<u>Sample Letter B</u> (from Local Authority Social Work — Acceptance)

Your Ref: Circular SEJD 12/2002
Date:
Prison - HMP
Dear Colleague
THROUGHCARE SERVICES —
CONFIRMATION OF SUPERVISING AUTHORITY/OFFICER
Further to recent correspondence I can confirm as required by Circular No: SEJD 12/2002 that XXX Council will be the responsible authority for the prisoner detailed below. The individual supervising officer will be identified as soon as possible and you will be notified accordingly. Please ensure that the supervising officer is advised as quickly as possible should the prisoner be transferred to another establishment.
PRISON NUMBER:
NAME:
DOB:
ADDRESS:
THE SUPERVISING OFFICER IN THIS INSTANCE WILL BE:
TEL:
Please do not hesitate to contact the Throughcare Team at the

above address if you have any queries.

Yours sincerely