



HM Prison &
Probation Service

Action Plan: HMP Leeds

Action Plan Submitted: 11 May 2018

A Response to the HMIP Inspection

Report Published 22 March 2018

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 Her Majesty's Prison 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 LEEDS

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	Reception and first night processes should ensure that prisoners' immediate vulnerabilities, needs and risks are assessed during a private interview with custodial staff, and that necessary support is then offered. All newly arriving prisoners should receive first night safety checks. (S45)	Agreed	<p>A temporary process will be put in place that allows prisoners to be interviewed in private during reception to ascertain individual needs, risk assess and offer necessary support. All arriving prisoners will receive first night safety checks.</p> <p>A review of HMP Leeds First Night Centre (FNC) procedures will take place and space for a private interview room will be sought.</p>	<p>Governor</p> <p>Governor</p>	<p>May 2018</p> <p>June 2018</p>
5.2	Governance arrangements should ensure the prison understands and responds appropriately to causes of violence, and that investigations and outcomes under the new violence management system are effective. (S46)	Agreed	<p>The regional Safer Custody team holds prisoner forums to establish the underlying causes of violent behaviour.</p> <p>HMP Leeds is piloting the new Violence Reduction model (now known as Challenge Support Intervention Plan -CSIP), to ensure intervention plans are outcome focused.</p> <p>Ten percent of CSIPs are scrutinised at the weekly Safety Intervention meeting.</p> <p>A local process to quality assure violence related investigations and outcomes will be put in place to ensure the system is more effective. Until the national CSIP roll out, Safer Custody Custodial Managers (CMs) will conduct full compliance checks of CSIPs.</p> <p>Key themes will be drawn from the qualitative data, discussed at the monthly strategic Safer Custody meeting and appropriate action taken. The Head of</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>Completed and ongoing</p> <p>Completed</p> <p>July 2018</p> <p>July 2018</p>

			<p>Safety will improve staff understanding of the CSIP model and will provide ongoing support, advice and guidance to staff.</p> <p>On a monthly basis the top ten prisoners are identified who present the highest levels of violence, self-harm and protesting behaviour. A robust case management approach is in place for these prisoners.</p>	Governor	December 2018
5.3	All use of force should be fully justified in the written records. The use of special accommodation in particular should be subject to rigorous governance to ensure that it is only used as a last resort and for the shortest possible time. (S47)	Agreed	<p>Two separate monthly meetings are held at HMP Leeds dedicated to the strategic management of Use of Force (UoF) where CCTV and paperwork for all use of force where batons were drawn are considered. Trends and hotspots over the reporting period are used to make strategic decisions.</p> <p>The special accommodation process has been reviewed and appropriate monitoring through Segregation Monitoring and Review Group strengthened, to ensure rigorous governance. The Head of Residence conducts assurance checks and prepares a lessons learned briefing on a monthly basis.</p> <p>Quality assurance checks of UoF documentation are undertaken to ensure whether UoF is fully justified and appropriate action taken.</p> <p>Quality assurance checks will be discussed at the monthly UoF scrutiny panel and appropriate action taken.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>May 2018</p>
5.4	Prisoners should be fully and purposefully occupied in work sessions and lessons, and attend on time. The range of activities should equip them with the job-related skills required locally and regionally. (S48)	Partly Agreed	<p>This recommendation is partly agreed as HMP Leeds does not have sufficient workplaces to offer fulltime work activity to all prisoners. The majority of prisoners work either a morning or afternoon session. In addition, not all prisoners will require allocation to activities. The age profile of prisoners at HMP Leeds means there will always be a proportion of retired prisoners who are not required to attend work or structured activities.</p> <p>However, the Offenders' Learning and Skills (OLASS) curriculum will be reviewed, incorporating the local labour market information, population analysis, assessed scale of needs data and learner feedback.</p> <p>Links with other relevant prisons will be improved to strengthen the full learner journey and sharing of good practice.</p> <p>The allocation process will be reviewed and improved. Activity movement processes will be reviewed in order to ensure that prisoners accessing all areas of Learning and Work arrive at their activity area in accordance with the</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>August 2018</p> <p>September 2018</p> <p>September 2018</p>

