



**Prison Health  
Escorts and Bedwatches Interim Report No.2  
February 2006**

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Escorts and Bedwatches Audit  
Interim Report No.2  
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**Reviewers:**

This document must be reviewed by the following work stream leads and representatives of other government departments.

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**Approvals:**

This document requires the following approvals.

Name	Signature	Title	Date of Issue	Version
Richard Bradshaw		Head of Prison Health	17 Feb 06	0.8
Michael Spurr		Director of Operations	17 Feb 06	0.8

**Document Status**

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## 1. Introduction and Background

In April 2003, budgetary responsibility for prison health services in English public sector prisons transferred from the Home Office to the Department of Health. Primary Care Trusts (PCTs) have now taken on the responsibility for commissioning high quality primary care based services throughout most of England with the remainder of establishments following in April 2006. At the time of the initial transfer, it was decided to exclude responsibility and funding for the security costs associated with escorts and bedwatches pending further investigation.

Prison Health and the prison service are therefore in the process of carrying out a comprehensive study to identify costings, clinical reasons for care being offered outside the prison and how better value for money could be achieved through service redesign.

This is the second interim report to be produced by Prison Health on the findings of the prison health escorts and bedwatches project, ahead of the production of the final report in summer 2006. These reports will feed back analysis of the audit data to establishments and PCTs, allowing them to view their own returns in the context of the national picture and to consider where they might wish to drill down for more detailed information. The second interim report follows the format of its predecessor but introduces several new elements such as analyses by operational capacity, and of time against ICD-10 category.

### 1.1 Project Initiation

An audit exercise is being carried out over a twelve-month period in all English and Welsh public sector and contracted out prisons in order to gain a realistic picture of activity levels, taking into account any irregularities in the data due to seasonal, regime or other factors.

Running in parallel to this exercise, three options for the future funding and management of escorts and bedwatches activity are being piloted in shadow form at a number of prison establishments. These options are as follows:

- I. the situation remains as it is with the funding remaining with HMPS
- II. the budget being transferred to the PCT
- III. a shared budget, with joint responsibility

The overall aim of the project is to identify the most cost effective option of the future management of the escorts and bedwatches budget for recommendation to DH and HMPS senior management.

An Escorts and Bedwatches Steering Group has been established to oversee both exercises, comprising the following members:

Name	Role
Julie Dhuny	Durham & Chester Le Street PCT (Chair)
Jeanne Bryant	HMPS Security
Sue Russell	Regional Development Lead, NW Development Team
Georgina Lacey	Healthcare Manager, Isle of Wight Cluster
Helen Coombes	Healthcare Manager, HMP Nottingham
Paul Follett	DH Statistics
Dr. Jenny Bywaters	DH Public Health
Malcolm Pearce	DH Prison Health

Name	Role
Tom Bolger	Healthcare Manager, HMP Wandsworth
Claire Watson	Melton, Rutland and Harborough PCT
Sandra Peck	Healthcare Manager, HMP Morton Hall
Richard Wilkinson	Security & Operations Governor, HMP Morton Hall
Wendy Hardicker	Southern Norfolk PCT
Mike Shann	Governing Governor, HMP Birmingham
Henry Potts	CHIME, University College London
Bob Steele	Health Economist, Medicon Associates
Susan Knight	NOMS
Steven Henderson	DH Prison Health
Shazad Khan	DH Prison Health
Fiona Emmett	DH Prison Health (secretariat)

The main responsibilities of this group are to i) support the central team and advise on the implications of escorts and bedwatches for both prisons and PCT; ii) support the pilot sites and ensure information collected is of the required quality and content and; iii) to review all papers and advise on the content of all reports.

## 1.2 Pilots

The following ten prison / PCT partnerships have agreed to take part in the piloting arrangements.

### Option 1 (Budget remains with prison):

PCT	Prison(s)
Melton, Rutland and Harborough PCT	Ashwell, Gartree and Stocken
Ashton, Leigh and Wigan PCT	Hindley

### Option 2 (Budget moves to PCT):

PCT	Prison(s)
Durham and Chester le Street PCT	Frankland
Bedford PCT	Bedford

### Option 3 (Shared budget between PCT and prison):

PCT	Prison(s)
Nottingham City PCT	Nottingham
West Lincolnshire PCT	Morton Hall
Preston PCT	Preston
Eastern Cheshire PCT	Styal

Each pilot site has appointed a management team, with accountability to the Escorts and Bedwatches Steering Group, to meet with a minimum frequency of once per month. Each local management team has been required to agree with the Steering Group a shadow budget, based on the relevant establishment's healthcare escorts and bedwatches expenditure for 2004/05 plus a 5% uplift. The management teams have responsibility to provide accurate costings against their shadow budget, to look at means of reducing escorts and bedwatches expenditure, to identify any 'hidden' costs relating to this activity and to report regularly to the Steering Group via the central project team. All teams are also asked to contribute to a project-wide lessons learned log.

The commencement date for the piloting arrangements was October 2005 and they are scheduled to run until early Summer 2006.

### 1.3 Communications Strategy

Prison Health staff have attended all area managers' meetings at least once, to ensure that all governing governors and area managers have been briefed about the project, and have subsequently returned to three of these to present local data. Eleven healthcare manager / PCT regional meetings have also been attended to ensure widespread dissemination of the project. The Prison Officers Association and Royal College of Nursing were briefed at a joint meeting in May 2005 and a representative from the project attended a further meeting of the same group in January 2006. Unfortunately, they were unable to give their planned presentation due to time constraints. A representative will therefore be sent to the next meeting in March 2006.

## 2. Data Collection

### 2.1 Data Collection Method

Prison Health produced a questionnaire (See Annex B: Questionnaire) in consultation with colleagues in HMPS, DH, the wider NHS, the contracted prisons sector and external research consultants. The questionnaire was designed to provide the data necessary to address the following issues:

- How consistent is the demand for escorts and bedwatches within each prison?
- Is the demand for escorts increasing or decreasing?
- For what clinical purposes are escorts and bedwatches taking place?
- What examples of good practice can be identified from the field and shared around the estate?
- What resources should be transferred if responsibility for escorts and bedwatches moves to the NHS?
- How many episodes take place outside of normal business hours for prisons with and without 24-hour healthcare provision?

Prior to the full implementation of the audit, the questionnaire was piloted in eight prisons for a period of two weeks in March 2005. The final version produced is the seventh iteration, taking account of the pilot and the consultation exercise. Text replies have been kept to a minimum with tick boxes where possible, ensuring the questionnaire is easily understandable and not time-consuming to complete. The age categories used tally with those used by OPCS in order to allow cross-referencing with data collected on secondary care services provided in the general population. The categories of presenting complaint correlate with those used in WHO's ICD-10 system of classification, for the same reason. For the purposes of the audit, escorts and bedwatches have been defined as follows:

**Escort** means either:

- a) the prisoner was taken by prison staff for external healthcare treatment and was returned to the establishment on the same day,
- b) a late night visit to A&E in which the prisoner was not admitted to hospital (but technically returned to the establishment the following day), or
- c) transfer of the prisoner to a secure NHS mental health facility.

**Bedwatch** means that the prisoner was admitted to hospital and spent at least one night outside of the establishment, requiring constant observation for security purposes.

The full data collection began on 18 April 2005 and extends to all visits to external healthcare service providers, including those where an escort was not used, in order to give a complete picture of activity in this area. Mental health transfers are also collected, being included in the above definition of 'escort'. Returns were initially collected on a weekly basis in order to allow speedy identification of any data collection difficulties. This was followed by a phased move to monthly collection from July 2005. Prison Health staff are using an Excel spreadsheet to monitor receipt of the questionnaires, showing totals received from each establishment and the percentage of establishments having returned in each reporting period.

The commencement of the audit was moved back from the originally scheduled date of 01 April 2005 in order to allow full incorporation of the findings from the pilot and consultation exercises. Consignments of the printed questionnaires were sent by Parcelforce to all establishments, along with a covering letter, guidance for completion of the questionnaire and a timetable for returns. Although the majority of these parcels were delivered and signed for at the prison gate, a large number of them failed to arrive at the health care manager's office, delaying the commencement of the data collection in a number of establishments. Some of these were reluctant to provide the data retrospectively, resulting in incomplete returns for the opening weeks of the audit.

The initial guidance explained the use of OCPS and ICD-10 categories and drew attention to sections of the form where further clarification was felt to be required, based on the outcomes of the pilot and consultation exercise. On 21 June 2005, an updated guidance document was circulated to all health care managers, addressing the mistakes most frequently found in the completion of the questionnaires during the first two months of the audit. The most common errors were:

- presenting complaint for fractures being coded as 'Musculoskeletal system and connective tissue' instead of the correct 'Injury, poisoning and other consequences of external causes'
- presenting complaint for sexually transmitted diseases being coded as 'Genitourinary system' instead of the correct 'Infectious (transmittable) and parasitic diseases'

A further set of guidance, addressing specific points regarding the questionnaire and the audit as a whole, was circulated with the first interim report in September 2005. In both cases, there appears to have been a reduction in these mistakes following the circulation of the guidance. Another relatively frequent error has subsequently been found to be:

- presenting complaint for cuts, burns and similar injuries being coded as 'Skin and subcutaneous tissue' instead of the correct 'Injury, poisoning and other consequences of external causes'

Where possible, the Prison Health team has liaised directly with the staff responsible for completing the forms in order to correct any consistently made errors. The situation will continue to be closely monitored and further guidance will be issued.

Where the data appear to be anomalous or otherwise remarkable, Prison Health have contacted the relevant establishment directly in order to determine the reason.



Some establishments have experienced problems in collecting data due to a lack of communication between the security staff, who have responsibility for escorting the prisoners, and the health care centre. In these cases, when a prisoner leaves the establishment in the evening or at the weekend, it has been difficult to retrieve the necessary information from the prison gate.

In addition, the movement of prisoners' medical records as part of transfer between prisons has caused some difficulties for establishments when retrospectively completing questionnaires for escorts and bedwatches involving prisoners no longer resident at that establishment. Some cases of missing data are therefore due to the information no longer being available to the staff completing the questionnaire.

It is important to note that the data collected on tests may not capture the totality of this activity. Some establishments have informed us that the escorting officers have not always reported all the tests undergone by the escorted patient. The health care centre have only become aware of these tests when the results have arrived, some time after completion and return of the questionnaire to Prison Health.

## 2.2 SPSS

Questionnaire returns are input centrally for statistical analysis onto SPSS, a software package used for conducting statistical analyses, manipulating data, and generating tables and graphs that summarize data. After consultation with external research consultants, the decision was taken to use SPSS over other software packages as it offers considerably more statistical functionality than, for example, Microsoft Excel.

## 2.3 Summary of Returns

The data collected represent 24,852 episodes, of which 23,518 were either escorts or unaccompanied hospital visits and 1,334 were bedwatches. These cover a period of 194 days (18 April to 28 October 2005).

Returns were required from all 142 private and public prisons in England and Wales. This figure has been reduced to 141 following the closure of The Weare in July 2005. Despite having shared health care services, Grendon / Spring Hill and Usk / Prescoed are each treated as two separate establishments, as they fall into different prison types. Of the 142 prisons, 100% have submitted returns for all or some of the activity within this period.

For a breakdown of the returns by prison (grouped into prison type) see Annexes D to I. Where the number of episodes reported is low, this may be due to the prison in question having started to return some time after the commencement of the audit period.

The 142 prisons have been categorised into six types:

Prison type	Number with 24 hour hospital cover	Number without 24 hour cover	TOTALS
Trainer/Other	9	39	48
Local	34	0	34
Female	8	9	17
Open	0	14	14
YOI/Juvenile	12	9	21
High Secure	8	0	8
<b>TOTALS:</b>	<b>71</b>	<b>71</b>	<b>142</b>

The category 'Trainer/Other' captures the Category B and C Trainer prisons and all other male establishments which do not fit any of the other categories.

## **2.4 Validation**

Returns were validated by randomly selecting a 10% sample and asking prisons to provide figures from the gate book or other locally held information source for escorts and bedwatches activity within the period 01 July 2005 to 30 September 2005 inclusive. These were then compared with the information collected in the audit returns from that

prison. Results of the validation are listed in

SECTION A

General Information

A1: Establishment name \_\_\_\_\_

A2: Date (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

For escorted and unaccompanied hospital visits enter date of visit; for bedwatches enter date prisoner left the establishment.

A3: Did patient leave establishment during office hours? (i.e., Mon – Fri 0900 – 1700)

During office hours  Outside office hours

A4: Gender of patient M  F

A5: Age: 0-15  16-17  18-24  25-34  35-44  45-54  55-64  65+

A6: Prisoner No. \_\_\_\_\_

A7: Number of staff involved

Please indicate how many staff were involved with the escort / bedwatch at any one time.

None  1  2  3 or more

If 3 or more please specify how many \_\_\_\_\_

*For escorts and unaccompanied hospital visits please complete section B.*

*For bedwatches please complete section C.*

SECTION B

Escorts and unaccompanied hospital visits

*For unaccompanied visits, please go straight to B2*

B1: Length of episode in hours \_\_\_\_\_

*Enter full duration of episode, from when patient left the establishment to when s/he returned, to the nearest whole number*

B2: Nature of episode:

Planned outpatient appointment

Answer B3 to B5

Emergency visit to A & E / other emergency facility

Answer B3 to B5

Mental health transfer

Questionnaire completed

B3: Which outpatient department? \_\_\_\_\_

(e.g., orthopaedic, maternity, dermatology etc.)

and / or,

B4: Which, if any, of the following tests / treatments?

Blood test  Colposcopy  CT scan  Cystoscopy

Day surgery  Dentist\*  ECG  EEG

Endoscopy  MRI  OT  Physio

Ultrasound  X-ray

Other tests (please specify): \_\_\_\_\_

*\*Completion of B5 not needed*

**B5:** Category of presenting complaint:

Indicate category of **initial** clinical reason for hospital visit

Infectious (transmittable) and parasitic diseases .....

*e.g., TB, HIV, **sexually transmitted diseases**, viral hepatitis*

ALL cancers and benign tumours .....

Blood and blood-forming organs .....

*e.g., anaemia*

Endocrine, nutritional and metabolic diseases .....

*e.g., diabetes, disorders of thyroid gland*

Mental and behavioural disorders .....

Nervous system .....

*e.g., cerebral palsy, inflammatory diseases of central nervous system, extrapyramidal and movement disorders, degenerative neurological conditions (Alzheimer's, Parkinson's, etc.)*

Eye and ear .....

Circulatory system .....

