



HM Prison &
Probation Service

Action Plan: HMP Holme House
A Response to the HMIP Inspection Report
Published 5 December 2017

INTRODUCTION

HM Inspectorate of Prisons (HMIP) is an independent inspectorate which provide scrutiny of the conditions for and treatment of prisoners. They report their findings for prisons and Young Offender Institutions across England and Wales to Ministry of Justice (MoJ) and HM Prisons and Probation Service (HMPPS). In response to the report HMPPS / MoJ are required to draft a robust and timely action plan to address the recommendations. The action plan confirms whether recommendations are agreed, partly agreed or not agreed (see categorisations below). Where a recommendation is agreed or partly agreed, the action plans provides specific steps and actions to address these. Actions are clear, measurable, achievable and relevant with the owner and timescale of each step clearly identified. Action plans are sent to HMIP and published on the HMPPS web based Prison Finder. Progress against the implementation and delivery of the action plans will also be monitored and reported on.

Term	Definition	Additional comment
Agreed	All of the recommendation is agreed with, can be achieved and is affordable.	The response should clearly explain how the recommendation will be achieved along with timescales. Actions should be as SMART (Specific, Measureable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress.
Partly Agreed	Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons.	The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There must be an explanation of why we cannot fully agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.
Not Agreed	The recommendation is not agreed and will not be implemented. This might be because of commissioning, policy, operational or affordability reasons.	The response must clearly state the reasons why we have chosen this option. There must be an explanation of why we cannot agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.



**ACTION PLAN: HMCIP REPORT
ESTABLISHMENT: HMP HOLME HOUSE**

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken / Planned	5. Responsible Owner	6. Target Date
	Main recommendations to the Governor				
5.1	Actions identified as a result of PPO death in custody reports should be fully implemented and kept under regular review to ensure effectiveness. ACCT documentation should be subject to robust quality assurance. The inadequacy of constant watch arrangements should be addressed immediately. (S40)	Agreed	<p>HMP Holme House is committed to fully implementing all agreed recommendations from Prisons and Probation Ombudsman (PPO) death in custody reports as reflected in relevant action plans. PPOs Action Plans are now placed on one document, which the Head of Safer Custody is responsible for and these are reviewed monthly at the Safer Prisons meeting to ensure actions are fully implemented and sustained.</p> <p>A new Safer Prisons Team has been set up and allocated to primary and secondary house blocks (HBs). Part of their remit is to conduct robust quality assurance checks and ensure that there is a consistent approach to all Assessment Care in Custody and Teamwork (ACCT) documentation completed. A single Case Manager was introduced on 17 October 2017, to improve the quality of ACCT documentation. New training in suicide and self-harm reduction is being rolled out to all new staff and delivered as refresher training to existing staff.</p> <p>The whole process for constant supervision is under review by the new Head of Safer Prisons (who joined mid-January 2018). An action plan will be drafted and actions addressed via the Safer Prisons meeting and monitored using a Combined Action Plan (CAP).</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed and ongoing</p> <p>Completed and ongoing</p> <p>May 2018</p>
5.2	Managers should ensure that rigorous and coordinated work is undertaken to tackle the availability of drugs in the prison, including a comprehensive drug strategy	Agreed	<p>A comprehensive drug and alcohol strategy has been written, agreed and published prison wide. Drug strategy meetings are being held monthly, with key stakeholders participating from each representative area to tackle the availability of drugs in the prison and to be accountable for the delivery of the strategy.</p> <p>Drug testing, including systematic suspicion testing, will be undertaken as part of the Drug Recovery Prison Project / drug and alcohol strategy.</p>	<p>Governor</p> <p>Governor</p>	<p>Completed and ongoing</p> <p>September 2018</p>



	and systematic suspicion testing. (Error! Reference source not found.)		The exact type and frequency is to be specified through the Drug Recovery Project governance process. HM Prison and Probation Service (HMPPS) are looking at a number of initiatives at HMP Holme House that support a new approach to mandatory drug testing. These initiatives will support the existing testing programme of collecting random and suspicion urine samples.	Executive Director Security, Order & Counter Terrorism	Ongoing
5.3	Prisoners should not be held in overcrowded conditions. They should be held in decent, hygienic and well maintained conditions, with sufficient furniture, properly screened toilets and good access to cleaning materials to keep their cells clean. (S42)	Partly Agreed	<p>This recommendation is partly agreed. Prison cell occupancy is determined by establishments and certified by the Prison Group Director in accordance with Prison Service Instruction (PSI) 17/2012, which provides clear guidelines for determining cell capacities. Cells will only be shared where a PGD has assessed them to be of adequate size and condition. All accommodation is compliant with the certified cell certificate. For the foreseeable future, and in common with other prisons, it will be necessary for HMP Holme House to operate with an operational capacity that involves a level of crowding above its Certified Normal Accommodation.</p> <p>All cells will be equipped to meet decent cell standards with sufficient furniture, kettles, curtains, television and properly screened toilets. An order has been placed for new furniture and a fitting process has been initiated.</p> <p>Cleaning schedules have been introduced and unit managers carry out a decency inspection as part of the bi-lateral process, which will be carried out at quarterly intervals. Management checks require Custodial Managers (CMs) to complete weekly decency checks. Supervising Officers also complete daily checks in addition to this a full decency check is completed by a member of staff carrying out the bi-lateral (Residence Managers). If staff identify a cell which is not decent, it is taken out of use until remedial work is completed.</p> <p>The Head of Residence (HoR) will review access to cleaning materials with a view to increasing the provision for wing cleaners, as well as providing for prisoners to clean their own cells.</p>	<p>Prison Group Director of Tees and Wear Reform Prisons / Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed and ongoing</p> <p>August 2018</p> <p>Completed and ongoing</p> <p>August 2018</p>
5.4	A predictable regime should be delivered and prisoners should be unlocked on time. Prisoners should be unlocked and able to attend appointments and engage in constructive activity during the working day. (S43)	Agreed	<p>HMP Holme House have a published regime for Category C prisoners. A working party led by the CM for activities (in conjunction with Residential CMs) is reviewing prisoner unlock and movement timings to ensure all prisoners can engage in constructive activities and attend appointments.</p> <p>HMP Holme House are also developing a new Regime Management Plan for introduction in December 2018.</p>	<p>Governor</p> <p>Governor</p>	<p>Completed and ongoing</p> <p>December 2018</p>



