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ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP THAMESIDE

TIMETABLE	DATE	STATUS OF THIS RETURN
Full Unannounced inspection	2-3, 8-12 May 2017	
Report published	12 September 2017	
Action Plan Submitted	15 November 2017	Attached

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ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP THAMESIDE

POSITION AS AT: 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
	Main recommendations to the Director				
5.1	There should be effective management oversight of the use of force. Every incident should be comprehensively documented to demonstrate that it is used legitimately and proportionately. All planned interventions should be recorded and subject to management review. (S44)	Accepted	Use of Force is now overseen by the Deputy Director. A review of the Briefing sheet will take place to ensure that all incidents where force is used are logged. 10% of incidents where force is used will be monitored as part of the use of force meeting to ensure that its use is legitimate and proportionate. All Custodial Operations Managers (COM) have been instructed of the requirement that all planned interventions are to be recorded and to be subject to management review.	Deputy Director	November 2017
5.2	Management and oversight of diversity work should be prioritised at a senior level to ensure that the needs of all prisoners from minority groups are identified, assessed and addressed, and to understand any negative perceptions. Discrimination incident reports should be fully investigated, and there should be appropriate governance and assurance of the system. (S45)	Accepted	Diversity and equalities now overseen by the Deputy Director with Diversity and Equalities Action Team (DEAT) meetings held Bi-Monthly and chaired by the Deputy Director. The Terms of Reference have been reviewed to ensure correct membership and that agenda items assess and address the needs of all prisoners from minority groups and understand any negative perceptions. All Discrimination Incident Reporting Forms (DIRF) will be quality checked by the Deputy Director to ensure that they are fully investigated and to provide governance and assurance of the system. Each Assistant Director has been appointed as lead for a protective characteristic group and now conducts meetings with prisoner representatives where discussion takes place regarding matters arising in relation to all DEAT issues or	Deputy Director	Completed

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			concerns. Guest speakers and/or others are invited to attend group meetings where appropriate. Action plans are reviewed and updates provided at DEAT meetings.		
5.3	Prisoners should have prompt access to health services and prescribed medications. Staffing in the health care centre should be adequate to meet prisoner need. (S46)	Accepted	<p>Issues have been identified around Custodial Management System (CMS) software use and responding, New Red/Amber/Green response timeframes being proposed in line with staffing on shift to be communicated to patients as follows;</p> <p>Green = response within 24 Hours. Amber = response within 48 hours. Red = Response within 96 hours.</p> <p>Patients to be advised that CMS system is not for urgent matters but routine requests only. Urgent matters to be directed to wing staff for alternative action. A Walk in Service will be introduced on House Block 1 allowing patients to drop into a clinic either with appointment or when unwell.</p> <p>Additional CMS terminals have been requested from Serco as there are currently insufficient numbers. Cabling and costing arrangements in place. An Advanced Nurse Practitioner has been introduced to support GP and Triage clinic nurses with management of minor ailments and improved use of telephone triage. GPs to be given protected time as part of session to conduct telephone triage.</p> <p>The current staffing model is being revised in view of the changing population within the prison. A review of current provision arrangements including GP cover is currently in progress. A training needs analysis is to be completed and appropriate funding arrangements for nurse development training is to be established.</p>	Healthcare Manager - Oxleas	August 2018
5.4	The range, quality and accreditation of prison work should be substantially increased to improve prisoners' employment prospects on their release. (S47)	Partially Accepted	HM Prison & Probation Service (HMPPS), through ONE3ONE Solutions centrally, will continue to work with public and privately managed prisons to support the aim of offenders working, learning and reforming, which includes replicating initiatives that provide real employment opportunities for offenders on release. This also includes working with local and national businesses. HMPPS has seen a number of successes in this respect and ONE3ONE Solutions will continue to seek	Assistant Director Offender Outcomes	April 2018

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			<p>to identify appropriate opportunities to bring new work from this engagement.</p> <p>Education provisions are contracted via HMPPS directly to Novus MTC and not via the prison Director. 75% of the prison population is designed to be remand prisoners and consequently the prison was not designed to have Industrial work as such. The average length of detention is 36 days which means that post-induction most prisoners are getting ready to be released. A full review of current activity provision, including Education and vocational training, will be introduced within the confines of the 75% Remand to 25% convicted population. The new delivery plan for education has been signed off by all partners (Thameside Serco, HMPPS and Novus) and this has been designed to improve prisoners' employment prospects.</p>		
	Recommendations to HMPPS				
5.5	Senior prison managers should have sufficient detailed information about the prison's contract with the education provider to modify the education and training provision to enable prisoners successful resettlement. (3.11)	Accepted	HMP Thameside will work with Novus and regularly review the education curriculum in line with the prisoner population and in line with the comments in 5.4 of the report. The new education contract for HMP Thameside has recently been signed off in consultation with prison management and will continue to be reviewed in the quarterly curriculum reviews.	Assistant Director Offender Outcomes	April 2018
5.6	All relevant prisoners should have an OASys assessment and sentence plan completed promptly. (4.9)	Accepted	HMPPS' policy is that Initial Start of Custody Assessments should be completed within agreed timescales by local establishments that are allocated those resources. HMPPS continues to review the OASys backlog and continues implementing a prioritisation criteria to support establishments to ensure the highest priority cases are completed in full, with a reduced assessment for lower risk cases, ensuring all cases have some form of risk assessment and sentence plan. Alongside the prioritisation policy, the Agency allocated additional resources to enable staff to make progress on completing the backlog of assessments.	Assistant Director Offender Outcomes	January 2018

