**Decision log PCC-2025-019**



**MINUTES AND ACTIONS OF THE INDEPENDENT CUSTODY VISITING SCHEME**

**HELD BOTH REMOTELY ON TEAMS AND IN PERSON IN HAWTHORN MEETING ROOM,**

**POLICE HEADQUARTERS ON 16TH JULY 2025**

**Present:** Jean Munton - Chair, Independent Custody Visitor (JM)

Mike Hallinan– Independent Custody Visitor (MH)

Alan Heywood – Independent Custody Visitor (AH)

Linda Mason - Independent Custody Visitor (LM)

Mike O’Farrell - Independent Custody Visitor (MO)

Alexandra Robinson - Independent Custody Visitor (AR)

Richard Holland - Independent Custody Visitor (RH)

Andrea Williams - Independent Custody Visitor (AW)

Also in attendance:

Nicola Warren – Scheme Manager, OPCC (NW)

Ceri Hiscox - Scheme Administrator, OPCC (CH)

Inspector Richard Dawe – Custody Ystrad (RD)

***The meeting commenced at 6:07pm.***

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|  | **Notes and Actions** | **Action** |
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| **1.** | **Apologies** |  |
|  | Apologies for absence were received from D Salmon, L Price and  L Langley. |  |
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| **2.** | **Minutes and Actions from Previous Meetings** |  |
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|  | The minutes of the last meeting were agreed as a true and accurate record. |  |
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| **3.** | **Custody Update** |  |
|  | RD advised that since the last meeting in April; several new measures had been put in place. The briefing process had been changed. Previously, only certain officers attended briefings, so general risk within the room was not known to all. This meant that, if some CDOs or custody Sergeants swapped roles halfway through a shift, they might have been unaware of the risks present within the unit. The briefing was now conducted with everyone involved, which allowed for more fluid movement and information sharing throughout the shift.    RD informed the meeting weekly resource meetings had begun, held directly with the Rota team. Although long-term planning took place—up to three months ahead—to ensure adequate staffing, short-term issues such as sickness or courses often arose. The new weekly meetings helped address these short-term gaps. The advantage was the maintenance of staffing levels, resulting in reduced booking-in times and quicker processing prior to release, thereby reducing detention times overall.    RD advised a shift pattern change had also been introduced. Due to the working pattern, custody officers had previously worked more hours than they should, so adjustments had been made to address this.  RD informed the meeting that improvements in custody processes had accelerated the release of detainees by reducing detention times, facilitated by adequate staffing and a shift change addressing previous excessive working hours and irregular rest day scheduling for custody officers.  RD advised the meeting of a new air conditioning system had been installed and was positively received by both staff and detainees, particularly during the recent hot weather.  RD confirmed that Ystrad Mynach had re-opened fully~~,~~ following a phased return and Newport was now operating as a contingency site, except for previously noted dates.  RD informed the meeting that significant changes had taken place earlier in the year, including the station opening and the introduction of a new format involving four Inspectors, each assigned to a specific shift. The team was continuing to refine the structure as needed.  RD confirmed adverse incidents continued to be reported; however, all were routine in nature. Existing procedures had proven effective in identifying and managing these issues before escalation. No changes to current processes or procedures were deemed necessary at this time and operations remained stable.  The meeting had previously discussed ongoing issues with delays in securing Appropriate Adults (AAs). JM asked if that had improved since the last meeting.  RD confirmed that challenges with waiting times persisted. There had been no significant improvement in response times for under 18’s, and the matter remained under review. The potential involvement of Adferiad in the process had been mentioned but had not progressed further. The matter remained exploratory and was expected to be primarily dependent on social services.  RD acknowledged that he had not had the opportunity to advance this initiative, though it remained open for future consideration.  RD confirmed the situation regarding collaboration with social services remained unchanged since the last meeting. Anecdotal evidence suggested that delays and limitations were consistent with past experiences, including those from previous years in the custody unit. The potential involvement of Adferiad was discussed again. While the suggestion had been raised, it had not progressed and remained dependent on coordination between social services. Legislative considerations might also need to be reviewed.  RD acknowledged that resource constraints within social services continued to impact operational flexibility, though options for future exploration remained.  The previous meeting raised concerns regarding the availability of two healthcare professionals per shift, with March figures indicating coverage on only 69.4% of shifts.  RD noted an improvement in healthcare staffing, with two nurses present on most shifts within his team. While exact figures were unavailable, this appeared to reflect progress since the last meeting.  The group revisited the topic of individuals presenting with diverse gender identities, following a recent Supreme Court decision The Inspector had previously indicated that this had not posed operational issues, though further guidance was anticipated.  RD confirmed if an officer was uncomfortable conducting a search of an individual who identified as a different gender, they were not required to carry out the search. Officers could decline, and an alternative staff member would be assigned to complete the procedure.  RD informed the meeting that standard practice had typically involved female officers conducting searches of female detainees.  However, it was reiterated that searches were now conducted based on the gender an individual presented. This approach had not caused any operational issues.  NW was to clarify if the relevant guidance had been published and, if confirmed, to circulate it to the panel members.  A query was raised regarding the accuracy of custody records when a detainee claimed to have been searched by an officer of a different gender than requested, despite the search being conducted appropriately.  RD confirmed that, in such cases, it was expected that the CDO would document any discrepancies or concerns arising during the search process. These details should be recorded within the custody record to ensure transparency and accountability.  A query was raised regarding whether temperature fluctuations, particularly those caused by air conditioning failures, were included in the general risk assessment briefing conducted at shift changeover.  RD confirmed that a general risk assessment was carried out at the start of each shift. While the briefing covered environmental factors, it was not specified whether temperature-related risks were consistently addressed. The impact of temperature changes on detainees was acknowledged as a relevant consideration.  RD informed the meeting that the general risk assessment briefing conducted at shift change primarily focused on physical and medical risks, such as suicidal or violent behaviour, and did not routinely include environmental factors like temperature.  Recent hot weather had caused noticeable fluctuations in cell conditions, which had varying effects on detainees. During a recent visit, subtle temperature differences were observed, and it was reported that detainees could press a call button if they experienced discomfort.  Concerns were raised about the potential for dehydration, particularly among individuals withdrawing from substances such as drugs or alcohol. It was suggested that environmental risks, including temperature, should be considered within future risk assessments.  MH asked whether custody staff adopted a proactive or reactive approach to changing environmental conditions within the custody suite. It was noted that the standard response placed responsibility on the detainee to raise concerns, with CDOs conducting visual checks.  Concerns were expressed about the limitations of this approach, particularly in cases where detainees may not fully understand or retain information provided at booking.  It was suggested that staff should proactively ask detainees about their welfare, such as offering water, rather than relying solely on call-button requests.  