supporting women with underlying health issues into hostel settings. There were 55 applications submitted for the grants and since January 2021 55 women have received grants and 35 have received mobile phones.



## The work of the IMB

### Board statistics

Recommended complement of Board members	8
Number of Board members at the start of the reporting period	7
Number of Board members at the end of the reporting period	5
Total number of visits to the establishment	160 (2019-2021)
Total number of shifts on the 0800 telephone line*	Unknown
Total number of segregation reviews attended	N/A

\*if relevant

### Applications to the IMB (including via the 0800 telephone line)

<b>Code</b>	<b>Subject</b>	<b>2021</b>	<b>2020</b>	<b>2019</b>	<b>2018</b>
A	Accommodation, including laundry, clothing, ablutions				
B	Discipline, including adjudications, IEP, sanctions		<b>2</b>		
C	Equality				<b>1</b>
D	Purposeful activity, including education, work, training, library, regime, time out of cell	<b>2</b>			<b>1</b>
E1	Letters, visits, telephones, public protection restrictions				
E2	Finance, including pay, private monies, spends				
F	Food and kitchens				
G	Health, including physical, mental, social care	<b>2</b>		<b>1</b>	
H1	Property within this establishment			<b>1</b>	
H2	Property during transfer or in another establishment or location				
H3	Canteen, facility list, catalogue(s)			<b>1</b>	
I	Sentence management, including HDC, release on temporary licence, parole, release dates, recategorisation		<b>1</b>		
J	Staff/prisoner concerns, including bullying		<b>1</b>		<b>1</b>
K	Transfers				
L	Miscellaneous, including complaints system	<b>2</b>	<b>3</b>	<b>3</b>	
	<b>Total number of applications</b>	<b>6</b>	<b>7</b>	<b>6</b>	<b>3</b>



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