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			<p>There has been a review of Offender Management in custody (OMiC) and this addresses the issues which prisons currently face around completing OASys reports. The new model will move the resource for OASys report completion into the training/resettlement estate and away from local/reception prisons where there is more time for engagement with the offender and for the plan to be produced.</p> <p>Roll out of the new Offender Management (OM) model has commenced within the 10 pathfinder sites and HMP Berwyn. HMPPS are currently working through the roll out schedule into the wider estate, but the new OM model will be in place in all Closed prisons by March 2019.</p> <p>HMP Thameside is developing a system in which outstanding OASys assessments are chased with Probation at the beginning of the month and escalated to a Senior Prison Officer (SPO) if no response is received. Catch 22 complete OASys assessments on low and medium risk prisoners.</p>		
	Recommendation to Prisoner Escort and Custody Services				
5.7	Escort vehicles should be clean, and prisoners should be transferred to the prison shortly after their court appearance. (1.4)	Rejected	<p>The escort contractor have a cleaning programme to ensure that the vehicles are clean. The vehicles are checked prior to and following every use by their vehicle staff. Where a vehicle is not deemed to reach the required standard, the vehicle staff will raise this as an issue with their managers. Any graffiti which is offensive should be immediately removed, or the cell be put out of general use until remedied. There are other independent checks completed by the Lay Observers and the Prison Escort Contract Services (PECS) Contract Delivery Managers (CDMs). Neither PECS nor the escort contractor has received any complaints regarding vehicle cleanliness or graffiti during the last 12 months.</p> <p>The objective of minimising the time prisoners spend waiting in court cells is reflected in the PECS contract, with the contractors fully aware of their obligations to escort prisoners from court at the earliest opportunity. The current contract established the use of escort vehicles with a separation</p>	Prisoner Escort Contract Services (PECS) at Headquarters	

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			<p>capability, which allows different types of prisoners (male/female, adult/young people) to be carried on the same vehicle. The change will result in more efficient scheduling, with a reduction in prisoner waiting times in addition to significant savings to the Service. However, reducing waiting time is also dependent upon the assistance of other stakeholders, notably HM Courts & Tribunals Service and also on the times that the prisoners' cases have been dealt with by the courts.</p> <p>Neither PECS nor the contractor have received any complaints regarding prisoners not being transferred promptly to HMP Thameside following their court appearance during the last 12 months.</p> <p>PECS continue to monitor all aspects of the contractors' performance and on occasions where it fails to meet the agreed levels will be raised with the contractor for improvement.</p>		
	Recommendations To the director				
	Early days in custody				
5.8	The reception area should be more welcoming, and new arrivals should be given a range of information. (1.10)	Accepted	Prisoner information booklets are currently available for prisoners. The materials currently provided will be reviewed and suitability assessed. There is a painting programme in place for the Reception area and the reception is well maintained, HMP Thameside believes the issue was the toilets.	Assistant Director Early Days in Custody	Completed
5.9	Telephone numbers for new arrivals should be added to the system without delay. (1.11)	Accepted	Newly arrived prisoners' telephone numbers are added to the system without delay. Phone number approvals for prisoners, subject to Public Protection purposes, have their numbers approved within the Prison Service Instruction (PSI) guidelines. All numbers are approved or rejected within 24 hours except at weekends where it is a 48 hour lead time.	Assistant Director Early Days in Custody	Completed
5.10	New arrivals should have a thorough first night interview that focuses on risk and vulnerability, and takes place	Accepted	All new arrivals currently have first night interviews with Early Days in Custody (EDC) staff. A private room has been identified for the interviews to be held. Cell clearance and cell acceptance procedures will be reviewed on the EDC.	Assistant Director Early Days in Custody	Completed

