Close Supervision Centres - Torture Units in the UK

voices from prisons within prisons

April 2012
Personality disorder is not uncommon within this population. Such prisoners often present with highly complex needs which can include the presence of a mental disorder, the use of self-harm either as a coping mechanism or as a maladaptive coping strategy, as well as diagnoses of one or more personality disorders. Thus it is not unexpected that some individuals will present with high levels of self-harming behaviours due to their clinical presentation the presence of a mental disorder or personality disorder is not uncommon within this population.

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Prisoners who appreciate correspondence:  
Kev Thakrar appreciate letters of support, he is also an avid reader. He welcomes any help in publicising what is going on inside the CSC system. After a successful court case relating to the events at HMP Frankland he should have been relocated from the CSC at HMP Woodhill but is still trapped in the ‘Kafkaesque nightmare’. Write to him at:  
Kevan Thakrar - A4907AE, CSC, HMP Woodhill, Tattenhoe Street, Milton Keynes, Buckinghamshire, MK4 4DA.  

John Bowden equally appreciates letters of support and discussion about exposing abuse in the CSCs and the wider prison system. John should have been released over 10 years ago and his last parole board recommended he be in open prison conditions. His battle with the prison authorities and its minions continues however and he remains inside. Write to him at:  
John Bowden - 6729, HMP Shotts, Cantrell Road, Shotts, Scotland, ML7 4LE  

When you write to a prisoner you must include their prisoner number. You must also write a return address on the back of the envelope. Each prison has different ‘rules’ for the reception of mail, but they should receive incoming mail. Check each prison’s rules here: http://www.insidetime.org/info-regimes.asp

Online links for further information:  
http://justiceforkevan.com/ Kevan Thakrar’s Website  
http://www.prisonersadvice.org.uk/ Prisoner’s Advice Website  
http://www.mojuk.org.uk/ Miscarriages of Justice Website  
https://bristolabc.wordpress.com/ Bristol ABC  
http://leedsabc.org/ Leeds ABC  
http://www.insidetime.org/search.asp Search BOWDEN to find John Bowden’s articles  
http://325.nostate.net 325 Collective  
http://actforfree.nostate.net/ Act For Freedom Now Website
Addresses for pressure, complaints, etc...

The Governor is the first person you should write to (& they should reply to you within 28 days).

Governor Nigel Smith, CSC, HMP Woodhill, Tattenhoe Street, Milton Keynes, Buckinghamshire, MK4 4DA.

Governor Susan Howard, CSC, HMP Wakefield, 5 Love Lane, Wakefield, WF2 9AG.

Governor Paul Cawkwell, CSC, HMP Whitemoor, Longhill Road, March, Cambridgeshire, PE15 0PR.

People could also write to the IMB, the Independent Monitoring Board. It’s ‘meant’ to be an outside independent group of people that monitor prison:

IMB Secretariat, 2nd Floor, Ashley House, 2 Monck Street, London, SW1P 2BQ.

There’s an area manager that covers prisons, now called the Directors of Offender Management, they are meant to provide better integration of local prison and probation services and also to work with local partners such as local government, health services, learning and skills, police and the local judiciary.

But High Security prisons are not the responsibility of DOMs & are managed separately by the Director of High Security, who is a member of NOMS; 

Danny McAllister, NOMS High Security, 5th Floor, Cleland House, Page Street, London, SW1P 4LN. Tel: 0207 217 6397

Your own MP or the MP in the constituency that the prison is in, when writing to any MP the address to use is: House of Commons, London, SW1A 0AA, or you can contact them on-line www.writetothem.com

The Prisons Ombudsman has to be contacted by any prisoner, but if the Ombudsman is ignoring the person it doesn’t hurt to write them a letter asking them why someone’s complaints aren’t being dealt with. More than likely this will result in a ‘can’t discuss due to confidentiality’ fob off, but it could help getting a response to the person’s complaints.

If it’s a neglect of medical needs complaint, you could try writing to the healthcare team at the prison, after the Governor. If that doesn’t work try the Primary Care Trust. Primary Care Trusts are in charge of health services like doctors, dentists and opticians in their local area. If you are still not happy you can ask the Healthcare Commission to look at your complaint. This group works to make sure healthcare services are run in a good way.

Their address is:

Healthcare Commission, FREEPOST NAT 18958, Complaints Investigation Team, Manchester, M9XZ.

If you are not happy with the decision made by the Healthcare Commission, you can then ask the Parliamentary and Health Service Ombudsman to look at your complaint. Write to the ombudsman at:

The Parliamentary and Health Service Ombudsman, Millbank Tower, Millbank, London, SW1P 4QP.

If you need any help with making a complaint about health, ask an organisation called the Independent Complaints Advisory Service (ICAS) for help.

The Director of Offender Health at NOMS is: Richard Bradshaw, Offender Health, Wellington House, 133-155 Waterloo Road, London, SE1 8UG. Tel: 0207 972 2000.

If you’re complaining about someone that is employed outside of the prison like a social worker or psychologist you will need to write to their employers as well as the prison.

This list is by no means the only route to go down in taking action against the CSCs. We would not want to tell anyone how to express their anger against these vile institutions.

The prisoners themselves have called for greater pressure on the prison authorities and healthcare groups, as well as awareness raising of the situation and information distribution about what is going on behind the prison walls...

Prison has little or nothing to do with ‘crime’; the greatest crimes are committed by the rich against the poor, yet prisons are full of poor people. It’s primary purpose, in reality, is as a ‘big stick’ held over our heads in case we decide to step out of line and challenge the rotten system that allows a few to live lives of glutony while the vast majority of the world’s people live in abject poverty. As those arrested in the protests and uprisings last year are seeing, prison is a ‘big stick’ our masters are not slow to use. Once behind bars, these hostages of the State, will hear the phrase ‘carrot and stick’ an awful lot; it is supposedly the way jails are run. Most of them however, will see far more ‘stick’ than ‘carrot’. Not that the latter amounts to much anyway; maybe the chance to play ping-pong with some grevellers and grasses while everyone else is locked-up under the ‘Incentives and Earned Privileges Scheme’. Or perhaps the opportunity to get ripped-off renting a portable ‘idiom box’ you can watch when you’re not slaving away in some mind-numbing ‘noddy shop’ to afford you the ‘privilege’. If you’re really lucky, or kiss enough arse, maybe you might even get a few months’ jam-roll’ where you live by the leave of a Little Hitler from Probation, or else early-release on an electronic ball and chain, locking yourself up every night. Since they’re not offering much of a ‘carrot’, and some cons are quite happy to tell them where to shove it, there’s been a need for a bigger and bigger stick in order to try and achieve the complete compliance the quasi-fascist system demands.

Prison systems have always had ‘dungeons’ of one kind or another, where they could ‘quarantine’ those who threatened to spread the infection of resistance. The banishment of these prisoners to brutal hell-holes few others witnessed first-hand, was held up as a deterrent in much the same way as the heads of executed enemies of the State were displayed on spikes. In the early days of Parkhurst prison, small boys who refused to comply absolutely were forced into a hole in the ground as punishment. If you know where to look, you can still see the hole, but later (as at many other jails) Parkhurst had its notorious ‘silent’ strong-box cells where men were deprived of all human contact apart from the brutality of their jailers. Two of these cells were located in the infamous ‘F2’ unit (located in the prison hospital) John Bowden reminds us about, where enemies of the State were displayed on spikes. In the early days of Parkhurst prison, small boys who refused to comply absolutely were forced into a hole in the ground as punishment. If you know where to look, you can still see the hole, but later (as at many other jails) Parkhurst had its notorious ‘silent’ strong-box cells where men were deprived of all human contact apart from the brutality of their jailers. Two of these cells were located in the infamous ‘F2’ unit (located in the prison hospital) John Bowden reminds us about, where prisoners were subjected to sustained psychological abuse and ‘liquid cosh’ treatment.

Like the original Wakefield control unit, the establishment of the CSC system needs to be placed in the historical context in which it originally occurred. When the Wakefield SCU was set up (in 1974), the System were engaged in fighting unprecedented prisoner resistance, with the Wakefield unit being part of the System’s response and of their attempt to crush it. Likewise, when the CSC system was introduced, the System were engaged in introducing a programme of repression across the prison estate, and in ‘taking back’ the dispersals and long-term nicks (in particular) which they regarded as having to a large extent lost control of. The repression included such things as ‘volumetric control’, which restricted prisoners’ property and possessions, mandatory drug-testing, the ‘Incentives and Earned Privileges Scheme’, a reduction in visiting hours, the closing of sports facilities, worsening ‘canteen’ facilities, the butchering of prison education budgets coupled with forcing prisoners into ‘noddy shops’, the introduction of more and more bang-up, and...
a general rapid worsening of conditions. Obviously there was considerable opposition to the wave of repression, and removing a number of individuals the System undoubtedly regarded as troublesome in terms of achieving their aims, was part and parcel of the establishment of the Woodhill ‘Big Stick’.