*e.g., hypertension, ischaemic heart diseases, pulmonary heart disease*

Respiratory system .....

*e.g., acute upper respiratory infections, influenza and pneumonia, tonsillitis*

Digestive system .....

*e.g., hernia, appendicitis, liver disease, colitis*

Skin and subcutaneous tissue .....

*e.g., infections of the skin, dermatitis, eczema*

Musculoskeletal system and connective tissue .....

*e.g., arthropathies, osteopathies, muscle disorders, infections of musculoskeletal system*

Genitourinary system .....

*e.g., renal failure, kidney and urinary diseases, diseases of the male and female genital organs (**not sexually transmitted diseases**)*

Pregnancy, childbirth and the puerperium .....

*e.g., delivery, abortion, disorders in pregnancy*

Injury, poisoning and other consequences of external causes .....

*e.g., overdoses, fractures, lacerations, stabbing, hanging and other trauma*

Caused by: Accident

Intentional self-harm

Assault

**SECTION C**

**Bedwatches**

**C1:** Length of bedwatch in whole days and extra hours \_\_\_ days \_\_\_ hrs

Enter duration of entire bedwatch episode (including length of admission and travel to and from NHS premises) in complete days plus any additional hours to the nearest hour (e.g., 3 days 6 hrs)

**C2:** Planned or emergency?

Planned inpatient stay

Emergency hospital admission

**C3:** Name of hospital \_\_\_\_\_

**C4:** Which inpatient ward? \_\_\_\_\_

(e.g., medical, surgical, IC, CCU, maternity, etc.)

SECTION C

Bedwatches (continued)

C5: Category of presenting complaint:

Indicate category of **initial** clinical reason for hospital visit

- Infectious (transmittable) and parasitic diseases .....   
*e.g., TB, HIV, **sexually transmitted diseases**, viral hepatitis*
  - ALL cancers and benign tumours .....
  - Blood and blood-forming organs .....   
*e.g., anaemia*
  - Endocrine, nutritional and metabolic diseases .....   
*e.g., diabetes, disorders of thyroid gland*
  - Mental and behavioural disorders .....
  - Nervous system .....   
*e.g., cerebral palsy, inflammatory diseases of central nervous system, extrapyramidal and movement disorders, degenerative neurological conditions (Alzheimer's, Parkinson's, etc.)*
  - Eye and ear .....
  - Circulatory system .....   
*e.g., hypertension, ischaemic heart diseases, pulmonary heart disease*
  - Respiratory system .....   
*e.g., acute upper respiratory infections, influenza and pneumonia, tonsillitis*
  - Digestive system .....   
*e.g., hernia, appendicitis, liver disease, colitis*
  - Skin and subcutaneous tissue .....   
*e.g., infections of the skin, dermatitis, eczema*
  - Musculoskeletal system and connective tissue .....   
*e.g., arthropathies, osteopathies, muscle disorders, infections of musculoskeletal system*
  - Genitourinary system .....   
*e.g., renal failure, kidney and urinary diseases, diseases of the male and female genital organs (**not sexually transmitted diseases**)*
  - Pregnancy, childbirth and the puerperium .....   
*e.g., delivery, abortion, disorders in pregnancy*
  - Injury, poisoning and other consequences of external causes .....   
*e.g., overdoses, fractures, lacerations, stabbing, hanging and other trauma*
- Caused by: Accident
- Intentional self-harm
- Assault



For the final report, a more detailed validation of the data is planned by cross-checking with NHS data collection systems using the prison's postcode.

### 3. Results

#### 3.1 Prisoner Demographics

##### 3.1.1. Gender

As expected, the majority of episodes involved male prisoners in establishments of the types Local and Trainer/Other. These figures are absolute numbers of episodes reported. Please refer to Section 4 for the analysis by Operational Capacity.

Prison type	Prisoner Gender: Number of Episodes Escorts & Bedwatches		
	Male	Female	TOTAL
Trainer/Other	8566	0	8566
Local	7190	34*	7224
Female	0	3216	3216
Open	2665	0	2665
YOI/Juvenile	2042	0	2042
High Secure	1139	0	1139
<b>TOTAL:</b>	<b>21602</b>	<b>3250</b>	<b>24852</b>

##### 3.1.2. Age

As expected, the age group 25 to 34 is the category containing the highest number of prisoners involved in escorts, bedwatches and unaccompanied hospital visits. The higher figure in the 35 to 44 category from open prisons reflects the fact that these establishments hold large numbers of prisoners nearing the end of long-term sentences.

Prison Type	Age of Prisoner: Number of Episodes Escorts & Bedwatches								
	0-15	16-17	18-24	25-34	35-44	45-54	55-64	65+	TOTAL
Trainer /Other	0	0	985	3225	2322	1061	621	352	8566
Local	0	0	1290	2720	1951	624	353	286	7224
Female	1**	26**	804	1177	705	420	73	10	3216
Open	0	0	207	780	886	533	195	64	2665
YOI /Juvenile	39	525	1417	41***	15***	3***	2***	0	2042
High Secure	0	0	111	309	290	259	112	58	1139
<b>TOTAL</b>	<b>40</b>	<b>551</b>	<b>4814</b>	<b>8252</b>	<b>6169</b>	<b>2900</b>	<b>1356</b>	<b>770</b>	<b>24852</b>

\* The female patients in a local prison are from Peterborough, the only establishment built to house both men and women, and from Durham, which has retained a very small female unit.

\*\* These are from Bullwood Hall, New Hall, Downview and / or Eastwood Park, all of which have some accommodation for juveniles.

\*\*\* These are from Swinfen Hall and / or Onley. HMYOI Swinfen Hall is a 'Young Adult Offender Institution', holding prisoners aged 18-25. HMP & YOI Onley is a Category C adult prison and YOI. This means that it could have been coded either as 'YOI/Juvenile' or as 'Trainer/Other'. We have chosen to place it in the former category.

## 3.2 Number of Staff and Time Involved

### 3.2.1 Escorts and Bedwatches Combined: Number of Staff involved per Episode

Prison Type	Number of Episodes: By Number of Staff Involved per Episode (Escorts and Bedwatches)								
	0	1	2	3	4	5	6	7	TOTAL
Trainer/Other	74	105	7755	612	20	0	0	0	8566
Local	8	62	6652	411	80	10	1	0	7224
Female	691	176	2299	39	9	2	0	0	3216
Open	2034	612	18	0	1	0	0	0	2665
YOI/Juvenile	42	47	1849	92	11	1	0	0	2042
High Secure	0	6	444	310	276	48	52	3	1139
<b>TOTAL</b>	<b>2849</b> <sup>1</sup>	<b>1008</b>	<b>19017</b>	<b>1464</b>	<b>397</b>	<b>61</b>	<b>53</b>	<b>3</b>	<b>24852</b>

As would be expected, the variation in number of staff involved per event according to prison type was highly statistically significant<sup>2</sup>. This is demonstrated by the following table:

Prison Type	Median Number of Staff involved per Escort
High Secure	3
Other	2
Open	0

### 3.2.2 Length of Episodes: Escorts and Unaccompanied Visits

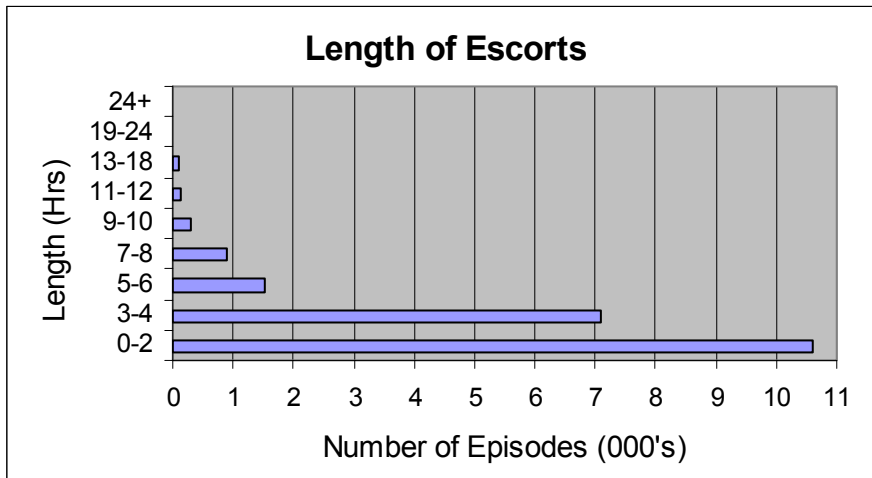
The reported length of escort episodes varied from 1 to 48 hours, showing a highly skewed distribution, as illustrated by the bar chart below. 85% of escort episodes were of short duration (equal to or less than 4 hours). It is likely that misreporting of bedwatches as escorts may account for some of the longest reported escorts. For the final report, Prison Health will investigate those cases of escorts reported as more than 24 hours in duration, of which there were 14 in this dataset.

The length of episodes was not recorded for the 2,830 cases when no escorts were used. These have been excluded from the following analysis.

<sup>1</sup> This figure includes 815 prisoners who will have been released on temporary licence or housed in semi-open conditions in addition to the 2034 prisoners housed in full open conditions.

<sup>2</sup> Kruskal-Wallis  $\chi^2(5) = 14,336, p < 0.0001$



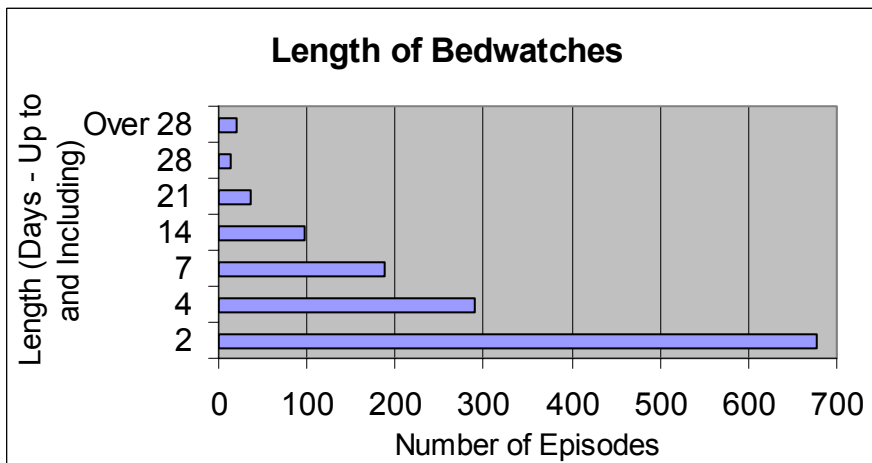


The median length of escort was 2 hours<sup>3</sup> and the interquartile range was 2 to 4 hours.

### 3.2.3 Length of Episodes: Bedwatches

The reported length of bedwatch episodes varied from 4 hours to 77 days, again showing a highly skewed distribution. It is likely that day cases incorrectly treated as bedwatches may account for some of the shortest reported episodes. For the final report, Prison Health will investigate those cases of bedwatches reported as less than 12 hours in duration, of which there were 15 in this dataset.

The following analysis excludes 10 unaccompanied episodes.



The median length of bedwatch was 48 hours<sup>4</sup> (2 days) with an interquartile range of 27 to 101 hours.

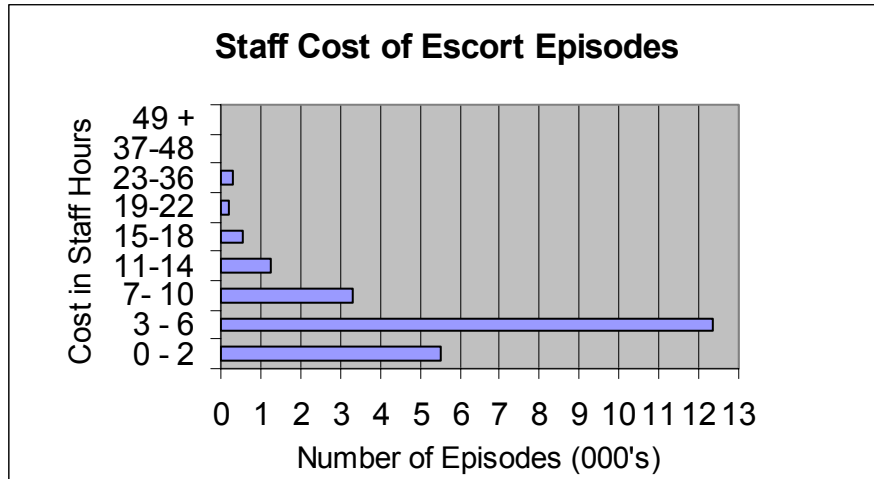
<sup>3</sup> Bootstrapped 95% confidence interval: 2-2 hours

<sup>4</sup> Bootstrapped 95% confidence interval: 48-51 hours

### 3.2.4 Cost in Staff-Hours: Escorts

From the data collected on the number of staff involved and the length of episodes, a measure of the cost in staff-hours can be calculated as illustrated in the diagram below.

In terms of staff-hours, the distribution of escorts is again highly skewed:

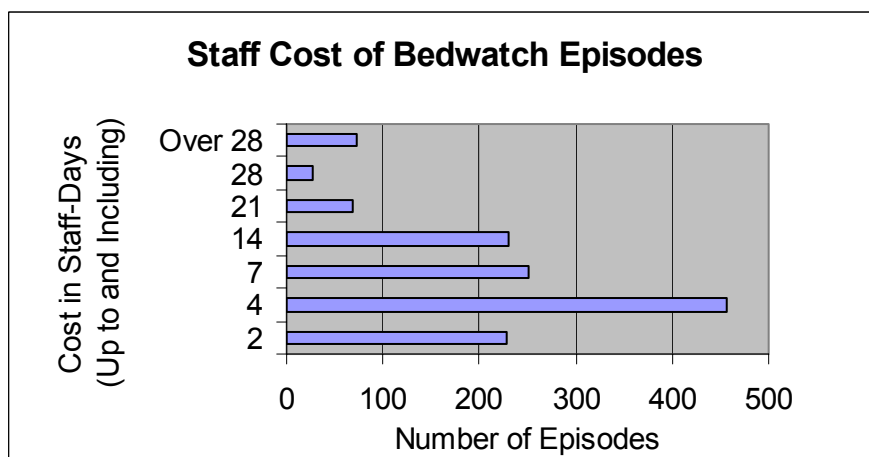


The median here was 4 staff-hours<sup>5</sup> with an interquartile range of 3 to 6 staff-hours.

