

**ACTION PLAN: HMCIP REPORT**

**ESTABLISHMENT: HMP GRENDON**

<b>TIMETABLE</b>	<b>DATE</b>	<b>STATUS OF THIS RETURN</b>
Full Unannounced inspection	8–18 May 2017	
Report published	14 September 2017	
Action Plan Submitted	8 November 2017	Attached

## ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP GRENDON

POSITION AS AT: 8 NOVEMBER 2017

1. Rec. no	2. Recommendation	3. Accepted/ Rejected/ Partially Accepted / Accepted Subject to Resources	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	<b>Recommendations</b>				
	<b>Courts, escort and transfers</b>				
5.1	Prisoners should not be kept waiting in vans on arrival. <b>(Error! Reference source not found.)</b>	Accepted	<p>The Prisoner Escort and Courts Service (PECS) escort contractor staff are aware of the establishment's operating times and transfer returns should reflect these times. PECS escort contractor staff will ensure that prisoners disembark the vehicle as swiftly as possible without compromising the safety and security of prisoners and staff. The escort contractors rely on effective prison reception procedures to ensure compliance and escort staff must comply with the local security strategy of the prison. On the rare occasion where a van arrives outside of HMP Grendon's operating times, ad hoc arrangements will be made by the Orderly Officer to ensure the prisoner is not left waiting on the van for an excessive length of time</p> <p>Neither PECS nor the escort contractor have received any complaints regarding disembarkation delays from escort vehicles in the last 12 months.</p>	<p>Prisoner Escort and Courts Service (PECS)</p> <p>Head of Operations</p>	Completed and ongoing
	<b>Self-harm and suicide</b>				
5.2	The prison should ensure that procedures to support prisoners at risk of self-harm at night are robust and well understood by staff. <b>(Error! Reference source not found.)</b>	Accepted	<p>The Operational Support Grades who undertake mainly night duties will be prioritised for the new suicide and self-harm refresher training package.</p> <p>A 'know your job guide' for access to cells on night state will be inserted into the 'night folders' to supplement the information already available in the establishment's Local Security Strategy.</p>	Head of Residence and Safety	December 2017

			<p>Residents will not always have access to safer custody representatives due to the locations of the representatives and the limitations of the night sanitation system. The night sanitation is an electronic system that allows residents eight minutes out of cell to use the toilet. It allows one resident out at a time, negating the ability for residents to see/interact with others privately. If residents feel they need to speak to someone, they can speak to staff or use the Samaritans phone. They can also speak briefly to other residents on their landings (through their door) whilst on night sanitation.</p> <p>A weekly check of all Samaritans phones will take place by the Night Orderly Officer to ensure they are all working; this will be annotated in the daily diary.</p> <p>The constant supervision cell is fit for use when residents are in crisis. A constant supervision policy has been written and published to offer guidance and good working practice in its utilisation. Located in the document is an algorithm to assess residents that may need the additional support.</p>		
	<b>Security</b>				
5.3	Prisoners should only be strip-searched when there is sufficient intelligence to suggest it is necessary. <b>(Error! Reference source not found.)</b>	Rejected	<p>There are circumstances in which prisoners are required to be routinely full-searched as a matter of routine, as set out in Prison Service Instruction (PSI) 07/2016, 'Searching of the Person' – this includes full-searching of prisoners on initial entry to prisons. All prisons must comply with the PSIs minimum requirements.</p> <p>Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. HM Prison and Probation Service (HMPPS) has a duty of care to prevent and deter illicit items from entering establishments which could be used by a prisoner to harm themselves or others.</p> <p>HMP Grendon is requesting permission from the Prison Group Director to vary their practice to comply with this recommendation.</p>	<p>HMPPS Security Group</p> <p>Head of Security and Intelligence</p>	
5.4	Hand-cuffing prisoners in the prison grounds should be justified by an individual risk assessment. <b>(Error! Reference source not found.)</b>	Accepted	<p>PECSs contract staff must comply with the local security strategy (LSS) of the prison. Where there are specific risks associated with the movement of a prisoner from a vehicle to reception, escort staff will liaise with the prison staff in order to agree the level of restraints for this. Arrangements are in place to align risk assessment criteria relating to this area to the establishment's LSS.</p>	<p>PECS</p> <p>Head of Security and Intelligence</p>	Completed and ongoing
	<b>Residential units</b>				
5.5	The facilities should be maintained in good condition and any repairs and refurbishment completed	Accepted	<p>Repairs and refurbishment are carried out by the facilities management provider Carillion. Their performance is overseen by the prison's Service Delivery Manager (SDM). Weekly and monthly meetings between the</p>	<p>Head of Business Assurance</p>	Completed and ongoing