Of course there is a whole gulag of blocks and units through which prisoners are shunted on ‘lay-downs’ (usually of 28 days duration); the so-called ‘Ghost-train’, ‘Roundabout’ or ‘Merry-go-round’ii. This system has been used for many years as a way of trying to isolate and disorientate prisoners, and officially existed, prior to the establishment of the CSC system, as the ‘Continuous Assessment Scheme’. The practice continues and like the brutal CSC system, prisoners have in reality to do very little (if anything at all) to be subjected to it. Almost all of the time I spent in different blocks and units was justified on the grounds of ‘suspicion’ of some form of ‘subversive’ activity rather than actually being ‘nicked’iii.

Clare Hodson, the former Gruppenfuhrer of the Woodhill Torture Unit, refers (in her reply to John Bowden reproduced on pages 16-17) to the involvement, ‘or alleged involvement’ (my emphasis), of prisoners in “serious acts of violence”, but I know of one case where a prisoner was banished to Woodhill simply for telling a joke about screws getting cancer! For anyone who knows the Kafkaesque British penal gulag, where truth means nothing and lies are everywhere, Hodson’s words will have a familiar tone. My own prolonged segregation and confinement in the maximum security system was justified by various heads of the prison service, and even by a prisons minister, on the grounds that I had supposedly been involved in arson, riot, serious violence against screws and threats to kill them, etc. In reality, I had never been charged with any of these things, let alone convicted of them.

Though I was held in many blocks and units (including the blocks at Woodhill, Wakefield, and Long Lartin, and the Durham unit, which are all referred to in this pamphlet), sometimes alongside CSC prisoners, I was never put into the CSC system itself. Nor, (though he has been in more blocks and units than I could count - including the notorious Wakefield ‘Cages’ referred to above) was John Bowden. Nor, for example, were any of the Irish Republican prisoners that were held in the English jail system at the time the Woodhill Torture Unit was set up. The System seems to have been reluctant to take on avowedly political prisoners with strong support networks. They made some serious miscalculations though, and the first group of CSC prisoners included some sterling prison rebels who fought them tooth and nail, and with whose combined resistance Woodhill were unable to cope. Because of this the System have become even more cowardly in their choice of targets. In particular, prisoners with pre-existing mental health problems have been cruelly targeted for further abuse. Few human-beings, if any, could survive the grossly abusive conditions of the CSC system without suffering mental trauma, something which was recognised very early on at Woodhill. Indeed, from the earliest days of its existence, such was the level of brutality, that even the screws who worked there began cracking-up. To subject those who already have a degree of mental illness to the calculated and systematic psychological mistreatment of the CSC system is a colossal abuse.

Despite bouncing me round the entire English prison estate, everywhere from Durham to Cardiff to Parkhurst, the System never succeeded in isolating me from friends and supporters outside. Few prisoners, however, are able to rely on that breadth of support, and are relatively easy to isolate from any friends and family they have. It is only thanks to John Bowden and a few others, who have often suffered prolonged reprisals as a result, that we know anything about what is happening within the walls of Woodhill and the CSC gulag. When I first knew John, having met him at Full Sutton in 1998, and we began to organise together, our very first initiative was focussed on Woodhill to try and expose the torture that prisoners were being subjected to and to generate support for them. We hoped that a combination of prisoner solidarity and outside support, coupled with the spirited resistance of some of Woodhill’s victims, might bring the vicious regime to an end.

Renewed Call for Pressure on the Prison Authorities

“The CSC was created on the premise that the structural ills of the prison system are in fact located within the pathology of individual ‘troublemakers’, whose removal from the mainstream would result in reduced disruption and rebellion in the rest of the system. This scapegoating of individual prisoners for institutional injustices and abuses of administrative power is a familiar tactic......... The Woodhill unit should... be seen in the context of a struggle for prisoners’ rights and humane conditions throughout the whole prison system. Unfortunately the liberal reform organisations have called for a minor amelioration in conditions at Woodhill, while never questioning its basic existence. The fact is that control units are instruments of political repression, specifically designed to erode collective resistance and psychologically destroy those targeted as leaders of that resistance. They should therefore be abolished outright.”

John Bowden - FRFI - June/July 1998

Nearly 14 years after the transformation of segregation units, the creation of the Close Supervision Centres and the call out from John Bowden and Mark Barnsley raising serious concerns over their intended targets, this pamphlet is a renewed call to pressurise the prison authorities over the psychological and physical abuses employed on inmates of the CSCs. These facilities were and continue to be a bad idea and need to be abolished.

Throughout their existence, and despite a steady flow of information coming out about abuses, there has been a serious lack of pressure from mental health groups on the prison authorities administering CSCs in the UK. The need for pressure has never been more necessary.

Claire Hodson has been sacked and a new manager has stepped in. Since then the regime has become even more repressive and brutal. The number of prisoners smashing up their cells, setting fire to their cells and themselves and other self-harmings has increased as a consequence.

The limited attention that has been brought to the CSCs so far has provoked the prison system into behaving even more inhumanely in an attempt to silence the voices within it. It is therefore even more important that the pressure is increased on them.

As we can read in the preceeding accounts, the CSCs are places of extreme psychological torture and physical, sexual and racial abuse. Many CSC inmates should actually be in medical institutions rather than prisons. A Home Office Paper even indicated this over a decade ago. “The psychiatric assessment of the CSC prisoners revealed the extent and seriousness of mental disorder amongst this population.” p.xiii. Clare, E and Bottomley, K (2001) Evaluation of Close Supervision Centres, Research Study 219, (London: Home Office).

This situation has not changed. Claire Hodson’s admission that the CSCs are holding mentally ill inmates serves to underline the arrogance of these people. Nothing has been done despite articles, outrage and superficial investigations. These murky facilities, like the FIES in Spain and other maximum security units, rely on isolation, miscommunication and secrecy to continue their treatment of those they hold.

Outside the prison walls we are given state sanctioned/‘independent’ inspection reports, assessments, overviews, claims to be adhering regulations, and so on that say that all is OK. The voices from within these prisons within prisons and the wider network of support tell a different story. The purpose of this collection of writings was to bring together views from those inside the CSCs, those who have come out, prison lawyers, families, doctors, campaigners, and others throughout the prison network to unmask Close Supervision Centres, and make people aware firstly of their existence, secondly of who they are holding in what conditions, why they are holding them and to denounce their methods of torture and abuse. Lastly it’s intention is to inject some fresh energy into the campaign against the CSCs and support of prisoner’s facing ill treatment within them.

As John Bowden brought up in his article ‘Abuse of Prisoners with Mental Health Issues In Close Supervision Centres’, it is not just prison guards but the whole web of prison psychiatrists, doctors, managers, supervisors etc. and ultimately the entire prison system with which we in the UK are connected, that are part of the abuses meted out on those held in the CSCs.

This text is therefore a call-out. Take action in whatever way you can... fire to the prisons... :/
Of the 23 prisoners currently held in the CSCs at Woodhill and Wakefield prisons at least 12 of them are of the Muslim faith, which begs the obvious question as to why such a numerically tiny proportion of the overall prison population in England and Wales are so disproportionately over-represented in the CSCs?

The existence of racism in the prison system and indeed the wider criminal justice system has long had an evidential basis and ethnicity influences one’s chances of receiving a prison sentence if convicted of a criminal offence and also the quality of one’s treatment once inside the prison system. Cultural conditioning amongst an overwhelmingly white prison staff is largely responsible for perceiving black prisoners as intrinsically “difficult” and potentially “disruptive”, and for those black prisoners who frequently complain or question their treatment the label of “control problem” is quickly applied and the attendant repressive measures vigorously applied. Skin colour and ethnic identity in prison has always influenced and determined the degree of punishment inflicted if behaviour and attitude towards authority is an issue. When Islamophobia is thrown into the mix then repression against a targeted group of prisoners can assume a deadly edge.

For some time prison staff have been leaking stories to the media about “Muslim prison gangs” recruiting followers and creating disruption in the prison system, and the prison authorities have publicly revealed the existence of a police / prison service intelligence unit dedicated to monitoring the activities of “Muslim extremists” within the prison population. The image created is of large gangs of black and Asian Muslim prisoners spreading their nefarious influence amongst other prisoners and actively recruiting potential foot soldiers for terrorist activities in the outside community. Although there is no real evidence to support the scenario created it does provide a context for the victimization of Muslim prisoners and their over representation in brutal prison control units like the “Close Supervision Centre”.

If, as appears to be the case, some prisoners are being “selected” for the CSCs principally because of their Muslim faith (or “terrorist ideology”) then a condition of their “progression” out of the CSC and return to the mainstream prison population would inevitably be their abandonment of that faith; failure to comply would result in an indefinite stay in conditions of strict solitary confinement and clinical physical isolation. At Woodhill prison the limb is not allowed to enter the CSC or talk with the Muslim prisoners held there, which re-affirms the belief of these prisoners that their faith is the principle reason for their current location. Prison Service order 51 states quite clearly that “All establishments enable prisoners to participate in corporate worship and other religious activities that encourage their spiritual and personal development whilst in custody”. Clearly this does not apply to Muslim prisoners held in the CSCs. Neither it seems does Article 9 of the European Convention of Human Rights: “Everyone has the right to freedom of thought, conscience and religion; this includes freedom to change his religion or belief, in worship, teaching, practice and observance”.