5.5	There should be regular staff contact with individual prisoners from arrival at the prison to: assess and record individual risks and needs; ensure that the prisoner is engaging with a developing plan, shared across all relevant departments; and encourage prisoners to use their sentence to reduce the risk of reoffending. (S44)	Agreed	<p>HMP Holme House is currently implementing the Offender Management in Custody (OMiC) model. Additional officers have been recruited to enable OMiC to be introduced. Under the OMiC project, all residential officers will be trained as key workers and deliver this service.</p> <p>As part of the Tees and Wear Group, HMP Holme House are currently involved in the project Alpha initiative, to review sentence planning in conjunction with OMiC and ensuring prisoners have a sentence plan that they are fully engaged with and understood. The project is due to be completed in June 2018.</p>	Governor	April 2018
	Courts, escort and transfers				
5.6	Prisoners should be able to alight from cellular vehicles immediately after arrival at HMP Holme House. (1.3)	Partly Agreed	<p>This recommendation is partly agreed as under exceptional circumstances such as escorts arriving during patrol states, incidents at the prison, there may be delays in immediate disembarkation from vehicles.</p> <p>Prison Escort Custody Services (PECS) escort contractors rely on effective prison reception procedures to ensure compliance and escort staff complying with the local security strategy of the prison. PECS escort contractor staff will ensure that prisoners disembark from vehicles as swiftly as possible without compromising the safety and security of prisoners and staff.</p> <p>The Reception Supervisor Officer records all arrival and alighting from transport timings. The record is checked by Operations CM on a weekly basis and by the Head of Function (HoF) Operations Manager on monthly basis.</p>	Governor / Executive Director of Prisons	Completed and ongoing
	Early Days in Custody				
5.7	Prisoners should be received into a welcoming reception area and have a private assessment of needs and vulnerabilities, before being moved promptly to adequately prepared first night	Agreed	<p>HMP Holme House's reception area has been refurbished, and includes facilities for private interview rooms. There are some snagging issues that will be resolved by March 2018.</p> <p>An internal improvement process mapping exercise was completed in November 2017 to ensure a safe and timely process through the reception process and location into first night accommodation. This is being followed up by an external rapid improvement workshop booked in for one week during April 2018, led by Tees, Esk and Wear Valley (TEWV) Trust. This is an extended review, which has been</p>	Governor	March 2018
				Governor	April 2018



	accommodation. They should have additional checks and appropriate support on their first night. (1.10)		<p>completed at HMP Durham and is now to be completed at HMP Holme House to ensure reception into prison is streamlined and appropriate.</p> <p>A new induction prisoner passport (record of immediate needs) has been introduced to improve the first night procedures. This includes peer mentor work and development of the First Night Officer role across the prison.</p>	Governor	Completed and ongoing
5.8	All prisoners should receive a prompt and full induction which provides information about all services and regime activities. (1.11)	Agreed	HMP Holme House will introduce a new induction programme, which will include an evaluation of current attainment levels and sentence plans, with the aim of providing an interesting and engaging introduction to the services and regime activities available. Inductions will take place with prisoners on the following working day after arrival in the engagement centre.	Governor	April 2018
	Bullying and violence reduction				
5.9	There should be a prompt and concerted response to the main drivers of violence. (1.19)	Agreed	<p>A new Violence Reduction policy is being finalised. This will ensure staff manage perpetrators in a more constructive manner, and look at the causes of violence. The new Violence Reduction policy will include CSIP -Challenge, Support and Intervention Plan national model.</p> <p>All incidents of violence are recorded, investigated and stored on a central log. This is checked by the Safer Custody team and checked by Head of Safer Prisons and Head of Residence.</p>	Governor Governor	Completed and ongoing Completed and ongoing
5.10	There should be effective support planning for own protection prisoners and for victims of violent and/or antisocial behaviour. Own protection prisoners should have a regime equivalent to other prisoners. (1.20)	Partly Agreed	<p>This recommendation is partly agreed as those with own protection (OP) status are limited to the number of activities they can undertake, as they are required to be completely separate when undertaking these activities.</p> <p>A full review into the management of OP prisoners will be commissioned to ensure there are strengthened procedures for approving an OP status; that routine reviews are carried out thereafter to ensure that the original reason for awarding OP status remains and that a suitable location is identified for those on OP status. Also, developing a regime available to prisoners who have been afforded OP status. This will allow greater access to activities. However, it will not be comparable to prisoners who are not of OP status.</p>	Governor	September 2018