MH asked whether the general risk assessment briefing included consideration of dehydration risks, especially during periods of hot weather. It was proposed that environmental factors and weather-related policies be incorporated into routine welfare checks to better safeguard detainees.  RD confirmed during handover briefings, weather conditions were not routinely discussed. However, estate-related issues—including malfunctioning air conditioning or temperature concerns in cells—were addressed under the relevant section if identified.  RD informed the meeting that CDOs conducted welfare checks every 30 minutes, during which detainees were routinely asked if they required anything, including water. Detainees also had access to a call button to request assistance.  It was acknowledged that unless a detainee reported discomfort due to heat, staff would only become aware of temperature issues during direct interaction, such as during cell entry or routine checks. In such cases, appropriate action would be taken.  RD confirmed that the custody suite’s temperature control system was automated and self-regulating, with no manual adjustments required. In the event of an air conditioning failure, particularly during hot weather, staff would be aware and respond accordingly.  During periods of high temperature, detainees were rotated and offered access to the yard for fresh air. However, unless a temperature issue was visibly apparent or reported by a detainee, it might not be immediately identified. If a detainee raised a concern—such as feeling overheated—staff would take appropriate action, including relocating them to a cooler cell or offering yard access.  A concern was raised regarding the ability of visitors to verify that CCTV systems within the custody suite were operational. It was noted that, although CCTV was checked by Inspectors in response to incidents, visitors were not permitted to view the monitors directly due to access restrictions behind the CDO desk.  NW clarified that they did not require footage or details of detainee activity but simply needed to confirm that the system was active and functioning.  The current process relied on verbal confirmation from staff, which was questioned as insufficient for assurance.  It was suggested that clearer guidance be provided on how visitors can appropriately verify CCTV functionality without breaching access protocols. NW to contact the ICVA (Independent Custody Visiting Association) to seek clarification on current guidance regarding the verification of operational CCTV systems by visitors. | **NW**                                                                                                                                                                                                      **NW** |
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| **4.** | **Scheme Update and Performance Framework Update** |  |
|  | NW informed the meeting that there were 10 ICVs (Independent Custody Visitors) currently active on the scheme. Lisa had indicated she may be available to resume visits from September.  Between April and June, 13 visits were scheduled. Of the report forms received, 10 visits were completed. One visit, conducted in early April, had originally been scheduled for March and resulted in an overlap.  The visit form for May had been requested from the custody unit after the original was posted but not received as yet. The visit form for June was also still outstanding.  One scheduled visit in June was missed due to a miscommunication. The team acknowledged the oversight and offered apologies. It was noted that two visits were expected to take place at Newport, and arrangements were being made accordingly.  NW informed the meeting one visit was abandoned after visitors waited 16 minutes for access. Entry was only granted after three attempts, at which point the decision was made to abandon the visit. The delay was attributed to a scheduling error.  NW advised that no issues had been received regarding access delays, which was positive as the purpose of ICV duties was to conduct unannounced spot checks. Delays in access raised concerns and could undermine the integrity of the process. The issue would continue to be monitored and escalated, if necessary, particularly if it indicated a training gap.  NW raised if the new CDOs had been invited to attend training. The expectation was that an input would be provided on officer responsibilities and the role of ICVs. It was noted that ICVs had previously attended training sessions.  NW acknowledged that visits should be conducted as randomly as possible.  A recent weekend visit was noted positively, and it was suggested that more weekday afternoon visits be considered to improve coverage.  The importance of flexibility in scheduling was emphasised, particularly considering the upcoming annual report being drafted.  The group expressed appreciation for the inclusion of weekend visits and encouraged continued variation in timing. It was noted that visits could avoid custody shift changeover periods to minimise disruption and ensure effective access.  NW confirmed that there were no current issues with holiday cover and that staffing remained stable. If any rearrangements were required, they could be managed without difficulty.  NW also noted that, following a recent exchange, consideration was being given to transitioning to an electronic version of the relevant documentation.  The group discussed progress toward achieving the Gold Award for the Quality Assurance Framework. The focus remained on evidencing activities and improvements, including updates to the checklist and alignment with HMIC inspection criteria.  NW noted that additional training material needed to be circulated, covering four specific subjects requested. Attendees were asked to confirm completion via email.  Recruitment would commence shortly as per the strategy previously developed. Recent engagement included contact with the Force outreach Officer. The importance of recruiting visitors from diverse backgrounds was emphasised.  Visitors raised concerns regarding the accessibility of the cell usage form. CDOs were often busy and unable to accommodate additional data requests and printing a summary report would save time.  Visitors also noted that detainee turnover could be rapid, with individuals moved or replaced in cells before the visit was completed, making accurate tracking difficult during busy periods.  RD agreed that CDOs would no longer label or write on the visit report forms. Visitors confirmed that they preferred to complete the forms themselves. The only document required from custody staff was the printed cell usage form, listing current detainees and cell numbers.  NW advised that the Cell Usage form was designed to streamline the process and reduce the administrative burden on CDOs. It was noted that this approach had initially proven effective and was preferred by the visiting team, however, the many of the CDO~~’~~s were not aware of the form.  NW to email the Inspector to confirm that CDOs should no longer complete any detainee category detail within the visitor form. The Cell Usage form would instead be printed and provided to the visitors to complete during visits.  NW informed the meeting that no major issues have been raised by the visitors since the last meeting. The minor issues raised had been resolved by the Custody Sergeant.  NW noted with appreciation that several visitors had adopted the practice of stating “checklist completed” after conducting visits. This confirmed that all required questions had been asked, rather than relying on assumptions.  NW requested that visitors continue to use this phrasing to ensure clarity and consistency in reporting. The updated checklist should reflect this approach, and any additional observations should be recorded separately.  It was noted that visitors generally asked all required questions during visits, particularly when detainees were willing to engage. The process typically involved introducing themselves, confirming consent to speak, and proceeding through the checklist.  Visitors were often able to assess detainee awareness, welfare, and access to food, drink, and phone calls through observation and conversation. In such cases, most checklist items were addressed.  NW recommended that all visitors carry the visit checklist with them during custody visits to ensure consistency and thoroughness. NW to recirculate the checklist to all visitors.  NW to find out the date of the next CDOs training session, to arrange to provide an input on Independent Custody Visitor expectations and procedures. | **NW/All Visitors**                                                          **NW**                                                    **NW**      **NW** |
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| **5.** | **Any Other Business** |  |
|  | No other business was discussed. |  |
| **6.** | **Date of Next Meeting** |  |
|  | The next meeting will be held at **6pm, 22nd October 2025.** |  |