It is good to see this pamphlet produced, and I am sure that every prisoner who finds themselves isolated and brutalised in the nightmare world of the Woodhill Torture Unit will welcome it also. From its pages the reader will learn much about what is going on inside the closed world of the CSC system, but it is so far unnoticing by those who hold their brave authors captive, nor will they now. John Bowden, who has been in prison for three decades, is no longer being held because it is claimed he poses any ‘risk’ to the public, but specifically because of these articles and others like them, something which is quite explicitly stated in the latest Prison Service reports opposing his release.

It should never be forgotten that those who speak out against injustice from within prison are at risk of paying a heavy price in terms of their own treatment at the hands of Prison Service scum. When they were originally published, the articles contained in this pamphlet will not have gone unnoticed by those who hold their brave authors captive, nor will they now. John Bowden, who has been in prison for three decades, is no longer being held because it is claimed he poses any ‘risk’ to the public, but specifically because of these articles and others like them, something which is quite explicitly stated in the latest Prison Service reports opposing his release.

No-one would dispute that in a chronically overcrowded prison system there are serious problems of control and safety, but none of that is remedied by targeting on the basis of race and religion a specific group of prisoners and subjecting them to treatment that clearly breaches their basic human rights. A similar sort of racist targeting of black Muslim prisoners in the U.S. during the 1960s provoked the catastrophe of the Attica Prison uprising and the virtual wholesale segregation of the prison population along the lines of race and religion. There are clear signs that such a phenomenon is now happening in some English Maximum-Security prisons.

In terms of the prison “Close Supervision Centres” there is clear evidence that racism is influencing the selection process and fashioning the units into weapons of repression and abuse against “Muslim troublemakers”. It’s therefore the duty of anti-racist groups and individuals to campaign for their closure.

John Bowden - Shotts Prison
November 2011

Source: http://breakallchains.blogspot.co.uk/2011/11/ racist-in-close-supervision-units-cscs.html
this loathsome system, in an earlier time they would have happily run Auschwitz. They have the same moral equivalence, and they deserve to be held similarly accountable.

On a lesser level, we must also hold to account our own movement, who along with the wider movement of supposed radicals, have through sheer apathy allowed Woodhill Torture Unit to function, largely unchallenged, for well over a decade, and who for the most part do not give a stuff about what goes on behind prison walls. We need to expose and challenge prison abuses such as the CSC system, not as reformists, but as part and parcel of opposing the human rights abuse that prison ALWAYS represents.

Lastly, prisoners themselves must wake up to the fact that, as Kevin Thakrar makes clear, the CSC system functions as one extreme of the asrelickers' charter known as the 'Incentives and Earned Privileges' scheme, and that every time one of them actively participates in this scheme, by signing a 'compact' or grovelling their way onto 'Enhanced', they validate the scheme and thus what is happening to those at Woodhill and its satellites. Perhaps with the support and encouragement of a strong prisoner solidarity movement more of them would find the integrity and courage to resist. We outside need to build that movement and actively challenge what is happening to those from our class who fall into the hands of The Enemy. As the Anarchist Black Cross slogan goes: "No-one forgotten! Nothing forgiven!"

Burn every prison to the ground!

Mark Barnsley (Leeds Anarchist Black Cross) - March 2012

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1 A prison class system introduced in 1995, which splits prisoners into three basic 'privilege' categories 'according to their behaviour and overall compliance'. Everything from the number of visits to 'time out of cell' is determined according to the 'privilege' level assigned.

2 A prison workshop, where prisoners are typically required to perform some highly repetitive, boring task, which would ordinarily be automated if the (usually) private company running the place wasn't allowed to exploit forced prison labour.

3 Parole.

4 The forced injection of psychotropic drugs such as largactyl. The doping of prisoners was pioneered at Parkhurst by the notoriously abusive prison psychiatrist Dr B D Cooper.

5 The national movement for the Preservation of the Rights of Prisoners.

6 These became known as 'The Nutcracker Suite' or simply as 'The Cages'.

7 Prisoners are continually moved from block to block, sometimes for years, with no notice being given of transfer and their property (including legal papers) only arriving after they are already on their way to their next location. Through this process a prisoner's visits, both legal (ie with their lawyer) and social, are disrupted, as is their incoming mail, access to funds, 'canteen' (the prison shop), medical treatment, and their ability to do legal work.

8 To be 'nicked' in prison is 'to be placed on report' and required to attend an internal kangaroo court for 'offences against prison discipline'. One of the range of punishments meted out is segregation for a set number of days.

9 The so-called Dispersal System is made up of a small number of maximum security prisons designed to hold a handful of extremely dangerous prisoners in separation from others.

10 It is significant that dignity is so often drawn on where it is absolutely necessary to hold a handful of extremely dangerous prisoners in separation from others. Nevertheless, they should be afforded increased in-cell provisions, access to programmes, opportunities for meaningful human contact and so on and so forth.

11 To criminal attitudes and behavior" (McCleery, 1961:306). Other studies identified the incorrigible unit in penal practice probably is one that intensifies tendencies to criminal attitudes and behavior "(McClary, 1961:306). Other studies identified isolation regimes as central factors leading to prison riots.

A study of 'order and discipline' in prisons in England and Wales concluded that "to impose additional physical restrictions, especially of a severe character, will almost certainly lead to a legitimacy deficit; and that deficit may well in the end play itself out in enhanced violence" (Bottoms, 1999:26).

Data on prison violence before and after the introduction of special security (or 'supermax') units, similarly indicates that the isolation of prisoners classified as dangerous or disruptive did not result in a reduction of prison violence in general population prisons prolonged solitary confinement may have very serious health consequences for the individual concerned and may also affect his chances of successful reintegration into society.

Psychiatrists no doubt collect the rent, but even renowned Professor Andrew Ashworth of All Souls College, Oxford is pessimistic about the ability of anyone to predict dangerousness accurately......

It is significant that dignity is so often drawn on where it is absolutely necessary to hold a handful of extremely dangerous prisoners in separation from others. Nevertheless, they should be afforded increased in-cell provisions, access to programmes, opportunities for meaningful human contact and so on and so forth. Those suffering from mental illness must not be placed in solitary confinement and under no circumstances should the use of solitary confinement serve as a substitute for appropriate mental health care. The CSC system is not only in need of fundamental restructuring; it requires it.

Shahida Begum is a Criminal Solicitor at Cooper Rollason solicitors. She is also a member of Midlands Human Rights Association and the founder of CEIA a charity specialising in human rights advocacy.

Source: http://www.insidetime.org/articleview.asp?a=1086&c=neurotics_psychotics_and_psychiatrists&cat=Mental%20Health

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Racism in the Close Supervision Units (CSCs) - November 2011

A recent admission from the manager of a brutal control-unit at Woodhill Prison in Milton Keynes, euphemistically called the "Close Supervision Centre" (CSC), that prisoners suffering with mental illness are being held there has raised serious questions about the selection process for a unit that was supposedly created to hold only the most dangerous, subversive and unmanageable prisoners in the jail system.

Information provided by Kyle Major, a prisoner currently in the Woodhill CSC, would indicate that it isn’t just the mentally ill that have been erroneously labelled "control problems" and sent to the CSC; it seems that ethnicity and a particular brand of religious faith also qualifies one for a place in the CSC.
Neuro/Psychotics & Psychiatrists By Shahida Begum - November 2011

"Neurotics build castles in the air. Psychotics live in the castles. Psychiatrists collect the rent".

There is consensus amongst the general public, experts and, progressively, the courts, that the mentally ill and those at risk of self-harm should not be held in solitary confinement. The logic is obvious - conditions of sensory deprivation, social isolation and confinement may cause or even exacerbate mental illness.

"The already mentally ill, as well as persons with borderline personality disorders, brain damage or mental retardation, impulse-ridden personalities, or a history of prior psychiatric problems or chronic depression ... For these inmates, placing them in [isolation] is the mental equivalent of putting an asthmatic in a place with little air to breath" (Madrid v. Gomez judgement, 1995).

Yet, it is common knowledge that Close Supervision Centres ("CSCs") are widely used to manage "mentally ill" prisoners, and that mentally ill prisoners are overseen in segregation units. Prisoners who are deemed as dangerous or chronically disruptive are placed in prolonged solitary confinement (CSC) as a prison management tool.

Surely, the particular vulnerability of mentally ill prisoners means that prison authorities must be especially vigilant in their treatment, control and protect their physical, mental and moral integrity.

Recent admissions from the CSC Operational Manager confirms that some prisoners will present with high levels of self-harming behaviours due to their clinical needs...the presence of mental disorder is not uncommon within the unit.

Notwithstanding whether selection of a mentally ill prisoner into the CSC system is intelligibly referred to as a "security measure", or even "essential" the common practice of using CSCs in effect IS to "isolate risk". The latter contradicts the very notion of whether agreed policies and protocols are truly applied in a way respectful of human dignity.

The concept of human dignity is, of course, stated at a very high level of generality. And as such, holds within it the seeds for much debate. We can say that whilst there is a concept of human dignity with a minimum core, there are several different conceptions of human dignity, and these differ significantly because there appears to be no consensus legally, politically or philosophically on what makes up the core of the concept.

These differences in approach are particularly important in the context of prisoner's rights, where the crucial question is how far, if at all; the state is under a positive duty to safeguard human dignity........Article 2 states everyone's right to life shall be protected by law. The state has positive and negative duties. Basically, the duty to refrain from taking life in an arbitrary fashion and the obligation to ensure that life is safeguarded which may involve taking steps to protect life. There is no derogation from this requirement........