			The Safer Custody team will ensure there are closer working arrangements for vulnerable prisoners, and that victims of violence and / or antisocial behaviour are supported.	Governor	May 2018
5.11	Regular consultations should be held with vulnerable prisoners to understand their concerns, and effective steps should be taken to address any abuse directed towards them. (1.21)	Agreed	<p>Monthly focus meetings are now held with vulnerable prisoners to understand their concerns and to take effective steps to address any abuse. Minutes are taken from the focus groups / consultation exercises, which is fed into the HoR monthly functional meeting to ensure actions are appropriately addressed.</p> <p>Guidance has been issued to staff and prisoners on Diversity and Respect and Zero Tolerance to violent behaviour / actions.</p>	Governor Governor	Completed Completed
Safeguarding					
5.12	All staff should be trained in safeguarding policy and procedures. (1.32)	Partly Agreed	<p>This recommendation is partly agreed. PSI 16 / 2015 - Adult Safeguarding in Prison, sets out that safeguarding prisoners from abuse and neglect is achieved through a range of policies and processes for identifying and meeting needs and preventing and reporting abuse. Staff are informed about these policies and processes through a range of means. It is not agreed that specific safeguarding training is necessary for all staff. It is also important to note that all staff in contact with prisoners are required to receive training on suicide and self-harm prevention.</p> <p>The Safeguarding Board have developed an electronic training package, which will be rolled out to the Safer Prison team. Information notices across the prison will be redesigned and re-issued to raise the profile of Safeguarding reporting procedures and contact details. These will be rotated to keep awareness levels raised.</p>	Governor	May 2018
5.13	The particular needs of and possible risks to young prisoners should be assessed and met. (1.33)	Partly Agreed	<p>This recommendation is partly agreed as it is not possible to commit to meeting each identified need of every prisoner, as the demand for provision will fluctuate significantly and is highly unlikely to be achievable within the available resource.</p> <p>The Senior Management Team will determine and promote a local policy for young adult prisoners. A working group will co-ordinate an assessment of the particular needs and possible risks to young prisoners at HMP Holme House, liaising with HMYOI Deerbolt for their input. The Residence 1 Operational Manager will hold bi-monthly focus groups and measures to address potential bullying will be included in the new Violence Reduction policy.</p>	Governor	June 2018



	Security				
5.14	Strip-searching and closed visits should only be applied when there is appropriate intelligence to justify their use. (1.42)	Partly Agreed	<p>This recommendation is partly agreed as Searching of the Person National Security Framework Function 3.1, (PSI 67/2011), requires that male prisoners outside of the high security estate are routinely given a full search on initial reception to prison, on reception on return from release on temporary licence (ROTL) or an outside working party (closed prisons only), on return from a non-prison escort, on transferring to another prison and all other discharges apart from on final discharge and discharge for ROTL. All prisons must comply with the PSI's minimum requirements. Local risk assessments are undertaken in other circumstances. HMP Home House's local security strategy complies with the PSI, for male prisoners outside of the high security estate to include full searching at discharge and following visits.</p> <p>Appropriate intelligence, as outlined in PSI15/2011- 'Management and Security at Visits' is used to underpin all decisions at HMP Holme House about the use and review of closed visits. Closed visits are reviewed regularly and only continued when the risk is still evident.</p>	Executive Director Security, Order and Counter Terrorism / Governor	Completed
	Incentives and Earned Privileges				
5.15	The incentives and earned privileges scheme should motivate good behaviour through individual and meaningful targets for prisoners. (1.45)	Agreed	<p>The Ministry of Justice (MoJ), Prison Deregulation, Operational Policy Team are developing an Incentives and Earned Privileges (IEP) policy making significant changes to the existing Prison Service Instruction (PSI) 30/2013, allowing frontline staff greater discretion. It re-frames IEP and encourages good behaviour through positive reinforcement, whilst maintaining a consistent framework across all prisons.</p> <p>In the interim, HMP Holme House's IEP local policy and facilities list will be reviewed, including prisoner consultation feedback, to ensure that it encourages good behaviour through individual and meaningful targets for prisoners.</p>	Director Prison Reform Policy, Ministry of Justice (MoJ) Governor	Ongoing June 2018
	Discipline				
5.16	Data on adjudications should be routinely analysed to identify emerging patterns, trends should be investigated and appropriate action taken to address them. (1.49)	Agreed	Data on adjudications has been reviewed. The outcomes will be discussed at a new bi-monthly adjudications meeting to ensure staff identify emerging trends and patterns, providing an opportunity to analyse data so that appropriate action can be taken. These actions will be monitored by SMT through the CAP.	Governor	Completed and ongoing
5.17	Managers should routinely analyse use of force data and	Agreed	A review of all use of force (UoF) data was conducted. The outcomes have been fed into a new bi-monthly UoF meeting to routinely review and analyse incidents to	Governor	Completed



