Annual Report of the Independent Monitoring Board at HMP Frankland

For reporting year
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Contents

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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 the establishment[1]

HMP Frankland opened in 1981 and was the first purpose-built dispersal prison, which is a prison created to house category A prisoners (who pose the most threat to the public, police or national security should they escape), whose sentences are over four years; the prisoners can be moved to any of the other secure prisons in the dispersal system at short notice, to support their rehabilitation and avoid overcrowding. It is situated on the outskirts of Durham city, providing a maximum-security environment for adult convicted men. In 2019, following the national configuration programme, Frankland was designated as a prison with a training function, its purpose being to settle prisoners into the prison environment and identify and address their offending behaviour and needs. This has resulted in little change, other than prisoners being transferred to Frankland earlier in their sentence.

The prison has an operational capacity (the maximum number of prisoners that can be held without serious risk to safety, security, good order and the proper running of the prison) of 846 and has operated close to capacity in the reporting year. An important factor is the prison's location, particularly as the most northerly high security prison and the most distant for many families, friends and professionals visiting prisoners. In addition, public transport links from the nearest railway station to the prison are poor.

The main prisoner accommodation consists of 11 units, as follows:

- Four original wings – A, B, C and D. Each can house up to 108 vulnerable prisoners.
- Two wings, F and G, which opened in 1998. They can house up to 120 and 70 ordinary location prisoners, respectively.
- The Westgate unit (capacity 65) opened in 2004 for prisoners with severe personality disorders. It includes the psychologically informed planned environment (PIPE) unit, with a capacity of 21, which opened in May 2012.
- J wing, which opened in 2009 and can house up to 120 ordinary location prisoners.
- A separation centre, which opened in 2018 and was the first in the UK prison estate exclusively to hold prisoners with extremist ideological views under Rule 46A (when prisoners are separated, or segregated, in the interests of national security).
- Frankland has a segregation unit, which is also known as the management and progression unit, or MPU, which has a capacity of 28 cells, including two designated cells that are only used for close supervision centre (CSC) prisoners. (CSCs are small, specialist units located within six of the high security prisons to manage the most disruptive, challenging and dangerous prisoners.)
- A close supervision centre (CSC) which opened in 2024. This 10 cell specialised unit, which operates under a national coordinated management strategy, is designed to hold prisoners under Rule 46.

[1] Figures included in this report are local management information. They reflect the prison's position at the time of reporting, but may be subject to change following further validation and therefore may not always tally with Official Statistics later published by the Ministry of Justice.

The following agencies provide support to the prison:

- Spectrum provide the following services: Healthcare (nursing and support), Therapy, Pharmacy, GP and Clinical Substance Misuse. Non-Clinical Substance Misuse is provided by Humankind. Tees, Esk and Wear Valleys Foundation Trust provide Mental Health Services.
- Dental Services are provided by Burgess & Hyder Dental Services.
- Learning and skills development was provided by Milton Keynes College, but at the end of the reporting period Novus provided the service
- Security support is provided by Durham Police (two police liaison officers).
- Prisoner escort services are provided by GEOAmey for all prisoners other than category A.
- Facilities maintenance, cleaning and other small works are provided by Amey plc.

The following voluntary organisations and volunteers help in the smooth running of the prison:

- North East Prison After Care Society (NEPACS) volunteers work alongside prison staff to assist in the day-to-day running of the visitors' centre and in providing support to families.
- The Sunderland branch of the Samaritans provides training for prison Listeners and Mind provides counselling support for prisoners with mental health issues.
- Shannon Trust is a charity that delivers peer-led literacy and numeracy programmes to prisoners.

3. Key points

3.1 Main findings

Safety

- Comparable information with other prisons in the long term high security estate (LTHSE) over a number of months shows Frankland has fewer incidents of violence. This supports the Boards view that even allowing for some serious incidents HMP Frankland is a safe prison.
- Gang affiliation in HMP Frankland has the potential for harm to staff and prisoners and there is a continuous risk analysis of how best to locate these prisoners to reduce the potential impact for disorder.
- Spice (a psychoactive substance) use remains prevalent despite the best effort of staff to intercept illicit items.
- Drone incursions have notably increased through the reporting period
- A rat infestation was discovered affecting the search dog kennels, adjacent residential wings and staff areas. This was promptly resolved.
- Separation centre prisoners were relocated in April following a serious assault with the unit being modified and prisoners returning from July.

Fair and humane treatment

- Missing property remains an issue when prisoners are transferred to HMP Frankland.
- Prisoners are waiting lengthy periods to collect their property after they arrive at reception.
- Time out off cell has been reduced due to staffing issues and workshop closures causing restricted regimes.
- Prisoners securing accumulated visits closer to home has remained a challenge due to limited space at the receiving prison which has been attributed to the wider prison estate operating close to capacity.
- Refurbishment works continued through the reporting period reducing water ingress, but these works have impacted prisoners time out of cell.

Health and wellbeing

- The shortage of beds in secure inpatient units is an issue for those prisoners needing these facilities.
- Missed appointments have been a regular source of applications made to the IMB which may be attributed to staffing.

Progression and resettlement

- Reduction in education provision has limited the opportunities for personal development.
- Workshop closures attributed to ongoing upgrade works have restricted prisoner opportunities to work and gain transferable skills.

3.2 Main areas for development

TO THE MINISTER

The change in contract from Prison Education Framework to Prison Education Services has led to reductions in education provision. The new contract has reduced the budget available for the establishment to spend on education provision when compared to the budget provided by the previous contractual arrangements. The changes have directly led to a loss of educational staff, reduced educational opportunities for prisoners, a less effective curriculum and a reduction in outreach provision for those who are unable to access the education department.

What are your plans to redress the impact of this policy change which directly affects prisoners' progression, personal development and/or mental health?

TO THE PRISON SERVICE

What are the long-term plans for supporting prisoners with dementia to enable them to progress for example by completing risk reduction course work.

TO THE GOVERNOR

Car parking is increasingly difficult at the prison due to the numbers of staff and contractors at the site. The Board is aware prisoners complain that their relatives can’t get parked. The Board also notes the constant security issues raised by the parking of unregistered cars on site. Can anything be done to alleviate the situation?