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	in private; they should then be located in clean cells in a good state of repair. (1.12)		<p>The First Night interviews have already been reviewed and implemented. First Night observations are also initiated for prisoners who meet the criteria. Follow up reviews are held for these prisoners the next morning.</p> <p>A painting programme is in place for the Early Days Centre and cells are maintained by the on-wing peer support group. There are over 450 new Receptions per month on the EDC and the cells require continuous repair and maintenance.</p>		
	Self-harm and suicide				
5.11	Assessment, care in custody and teamwork (ACCT) documentation should demonstrate consistent care for prisoners at risk of self-harm. Support arrangements should include good quality care planning and multidisciplinary reviews. (1.25)	Accepted	Suicide and Self-Harm (SASH) training is currently being rolled out for all staff. Quality control checks to be conducted by Senior Management Team (SMT), managers, and the Safer Custody team for open and closed ACCT documents.	Assistant Director Early Days in Custody	March 2018
5.12	The prison should investigate and take action to address prisoners' negative response in our survey about access to Listeners. (1.26)	Accepted	<p>The Listener Scheme will be promoted amongst the prisoner group and awareness sessions provided to staff. Weekly Listener meetings are in place each week and email access is being implemented on the Custodial Management System to enable prisoners to email the Listeners direct requesting support. The Safer Custody Team will monitor this system and this will also be included within the awareness sessions.</p> <p>The Daily Listener wing walks are now taking place across the establishment to pick up any issues regarding call outs.</p>	Assistant Director Early Days in Custody	December 2017
	Security				
5.13	Prisoners should only be strip or squat searched following a written, individual risk assessment. Paperwork authorising such searches should be completed in full. (1.36)	Accepted	As set out in Prison Service Instruction 07/2016 (PSI), "Searching of the Person", there are circumstances in which prisoners are required to be full-searched as a matter of routine and this includes full-searching of prisoners on initial entry to prisons. All prisons must comply with the PSI's minimum requirements.	Assistant Director Security & Operations	December 2017

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			<p>Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. 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>The paperwork for authorising a squat search was previously given on a photocopied F78 form which meant it was not risk assessed correctly. HMP Thameside will now remind all staff that any full-searching has to be authorised and cannot be conducted on every prisoner as a matter of course. An instruction will be issued to remind staff to complete the correct documentation for the appropriate reasons.</p>		
5.14	Periods of segregation, searching and monitoring of those suspected of secreting illicit items should be implemented for the shortest possible time in individual cases. (1.37)	Accepted	<p>An instruction has been sent highlighting that with immediate effect, the current format of the 72 hours protocol for prisoners suspected of hiding contraband within their bodily cavities is to be withdrawn.</p> <p>If a prisoner is suspected of concealing an unauthorised item and does not co-operate, they will be placed in the Care and Separation Unit (CSU) on Good Order or Discipline (GOOD) measures and will subsequently be subject to the GOOD policy.</p> <p>The GOOD paperwork must determine why the prisoner is in the CSU and the conditions they must comply with. In essence the prisoner will still be subject to similar searching procedures as the old protocol, but the exact expectations will be documented on the GOOD paperwork by the Duty Director. They must be in the CSU for the shortest period of time but balanced with the Good Order and Safety of the prisoners and staff.</p>	Deputy Director, and Assistant Director Security & Operations	Completed
5.15	Drug testing should be conducted on every day of the week to reduce the programme's predictability. (1.38)	Accepted	Drug testing will be conducted in such a way as to avoid predictability. This could mean not doing it every day, although it will be over as many days as possible.	Assistant Director Security & Operations	Completed
	Discipline				

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5.16	Adjudication hearings should be properly prepared. Reporting officers should produce good quality paperwork with the appropriate charges, and attend all hearings. Telephone interpreting should be used for prisoners who cannot understand English. (1.43)	Accepted	Adjudication Quality Monitoring sheets to be amended to provide 2 levels of assurance, the areas of Custodial Operations Manager (COM) and the Adjudications Liaison Officer (ALO). There will be 10% monitored via the Adjudication Tariff meeting quarterly for quality assurance. There will also be 10% quality check over a weekly period to assess for quality. Attendance of reporting officers to be monitored as part of tariff meetings and Adjudicators to be reminded of the need for the reporting officer and to adjourn when appropriate. ALO's to be reminded of the Big Word (translation & telephone Interpreting service), how to access the service, and usage will be monitored as part of the tariff meetings.	Deputy Director	Completed
5.17	Subject to risk assessment, segregated prisoners should be able to collect their meals from the servery, exercise together and have access to suitable regime activities. (1.53)	Accepted	As part of their journey throughout the segregation process, the restricted regime will be adapted to include the opportunity to exercise with another individual and collect their meal from the servery. These privileges are subject to their time within the Care and Separation Unit and their behaviour will act as an incentive to conform to the normal regime and as an aid to reintegration into the mainstream population. Discussions with the education provider will also take place to provide suitable in-cell activities to those placed within the Care and Separation Unit.	Deputy Director	January 2018
Substance misuse					
5.18	The drug strategy committee should be relaunched with attendance required from the managers of all relevant departments. (1.61)	Accepted	Terms of reference and an agenda has been created in order to start a Drug strategy meeting.	Deputy Director	Completed
5.19	The Turning Point psychosocial team should have access to the SystmOne medical records database to aid the integration of drug and alcohol treatment provision. (1.62)	Partially Accepted	Serco do not have ownership of the SystemOne database and therefore the Turning Point team are to liaise with Oxleas (NHS provider) to gain access to the said database and this will be subject to NHS data protocols.	Assistant Director Offender Outcomes	December 2017
Residential units					