	review incidents to ensure proportionality and accountability, monitor trends, identify good practice and learn lessons. (1.54)		ensure proportionality and accountability, identifying good practice and lessons learnt.		
5.18	The use of special accommodation should be justified on all occasions and it should only be used for the shortest possible period. (1.55)	Agreed	Duty Governors have been reminded to ensure use of special accommodation is only used to manage prisoners who cannot be located safely in normal accommodation, is appropriately justified, holding timely reviews to confirm it is used for the shortest time necessary. All special accommodation paperwork is reviewed at the UoF meeting to ensure full compliance. As soon as special accommodation is no longer necessary, the prisoner will be removed.	Governor	Completed
5.19	Decent living conditions should be provided for segregated prisoners, including accommodation free of graffiti, with a regime that offers purposeful activity and engagement. (1.59)	Agreed	A review of the Segregation unit regime will be carried out to ensure that purposeful activity and engagement is available to all prisoners. A peer audit of Segregation unit baselines has been carried out and non-compliances have been addressed. A new local segregation policy is being developed following a local review. This will develop a suitable regime that offers engagement and access to purposeful activity on an individual risk assessed basis. Managers are carrying out routine management checks to ensure decent living conditions	Governor Governor Governor Governor	April 2018 Completed and ongoing April 2018 Completed and ongoing
5.20	Individual care plans should be in place for all segregated prisoners, with a clear focus on identified risks and successful reintegration planning. (1.60)	Partly Agreed	This recommendation is partly agreed as PSO 1700 Segregation requires that a care plan, detailing what is being done to support mental wellbeing is completed for any prisoner segregated for more than 30 days. Individual care plans with a clear focus on identified risks and successful reintegration planning will be in place for prisoners at HMP Holme House segregated beyond 30 days. Residential staff will ensure they maintain contact and have overall responsibility of their prisoners. Planning will be monitored by the Residential Governor.	Governor	April 2018
	Residential units				
5.21	Staff should answer cell call bells promptly, and bells	Agreed	The Residential Manager will remind all staff and re-issue the notice setting out the expectation that cell bells are answered promptly. A notice to prisoners will also be re issued reminding them that cell bells should only be used in an emergency.	Governor	March 2018



	should only be used for emergencies. (2.8)		A system for appropriate management checks will be instigated by the Head of Residence.	Governor	May 2018
5.22	Prisoner applications should be tracked and timeliness of responses monitored. (repeated recommendation 2.9, 2.12)	Agreed	Prisoner Information Workers will continue to monitor applications. A new system of recording the movement of applications will be developed by staff to ensure that these are dealt with in time and at the appropriate level. Weekly management checks by Residential CMs will be introduced to monitor the application process. IT kiosk technology system will fully go live at HMP Holme House by December 2018. The electronic system will allow for better monitoring of prisoner applications. However, not all applications can be made via the kiosk, therefore the management check mentioned above will be carried out.	Governor Governor	April 2018 December 2018
Staff-prisoner relationships					
5.23	Managers should encourage and enable staff to engage regularly and positively with prisoners. (2.13)	Agreed	The Cultural Web (describes six elements that can be used to explore organisational culture) will take place at the prison. It enables participants to identify aspects of culture that are already rehabilitative and aspects that might be hindering this. Rehabilitative culture champions will be identified for key areas in the prison. Champions will be identified in the CM rank, who will encourage and monitor staff engagement in the use of Key Worker (KW) and Five Minute Intervention skills (FMI- an effective programme which prisoners engage with and challenges both staff and prisoners to interact in a different way). FMI training will be delivered to all residential officers along with KW training during 2018 /19. This will enable staff to engage more positively and regularly with prisoners, and will support meaningful staff and prisoner relationships.	Governor Governor	March 2018 Ongoing
Equality and Diversity					
5.24	National equality monitoring tool data should be recent, comprehensive and used systematically to help identify areas of potential discrimination. (2.17)	Agreed	A new lead Governor had been identified for Equalities in the Tees and Wear Group. HMP Holme House's Head of Safer Prisons will work in partnership with this lead to ensure the national data received by the prison is used comprehensively and systematically to identify areas of potential discrimination within the prison. This will be measured and monitored through the Safer Prisons monthly meeting. As part of the work in response to the Lammy review recommendations (an independent review of the treatment of, and outcomes for, Black, Asian and Minority Ethnic (BAME) individuals in the Criminal Justice System), data is being further scrutinised to have some of the new data fields such as UoF centrally in April 2018. Locally, with the support of Equalities, Interventions and Operational Practice Group (EIOPG), the prison will continue to analyse data to inform practice.	Governor Executive Director, Rehabilitation & Assurance	November 2018 April 2018 (onwards)