The mean is also useful here as it gives us the expected cost: 5.7 staff-hours.<sup>6</sup> Two establishments have provided us with the figure £15.13 as the rate at which officers are currently paid per hour for a bedwatch. Using this figure, we can calculate an expected average staff cost of £86.24 per escort episode. However, this provisional figure does not include hidden costs such as preparation time, transport or subsistence costs (which would apply if the episode was over 12 hours in duration). These elements will be obtained via the investigations of the pilot sites.

### 3.2.5 Cost in Staff-Hours: Bedwatches

In terms of costs in staff-hours, the distribution of bedwatches is again highly skewed:



<sup>5</sup> Bootstrapped 95% confidence interval is entirely within 4 hours.

<sup>6</sup> Bootstrapped 95% confidence interval: 5.6 to 5.8 hours.

The median here was 96 staff-hours<sup>7</sup> with an interquartile range of 54 to 202 staff-hours. The mean is also useful here as it gives the expected cost: 196 staff-hours<sup>8</sup>, *i.e.* slightly over 8 person-days. Using the above cited figure of £15.13 per hour for rate of pay, we can calculate an expected average staff cost of £2,965.48 per complete bedwatch episode. Again this provisional figure does not include hidden costs.

### 3.3. Nature of Episodes

#### 3.3.1 Escorts and Bedwatches Combined: Planned, Emergency, Mental Health Transfer

The overwhelming majority of escorted and unaccompanied hospital visits were for planned outpatient appointments.

Nature of Episode	Escort Episodes	% of Total
Planned Outpatient Appointment	20,362	87
Emergency	2,912	12
Mental Health Transfer	244	1
<b>TOTAL</b>	<b>23,518</b>	<b>100</b>

Prison type	Escorts and Unaccompanied Visits: Nature of Episode						TOTAL
	Planned Outpatient Appointment		Emergency		Mental Health Transfer		
	Number of Episodes	% per Prison Type	Number of Episodes	% per Prison Type	Number of Episodes	% per Prison Type	
Trainer /Other	7,389	90.8	734	9.0	15	0.2	8,138
Local	5,578	83.4	959	14.3	153	2.3	6,690
Female	2,611	86.0	410	13.5	16	0.5	3,037
Open	2,469	93.3	174	6.6	3	0.1	2,646
YOI /Juvenile	1,385	70.6	567	28.9	11	0.6	1,963
High Secure	930	89.1	68	6.5	46	4.4	1,044
<b>TOTAL</b>	<b>20,362</b>	<b>86.6</b>	<b>2,912</b>	<b>12.4</b>	<b>244</b>	<b>1.0</b>	<b>23,518</b>

The proportion of emergency versus planned episodes varies significantly according to prison type.<sup>9</sup> As previously, a far greater proportion of emergency episodes occur in YOI/Juvenile prisons, followed by Locals.

#### 3.3.2 Bedwatches: Planned, Emergency, Mental Health Transfer

By contrast, almost two-thirds of bedwatch episodes arose from emergencies.

Nature of Episode	Escort Episodes	% of Total
Planned Admission	485	36
Emergency	849	64
<b>TOTAL</b>	<b>1,334</b>	<b>100</b>

<sup>7</sup> Bootstrapped 95% confidence interval: 96 to 102 staff-hours.

<sup>8</sup> Bootstrapped 95% confidence interval: 180 to 216 staff hours.

<sup>9</sup>  $\chi^2(5) = 723, p < 0.0001$

Prison Type	Bedwatch Episodes: Nature of Episode				
	Planned Inpatient Stay		Emergency		TOTAL
	Number of Episodes	% per Prison Type	Number of Episodes	% per Prison Type	
Trainer /Other	163	38.1	265	61.9	428
Local	180	33.7	354	66.3	534
Female	45	25.1	134	74.9	179
Open	7	36.8	12	63.2	19
YOI/Juvenile	31	39.4	48	60.8	79
High Secure	59	62.1	36	37.9	95
<b>TOTAL</b>	<b>485</b>	<b>36.4</b>	<b>849</b>	<b>63.6</b>	<b>1,334</b>

Unlike the previous smaller dataset collected for the first interim report, the data used here show a significant variation according to prison type in the proportion of planned versus emergency bedwatch episodes.<sup>10</sup> There were far fewer emergency episodes from the high secure prisons and more emergency episodes from the female estate.

### 3.3.3 Escorts, Unaccompanied Visits and Bedwatches Combined:

Timing	Number of episodes	% of Total
During office hours	22,670	91
Outside office hours	2,182	9
<b>TOTAL</b>	<b>24,852</b>	<b>100</b>

Escorts, Unaccompanied Visits and Bedwatches Combined: Out-of-Hours Analysis					
Prison Type	During office hours		Outside office hours		TOTAL
	Number of Episodes	% of Total	Number of Episodes	% of Total	
<b>With 24 hour cover</b>	11,437	89.7	1,311	10.3	12,748
<b>Without 24 hour cover</b>	11,233	92.8	871	7.2	12,104
<b>TOTAL</b>	<b>22,670</b>	<b>91.2</b>	<b>2,182</b>	<b>8.8</b>	<b>24,852</b>

The definition of office hours was set out on the questionnaires as Monday to Friday 0900-1700. As per the previous report, prisons with 24-hour cover had a significantly<sup>11</sup> higher proportion of escort and bedwatch episodes outside office hours. The following table shows the breakdown of out-of-hours escorts sent out by prisons with and without 24-hour cover by presenting complaint.

<sup>10</sup>  $\chi^2(5) = 39.4, p < 0.001$

<sup>11</sup> Fisher's exact test,  $p < 0.0001$

<b>Out of Hours Escorts and Unaccompanied Visits: Category of Presenting Complaint by Healthcare Cover</b>					
<b>Category of presenting complaint</b>	<b>Without 24 Hour cover</b>		<b>With 24 Cover</b>		<b>% Difference (Non 24 hr - 24 hr)</b>
	<b>Number of Episodes</b>	<b>% of Total</b>	<b>Number of Episodes</b>	<b>% of Total</b>	
Infectious and Parasitic Diseases	32	4.38	12	1.20	-3.18
Cancers and Benign Tumours	23	3.15	9	0.89	-2.26
Blood and Blood-Forming organs	5	0.68	11	1.10	+0.42
Endocrine, nutritional and metabolic diseases	12	1.64	11	1.10	-0.54
Mental & behavioural disorders	2	0.27	3	0.29	-0.02
Nervous System	16	2.19	34	3.39	+1.2
Eye and Ear	41	5.61	39	3.88	-1.73
Circulatory System	54	7.39	62	6.18	-1.21
Respiratory System	20	2.74	16	1.59	-1.15
Digestive System	102	14.0	65	6.47	-7.53
Skin & subcutaneous Tissue	27	3.69	21	2.09	-1.6
Musculoskeletal system and connective system	64	8.76	53	5.29	-3.47
Genitourinary system	59	8.07	135	13.45	+5.38
Pregnancy, childbirth & the puerperium	8	1.09	19	1.89	+0.8
Injury, poisoning & other consequences of external causes	266	36.39	514	51.20	+14.81
<b>TOTAL</b>	<b>731</b>	<b>100.00</b>	<b>1004</b>	<b>100.00</b>	

### 3.4 Clinical Analysis

#### 3.4.1 Escorts and Unaccompanied Visits: By Condition

As before, the most common category of presenting complaint for escorts and unaccompanied visits was 'Injury, poisoning and other consequences of external causes'. The high proportion of these for which no reported reason was given (35%) is partly due to the central Prison Health team having recoded episodes originally coded incorrectly as 'Musculoskeletal system and connective tissue' or as 'Skin and subcutaneous tissue'. In addition, a number of questionnaires were returned with this data item uncompleted, sometimes because of difficulties with retrospectively completing questionnaires for episodes involving prisoners transferred between establishments.

The extremely small number of episodes for clinical reasons in the category 'Mental and behavioural disorders' repeats the finding of the first report. This is perhaps a surprising result given the high prevalence of mental health problems in the prison population.

<b>Number of Escorts: By Condition</b>			
Category of Presenting Complaint	Number of Escort Episodes	%	of Total
Infectious and parasitic diseases	899	4	
All cancers and benign tumours	956	4	
Blood and blood-forming organs	267	1	
Endocrine, nutritional and metabolic diseases	423	2	
Mental and behavioural disorders	93	<1	
Nervous system	586	3	
Eye and ear	1,875	8	
Circulatory system	1034	4	
Respiratory system	743	3	
Digestive system	3,102	13	
Skin and subcutaneous tissue	1,251	5	
Musculoskeletal system and connective system	2,372	10	
Genitourinary system	2,281	10	
Pregnancy, childbirth and the puerperium	438	2	
Injury, poisoning and other consequences of external causes, of which...	6,953	30	
Accident	3,000	43	
Intentional self-harm	624	9	
Assault	930	13	
Unknown	2,399	35	
<b>TOTAL</b>	<b>23,273</b>	<b>100</b>	

### 3.4.2 Escorts and Unaccompanied Visits: Tests and Procedures Performed

This table examines the tests and treatments carried out on prisoners escorted out on an outpatient or A&E visit. Information on tests carried out during inpatient treatment was not collected, as these would be part of a package of in patient care. The numbers of tests and treatments collected will not reflect the true numbers due to under-reporting, but are indicative of the wide range of treatments carried out. The most commonly reported tests and treatments are X-rays (including barium enemas, intravenous urograms and mammograms), ultrasound, blood tests, visits to the dentist, minor surgery and dialysis.

Escorts and Unaccompanied Visits: Tests and procedures Performed					
Test	Number	Percentage of Total	Test	Number	Percentage of Total
Acupuncture	1	0.01	Injections		
Allergy test	1	0.01	<i>Botox</i>	1	0.01
Angiogram	5	0.05	<i>Flu</i>	2	0.02
Appliances Fitted (eye, leg)	10	0.10	<i>Tetanus</i>	1	0.01
Arthroscopy	4	0.04	<i>Vaccination</i>	10	0.10
BCG	3	0.03	K Wires Removed	1	0.01
Biopsy Unspecified	43	0.43	Knee Brace Fitted	1	0.01
Biopsy Skin	5	0.05	Lung Function Unspecified	6	0.06
Biopsy Liver	5	0.05	Spirometry	1	0.01
Blood Pressure	3	0.03	Minor Surgery	686	6.80
Blood Test	1048	10.3	Nasal Obstruction	2	0.02
Blood Transfusion	4	0.04	Nerve Conduction Study	5	0.05
Cast Change/Removal	31	0.31	Nuclear Imaging	1	0.01
Cauterisation	1	0.01	OT	108	1.07
Chemotherapy	30	0.30	Physiotherapy	814	8.07
Circumcision	1	0.01	Pins Removed	1	0.01
Coil Fitted	4	0.04	Podiatrist	1	0.01
Counselling	5	0.05	UV		
Cyst Removal	1	0.01	<i>Psolaren+UVA</i>	24	0.24
Cystoscopy	49	0.49	<i>Ultra Violet B</i>	6	0.06
Dentist	1188	11.8	<i>UV Unspecified</i>	8	0.08
Diabetic Retinopathy	1	0.01	Scans		
Diabetic Shoes Fitting	6	0.06	<i>Bone Density</i>	6	0.06
Dialysis	503	4.99	<i>Bladder</i>	1	0.01
Ear Syringing	1	0.01	<i>Thyroid</i>	1	0.01
ECG	259	2.57	VQ	2	0.02
EEG	57	0.57	DVT	3	0.03
Endoscopy Unspecified	248	2.46	CT	275	2.72
Sigmoidoscopy	7	0.07	<i>MRI</i>	306	3.04
Gastroscopy	2	0.02	<i>Ultrasound</i>	3493	34.64
Eye Test	65	0.64	<i>Doppler</i>	4	0.04
Eye lash Removal	1	0.01	<i>Duplex</i>	1	0.01
Fit/check pacemaker	2	0.02	Radiotherapy	75	0.74
Foetal assessment	1	0.01	Sonography	1	0.01
Glucose Intolerance Test	2	0.02	Speech therapy	3	0.03

Escorts and Unaccompanied Visits: Tests and procedures Performed					
Test	Number	Percentage of Total	Test	Number	Percentage of Total
Hearing test	12	0.12	Stitches	23	0.23%
Hydrotherapy	3	0.03	Tattoo Removal	1	0.01
Insulin Stress Test	1	0.01	TB Check	1	0.01
Termination Pregnancy	2	0.02	X-Rays		
Tracheotomy Replace	1	0.01	<i>Unspecified</i>	3493	34.64
Urine Test	1	0.01	<i>Barium Enema</i>	22	0.22
Vasectomy	1	0.01	<i>Intravenous Urogram</i>	5	0.05
Venogram	4	0.04	<i>Mammogram</i>	4	0.04
<b>TOTAL TESTS AND PROCEDURES REPORTED:</b>				<b>1084</b>	

### 3.4.3 Bedwatches: By Condition

As before, the most common category of presenting complaint by far for bedwatches was 'Injury, poisoning and other consequences of external causes'. Where previously the proportion of bedwatch episodes in this category had been reduced in comparison with escorts and unaccompanied visits, they were now closely matched.

Number of Bedwatches: By Condition		
Test	Number of Episodes	Percentage of Total
Infectious and parasitic diseases	19	1
All cancers and benign tumours	42	3
Blood and blood-forming organs	15	1
Endocrine, nutritional and metabolic diseases	45	3
Mental and behavioural disorders	4	<1
Nervous system	44	3
Eye and ear	36	3
Circulatory system	164	12
Respiratory system	79	6
Digestive system	210	16
Skin and subcutaneous tissue	46	3
Musculoskeletal system and connective system	72	5
Genitourinary system	89	7
Pregnancy, childbirth and the puerperium	46	3
Injury, poisoning and other consequences of external causes, of which...	423	32
Accident	139	33
Intentional self-harm	160	38
Assault	74	18
Unknown	50	12
<b>TOTAL</b>	<b>1,334</b>	



### 3.4.4 Escorts, Unaccompanied Visits and Bedwatches Combined: By Condition

For the majority of prison types the categories *Injury, poisoning and other consequences of external causes, Genitourinary System and Digestive System* are the top three presenting complaints. However, *Musculoskeletal System and Connective System* replaces *Genitourinary* for the Local and Open Estates, and similarly *Pregnancy, Childbirth and the Puerperium* replaces the same category for the Female estate. *Injury, poisoning and other consequences of external causes* is the most common cause for an escort or bedwatch episode in all prison types. This was the most pronounced in the YOI/Juvenile Estate where it results in over 60% of episodes.

The relatively high proportion of episodes in the category ‘Digestive system’ may be accounted for by the fact that dental problems fall under this heading in the ICD-10 system of classifications. This was consistent with the results presented in the first interim report.