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5.20	Remand prisoners should not share cells with convicted prisoners, and young adults should not share with adult prisoners. (2.7)	Rejected	<p>The occupancy of prison cells is determined by establishments and certified by Prison Group Directors in accordance with PSI 17/2012 which provides clear guidelines for determining cell capacities. Cells will only be shared where a Prison Group Director has assessed them to be of adequate size and condition for doing so. All accommodation is compliant with the certified cell certificate.</p> <p>Throughout the 14 wings of HMP Thameside, the prison wings have always reflected the outside world where persons are not segregated. This has been a successful model, more so when considering that the prison manages a huge volume of gang affiliations (100+ in the London area) and this is only successful due to integration</p>	N/A	N/A
5.21	Cell call bells throughout the prison should be answered within five minutes. (2.8)	Partially Accepted	<p>In accordance with Prison Service Instruction (PSI) 75/2011 Residential Services, prisoners are able to summon assistance from within their living accommodation. Residential staff must respond promptly to calls for assistance. There is no specific time limit set out in this policy for responding to cell bells.</p> <p>At HMP Thameside day-time cell bells are answered within 5 minutes. Cell bells are answered during day time periods by the HB 1 bubble staff, and by Control Room staff during the night. Local policy is currently being written with regards to this process and management checks will be included to check timeliness of responses.</p>	Assistant Director Residential 1 and Assistant Director Residential 2	January 2018
5.22	Applications should be responded to in full and subject to quality assurance; communications sent through the custodial management system should be in a range of languages. (2.9)	Partially Accepted	<p><u>Quality Assurance</u> - Accepted HMP Thameside accept that applications should be responded to in full, and subject to quality assurance. The prison will work with the various departments and partner agencies to agree a process for quality assurance checks on responses to prisoner applications.</p> <p><u>Range of Languages</u> - Rejected Custodial Management System (CMS) is a local IT solution which has the functionality to allow prisoners to send applications (messages, requests, and queries) to a selection of departments within the establishment. The majority of applications received from prisoners are in English or 'txt' speak and staff can respond accordingly to the prisoner(s) on general matters. Where a prisoner has sent an application in a</p>	Assistant Director Governance & Services	March 2018

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			language other than English or txt speak, the department receiving this message may use Google translate or arrange for a translator to assist. Translators are available on-site or via telephone if necessary. HMP Thameside are satisfied that a working solution to manage and respond to applications received in languages other than English is in place. Whilst the prison have to consider the option to send communications on CMS in a range of languages, it is not currently a viable solution as it cannot be supported by the current IT infrastructure nor the staff or partner agencies.		
5.23	Prisoners should be able to keep or store the property that arrives with them. (2.10)	Partially Accepted	<p>All property in the possession of incoming prisoners, or forwarded on later from a previous location, must be searched and either returned to the prisoner to retain in possession or else securely stored in accordance with national policy instructions. Prisoners may retain 'in possession' authorised property appropriate to their privilege level under the local operating IEP scheme subject to the limitations of the prison's facility list and volumetric control. The storage of prisoners' excess property, either locally or centrally, is in principle an exceptional or temporary measure. Prisoners are encouraged to send excess items out, or have them disposed of, at the earliest opportunity.</p> <p>Due to the high volume of prisoners coming through HMP Thameside, this is subject to an 'items-in-use' list which has been risk assessed to maintain the safety of prisoners, staff, and the integrity of prison security.</p>	Assistant Director Residential 1, Assistant Director Residential 2, and Assistant Director Early Days in Custody	January 2018
	Staff-prisoner relationships				
5.24	Staff should maintain professional boundaries with prisoners, and encourage and promote positive prisoner behaviour. (2.14)	Accepted	All Prison Custody Officers (PCO) are trained in professional boundaries and how to promote positive behaviour in the initial training course. Further enhancement of this will be undertaken by all staff completing the Five Minute Intervention (FMI) and new Offender Management training being piloted.	Assistant Director Residential 1, Assistant Director Residential 2	June 2018
5.25	The personal officer scheme should be applied consistently with regular interaction between personal officers and prisoners that should be	Accepted	The Personal Officer Scheme is now in place and monitored by residential Custodial Managers on a regular basis. The new core day, when implemented, will support this further as will the implementation of the new Key Workers for the offender management model being phased in by HMPPS.	Assistant Director Residential 1, Assistant Director	June 2018