			<p>published core day timings. Fortnightly assurance checks will be conducted by Reducing Reoffending managers to ensure compliance.</p> <p>A workshop review will be conducted over a 12 month period, to deliver skills based training that is linked to key employment sectors (regionally) and increasing employer engagement links.</p>	Governor	September 2018
	Recommendation to HMPPS and the Governor				
5.5	<p>The national equality monitoring tool should be revised to produce data that are no more than a month old. In the meantime, potential areas of discrimination identified by the tool should be investigated. (2.37)</p>	Partly Agreed	<p>HM Prison and Probation Service (HMPPS) is currently reviewing the frequency as well as the content) of the Equalities Monitoring Tool. Whilst the principle of producing more timely data is agreed, HMPPS will need to take account of the operational practicalities of turning data around within one month, given the need to quality assure data provided by establishments.</p> <p>As part of the work in response to recommendations made in the Lammy review, 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 new data fields held centrally.</p> <p>Locally, with the support of Equalities, Interventions and Operational Practice Group (EIOPG), HMP Leeds will continue to analyse data to inform practice.</p> <p>Potential negative disproportionality cases are investigated and discussed quarterly as a standing agenda item at the equalities monthly meeting and investigated. Discrimination Incident Reporting Forms are checked on a monthly basis by the Safer Custody CM, and the process is overseen by the Deputy Governor.</p>	<p>Deputy Director Analytical Services</p> <p>Executive Director, Rehabilitation & Assurance</p> <p>Governor</p> <p>Governor</p>	<p>June 2018 onwards</p> <p>June 2018 onwards</p> <p>Completed</p>
	Recommendations to the Governor				
	Early days in custody				
5.6	<p>The induction programme should provide all prisoners with sufficient knowledge to access services and regime activities fully. (1.9)</p>	Agreed	<p>HMP Leeds induction programme will be reviewed by the Head of Residence and Safety along with Head of Reducing Reoffending (HoRR) .This will include a peer review with colleagues across the prison estate and input from prisoners who have been through the process. This will include the management and support of non-English speaking prisoners.</p> <p>A monthly observation schedule has been introduced and is conducted by Reducing Reoffending managers to ensure compliance and drive quality improvement.</p>	<p>Governor</p> <p>Governor</p>	<p>July 2018</p> <p>Completed</p>

5.7	Prisoners on the first night centre should be unlocked during the core day. There should be a published predictable regime for prisoners on the unit, including time in the fresh air each day. (1.10)	Partly Agreed	<p>This recommendation is partly agreed as prisoners are routinely moved from the FNC within 24 hours of reception to a main wing where they have access to a full regime. Currently there is no access or resources to facilitate having an exercise yard for the FNC. Building an area between D Wing and Education area will be considered in the future.</p> <p>A core day regime will be published which will stipulate that Vulnerable Prisoners' (VPs) located on the FNC for more than a 24 hour period will be offered time in open air, access to listeners and association facilities on the VP Unit (VPU -F wing).</p> <p>For the small exception of prisoners who remain slightly beyond 24 hours an individual regime plan is drawn up to ensure the prisoner receives a regime in the appropriate location and exercise is offered. This is monitored at the weekly operations managers meeting.</p>	Governor	June 2018
	Managing behaviour			Governor	Completed
5.8	The location and supervision of vulnerable prisoners should ensure that they are safe and free from bullying and other intimidation. (1.19)	Agreed	<p>HMP Leeds VPs are held separately from other prisoners. The E and F wing exercise yard will be split to provide a separate exercise area for VPs.</p> <p>All applications for VP status from mainstream located offenders are signed off by the Deputy Governor or Governor. The new criteria allows those convicted or on remand for a sexual offence to be allocated to the VPU without this step.</p> <p>Prisoners found to be bullying or intimidating other prisoners because of their status are reviewed through the case management model for violence, the CSIP.</p> <p>Appropriate assurance checks have been embedded as well as ongoing consultation in form of prisoner forums to satisfy staff prisoners are safe. Since rolling out the new criteria HMP Leeds has seen a reduction in violence and drug related usage along with prisoners reporting as feeling safer.</p>	Governor	May 2018
				Governor	Completed
				Governor	Completed
				Governor	Completed
5.9	The incentives and earned privileges scheme should be applied fairly to all prisoners. Those on the basic level should receive a structured, purposeful regime. (1.20)	Agreed	HMP Leeds is currently reviewing the Incentives and Earned Privileges (IEP) policy to take in to account the requirements of the current national Prison Service Instruction (PSI 30/2013). Those on basic level will receive a structured, purposeful regime and all reviews to be conducted on time with updates provided to both the prisoner and entered on to Prison -NOMIS (an electronic database to record prisoner information). The introduction of key worker role to HMP Leeds will improve the quality of Prison -NOMIS entries and staff will focus more on positive behaviour and setting achievable targets.	Governor	September 2018 and ongoing