3.3 Response to last report

Issue raised	Response given	Progress
Are HMP Frankland, or other prisons within the LTHSE, the best place to house prisoners with dementia?	Placement in LTHSE prisons is based primarily on an individual’s security classification and risk to the public, rather than health condition. Sentencing decisions are a matter for the independent judiciary, who consider all relevant factors, including any neurological or mental health conditions, in accordance with guidance set by the Sentencing Council.	There are prisoners with severe dementia whose care needs may be better met outside the prison environment.
Will the Prison Service challenge the service provided by outsourced maintenance contractors, which seems to result in very long delays for repairs of equipment?	We recognise how important a reliable and responsive maintenance service is for the smooth operation of the prison and the safety and wellbeing of all who live and work there. We are working closely with the maintenance contractor to enhance performance and ensure service delivery meets expectations.	Construction work seems to be done well but replacing or mending broken equipment - laundry, kitchen, etc - still takes a long time.

	Through ongoing discussions and collaboration, we have reinforced key performance indicators (KPIs) such as response time, completion rates and this process is continuing. To support improvements, we have implemented regular audit and monthly reviews of work and outstanding defects. Clear communication has been prioritised between the management team and facilities management provider, allowing us to jointly address challenges and refine operational strategies. The estates meeting, chaired by the Deputy Governor and attended by senior staff and an AMEY manager, also continues to allow for effective tracking of outstanding issues and escalation where needed. The specific concerns you raised about kitchen equipment have already been escalated via the agreed national process. We will keep this under review to ensure that the issue is resolved satisfactorily	
What is being done to reduce the availability of drugs in the prison?	Increased testing, searches, testing of mail, drone surveillance	Various initiatives are in place.

Evidence sections 4 – 7

4. Safety

4.1 Reception and induction

As HMP Frankland is part of the long-term high security estate (LTHSE) all prisoners who arrive in reception are prison-to-prison transfers. Staff ensure there is a meal offered for late arrivals and all prisoners arriving have the option of purchasing a canteen pack. A debt management policy in place, which allows wing managers to provide canteen items to cover new arrivals until they are settled into the daily regime and can place a canteen order of their own.

Prisoners locating in Frankland who are suspected of having unauthorised items secreted are subject to a full body scan and those who fail are located in dry conditions until the body scan produces a clear result. Dry conditions in Frankland mean they are in a cell with a bunk, mattress and sometimes bedding depending how long they are in dry conditions. They have no property or anywhere to hide illicit items when they fail the body scanner. The cell has a toilet that is checked following use to see if they pass anything. Once they pass the body scanner, they are out of dry conditions and are provided with a normal cell with flushing toilet.

A two-week induction period for new arrivals consists of a useful handbook and presentations. A Listener (prisoners trained by the Samaritans) is always available to offer support. During this period, new arrivals are assessed by healthcare staff, covering both physical and mental health, as well as drug and recovery alcohol teams (DART). In addition, they will be visited by the chaplaincy team and staff from psychology. The activities hub will risk assess each prisoner for employment opportunities and the population management team will also consider the most appropriate location for the prisoner to be housed.

4.2 Suicide and self-harm, deaths in custody

During the fortnightly SIM (safety intervention meeting), prisoners on an open assessment, care in custody and teamwork document (ACCT), which is used to support those at risk of self-harm and suicide, are discussed at length, with young adults (under 25) and men serving an Imprisonment for public protection (IPP) sentence highlighted for additional support. Any prisoners segregated in the management and progression unit (MPU) and Separation Centre (SC) held under Prison rule 45 are also subject to additional scrutiny to ensure they are appropriately located. There is a dedicated psychology resource provided to support prisoners who are segregated. They produce safety case reviews of prisoners who frequently self-harm, including their triggers and helpful information to support them. Over the reporting period, 306 ACCT documents were opened to support prisoners, a decrease of six compared with the previous reporting year.

All prisoners have access to Listeners, who are available 24/7 to support other prisoners in personal crisis. The prison has a total of 20 trained prisoner Listeners who are separately assigned to either the main location wings or the vulnerable prisoners wings. This is a decrease from 25 Listeners at the start of the reporting year. There is a dedicated Listener suite in the healthcare wing, which was used on 16 occasions during the reporting period. Prisoners also have access to a freephone phone service, available through the in-cell telephony. During the reporting year staff

and prisoners have reported long waiting times to connect to a Samaritan overnight, this has been escalated and attributed to a limited number of Samaritan volunteers who staff the phones during the night.

There have been 11 deaths in custody (DIC) during the reporting period, an increase from five in the previous reporting period. Sadly, there has been a significant increase in DICs from individuals who were elderly or suffering from long term health conditions. In every death in custody, the Prisons & Probation Ombudsman (PPO) conducts an investigation and issues a report with one pending inquest outcome and the remaining ten in progress at the end of the reporting period.

4.3 Violence and violence reduction, self-isolation

The total number of violent incidents recorded over the reporting period was 144, a decrease of 16 compared with our last reporting year. Of these, 101 incidents were assault on a prisoner/fighting, with 43 being actual/attempted assault on a member of staff. Of the total of these assaults 9 were deemed serious which involved hospital treatment. While this number is always an unwelcome figure, it should be noted that it is lower than other dispersal prisons (housing category A prisoners), which may be attributed to the stable population and the continued efforts of staff through various proactive interventions to reduce violence.

Fortnightly SIMs are attended by a multi-disciplinary team, with a strong focus of identifying the cause of self-harm and self-isolation. Challenge, Support and Intervention Plans (CSIPs), are a process used in prison to support and manage those who pose an increased risk of violence. The total number of CSIPs implemented during the reporting period was 127 (up from 108). The Board randomly completes welfare checks for prisoners on CSIPs and found no issues relating to access to regime. However, we do acknowledge the challenge for staff to facilitate a daily regime. It is commended through enhanced collaboration between Safer Custody, Security, Intelligence and wing staff they have manged to introduce a program where prisoners under CSIPs are risk assessed to enjoy regime in group to reduce isolation.

Special accommodation was used 36 times during the reporting period (up from 28 times during the previous reporting period). The use of this facility is only considered as a last resort, when it is assessed by the duty Governor that the prisoner's immediate risk cannot be safely managed in a standard cell. The decision to place someone in special accommodation is continually under review, with the prisoner being removed as soon as there is a reduction in risk. The IMB is notified whenever a prisoner is put into special accommodation and when they return to a standard cell. During the Board's monitoring visits, a random selection of prisoners who have been held in special accommodation are consulted on their experience when they return to the wings; no issues have been reported during the period. During the reporting year, the special accommodation was furnished and used as a standard cell nine times due to capacity issues.