5.25	There should be an equality action plan, with measurable objectives and completion dates, which drives change and is monitored by managers and updated regularly. (2.18)	Agreed	An equality action plan will be produced which contains measurable objectives that drive change and target completion dates, to ensure the prison is meeting the equality needs of our men. The action plan will be monitored at the monthly Safer Prisons meeting. Head of Safer Prisons will be responsible for updating the CAP regularly.	Governor	May 2018
5.26	All discrimination incidents should be promptly and thoroughly investigated. Replies should summarise how the incident was investigated and give the reasons for the conclusions that are reached. Quality assurance arrangements should be robust. (2.29)	Agreed	All Discrimination Incident Reporting Forms (DIRFs) will be investigated promptly by two fully trained Safer Prisons Officers, with responses that summarise how the incident was investigated. Head of Safer Prisons will quality assure (QA) all DIRF investigations and Head of Residence will be responsible for signing these off. All completed DIRFs are presented at the monthly Safer Prisons meeting for a full and robust QA to be conducted to satisfy these have been investigated thoroughly and promptly, checking if appropriate reasons are given for conclusions reached. Any recommendations / actions will be recorded and monitored through the Safer Prisons meeting.	Governor Governor	March 2018 April 2018
5.27	The reasons for black and minority ethnic prisoners' poor perceptions of their treatment should be investigated and addressed. (2.27)	Agreed	With support from EIOPG and the Regional Psychology team a questionnaire will be developed. It will be issued to all BAME prisoners to identify perceptions of their treatment in custody. This will support the consultative work already in place at the BAME monthly group meeting (chaired by Head of Safer Prisons). The outcomes will be put into an action plan (included in the CAP) to ensure they are fully investigated and addressed. This will be monitored through the Safer Prisons monthly meeting.	Governor / Executive Director, Rehabilitation & Assurance	November 2018
5.28	The needs of prisoners with disabilities should be identified promptly and met by individual assessment, regular consultation, care planning and monitoring. If they are not in education or work because of their disability, they should be unlocked during the core day. (2.28)	Partly Agreed	This recommendation is partly agreed as HMP Holme House cannot commit to meeting all the needs of prisoners with disabilities. The prison cannot be certain at this time whether all these needs have been identified, and unlikely to be sufficiently resourced to meet them all. However, all prisoners are encouraged to disclose information about their disability on arrival in reception, which is recorded by the Safer Prisons team. Healthcare, if necessary will request a full assessment from Stockton Borough Council Social Care via the Safer Prisons team. Care plans formulated are monitored and logged by the Safer Prisons team. The log is distributed to all House Blocks / living areas to ensure up to date records are available. In conjunction with this list, CMs ensure that those not in work due to their	Governor / Head of Commissioning (North) Governor /Head of Commissioning (North)	Completed and ongoing Completed and ongoing



			disability are unlocked during the core day. Consultation with this group in relation to their specific needs will be carried out by the Health and Social Care Lead on a quarterly basis.		
	Complaints				
5.29	Complaint boxes should be emptied by non-uniformed staff to encourage more confidence in the complaints system. (2.36)	Not Agreed	This recommendation is not agreed as current national policy instruction PSI 02/2012- Prisoner Complaints states that complaint boxes must be emptied daily (excluding weekends and public holidays) by <i>a designated member of staff who is not a residential officer on the wing</i> . HMP Holme House's local policy is for an operational uniformed manager to collect complaints during the night, and is satisfied that this is appropriate.	Executive Director, Rehabilitation & Assurance	
	Health Services				
5.30	All clinical rooms should comply with infection control standards and offer a decent, safe and accessible environment for prisoners and staff. (2.49)	Agreed	NHS England set the Infection Prevention Control (IPC) cleaning and operational standards for clinical areas. Their achievement facilitated by AMEY (the facilities management provider) and overseen by the IPC Lead Nurse, reporting to the Head of Healthcare and subject to local governance. Each area will be subjected to an annual audit by NHS England (NHSE) as well as the provider for primary care nursing and medicines administration services. Cleaning schedules are now available in the in-patient unit.	Head of Commissioning (North) / Executive Director of Facilities Management	Completed and ongoing Completed and ongoing Completed and ongoing
5.31	Patient confidentiality should be consistently maintained. (2.50)	Agreed	All healthcare and partnership staff members have been reminded of the importance of keeping treatment and interview room doors closed when seeing patients, specifically on the outpatient corridor and reception areas. All patient call up lists inclusive of that used in the outpatient department have been anonymised (patient number) to protect patient confidentiality. All areas accessed by patients are inspected weekly by a member of the Nursing Senior Management Team to ensure they comply with data and data protection requirements.	Head of Commissioning (North) Governor	Completed Completed and ongoing
5.32	Prisoners should be able to complain about health services through a confidential, well-advertised system and	Agreed	The current health service complaints and compliments system has been reviewed locally. Measures will be implemented; by a modified complaint response template incorporating what HM Inspectorate of Prisons recognised as good practice, posters about the complaint pathway will be displayed in Patient Information Desks within all residential areas including inpatients unit and the segregation area and complaint	Head of Commissioning (North)	March 2018



	responses should address all issues. (2.51)		forms will be distributed daily on wings with private and confidential return envelopes for patients to deposit inside return boxes to instil patients with confidence.		
5.33	Patients should be able to access all primary care services within community equivalent waiting times and routine dental appointments within six weeks. (2.57)	Agreed	The Head of Health and Social Care Liaison is working with all providers to develop robust systems to lower the 'do not attend' rates, to ensure patients are able to have access to primary care services and improve clinical waiting lists in line with community waiting times. Routine dental appointments within six weeks will be achieved also by June 2018.	Head of Commissioning (North)	June 2018
5.34	Patients on the inpatient unit should have easy access to a full prison regime and an adequate range of therapeutic activities. (2.58)	Partly Agreed	<p>This recommendation is partly agreed as this recommendation will not be entirely appropriate for all.</p> <p>Prisoners located within the in-patients unit will be able to access workshops, education, the gymnasium and library, subject to an assessment of suitability i.e. medical or mental health conditions. A full evening regime is not currently available but further evening activities will be available as these are developed for the wider needs of the prison.</p> <p>Patients on the inpatient unit now have access to art and craft therapeutic activities and have been actively involved in the creation of a mural within the healthcare garden. A plan of further therapeutic activities is in place.</p>	<p>Head of Commissioning (North)</p> <p>Head of Commissioning (North)</p>	<p>March 2018</p> <p>Completed and ongoing</p>
5.35	Prisoners should receive in-possession medication following a consistent recorded risk assessment that is regularly reviewed. (2.66)	Agreed	A national in possession (IP) and non in possession (Non-IP) electronic Risk Assessment (RA) record template has been devised for SystemOne (healthcare database). The template will be rolled out to HMP Holme House.	Head of Commissioning (North)	April 2018
5.36	Medication should be administered at clinically appropriate times. (2.67)	Agreed	The Primary Care Nursing Service and Pharmacy are undertaking a prison wide risk assessment of all IP and Non IP medications to ensure eligible patients can have their medication dispensing in their possession. This process will also evaluate the timings and frequency of medication to ensure patients have access to their medication at optimum intervals and at appropriate times to maximise its effectiveness.	Head of Commissioning (North)	April 2018