			<p>Activity attendance is key to achieving an improved IEP status. The Head of Residence and the Head of Reducing Re-offending are working together to improve attendance by discussing at monthly consultations and feeding back to the Governing governor.</p> <p>Residential assurance checks are conducted to monitor the use of IEP to ensure it is operated fairly and to check of the timeliness and quality of reviews. The information is used to improve the management of the process.</p>	Governor	September 2018
				Governor	Completed
5.10	Steps should be taken to ensure timely completion of adjudications. (1.24)	Agreed	<p>Steps have been taken to ensure timely completion of adjudications. Governors who adjourn adjudications now retain responsibility for it and the hearing relisted before them. Adjudication Liaison Officers assist the Governors with their decision making as to whether an adjudication is more suitable for IEP. This process has seen a reduction in the number of adjudications - approximately half to date.</p> <p>Monthly reports will be produced to capture the number of outstanding adjudications.</p> <p>Outstanding adjudications will be monitored by the Senior Management Team (SMT) to ensure hearings are concluded.</p> <p>Access to legal assistance by telephone will be facilitated to help aid the adjudication process.</p>	Governor	Completed
				Governor	May 2018
				Governor	September 2018
				Governor	September 2018
5.11	Cells, including those used as special accommodation, should be decent and maintained to a reasonable standard. (1.38)	Agreed	<p>The segregation unit cells, including special accommodation have been redecorated. There is a system of daily checks in place to ensure cell damage is reported immediately and repaired by Amey. Staff ensure cells have appropriate furniture and are fit for habitation prior to occupation.</p> <p>HMP Leeds will commit to having remedial works carried out to bring the cells within the segregation unit up to standard.</p> <p>A rolling programme of cell refurbishment work is underway. Within the current funding arrangements four cells will be furnished with stronger built beds, sinks and toilets (less difficult to damage). The future plan is for other cells to be equipped once funding becomes available.</p> <p>Cells within the special accommodation will be maintained to the appropriate standard with improved flooring.</p>	Governor	Completed
				Governor	October 2018
				Governor	Ongoing
				Governor	March 2019
5.12	Segregated prisoners should have access to a full regime and daily	Agreed	The current core day within the segregation unit has been reviewed. It now provides prisoners with access to a shower and telephone call. The exercise yard has been split to enable more sessions to be facilitated during the core day.	Governor	Completed

	access to the telephone and a shower. (1.39)		Individual reintegration plans are produced to support progression to a full regime back on mainstream location.	Governor	Completed
	Security				
5.13	Prisoners on hospital escort should not be routinely handcuffed. Handcuffs should only be used following an individual risk assessment which reflects health care recommendations and recent behaviour in custody. (1.48)	Agreed	Clinical staff from Care UK (the health provider) will provide detailed medical information on part 1 of external risk assessment and through the use of SystemOne (a centrally controlled clinical system) include mobility / medical issues that will be considered alongside all other relevant factors when making a decision whether to restrain on an external hospital escort, as set out in PSI 33 / 2015 External Prisoner Movement.	Governor / Director of Care UK	Completed
	Safeguarding				
5.14	ACCT documents should reflect a high standard of care planning, including care maps which should reflect the needs of the prisoner. Staff observations should provide evidence of positive interaction. (1.55)	Agreed	<p>A more detailed Assessment Care in Custody and Teamwork (ACCT) quality assurance document has been introduced to ensure thorough care planning and positive staff / prisoner interactions.</p> <p>A set frequency for ACCT quality assurance has been introduced and specific groups of staff to conduct ACCT quality assurance checks will be identified.</p> <p>Constructive feedback is provided to staff by the Duty Governor, Night Orderly Officer or member from the safer custody team where deficiencies in the ACCT process have been identified. The Head of Safety oversees that these discussions take place.</p> <p>Key themes from ACCT quality assurances will be discussed, as a standing agenda item, at the monthly strategic Safer Custody meeting and appropriate action taken.</p> <p>ACCT case managers will receive refresher training in case management by the end of the year (subject to high demand of the training).</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>May 2018</p> <p>December 2018</p>
5.15	Prisoners on ACCTs should not be held in the segregation unit without thorough and recorded examination of alternatives. (1.56)	Agreed	An 'Authority to Segregate a Prisoner on an ACCT' document is completed by staff when deciding to locate a prisoner to the segregation unit and examination of alternatives are considered and recorded to ensure prisoners are safe the unit.	Governor	Completed