At the end of the reporting year, the prison had identified 48 known criminal gang members located in Frankland, This has the potential to make the environment more volatile, increasing the risk of potential harm to staff and prisoners. Continuous risk assessment is undertaken to determine the most appropriate placement of these prisoners to reduce the likelihood of disorder and reduce associated risk

4.4 Use of force

There have been 271 use of force incidents recorded during the reporting year, an increase of 70 from the previous reporting period. HMP Frankland management has a robust and challenging policy regarding use of force events. The IMB randomly attends the monthly use of force meetings to observe and scrutinise all segregation monitoring and review group (SMARG)/use of force (UOF) meeting minutes and found no incidents of concern.

Batons were drawn but not used on seven occasions during two incidents during the reporting period and provide a good example of the interpersonal skills by staff, who can de-escalate before a baton is required.

PAVA (an incapacitant spray, similar to pepper spray) was drawn 14 times and deployed nine times.

The use of body worn video cameras (BWVCs) continues to improve, and the management has advertised the benefits of activating BWVCs, as recent court cases have seen prisoners prosecuted for assaults after the incidents were captured. All planned interventions during the reporting year have been recorded; these have been reviewed monthly by the Board.

Table 1: Reasons for use of force

Reason	Reporting period
Actual/Attempted assault on member of staff	28
Physical Threat	30
Assault on a prisoner/fighting	64
To prevent harm, assault or harm to others,	92
Refusal to be searched/Direct order	2
To Prevent Self Harm	2
Risk reduction application of cuffs for escorting	23
Verbal Threat	3
Refused to relocate	23
Incident at height	1
Total	**271**

4.5 Preventing illicit items

The dedicated search team (DST) based within HMP Frankland is often seen at work on the Board's monitoring visits but can be deployed across the wider prison estate.

Their work is enhanced by the use of search dogs, with regular finds of illicit items detailed in table 2, below. All new prisoners who are suspected of concealing illicit items are subject to a full body scanner at reception and are placed in dry conditions until they can pass the scanner with a clear result. Drone sightings over the prison continue to increase, along with rule 39 (legal mail) testing positive for drugs, in addition to the more traditional methods of passing illicit items at social visits or during 'throw-overs'.

At HMP Frankland, there is a monthly requirement to conduct random mandatory drug tests (MDT) on 5% of the prison roll (approximately 42 tests per month). Over the majority of the reporting period, random and suspicious testing exceeded this target, with a prevalence of psychoactive substances and tradeable prescription medication.

Due to severe staffing issues and constant redeployment, the MDT random testing target and figures were unachievable for December 2024. In total only 22 Random tests were completed, all of which returned a negative result.

Table 2: Illicit Item Finds

Month	Drugs	Drug item	Weapon	Phone	Sim cards	Memory cards	Phone charger	Hooch	Ligature	Damaged items	Misc	Total
Dec24	6	3	9	3	0	1	0	7	2	2	23	56
Jan 25	3	0	6	5	48	1	0	7	3	5	5	83
Feb 25	1	6	7	4	1	0	0	3	0	5	15	42
Mar 25	5	4	13	1	0	0	1	4	2	1	19	50
Apr 25	12	2	6	1	2	1	0	2	0	8	28	62
May 25	6	0	9	5	2	3	3	3	1	4	5	41
Jun 25	3	0	10	6	4	0	3	0	0	2	6	34
Jul 25	2	2	9	2	0	2	1	0	0	2	5	25
Aug 25	5	1	8	3	1	1	1	3	0	1	10	34
Sep 25	7	0	7	0	0	3	0	3	0	2	14	36
Oct 25	9	2	4	0	0	0	0	2	3	5	9	34
Nov 25	9	1	6	0	1	2	0	3	2	2	22	48
Total	68	21	94	30	59	14	9	37	13	39	161	

5. Fair and humane treatment

5.1 Accommodation, clothing, food

Prisoners in Frankland are housed in single cells with a washbasin and toilet. There are separate showers on each wing for daily use by prisoners. From our observations, these continue to remain in good condition and are kept clean by the prisoners, who work as cleaners and take great pride in their work. As noted on our previous report, cells are provided for prisoners with mobility challenges, and these facilitate wheelchairs. The cells are still not ideal in all cases. It is still the case that few have limited access for the prisoner to move around in a wheelchair. There are three lifts and five stair lifts, so that prisoners can access other landings. On arrival, prisoners are provided with bedding, blankets, sheets and pillows. Each cell has a television and units to store their belongings and personal items. All cells are equipped with a phone, and prisoners can call approved numbers during allocated time periods - which is standardised across the LTHSE.

Prisoners have the option of ordering or receiving approved clothing from selected suppliers. Each wing has catalogue representative who attends a regular dedicated meeting to discuss any issues which was a good example of collaboration between staff and prisoners.

2025 has presented ongoing challenges for the kitchens with the cost of wholesale food and consumables presenting a constant challenge to provide both wholesome and nutritious food for the prisoners who live at Frankland. Currently they are over budget for many reasons.

Also, the kitchen team must provide further changes to prisoner food menus in 2026 which will be healthier, prisoners will have specific allowances for how much red meat and sugar to be consumed per week which will implement next year, this requirement has been instructed by the new food in prison policy framework.

This implementation presents the kitchen team with big challenges and it is vital to allow prisoners to be as informed as possible, and to assist with this staff have conducted food surveys and will be holding more prisoner group forums which the healthy eating steering group and gym staff will be present to assist in providing in depth nutritional advice to be considered when selecting menu choices.

Equipment breakdowns, broken trollies and ongoing fridge/freezer issues continue to be very impactful of the catering operation, but the staff and prisoners should be commended for ensuring the high standard of food they deliver has not been affected.

Challenges in getting equipment repaired remain, which is both very and frustrating and challenging for the whole team. A new contractor has been appointed and there has been a noticeable improvement in the response to faulty equipment with repairs being completed faster.

Religious festivals are a key focus in Frankland and these celebrations through the year are always successful and demonstrate the collaboration between staff and prisoners to deliver exceptional food with comprehensive menu delivered and the feedback from prisoners on the wing being positive.

To supplement the standard fare, prisoners on standard wings have access to kitchens on each wing to cook their own food, although the ovens and hobs are showing their age there has been a limited number of replacements installed during the reporting period. Prisoners held in specialist units had their cooking facilities withdrawn in April 2025 as part of a national review.

