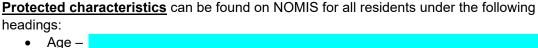
PAVA Incident report

Please complete this detail with all details available and submit to
for each PAVA incident (drawn and not used or used)
In addition report the use / draw via the single incident reporting line.

Establishment name	
Date and time of incident	
Type of incident; Drawn and used / drawn and not used	
NOMIS Number of prisoner involved	
Name of prisoner involved	
Age of prisoner	
Ethnicity of prisoner	
Religion of prisoner	
Does the prisoner have a known disability	
Number of staff present when PAVA used / drawn	
Area PAVA deployed (ie – cell, common area, outdoors etc.)	
Brief outline of incident – should include level of threat posed or potential / actual harm present	
Is the prisoner currently subject to ACCT or was an ACCT opened following the incident	
Is there BWVC and / or CCTV footage available	

Guidance for completing PAVA incident form:

As you will be aware through your local Use of Force monitoring it is important to have a full picture of every event to ensure there is no disproportionality and that all uses are in line with guidance. The above form gathers key information for both your local scrutiny as well as national oversight of all uses / draws. In addition the rollout of PAVA is being evaluated by a research team to improve our understanding of its use, the potential benefits to improving safety and identify where improvements can be made. The evaluation team are regularly reviewing the content of the forms submitted and as a result have identified ways to assist prisons to locate all relevant data.





<u>ACCT</u>: When an ACCT document is opened this should be recorded on NOMIS and show as an Alert which can be found through – 'Offender Personal Details' then 'Alerts'. All incident details should be available from Use of Force Reports and potentially on NOMIS under 'Case notes' which can be found through – 'Case Management' then 'Case Notes'. If this has been checked and they have not been subject to ACCT a "No" response is still required to complete the fields.

Religion: There has been some confusion over the recording of 'No Religion', if a resident shows as 'No Religion' on NOMIS, please use this terminology to record information on the PAVA use report and not simply the term 'Nil' or 'None' as this is then questioned as to whether the information is known. If there is no information available in this or any other field, please use the term 'unknown' but only after attempting to gain this information directly from the resident in the same way you would on first reception.

Brief outline of incident: Include information as to what events had lead up to the PAVA use / draw, consider including a timeline. Providing sufficient detail will ensure that reviews at a national level can be effectively scrutinised without the need to follow up locally.

If you have questions regarding the completion of the form please contact the FMB:

Thank you Prison Safety Team

Issue D	ate: 20 June 2019	Implementation Date: 20 June 2019				
-	es the following documents (e.g. reby cancelled:	PSIs, I	PSOs, Custodial Service Specs) which			
None						
Servic PSI 30,	uces amendments to the following e Specs): This operational guidance (15 (Amendments to PSO 1600) required by:		ents (e.g. PSIs, PSOs, Custodial addition to PSO 1600 (Use of Force) and			
	HMPPS HQ	\boxtimes	Governors			
\boxtimes	Public Sector Prisons		Heads of Group			
	Contracted Prisons		Contract Managers in Probation Trusts			
	National Probation Service		Community Rehabilitation Companies (CRCs)			
	HMPPS Rehabilitation Contract Services Team		HMPPS-run Immigration Removal Centres (IRCs)			
	Other providers of Probation and Community Services		Under 18 Young Offenders Institution			
All gro guidan	tory Actions: ups referenced above must adhere ce, which contains all mandatory actions formation:		requirements section of this operational			
Audit/r	monitoring:					
	600 contains the mandatory monit	toring a	actions, strengthened in this operational			
Operat		nas reci	aining element as part of roll out. The ruited additional staff to deliver training to ments in the roll out.			
Contact:						
Deputy Terroris		a Sturt,	Director, Security, Order and Counter			

Approved by OPS for publication:

Policy name: Use of PAVA in Public Sector Prisons Reference: N/A

1. The Use of PAVA in Public Sector Prison Establishments

- 1.1 It is HMPPS policy that officers in prisons for adult men will be issued with irritant spray for use in **exceptional circumstances** to prevent serious harm to staff or others.
- 1.2 PAVA will be introduced in an establishment only after it has passed a readiness assessment, designed to ensure that the prison is well placed to support staff in the legitimate use of force through strong governance, training and staff support. The introduction of PAVA must not undermine wider efforts to improve safety and rehabilitation.
- 1.3 This guidance sets out the necessary local actions for each prison to meet our legal requirements and our duty of care to staff and prison residents alike. PSO 1600 and PSI 30/2015 still apply to all Use of Force incidents in custody, but we provide here the additional considerations specifically around use of PAVA.
- 1.4 We have provided all the information needed for prison management teams to implement this change successfully.
- 1.5 If you have any questions or suggestions for further material to be included in this guidance please contact:

2. What is PAVA?

- 2.1 PAVA (Pelargonic Acid Vanillyamide) spray is classified as a prohibited weapon by section 5(1) (b) of the Firearms Act 1988. Operational staff are legitimised in using it through constabulary authority. As such it must only be used where it is proportionate to the seriousness of the circumstances.
- 2.2 PAVA is an irritant spray dispensed from a hand-held canister in a liquid stream. It contains a 0.3% solution of pelargonic acid vanillylamide, a synthetic capsaicinoid, in a solvent of aqueous ethanol. The propellant is nitrogen. PAVA has had full medical research conducted and is approved for operational use by the Home Office Centre for Applied Scientific Technology (CAST) and the Defence Science and Technology Laboratory (DSTL).
- 2.3 PAVA is to be directed towards the eyes and can temporarily incapacitate most subjects. A full recovery should take place within 40 minutes. It is not universally effective and some people may suffer little to no effects, whilst others may have a longer or more severe reaction.
- 2.4 The effective working range for PAVA is between 1 and 4 metres (from the canister to the subject). Maximum accuracy will be achieved over a distance of 1.25 2 metres. PAVA should not be used at less than 1 metre from a prisoner if it can be avoided. Using PAVA under 1 metre increases the risk of injury to the eyes from the pressure of the spray and increases the risk of the user being affected by PAVA.

3. Preparing a prison for carrying PAVA

<u>Prisons must demonstrate readiness and complete a programme of staff training and briefing to prisoners before PAVA is issued.</u>

- 3.1 All prisons will be supported by the Physical Safety Programme Team whilst they are preparing for and going through the process of rollout. The Physical Safety Team will seek assurance that a prison has fully implemented Phase 1 of the Offender Management in Custody Model (i.e. key workers) and is fostering a rehabilitative culture; that use of force governance is assessed as adequate and robust; and that a prison can facilitate the planning and delivery of a local training schedule to support rollout.
- 3.2 Before any staff are issued with PAVA, they must satisfactorily complete the full (8 hour) 2019 personal safety training course, which incorporates the SPEAR system of personal protection, and the use of PAVA.
- 3.3 No staff will be authorised to carry PAVA in the prison until at least 50% of staff have been trained in the full package, and establishment readiness has been achieved. This will be agreed by the project SRO.
- 3.4 The leaflet (Annex A) should be used to provide information to prisoners about PAVA during roll out, on reception and induction and post incident. Annex B can be used for staff and prisoners to explain the effects of secondary exposure.

4. Authorisation

Governors must ensure that only operational staff with constabulary authority are permitted to carry PAVA.

PAVA must only be used in exceptional circumstances. It must only be used where it is necessary, reasonable and proportionate and must be clearly justified as a last resort.

- 4.1 PAVA may only be carried and used by operational staff trained and accredited in its use, working in establishments authorised to do so. Trained prison officer grades in operational bands 3-5 in closed adult male prisons must always carry PAVA. Practice for operational bands 7-11 are the same as for basic use of force and batons (i.e. initial and annual refresher training will be available, but operational managers would only carry PAVA in exceptional circumstances such as a general staff refusal to work, where they are carrying out officer duties).
- 4.2 Operational staff in the closed adult male estate who are trained and issued with PAVA must carry it at all times when on duty in the establishment. PAVA must not be taken on bedwatches or escorts.
- 4.3 PEIs must carry PAVA unless on the grounds of health and safety there is a risk to the individual or others when carrying out certain physical activities. This should be decided by a risk assessment and agreed with the Governor and Prison Group Director locally. This assessment must be both activity and location specific and should offer flexibility (i.e. staff participating in sports may not carry PAVA but supervisors might need to). PEIs assisting with discipline duties must carry PAVA.