One method of challenging treatment of those subject to the CSC system is judicial review. A prisoner would typically ask that judges strike down legislation legitimising the use of CSC to contain mentally ill prisoners on the ground that it breaches human rights (the Convention prohibits in absolute terms torture or inhumane or degrading treatment). Although at first sight this appears pretty straight forward, it is particularly controversial because a body of unelected judges calls into question the decision of a democratically elected body, leading to the so-called 'counter-majoritarian difficulty'. These tensions have led to a continuing debate about the legitimacy of judicial review, particularly of this strong type, and how far it is compatible with notions of democratic self-government. In all the jurisdictions which have adopted dignity in their judicial decision-making, judicial review in the human rights context is more or less controversial, constantly aiming to justify itself, its methods, and its reasoning.

Nonetheless, we see judges often speaking in terms of 'common principles for a common humanity', in practice this is often rhetoric, however well intentioned and sincere. We appear to have significant consensus on the common core, but not much else.

A key justification often cited by the government is the need to "manage dangerous and disruptive prisoners".

The CSC veteran gives his verdict.

The CSC (Close Supervision Centre – Rule 46) was set up in 1998 after a report by the, now NOMS, supreme leader Mike Spurr – a report that has never been published and only seen by a handful of bigwigs. The CSC's stated purpose is to 'remove the most significantly dangerous, challenging and disruptive prisoners ... and manage them within a small, highly supervised unit'.

Initially there were 2 units – at HMP Woodhill and HMP Hull – with the former being the main CSC, divided into 4 units. Prisoners would start on B wing and progress to C wing, or regress to A wing, with D wing acting as the seg. After a year or so of good behaviour prisoners would be transferred to the Hull CSC (later HMP Durham) to be prepared for a return to normal location.

A group of prisoners refused to cooperate actively with the CSC regimes and continued to resist violently for 2 years. They were usually transferred to segs on a 'lay-down', but on their return to the CSC they would continue to cause disruption. Eventually they were kept together in one seg and CSC management decided that they were too disruptive for a unit that was, ironically, especially designed to manage the most disruptive prisoners! All bar one of these prisoners were eventually returned to normal location.

This should have been an admission of failure for the CSCs; however, in 2001 the CSC at HMP Woodhill was revamped. D wing was closed; B&C were merged into one wing with level 1 & 2 (basic and 'super-basic'). And the seg at HMP Long Lartin started to be used for CSC assessment.

In the past, prisoners selected for CSC would have no prior knowledge of their referral and selection, now they would know for months in advance. This was possibly done in order to gauge their reactions when staff from Woodhill had to interview them as part of the assessment process. It appeared that prisoners were now being selected on the basis of who might cooperate in the CSC.

Sure enough, after a few years disruptive behaviour became a rarity in the CSC. To the casual observer the CSC must have looked like a success, but it wasn't that simple. Previously all attempts to modify problem prisoner's behaviour had to have failed before they were considered for CSC, now it seemed that a number of prisoners were being selected after causing or being involved in a single disruptive or violent incident. On top of this many seriously mentally ill prisoners were starting to be selected, one suspects because they were easy to manage once they had been medicated.

In 2002 an 'Exceptional Risk' unit was created at HMP Wakefield, but as far as I am aware only one prisoner has ever been moved out of, and that was only to make way for another prisoner. The Wakefield CSC was recommended for closure by HMCIIP last year.

In the first few years of the CSC, prisoners who did cooperate would be returned to normal location after around 2 years. These days there are prisoners who have spent an unheard of 4 or 5 years in the CSC despite fully cooperating and all the while being led to believe that they were on the verge of de-selection and return to normal location. But, like Achilles chasing the tortoise in Zeno's Paradox, there was always that little bit extra to go. The CSC was a Kafkaesque nightmare.

RJS Hattersley

InsideTime issue June 2011

Source: http://www.insidetime.org/articleview.asp?a=964&c=the_controlled_environment
First-hand accounts from inside HMP Woodhill Close Supervision Centre

The Mufti Squad came into A wing super-seg Thursday 17th July banging their shields. Scott Napier took a bad kicking resulting in an alleged fractured jaw. Willi Moskimmin’s assault resulted in bruising to his eyes and a split nose. Robbie Stewart was viciously attacked, then transported to HMP Full Sutton segregation. Ray Gilbert was ghosted to HMP Long Lartin segregation unit. Scott Napier went to Milton Keynes General Hospital to have his jaw X rayed, and I understand that whilst there he was again assaulted. The screw whom I understand assaulted him the day before did it again despite Scott having complained about the officer the previous day.

Where is the rule that allows officers under investigation for assault to come into contact with their victims? Where is our protection? We demand an inquiry into Woodhill’s CSC.

Anon, resident HMP Woodhill - September 2011

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Woodhill CSC - Aug/Sept 2011
FRFI continues to hear horror stories from inside Woodhill Close Supervision Centre (CSC). One prisoner was recently assaulted twice in the same week by guards. Most shocking of all, in a small unit supposedly dedicated to ‘close supervision’, a prisoner, who in April this year cut off his ear in a desperate act of self-harm, in July was able to cut off his other ear. Despite the CSC authorities’ attempts to prevent news of such incidents coming out, family members, sympathetic journalists and the former Prisons Inspector Lord Ramsbotham have been demanding an investigation into these events.


Comments about this article and its response (taken from Insidetime website):

25/7/2011 Kat
I am not too sure I agree with Mr McAllister, I would be more inclined to agree with Barbara Davis. I was led to believe that the prison authorities are supposed to tread with extreme caution before placing anyone person in these CSC units incase they have an underlying mental health problem which would make them worse once placed in these units. If that is the case then my loved one has not even been assessed but been allocated a placement on one of these units. I must say that I believe he has an underlying problem nothing that cannot be put right with the right help, but the treatment he has received is not the sort of care I would expect for an animal let alone a human being. If they are to be incarcerated as such then the units must expect some sort of reaction at some point but to deal with it in the way that they do with extreme violence is not the appropriate course of action to take. Where did these officers get their training to deal with these selected inmates?

They are obviously not trained in mental health matters, only bully tactics when they are in groups of four or more and then the selected individual is isolated from everyone in control cells. It must be nice for them to see a friendly face at some point, but they dont. I wonder how these officers would react if they had a family member in one of these barbaric places. It is extremely upsetting for families to have to witness this treatment whatever their crime. There should be more help for these prisoners and most should be elsewhere being cared for properly and not being traumatised by the type of treatment that they have to endure. They should all be closed down because the authorities with the help of the bully boys are creating monsters. I also feel that because Capital punishment is no longer an option for some crimes it seems to me that they drive some prisoners to such despair that they will take their own lives. Job done as far as most bigwigs are concerned. The other condition about the exercise yard Barbara had referred to is also correct. I have also noted that whilst being escorted to another unit that the exercise yard has some sort of aqua coloured matter approx. 30ft high maybe more so that inmates cannot see past their surroundings whilst on exercise. I also noted that whilst being escorted the (normal) inmate yards have the wire type matter to pen them in whilst they have an excellent view of the greenery and flowers that adorn the prison grounds. Something has to be done and the more people that will stand up eventually someone will have to do something to correct this madness.

27/10/2011 Princess
A major issue in the CSC unit in F wing at Wakefield Prison is the major lack of sunlight in the exercise yard caged pens, attached to the CSC unit for prisoners. I noted when I visited Wakefield CSC that there is a roof attached to the CSC block and it completely covers the small caged individual exercise pens. Deliberately designed to block the sunlight and view of the sun, to deny CSC prisoners the sun, which I think is wicked. Along with the fact no seating is provided to allow prisoner the decency to sit in the fresh air, how an earth can the authorities describe this Draconian dungeon environment as a therapeutic Centre, because evidently the prison authorities tell lies because Wakefield CSC prisoners are deliberately denied the elements of the sun, and sunlight. Wakefield CSC unit is condemned and should be closed down now! Prisoners are treated with no dignity and no decency in Wakefield CSC unit, WTF are the Lawyers doing about it!!
To The Deputy Warden of Woodhill...

"There is a Clint Eastwood film called Escape from Alcatraz that many prisoners can relate to. A few scenes stand out to me...

The Warden, not liking the artwork from a prisoner, gives the order that his painting privileges be removed. The Deputy Warden, who receives the order, questions what he should tell the prisoner is the reason for this and is told he is the Deputy Warden so make something up.

As the prisoner has his paintings and materials removed from his cell, he says in a very hurt tone 'but paintings are all I have'. The prisoner is then unable to cope and chops off his fingers at the first opportunity.

The film, which was made in 1979, is a prime illustration of the detrimental impact of the Incentives and Earned Privileges Scheme. Prisoners throughout England are subjected to this level of control, but none more so than those in the Close Supervision Centres (CSCs) which are this country's Supermaxs. In the CSCs most privileges are removed and human rights along with them. Apparently it is a privilege to do such things as shower in privacy or out of the sight of female staff, or to receive confidential medical treatment, which CSC prisoners are no longer entitled to.