5.2 Segregation

The management and progression unit (MPU) has 28 standard cells and two special accommodation cells (where items such as furniture, bedding and sanitation are removed in the interests of safety). This unit forms part of the original footprint of the prison, which was based on an operational capacity of 430. IMB monitoring has evidenced that the main cells are constantly occupied. We are informed by staff when a prisoner is sent to the MPU and when the special accommodation cell is in use. From our observations, staff continue to be professional and supportive, particularly with some prisoners who present with extremely challenging behaviour. All prisoners on rule 45 (a segregation order) are subject to a segregation review board, chaired by a governor, with representatives from mental health, psychology, the offender management unit, chaplaincy and an IMB member, every two weeks which a full day is allocated. This ensures compliance with Prison Service Order 1700, which allows the prisoner to make representations so that the multi-disciplinary team can consider all evidence, for or against, continued segregation.

The MPU regime of offering daily telephone calls, exercise and shower time has remained in place during the reporting period.

Again, this year, in keeping with previous years the unit has operated at capacity, or near capacity throughout the reporting period. They continue to offer a multi-disciplinary approach to care and progression of prisoners held in the MPU despite a large proportion of the year without a consistent mental health nurse, however it must be noted that the mental health provision was maintained throughout, albeit by any of the nurses on duty. The unit also benefits from full time psychological support, offered by two psychologists who share the case load. Via this MDT approach the staff continue to successfully progress prisoners out of the MPU, by making successful referrals to such areas as discreet specialist units, secure hospitals, transfers to other prisons and use the six allocated cells on unit 2 of the Westgate.

In addition to the prisoners segregated under rule 45 there are also two dedicated cells utilised for Close Supervision Centre (CSC) prisoners who are managed by a national coordinated management strategy.

It is evident that Frankland's MPU staff continue to have success in progressing some of the most complex cases which is often done via hospital remittals and directed moves from other prisons.

The management of this unit promotes individual professional development of staff who are employed within the unit and ensures weekly supervision sessions are taking place with the psychology department, and other opportunities to enhance the specialist role they provide**.** Chaplaincy and the mental health team are a visible presence in the management and progression unit (MPU), where some of the prison's most challenging and vulnerable individuals reside.

During the Board's monitoring visits, a random selection of prisoners, who have been held in segregation, are consulted on their experience when they return to the wings; they reported that they had full access to the daily regime and reported no issues during their time in the unit.

The Board randomly observes the quarterly SMARG meetings and the fortnightly SIMs. These involve multiple stakeholders and focus on trends relating to reasons for, and the length of, segregation. All IMB Board members review the minutes of these meetings and have raised no concerns during the reporting period.

Table 3: Proven Adjudications

Month	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Number of proven adjudications	56	30	17	7	29	19	21	12	8	3	11	9	222

5.3 Staff and prisoner relationships, key workers

Staff and prisoner relationships over the reporting year, on the whole, continue to appear to be positive, from the Board's observations. Weekly wing forums, chaired by wing management, are well attended and feed into the monthly prisoner consultation committee (PCC) meetings, chaired by a Governor; Board members monitor these meetings and have observed positive outcomes for many of the issues raised. The IMB conducts checks on key worker entries over the reporting year and notes the additional quality assurance checks carried out by custodial managers, for which the Governor of the prison has a minimum target set at 10% per month. Key worker training is coordinated and delivered by uniformed prison offender managers (POMs), in conjunction with probation and psychology staff.

5.4 Equality and diversity

During the reporting period, 188 discrimination incident reporting forms (DIRFs) were submitted, averaging 16 per month, a decrease from 256 during the previous reporting period. Over this period, 113 DIRFs were rejected, withdrawn or reclassified as a complaint, as they did not relate to any of the protected characteristics outlined in the Equality Act, this is comparable to the 120 that were rejected or reclassified DIRFs from the previous reporting period.

Table 4: DIRFs Received

Month	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Rejected/ processed as a complaint/ withdrawn	4	17	21	26	21	11	10	22	10	23	18	5	188
Accepted DIRF	7	7	6	12	10	5	4	4	5	9	3	3	75
Upheld	0	2	0	1	0	1	1	0	3	3	0	0	11

The IMB's monitoring of DIRFs has revealed no issues of concern with the findings of these applications.

The diversity equality action team (DEAT) provide advice and support to foreign national prisoners many of whom have made enquires as to the Early Removal Scheme (ERS) which allows foreign national prisoners serving determinate sentences to be removed from prison and deported up to 18 months (or 270 days depending on sentence length) before their, or usually the halfway end point. Eligible prisoners must serve at least 25% to 50% of their sentence, depending on its length in collaboration with the Home Office who visit the prison for immigration surgeries.

The toilet in the healthcare centre waiting area is not fit for the disabled; measures to use wing facilities are in place, this situation is not satisfactory.

HMP Frankland seeks to ensure that all transgender prisoners are treated fairly and in accordance with the law. After a Pride event, transgender and LGBTQ+ support group meetings were combined to a bimonthly event.

Older prisoner numbers continue to grow; some of the provision in accommodation and for dementia needs improvement. There are some positive initiatives in place to improve provision, including using assistive technology such as bed and fall sensors or emergency pendants, similar to those found in the community. There are 429 prisoner who identify as disabled. Of this group, at the end of the reporting period 65 have a Personal Emergency Evacuation Plan (PEEP) in place. There are only eight disabled cells available for suitable prisoners, although not all prisoners who identify as disabled will require adapted accommodation.

Religious food provision continues to be a focal point of monitoring. Similarly to the previous reporting year, feedback for Ramadan was positive, and the kitchen staff were proactive, engaging the chaplaincy team and prisoner consultation committee wing representatives to enhance the menu options. Kosher meals are sourced off the premises at significant cost, above the daily funding allocation. Again, additional provision was made for the major Jewish religious festivals, such as Passover, which was positively received.

Table 5: Prisoner Nationalities November 2025

Nationality	Prisoners	Nationality	Prisoners	Nationality	Prisoners	Nationality	Prisoners
British	745	Chinese	2	Barbadian	1	Liberian	1
Irish	12	Hungarian	2	Belgian	1	Moldovan	1
Romanian	6	Jamaican	2	Chadian	1	Nigerian	1
Polish	4	Latvian	2	Columbian	1	Slovak	1
Congolese	3	Lithuanian	2	Eritrain	1	South African	1
American	3	Pakistan	2	Ethiopian	1	St Lucian	1
French	3	Portugese	2	Guinean	1	Sudanese	1
Spanish	3	Syrian	2	Indian	1	Turkish	1
Bangladeshi	2	Afghan	1	Iranian	1	Ugandan	1
Bulgarian	2	Bahamian	1	Iraqi	1	Ukrainian	1

5.5 Faith and pastoral support

Chaplains maintain a strong and consistent presence throughout the prison. Both full-time and part-time chaplains represent a broad range of major faith traditions.