5. Use of PAVA

<u>Use of PAVA must be reserved for exceptional circumstances, and only ever as</u> the last resort.

Principles for Use

- 5.1 The use of PAVA is governed by the same rules and law relating to the use of force. Staff considering use of PAVA must consider the four principles and make a dynamic risk assessment of the circumstances to ensure the drawing and/or use of PAVA is necessary, reasonable and proportionate. As described in PSO 1600 and PSI 30/2015, the use of force will be justified, and therefore lawful, only
 - I. If it is reasonable in the circumstances
 - II. If it is necessary
 - III. If no more force than is necessary is used
 - IV. If it is proportionate to the seriousness of the circumstances
- 5.2 In addition to satisfying these principles, HMPPS policy is that PAVA will only be used when exceptional circumstances apply and in accordance with training. The legitimate use of PAVA will only be considered reasonable as a means of defence when:
 - i. It is necessary for an officer to defend themselves or a third party from an attack, or an impending attack, where they perceive a threat of immediate serious harm; and
 - ii. There is no other reasonable option open to the member of staff to protect themselves or another person and reduce the risk of <u>immediate</u> serious harm but to employ this defensive technique.
- 5.3 Staff must assess whether the threshold set in this guidance for the deployment of PAVA has been met, or indeed whether other less intrusive techniques may be more appropriate to the circumstances. Consideration should always include the option of retreating from the source of threat. It is understood that staff need to make a dynamic assessment in very difficult circumstances, taking into account the relevant factors and the interplay between them. It is therefore essential that all staff deploying PAVA must have read and understood this policy and the associated guidance in addition to having attended the training and demonstrated competence in handling PAVA. Additional to this, staff must consider the following factors:
 - i. <u>Support from other staff</u>. Staff should consider whether colleagues responding to the incident will be able to assist in dealing with the incident swiftly and effectively without the use of PAVA. Use of PAVA would be appropriate where the number of staff immediately on the scene cannot deal with an incident where serious harm is taking place or threatened (see Annex C).

- ii. The nature and extent of the threat or harm. Staff must assess the level of violence being offered and individual prisoners' capability and intention to cause harm. Deployment of PAVA will only be considered reasonable and proportionate where serious violence likely to cause serious harm is underway, or imminently likely to occur, and it cannot be effectively and safely managed by other personal protection or conventional C&R techniques (see Annex C below). The use of weapons or the threat to use weapons will be a significant consideration.
- iii. The location of the incident and the physical environment. Confined spaces, such as a cell, increase the risk of staff also being affected by PAVA. Extra consideration as to whether PAVA is the appropriate option must be taken in areas where members of the public are present, especially children (e.g. the visits hall). If deployed outside, factors such as wind can affect the accuracy of deployment.
- iv. <u>Prior experiences with the prisoner posing a potential threat</u>. Staff may have experienced and/or managed previous violence from a prisoner and any known triggers for such behaviour such as mental health crisis, emotional vulnerability or intellectual disability should be considered before use wherever possible.
- v. <u>Suitability and appropriateness of de-escalation techniques</u>. vi. <u>Any other relevant factor</u> such as suspected influence of drugs or movement of the prisoner in and out of the effective working distance for the PAVA.
- 5.4 HMPPS have identified some situations in which use of PAVA will not be considered reasonable. Staff must be aware use will **not be considered reasonable in the following circumstances**:
 - i. As a replacement for other use of force techniques or equipment where they are sufficient to deal with the incident. The dynamic risk assessment should identify PAVA to be the only reasonable option in the circumstances.
 - ii. At a distance of less than 1 metre (when measured from the hand holding the canister) unless this cannot be avoided. Use under this distance increases the risk of injury due to the pressure of the liquid stream and increases the risk of the user being hit with PAVA.
 - iii. To obtain compliance with an order where a prisoner is not actively violent or otherwise threatening serious harm.
 - iv. Once an assault has been committed and ended, and if there is no remaining threat of further attack.
 - v. On a prisoner who is under restraint using C&R techniques or in handcuffs or mechanical restraints.
 - vi. During planned interventions (other than ORRU and LRT specialist interventions).
 - vii. To saturate an area with PAVA such as a wall or landing area. PAVA must be aimed at an individual.
 - viii. On a prisoner in respiratory distress or showing other signs of immediate symptoms of acute ill health which are likely to be significantly exacerbated by PAVA deployment.
 - ix. During incidents at height, including prisoners on railings or netting or any incident where there is a risk of injury from falling (other than ORRU specialist interventions).