The new restrictions I face are a ban on my mother's phone number and home number and the need to book all phone calls in advance and have every call subject to line monitoring, including legal calls. The reason the 'Deputy Warden' gave me is that I 'may' have contravened the regulations around the use of the telephone. Upon complaint, I am told a bit more – prisoners are not permitted to use the telephone for the disclosure of information intended for publication which may identify staff.

So now on top of the fact that I have hardly any time out of my cell I now struggle to maintain ties with family and legal advisers. With all this spare time do you think I will expose more or less corruption?"

Also, thank you to anyone who has written to me. It has been greatly appreciated. Unfortunately, the Deputy Warden has been returning my mail to sender, claiming I am no longer located here or just failing to post my response. So if you haven't heard back from me, please write again. I do respond to all my mail. Please check out my website for more info on my current prison conditions: http://justiceforkevan.com

Kevan Thakrar A4907AE - CSC, HMP Woodhill, Tattenhoe Street, Milton Keynes, Bucks, MK4 4DA
October 2011 - source: http://justiceforkevan.com/?page_id=4071
Harsh and psychological torture unit - November 2011

Here I am in the harsh and psychological torture unit (aka Close Supervision Centre CSC) at HMP Woodhill. In a high control cell with a six officer riot unlock. You will have been reading about CSC recently in MOJUK and FRFI articles by John Bowden, Kevan Thakrar, which are all true.

As a prisoner experiencing it at the present time it is very unpleasant only two days ago a prisoner on the unit Danny Walker more or less amputated his arm. Requiring emergency hospital treatment where his arm had to be stitched back together and an operation to reconnect his nerves and arteries.

At the moment I am on suicide watch due to the abuse I have been receiving from officers, governors and the Mental Health Inreach Team, who have been refusing to see me because they say they are too busy. To my knowledge CSC at Woodhill gets specific funding for CSC prisoners and I thought that somebody on suicide watch would be a priority but obviously not, maybe they want people to mutilate themselves.

My brother Dane Sonnex is next to me under even worse conditions, they have had him this way for about six weeks. He is regularly refused exercise, showers, access to phone, no toiletries, no radio or TV, no newspapers, no association, not even a complaint form to challenge his way for about six weeks. He is regularly refused exercise, showers, access to phone, no toiletries, no radio or TV, no newspapers, no association, not even a complaint form to challenge his conditions. Totally inhumane, isolating, dehumanizing, atrocious does not come near to describing these unacceptable conditions.

Back to myself I am a prisoner in crisis, held under the same conditions and I can see how the people held within this unit deterenate to the self-mutilation that is prevalent. I am due for release in about 44 weeks but may have a hurdle to overcome to make that date. I am up in Peterborough Crown Court on the 8th of May this year, I was brutally attacked by four prison officers, captured on CCTV and photographed with blood all over me. They took me to the mental health wing and over the next six weeks there was no medical assessment, no records of my mental state, not even a referral to the prison psychiatrist. I am of Muslim faith and the majority of prisoners in the CSC at HMP Woodhill are Muslim, of which cannot be treated in prison. So of 23 prisoners in CSC units, 12 are Muslim, more that 50%, this should be ringing alarm bells for you.

On the 8th May this year, I was brutally attacked by four prison officers, captured on CCTV and then sexually assaulted. Put in a complaint at the time, haven’t heard a dickey bird since. I am of Muslim faith and the majority of prisoners in the CSC at HMP Woodhill are Muslim, of nine prisoners, six are Muslim (the prison Imam is not allowed onto CSC). At HMP Whitemoor in the CSC unit, when I was there recently, of seven prisoners four were Muslim. At HMP Wakefield of seven prisoners two are Muslim. Half of those in the CSC have severe mental health problems, which cannot be treated in prison. So of 23 prisoners in CSC units, 12 are Muslim, more that 50%, this should be ringing alarm bells for you.

On the 8th May this year, I was brutally attacked by four prison officers, captured on CCTV and then sexually assaulted. Put in a complaint at the time, haven’t heard a dickey bird since.

Response from Danny McAllister - Director of High Security, NOMS (National Offender Management Service):

The overall aim of the Close Supervision Centre (CSC) system is to remove the most significantly disruptive, challenging and dangerous prisoners from ordinary location and to manage them within a small and highly supervised unit. Referrals will be submitted following a serious single incident, or when attempts to manage an individual under the Managing Challenging Behaviour Strategy have failed. Prisoners within CSC units will often have a range of complex and diverse psychological, psychiatric, or security needs, and the decision to relocate a prisoner to the small units will be based on any one or more of the following aims which are to:

• provide opportunities to address their psychological needs
• provide opportunities to address mental health needs
• enable prisoners to address their disruptive and anti-social behaviour
• focus on addressing offending behaviour • provide long term containment for those whose actions pose a significant threat to the safety of themselves, others, and/or the good order of the establishment
• disrupt an individual prisoner’s activities within prison where the evidence of such activities may not be visible but be based on substantial intelligence, yet which pose a significant risk to others or the good order of the establishment
• stabilise and prepare for a return to ordinary location.

The Unit at Wakefield is the Exceptional Risk Unit (ERU). This provides a long term location for those who, because of their offending behaviour and/or custodial history, are assessed as presenting so great a threat to the safety of staff/or other prisoners that a secure and isolated unit is the most appropriate and only option available.

Visitors to prisoners located in the CSC at Wakefield do not enter the main part of the Unit. The visitor’s room has a door accessed via an external entrance to the Unit. For that reason it is not possible for a visitor to assess the conditions in which prisoners in the unit are held. Although the Unit may appear to be austere, I am satisfied staff treat prisoners with decency and humanity at all times.

All referrals to the CSC system are dealt with on an individual basis and assessed by a professional team using their knowledge and skills to make a decision on the most appropriate route for the individual. Where the view is taken that the criteria for selection to the CSC system has not been met, the person concerned is not selected.

All prisoners in the CSC system are expected to agree to a care and management plan. Such a plan contains targets for the prisoner to meet with the aim of enabling him to make progress through and ultimately out of the CSC system. In addition they must work with multi-disciplinary teams for otherwise such progress is not possible to achieve.
‘Great well of psychiatric morbidity’ by Barbara Davis - June 2010

As a regular visitor to someone very dear to me who has been contained in the Close Supervision Centre (CSC) at HMP Wakefield for two years, I have witnessed first-hand the conditions in which prisoners on the unit are kept. The circumstances that led to him being held in this unit are somewhat insane; in fact it states in a document that he does not fit the criteria to be placed in such units.

The system claims the unit is solely for dangerous, disturbed and disruptive prisoners who allegedly have a range of complex and diverse psychological, psychiatric or security needs. Yet some prisoners decidedly do not fit the criteria, as has been proven in the past when HMPS has breached their guidelines in referring certain prisoners into CSC Units.

I found the first visit to be extremely disturbing - so much so that the impact of sadness still lingers within me. It is heartbreaking to see a loved one in these conditions and in my opinion prisoners there are psychologically maltreated through lack of care and treatment. Bit by bit this unit is destroying him.

The CSC Unit is supposed to offer such prisoners the opportunity to address their psychological and mental health needs, address their disruptive and anti-social behaviour and finally to address their offending behaviour in order that they can be returned to ordinary prison location.

In my view, this unit is certainly not primarily dedicated to treating prisoners in order for them to return back to ordinary location. This unit lacks trained dedicated staff, and how is locking someone up 23 hours a day in solitary confinement a way of 'treating' them?

Once a prisoner is referred/allocated to this unit they are statistically highly unlikely to be de-selected. De selection cases appear to be disproportionate to referrals, leading to the conclusion that prisoners are not progressing off the unit. The de-selection policy seems to be non-existent, with officers constantly watching, monitoring and scrutinising every negative behaviour or expression; assessment after assessment ... test after test.

It’s not funding that is required to address the flaws in this unit because the problem, without any doubt, is sheer lack of commitment to investigate change and the implementation of better therapeutic regimes. I haven’t been able to find any evidence stating that a government minister has attended a prison inspection and they seem to have turned a convenient blind eye in the hope that no one will notice the negligence and incompetence of this establishment. Former Chief Inspector of Prisons Sir David Ramsbottom stated (February 2001 – The Guardian) ‘The prison service is sitting on this great well of psychiatric morbidity without being able to do much about it and in many cases actually damaging the people concerned.’

He also recommended in an annual report that the unlimited isolation of inmates in punishment cells should cease, as it had been proven that it is jeopardising their mental health. These finding were based on a two year experiment. Sir David was subsequently pushed out of his job; one can only suggest the reason being was because he actually cared.

The prisoners’ exercise yard consists of a choice of four small pens which are caged. They are able to see daylight but have no direct view of the sun or the moon and these pens are somewhat basic, very dull and gloomy looking, without any outdoor facilities. A dog in a dog’s home has better surroundings/accommodation than prisoners in this unit.

Visits take place behind bars. Imagine two cells next to each other, the dividing wall between has a small hatch, bars have been placed in the hatch. The prisoners aren't allowed to have physical contact with their visitors. Prison Officers are present throughout the visit, meaning they sit next to the visitors listening to every word that is said, even though the visits are being monitored via cameras. I’d always assumed that visits were a time for the prisoner to interact with family, friends and loved ones to create an informal atmosphere allowing the prisoner to gain a sense of normality thus allowing him to maintain stability within himself.