5.37	Prison officers should consistently monitor and manage medication administration queues to reduce the opportunities for bullying and diversion and maintain patient confidentiality at the hatch. (2.68)	Agreed	Additional CCTV cameras will be installed at medication administration areas on HBs 1-4 and Body Worn Video Cameras will be worn by officers during medication administration.	Governor	April 2018
			The HoR is working with the HoHC and the Health and Social Care Lead to scope then develop alternative dispensing sites and delivery of improved supervision to reduce the risks of bullying and diversion.	Governor / Head of Commissioning (North)	April 2018
			All Residential CMs will lead within their individual areas to develop more robust monitoring and safer administration points.	Governor	April 2018
			In terms of maintaining patient confidentiality at the hatch, queues are managed by operational staff on the HB who will monitor and ensure that only one patient is at the hatch at any one time.	Governor	Completed and ongoing
5.38	Patients should be involved in prescribing decisions and be offered alternatives promptly where clinically indicated. (2.69)	Agreed	The HoHC is working closely with Non-Medical Nurse Prescribers, the Practice Manager, G4S Regional Operations Director and Commissioners to revise responsibilities to allow better clinical practice and respond to patients collaborative empowerment in prescribing decisions, offering appropriate alternatives where indicated.	Head of Commissioning (North)	April 2018
5.39	Prisoners should have timely access to an appropriate range of over-the-counter remedies for minor injuries and illnesses. (2.70)	Agreed	The introduction of wing based Primary Care Nursing Teams led by Nurse Prescribers will ensure patients throughout the core day have access to a timely and appropriate range of home remedies for minor injuries and illnesses.	Head of Commissioning (North) / Governor	May 2018
			The Senior Nursing Management team will work closely with HMP Holme House to ensure that Health Self-Care products (over the counter remedies), identified on the national DHL products list, are available to be bought directly from the canteen without any increase to potential harm.	Head of Commissioning (North) / Governor	May 2018
5.40	All patients with mental health needs should have timely interventions and clear care plans that have been agreed with them. (2.80)	Agreed	A caseload review has been undertaken to ensure that all patients with mental health needs are documented and have scheduled appointments as appropriate.	Head of Commissioning (North)	Completed
			A clear care plan will be drawn up and agreed with all patients, and will include timely interventions. A Clinical Audit of Care documentation will be undertaken during Quarter 1.	Head of Commissioning (North)	April 2018



5.41	Patients sectioned under the Mental Health Act should be transferred within the transfer timescale guidelines. (2.81)	Partly Agreed	<p>This recommendation is partly agreed as although every effort is made to expedite transfers and assess patients promptly, transfers are dependent on a number of factors such as the completion of appropriate assessments, administrative processes within the NHS and the availability of accommodation in mental health hospitals.</p> <p>NHS England has developed a plan to improve services for prisoners with mental health issues, and includes specific reference to timely transfer and remission of patients and information about how this will be implemented and sustained.</p> <p>The Prison Transfer and Remission Guidance published by the Department of Health in 2011 has not been agreed by NHSE. NHSE hopes to publish guidance in April 2018, with timescales that take into account clinical urgency and need.</p> <p>Locally, a clinical pathway will be reviewed to ensure clear processes are in place to assess patients transferred to secure mental health settings.</p>	<p>National Director of NHSE</p> <p>National Director of NHSE</p> <p>Head of Commissioning (North)</p>	<p>Ongoing</p> <p>April 2018</p> <p>April 2018</p>
Catering					
5.42	The evening meal should not be served before 5pm and breakfast packs should be served on the morning they are eaten. (2.88)	Partly Agreed	<p>This recommendation is partly agreed as the whole recommendation cannot be implemented due to operational reasons - the serving of breakfast packs the evening before is a well-established practice across the prison estate and one which contributes to a swifter start to the morning regime, including start time for work and other activities. The contents of the packs are suitable to be stored in the prisoners' cells overnight.</p> <p>Evening meals are now served at 5pm, following the new core day introduced in September 2017.</p>	Governor	Completed
Learning and skills and work activities					
5.43	The proportion of appropriately trained prison staff should be increased to support learners' development. (3.10)	Agreed	Suitable training opportunities will be identified and training for instructors facilitated to ensure there is a minimum of ten trained prison staff across all work areas to support learners' development.	Governor	June 2018
5.44	Managers should ensure good attendance and punctuality at sessions and, where sessions finish early, productive use	Agreed	HMP Holme House will introduce a schedule and operation that ensures that prisoner movement to and from activities is consistently on time and is normally carried out within 15 minutes. Effective use of session plans will ensure time is used appropriately and productively. This will be monitored through the Quarterly Improvement Group (QIG).	Governor	March 2018