- 5.5 It is the responsibility of every member of staff who is authorised to use force to know the principles of law and understand how this operational guidance applies to their own practice. This will be covered in initial and refresher training. When a decision has been made to use PAVA
- 5.6 Wherever practicable, staff wearing Body Worn Video Cameras should turn it on (or ask others present to do so) to record the events leading up to the drawing and/or use of PAVA. Once turned on, recording must continue until the prisoner is relocated and the incident is resolved.
- 5.7 Staff must always draw PAVA in an open and visible manner. The explicit warning and drawing of PAVA can itself act as a deterrent and may prevent further threatening or violent behaviour.
- 5.8 Following the use of PAVA, staff must assess whether it is necessary or reasonable to use any further force on a prisoner. Any further application of control and restraint techniques following use of PAVA (e.g. application of handcuffs or guiding holds) must be subject to ongoing decision making and will need to be separately justified in order to be considered reasonable. After deployment of PAVA, staff should look to de-escalate and provide aftercare as soon as possible.
- 5.9 Staff will be required to explain the decision-making process that they went through prior to deploying PAVA, and to show that alternatives (e.g. attempts to remove themselves from the threat and/or de-escalate the situation) were considered.
- 5.10 If a BWVC cannot be activated the reasons must be explained in the Use of Force report and brought to the Governor's attention in the daily incident report.

6 Use of PAVA when prisoners are presenting a serious risk of harm to themselves <u>and</u> others

The use of PAVA in these circumstances must be exceptional and only ever considered as a last resort.

- 6.1 There may be **exceptional** circumstances where it is necessary, reasonable and proportionate to use force to prevent a prisoner who is at serious risk of harming themselves and others. Before considering using PAVA on a prisoner who is either threatening to or is engaged in an act of self-harm and may also be threatening others with serious harm, consideration must be given by staff to all options available to them, taking into account the context, resources and time available. Staff facing such a situation must engage the prisoner using empathy and understanding in an effort to reduce the imminence of harm, offer support and deescalate the situation. Any use of force must be the last resort. PAVA must never be used to manage such incidents unless:
 - I. there is a serious and imminent risk to the life of the prisoner who may also be threatening staff; **and**
 - II. intervention is required immediately to prevent that; and
 - III. there are serious risks to staff in physically intervening; **and** IV. no other reasonable options are judged to be appropriate.

- 6.2 Use of PAVA in such an incident would therefore be wholly exceptional.
- 6.3 After any such incident, an Assessment, Care in Custody and Teamwork (ACCT) plan must be opened if one is not already in place. If an ACCT is already open a case review must be held as soon as practicably possible after the incident. More information on suicide and self-harm prevention can be found in PSI 64/2011, Management of Prisoners At Risk of Harm to Self, to Others and From Others.

7 Healthcare and medical considerations

Governors must ensure that healthcare professionals working in the prison are fully briefed on what is expected of them locally.

Governors must agree local arrangements to ensure aftercare for prisoners and staff who have been subject to the effects of PAVA.