Abuse and assault under Close Supervision - June/July 2011

I write to relate my personal experience of Close Supervision Centres (CSCs) and the torture I have been subjected to in prisons.

After officers sustained injuries at HMP Frankland in March 2010, only a sick individual could imagine the level of violence I sustained. This carried on at HMP Wakefield where I spent 13 days of extreme racial, physical and sexual abuse.

After I reported this, I was quickly moved to Woodhill CSC. Psychological torture is extremely painful and, some may say, worse than the physical kind. Orders are barked and failure to jump high enough leads to further abuse and, often, assault. I have on several occasions not jumped at all, like the time I was ordered to move my toothbrush from one clearly visible point in the cell to another, this resulted in no exercise, shower, phone call, food, library, nothing - behavioural modification skills these ex-army prison officers learned out in Afghanistan, Iraq and other wars.

From all the abuse I have suffered from prison staff, I now have Post-Traumatic Stress Disorder (PTSD), resulting in severe anxiety, panic attacks, flashbacks, nightmares and constant fear. I have gone through such bad spells that I have been unable to leave my bed for days.

I am told I require a clinical psychologist to treat my PTSD but ‘none are available’. I therefore have to live an unbearable life, just waiting for the day I am forced to end it, or the staff do it for me and cover it up to make it appear to be a suicide. Either way, I am struggling and need some serious support.

The worst thing is that I am innocent of the crime which I have been imprisoned for in the first place. This resulted in a life sentence of 35 years and I am almost four years into it.

I have been the victim of an unprovoked attack by officers while at HMP Woodhill, resulting in a fractured wrist and six hours in Special Accommodation. I then received a nicking for ‘attempting to commit an assault’ as well as having my unlock level increased and ALL privileges removed. It’s not the first time this has happened.

Kevan Thakrar - A4907AE, CSC, HMP Woodhill, Tattenhoe Street, Milton Keynes, Bucks, MK4 4DA
Unmasking the Close Supervision Centres - FRFI 219 - Feb/Mar 2011

A prisoner with recent experience of the CSC system reports on the “assessment” process for moving prisoners from the mainstream into the CSCs:

“CSC assessment may seem acceptable if you read the CSC Manual and Operating Standards; however in reality the Prison Service Instructions are nothing but a public face to cover the disturbing practices of the CSC.

CSC selection is supposed to be based upon individual risk assessment; however, prior to assessment, prisoners are kept in segregation for a lengthy period, severely abused and isolated. Then, while the prisoners are in this vulnerable state, Woodhill prison CSC sends a trainee psychologist to extract the answers they require to write a report. Staff read through prisoners’ files to find any complaints they have entered or any times prisoners have reacted violently; this is to know what buttons to push to get a reaction. Then their games start. Complained about visits before – then maybe your visitors are denied access to the prison. Problems with mail – your mail could now be completely stopped. Complained about food – your meal choice could now be wrong every day. Reacted violently in the past – there will be repeated false allegations of your making threats. Whatever each prisoner has had problems with is used in an attempt to provoke the most extreme reaction.

The prison knows exactly what it is doing. If the prisoner doesn’t become more volatile, the psychologist will say that they are attempting to manipulate the staff into believing they are not dangerous. If the prisoner complains about the provocation, then he is demonstrating ‘administrative violence’ in an attempt to waste prison management’s time through unfounded complaints. A violent reaction and the referral was correct – the prisoner is a clear danger and must be selected.

So what actually is the purpose of the CSC? To remove prisoners who have caused an embarrassment to the Prison Service as a punishment and have them in permanent segregation until they go crazy. For those who end up on CSC, the odds of getting off it are highest if your next stop is to be Broadmoor, Rampton or Ashworth. If you don’t have a known to enter negative file entries on prisoners who raise legitimate concerns. So what are they to do, isolated from known to enter negative file entries on prisoners who raise legitimate concerns. So what are they to do, isolated from

Inhumane Treatment of CSC Prisoners - FRFI 220 - Apr/May 2011

‘I think that the next point to get out is about the inflated risks and extreme security when moving off the unit. Comparisons can be drawn from Sharon Shalev’s book on US Supermax prisons.’

Prisoners who are free to move around the wing on both Woodhill and Whitemoor CSCs are forced to submit to a full strip-search and remain double handcuffed when leaving the unit for any purpose. Woodhill goes the extra mile and places the prisoner in a cellular vehicle where they remain handcuffed for the journey which might only be 50 metres to a hospital. And although the prisoner remains cuffed the entire journey, including during medical appointments, and never once leaves the sight of prison staff, the procedure is reversed on return, including the strip-search.

The purpose of this process is clear, to degrade and dehumanise the victims of the CSC system. Every attempt to breach a prisoner’s morale through extreme behaviour modification techniques is made. Even though the ‘National Security Framework’ states that prisoners should not remain cuffed whilst inside a cellular vehicle, CSC prisoners are not give lawful treatment.

The Independent Monitoring Board (IMB) promotes this torture of prisoners on the CSC. In fact, the IMB has been known to enter negative file entries on prisoners who raise legitimate concerns. So what are they to do, isolated from the rest of society with nobody to turn to for help? Is it any wonder that so many CSC prisoners end up in mental hospitals needing severe psychiatric care?

* Supermax: controlling risk through solitary confinement (Willan, 2009)


HMP Woodhell - Schnews - September 2003

On 16th July, six prisoners at HMP Woodhill’s Close Supervision Centre (CSC) A wing were refused exercise due to the hot weather. That night, four prisoners demonstrated their frustration by destroying their cells which resulted in a visit by the riot squad and a serious beating. In June, Glenn Wright, a prisoner on A-wing, wrote: “Who took the decision to add to our depression the daily rigours of isolation, and lack of healthy stimulation when this is contradictory to all medical remedies for depression known to mankind?”

Some of the prisoners at Woodhill CSC are under 24-hour CCTV watch and many are allowed only one hour’s exercise a day. Some cells are unlocked only in the presence of six prison officers in full riot gear and interviews with psychologists are overseen by six prison staff. Recently, complaints have been limited to one a week because it was considered that some prisoners were ‘abusing the privilege’ ?!

In February the Chief Inspector of Prisons published a report on conditions at the CSC at HMP Woodhill in Milton Keynes. Opened in 1996, this ‘jail within a jail’ was designed to house around 50 of the most potentially disruptive inmates, accused or convicted. One unit was closed, partly in response to a High Court ruling.

Even last year’s report showed that the basic needs of prisoners were being seriously neglected, in particular with regard to medical care, education and exercise, and expressed concern at the risk to the mental health of inmates. It concluded that “Control still dominated the system and personal development opportunities were relegated to the margins.”

It is no surprise then that violent demonstration, self-harm and suicide are serious problems at Woodhill. Glenn Wright identifies insomnia, disrupted relationships, bullying, boredom, enforced idleness, and the prospect of a long and meaningless sentence devoid of hopes and plans, as contributing factors to the problem. He says: “What I’m trying to say is through many months of isolation and oppressive conditions, uncertainty, lack of communication, support, I find it difficult to be quiet.”

For more information 0121 554 6947 www.mojuk.org.uk / Complain to Margaret Adams, Head of CSC, HMP Woodhill, Milton Keynes, Bucks, MK4 4DA (Now Governor Nigel Smith).

Source: http://www.schnews.uk.org/archive/news421.htm

CSC becomes place of punishment for mentally ill - FRFI Issue 223 - Oct/Nov 2011

Prisoners who should be in secure mental health hospitals are being held in a prison unit, designed to hold prisoners considered dangerous or disruptive. A prisoner in the unit has been banned from phoning his family following an accusation that he passed information about the regime to The Guardian/Observer. The unit’s operational manager has confirmed that it holds prisoners with mental health problems and that self-harm levels are high. More prisoners are to be transferred to the unit, where safety levels have been questioned. ERIC ALLISON reports.

The Close Supervision Centre (CSC) at Woodhill prison in Milton Keynes is one of three such units. The CSC system was established in 1998. Described as prisons within prisons, they were set up to house the most dangerous and disruptive prisoners transferred from mainstream prisons. The units are heavily staffed and prisoners intensively supervised. In July, Woodhill’s regime was criticised after Lee Foye, who had cut his ear off three months earlier, was able to slice off his other ear with a razor blade, provoking questions over the safety of those held there.

That incident occurred while the prison governor was holding an inquiry into the first episode of self-harm, which happened after Foye, who had already previously injured himself, was allowed into a shower room with a razor blade.

The admission that Woodhill holds prisoners with mental health problems came in a letter from Claire Hodson, operational manager of the CSC, who was responding to a letter from John Bowden, a prisoner in Perth and a regular contributor to FRFI, who raised questions about the regime at Woodhill. She said some prisoners ‘often present with highly complex needs which can include the presence of a mental disorder, the use of self harm, either as a coping mechanism, or as a maladaptive coping strategy, as well as one or more personality disorders. Some prisoners will present with high levels of self-harming behaviours due to their clinical needs.’ Hodson says confidentiality prevents her commenting on the nature and type of mental illness within the CSC other than to say that ‘the presence of mental disorder is not uncommon within the unit’.