Please note that the following table excludes 245 mental health transfers, thus reporting on a total of 24,607 events.

Number of Escort and Bedwatch Episodes: By Condition													
Category of presenting complaint	Trainer/ Other		Local		Female		Open		YOI/ Juvenile		High Secure		TOTAL
	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	
Infectious and parasitic diseases	301	3.5	172	2.4	149	4.7	201	7.6	72	3.5	23	2.1	918
All cancers and benign tumours	361	4.2	291	4.1	157	4.9	96	3.6	49	2.4	44	4.0	998
Blood and blood-forming organs	53	0.6	101	1.4	40	1.2	70	2.6	9	0.4	9	0.8	282
Endocrine, nutritional and metabolic diseases	178	2.1	140	2.0	52	1.6	60	2.3	20	1.0	18	1.6	468
Mental and behavioural disorders	19	0.2	17	0.2	9	0.3	41	1.5	8	0.4	3	0.3	97
Nervous system	179	2.1	236	3.3	91	2.8	25	0.9	44	2.2	55	5.0	630
Eye and ear	757	8.9	487	6.9	218	6.8	195	7.3	143	7.0	111	10.2	1,911
Circulatory system	434	5.1	397	5.6	120	3.8	140	5.3	26	1.3	81	7.4	1,198

Number of Escort and Bedwatch Episodes: By Condition													
Category of presenting complaint	Trainer/ Other		Local		Female		Open		YOI/ Juvenile		High Secure		TOTAL
	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	Number Of Episodes	% of Total	
Respiratory system	334	3.9	250	3.5	64	2.0	96	3.6	39	1.9	39	3.6	822
Digestive system	1,357	15.9	792	11.2	595	18.6	278	10.4	140	6.9	150	13.7	3,312
Skin and subcutaneous tissue	536	6.3	325	4.6	129	4.0	182	6.8	81	4.0	44	4.0	1,297
Musculoskeletal system and connective system	972	11.4	618	8.7	170	5.3	557	20.9	56	2.8	71	6.5	2,444
Genitourinary system	730	8.5	881	12.5	308	9.6	132	5.0	122	6.0	197	18.0	2,370
Pregnancy, childbirth and the puerperium	0	0.0	14	0.2	470	14.7	0	0.0	0	0.0	0	0.0	484
Injury, poisoning and other consequences of external causes	2,340	27.4	2,349	33.2	628	19.6	589	22.1	1,222	60.2	248	22.7	7,376
<b>TOTAL</b>	<b>8,551</b>	<b>100.0</b>	<b>7,070</b>	<b>100.0</b>	<b>3,200</b>	<b>100.0</b>	<b>2,662</b>	<b>100.0</b>	<b>2,031</b>	<b>100.0</b>	<b>1,093</b>	<b>100.0</b>	<b>24,607</b>

#### 4. Number of Episodes by Operational Capacity

The number of episodes was counted for each establishment for comparison against operational capacity figures<sup>12</sup> which stand as an approximate measure of the prison population at each establishment.

As reporting was not equally strong at all establishments at the start of the audit, the first two months of data (7,853 episodes) have been excluded to minimise potential bias. This analysis therefore reports on all questionnaires submitted from 18 June 2005 to 28 October 2005 (16,999 events). Moreover, the following establishments who have not made returns for the full period of the audit have been excluded: HMP North Sea Camp, HMP Spring Hill and HMP Forest Bank. HMP Weare has also been excluded following its closure during the audit period. Pentonville, which is known to have a problem with low reporting, has been excluded from the rate analysis only.

##### 4.1 Rate Analysis

The following table shows the rate of episodes per operational capacity for each prison type. This is expressed in terms of the number of escort or bedwatch episodes *per* 100 operational capacity places *per* year.

Prison Category	Geometric mean number of episodes <i>per</i> 100 places <i>per</i> year	Median
Female	1.08	1.25
Open	1.05	0.97
Trainer/Other	0.59	0.58
Local	0.50	0.51
YOI/Juvenile	0.38	0.35
High Secure	0.33	0.37

The result is statistically significant<sup>13</sup>. Female and Open prisons have significantly higher rates than the other categories, but not each other. High Secure and YOI/Juvenile prisons have significantly lower rates than Female, Open and Trainer/Other prisons, but not each other or Local prisons. Trainer/Other prisons have significantly lower rates than Female and Open prisons and significantly higher rates than High Secure and YOI/Juvenile prisons, but do not significantly differ from Local prisons. Local prisons have significantly lower rates than Female and Open prisons, but do not significantly differ from any other categories.

The presence of 24-hour healthcare cover was proved<sup>14</sup> not to make a significant difference once prison category is taken into account. This indicates that 24-hour cover varies by prison category.

##### 4.2 Comparison of Rate Predicted by Op. Cap. v. Actual Rate

A predicted number of episodes per establishment has been calculated for each

<sup>12</sup> Operational capacity figures obtained from Prisons Handbook 2006 (Mark Leech, MLA Press, 2005) and/or HM Prison Service website

<sup>13</sup>  $F_{5, 131} = 12.1, p < 0.01$

<sup>14</sup>  $F_{1, 131} = 0.6, p = 0.4$

establishment, based on operational capacity alone. This figure is based on the proportion of the prison estate's total operational capacity accounted for by that particular establishment, compared against the actual number of episodes reported<sup>15</sup>.

The individual  $\chi^2$  component for each establishment is a measure of the amount of deviation from the predicted figure. A value of 4 or more would be statistically significant<sup>16</sup>.

This analysis provides a gross weighting of the figures by population. However, other factors such as the age and sex of the population would have to be taken into account in order to generate an expected number of episodes according to prison population. Accordingly, there are some very substantial differences between actual activity levels and those predicted by operational capacity alone. The following table lists the 5 greatest differences where reported events are less than predicted by operational capacity:

Establishment	Operational capacity	# episodes (escorts and bedwatches)	Predicted # episodes based on operational capacity	Difference	$\chi^2$ component
Peterborough	1020	44	220	-176	141
Glen Parva	808	37	174	-137	108
Altcourse	1010	86	218	-132	80
Swaleside	756	33	163	-130	104
Woodhill	762	36	164	-128	100

Pentonville has been removed from the above list, due to a known problem with underreporting.

The following table identifies the 5 greatest differences where reported events are more than predicted by operational capacity:

Establishment	Operational capacity	# episodes (escorts and bedwatches)	Predicted # episodes based on operational capacity	Difference	$\chi^2$ component
New Hall	422	258	91	167	307
Preston	620	268	134	134	135
Gartree	404	218	87	131	197
Wandsworth	1461	428	315	113	41
Wymott	800	276	172	104	62

The male open prisons Sudbury and Standford Hill and the female open prison East Sutton Park have not been included in this list; nor has the female semi-open prison Drake Hall, from which around 50% of episodes are unaccompanied by prison staff. As no staff costs arise from these episodes, a comparison with escorted episodes from

<sup>15</sup> Establishment's operational capacity figure divided by total operational capacity figure, multiplied by the total number of episodes. Comparison is carried out using  $\chi^2 = (e - o)^2/e$

<sup>16</sup> Following a  $\chi^2(1)$  distribution

other establishments is unhelpful in this case. For example, it is good practice to encourage prisoners in open conditions to independently seek healthcare provision in the community prior to their release.

Please see Annex J: Individual Prison Data for a breakdown of results by prison.

## **5. Discussion**

This is the second interim report to be produced by Prison Health on the findings of the prison health escorts and bedwatches project. The intention of the interim reports is to provide an early indication of findings arising from the data collection exercise ahead of the production of the final report in summer 2006. The final report will comprise of a far more in-depth study of the findings, and will make a recommendation to senior management of the Prison Service and Prison health as to whether the escort and bedwatches budget should transfer from the Home Office to the Department of Health.

### **5.1 Audit Returns**

All prison establishments are now participating in the Escorts and Bedwatches audit and the standard of questionnaire returns has greatly improved. Current known issues are as follows:

- HMP Pentonville and HMP Swaleside are recognised to have issues with low returning. The project team remains in close contact with these establishments.
- Several sites without 24-hour healthcare cover are not returning a record of events occurring outside of office hours. This generally due to poor communication links between healthcare and security staff. The project team is liaising with the known affected sites but would ask that every establishment act to rectify any such situation.
- There are a number of possible anomalies within the dataset, which will be fully investigated prior to production of the final report. For example, HMP Belmarsh have sent a significantly higher number of prisoners out presenting genitourinary problems.

### **5.2 Validation**

A 10% random sample of 14 establishments was chosen for the validation exercise. Of these 14 establishments, 3 were unable to return validation data as detailed below. The remaining establishments obtained figures by checking the entries in the Gate book or healthcare appointment book. An initial difference of 11% between the audit data and the establishment's own data was found. However, 2 establishments are known to have problems with the returning of data relating to out-of-hours events. If these are excluded, the difference drops to 6%. This is an improvement on the first interim report, where the reported difference was 12%.

### **5.3 Main Findings**

This report deals with a much larger dataset than its predecessor (24,852 events). However, the vast majority of initial findings from the first interim report still stand.

As can be expected, the median number of staff involved in escort and bedwatch episodes is higher for high secure prisons (3 escorts) than for other prison types (2 escorts). The median length of an escort episode is 2 hours and median staff-hour cost 4 hours. The median length of a bedwatch episode is 48 hours and the median staff cost was 96 staff hours.

The most common reason for an escort event across all prison categories is Injury and Poisoning. This is replicated for bedwatch events, with the exception of the High Secure

estate, for which the most common reason is digestive system disorders. The majority of events are completed within a 1-3 hour period for escorts and a 1-3 day period for bedwatches.

#### **5.4 Tests Performed Outside of Establishment**

From the analysis of tests performed (Section 3.4.2), it would appear that a number of treatments that could be done in the health centre are carried out externally. Blood tests, for example, are fairly simple procedures and the decision to send a prisoner out for this when healthcare facilities exist in a prison is questionable. Anecdotal evidence from the pilot sites suggests that this is mainly due to prisoners having 'poor veins'. Assuming this is the case, it would suggest that there is a training gap amongst prison healthcare staff in this area.

Prisoners are also sent out for injections (including flu jabs and vaccinations), stitches (inserting and removing), to have dressings changed and urine tests. There may be valid reasons for some of these incidents, but in the main these basic procedures should be carried out in the prison health centre. It has been suggested by several sites that the uncleanliness of the clinical rooms causes the patients to be sent out. One PCT has solved this by employing civilian cleaning staff, rather than using prisoners. However, it would not seem unreasonable to train the prisoners involved in cleaning the health centre to maintain agreed standards of cleanliness.

A number of treatments can only be carried out in a general hospital setting, such as chemotherapy, MRI and DVT scans and colposcope. However, taking prisoners out for some forms of physiotherapy and occupational therapy, counselling, podiatry and a number of minor surgical procedures, may not be cost effective.

To examine this further, the project team consulted a GP practice to determine which procedures from the list resulting from the audit should generally be offered within primary care. These were given as follows: Acupuncture, skin biopsy, blood pressure, change dressing, coil fitted, Counselling, cyst removal, ear syringing, ECG, eye test, eye lash removal, vaccinations (inc. flu, tetanus), spirometry, minor surgery, nasal obstruction, physiotherapy, podiatrist, speech therapy, stitches, urine test.

Work in this area will be taken forward within the pilot sites, and the need to issue guidelines to prison staff will be considered. In terms of future commissioning, it may be possible to use the definitions of Essential, Additional and Enhanced Services within the current GMS contract to inform the types of care needed to meet prison needs. These are listed in Annex K: GMS Contract 2003 Extract.

#### **5.5 Emergency and Out-of-Hours Episodes**

Prisons with 24-hour cover continue to report a significantly higher proportion of escort episodes outside office hours (defined as Monday to Friday 9 – 5). Prisons with 24-hour cover are more likely than those without 24-hour cover to send out emergency escorts for complaints relating to injury or the genitourinary system. In contrast, they are less likely to send out emergency escorts for complaints relating to the digestive system, musculoskeletal system, cancers and infections.

In total, over ten per cent of escorts and unaccompanied visits result from emergencies. Within the YOI/Juvenile estate, this rises to thirty per cent of all escorts episodes dropping back down to a maximum of fifteen per cent for all other prison types. By contrast, over two thirds of bedwatch episodes arise from emergencies. The female

estate has the greatest proportion of emergency episodes, closely followed by the Local, Open, Trainer/other and YOI/Juvenile estates. Less than forty per cent of bedwatch episodes in the High Secure estate result from emergencies. This would seem to support the findings of the Safer Custody Group, who reported in their last newsletter (September/October 2005) that proportionally, women accounted for 53% of all self-harm incidents, and men just 42%. This is spite of the fact that women form only 6% of the prison population.

## 5.6 Analysis by Operational Capacity

The analysis of Escort and Bedwatch episode by operational capacity shows that rates vary by prison category. They are highest in the Female (around 1.08 episodes per 100 places per year) and Open (1.05) estates. This falls to 0.6 for Trainer/Other, 0.5 for Local, 0.4 for YOI/Juvenile and 0.3 for the High Secure estate. The question remains as to what causes these differences. Healthcare provision within the prisons and security implications in sending prisoners out seem likely explanations of the high rates in Open prisons and the low rates in High Secure prisons. The high rates in Female prisons may reflect the security level or they could reflect greater health needs in the female prison population. For example, if we exclude episodes related to pregnancy, childbirth and the puerperium, the rates drops to 0.95. The low rates in YOI/Juvenile establishments may reflect the lower health needs of a younger population.

It should also be stressed that a high activity level does not in itself imply a problem with service delivery or management. A more detailed consideration of the nature of the population held at a particular establishment and the facilities available to it would be required in order to judge how closely the establishment matches the level of activity we might expect. Some individual prisoner's health problems can account for multiple episodes: this will inflate the number of episodes for particular establishments. For example, Belmarsh reported 70 episodes of more than 7 hours duration where the reported presenting complaint was in the category *Genitourinary System*. On investigation, it was discovered that all of these were accounted for by one prisoner suffering from renal failure. Furthermore, there may be cases where low numbers of episodes are due to the prison in question holding a reservoir of unmet need.

It is also interesting to briefly compare the public estate against the private estate, which houses approximately ten per cent of the total prison population. As a rough estimate, we could expect the private estate to send out a corresponding proportion of the total escort and bedwatches per year. However, the public estate sends out ninety-four per cent of all episodes and the private estate only six per cent. This hints that the latter has a greater financial incentive to ensure that unnecessary escorts and bedwatches do not occur. This will be examined for the final report in order to ascertain whether there are any useful lessons/good practice from the private estate which could be applied to the public estate. The final report will also include a comparison against of the prison population against A&E figures for the general population.