	should be made of the remaining time. (3.11)				
5.45	Sufficient purposeful activity places should be provided to occupy prisoners who require full-time activity. (3.18)	Partly Agreed	<p>This recommendation is partly agreed as HMP Holme House cannot commit to occupy all prisoners with full-time activity due to resource constraints.</p> <p>With the re-role to a Category C prison, HMP Holme House has reviewed risk assessments to increase the number of prisoners within specific education classes and industrial workshops. More part-time activity work has been introduced, increasing the number of prisoners having access to the provision and additional industrial workshops have been opened.</p> <p>Further work will be carried out with Public Sector Prisons Industries and with North East England Chamber of Trade, subject to available resources, to increase workplace opportunities and full time activity within the prison.</p>	Governor Governor	Completed May 2018 and ongoing
5.46	The proportion of prisoners studying for qualifications while working should reflect assessed resettlement needs. (3.19)	Not Agreed	<p>This recommendation is not agreed. HMP Holme House cannot commit to always reflecting assessed resettlement needs for the proportion of prisoners studying for qualifications while working, due to resource constraints and inability to control prisoner motivation to study.</p> <p>However, all prisoners studying for qualifications while working will use current assessment data, complete further self-assessment(s) and be supported to review learning objectives with staff. A development plan including access to embedded or part time learning will then be initiated and progress monitored, via the QIG.</p>	Governor	May 2018
5.47	Tutors should plan activities well so that more learners attain at a high level and can apply their learning to wider contexts. (3.26)	Agreed	All activity sessions will be planned effectively to maximise use of learning time in class. Planning for learning documentation will be monitored through audits, learning walks, formal and informal observations and discussed at the QIG. Planning for learning will be contextualised to enable learners to apply their learning to wider contexts.	Governor	June 2018
5.48	Tutors should ensure that the recording of learners' progress is regular and accurate, and enables learners to understand the knowledge and skills that they have developed. (3.27)	Agreed	All learners will have individual learning plans containing Specific, Measurable, Achievable, Realistic and Time-bound targets and regular progress reviews. Learners will receive regular and constructive feedback to demonstrate progress and provide stretch and challenge. This will be monitored by the QIG.	Governor	August 2018



5.49	Learners should use up-to-date software in information technology lessons. (3.28)	Agreed	The use of digital technology will be developed to enhance prisoners' learning experience in information technology lessons and to ensure that learners' skills are developed in the use of new technology.	Governor	November 2018
5.50	Where practical, learners should complete their planned course and achieve their qualifications. (3.36)	Agreed	Learners allocated to courses will be given sufficient time to complete and achieve their learning aims. Novus (the education provider) and Activity Management Unit (AMU) will liaise with the prison to ensure relevant and appropriate allocation and sequencing based on learner needs and sentence length, in aid of supporting attrition rates and to keep prisoners motivated and engaged.	Governor	June 2018
5.51	The number of prisoners who use the library should be significantly increased. (3.40)	Agreed	The restricted regime is still being run and is reviewed weekly to decide what activities can be run the following week. HMP Holme House have introduced a new daytime library rota, which has led to increased attendance. Staffing issues have meant it has not been possible to operate full evening activities.	Governor	June 2018
			Evening library access at HMP Holme House will be increased from two to four sessions. All HBs will be able to access the library at least once a week and day time sessions will be used to support learning.	Governor	July 2018
			The target number of visits to the library per week will be set at a minimum of 300.	Governor	July 2018
	Physical education and healthy living				
5.52	Prisoners should routinely be able to undertake accredited courses and specialist sessions. (3.46)	Agreed	Physical Education (PE) delivery during the working week will be focused on delivering accredited courses or supporting other specialist activities and interventions. Additional accredited;- Personal Achievement Development skills, Family Interventions (family matters and family nurturing), First aid, Level 1 & 2 Gym instructor, Level 2 Circuit training, Level 2 Spinning courses, Level 3 in Personal training will be delivered by the PE department by May 2018. A quarterly timetable will be published in advance allowing prisoners to apply for such courses.	Governor	May 2018
	Strategic management of resettlement				
5.53	A new resettlement strategy based on the priorities of a training prison should be used to drive effective, planned and coordinated rehabilitation work throughout the prisoner's sentence. Implementation of	Agreed	Pre-release and resettlement strategies have been reviewed based on the priorities of a training prison to drive effective, planned and coordinated rehabilitation work throughout the prisoner's sentence.	Governor	Completed
			An action plan has been developed in consultation with key stakeholders from the Reducing Re-Offending Group (RRG). The action plan is being monitored through use of HMP Holme House's CAP and RRG meeting discussions. It will be adjusted to reflect relevant outcome data.	Governor	July 2018 and ongoing