	promptly. <b>(Error! Reference source not found.)</b>		<p>provider, SDM and senior prison managers will provide close scrutiny of ongoing and outstanding work to ensure its timely completion.</p> <p>With regard to the specific areas of concern highlighted in the report, a specialist contractor was appointed to undertake works to the constant watch cell and replaced the safer cell furniture following an act of vandalism. In addition, they also redecorated the cell and repaired the floor. The National Service Management Team (NSMT) deemed these works to have been completed within a reasonable timeframe.</p> <p>Following a fire in the designated safer cell much of the furniture needed to be replaced. Due to it being a safer cell the new furniture was not easily available. The delay was further compounded by a series of problems which delayed the cell being made available to the establishment. The SDM has continued to work with Carillion in an effort to progress this work.</p> <p>The prison continually suffers problems associated with blockages of the toilets and there is evidence to support the fact that prisoners are often intentionally blocking them. The SDM has worked closely with Carillion to progress any works that are required to clear these drains. It is recognised that the showers do require redecoration in some areas and again the SDM has worked with Carillion to progress this.</p>	<p>Service Delivery Manager</p> <p>National Service Management Team (NMST)</p>	
	<b>Equality and diversity</b>				
5.6	The EMT should disaggregate data for HMPs Grendon and Spring Hill. <b>(Error! Reference source not found.)</b>	Accepted	Data is available for Grendon and Springhill separately. The Prison and Probation Analytical Services will discuss the practicalities of having the data available on the Performance Hub.	Prison and Probation Analytical Services	December 2017
5.7	All DIRFs should receive a formal written response explaining how the incident has been investigated and resolved. <b>(Error! Reference source not found.)</b>	Accepted	<p>In accordance with the Equalities Policy, all discrimination and incident reporting forms (DIRFs) will be responded to in a formal manner. A guidance document to aid the investigation of DIRFs will be issued to all staff.</p> <p>10% of DIRFS are quality checked by the Deputy Governor prior to return to the resident. Copies of all completed DIRFs are sent to the Safer Custody and Equality Manager for collation for the equality meeting, at which point they are also checked to ensure they have been resolved.</p>	<p>Head of Residence and Safety</p> <p>Deputy Governor</p> <p>Head of Residence and Safety</p>	December 2017
5.8	Managers should routinely monitor the proportion of black and minority ethnic men in the population and their attrition rate from assessment and therapy. <b>(Error! Reference</b>	Accepted	<p>The ethnic breakdown of referrals and those accepted for admission will be monitored by the prison's programmes hub.</p> <p>An annual report will be provided to the Therapy Policy Meeting (Grendon's SMT) on the breakdown of attrition rate by ethnicity and will be reviewed by the Diversity and Equality Action Team (DEAT).</p>	Head of Clinical Services	December 2017

	<b>source not found.)</b>				
	<b>Faith and religious activity</b>				
5.9	The multi-faith room should be extended and provide suitable facilities for Muslim prisoners. <b>(Error! Reference source not found., repeated recommendation 2.33)</b>	Accepted	Funding has been agreed for the internal work to provide more suitable facilities. However, recently identified roofing problems are being investigated and may require additional resourcing before the work can commence.	Head of Reducing Reoffending	March 2018
	<b>Health services</b>				
5.10	F wing should have ready access to an AED. <b>(Error! Reference source not found.)</b>	Accepted	An automated external defibrillator has been relocated to the main foyer. This will provide more immediate access for F wing.	Head of Business Assurance	Completed
5.11	The in-possession policy and in-possession risk assessment arrangements should be updated to ensure they provide prescribers and nurses administering medication with current guidance. <b>(Error! Reference source not found.)</b>	Accepted	<p>The Care UK in-possession (IP) Standard Operating Procedure will be fully implemented. This will ensure that all risk assessments reflect the risk relating to the patient or any drug concerns.</p> <p>The following actions will take place:</p> <ul style="list-style-type: none"> <li>• All staff to have read and signed the most up to date Care UK IP policy.</li> <li>• The National Care UK template is to be used for all IP medication risk assessments to ensure all medication IP risk assessments include risk relating to patient drug concerns. This is to be embedded in the reception template in place of the existing IP risk assessment tool.</li> <li>• The existing IP medication risk assessment is to be removed from the clinical tree to prevent confusion or use by clinicians.</li> <li>• Local IP quality audit to be designed and completed quarterly.</li> </ul>	Head of Healthcare	January 2018
5.12	Medicine queues should be managed to ensure consistent patient confidentiality, and prison staff should supervise all medication administration. <b>(Error! Reference source not found.)</b>	Partially Accepted	<p>Prisoners and staff have been reminded that they should not pass through the area whilst an individual is receiving their medication.</p> <p>Carefully consideration has been given whether it is necessary to supervise medication administration at all times. The inspection report notes that <i>"there is little evidence of prescribed drugs being misused"</i> and historically there have been very few incidents in the medicine queues. HMP Grendon already have measures in place to manage the risk, including restricting the number of men attending for medications at any one time, and identifying any individual who poses a specific risk. In light of the recommendation, HMP Grendon has considered what is a proportionate response and has concluded that it will strengthen supervision by having more regular patrols by identified staff in that area while medications are being distributed. This can be achieved within existing resources and is a proportionate response to the issue.</p>	Head of Operations	Completed  December 2017