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	recorded in prisoners' electronic case notes. (2.15)		<p>A reviewed core day is to be implemented to allow Prison Custodial Officer's time to make quality entries for the prisoners who they have Personal officer responsibility for subject to the 75% to 25% remand to convicted split and the new Offender Management model being introduced by HMPPS.</p> <p>Custodial Managers are carrying out regular checks of PNOMIS (electronic database) to ensure that staff are recording regular personal officer checks.</p>	Residential 2, and Assistant Director Early Days in Custody	
5.26	There should be prompt action to deal with issues arising from the prisoner consultative committee. (2.16)	Accepted	A revised action planner will be created to log all issues arising from the prisoner consultative committee meetings and all issues will have an owner and completion date. This will be monitored as part of the weekly consultative meetings and if required escalated to the Performance Improvement Plan.	Deputy Director	November 2017
	Complaints				
5.27	Responses to prisoner complaints should address the issues raised, demonstrate sufficient enquiry and be written in a polite and professional way. There should be regular quality assurance of all complaints, including confidential access complaints. (2.33)	Partially Accepted	<p>Current policy guidance contained in PSI 02/2012 mandates that complaint responses must address the issues raised whilst ensuring they are polite, legible, and based on accurate and up-to-date information. Monitoring data must be collected locally and used to drive performance.</p> <p>HMP Thameside will review the current quality assurance (QA) process for Complaints and Correspondence, where 10% checks are currently completed, and implement a QA check list to be completed as part of this process. Respondents will then be sent copy of completed check list advising them of any improvement and good practise. Common themes will be communicated to all staff who respond to Complaints & Correspondence with guidelines on points to note and consider to ensure responses address the issues raised, demonstrate sufficient enquiry, and be written in a polite and professional way.</p> <p><u>Confidential Access Complaints</u> - Rejected Confidential access complaints are sent to the Directors Personal Assistant and only the Director will respond to these. They are not available to any other member of staff for quality assurance purposes.</p>	Assistant Director Governance & Services	March 2018
	Legal rights				

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5.28	Eligible prisoners should be assisted and encouraged to exercise their right to vote. (2.35)	Accepted	<p>Prison Service Order 4650 covers the procedure for ensuring that eligible prisoners are able to vote. HMPPS is required to provide reasonable assistance as is practicable to enable prisoners who have expressed a desire to vote to exercise their right.</p> <p>All relevant literature on the right to vote is made available on request, prisoners are informed through CMS of the process.</p>	Assistant Director Residential 1, Assistant Director Residential 2, and Assistant Director Early Days in Custody	Completed
Health services					
5.29	There should be a separate health complaints process that is confidential and well advertised, and all responses should be prompt and address the issues raised. (2.45)	Accepted	Complaints/Application boxes have been purchased and are available. Sites for the boxes have been identified and will be located in strategic points around the prison. Labels have also been made. Oxleas NHS Foundation Trust complaints procedure is in place including a complaints form. Once the boxes are installed, a Notice to Prisoner will be sent out detailing the new procedure. Complaints will be monitored as part of the Patient Experience group and Quality Board.	Healthcare Manager Oxleas	December 2017
5.30	There should be effective monitoring to ensure that all emergency resuscitation equipment, including emergency medication, is in good order. (2.46)	Accepted	<p>The Review Procedure for monitoring and recording of treatment room fridge temperatures and emergency equipment including accountability measures with regular and auditable senior manager accountability measures is now in place. Audits have been undertaken by Modern Matron and Practice Development Nurse (PDN) with plans in place for continued monitoring. Improvement areas noted including weekly audit schedule and weekly checks are completed by manager/accountability measures.</p> <p>Standard Operating Procedures (SOPs) are being developed for use of emergency drugs by appropriately trained nurses.</p>	Healthcare Manager Oxleas	November 2017
5.31	Prisoners with lifelong health conditions should receive regular reviews from appropriately trained and supervised staff, which generate an evidence-based care plan for them. (2.54)	Accepted	Long Term Conditions (LTC) services team now in place. LTC registers built into Systmone using Quality and Outcomes Framework (QOF) indicators. PDN in post to support in identifying training needs of Primary care staff. On-going recruitment campaign also identifying appropriately trained staff. All nursing staff to receive training in care plan development and evaluation as part of their Induction/mandatory training arrangements.	Healthcare Manager Oxleas	April 2018