5.16	Staff on night duty should carry anti-ligature knives. (1.57)	Agreed	Anti-ligature knives are issued to all night staff who do not have one. The Night Orderly Officer conducts checks to ensure these are in staff possession. A monthly management check is conducted by the Duty Governor.	Governor	Completed
5.17	There should be a coherent strategy to reduce self-harm, informed by the specific characteristics of the population at Leeds. (1.58)	Agreed	HMP Leeds will review the Safety / Safeguarding strategy and produce a coherent strategy to reduce self-harm, taking account of population characteristics.	Governor	September 2018
5.18	Agreed actions in relation to at-risk prisoners should be systematically completed and recorded. (1.60)	Agreed	Agreed actions relating to at risk prisoners will form part of the ACCT quality assurance checks. Updates on actions are systematically recorded on care maps at ACCT case reviews.	Governor	Completed
	Staff-prisoner relationships				
5.19	All prisoners should have an identified officer to support them through their sentence and ensure they are regularly monitored for welfare and custodial needs. This should be reflected in comprehensive electronic case note entries. (2.5)	Agreed	<p>HMP Leeds to implement the key worker scheme under the Offender Management in Custody (OMiC) model for all prisoners including remand, as planned by December 2018. This is based on forecasting HMP Leeds total staffing figures for December 2018. However, full delivery of the key worker role is subject to staff recruitment and retention position, which could cause slippage to the target date.</p> <p>To assist those in custody, HMP Leeds are currently prioritising the top ten problematic prisoners identified through VIPER (violence in prisons estimator) and will prioritise sentenced prisoners most at need, for meaningful progression.</p> <p>Assurance checks are in place for case note entries, these include OMiC lead and Senior Probation Officer dip testing of key workers electronic case note entries and residential checks of personal officer allocation. These checks include identifying those prisoners who may have not had a recent case note entry.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>December 2018</p> <p>Completed and ongoing</p> <p>Completed</p>
	Daily life				
5.20	All cells should be adequately equipped and toilets should be screened. (2.11, repeated recommendation 2.10)	Agreed	<p>Since the inspection, the standard of cells are now managed through an assurance process and regular checks conducted by SMT.</p> <p>The prisoner party 'Q branch' are fabricating toilet screens and seats as part of a local process.</p>	<p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>September 2018</p>

			Accommodation fabric checks are conducted to ensure cells are adequately equipped and if not remedial action is taken.	Governor	Completed
5.21	Managers should put in place arrangements that ensure consistent availability of essential items such as clean sheets, cleaning products and toilet rolls. (2.12)	Agreed	Since HM Inspectorate of Prisons inspection the kit exchange process has been reviewed and is now allocated to a set day of the week when managers are available to ensure compliance in this area.	Governor	Completed
			Availability of cleaning materials and toilet rolls is monitored. Stock taking is managed between the residence CM and the stores staff and feedback is sought at the monthly prisoner consultative meetings to ensure the system is working.	Governor	Completed
5.22	Prison staff should respond to cell bells promptly, the timeliness of responses should be monitored closely and action should be taken to address delays. (2.13)	Agreed	Staff conduct routine spot checks on wings daily and obtain feedback at prisoner consultations. A reminder to staff about the importance of promptly responding to cell bells has been issued by way of a Governor's Order and assurance checks are completed by the Head of Residence.	Governor	Completed
			Where staff are found not to be adhering to this instruction, they are reminded or challenged about their responsibilities to provide a duty of care.	Governor	Completed
5.23	Breakfast packs should be more substantial and served on the day they are to be eaten. (2.21)	Not Agreed	This recommendation is not agreed, this is partially 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 considered substantial and suitable to be stored in prisoners' cells overnight.	Executive Director of Prisons	
5.24	Regular consultation should take place to understand and address prisoners' discontent with the food. (2.22)	Agreed	The Kitchen Manager (KM) in conjunction with the Regional Catering Manager reviews menus against Food Standards Agency requirements and makes any necessary changes.	Governor	Completed
			Consultation is sought from prisoners about the quality of food at the monthly prisoner consultative Governor's Question Time and fed back to the KM if not in attendance.	Governor	Completed
			The Duty Governor conducts daily tests of the food quality.	Governor	Completed
5.25	Prisoner consultation should be consistent, well publicised and result in demonstrable actions. (2.28)	Agreed	Residential wings run monthly consultations and this is monitored by Residential CMs. Minutes are taken and action points are reviewed at the next meeting; also circulated to prisoners and staff in relevant areas. The Governor and Deputy Governor are provided with the minutes and addresses any incomplete actions with functional heads.	Governor	Completed