5.13	Pharmacy advice and support should be routinely available to patients and specialist oversight of medicine management arrangements should be provided. <b>(Error! Reference source not found.)</b>	Accepted	Healthcare will provide medication reviews and support via GP consultations. The Head of Healthcare will review the pharmacy service to ensure there are no gaps in advice and support to prisoners.	Head of Healthcare	January 2018
5.14	Effective governance processes should be developed to monitor the quality and safety of dental services and all dental equipment should comply with infection prevention standards. Procedures should not compromise patient safety. <b>(Error! Reference source not found.)</b>	Accepted	<p>The following actions will take place:</p> <ul style="list-style-type: none"> <li>• Dental audit schedules and action planning to be further embedded into the Quality Assurance and Governance process. This will be monitored and reviewed at the monthly Quality Assurance Meeting.</li> <li>• Head of Healthcare will continue to pursue a formal agreement with Carillion and HMPPS for the maintenance, servicing and repair of dental fixed assets. Currently an asset capture is being undertaken with a view to assets being included within the contract; in the meantime arrangements are in place to ensure that all remedial work to dental equipment are actioned by Carillion.</li> <li>• There is an agreement by Carillion, and any dental contractor completing work on behalf of Carillion, that all reports are shared without delay with the dental provider and the Head of Healthcare to ensure risk and service delivery can be managed.</li> <li>• All episodes of equipment failure will be reported as adverse events via Datix to ensure risk assessments and any further actions required are completed. Datix incidents are monitored through quality assurance and performance meetings.</li> <li>• An overarching dental action plan is maintained addressing all dental risks and issues that is reviewed monthly by the dental provider and Head of Healthcare and recorded through the quality assurance meeting.</li> <li>• A dental asset register is produced and maintained that clearly states who owns, maintains, services and repairs dental equipment.</li> <li>• The dental asset register clearly states maintenance schedule dates due and the process for monitoring this is embedded within the quality assurance meeting and contract meetings.</li> <li>• A report is completed by any subcontractor who cannot attend the quality assurance meeting addressing all agenda items.</li> </ul>	Head of Healthcare / Carillion Estates Manager/ NMST	Ongoing
5.15	Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines. <b>(Error! Reference source not found.)</b>	Accepted	NHS England continues to work with partners across the criminal justice system to improve services for offenders with mental health difficulties. At times there is pressure on some categories of secure beds in certain parts of the country, which is why NHS England is currently undertaking a service review across all medium and low secure services to help ensure high quality care is available when needed. The review commenced in	Head of Healthcare / NHS England	Ongoing