- 7.1 As part of the introduction of PAVA, the roll out team will engage with the healthcare provider to make sure that healthcare staff are trained in their responsibilities and the aftercare following use of PAVA.
- 7.2 The role of healthcare staff when PAVA has been used is the same as for other use of force incidents as set out in PSO 1600 and PSI 30/2015. Due to the spontaneous nature of incidents where PAVA may be used, it is unlikely that healthcare will be present during the use of PAVA but when healthcare staff are on duty, they should respond to every incident as a priority. An F213 should also be completed by healthcare of every prisoner exposed to PAVA in accordance with PSO 1600 and PSI 30/2015. On arrival at an incident, healthcare staff must be made aware if PAVA has been used. The supervising officer must liaise with healthcare and adhere to any clinical advice given.
- 7.3 Prisoners exposed to PAVA must be subject to regular observations of at least 4 an hour until the effects have subsided. Observation by a healthcare professional is best practice, and if available for the duration of this period must be available to provide support for recovery as necessary. Where a healthcare professional is not available, such as establishments without 24 hour healthcare, a member of staff trained in PAVA and its aftercare must fulfil this obligation. PAVA effects subside quicker when a prisoner has access to fresh air and this must be facilitated where reasonably practicable in the light of other risks to health and or security.
- 7.4 Staff and prisoners in the area may be unintentionally exposed to PAVA and suffer symptoms. Anyone experiencing ongoing primary symptoms must be seen by a healthcare professional. Staff who are likely to indirectly exposed must be informed of the risks and their reduction.
- 7.5 As part of PAVA training, staff are trained in the signs and symptoms of medical distress and how they differ from the normal effects of PAVA. PAVA must not be used on a prisoner showing any signs of medical distress. In the event a prisoner shows signs of medical distress following the use of PAVA, healthcare staff in attendance at the incident or first aider will provide support. If there is no first aider at the scene staff will need to follow the process for a medical emergency as taught in basic UoF.

7.6 Every prisoner exposed to PAVA, including secondary exposure, will have the information leaflet explained to them and be given a copy at an appropriate later point. The leaflet is attached at annex B. If BWVC is in use during the use of PAVA it should be left on to record the prisoner's response to the effects of PAVA until a healthcare professional or supervisory member of staff are confident that the main effects have subdued and it is safe to reduce observations to less frequent checks.

Post Incident

Governors must establish local arrangements to ensure aftercare for prisoners and staff who may be subject to the effects of PAVA are sufficient.

Governors must ensure reporting and debriefing requirements are met as set out in PSO 1600 and this guidance.

- 7.7 Immediately following the deployment of PAVA:
 - i. The prisoners affected must be subject to regular observations of at least 4 per hour or until the effects have subsided, whichever is longer. As far as possible, a healthcare professional should be available for the duration of this period to support recovery as necessary. The prisoner must be subject to regular observations following the incident until a full recovery is made (see para 4.2). Although most people recover from immediate symptoms usually within about 40 minutes, the effects can be different for each person. A close eye needs to be kept to monitor their well-being and recovery, and the need for medical intervention if necessary. ii. An F213 must be completed
 - iii. The discharged canister should be sealed in an evidence bag and stored securely. A new canister will need to be drawn for the remainder of the shift if appropriate.
 - iv. Hot debrief of all staff present by a Custodial Manager or above. v. A NOMIS case note is completed.
 - vi. Duty Governor must be informed and all relevant incident and intelligence reporting completed.
 - vii. Reported to the single incident line immediately if a prisoner has an adverse reaction to PAVA or requires outside hospital treatment.
 - viii. Reported on the single incident line within 24 hours.
- 7.8 PSI 30/2015 mandates use of force documentation to be completed within 72 hours. This includes drawing or use of PAVA.
- 7.9 A post incident review must be completed by a Custodial Manager or above with the prisoner within 72 hours. This is vital so that a prisoner can give their version of events, discuss concerns and understand why PAVA was used. This must be recorded on the Post Incident Review document from the Good Governance Toolkit and then collated with the incident paperwork.
- 7.10 There is no requirement to complete a separate use of force form for secondary exposure, however details of any person unintentionally exposed to spray should be captured in the Annex A of the use of force form. It is important that they also have the chance to ask questions about why PAVA was used, and why they were affected.

- 7.11 Although exposure to PAVA to the eyes is required for full irritant effect, contact to other areas, including clothing, may result in lesser symptoms such as minor irritation to the airways and eyes. In the event that clothing is contaminated by PAVA, the prisoner or member of staff should be given the opportunity to change. Staff uniform may be taken and laundered at home as usual without any further adverse reaction.
- 7.12 Staff should be given time to allow the effects of any unintended exposure to wear off before resuming normal duties, and should seek advice from healthcare staff or first aider if symptoms persist. The Governor should make arrangements to ensure that that staff are suitably supported whilst in recovery.