## 5.7 Future Activities

The pilot sites will shortly be commencing an exercise to look at the indirect costs associated with escorts and bedwatch episodes. The output of this exercise will be the establishment of a general profile for each type of escort (e.g. escort/bedwatch, emergency/planned) which will feed into future budgetary exercises. A workshop has been scheduled for March 2006 to discuss the outputs in detail. The project team is also investigating the possibility of holding a wider consultation event in May 2006. Further details will be issued when available.



To conclude, the project team would like to express their gratitude for the excellent co-operation of colleagues from around the estate, and particularly those from the pilot sites, in contributing to this project.

## 6. Annex A: Statistical Glossary

<b>Term</b>	<b>Definition</b>
<b>Median</b>	The middle of a distribution: half of the scores are above the median and half are below the median. The median is less sensitive to extreme scores than the mean and this makes it a better measure than the mean for skewed distributions.
<b>Mean</b>	Commonly called the average. The result of all the scores divided by the number of scores. Good measure for roughly symmetric distributions but can be misleading in skewed distributions.
<b>Confidence Interval</b>	Describes the degree of statistical uncertainty in results. A confidence interval for a median describes the range of likely values for the median when we take into account the possible sampling error in a study.
<b>Interquartile Range</b>	Describes the spread of values: the interquartile range is the middle half of all the values, with one quarter of values below the interquartile range and one quarter above.
<b>Standard Deviation</b>	The most commonly used measure of spread. Computed as the square root of the variance.
<b>Variance</b>	A measure of how spread a distribution is. Computed as the average squared deviation of each number from its mean.

## 7. Annex B: Questionnaire



# Prison Healthcare escorts and bedwatches audit 2005/2006

Please complete this form on the prisoner's return to the establishment and use a separate copy of the form for every healthcare escort, bedwatch or unaccompanied hospital visit.

For the purposes of this audit:

**Escort** means either:

- a) the prisoner was taken by prison staff for external healthcare treatment and was returned to the establishment on the same day,
- b) a late night visit to A & E in which the prisoner was **not** admitted to hospital, or
- c) transfer of the prisoner to a secure NHS mental health facility.

**Bedwatch** means that the prisoner was admitted to hospital and spent at least one night outside of the establishment, requiring constant observation for security purposes.

SECTION A

General Information

A1: Establishment name \_\_\_\_\_

A2: Date (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

For escorted and unaccompanied hospital visits enter date of visit; for bedwatches enter date prisoner left the establishment.

A3: Did patient leave establishment during office hours? (i.e., Mon – Fri 0900 – 1700)

During office hours  Outside office hours

A4: Gender of patient M  F

A5: Age: 0-15  16-17  18-24  25-34  35-44  45-54  55-64  65+

A6: Prisoner No. \_\_\_\_\_

A7: Number of staff involved

Please indicate how many staff were involved with the escort / bedwatch at any one time.

None  1  2  3 or more

If 3 or more please specify how many \_\_\_\_\_

*For escorts and unaccompanied hospital visits please complete section B.*

*For bedwatches please complete section C.*

SECTION B

Escorts and unaccompanied hospital visits

*For unaccompanied visits, please go straight to B2*

B1: Length of episode in hours \_\_\_\_\_

*Enter full duration of episode, from when patient left the establishment to when s/he returned, to the nearest whole number*

B2: Nature of episode:

Planned outpatient appointment

Answer B3 to B5

Emergency visit to A & E / other emergency facility

Answer B3 to B5

Mental health transfer

Questionnaire completed

B3: Which outpatient department? \_\_\_\_\_

(e.g., orthopaedic, maternity, dermatology etc.)

and / or,

B4: Which, if any, of the following tests / treatments?

Blood test  Colposcopy  CT scan  Cystoscopy

Day surgery  Dentist\*  ECG  EEG

Endoscopy  MRI  OT  Physio

Ultrasound  X-ray

Other tests (please specify): \_\_\_\_\_

\*Completion of B5 not needed

**B5: Category of presenting complaint:**

Indicate category of **initial** clinical reason for hospital visit

- Infectious (transmittable) and parasitic diseases .....   
*e.g., TB, HIV, **sexually transmitted diseases**, viral hepatitis*
- ALL cancers and benign tumours .....
- Blood and blood-forming organs .....   
*e.g., anaemia*
- Endocrine, nutritional and metabolic diseases .....   
*e.g., diabetes, disorders of thyroid gland*
- Mental and behavioural disorders .....
- Nervous system .....   
*e.g., cerebral palsy, inflammatory diseases of central nervous system,  
 extrapyramidal and movement disorders, degenerative neurological conditions  
 (Alzheimer's, Parkinson's, etc.)*
- Eye and ear .....
- Circulatory system .....   
*e.g., hypertension, ischaemic heart diseases, pulmonary heart disease*
- Respiratory system .....   
*e.g., acute upper respiratory infections, influenza and pneumonia, tonsillitis*
- Digestive system .....   
*e.g., hernia, appendicitis, liver disease, colitis*
- Skin and subcutaneous tissue .....   
*e.g., infections of the skin, dermatitis, eczema*
- Musculoskeletal system and connective tissue .....   
*e.g., arthropathies, osteopathies, muscle disorders, infections of  
 musculoskeletal system*
- Genitourinary system .....   
*e.g., renal failure, kidney and urinary diseases, diseases of the male and female  
 genital organs (**not sexually transmitted diseases**)*
- Pregnancy, childbirth and the puerperium .....   
*e.g., delivery, abortion, disorders in pregnancy*
- Injury, poisoning and other consequences of external causes .....   
*e.g., overdoses, fractures, lacerations, stabbing, hanging and other trauma*
- Caused by: Accident   
 Intentional self-harm   
 Assault

**SECTION C**

**Bedwatches**

- C1:** Length of bedwatch in whole days and extra hours \_\_\_ days \_\_\_ hrs  
 Enter duration of entire bedwatch episode (including length of admission and travel to and  
 from NHS premises) in complete days plus any additional hours to the nearest hour  
 (e.g., 3 days 6 hrs)
- C2:** Planned or emergency?   
 Planned inpatient stay   
 Emergency hospital admission
- C3:** Name of hospital \_\_\_\_\_
- C4:** Which inpatient ward? \_\_\_\_\_  
 (e.g., medical, surgical, IC, CCU, maternity, etc.)

SECTION C

Bedwatches (continued)

C5: Category of presenting complaint:

Indicate category of **initial** clinical reason for hospital visit

- Infectious (transmittable) and parasitic diseases .....   
*e.g., TB, HIV, **sexually transmitted diseases**, viral hepatitis*
- ALL cancers and benign tumours .....
- Blood and blood-forming organs .....   
*e.g., anaemia*
- Endocrine, nutritional and metabolic diseases .....   
*e.g., diabetes, disorders of thyroid gland*
- Mental and behavioural disorders .....
- Nervous system .....   
*e.g., cerebral palsy, inflammatory diseases of central nervous system,  
 extrapyramidal and movement disorders, degenerative neurological conditions  
 (Alzheimer's, Parkinson's, etc.)*
- Eye and ear .....
- Circulatory system .....   
*e.g., hypertension, ischaemic heart diseases, pulmonary heart disease*
- Respiratory system .....   
*e.g., acute upper respiratory infections, influenza and pneumonia, tonsillitis*
- Digestive system .....   
*e.g., hernia, appendicitis, liver disease, colitis*
- Skin and subcutaneous tissue .....   
*e.g., infections of the skin, dermatitis, eczema*
- Musculoskeletal system and connective tissue .....   
*e.g., arthropathies, osteopathies, muscle disorders, infections of  
 musculoskeletal system*
- Genitourinary system .....   
*e.g., renal failure, kidney and urinary diseases, diseases of the male and female  
 genital organs (**not sexually transmitted diseases**)*
- Pregnancy, childbirth and the puerperium .....   
*e.g., delivery, abortion, disorders in pregnancy*
- Injury, poisoning and other consequences of external causes .....   
*e.g., overdoses, fractures, lacerations, stabbing, hanging and other trauma*
- Caused by: Accident   
 Intentional self-harm   
 Assault

## 8. Annex C: Results of Data Validation

A 10% random sample of 14 establishments was chosen for the validation exercise. Of these 14 establishments, 3 were unable to return validation data as detailed below. The remaining establishments obtained figures by checking the entries in the Gate book or healthcare appointment book. An initial variance of 11% between the audit data and the establishment's own data was found. However, 2 establishments are known to have problems with the returning of data relating to out-of-hours events. If these are excluded, the variance drops to 6%.

Establishment	Validation Data received from Prison				Figures from Audit Data				VARIANCE
	Jul	Aug	Sep	TOTAL	Jul	Aug	Sep	TOTAL	
Birmingham	79	80	87	<b>246</b>	38	62	86	<b>186</b>	<b>-60</b>
Channings Wood	40	39	36	<b>115</b>	33	29	36	<b>98</b>	<b>-17</b>
Chelmsford				<b>64</b>	28	24	18	<b>70</b>	<b>6</b>
Dover	5	11	6	<b>22</b>	7	12	10	<b>29</b>	<b>7</b>
East Sutton Park	55	67	57	<b>179</b>	56	49	53	<b>158</b>	<b>-21</b>
Erlestoke	39	29	29	<b>97</b>	26	25	31	<b>82</b>	<b>-15</b>
Feltham	-	-	-	-	21	16	24	<b>61</b>	<b>0</b>
Latchmere House	-	-	-	-	12	10	11	<b>33</b>	<b>0</b>
Lindholme	-	-	-	-	22	25	20	<b>67</b>	<b>0</b>
Littlehey	-	-	-	<b>164</b>	54	54	46	<b>154</b>	<b>-10</b>
Low Newton	38	25	40	<b>103</b>	26	20	28	<b>74</b>	<b>-29</b>
Moorland Open	6	17	23	<b>46</b>	6	17	22	<b>45</b>	<b>-1</b>
Northallerton	0	3	6	<b>9</b>	0	3	6	<b>9</b>	<b>0</b>
Reading	4	5	7	<b>16</b>	3	11	6	<b>20</b>	<b>4</b>
Rochester	12	10	5	<b>27</b>	10	9	4	<b>23</b>	<b>-4</b>
Swaleside	24	43	40	<b>107</b>	21	43	40	<b>104</b>	<b>-3</b>
Wakefield	45	37	62	<b>144</b>	35	37	62	<b>134</b>	<b>-10</b>
Werrington	20	21	26	<b>67</b>	21	20	21	<b>62</b>	<b>-5</b>
<b>TOTALS</b>				<b>1406</b>				<b>1409</b>	<b>-158</b>

### **HMP Birmingham**

The large discrepancy is due to a known problem with the under-reporting of out-of-hours episodes prior to September 2005. The project team are liaising with the establishment to rectify this.

### **HMP Channings Wood**

This establishment is known to have a problem with the under-reporting of out-of-hours episodes. The project team are liaising with the establishment to rectify this. The prison has also reported that a proportion of the discrepancy will be due to inter-prison escorts (e.g. to access healthcare services at HMP Exeter).

### **HMP Chelmsford**

No significant issues to report.

### **HMP Dover**

No significant issues to report.

### **HMP East Sutton Park**

Validation figure received from prison is a total for all licences issued by healthcare, including those where a prisoner escort was used in the role of responsible adult. It is not possible to distinguish these 'escorts' from the 'patient' within the gate book and this is likely to account for the discrepancy.

### **HMP Erlestoke**

Unable to contact establishment to determine reason for variance.

### **HMP Feltham**

Establishment unable to provide validation figures.

### **HMP Latchmere House**

Establishment unable to provide validation figures due to 'Open' prison status. Prison records number of licences issued within a period, but cannot distinguish which of these were issued for healthcare reasons.

### **HMP Lindholme**

Establishment unable to provide validation figures due to staff sickness.

### **HMP Littlehey**

No significant issues to report.

### **HMP Low Newton**

Healthcare staff were unable to account for discrepancy. Matter will be investigated further.

### **HMP Moorland Open**

No significant issues to report.

### **HMP Northallerton**

No significant issues to report.

### **HMP Reading**

No significant issues to report.

### **HMP Rochester**



No significant issues to report.

**HMP Swaleside**

No significant issues to report.

**HMP Wakefield**

No significant issues to report.

**HMP Werrington**

No significant issues to report.

## 9. Annex D: Individual Data for Female Prisons

**TABLE 1: FEMALE ESCORTS DATA**

Female Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Askham Grange	120	142	36	0	178	3	3	1	6	0	4	5	2	1	99	9	12	8	11	14
Brockhill	578	87	12	4	103	3	4	2	0	0	5	4	1	2	5	0	3	0	56	14
Bronzefield	950	124	35	0	159	10	10	0	0	2	6	2	7	0	7	0	5	11	71	28
Buckley Hall	244	53	4	0	57	6	2	0	1	0	1	3	0	1	16	4	1	5	5	12
Bullwood Hall	788	117	15	0	132	5	2	1	3	0	12	8	4	4	11	4	4	17	21	36
Cookham Wood	216	37	8	0	45	0	6	1	0	0	6	2	1	0	6	0	1	7	1	14
Downview	822	162	17	0	179	19	18	1	5	0	1	7	7	5	29	6	11	15	7	48
Drake Hall	844	350	21	0	371	55	28	5	2	2	6	92	16	1	39	18	35	49	1	22
East Sutton Park	52	317	10	0	327	4	9	3	3	1	2	35	4	10	171	5	14	43	13	10
Eastwood Park	1304	101	59	1	161	2	11	1	0	1	2	3	5	2	36	3	2	4	32	56
Foston Hall	1249	144	40	0	184	4	17	3	8	0	6	6	8	2	43	8	11	15	2	51
Holloway	538	103	9	1	113	6	6	0	1	2	6	9	0	2	19	1	4	5	21	30
Low Newton	1208	105	59	0	164	2	1	0	0	0	1	6	1	3	11	8	11	13	31	76
Morton Hall	345	211	3	0	214	10	8	6	12	0	1	17	8	11	25	24	18	32	6	36
New Hall	2159	263	51	10	324	4	9	10	5	0	9	7	35	6	16	7	21	33	90	62
Send	467	107	16	0	123	5	13	4	2	0	5	5	2	1	23	19	4	21	2	17
Styal	1288	188	15	0	203	11	8	1	0	1	3	6	7	4	21	6	9	19	54	53
<b>TOTAL</b>	<b>13172</b>	<b>2611</b>	<b>410</b>	<b>16</b>	<b>3037</b>	<b>149</b>	<b>155</b>	<b>39</b>	<b>48</b>	<b>9</b>	<b>76</b>	<b>217</b>	<b>108</b>	<b>55</b>	<b>577</b>	<b>122</b>	<b>166</b>	<b>297</b>	<b>424</b>	<b>579</b>