The chaplaincy provides comprehensive pastoral care, including supporting prisoners in maintaining contact with family and friends, and participating in segregation review boards, safety intervention meetings, use-of-force reviews, and other key forums.

The department also leads the organisation of the highly valued family days and offers support to prisoners who are bereaved, including facilitating access to funeral services for family members where appropriate. In addition, the chaplaincy oversees the official prison visitors' programme.

During the reporting year the chaplaincy team delivered 260 services averaging two Roman Catholic per week, two C of E/Free Church per week and one Muslim per week.

In addition, the other religious denominations have on average one service per week with the exception of the Sikh prisoners who have worship for festivals around six times per year.

Table 6: Religious Denominations November 2025

Religious Group	% Prisoners
Agnostic	0.37%
Atheist	0.49%
Buddhist	2.92%
Anglican	18.88%
Baptist	0.12%
Methodist	0.37%
Orthodox	0.61%
Other	7.80%
Presbyterian	0.24%
Roman Catholic	21.80%
Latter Day Saints	0.97%
Hindu/Hare Krishna	0.49%
Humanist	0.49%
Jehovah's Witness	0.49%
Jewish	1.10%
Muslim (Shia)	0.12%
Muslim (Sunni)	18.64%
No Faith or Belief	17.66%
Pagan/Druid	5.36%
Quaker	0.12%
Rastafari	0.61%

Sikh	0.24%
Prefer not to Say	0.12%

5.6 Incentives schemes

Every prisoner receives at least one review per year. For new prisoners, an initial review can be held at any time but must be completed within three months of arrival. If a prisoner is on the basic (bottom) level, an automatic review occurs within seven days, and then at least every 28 days. The staff try to ensure that all target goals are explained and inform the prisoner of the steps required to progress to the standard level. Reviews included input from various staff members across the establishment, such as education and workshop staff, those involved in treatment programs as part of their sentence plan, and any other staff with whom prisoners have regular contact, such as a key workers.

All incentives scheme review decisions are discussed with the prisoner, and they receive a written explanation for the decision and guidance on the process for appealing, should they wish to challenge their level. This is done by following the prison complaints policy (COMP1).

The IMB frequently monitors the outcome of these reviews.

Table 7: Prisoner incentives scheme levels

Level	Percentage of Prisoners
Basic	2%
Standard	27%
Enhanced	71%

5.7 Complaints

Prison Rule 11 states that the Governor will consider complaints as soon as possible.

Prisoners must receive a response to their complaint within five working days of the complaint being logged. Working days are taken to be Mondays to Fridays, excluding public holidays. An interim reply must be given where it is not possible to give a full reply within the required timeframe. These replies must be informative and give an indication of when a full reply can be expected. During the reporting year 91.29% were answered within this time limit.

COMP1s are standard complaints, while COMP2s are confidential access complaints, often used for more sensitive matters.

Table 8: Summary of Prisoner Complaints

Month	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Comp 1	266	346	230	339	298	339	379	313	280	253	295	237	3575
Comp 2	11	23	29	35	20	24	34	45	22	24	27	15	309
Total complaints	**277**	**369**	**259**	**374**	**318**	**363**	**413**	**358**	**302**	**277**	**322**	**252**	**3884**

Month	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Total
Comp 1A	48	84	75	85	68	73	73	87	59	51	81	56	840
Returned	67	85	26	58	67	67	59	75	60	46	53	47	710
Interim Reply	14	35	50	47	41	49	93	56	52	48	63	37	585

5.8 Property

As in previous years the Board received many applications following prison-to-prison transfers. Unfortunately, despite the best efforts of the staff, many resort to Independent Prisoner Complaint Investigations (IPCIs) for resolution or escalated to solicitors to seek compensation, which is unnecessary in the IMB's opinion. Prisoner regularly wait excessive time to collect their property from Reception as staff are frequently deployed to other parts of the prison to ensure regime is maintained.

6. Health and wellbeing

6.1 Healthcare general

There are nine single cells available for in-patient care, and the unit is visited by a Board member every week. The facility also includes a palliative care suite, and reports from the Prisons and Probation Ombudsman (PPO) continue to highlight the high quality of palliative care provided. The Board has observed prisoners having an open door policy allowing family and fellow prisoner visits with fewer restrictions.

6.2 Physical healthcare

The waiting rooms, as reported in previous annual reports, remain a concern, due to lack of ventilation, and the toilets are not fit for use for prisoners with mobility issues. This has been compounded by water ingress effecting the electrics within the waiting are which frequently restricts the use of these rooms. The knock on effect is prisoners are having to wait on the wing before being called to healthcare. This exacerbate the staffing issue and restricts the daily operations when prisoner are moving. In general, despite the ongoing refurbishment works the failing fabric and infrastructure are requiring major work.

Monitoring of waiting times remains a key focus, with efforts to align them more closely with community waiting times.

Table 9: Healthcare waiting times

2025 overall average times over the full year Jan 25 – Dec 25			
Clinic	Number of days longest wait (routine)	Number of days longest wait (urgent)	Number of patients on waiting list
GP Clinic	14	1	39
Dental	79	3	75
Sexual Health	13	10	2
Podiatry	30	6	12
Physio	22	2	13
Optician	31	22	9

6.3 Mental health

Between the period of 1 December 2024 to 30 November 2025, the mental health team has successfully transferred eight patients to a secure psychiatric hospital. There is an issue with the lack of bed availability in secure inpatient units. The longest wait for transfer for a patient was 11 months, and the shortest was two months. When a patient is waiting for a hospital bed, the team maintain liaison with the respective ward to ensure up to date information regarding risk and mental health status is known to the receiving hospital. This ensures they are able to suitably prioritise their waiting list.

Mental Health Team

Staffing

The team is profiled for a team manager, clinical specialist nurse, advanced nurse practitioner, four clinical leads, support worker, highly specialised psychologist, higher assistant psychologist, clinical specialist speech and language therapist, psychological well-being practitioner, counsellor, with a clinic session from consultant forensic psychiatrists. However, the team has experienced staffing pressures due to shortages and sickness and it hasn't been operating at full profiled strength.