8. Recording and monitoring

<u>Local record keeping for storage, issue and use of PAVA must be comprehensive</u> and coordinated.

<u>Staff must report any use of PAVA, including incidents where it is drawn and not deployed, using the official Use of Force forms.</u>

- 8.1 Officers deploying drawing or using PAVA must complete a use of force form. This is not necessary where an officer has given verbal warning to signal potential use of PAVA but they do not go on to draw or use it.
- 8.2 Full guidance on completing the Use of Force staff statement is provided in PSI 30/2015. It should be a freely recalled description of the incident and the justification for use of PAVA including why other personal safety or C&R techniques were not used.
- 8.3 A record of the hot debrief should be made, detailing those present and any issues raised. This should be recorded in the staff statement by the supervising officer attending the incident. If possible this should be recorded on a BWVC and reference made in the UoF Annex A.
- 8.4 The SMT lead with responsibility for use of force (see 10.2) must make sure that all the necessary actions and support is given post incident. This includes making sure that the prisoner post incident review is arranged and conducted within 72 hours.
- 8.5 All incidents involving the drawing and use of PAVA must be discussed at the local Use of Force committee meeting and lessons learned shared with all staff. This can include, for example, what else could have been tried to de-escalate the situation so that PAVA is not needed, further training that may be required, as well as any issues about the technical use of the spray.

9. Governance and assurance

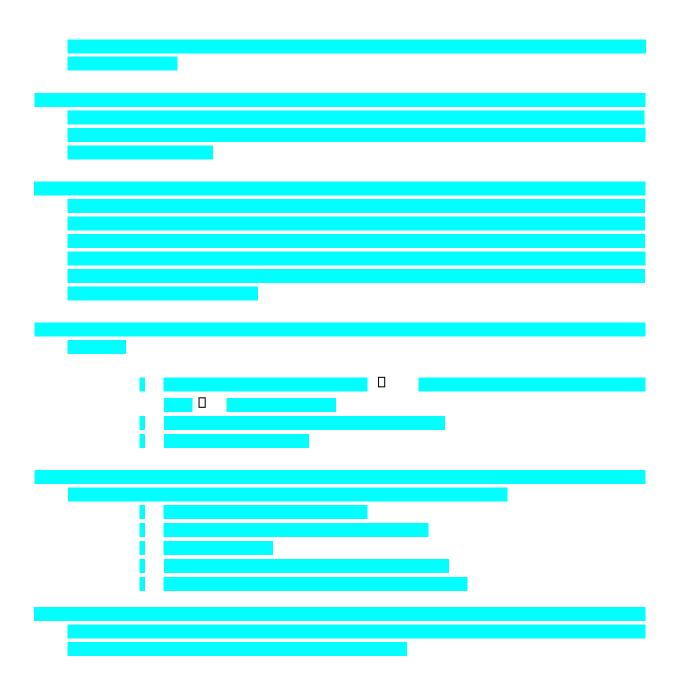
Governors must ensure that robust governance arrangements are in place to provide assurance and scrutiny of the use of PAVA.

9.1 All establishments to be issued with PAVA must have a Use of Force committee that meet on a monthly basis chaired by a member of the SMT. It is current policy that UoF committees should meet quarterly, however the introduction of PAVA and other changes to Use of Force practice means that establishments need to move to a model to improve

assurance and governance. As part of the roll out of PAVA establishments will be provided with guidance on how to improve governance and assurance around UoF.