Prisoner Kevan Thakrar says he is being victimised for blowing the whistle on the treatment of Lee Foye and other inmates. Staff have told him to ‘shut his mouth in future’. He describes the regime at Woodhill as ‘punitive-based mental torture, with staff trying to provoke inmates into reacting violently, thus justifying their presence in the unit’.

Relatives of other prisoners in the CSC at Woodhill have also contacted me and I receive regular disturbing reports about the regime there. Staff violence against prisoners appears to be a regular feature. Lee Foye was said to have been attacked by staff before he first self-harmed and in July, the website Justice for Dano Sonnex reported Dano suffering ‘another beating’. Dano’s cousin Lisa Hawkins Grant told FRFI:

‘The treatment being inflicted upon these inmates in the CSC units is appalling. The establishment would have everyone believe that they are the most dangerous in the prison system and also describes them as having mental health problems. If this is the case, why are they not assessed properly when they first enter the CSC? Instead, the staff provoke the prisoners to react violently so they can retaliate with horrific assaults. They are also subjected to regular strip-searches which can also be termed as sexual assault. What role, if any, does the medical staff take once they see the injuries inflicted upon these inmates? Who can they complain to? Prisoners are charged with assaulting officers yet it takes weeks before anyone deals with their complaints about assaults on them. They are placed in high control cells only being let out in handcuffs and surrounded by officers in riot gear, to make one short phone call per day. Why is the governor allowing this treatment to go on?’

Indeed. Where are the watchdogs in all this? When Lee Foye first cut off his ear, I reported the matter to Thames Valley Police, asking them to investigate. They eventually replied that, as no crime had been reported, they would not investigate. And both the Chief Inspectorate of Prisons and the Prison and Probation Ombudsman’s offices more or less said it was none of their business. I did not bother contacting the Independent Monitoring Board at Woodhill, whose silence, about the regime in the CSC has been deafening.

Sean Duggan, chief executive of the Centre for Mental Health, which researches and analyses mental health treatment in the criminal justice system, says a CSC is not the environment to keep someone with a severe and enduring mental illness. He says such people should be transferred to NHS secure care, where security and therapy can be combined.:’The levels of need among [CSC prisoners] should be investigated and action taken to offer them the same care and support as they would receive anywhere else’.


Letter to the Governor of HMP Woodhill - 10th May 2011

Dear Governor Nigel Smith,

I am writing to you regarding Mr Kevan Thakrar, #A4907AE, currently held in HMP Woodhill. I am extremely worried about his current situation and I am contacting you in the hope that you will investigate the information I have been told.

Some of this information I have been told directly by Mr Thakrar in personal correspondence and other things by his friends and family. He is currently being held in HMP Woodhill Close Supervision Centre after receiving two charges of attempted murder on two prison officers and one charge of seriously wounding a third in HMP Frankland last March, although Mr Thakrar assures me that it was in fact himself that was the victim of the attack and he was defending himself against these officers.

On the 30th September 2011, Mr Thakrar received written reasons as to why he continued to be detained in the Close Supervision Centre. The opening paragraph said words to the effect that the main reason was because he had got Miscarriages of Justice UK (MOJUK) to set up a website to campaign for his release. Although Mr Thakrar had already been in the CSC unit over 6 months before the website had gone live, and the setting up of his website had no connection with MOJUK. I would like to see where in the prison rules it says that convicted people that are trying to prove their innocence are not allowed to reach out to the general public for information and support? Surely there is no legal justification for punishing someone that is doing this?

Since being in the CSC unit Mr Thakrar has been held on Basic regime for an unlawfully longer time than the prison guide lines state. He has had a Judicial Review lodged against the prison for not allowing his brother in prison to visit him. The Ministry of Justice ordered that he be brought there by the 17th April 2011 but HMP Woodhill have refused his application saying that it is because he is still on Basic regime. Plus he has made allegations against prison staff there that have been completely ignored. At the end of March force was used on Mr Thakrar before a false allegation was made against him that he ‘attempted to commit an assault’, and he was put naked in an empty cell. He now has a hairline fracture on his wrist from this incident.

Now I am told that the Prison Ombudsman is not prepared to investigate allegations that Mr Thakrar has made of torture by prison staff. He submitted a complaint to the Director of High Security (DHS) that while at HMP Wakefield from 13th to the 24th March 2011 he was severely tortured. This was intercepted by a Mr Thomas Price, who claimed it to be a matter not suitable for a Confidential Access Complaint. Mr Thakrar submitted a further complaint to the DHS which Mr Danny McAllister responded to. He said that Mr Thakrar was mistaken and Mr Price had said he would forward the complaint to the Woodhill governor. After receiving NO response Mr Thakrar wrote to the Prison & Probation Ombudsman (PPO) quoting paragraph 20 of their terms of reference, which allow complaints to be accepted for investigation when a full response has not been received within six weeks. The PPO has refused to investigate or forward Mr Thakrar’s complaint back to either the DHS or HMP Woodhill’s governor. So it is now obvious that the Prison Ombudsman is not willing to investigate this complaint of torture.

It would seem clear to me that Mr Thakrar is suffering victimisation whilst being held in the CSC unit of HMP Woodhill. I can only imagine that it is the plan of the prison staff there to add negative entries to his prison records, and to provoke him as much as they can (in the hope that he will react) to support the claims of his bad character from the prison staff at HMP Frankland. The fact that his complaints are being intercepted, ignored and covered up only further prove his mistreatment.

The assessment of the use of CSC units may seem acceptable if you read the CSC Manual and Operating Standards; however in reality the Prison Service Instructions are nothing but a public face to cover the disturbing practices of the CSC unit. Prison guidelines and procedures are clearly not being followed here and I am writing to you in the hope that you will investigate the behaviour of the staff against Mr Thakrar and ensure that he is treated correctly.

Yours sincerely
Miss Waters
Letter to MIND - September 2011

My friend, Mr Kevan Thakrar, is currently held in HMP Woodhill Close Supervision Centre (CSC). Through my correspondence with him and from things I have heard from other sources I am very worried about the treatment people held in the CSC unit are receiving and the impact this is having on their mental health. In fact the unit has admitted that some people that have been deemed “difficult to handle” prisoners have been sent there as a result of their mental illnesses. But this unit is designed to be an extreme punishment and control unit for prisoners who have carried out acts that warrant their removal from the general prison population. So it is entirely inappropriate that prisoners should be sent to a place of extra punishment simply because they are suffering from a mental illness. A lot of the CSC unit is based around solitary confinement which is proven to cause mental illnesses in people not already suffering it, never mind the added damage it will do to someone who already is.

Just from my correspondence with Mr Thakrar I know that he has tried to take his own life on at least six different occasions in the last year. He is suffering from Post Traumatic Distress Disorder as a direct result of his treatment people held in the CSC unit are receiving and the impact this is having on their mental health. In fact the unit has admitted that some people that have been deemed “difficult to handle” prisoners have been sent there as a result of their mental illnesses. But this unit is designed to be an extreme punishment and control unit for prisoners who have carried out acts that warrant their removal from the general prison population. So it is entirely inappropriate that prisoners should be sent to a place of extra punishment simply because they are suffering from a mental illness. A lot of the CSC unit is based around solitary confinement which is proven to cause mental illnesses in people not already suffering it, never mind the added damage it will do to someone who already is.

I understand that you cannot take on individual cases but I really feel that the treatment of people being held in these Close Supervision Centres and the circumstances of why and how people are being held there should be open to much greater public scrutiny and support.

The psychological torture and abuse of the mentally ill anywhere in society is a crime and the CSCs are therefore responsible for operating regimes that are intrinsically unlawful and should be closed and shut down.

In 1984 a prisoner, Michael Williams, instigated a high profile legal action against the prison system and Home Office, one supported by the then National Council for Civil Liberties, that challenged the lawfulness of the Wakefield Prison “Special Control Unit” on the grounds that it’s regime breached the basic human rights of the prisoners held there. Although his legal action failed it raised the public profile of the Control Unit experiment (originally used on suspected Irish Republican combatants and outlawed by the European Court of Human Rights) and Wakefield closed the control unit. The regime operating in the CSCs, especially in terms of its treatment of mentally ill prisoners, needs to be similarly challenged and exposed, and the behaviour of those trying to legitimize the abuse inherent in that regime and paid to oversee it held fully and publicly accountable.

John Bowden - 6729, HMP Shotts, Cantrell Road, Shotts, Lanarkshire, Scotland, ML7 4LE.
Also published in Insidetime issue December 2011

UK’s toughest prisons condemned for housing mentally ill

Centre for Mental Health speaks out after leaked memo

The Centre for Mental Health has condemned the use of UK’s three toughest prisons to house people with mental health conditions.

It follows a memo leaked to The Guardian newspaper in which Claire Hodson, the operational manager at Woodhill “Close Supervision Centre” in Milton Keynes, admitted “the presence of a mental health or personality disorder is not uncommon” there.

Speaking to Mental Healthy, the Centre for Mental Health said:

“Prisoners with mental health problems are entitled to the same level of care and support as they would receive in a secure setting, but in a CSC; instead they should be transferred to secure care, where they can receive specialist treatment in a secure environment.

“Prisoners with severe and enduring mental illness require intensive therapeutic support which is not possible in a CSC; instead they should be transferred to secure care, where they can receive specialist treatment in a secure environment.