**TABLE 2: FEMALE BEDWATCHES DATA**

Female Prisons Bedwatches Data (Planned Or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Askham Grange	60	1	4	5	0	0	0	0	0	0	0	0	0	0	3	1	0	1	0
Brockhill	656	0	6	6	0	0	0	1	0	0	0	0	0	2	1	0	0	2	0
Bronzefield	504	2	3	5	0	0	0	0	0	0	0	1	0	0	0	0	0	2	2
Buckley Hall	322	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Bullwood Hall	464	2	4	6	0	0	0	0	0	0	0	0	0	0	1	0	1	2	2
Cookham Wood	432	0	3	3	0	0	0	0	0	1	0	0	0	0	0	0	0	0	2
Downview	706	1	2	3	0	1	0	0	0	1	0	1	0	0	0	0	0	0	0
Drake Hall	388	2	0	2	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0
East Sutton Park	52	3	5	8	0	0	0	0	0	0	0	0	2	2	0	0	2	0	2
Eastwood Park	6076	5	25	30	0	0	0	1	0	1	0	1	2	6	0	1	2	5	11
Foston Hall	3566	5	16	21	0	0	0	2	0	5	0	0	0	2	1	1	3	1	6
Holloway	294	2	1	3	0	0	0	0	0	1	0	0	0	0	1	0	0	1	0
Low Newton	3510	7	14	21	0	0	1	0	0	0	0	0	0	0	0	1	0	5	14
Morton Hall	486	1	1	2	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0
New Hall	7622	7	31	38	0	0	0	0	0	0	0	8	2	1	0	0	1	16	10
Send	1447	0	7	7	0	0	0	0	0	4	0	1	0	1	0	0	1	0	0
Styal	2508	6	12	18	0	0	0	0	0	2	1	0	3	1	0	0	0	11	0
<b>TOTAL</b>	<b>29093</b>	<b>45</b>	<b>134</b>	<b>179</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>15</b>	<b>1</b>	<b>12</b>	<b>9</b>	<b>18</b>	<b>7</b>	<b>4</b>	<b>11</b>	<b>46</b>	<b>49</b>

## 10. Annex E: Individual Data for High Secure Prisons

**TABLE 1: HIGH SECURE ESCORTS DATA**

High Secure Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Belmarsh	3585	206	5	22	233	0	1	1	1	1	8	14	8	5	17	5	2	94	0	54
Frankland	776	124	8	0	132	2	6	4	2	0	11	20	15	7	23	3	9	15	0	15
Full Sutton	996	70	7	2	79	3	2	1	2	0	3	10	3	1	16	10	6	10	0	10
Long Lartin	1651	100	16	2	118	0	5	0	1	0	12	18	13	0	10	4	5	21	0	27
Manchester	1952	212	13	19	244	7	11	1	7	2	9	23	4	7	33	9	19	16	0	77
Wakefield	629	100	8	1	109	9	2	0	3	0	7	12	5	1	11	5	18	21	0	14
Whitemoor	1265	46	8	0	54	0	2	1	0	0	1	4	10	1	14	3	5	2	0	11
Woodhill	453	72	3	0	75	2	3	0	2	0	2	7	8	2	8	4	5	4	0	28
<b>TOTAL</b>	<b>11307</b>	<b>930</b>	<b>68</b>	<b>46</b>	<b>1044</b>	<b>23</b>	<b>32</b>	<b>8</b>	<b>18</b>	<b>3</b>	<b>53</b>	<b>108</b>	<b>66</b>	<b>24</b>	<b>132</b>	<b>43</b>	<b>69</b>	<b>183</b>	<b>0</b>	<b>236</b>

**TABLE 2: HIGH SECURE BEDWATCHES DATA**

High Secure Prisons Bedwatches Data (Planned Or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Belmarsh	2374	7	5	12	0	1	0	0	0	0	0	1	0	4	0	0	5	0	1
Frankland	2866	8	4	12	0	1	1	0	0	0	1	0	4	3	0	0	2	0	0
Full Sutton	2064	7	2	9	0	0	0	0	0	0	0	1	6	0	0	0	1	0	1
Long Lartin	2989	8	7	15	0	0	0	0	0	0	1	1	1	5	1	2	2	0	2
Manchester	7318	9	5	14	0	1	0	0	0	2	0	2	1	1	0	0	1	0	6
Wakefield	2884	2	11	13	0	0	0	0	0	0	0	4	3	3	0	0	2	0	1
Whitmoor	5100	16	2	18	0	9	0	0	0	0	0	6	0	2	0	0	0	0	1
Woodhill	160	2	0	2	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0
<b>TOTAL</b>	<b>25755</b>	<b>59</b>	<b>36</b>	<b>95</b>	<b>0</b>	<b>12</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>3</b>	<b>15</b>	<b>15</b>	<b>18</b>	<b>1</b>	<b>2</b>	<b>14</b>	<b>0</b>	<b>12</b>

## 11. Annex F: Individual Data for Local Prisons

TABLE 1: LOCAL ESCORTS DATA

Local Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Altcourse	652	96	1	0	97	0	0	0	1	0	8	12	5	2	5	5	4	1	0	54
Bedford	756	119	11	5	135	10	12	19	0	1	0	9	1	3	4	5	15	2	0	49
Birmingham	3083	248	79	0	327	6	15	8	5	0	15	26	19	26	12	2	16	61	0	116
Blakenhurst	1686	188	45	12	245	1	1	3	4	1	12	24	6	4	25	12	30	8	0	102
Bristol	1971	276	31	15	322	4	31	0	1	2	10	28	6	21	29	7	85	21	0	62
Brixton	1832	185	26	18	229	4	5	14	1	0	4	20	6	10	14	4	2	72	0	55
Bullingdon	997	120	17	5	142	2	5	1	2	0	6	18	6	0	24	7	23	9	0	34
Cardiff	1156	174	16	5	195	3	15	3	3	1	4	6	1	7	22	8	24	12	0	81
Chelmsford	820	147	9	2	158	2	3	3	0	0	3	24	9	6	28	3	11	12	0	52
Doncaster	1477	156	8	10	174	2	9	1	6	0	9	16	9	3	25	5	9	33	0	37
Dorchester	880	89	14	2	105	4	1	2	3	0	1	4	7	3	13	6	11	4	0	44
Durham	1922	261	43	7	311	16	2	6	14	2	12	19	12	14	16	11	54	15	0	111
Elmley	1166	148	7	0	155	6	13	3	2	0	5	13	6	2	18	2	9	18	0	58
Exeter	1153	132	51	1	184	0	12	0	2	0	6	7	18	9	15	6	1	4	0	103
Forest Bank	54	3	4	0	7	0	0	0	0	0	1	0	1	1	0	0	0	0	0	4
Gloucester	864	139	29	2	170	4	4	0	2	2	6	10	7	3	44	1	2	7	0	76
High Down	782	109	12	1	122	1	3	1	6	0	6	13	3	2	17	7	12	14	0	36

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**Local Prisons Escorts And Unaccompanied Visits Data**

Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Holme House	903	181	26	1	208	11	4	0	9	0	13	17	7	7	27	11	18	7	0	76
Hull	1475	258	1	4	263	4	19	1	9	0	7	21	10	15	29	55	7	6	0	76
Leeds	3437	380	78	1	459	9	35	2	8	0	16	12	43	17	47	41	23	109	0	96
Leicester	454	65	13	0	78	5	6	0	2	0	2	4	1	0	10	1	12	2	0	33
Lewes	858	141	16	4	161	9	1	12	2	0	6	13	10	2	18	8	21	18	0	37
Lincoln	781	162	3	1	166	5	1	0	0	0	1	9	9	6	23	5	11	25	0	70
Liverpool	3482	283	155	4	442	3	7	3	5	4	13	28	35	6	21	11	17	77	0	208
Norwich	2093	223	53	10	286	4	26	2	6	0	6	16	16	13	39	28	31	28	0	61
Nottingham	704	80	43	2	125	1	2	1	0	0	1	8	1	4	12	4	28	11	0	50
Parc	697	129	15	0	144	0	19	0	1	0	4	8	6	11	25	12	15	14	0	29
Pentonville	113	16	2	1	19	2	0	1	0	0	2	0	0	0	1	0	2	0	0	10
Peterborough	362	48	11	0	59	5	1	0	0	0	2	3	1	1	6	0	10	3	14	13
Preston	1368	228	45	1	274	11	11	3	0	1	16	18	13	7	18	3	54	30	0	88
Shrewsbury	909	76	48	0	124	9	0	1	2	0	5	10	12	2	2	4	15	3	0	59
Wandsworth	5125	455	9	33	497	14	16	2	11	1	8	34	36	9	57	11	5	206	0	53
Winchester	441	121	4	0	125	0	0	0	0	0	5	6	1	3	18	18	8	5	0	61
Wormwood Scrubs	1310	160	38	6	204	5	1	1	4	0	2	20	11	12	41	10	9	9	0	73
<b>TOTAL</b>	<b>45763</b>	<b>5596</b>	<b>963</b>	<b>153</b>	<b>6712</b>	<b>162</b>	<b>280</b>	<b>93</b>	<b>111</b>	<b>15</b>	<b>217</b>	<b>476</b>	<b>334</b>	<b>231</b>	<b>705</b>	<b>313</b>	<b>594</b>	<b>846</b>	<b>14</b>	<b>2167</b>

**TABLE 2: LOCAL BEDWATCHES DATA**

Local Prisons Bedwatches Data (Planned or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Altcourse	4145	4	8	12	1	0	0	1	0	2	1	0	1	1	0	0	0	0	5
Bedford	1760	4	4	8	0	2	0	0	0	0	0	1	1	1	0	1	0	0	2
Birmingham	8738	11	20	31	0	1	0	2	0	2	1	1	0	2	0	1	2	0	19
Blakenhurst	10066	5	25	30	2	0	1	1	0	0	2	3	1	6	0	3	4	0	7
Bristol	4892	6	16	22	1	0	0	4	0	0	2	2	2	0	1	3	1	0	6
Brixton	1614	3	4	7	0	0	0	0	0	0	0	1	0	0	0	2	1	0	3
Bullingdon	1250	1	4	5	0	0	0	0	0	0	0	0	2	0	1	1	0	0	1
Cardiff	1918	4	6	10	0	0	0	2	0	0	1	1	0	1	0	1	1	0	3
Chelmsford	4140	4	7	11	0	1	0	0	0	0	0	1	0	5	0	0	1	0	3
Doncaster	437	2	1	3	0	0	0	0	0	0	0	1	0	1	0	0	0	0	1
Dorchester	3424	1	4	5	0	0	0	1	0	0	0	2	1	0	0	0	0	0	1
Durham	3604	11	14	25	0	0	1	3	0	2	1	3	0	2	1	3	3	0	6
Elmley	316	3	1	4	0	0	0	0	0	0	0	0	0	2	0	0	1	0	1
Exeter	3492	7	14	21	0	0	0	1	0	2	0	3	0	5	0	0	0	0	10
Forest Bank	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gloucester	2156	2	9	11	0	0	1	0	0	1	0	1	0	3	0	0	0	0	5
High Down	3310	7	6	13	0	0	0	0	0	0	0	0	0	6	0	2	2	0	3
Holme House	4178	7	15	22	1	0	0	3	0	0	0	4	1	4	0	0	1	0	8
Hull	6968	35	7	42	0	0	0	0	0	0	2	2	2	10	3	0	1	0	22
Leeds	5344	4	22	26	0	0	2	0	0	2	0	8	1	0	0	2	2	0	9



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Local Prisons Bedwatches Data (Planned or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Leicester	8176	12	8	20	2	1	0	0	0	1	0	5	1	2	0	1	1	0	6
Lewes	1326	2	8	10	0	0	1	1	0	0	0	1	0	2	0	1	1	0	3
Lincoln	1638	3	5	8	0	0	0	0	0	0	0	2	0	3	0	0	0	0	3
Liverpool	7649	5	41	46	0	0	1	4	0	2	0	7	2	5	2	2	2	0	19
Norwich	2492	5	7	12	0	0	0	0	0	0	0	1	1	0	1	0	1	0	7
Nottingham	500	1	5	6	0	1	0	0	0	0	0	0	1	1	1	0	0	0	2
Parc	2716	4	1	5	0	0	0	0	0	0	0	2	0	1	0	1	0	0	1
Pentonville	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Peterborough	310	0	4	4	0	0	0	0	0	0	0	0	0	1	0	0	1	0	2
Preston	5294	9	21	30	0	2	0	0	0	1	0	3	0	9	0	1	6	0	8
Shrewsbury	642	1	8	9	0	0	0	0	0	1	0	3	1	0	1	0	0	0	3
Wandsworth	17514	12	44	56	2	3	1	6	2	3	1	7	1	5	0	0	3	0	22
Winchester	1096	2	6	8	1	0	0	0	0	0	0	0	1	1	0	0	0	0	5
Wormwood Scrubs	3534	5	9	14	0	0	0	0	0	0	0	2	1	9	1	0	0	0	1
<b>TOTAL</b>	<b>124639</b>	<b>177</b>	<b>347</b>	<b>524</b>	<b>10</b>	<b>11</b>	<b>8</b>	<b>29</b>	<b>2</b>	<b>19</b>	<b>11</b>	<b>66</b>	<b>20</b>	<b>88</b>	<b>11</b>	<b>25</b>	<b>34</b>	<b>0</b>	<b>190</b>