- 9.2 A member of the SMT must take overall responsibility for use of force, including PAVA. This must be an operational manager. The SMT member must assure themselves that governance arrangements are complied with and that regular and unannounced assurance checks are completed. This is to ensure that all staff are carrying PAVA and that use is properly accounted for. Quality assurance checks should include the weighing and examination of canisters to determine that the canisters have not been deployed without a record their findings along with the auditable record of allocation and return. This should be 10% of staff members per month.
- 9.3 Every drawing and/or use of PAVA must be subject to review. Further guidance on how to do this is provided in the Good Governance Toolkit. This will not be an investigation but an opportunity to identify the learning that is available through the process of reviewing footage and paperwork including that recorded on the prisoner debrief.
- 9.4 The review process must incorporate as much information as possible including:
 - A verbal account of any dynamic risk assessment and decision-making process by the user and the supervising officer
 - CCTV and BWVC recorded by the user and any other person in the vicinity of the incident
 - Consideration of alternative courses of action
 - All completed use of force forms
 - Medical reports including F213
 - Prisoner Post Incident Review
- 9.5 The Use of Force committee must consider the findings of every review and plan remedial actions as necessary. This could include provision of further training, managerial guidance and awareness raising.
- 9.6 As is the case with any other area of practice, a review may lead to formal investigation if it is deemed that the drawing and/or use of PAVA may have breached policy thresholds and/or constitute the unlawful use of force. Where this is identified as a risk then Governors should follow the procedures outlined in policy regarding conduct and discipline.





11. Training

Governors must facilitate a programme of personal safety training (SPEAR system and PAVA) before PAVA is issued, and refresher training on an annual basis.

- 11.1 All staff must complete the full 8-hour personal safety training course and demonstrate competence and understanding of the principles of use prior to being issued with PAVA.
- 11.2 The personal safety training course covers:
 - i. The SPEAR system
 - ii. Legal framework for personal safety
 - iii. Dvnamic risk assessments.
 - iv. The risks to staff and others of the use if PAVA and how they are controlled.
 - v. Medical considerations, including the physical effects of PAVA and aftercare.
 - vi. Use of Force Report writing.
- 11.3 As a prerequisite to participating in personal safety training all staff must have completed either a use of force refresher training course or passed POELT training within 12 months. If they are not able to demonstrate this then basic refresher training must be completed urgently.
- 11.4 All PAVA training and assessment of competence must be recorded by the trainer in a member of staff's Use of Force training personal log book.
- 11.5 Personal Safety training includes training in the use of the SPEAR system and PAVA. This is additional to basic use of force training and Governors must facilitate a second 8-hour training session. It is a requirement that local instructors offer a mixed schedule of both basic C&R refresher training as mandated in PSI 30/2015 and a personal safety training refresher to ensure staff remain competent and confident in the full range of skills.
- 11.6 Staff who have a legitimate reason for not having completed training in the previous 12 months due to absence (maternity or paternity leave, long term sickness or a period of light duty) must complete refresher training as part of their return to work plan.
- 11.7 Where an individual member of staff has failed to complete refresher training within 12 months without legitimate reason, the Governor must be informed, this be discussed with the member of staff to ascertain why this has not happened, and remedial action planned.
- 11.8 If an establishment faces such operational pressure that it is impossible to schedule enough training to refresh large numbers of staff annually then this must be referred to the PGD.
- 11.9 All other staff working in establishments in prisoner facing roles who may be present during incidents when spray may be used must be given information regarding the use and effects of PAVA. The roll out team will provide this.

Policy and Practice Development Team - Operational Response and Resilience Unit

Annex A

Information for Prisoners about PAVA

Why we use PAVA

PAVA is only ever used with the aim of keeping people safe. When situations get so serious and dangerous to you or the people around you, an officer uses PAVA to stop the situation from getting worse.

We sincerely care about your well-being, and the well-being of our staff and other prisoners. We know PAVA can be very painful, and we always prefer to find other ways to resolve very difficult or threatening situations without using it. This includes talking with you, and using restraint if needed. Staff do not take the decision to use PAVA lightly.

The effects of PAVA

When PAVA is used, people often feel severe pain in their eyes, they cough a lot, find it hard to think straight and might feel a burning sensation on their skin. These are normal reactions to PAVA.

<u>Please do not panic.</u> These effects usually go away after about 20-40 minutes. Most people feel better within 40 minutes, but it can be different for each person.

If you keep feeling effects for more than 40 minutes, or if you feel any other symptoms, please make sure you tell staff. Someone from Healthcare can help answer questions, and check that you are ok. If your eyes keep hurting after an hour, only use cold water to rinse them – you must not use warm water. If you wear contact lenses, please take these out as soon as you can.