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5.32	The health care centre should have additional CMS terminals to process applications, and make use of the in-house X-ray facilities. (2.55)	Partially Accepted	<p>Additional CMS terminals have been requested from Serco as currently there are insufficient numbers. Two units have been provided and awaiting the arrival of others.</p> <p>Serco IT training takes place on the last Thursday of each month and includes a review of current trained staff and escalates access issues to Serco Senior Management Team. CMS System super user training arrangements to be put in place by Serco as currently not available.</p> <p>The X-ray unit was inspected in November 2017 and an issue remains with the IT element of the equipment which NHS England are aware of and are working to resolve. Once connected the X-ray machine will be used for Tuberculosis patients only as staff would require further training and any other X-rays performed require the appointment of a radiologist together with a qualified team for support care and treatment.</p>	Healthcare Manager Oxleas	August 2018
5.33	Pharmacy facilities should be adequate to meet the needs of the increased population and provide a suitable area for staff to work in. (2.64)	Rejected	Discussions held with HMPPS, Serco Management, and NHS England regarding current pharmacy arrangements with view to having a separate building for pharmacy as the current facility is not suitable and no other suitable accommodation is available at the prison in the current make up. This is subject to NHS funding the solution and funding is currently unavailable.	Healthcare Manager Oxleas	
5.34	Prescribing of medicines, and administration times, should optimise therapeutic effect. (2.65, repeated recommendation 2.78)	Partially Accepted.	<p>Medication SOP currently being reviewed by Clinical Effectiveness Group (CEG) and Medicines Management Group (MMG). Implementation of the policy and regular audits for compliance to be arranged. GPs to consider modified or slow release medication, increased use of in-possession medication, and regular medication reviews.</p> <p>Medication administration times review to be discussed with Serco management as part of the prison core day review highlighting unacceptability of current time-frames.</p>	Healthcare Manager Oxleas	April 2018
5.35	Custody staff should supervise all medicines administration to ensure patient confidentiality and prevent medications diversion, and prisoners	Partially Accepted	NHS Oxleas are responsible for the administration of medications not Serco. All In-Possession medications are subject to a risk assessment by NHS and security where required.	Healthcare Manager Oxleas	August 2018

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	should have secure in-cell storage for their medication. (2.66)		HMP Thameside support the implementation of in-cell medication storage and are currently exploring the Trakka system which is patient bio-metric based.		
5.36	The storage facilities for medicines should be monitored, and medicines should be stored within the correct temperature range. (2.67)	Accepted	The treatment room temperature is monitored daily. Accountability checks have been introduced including regular management checks and audits	Healthcare Manager Oxleas	Completed
5.37	The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.75)	Partially Accepted	A Transfer and Discharge Coordinator is now in-post. Improved links with community psychiatrists and services has improved timeframes. Escalation arrangements to commissioners is now in place, however pressure on community beds is affecting the meeting of this target.	Healthcare Manager Oxleas	August 2018
5.38	There should be a memorandum of understanding and information sharing agreement between agencies to outline appropriate joint service working on social care. (2.79)	Accepted	A Memorandum of Understanding for information sharing has been agreed between Oxleas NHS Foundation Trust and the Royal Borough of Greenwich allowing access to and improved Information sharing.	Healthcare Manager Oxleas	Completed
	Catering				
5.39	Meals should be served at the advertised time, and prisoners should be provided with an adequate breakfast on the day it is to be eaten. (2.83)	Partially Accepted	<p><u>Meal Times</u> - Accepted HMP Thameside accept that meals should be served at the advertised time and will instruct the Residential staff to adhere to these times, unless advised otherwise by management.</p> <p><u>Breakfast Packs</u> - Rejected Staff would issue breakfast on the day of consumption, however due to high levels of early court hearings it is not decent nor feasible to issue breakfast packs in the mornings. Costs would rise considerably to the tax payer due to a significant staff increase if this action were to be introduced and could impact on the contract requiring a Notice of Change (NOC) regards regime hours.</p> <p>Currently, staff continue to issue breakfast packs the evening before. This allows each prisoner the opportunity to have</p>	Assistant Director Governance & Services	Completed

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			breakfast prior to unlock. Each breakfast pack is sealed tight to ensure no food hygiene or safety issues arise as a result of being kept overnight in cell. Prisoners accept this and it has not been a matter for concern.		
	Purchases				
5.40	The prison shop list should include healthy food options. (2.87)	Accepted	<p>The prison shop list contains a reasonable range of goods to meet prisoner needs. Prisoners are consulted about the shop range as part of the regular prisoner consultation. Prisoners have the option to order from a range of goods and they also have the option to order via special purchase items on the approved Facilities List. The prison shop stock is regularly reviewed and where possible (limited shelf space) new items added.</p> <p>Healthy Food choices are currently available from the shop, however fresh fruit cannot be offered due to a lack of suitable storage facilities. Prisoners do however receive their 5 daily portions of fruit and vegetables via their meal choices from Catering. Additionally the prison shop provides a range of tinned and dried fruit and HMP Thameside will continue to review and consider new items where possible to be added to the shop stock.</p>	Assistant Director Governance & Services	Completed and ongoing
5.41	There should be immediate steps to eradicate vermin and pests from the prison shop storage and packing areas, and an effective ongoing pest control plan. (2.88)	Accepted	HMP Thameside have taken steps to seal certain stock items in large plastic containers to prevent vermin accessing these items. Prisoners working in this area work hand in hand with Shop Staff to ensure that housekeeping standards are maintained and that the environment is kept clean and tidy of any food and debris. In addition HMP Thameside are working with Estates Management and Pest Control to set traps and bait in order to reduce and eliminate this issue. HMP Thameside will continue to manage and monitor this issue and seek further expert advice on this matter.	Assistant Director Governance & Services	November 2017
	Time out of cell				
5.42	All prisoners should have access to evening association and one hour of outdoor exercise a day. (3.4)	Rejected	The national policy on prisoners' time in open air is set out in PSI 75/2011 Residential Services which states that prisoners are afforded a minimum of 30 minutes in the open air daily as defined in the service level agreement/contract. This provision is mandatory, subject to weather conditions together with the	Assistant Director Residential 1, Assistant Director	October 2017