Interventions

Treatment interventions are offered on an individual basis and co-produced with the individuals. These include a range of psychological and pharmacological interventions and varying levels of intensity:

- Psychoeducation
- Safety planning and relapse prevention
- Trauma interventions, including Flash and EMDR
- Medication management and physical health monitoring
- Motivational work and goal setting
- Problem solving and the development of interpersonal skills
- Reasonable adjustments
- Cognitive Analytical Therapy (CAT)
- Cognitive Behavioural Therapy (CBT)
- Dialectical Behaviour Therapy (DBT)
- Compassion Focussed Therapy (CFT)
- Structured Clinical Management (SCM)
- Speech and Language Therapy
- Occupational Therapy, including sensory interventions
- Autism awareness
- Emotional literacy
- One page plan, which is an individualised summary of the patients' needs and strengths and is always co-produced.
- ADHD diagnostic assessment and treatment
- Referrals to secure hospitals
- Liaising with partner services including the Trust Autism Team
- Liaising with families and carers to support understanding the patient
- Phobia based CBT
- Social communication skills
- Sensory Process
- Memory Assessment

6.4 Social care

The ageing population of Frankland continues to increase, along with the associated conditions. The prison is seeking solutions to alleviate the challenges of managing an elderly and frail population, in addition to younger disabled prisoners. The Board welcomes that mobility and social care are at the forefront of focus. Wheelchair users have been reviewed and reassessed and prison staff use technology to monitor prisoners at risk of falling or seizure. However, much of the prison is still not

designed for an elderly population and presents challenges for anyone with limited physical mobility. There are a number of prisoners on the wings who receive care from a ‘buddy’, who is risk-assessed by staff to help with day-to-day assistance, but it is beyond policy for them to provide personal care.

6.5 Time out of cell, regime

As in the previous year, the prison has again had to close landings to minimise the disruption attributed to staff shortages due to sickness or training. During random checks on Rule 45, prisoners in both the MPU or on CSIPs on the wing all have confirmed they had access to their daily regime of exercise, showers and time to use the phone. Prisoners who have reached retirement age are unlocked throughout the day.

6.6 Drug and alcohol rehabilitation

The drug and alcohol recovery team (DART) has a caseload off 141 (up from 112 during our previous reporting year), with 60 receiving opioid substitute therapy. They offer support to prisoners, with group initiatives, including health & fitness, Breaking Free Online (a recovery programme for alcohol and drugs), a computer-assisted therapy program and the SMART (self-management and recovery training programme for problematic behaviour). This is a four-point programme covering building and maintaining motivation, coping with urges, managing thoughts, feelings and behaviours and living a balanced life. In addition to the traditional one-to-one work inside the establishment, they also provide a family support programme, which currently has a caseload of ten.

Every prisoner is engaged during the induction process, and referrals are made by the mental health team, prison offender managers and key workers. As recovery is different for everyone and not a linear process, prisoners can rerefer at any time and as often as their recovery journey needs. The team provides ongoing support to prisoners at various stages of recovery, with additional assistance from accredited trained peer mentors. At the end of the reporting period, the peer mentoring programme had eight mentors providing support (down from 10 the previous year), covering most wings within the establishment.

Over the reporting period, 32 prisoners have been prescribed injections of buprenorphine to replace the traditional forms of opioid substitution therapy of methadone. This is an increase from 12 prisoners during the previous reporting period. This aims to reduce the abuse of tradeable prescribed medication among prisoners, as well as affording prisoners additional autonomy. Positive feedback continues for the use of buprenorphine and all seem to be responding well.

Naloxone training (on how to recognise the signs of opioid overdosing and how to respond) for HM Prison and Probation (HMPPS) staff is ongoing and is delivered by DART trained staff, both clinical and non-clinical, to address any and all queries during the training.

As was noted in our previous reporting year, staffing shortages have affected the small team, and the lack of male staff exacerbated the issue, due to the remaining female staff having to double up for appointments, particularly for those identified as 'risk to females' or when lone working is not possible.

However, the issue of availability of illicit drugs remains a concern.

6.7 Soft skills

A total of 34 Koestler Awards, for arts in criminal justice were received, representing an increase of nine compared with the previous year.

7. Progression and resettlement

7.1 Education, library

The situation regarding education in the prison has done a complete 180 degree turnaround compared with the previous report, which celebrated the excellent Ofsted report of 2024. The change in contract from Prison Education Framework to Prison Education Services has led to reductions in education provision. The volume of education provision available within the establishment has reduced compared with previous contractual arrangements. While national prison education funding may not have been reduced, local funding has been significantly reduced, in addition to rising delivery costs which have affected the volume of Core Education that could be commissioned from October 2025. The changes have directly led to a loss of educational staff, reduced educational opportunities for prisoners, a less effective curriculum and a reduction in outreach provision for those who are unable to access the education department.

Staff numbers have gone from 23 to 16 FTE with a reduction in the number of admin staff, tutors and management positions with staff being made redundant. For example, instead of two maths tutors and two English tutors there is now only one of each which reduces the functional skills provision across the whole prison. There are some gaps in provision where teachers are going through recruitment with 14 sessions per week that haven't run since October.

For prisoners, this means that there has been a reduction in full-time education places from 176 to 134. Outreach has been reduced to two sessions a week, so prisoners who are behind the door (who cannot access the education department so need education delivered to their cells), in the MPU, CSIPS, CSC and those with general disabilities, have limited access to education.

When a prisoner arrives at the prison, he should be screened to assess his initial assessment scores and learning difficulties and disabilities needs. However, under the new contract all prisoners are to complete these on the computer, which is a change from the previous contract whereby paper-based versions were used. So, for prisoners that cannot access a computer for reasons of not been able to attend education this is difficult as there are no paper-based digital skills assessments available. (Where digital assessment is not possible, paper-based contingency assessments are available for English, maths, ESOL and reading; however, no equivalent paper-based assessment is available for digital skills.) The digital education platform (DEP) system should therefore have been installed on specialist units and wings to allow those prisoners equal access to complete the new prison education service (PES) assessments but sadly Frankland received fewer computers under PES to enable this. Furthermore, the new digital system installed by the national digital team has only worked sporadically at Frankland with continuous wifi issues that to date have still not been addressed.

The careers, information, advice and guidance (CIAG) contract that was commissioned locally by Frankland has now changed to a national contract under PES, again Frankland has had a reduction in CIAG staffing from 1.5 staff to just 0.5 and the contract no longer meets the needs of prisoners at Frankland. The national CIAG contract operates on a Lot basis rather than being commissioned specifically

for an individual establishment. Providers are allocated a financial envelope across the Lot and are responsible for deploying resources flexibly to meet the needs of learners across the prisons within that Lot. ('Lot' is a grouping of prisons covered under a single contract area. It is not the same as a geographical region, as a Lot may include establishments from more than one region.)