When PAVA is used, it gets on your clothes and on your skin. Washing or showering with lots of soap will get it off.

What happens if you've been sprayed?

We want PAVA to be used as rarely as possible, and only as a last resort when there is no other way to stop a situation escalating.

We will be coming to speak to you as soon as possible, to talk through what happened, how everyone acted, if anything could have been done differently, and how we can work together to avoid PAVA being needed in the future.

This will be your chance to explain what happened in your own words, for us to explain in more detail why staff used PAVA on you, and for you to ask questions. We will also explain how you can make a complaint if you want to.

Annex B

PAVA Secondary Exposure

You have been in an incident where PAVA was used. People who are close by can also be affected (this is called 'secondary exposure')

Why we use PAVA

When situations get so serious and dangerous to staff or prisoners, an officer uses PAVA to stop the situation from getting worse.

We sincerely care about your well-being. We know PAVA can be very painful, for those directly affected, and for people who get secondary exposure. We always prefer to find other ways to resolve dangerous situations without using it. This includes talking with the person involved in the incident, and using restraint if needed. They use it to keep people safe.

The effects of PAVA

When PAVA is used, people often feel severe pain in their eyes, they cough a lot, find it hard to think straight and feel burning sensation on their skin. These are normal reactions to PAVA.

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When PAVA is used, it gets on your clothes and on your skin. Washing or showering with lots of soap will get it off.

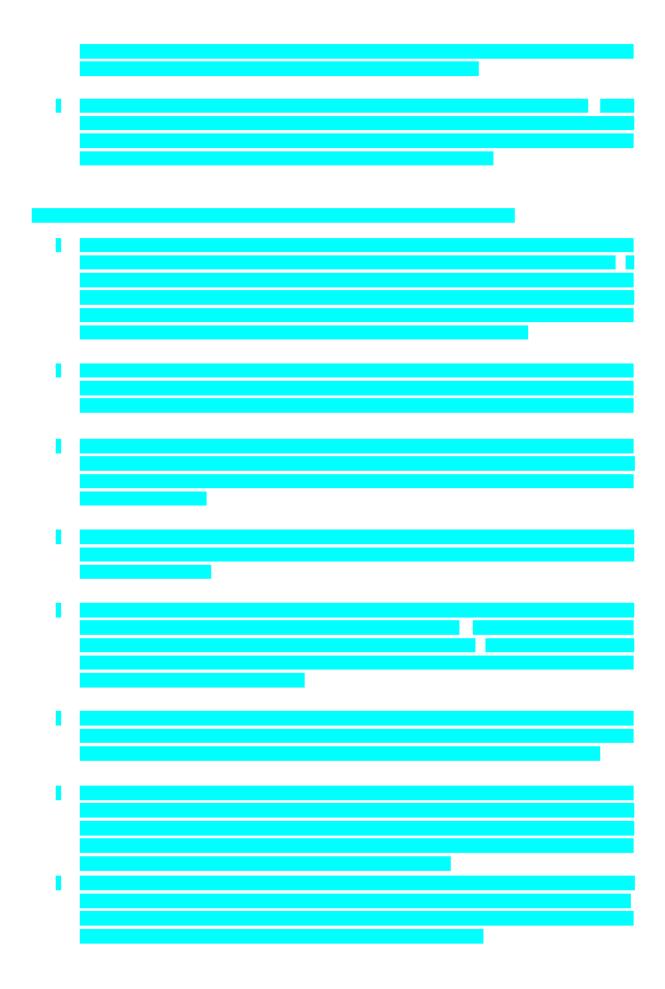
What happens next?

We want to avoid this happening again in future.

We will speak to everyone involved in the incident as soon as possible, to talk through what happened, how everyone acted, what could have been done differently, and how we can work together to avoid PAVA being needed in the future.

You will have the chance to ask questions and will explain how you can make a complaint if you want to.

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ANNEX D SPRAY ISSUE LOG

Date	Serial number	Weight of canister	Issued by Name and sign	Issued to Name and sign	Date returned	Weight of canister	Returned by Name and sign	Returned to Name and sign	Reason for return And Evidence bag number