## 12. Annex G: Individual data for Open Prisons

**TABLE 1: OPEN ESCORTS DATA**

Open Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Ford	27	305	19	3	327	4	7	5	15	3	5	34	20	4	27	14	101	37	0	48
Hewell Grange	12	48	14	0	62	4	0	1	2	0	0	10	0	1	10	3	4	2	0	25
Hollesley Bay	114	75	15	0	90	6	1	0	1	3	1	14	4	5	15	4	9	2	0	25
Kirkham	320	280	16	0	296	30	2	7	3	0	1	21	25	4	24	25	71	12	0	71
Kirklevington Grange	52	168	13	0	181	12	3	2	0	16	2	5	0	9	8	21	37	17	0	49
Latchmere House	0	83	0	0	83	0	0	0	0	0	0	7	0	2	16	1	8	0	0	49
Leyhill	849	282	14	0	296	25	10	0	3	0	7	9	15	32	31	34	56	12	0	62
Moorland Open	122	75	3	0	78	21	4	11	2	0	0	9	5	2	0	5	0	2	0	17
North Sea Camp	19	43	0	0	43	3	1	0	0	0	0	3	0	0	17	1	10	4	0	4
Prescoed	43	162	18	0	180	22	42	0	1	0	0	7	6	3	19	17	26	1	0	36
Spring Hill	56	51	3	0	54	4	2	2	1	2	1	7	3	4	9	3	10	4	0	2
Standford Hill	144	350	31	0	381	19	10	39	9	1	3	21	18	12	39	20	97	16	0	77
Sudbury	128	447	16	0	463	49	7	3	20	16	3	26	35	10	48	21	106	21	0	98
<b>TOTAL</b>	<b>1886</b>	<b>2369</b>	<b>162</b>	<b>3</b>	<b>2534</b>	<b>199</b>	<b>89</b>	<b>70</b>	<b>57</b>	<b>41</b>	<b>23</b>	<b>173</b>	<b>131</b>	<b>88</b>	<b>263</b>	<b>169</b>	<b>535</b>	<b>130</b>	<b>0</b>	<b>563</b>

**TABLE 2: OPEN BEDWATCHES DATA**

Local Prisons Bedwatches Data (Planned or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Ford	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hewell Grange	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hollesley Bay	1398	2	3	5	0	0	0	0	0	0	0	1	1	0	0	0	0	0	3
Kirkham	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Kirklevington Grange	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Latchmere House	0	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Leyhill	984	3	6	9	0	1	0	0	0	2	0	2	0	1	2	1	0	0	0
Moorland Open	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
North Sea Camp	0	0	2	2	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0
Prescoed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Spring Hill	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Standford Hill	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sudbury	0	1	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
<b>TOTAL</b>	<b>2382</b>	<b>7</b>	<b>11</b>	<b>18</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>4</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>3</b>

### 13. Annex H: Individual Data for Trainer/Other Prisons

**TABLE 1: TRAINER/OTHER ESCORTS DATA**

Trainer/Other Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Acklington	1151	210	31	0	241	12	2	5	0	0	1	12	19	21	29	15	28	16	0	81
Albany	1060	187	10	0	197	0	7	0	6	0	5	17	14	11	41	15	29	6	0	46
Ashwell	764	147	6	0	153	1	4	3	2	1	4	7	9	11	22	10	40	9	0	30
Blantyre House	91	100	12	0	112	2	6	0	3	0	0	22	5	6	13	11	21	1	0	22
Blundeston	649	93	21	0	114	9	19	2	3	0	1	5	3	2	14	8	5	4	0	39
Camp Hill	602	137	25	0	162	16	16	6	0	2	1	5	10	15	18	7	10	13	0	43
Canterbury	1242	102	38	0	140	2	10	2	2	0	1	12	14	3	20	11	25	7	0	31
Channings Wood	1444	238	20	0	258	3	11	3	0	0	4	38	6	24	45	28	34	10	0	52
Coldingley	634	104	13	0	117	5	3	0	7	0	0	16	4	4	29	4	20	4	0	21
Dartmoor	1334	196	3	0	199	1	23	1	3	0	13	21	4	3	59	5	7	10	0	49
Dovegate	2153	257	3	0	260	5	4	0	5	1	2	29	9	23	32	11	34	14	0	91
Dover*	197	30	9	0	39	0	0	0	1	0	0	5	0	0	18	0	0	0	0	15
Edmunds Hill	372	54	9	0	63	9	0	0	0	0	0	8	5	0	2	5	4	5	0	25

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Trainer/Other Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Erlestoke	1237	177	17	0	194	3	12	3	3	0	2	15	2	12	26	13	32	16	0	55
Everthorpe	652	83	0	0	83	14	1	0	1	0	5	12	1	3	9	11	10	4	0	12
Featherstone	1023	133	31	1	165	0	2	0	4	0	8	25	10	5	14	12	22	16	0	46
Garth	1397	185	24	2	211	15	6	0	2	0	3	13	7	8	24	13	11	19	0	88
Gartree	2356	293	6	1	300	5	61	0	3	0	7	30	12	15	30	26	52	18	0	40
Grendon	732	126	10	0	136	1	7	0	4	0	4	7	4	3	38	13	14	9	0	32
Guys Marsh	661	128	6	0	134	1	3	0	1	0	6	7	6	7	35	20	23	3	0	22
Haslar	316	72	5	0	77	21	14	0	2	0	0	12	2	11	1	0	3	4	0	7
Haverigg	880	113	19	0	132	4	11	0	0	0	4	8	5	1	21	7	17	11	0	43
Highpoint	953	143	28	0	171	10	1	0	0	0	5	9	10	9	41	5	12	2	0	67
Kingston	546	124	3	0	127	0	2	0	9	0	0	18	6	3	15	14	40	4	0	16
Lancaster Castle	698	142	22	0	164	7	5	0	1	2	2	23	3	3	15	18	28	10	0	47
Lindholme	2009	155	27	1	183	7	0	0	1	0	4	20	5	7	28	14	31	11	0	54
Littlehey	2604	275	14	0	289	26	3	0	11	3	4	29	17	5	30	12	10	97	0	42
Lowdham Grange	2154	224	22	1	247	3	5	0	6	0	2	16	8	3	10	9	25	104	0	55
Maidstone	1192	193	15	0	208	12	11	2	4	0	8	24	24	4	13	13	38	27	0	28
Moorland Closed	572	106	4	0	110	3	7	1	1	1	0	2	7	7	9	16	9	23	0	24

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Parkhurst	858	189	0	0	189	7	5	1	2	0	3	14	13	0	34	17	21	18	0	54
Ranby	1546	261	54	0	315	2	5	0	1	0	6	13	10	8	50	12	18	21	0	169
Risley	1615	294	13	0	307	0	0	0	22	2	25	46	18	4	45	15	20	37	0	73
Rye Hill	789	164	6	0	170	11	9	1	3	0	3	13	3	5	22	11	21	9	0	59
Shepton Mallet	522	100	5	0	105	1	0	0	0	0	0	24	9	3	14	11	19	8	0	16
Stafford	1372	235	2	0	237	1	17	6	5	0	3	6	1	2	47	8	6	7	0	128
Stocken	1930	178	45	0	223	18	7	2	8	0	9	14	10	7	23	9	38	19	0	59
Swaleside	622	95	1	1	97	5	3	0	2	0	1	15	4	3	18	6	12	15	0	12
Swansea	300	32	5	4	41	0	0	0	0	1	2	6	1	3	5	2	1	1	0	15
The Mount	1409	194	17	0	211	6	23	0	5	0	2	16	10	5	49	10	2	15	0	68
The Verne	584	123	0	0	123	2	0	2	2	0	4	22	7	6	43	2	4	6	0	23
Usk	398	69	6	0	75	6	2	0	6	0	0	9	5	1	18	6	4	10	0	8
Wayland	1021	132	22	0	154	20	14	0	6	5	3	14	5	4	21	5	18	10	0	29
Wealstun	1025	214	35	0	249	13	4	1	7	0	5	15	12	4	67	16	62	8	0	35
Weare	202	31	2	1	34	2	0	0	3	0	0	0	2	8	2	0	1	0	0	13
Wellingborough	824	110	24	0	134	0	0	0	0	0	2	7	0	1	35	12	0	6	0	71
Whatton	737	114	0	0	114	1	4	2	7	0	2	21	9	2	20	9	11	15	0	11
Wolds	493	103	2	0	105	2	1	0	2	0	2	4	1	7	26	10	25	5	0	20

Trainer/Other Prisons Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Wymott	2584	306	50	3	359	1	7	5	5	0	6	34	20	12	54	15	37	19	0	141
<b>TOTAL</b>	<b>36924</b>	<b>7471</b>	<b>742</b>	<b>15</b>	<b>8228</b>	<b>295</b>	<b>357</b>	<b>48</b>	<b>171</b>	<b>18</b>	<b>174</b>	<b>760</b>	<b>371</b>	<b>314</b>	<b>1294</b>	<b>522</b>	<b>954</b>	<b>706</b>	<b>0</b>	<b>2227</b>

**TABLE 2: TRAINER/OTHER BEDWATCHES DATA**

Trainer/Other Prisons Bedwatches Data (Planned or Emergency Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Acklington	550	3	3	6	1	0	0	0	0	0	0	1	0	2	0	0	0	0	2
Albany	348	2	0	2	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0
Ashwell	1122	5	6	11	0	1	0	0	0	1	0	1	0	5	0	1	0	0	2
Blantyre House	408	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Blundeston	266	1	3	4	0	0	0	0	0	0	0	3	0	0	0	1	0	0	0
Camp Hill	3688	1	7	8	0	0	0	0	0	0	0	2	1	0	0	1	2	0	2
Canterbury	1278	1	8	9	0	0	0	1	0	0	0	5	0	0	1	1	1	0	0
Channings Wood	874	7	1	8	1	2	0	0	0	0	1	0	0	1	1	1	0	0	1
Coldingley	602	0	3	3	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Dartmoor	206	4	0	4	0	0	0	0	0	0	0	1	0	3	0	0	0	0	0
Dovegate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dover*	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Edmunds Hill	196	0	4	4	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2
Erlestoke	326	2	3	5	0	0	0	0	0	0	0	0	1	0	0	0	1	0	3
Everthorpe	3122	2	4	6	1	0	0	0	0	0	1	0	2	0	0	1	0	0	1
Featherstone	842	2	5	7	0	0	0	0	0	0	0	0	1	2	1	1	0	0	2
Garth	5436	4	20	24	0	0	0	0	0	1	3	2	1	1	2	2	0	0	12



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Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Gartree	528	4	0	4	0	0	0	0	0	0	0	1	1	0	1	0	0	0	1
Grendon	439	0	1	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Guys Marsh	48	0	1	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Haslar	70	1	1	2	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0
Haverigg	870	6	3	9	0	2	0	0	0	0	1	0	1	3	0	0	0	0	2
Highpoint	4842	2	39	41	0	0	0	0	0	0	2	12	2	4	0	0	0	0	21
Kingston	598	4	2	6	0	0	0	0	0	0	0	2	0	0	1	1	1	0	1
Lancaster Castle	344	4	1	5	0	0	0	0	0	0	3	0	1	0	0	0	0	0	1
Lindholme	632	4	5	9	0	0	0	0	0	0	1	0	1	1	0	2	1	0	3
Littlehey	750	6	2	8	0	0	0	0	0	0	0	0	3	2	0	0	1	0	2
Lowdham Grange	5418	4	6	10	0	1	0	0	0	0	0	2	1	0	0	3	2	0	1
Maidstone	5278	3	14	17	0	1	1	1	0	0	0	5	0	4	0	3	0	0	2
Moorland Closed	484	1	6	7	0	0	0	1	0	0	1	1	1	1	0	0	0	0	2
Parkhurst	204	2	0	2	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Ranby	1050	1	8	9	0	0	0	0	0	0	0	1	1	3	1	0	2	0	1
Risley	2966	15	18	33	0	0	0	1	0	1	2	6	3	4	1	5	4	0	6
Rye Hill	2540	2	13	15	0	1	2	0	0	0	0	0	0	0	1	0	0	0	11
Shepton Mallet	2226	2	6	8	0	0	0	0	0	0	0	4	1	2	0	0	0	0	1

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Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Stafford	728	5	0	5	0	1	0	0	0	0	0	0	1	1	0	0	0	0	2
Stocken	2391	7	12	19	0	0	0	0	0	2	0	1	0	3	2	5	2	0	4
Swaleside	496	2	3	5	0	0	0	0	0	0	0	0	0	0	1	2	0	0	2
Swansea	2792	2	7	9	0	0	0	0	0	0	0	0	0	0	1	1	1	0	6
The Mount	3696	1	3	4	0	0	0	0	0	0	0	0	0	1	0	0	0	0	3
The Verne	192	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Usk	480	1	2	3	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0
Wayland	4016	13	12	25	3	0	1	1	0	0	2	2	1	5	2	2	0	0	6
Wealstun	446	6	2	8	0	0	0	1	0	0	1	0	0	2	0	3	0	0	1
Weare	576	2	0	2	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
Wellingborough	1308	1	9	10	1	0	0	1	0	0	0	3	1	1	1	0	1	0	1
Whatton	180	3	0	3	0	0	0	0	0	0	0	0	0	2	1	0	0	0	0
Wolds	1388	8	0	8	0	0	0	1	0	0	0	0	1	4	0	1	1	0	0
Wymott	2853	9	18	27	0	0	0	1	1	0	0	5	2	5	1	1	3	0	8
<b>TOTAL</b>	<b>70093</b>	<b>156</b>	<b>262</b>	<b>418</b>	<b>7</b>	<b>10</b>	<b>4</b>	<b>10</b>	<b>1</b>	<b>5</b>	<b>19</b>	<b>64</b>	<b>29</b>	<b>65</b>	<b>22</b>	<b>39</b>	<b>24</b>	<b>0</b>	<b>119</b>

**14. Annex I: Individual Data for YOI/Juvenile Prisons**

**TABLE 1: YOI/JUVENILE ESCORTS DATA**

YOI/Juvenile Prisons – Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Ashfield	474	52	61	0	113	0	0	0	0	0	0	3	0	1	0	4	0	5	0	100
Aylesbury	999	105	34	0	139	4	0	0	0	0	4	4	0	2	4	2	4	8	0	107
Brinsford	716	54	39	3	96	1	3	0	1	0	7	4	1	1	2	1	1	1	0	70
Castington	318	51	8	0	59	0	2	0	0	0	0	1	1	0	5	0	1	12	0	37
Deerbolt	362	54	25	0	79	1	1	0	0	0	2	1	2	0	5	3	0	6	0	58
Feltham	797	94	43	2	139	3	2	0	0	2	6	10	4	2	8	6	3	7	0	84
Glen Parva	360	57	2	0	59	0	5	5	3	0	1	4	2	2	2	0	4	0	0	31
Hindley	1117	100	72	3	175	1	5	0	0	0	2	10	7	1	20	4	3	4	0	115
Huntercombe	216	28	6	0	34	2	0	0	2	0	2	3	0	0	0	2	2	0	0	21
Lancaster Farms	510	68	47	1	116	7	5	0	1	2	2	23	3	3	15	18	28	10	0	47
Northallerton	84	19	5	0	24	1	1	0	1	0	0	0	0	0	1	0	0	2	0	18
Onley	364	49	24	0	73	7	0	0	1	0	2	8	2	5	5	2	1	4	0	36
Portland	683	118	16	0	134	6	0	0	2	0	5	9	0	2	8	32	7	17	0	46
Reading	273	39	11	2	52	0	0	0	2	0	1	3	0	0	9	1	2	1	0	31
Rochester	292	37	14	0	51	1	0	1	0	0	0	4	0	1	7	3	1	12	0	21