	the strategy should be monitored and adjusted to reflect relevant outcome data. (4.6)		Resettlement needs will be analysed further at the 2018 curriculum review, to ensure rehabilitation work is co-ordinated and meets labour market requirements. This work is currently being supported by the Director of Rehabilitation for the Tees and Wear Group, to ensure resettlement opportunities for prisoners are relevant to the populations needs.	Governor	July 2018 and ongoing
	Offender management and planning				
5.54	The backlog of offender assessment system (OASys) assessments should be cleared and the work kept up to date (4.10 repeated recommendation 4.19)	Agreed	<p>A review of the current back log of offender assessment system assessments (OASys) and the resources required to complete will be undertaken. The recommendations from the review will shape plans for future delivery of OASys assessments and other Offender Management work.</p> <p>There has been a review of Offender Management (OM) in custody and this addresses the issues prisons currently face in completing OASys reports. The new model will transfer the resource for OASys report completion from local / reception prisons to the training / resettlement estate where there is more time for engagement with an offender and to devise the sentence plan. Roll out of the new OM model has commenced and all launch events to have taken place by the end of February 2018 and it is envisaged the new OM model will be in place in all closed prisons by September 2019.</p>	Governor Executive Director of Prisons	March 2018 September 2019
5.55	Public protection measures should be planned, carried out and monitored in a consistent and timely way, involving all departments with knowledge of individual prisoners and the risk factors associated with them. (4.13)	Agreed	Inter-Departmental Risk Management Terms of Reference will be reviewed to broaden the scope of information gathering and sharing with other departments within the establishment; increase the knowledge of individual prisoners; ensure robust risk factor assessments in place. In addition, a monitoring process will be developed to ensure the above is undertaken in a consistent and timely manner.	Governor	June 2018
5.56	Formal consultation arrangements should be developed and implemented for indeterminate sentenced prisoners. (4.16 repeated recommendation 4.34)	Agreed	Indeterminate sentenced prisoners' consultation will be implemented through forums, actions will be recorded and will be monitored through the Safer Prisons monthly meeting.	Governor	March 2018
	Reintegration planning				



5.57	The prison should make full use of the National Careers Service skills action plans to inform sentence plans. (4.24)	Not Agreed	This recommendation is not agreed as the National Careers Service contract with Public Sector Prisons expires in March 2018. However, HMP Holme House will ensure careers guidance forms a strong link to sentence plans, this will be monitored via the Reducing Re-Offending Group.	Governor	
5.58	All prisoners should have planned participation in a pre-release course. (4.25)	Not Agreed	This recommendation is not agreed, the role of HMP Holme House has changed to a long term Category C establishment. Therefore, the majority of prisoners will be transferred to an appropriate resettlement prison at a relevant point in their sentence, where they will be offered pre-release activity However, HMP Holme House's cohort of resettlement prisoners who will be directly released into the community will be provided with appropriate resettlement services.	Governor	September 2018
5.59	All prisoners should receive effective pre-release planning to ensure continuity of care, including medications, after release. (4.27)	Agreed	The healthcare provider will conduct a review by end of May 2018 to establish a pathway to identify remedial and developmental actions required which contribute to effective pre-release planning. Post review the provider will work with HMP Holme House to implement outcomes of the review and this will be monitored regularly. The Head of Reducing Re-Offending will monitor through the Pre-Release strategy pre-release planning including continuity of care and medications, after release.	Head of Commissioning (North) Governor	May 2018 and ongoing Completed and ongoing
5.60	There should be sufficient support for all prisoners who need help to maintain and rebuild relationships with their families. (4.41)	Not Agreed	This recommendation is not agreed as HMP Holme House cannot commit to provide sufficient support for all prisoners with this need, because the level of future needs cannot be known. However, the establishment is working in partnership with the family services providers to meet identified needs of prisoners to the fullest extent possible within funding constraints, including help developing relationships for prisoners who do not have family access. The establishment will develop a local family and significant other strategy which will assist prisoners to maintain and rebuild family relationships. The Children and Families pathway meetings are chaired by North Eastern Prison After Care Society (NEPACS-a charity supporting people affected by imprisonment) and attended by representatives from Local Authorities, and is responsible for agreeing and driving policy on behalf of the Reducing Re-offending Committee and the Governor. It will monitor both the quality and quantity of support available to prisoners and their families and identify actions requiring improvement, and this will be monitored via the CAP.	Governor Governor Governor	Completed and ongoing April 2018 Completed and ongoing
5.61	Visits should start at the publicised time. Prisoners should be able to receive visits	Partly Agreed	This recommendation is partly agreed as the desired outcome to start visits at the publicised time on occasions may not be fully achievable, due to unforeseen operational reasons (i.e. serious incident taking place).	Governor	



	from a prison visitors' scheme. (4.42)		<p>HMP Holme House have reviewed visiting times and published these in the new core day. Appropriate management checks are in place to ensure the times are adhered to, subject to unforeseen operational reasons.</p> <p>A review of the current official prison visitors scheme took place to take account of Annex B, PSI 16-2011- Providing Visits and Services to Visitors. Particular future emphasis on ensuring there are sufficient official prisons visits available. The prison has recruited additional prison visitors.</p>	Governor	<p>Completed and ongoing</p> <p>Completed and ongoing</p>
5.62	Interventions should be available to reduce the potential for violence across all levels of risk, by addressing behaviour in custody and in the community after release. (4.48)	Not Agreed	<p>This recommendation is not agreed. HMP Holme House cannot commit to provide interventions regardless of levels of risk, because resource constraints will require these to be targeted at higher risk individuals. The core principle applies to interventions provided after release by probation services providers.</p> <p>HMP Holme House will develop training for OMU staff in the assessment of risk and needs to aid the completion of OASys reports and assist in the identification of concerning / risk elevating behaviour.</p> <p>HMP Holme House will develop a strategy to prioritise OMU staff time to complete OMU tasks, such as completion of OASys reports, referrals for interventions etc.</p> <p>HMP Holme House will review the provision of interventions which address violence, including accredited interventions, in order to better meet prisoner needs.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>April 2018</p> <p>April 2018</p> <p>November 2018</p>

Recommendations	
Agreed	43
Partly Agreed	13
Not Agreed	6
Total	62