			<p>2016 and is due for completion in 2017/18. The outcome of the review will lead to commissioning service developments.</p> <p>It is accepted that patients have waited excessive periods prior to transfer to secure mental health services following assessment and referral.</p> <p>Delays have been due to either patients not being accepted into the initial secure service referred to, access to secure personality disorder specialist services and a lack of bed availability in the accepting secure mental health service.</p> <p>Delays are monitored by the mental health team and through Health and Justice Indicators of Performance. Where transfer times are breached this is shared with commissioners to seek resolution. Interim care and intervention is provided by site mental health service and case and risk management shared between mental health services and HMPPS.</p> <p>It is recognised that pressure can exist at times within the pathways of care between prisons and secure services. NHS England is investing in additional case managers to improve movement through the system and drafting revised guidance to further improve the treatment of this group of prisoners with high levels of need.</p> <p>As part of work on prison reform, moving towards full co-commissioning of mental health services for Governors and NHS England, prison leaders will have much more say in defining the kind of services their prisoners need and how the available budget is used.</p> <p>Liaison and Diversion services have been developed in collaboration with other Government departments. Through the programme, clinicians assess and refer those who have mental health needs into treatment and support services, at the earliest opportunity, ideally at the first point of contact with the criminal justice system. Where appropriate, this may allow diversion away from charge or diversion away from custody.</p>		
	<b>Catering</b>				
5.16	Meals should not be served before 12 noon and 5pm during the week. <b>(Error! Reference source not found.</b> , repeated recommendation 2.93)	Accepted	<p>The meal times are Monday to Friday (lunch) 12 noon to 12.30pm and (dinner) 17.00pm to 17.30pm.</p> <p>Residents and staff have been reminded of the requirement to follow the published times and the residential Custodial Managers will be tasked to monitor compliance on their units.</p>	Head of Residence and Safety	Completed
	<b>Learning and skills and work activities</b>				

5.17	The self-assessment process should cover work and the NCS. <b>(Error! Reference source not found.)</b>	Accepted	The self-assessment process is being written for the new term and will include the services now being offered by National Career Services at HMP Grendon.	Head of Learning and Skills	December 2017
5.18	Work should be structured so it provides prisoners with the opportunity to acquire enhanced skills and knowledge and gain accredited qualifications. <b>(Error! Reference source not found.)</b>	Accepted	The Industries Department, (Farms and Gardens and Waste Management) have started to deliver Level 1 Horticulture qualifications. There are also plans in place for Waste Management to deliver the Waste Management Industry Training and Advisory Board qualification and for English and maths skills to be embedded into all industries work parties. The additional staff training needed to offer this full suite of courses will be completed by January 2018.	Head of Learning and Skills	January 2018
5.19	Staff should ensure all learners receive appropriate feedback to help them improve their written English and vocational competence. <b>(Error! Reference source not found.)</b>	Accepted	Milton Keynes College (MKC) will work with their staff to ensure that any gaps in their training are recognised and addressed. This will enable staff to monitor and manage learner feedback effectively and assist with improvement in chosen subjects. As above at 5.18, English and maths skills will be embedded into all industries work parties.	Milton Keynes College Education Manager	January 2018
5.20	Tutors should provide learners with challenging activities so they can attain their full potential and take responsibility for their own learning. Progress should be recognised and recorded. <b>(Error! Reference source not found.)</b>	Accepted	MKC will work with their staff to encourage challenging activities and ensure that individual learner plans are annotated to recognise and show progress and achievements. Whilst undertaking this MKC will also ensure that teachers are encouraging the men to take responsibility for their own learning through elements of self-study.	Milton Keynes College Education Manager	December 2017
5.21	All prisoners should receive guidance to help them make decisions about their next steps, including higher education study options. <b>(Error! Reference source not found.)</b>	Accepted	MKC is working with the prison to encourage men from all wings to be involved in the individual learning journey meetings. MKC, where appropriate, will sign post to further and higher education options. The prison will update and share all information regarding higher and further education and what options are available to residents at HMP Grendon.  MKC is now interviewing all men as they come into the prison. With the introduction of new staff both from the prison and MKC the flow of information is much stronger and referrals and signposting is far more effective. Approximately 70% of residents have been interviewed and the backlog will be completed by February 2018.	Milton Keynes College Education Manager	February 2018
	<b>Progression planning</b>				
5.22	Children should not be routinely rub-down searched. <b>(Error! Reference source not found.)</b>	Rejected	All prisons must adhere to policy procedures unless this has been agreed by Headquarters. As set out in PSI 67/2011, "Searching of the Person", all visitors to prisons may be required to be searched by trained members of staff as a condition of entry. This includes children.	HMPPS Security Group	



<b><i>Recommendations</i></b>	
Accepted	<b>19</b>
Accepted Subject to Resources /Partially Accepted	<b>1</b>
Rejected	<b>2</b>
<b>Total</b>	<b>22</b>