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			<p>need to maintain good order and discipline. It is also open to Governors to provide more than the minimum requirement.</p> <p>As a contracted prison, and in the absence of Benchmarking, HMP Thameside are able apply discretion subject to the contract. The prison is locked down in the evening therefore evening exercise is not currently an option. All prisoners should be able to access their rights for exercise during the unlocked period.</p>	Residential 2, and Assistant Director Early Days in Custody	
	Learning and skills and work activities		HMP Thameside is a privately managed prison but education is provided under the Offenders Learning and Skills Service (OLASS) arrangements.		
5.43	The prison should develop robust arrangements to evaluate the quality of training and assessment in prison workshops. (3.12)	Accepted	<p>HMP Thameside do not have prison workshops, only classroom based training or vocational training. However in areas of prisoner employment, individual learning plans will be introduced to record quality of training assessment in addition to the embedded learning in each area.</p> <p>Monitoring of the quality will be via education records and Quality Improvement Group meetings and joint observations of delivery between Serco Thameside and Novus management.</p>	Assistant Director Offender Outcomes	March 2018
5.44	The range of work and training activities for prisoners should better reflect job opportunities in the community. All prisoners in employment should be fully occupied and appropriately challenged by their work. (3.17)	Accepted	A full review of current provision to be undertaken and amended using the Local Labour Market Intelligence data to inform future delivery in conjunction with the Resettlement Officer and local employers.	Assistant Director Offender Outcomes	March 2018
5.45	The prison should work with Novus to provide sufficient courses in English and mathematics, and better promote the importance of qualifications in these subjects to prisoners. (3.18)	Accepted	HMP Thameside will work with Novus to review classroom provision in curriculum reviews and also Quality Improvement Group forums. The curriculum review has identified significant increase in provision of English and Maths focusing on bite sized short courses that support employability and an increase in the number of courses that recognise skills that gain employment upon release.	Assistant Director Offender Outcomes	January 2018

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5.46	Instructors should better integrate English and mathematics into their sessions, and both instructors and tutors should set prisoners clear, meaningful and challenging targets, and record and monitor their progress. (3.25)	Accepted	Head of Education and Head of Learning Skills have completed this work in the recent curriculum review. There is now better integration of maths and English into these sessions	Assistant Director Offender Outcome	Completed
5.47	Managers should ensure that prisoners attend their allocated activities. (3.27)	Accepted	Systems to be introduced to ensure prisoners are challenged when not attending scheduled activities. This will be managed through daily returns on CMS and an introduction of a weekly meeting to encourage partnership working. Managers will be informed by the Purposeful Activity Clerk of prisoners who have not attended their respective areas.	Assistant Director Offender Outcome	January 2018
5.48	There should be effective planning to ensure that prisoners who start courses are able to complete them. (3.32)	Partially Accepted	Scheduling of prisoners to courses is based on the length of stay and status to ensure sufficient time to complete course(s). The current average length of detention at HMP Thameside is 36 days which means most prisoners are discharged well in advance of the course-end date(s).	Assistant Director Offender Outcome	Completed
	Physical education and healthy living				
5.49	All prisoners working in the gym should have access to a range of appropriate qualifications. (3.41)	Partially accepted	HMP Thameside only offer limited qualifications and currently deliver the First Aid course one day a week and plan to deliver level 1 & 2 coaching courses in the future subject to resources being agreed Novus also deliver the level 2 fitness course.	Assistant Director Offender Outcome	March 2018
	Strategic management of resettlement				
5.50	The prisoner needs analysis should incorporate offending behaviour data and inform a current action plan. (4.3)	Accepted	A sample size of OASys Reports will be analysed and appropriate areas for inclusion will be added to the Needs Analysis.	Assistant Director Offender Outcome	January 2018
	Offender management and planning				
5.51	The allocation and completion of in-cell workbooks should be adequately linked to offending	Partially Accepted	Subject to 75% to 25% remand to convicted population, there is a process in place whereby the OASys coordinator will	Assistant Director	Completed