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YOI/Juvenile Prisons – Escorts And Unaccompanied Visits Data																				
Prison	Escort Staff Hours	Planned Outpatient Appointment	Emergency Visit To A&E / Other Emergency Facility	Mental Health Transfer	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Stoke Heath	702	102	20	0	122	1	16	0	2	2	0	18	1	1	15	1	0	5	0	60
Swinfen Hall	918	124	22	0	146	25	4	0	2	0	3	19	4	8	9	5	5	13	0	49
Thorn Cross	127	53	16	0	69	1	0	0	0	3	1	2	0	5	6	4	10	8	0	29
Warren Hill	284	41	8	0	49	1	0	0	0	0	2	6	0	4	3	0	2	2	0	29
Werrington	658	78	46	0	124	12	2	0	2	0	4	24	0	2	8	6	0	1	0	63
Wetherby	607	62	48	0	110	1	1	1	0	0	1	7	0	0	6	4	7	3	0	79
<b>TOTAL</b>	<b>10861</b>	<b>1385</b>	<b>567</b>	<b>11</b>	<b>1963</b>	<b>75</b>	<b>47</b>	<b>7</b>	<b>19</b>	<b>9</b>	<b>45</b>	<b>163</b>	<b>27</b>	<b>40</b>	<b>138</b>	<b>98</b>	<b>81</b>	<b>121</b>	<b>0</b>	<b>1131</b>

**TABLE 2: YOI/JUVENILE BEDWATCHES DATA**

YOI/Juvenile Prisons – Bedwatches Data (Planned or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Ashfield	450	3	2	5	0	0	0	0	0	0	0	0	0	0	0	0	1	0	4
Aylesbury	859	7	2	9	0	0	0	0	0	0	1	0	0	0	0	0	0	0	8
Brinsford	1516	0	9	9	0	0	0	0	0	0	0	0	0	2	0	1	0	0	6
Castington	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Deerbolt	184	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Feltham	862	1	6	7	0	0	0	0	0	0	0	0	0	3	0	0	0	0	4
Glen Parva	264	1	2	3	1	0	0	1	0	0	0	1	0	0	0	0	0	0	0
Hindley	500	4	0	4	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0
Huntercombe	1272	0	2	2	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Lancaster Farms	552	0	5	5	0	0	0	0	0	0	0	0	0	1	0	0	1	0	3
Northallerton	346	1	3	4	0	0	0	1	0	0	0	0	0	1	1	0	0	0	1
Onley	460	1	3	4	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3
Portland	434	1	2	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Reading	306	2	2	4	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Rochester	144	1	1	2	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0
Stoke Heath	1534	3	5	8	0	4	0	0	1	0	0	1	0	1	0	0	0	0	1
Swinfen Hall	284	2	1	3	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
Thorn Cross	0	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0

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YOI/Juvenile Prisons – Bedwatches Data (Planned or Emergency Hospital Stay)																			
Prison	Bedwatch Staff Hours	Planned Inpatient Stay	Emergency Hospital Admission	Total	Infectious And Parasitic Diseases	All Cancers And Benign Tumours	Blood And Blood-Forming Organs	Endocrine, Nutritional And Metabolic Diseases	Mental And Behavioural Disorders	Nervous System	Eye And Ear	Circulatory System	Respiratory System	Digestive System	Skin And Subcutaneous Tissue	Musculoskeletal System And Connective System	Genitourinary System	Pregnancy, Childbirth And The Puerperium	Injury, Poisoning And Other Consequences Of External Causes
Warren Hill	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Werrington	150	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Wetherby	104	1	1	2	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
<b>TOTAL</b>	<b>10221</b>	<b>31</b>	<b>48</b>	<b>79</b>	<b>1</b>	<b>6</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>15</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>41</b>

### 15. Annex J: Individual Prison Data Compared to Operational Capacity

Name	Operational Capacity	Reported Frequency	Predicted Frequency	Difference	Has 24 hour health cover	$\chi^2$	Proportion per 100 places per year
Acklington	882	176	190	-14	0	16	0.55
Albany	526	169	113	56	0	27	0.88
Altcourse	1010	86	218	-132	1	80	0.23
Ashfield	400	92	86	6	1	0	0.63
Ashwell	545	113	117	-4	0	0	0.57
Askham Grange	151	127	33	94	0	274	2.31
Aylesbury	355	92	76	16	1	3	0.71
Bedford	494	93	106	-13	1	2	0.52
Belmarsh	915	167	197	-30	1	5	0.5
Birmingham	1412	223	304	-81	1	22	0.43
Blakenhurst	1060	186	228	-42	1	8	0.48
Blantyre House	122	84	26	58	0	127	1.89
Blundeston	464	98	100	-2	0	0	0.58
Brinsford	493	66	106	-40	1	15	0.37
Bristol	606	225	131	94	1	68	1.02
Brixton	798	161	172	-11	1	1	0.55
Brockhill	167	76	36	40	0	45	1.25
Bronzefield	450	163	97	66	1	45	0.99
Buckley Hall	385	21	83	-62	0	46	0.15
Bullingdon	963	103	207	-104	1	53	0.29
Bullwood Hall	184	84	40	44	1	50	1.25
Camp Hill	585	115	126	-11	0	1	0.54
Canterbury	314	99	68	31	0	15	0.87
Cardiff	754	156	162	-6	1	0	0.57
Castington	406	43	87	-44	1	23	0.29
Channings Wood	667	158	144	14	0	1	0.65
Chelmsford	575	105	124	-19	1	3	0.5
Coldingley	390	78	84	-6	0	0	0.55
Cookham Wood	168	16	36	-20	0	11	0.26
Dartmoor	625	135	135	0	0	0	0.59
Deerbolt	518	59	112	-53	1	25	0.31
Doncaster	1120	119	241	-122	1	62	0.29
Dorchester	260	53	56	-3	1	0	0.56
Dovegate	800	163	172	-9	1	1	0.56
Dover*	261	26	56	-30	0	16	0.27
Downview	251	118	54	64	0	76	1.29
Drake Hall	315	260	68	192	0	544	2.27
Durham	919	230	198	32	1	5	0.69
East Sutton Park	100	230	22	208	0	2018	6.32
Eastwood Park	346	176	75	101	1	138	1.4
Edmunds Hill	367	38	79	-41	0	21	0.28
Elmley	985	123	212	-89	1	37	0.34
Erlestone	426	136	92	44	0	21	0.88
Everthorpe	469	66	101	-35	0	12	0.39
Exeter	533	142	115	27	1	6	0.73

RESTRICTED MARKING  
DEPARTMENT OF HEALTH – PRISON HEALTH

Prison Health  
Escorts and Bedwatches Interim Report No.2 February  
2006

Version: 1.0      Date: 22/02/06

Status: Approved

Name	Operational Capacity	Reported Frequency	Predicted Frequency	Difference	Has 24 hour health cover	$\chi^2$	Proportion per 100 places per year
Featherstone	615	116	132	-16	0	2	0.52
Feltham	761	97	164	-67	1	27	0.35
Ford	541	175	117	58	0	29	0.89
Foston Hall	274	132	59	73	1	90	1.32
Frankland	733	100	158	-58	1	21	0.37
Full Sutton	608	57	131	-74	1	42	0.26
Garth	667	168	144	24	1	4	0.69
Gartree	404	218	87	131	1	197	1.48
Glen Parva	808	37	174	-137	1	108	0.13
Gloucester	331	125	71	54	1	40	1.04
Grendon	231	110	50	60	1	73	1.31
Guys Marsh	570	135	123	12	0	1	0.65
Haslar*	163	50	35	15	0	6	0.84
Haverigg	564	102	121	-19	0	3	0.5
Hewell Grange	175	32	38	-6	0	1	0.5
High Down	736	90	159	-69	1	30	0.34
Highpoint	816	212	176	36	0	7	0.71
Hindley	538	124	116	8	1	1	0.63
Hollesley Bay	330	64	71	-7	0	1	0.53
Holloway	490	116	106	10	1	1	0.65
Holme House	994	153	214	-61	1	17	0.42
Hull	1071	206	231	-25	1	3	0.53
Huntercombe	360	24	78	-54	0	37	0.18
Kingston	190	93	41	52	0	66	1.34
Kirkham	591	199	127	72	0	40	0.92
Kirklevington Grange	223	137	48	89	0	165	1.69
Lancaster Castle	244	106	53	53	0	54	1.19
Lancaster Farms	536	76	115	-39	1	13	0.39
Latchmere House	198	62	43	19	0	9	0.86
Leeds	1254	327	270	57	1	12	0.72
Leicester	385	59	83	-24	1	7	0.42
Lewes	545	95	117	-22	1	4	0.48
Leyhill	512	188	110	78	0	55	1.01
Lincoln	703	113	151	-38	1	10	0.44
Lindholme	800	129	172	-43	0	11	0.44
Littlehey	706	214	152	62	0	25	0.83
Liverpool	1440	325	310	15	1	1	0.62
Long Lartin	444	89	96	-7	1	0	0.55
Low Newton	396	131	85	46	1	24	0.91
Lowdham Grange	524	178	113	65	0	38	0.93
Maidstone	548	157	118	39	0	13	0.79
Manchester	1269	167	273	-106	1	41	0.36
Moorland Closed	791	76	170	-94	1	52	0.26
Moorland Open	260	63	56	7	0	1	0.67
Morton Hall	392	133	84	49	0	28	0.93
New Hall	422	258	91	167	1	307	1.68
Northallerton	254	18	55	-37	0	25	0.19



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Name	Operational Capacity	Reported Frequency	Predicted Frequency	Difference	Has 24 hour health cover	$\chi^2$	Proportion per 100 places per year
Norwich	823	210	177	33	1	6	0.7
Nottingham	385	97	83	14	1	2	0.69
Onley	640	60	138	-78	1	44	0.26
Parc	968	126	208	-82	1	33	0.36
Parkhurst	507	134	109	25	1	6	0.73
Pentonville	1189	13	256	-243	1	231	0.03
Peterborough	1020	44	220	-176	1	141	0.12
Portland	398	106	86	20	0	5	0.73
Prescoed	170	125	37	88	0	213	2.02
Preston	620	268	134	134	1	135	1.19
Ranby	1038	168	224	-56	0	14	0.44
Reading	289	35	62	-27	0	12	0.33
Risley	1083	229	233	-4	0	0	0.58
Rochester	392	34	84	-50	0	30	0.24
Rye Hill	600	119	129	-10	1	1	0.54
Send	220	78	47	31	0	20	0.97
Shepton Mallet	189	78	41	37	0	34	1.13
Shrewsbury	300	81	65	16	1	4	0.74
Stafford	680	166	146	20	0	3	0.67
Standford Hill	464	248	100	148	0	219	1.47
Stocken	622	177	134	43	0	14	0.78
Stoke Heath	690	67	149	-82	1	45	0.27
Styal	455	136	98	38	1	15	0.82
Sudbury	571	320	123	197	0	316	1.54
Swaleside	756	33	163	-130	1	104	0.12
Swansea	425	30	92	-62	1	41	0.19
Swinfen Hall	620	80	134	-54	0	21	0.35
The Mount	708	158	152	6	0	0	0.61
The Verne	587	123	126	-3	0	0	0.58
Thorn Cross	316	39	68	-29	0	12	0.34
Usk	250	47	54	-7	0	1	0.52
Wakefield	571	82	123	-41	1	14	0.39
Wandsworth	1461	428	315	113	1	41	0.8
Warren Hill	222	45	48	-3	0	0	0.56
Wayland	709	120	153	-33	0	7	0.46
Wealstun	907	125	195	-70	0	25	0.38
Wellingborough	572	99	123	-24	0	5	0.48
Werrington	148	86	32	54	0	92	1.6
Wetherby	360	67	78	-11	1	1	0.51
Whatton	360	67	78	-11	0	1	0.51
Whitemoor	450	43	97	-54	1	30	0.26
Winchester	695	85	150	-65	1	28	0.34
Wolds	350	74	75	-1	0	0	0.58
Woodhill	762	36	164	-128	1	100	0.13
Wormwood Scrubs	1167	150	251	-101	1	41	0.35
Wymott	800	276	172	104	0	62	0.95

## 16. Annex K: GMS Contract 2003 Extract

**ESSENTIAL SERVICES** (provided by all GMS practices). These cover:

- i) management of patients who are ill or believe themselves to be ill, with conditions from which recovery is generally expected, for the duration of that condition, including relevant health promotion advice and referral as appropriate, reflecting patient choice wherever practicable
- ii) general management of patients who are terminally ill
- iii) management of chronic disease in the manner determined by the practice, in discussion with the patient

**ADDITIONAL SERVICES** (services that GMS practices can opt out of providing, whether on a temporary or permanent basis. These cover:

- i) cervical screening
- ii) contraceptive services
- iii) vaccinations and immunisations
- iv) child health surveillance
- v) maternity services (excluding intra partum care)
- vi) minor surgery procedures of curettage, cauterly, cryocautery of warts and verrucae, and other skin legions.

**ENHANCED SERVICES** (services that GMS practices can opt into providing. These are essential or additional services delivered to a higher standard or services not delivered through essential or additional services). These are split into 3 types:

**Directed Enhanced Services** (must be commissioned by PCT but not provided by every practice):

- i) Minor Surgery (injections, cutting surgery)
- ii) childhood immunisations and vaccinations
- iii) influenza immunisations
- iv) Schemes for violent patients
- v) Quality information preparation
- vi) access

**National Enhanced Services** (optional extra services that the PCT may commission, in consultation with the local medical committee, to meet local needs):

- i) INR and shared care drug monitoring
- ii) More specialised drug and alcohol misuse services
- iii) Substance maintenance prescribing
- iv) More specialised depression services
- v) More specialised services for patients with multiple sclerosis,
- vi) More specialised sexual health services
- vii) Minor injury services
- viii) Immediate care and first response services
- ix) Enhanced care of the homeless
- x) IUCD fitting
- xi) Intra partum care

**Local Enhanced Services** (commissioned entirely by local negotiation, using the same structure as NES to meet local specific needs):

These could include:

- i) enhanced medical care of asylum seekers
- ii) enhanced services for non-English speakers
- iii) specific services for people with learning disabilities
- iv) neonatal examinations within 24 hours of birth
- v) enhanced care of patients living in Nursing and Residential homes
- vi) area-wide home visiting schemes