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| **Jane Mudd, Police and Crime Commissioner for Gwent** | |
| **I confirm that I have considered whether or not I have any personal or prejudicial interest in this matter and take the proposed decision in compliance with my code of conduct. Any such interests are recorded below.**  **The above request has my approval.** | |
| **Signed** | **Date**  **07.10.2025** |

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| **Contact Officer** |  |
| **Name** | **Nicola Warren** |
| **Position** | **Governance Officer** |
| **Telephone** | **01633 642200** |
| **Email** | **Nicola.Warren@gwent.police.uk** |
| **Background papers** |  |

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| **Actions from meeting 16th July 2025** | |  |  |  |
| **Minute Number** | **Action** | **Owner** | **Update** | **Complete/Ongoing** |
| **3.** | NW was to clarify if the relevant guidance had been published and, if confirmed, to circulate it to the panel members. | **NW** |  |  |
| **3.** | It was suggested that clearer guidance be provided on how visitors can appropriately verify CCTV functionality without breaching access protocols. NW to contact the ICVA (Independent Custody Visiting Association) to seek clarification on current guidance regarding the verification of operational CCTV systems by visitors. | **NW** |  |  |
| **4.** | NW noted that additional training material needed to be circulated, covering four specific subjects requested. Attendees were asked to confirm completion via email. | **NW/All Visitors** |  |  |
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