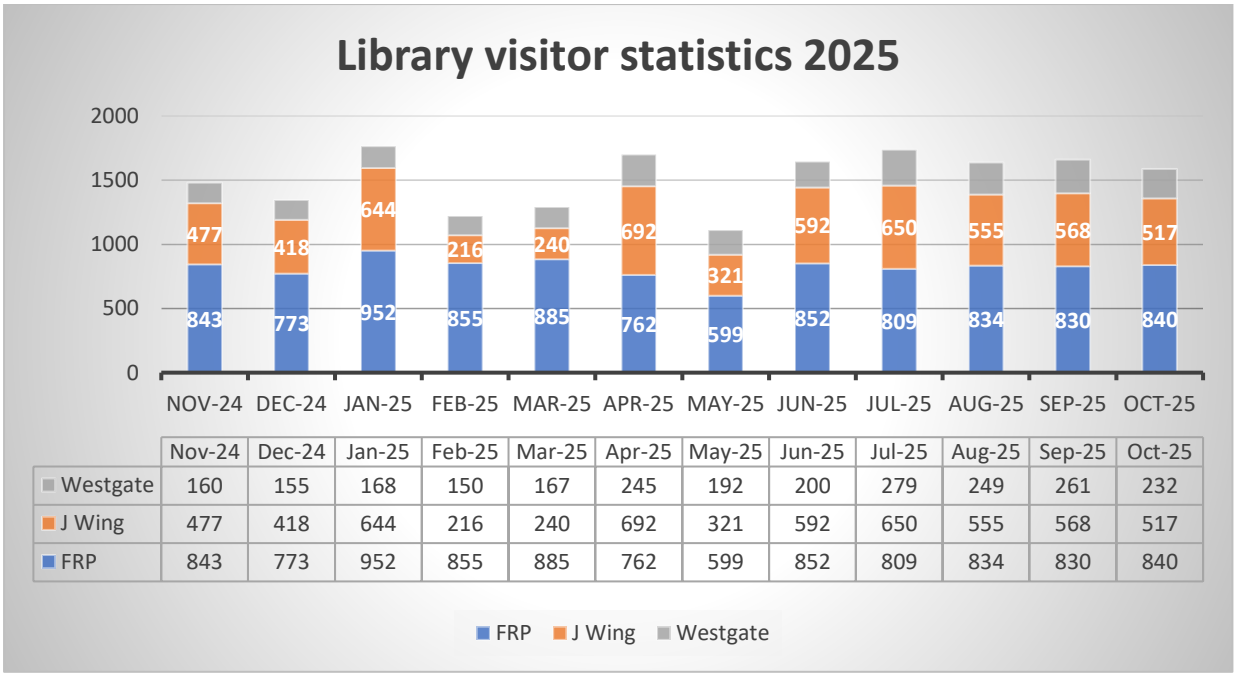
In order to try and compensate for the reduction in education places more places have been introduced in industries workshops with the opening up of the new sawmill, expanding the Ministry of Defence (MoD) workshop and the neurodiversity manager has created work spaces for prisoners with the opening up of a neurodiversity workshop which has increased workshop places from 170 to 208.

Over the last 18 months building works have taken place to improve the infrastructure of the workshop buildings which included a new roof, and the installation of a new heating system. Although this has caused closures of some workshops to complete this work, there are long-term benefits with workshops now being accessible throughout the winter,.

Over this reporting year 22 learners passed their GCSEs, one learner gained an A* at A-level maths. There are currently two prisoners undertaking PhD studies as well as 15 learners enrolled in either Open University programs or other Distance Learning courses. This is possibly due to the proactive on-site support from the Learning and Skills team. These successes demonstrate the prison's commitment to fostering high-level education and to providing pathways for meaningful personal development.

There are 16 learners who are actively engaging with the Shannon Trust to develop their reading skills. This partnership continues to provide vital one-to-one, peer-led support that enables low-level readers to build confidence, improve their literacy, and make meaningful progress at a pace that suits their individual needs. The steady engagement reflects both the effectiveness of the programme and the commitment of the mentors and learners involved.

The are three libraries which act as an important hub for promoting reading and literacy, offering a welcoming and supportive environment for learners of all abilities. A range of reading groups are available across the sites ensuring that prisoners can access materials and sessions suited to their individual reading levels and interests. The libraries also offer other structured group activities such as the French club, over 50s group and the Neurodiversity group.



	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25
Westgate	160	155	168	150	167	245	192	200	279	249	261	232
J Wing	477	418	644	216	240	692	321	592	650	555	568	517
FRP	843	773	952	855	885	762	599	852	809	834	830	840

7.2 Vocational training, work

The Activity Hub performance metric was changed in April 2025 moving from measuring prisoners in full time activity and prisoners in half time activity, to measuring prisoners in at least half-time activity, the target being 60%. The below data gives an overview of the performance in relation to attendance of allocated activity.

	Dec 24	Jan 25	Feb 25	Mar 25
Full time	20.42%	25.54%	23.99%	24.21%
Half time	33.97%	38.31%	40.64%	45.51%

	April 25	May 25	June 25	July 25	Aug 25	Sept 25	Oct 25	Nov 25
At least half time	65.41%	58.15%	69.40%	70.93%	65.83%	71.70%	73.85%	58.98%

Main outputs – Prison estate furniture and MOD sandbags

20.5 staff are employed across all workshops covering, cutting, spraying, assembly, packing, upholstery, Cut and Sew and recycling. One of the existing instructors is undertaking the brick laying course to allow the re-opening of the brick shop, this will provide prisoners with new skills and possible job opportunities upon release in a much-needed sector of the UK construction industry.

The new sawmill is due to begin production to support the main wood mill in providing parts to the assembly workshops, following upgrade works that include heating, ventilation and a fire suppression system.

This should improve unit output and provide cover should one of the workshops be closed temporarily. It will also be an opportunity for main location prisoners to be involved in this part of the process which hasn't previously been accessible to them.

From December 2024 to November 2025 the workshops produced over £1 million of white wood furniture, this averages around £19,000 in production per week. These were sent to Branston Hub to be distributed to the wider prison estates.

The MOD sandbag workshop continues to hit targets and provides on average 4500 units per week. However, they did break their own production record one week in October producing 5000 units which is a fantastic achievement.