There is a government initiative known as “diversion” whereby people with mental illnesses who come into contact with the police and criminal justice system are meant to be identified and “diverted” into secure mental health settings at the earliest possible opportunity. Yet a Mind webpage states that 90% of the prison population have a mental health condition.

I am a human rights campaigner and I believe that, whilst deprivation of liberty is a punishment for serious offences, everyone – including convicted criminals – has basic human rights and that the most vulnerable, such as people with mental health conditions, need as much support as possible to survive in the system.

Ian Birch from Mentally Healthy - September 2011
Source: http://www.mentalhealthy.co.uk/news/1060-uk%E2%80%99s-toughest-prisons-condemned-for-housing-mentally-ill.html
Abuse of Prisoners with Mental Health Issues in CSCs - 12 October 2011

Prison doctors, psychiatrists and psychologists are currently complicit in the abuse and psychological torture of mentally ill prisoners held in a brutal jail control-unit at Woodhill Prison in Milton Keynes.

In 1989 the then Labour government introduced the so-called Close Supervision Centres (CSC) as a method of punishing and controlling “difficult” and “unmanageable” prisoners, and explicitly defined both the purpose of the CSC and the type of prisoner it was created to hold. The CSC was designed as an overt weapon of punishment based on behaviour modification against prisoners motivated to cause unrest and disruption in mainstream prison regimes; essentially the type of prisoners targeted were “subversives” and violent troublemakers. It was never openly said that within this group of control-problem prisoners earmarked for the CSC would be included prisoners suffering with mental illness or suicide tendencies. Never was it admitted that within a control unit characterised by endemic staff violence and brutality, mentally disturbed and damaged prisoners be subjected to the same degree of abuse and ill-treatment. Yet in August of this year Claire Hodson, operational manager of the CSC at Woodhill Prison, openly stated that a significant number of the prisoners held in the CSC suffered with what she described as a “mental disorder”. Information provided by prisoners within the Woodhill CSC describes such mentally damaged prisoners being driven beyond the limits of psychological endurance by a regime characterised by solitary confinement, sensory deprivation and brutality. The involvement of prison hired doctors and psychiatrists in either mitigating the increased mental trauma and damage caused to such prisoners by the CSC regime or vetting out completely such mentally ill and vulnerable prisoners from the CSC appears minimal or non-existent, which amounts to obvious collusion in the ill-treatment of such prisoners.

Historically of course the collusion and collaboration of the prison doctors, psychiatrists and psychologists in the ill-treatment and repression of prisoners has a long and infamous tradition. In the 1960s and 1970s compliant prison employed psychiatrists frequently and unlawfully assisted prison staff to control and subdue “unmanageable” prisoners by forcefully and unlawfully administering psychotropic drugs in a practice that became known as the “liquid cash”. Jail psychiatrists also provided their authority to mediate the resistance of rebellious prisoners by facilitating their removal to high-security mental hospitals such as Broadmoor and Rampton in a form of punishment that was known as “Nutting off”. During the 1980s the removal of “difficult” prisoners to jail psychiatric units such as the notorious “F.2.” unit at Parkhurst Maximum-Security Jail represented the ultimate punishment for those prisoners too “unmanageable” to be handled in ordinary prison segregation units; few prisoners emerged from places like “F.2.” seriously undamaged psychologically or punch drunk from the constant “sedation” of mind-destroying drugs administered by completely amoral prison hired psychiatrists. In the totalitarian society of prison such psychiatrists freed from any accountability or legal sanction align themselves completely with the institutional interests of prison regimes and often gladly participated in the institutional abuse of prisoners.

Punishing mentally ill prisoners for behaviour associated with their illness is both morally reprehensible and an unacceptable abuse of basic human rights, and all those involved in administering the regime in the CSCs under which mentally ill prisoners are effectively being tortured should be held legally accountable.

During the 1980s a then Tory government with a ruthless antipathy towards state financed and administered medical care closed most of the large psychiatric hospitals and caste it’s inmates and patients effectively onto the streets under the heading and illusion of “care in the community”. Many of those patients then found their way into the prison system, somewhere hopelessly ill-equipped and disinclined to deal with them in a medically appropriate and therapeutic way. Some of that same group, because of their more “confrontational behaviour” towards prison authority, as defined and interpreted by guards trained only in how to control and lock people up, will find their way into punishment orientated prison segregation-units where further and more deeper brutalisation will take place and greater damage will be inflicted. Those who respond to that with a more resilient streak of resistance or “inappropriate behaviour” will at some point find themselves consigned to a CSC, where the prison system will really go to work on their minds and spirits. Self-mutilation will then usually manifest itself, and within the Woodhill jail CSC levels of self-harm are disproportionately high (earlier this year a mentally ill prisoner in the Woodhill CSC completely severed both his ears whilst in the showers and in possession of a razor blade), something it’s operational manager Claire Hodson knowledgeably describes

Lifting the Lid on Close Supervision Centres

MIND* to John Bowden - 24th June 2011

A prisoner has the right to raise any concerns they have about their health, whether physical or mental, and there should be appropriate support in place. Prisoners should expect a similar standard of healthcare to people in the community.......However, it sounds like you feel there are not appropriate procedures in place at the Close Supervision Centre at Woodhill prison to ensure that the appropriate action can take place when a prisoner experiences mental distress.

* (MIND is a campaign that fights for the rights of people affected by mental health issues)

Open Letter to the National Offender Management Service from John Bowden - July 2011

Would the National Offender Management Service (NOMS) care to confirm or deny the following:

Self-harm and suicide attempts amongst prisoners held in the Close Supervision Centre (CSC) at HMP Woodhill are frequent and disproportionate to the relatively small number of prisoners held there.

There are at least three prisoners currently held in the CSC who are suffering with a serious diagnosable mental illness.

The powerful anti-psychotic drug Olanzapine has been administered to some prisoners in the CSC.

The psychiatrist responsible for assessing the mental health of the prisoners in the CSC does not interview every prisoner in the CSC and is regularly absent from the unit during which no cover is provided for those prisoners who are considered in need of regular psychiatric monitoring.

Would NOMS also care to clarify the following:

What procedures, if any, are in place to identify and remove from the CSC those prisoners who clearly are unable to psychologically cope with the rigours of the CSC regime and are beginning to display symptoms of mental illness and a propensity to commit serious self-harm and/or suicide?

There are serious concerns based on information provided from within the CSC that what is essentially a prison control-unit is being used against prisoners who are suffering with varying degrees of mental illness either caused by or accentuated by the CSC regime. These concerns can only really be addressed by an independent monitoring of the CSC regime and a full and proper assessment of its inmates by independent mental health experts.

Ultimately the CSC regime should be abandoned, because if the potential for a serious abuse of human rights is intrinsically inherent within it and is the essence of the regime, and it currently seems to serve no other purpose then the psychological destruction of a minority of “difficult prisoners” who are the least well-equipped mentally to cope with its crude and often brutal behaviour modification methods and techniques.

John Bowden - 6729
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Source: http://www.insidetime.org/mailbag.asp?a=501&c=an_open_letter_to_the_national_offender_management_service
Dear Mr Bowden,

Thank you for your letter regarding the Close Supervision Centre system.

Prisoners referred to the CSC system are referred due to their involvement, or alleged involvement, in single serious acts of violence or where concerns regarding the risk they present to others have been supported by ongoing or escalating violent incidents. If accepted, a thorough assessment of their risks and needs is carried out to ascertain the most suitable location and management plan for that individual, either within or outside of the CSC system.

Such prisoners often present with highly complex needs which can include the presence of a mental disorder, the use of self-harm either as a coping mechanism or as a maladaptive coping strategy, as well as diagnoses of one or more personality disorders. Thus it is not unexpected that some individuals will present with high levels of self-harming behaviours due to their clinical presentation.

Due to the individual and often complex needs of these prisoners a specialist multi-disciplinary team is in place to provide appropriate care and management to help to manage and reduce individual risk to both self and others. The multi-disciplinary team includes psychological services, mental health nursing, and psychiatry, supported by discipline staff. The care provided is based on individual needs and prisoners who have identified treatment needs, that would be best served within alternative environments such as high secure hospitals or prison based DSPD units, are referred accordingly.

I cannot confirm the number or type of diagnoses of mental illness within the CSC prisoner population due to matters of confidentiality other than to say that the presence of a mental disorder or personality disorder is not uncommon within this population. Equally I am not at liberty to confirm the type or frequency of prescribed medication prescribed to CSC prisoners.

The CSC regime is an essential part of the prison system for managing those prisoners whom are considered to present the highest risk to others. Consequently decisions regarding management must take into consideration the risk posed to others as well as the risk of harm to self. Progression from the CSC can only take place when the risk of harm to others is deemed to have reduced sufficiently to enable a return to normal location. Reducing the risk of harm to others is the primary aim of the CSC system. Whilst located within the CSC prisoners are provided with access to support from the multi-disciplinary team and prisoners are encouraged to work with the team to access that support.

All decisions made by the national CSC committee are monitored by the Independent Monitoring Board on a rota basis to provide independent oversight and openness of decision making.

Yours sincerely,

Claire Hodson
Directorate of High Security