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	behaviour need and sentence planning. (4.10)		review the sentence plans to make sure the in-cell packs are adequately linked to offending behaviour need.	Offender Outcome	
5.52	Home detention curfew decisions should be timely. (4.11)	Accepted	<p>The process for Home Detention Curfew (HDC) has been fully reviewed and improved to meet the needs of prisoner's expectations.</p> <p>HMP Thameside are currently planning to streamline the collation of reports within the Offender Management Unit (OMU) to assist with HDC timescales which will require work on the Catch 22 Service Level Agreement.</p>	Assistant Director Offender Outcomes	February 2018
5.53	Public protection risk management arrangements, incorporating interdepartmental risk management meetings and multi-agency public protection arrangements (MAPPA) frameworks should be sufficiently robust and have input from all relevant departments, including security. (4.14)	Accepted	Terms of Reference will be reviewed and attendance and contribution to the meeting will be promoted and monitored by the Assistant Director for Offender Outcomes who will escalate any concerns to the Director.	Assistant Director Offender Outcomes	January 2018
5.54	The offender management unit should be active in ensuring that external offender managers confirm a prisoner's MAPPA level at least six months before his release. (4.15)	Partially Accepted	<p>A process is in place at HMP Thameside to chase MAPPA levels (Multi-Agency Public Protection Arrangements) on a monthly basis taking into consideration the average length of detention at HMP Thameside is only 36 days.</p> <p>The new Offender Management in Custody (OMiC) model will retain the requirement for OMU's to confirm the MAPPA levels six months pre-release. However, once the case management part of the model is implemented (currently planned for roll-out from April 2018 and completion by March 2019) communication links with the National Probation Service should improve which will make it easier to obtain the information.</p>	Assistant Director Offender Outcomes	Completed
5.55	There should be more effective communication	Accepted	Discussions regarding the Observation, Categorisation, and Allocation function (OCA) and future plans for Catch 22 to	Assistant Director	April 2018

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	between the custody office and the OMU to ensure that prisoners are kept informed about progress on their transfers and other processes. (4.19)		undertake this area of work are underway. The proposed changes will improve communications between the two departments and will need to be included in the Service Level Agreement between Serco Thameside and Catch 22.	Offender Outcomes	
	Reintegration planning				
5.56	The number of prisoners released without accommodation should be significantly reduced. (4.24)	Accepted Subject to Resources	<p>This is a London-wide issue and challenge for the Community Rehabilitation Companies (CRC's). Discussions regarding the current accommodation provision are ongoing and will be subject to additional funding from MTC Novo for appropriate staff resources.</p> <p>HMPPS expect CRCs to work closely with local partners to help offenders find accommodation and assist them to maintain their accommodation as part of a package of support tailored to meet their individual needs. HMPPS Contracted Services are working closely with other Government departments to ensure this happens.</p> <p>HMPPS are also introducing enhanced measures of resettlement which include the recording of employment and accommodation at the start and end of the sentence, and at the end of the licence supervision period for all offenders. The aim is to include this in future publications, for both CRCs and the National Probation Service, once data collection has bedded in.</p> <p>HMPPS have also conducted an internal review of the probation system. Minister Sam Gyimah's statement to Parliament on 19 July 2017 set out the action taken as a result of the review and the further work being done. HMPPS have agreed changes to CRC contracts to reflect more accurately the fixed costs of delivering services to offenders and this will enable providers to focus on the delivery of core operational services. HMPPS recognises the concerns that have been identified about aspects of probation services, and further work is being done to consider improvements that can be made to deliver those services.</p>	Assistant Director Offender Outcomes	January 2019

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5.57	Seating in the visitors' area should be comfortable and less austere, the children's play area should be better equipped to occupy children, and prisoners should not have to wear identifying bibs during visits. (4.39)	Partially Accepted	<p>In accordance with national policy as set out in PSI 15/2011, the wearing of high visibility clothing on visits is an integral aspect of security management. It assists in identifying prisoners during and after visits sessions and helps to prevent them from escaping. Ultra-violet stamps are also in place for visitors but high visibility clothing ensures that prisoners are instantly identifiable in the visits hall for reasons of security, safeguarding, and public protection. The management of security at visits requires that arrangements are in place to identify and account for prisoners both before and after visits. Where appropriate, Directors/Governors have the discretion to require prisoners to wear distinctive clothing to aid staff supervising visits.</p> <p>The visits area is due for a refurbishment and will take into account the observations of the Inspectors. Bibs will remain as part of the prison's security measures.</p>	Assistant Director Security & Operations	April 2018
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Recommendations	
Accepted	36
Accepted Subject to Resources /Partially Accepted	17
Rejected	4
Total	57