The Board welcome the news that the efforts of staff and prisoners in their continued success have secured investment from HMPPS to provide prison industries with new machinery to improve production and product quality.

Prisoners attending the wood mill have begun using the new laser machine to create bespoke wooden Prison Service Award plaques.

7.3 Offender management, progression

At the end of the reporting period, the offender management unit (OMU) at Frankland consisted of 14.5 probation officers, reduced to 12.5 due to statutory leave and one vacancy, and three prison offender managers (POMs). The average caseload was between 67 and 75 cases for a full-time probation POM, with part-time probation POMs having between 42 and 62 cases. For prison POMs, their caseload is around 16-17 as they are frequently redeployed around the prison to minimise disruption to the daily regime and the limited number of 'supporting cases' for those who pose a medium risk of serious harm. High risk, very high risk and responsible cases are all held by probation officers.

The prison is adhering to national standards, allowing POMs to use professional judgment in determining how frequently prisoners are seen and the duration of sessions. The department places a strong emphasis on quality, with rigorous measures for parole, multi-agency public protection arrangements (MAPPA), a system to ensure the successful management of violent and sexual offenders, and offender assessment system (OASys), all overseen by a senior probation officer.

All prisoners are assigned a POM within 48 hours of arrival at Frankland, and an initial contact/induction meeting is held within 10 working days. By applying the national standards, POMs are guided on supervision expectations during the custodial phase of a prisoner's sentence. This approach enhances the management of prisoners' supervision, focusing on key touchpoints, such as the period before parole, after parole refusal, when delivering targeted interventions for risk of harm or offending behaviour, during handover preparations for community release, and when concerns about mental health or wellbeing arise.

During the reporting year the OMU team conducted 274 Category A reviews which involve preparing and participating in local advisory panel (LAP) and preparing and

participating in 67 Parole Board hearings along with OASys risk and needs assessments and sentence planning.

There are 38 imprisonment for public protection (IPP) prisoners at Frankland, who are individuals serving indeterminate sentences for public protection, often for longer than their minimum term.

There has been targeted work by the OMU in relation to the IPP population, including the commencement of specific training with keyworkers working with this group of prisoners. All IPP sentenced prisoners have been RAG (red, amber, green) rated to allow for the targeting of resources in accordance with national guidelines.

Progression panels, which are multi-disciplinary meetings, ensure that any emerging or current issues are identified, managed and, where possible, overcome appropriately, with the frequency of panels determined by the RAG rating.

A plan is in place to convene progression panels in line with parole and sentence planning. To date four panels have been held with an action plan to include all IPP sentenced prisoners held at HMP Frankland in line with their RAG ratings

At the end of the reporting period all but one of the IPP sentenced prisoners are appropriately located. A progressive transfer is being sought in one case at the end of the reporting period.

Following the Independent Sentencing Review and the resulting 2026 Sentencing Act, additional work has been undertaken in preparation for the potential earlier release of standard-sentence prisoners (potentially at one-third instead of 40-50%). This is also in conjunction with the Early Removal Scheme (ERS), which allows eligible foreign national prisoners serving determinate sentences to be removed from prison and deported up to four years before the initial release point of the sentence, provided they have served at least 30% of the requisite custodial period.

An action plan is also in place, coordinated and led by a dedicated governor, for the 46 young adult prisoners with a breakdown of this group in table. Choices and changes', a specifically developed intervention, is being delivered by keyworkers and dedicated prison offender managers for these prisoners.

Table 1: Young Adults

Young Adults	46
H/R Cat A	1
Cat A	10
Cat B	35
Foreign Nationals	11
Basic	6
Standard	21
Enhanced	19
Life Sentence	33

A total of 683 prisoners have been screened and triaged for the personality disorder pathway. Consultations with the psychology service have taken place to develop appropriate pathways. This has been a significant piece of work within the previous 12 months.

The OMU has built strong relationships with education, library services, DART, safer custody and NEPACs (a charity that supports people affected by criminal justice or care systems in the northeast of England), with a desk in the OMU office. While release or removal preparations may not be a priority for many prisoners at Frankland, the OMU continues to offer advice and guidance throughout the sentence and works closely with psychology services to deliver accredited programmes. The department also leads on training uniformed wing staff to develop and enhance key worker sessions.

7.4 Family contact

HMP Frankland is quite far north for some visitors, but there are regular family days, which allow for more time to be spent with the prisoners. These are popular, with input from the chaplaincy, kitchens and library. The library organises activity packages and 'Raising Readers' (prison reading groups). A good variety of food is provided by the kitchens, and the chaplaincy arranges games and activities. Accumulated visits, where prisoners are transferred to a prison in their local area, has generated a large number of applications over the year. Population management, which arranges the visits, has struggled to accommodate these requests, due to the wider prison estate being at capacity, as there needs to be a free cell at the reception prison.

7.5 Resettlement planning

There are very few prisoners who are discharged from HMP Frankland, due to it being part of the dispersal estate (which includes convicted prisoners serving sentences over four years and Category A remand prisoners; the majority of prisoners would be reduced in category and progress to Category B or Category C prisons for a defined period before progressing to Category D open prisons prior to release). However, there is an ID and banking program available for those who are being released. Prisoners are contacted within six months of their release date, to see if they would like to open a bank account and/or obtain a birth certificate. During the reporting period a board member frequently monitored two prisoners who were subject to direct gate release. These prisoners reported a positive experience with support from various staff within the prison including guidance on their MAPPA restriction, access to the Reconnect Hub and other external agencies.

8. The work of the IMB

Board statistics

Recommended complement of Board members	18
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	7
Total number of visits to the establishment	245

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, clothing, ablutions	3	9
B	Discipline, including adjudications, incentives scheme, sanctions	11	16
C	Equality	1	4
D	Purposeful activity, including education, work, training, time out of cell	8	13
E1	Letters, visits, telephones, public protection, restrictions	20	36
E2	Finance, including pay, private monies, spends	4	16
F	Food and kitchens	8	10
G	Health, including physical, mental, social care	24	44
H1	Property within the establishment	13	14
H2	Property during transfer or in another facility	6	32
H3	Canteen, facility list, catalogues	1	5
I	Sentence management, including HDC, ROTL, parole, release dates, re-categorisation	11	16
J	Staff/prisoner concerns, including bullying	27	19
K	Transfers	21	4
L	Miscellaneous	41	52
	Total number of applications	**199**	**290**

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