			Other departments of the prison are allocated time to conduct consultation sessions throughout the month (in addition to the Governor's Question Time).	Governor	Completed
5.26	Prisoner complaints and applications should receive prompt, detailed and helpful responses that address all the issues raised. Quality assurance of complaints should be robust and lead to improvements. (2.29)	Agreed	<p>HMP Leeds has ceased the process whereby complaints are filtered by the Complaints Clerk. This has led to improvements to the number of complaints processed and distributed.</p> <p>A new assurance check spreadsheet has been created for complaints and this is monitored by the Head of Business Assurance.</p> <p>The Application process and Prisoner Information Desk worker training has been revised to ensure applications are dealt with at the lowest level and this is monitored through a weekly return submitted to SMT.</p> <p>The application process has been reviewed and is monitored by the Deputy Governor through triangulation feedback to ensure prompt, detailed and helpful responses which address all the issues raised.</p>	Governor Governor Governor Governor	Completed Completed Completed Completed
5.27	There should be an adequate stock of up-to-date legal text books in both libraries. (2.30)	Agreed	<p>A full review of the library service and book collection will be carried out. Once this has been completed, stocks of legal text books will be monitored by the HoRR and recorded on bi monthly basis.</p> <p>The HoRR will also liaise with Novus (the education provider) to identify key legal text books and have them added to the stock list and ensure adequate supplies.</p>	Governor Governor	June 2018 June 2018
	Equality, Diversity and Faith				
5.28	All discrimination incidents should be promptly and fully investigated even when there is no prima facie evidence of discrimination. Investigators should be of a sufficient level of authority. There should be independent quality assurance of completed investigations into discrimination incidents. (2.38)	Agreed	<p>To ensure discrimination incidents are promptly and fully investigated within the specified timescales. Discrimination Incident Reporting Forms (DIRFs) are no longer pre-sifted and are investigated by management grade level.</p> <p>HMP Leeds will establish independent sources consisting of equalities leads and four external organisations to complete regular quality assurance checks on small percentage DIRF investigations.</p>	Governor Governor	Completed July 2018
5.29	Details of all prisoners' disabilities should be	Partly Agreed	This recommendation is partly agreed as HMP Leeds cannot commit to meeting all the needs of prisoners with disabilities. The prison cannot be certain at this		

	recorded and reasonable adjustments should be made to ensure equitable outcomes. Prisoners with disabilities should be able to access all relevant parts of the prison easily. (2.48)		<p>time whether all these needs have been identified, and unlikely to be sufficiently resourced to meet them all.</p> <p>Prisoners with disabilities are identified by the Equalities team as they arrive in Reception and any disclosed disability is recorded. Second day screens identify any reasonable adjustments that are necessary and these are then raised with Equalities.</p> <p>The exercise yard on F wing is an identified area that may prove difficult for prisoners with disabilities to access. A stair lift will be installed to enable prisoners to have access.</p>	<p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>May 2018</p>
5.30	Professional British Sign Language interpreters should be used to communicate with deaf prisoners during ACCT reviews and at other times when accuracy is required. (2.49)	Not Agreed	This recommendation is not agreed as HMP Leeds considers the current system to be sufficient and, in part, preferable as using staff is timelier due to speed of access. Three staff members are skilled to communicate to prisoners during ACCT reviews using the British Sign Language and at other times when accuracy is required. Outside agencies will be used if staff are unavailable.	Governor	
	Health, Well-being and Social Care				
5.31	Cleaning schedules should be introduced and monitored to ensure compliance with infection prevention standards. (2.60, repeated recommendation 2.55)	Agreed	<p>Care UK (the healthcare provider) complete monthly infection audits as part of their ongoing clinical governance schedule.</p> <p>Care UK staff follow a daily check list to ensure compliance with infection control standards in clinical treatment rooms.</p> <p>Amey (the service contractor) have recruited a cleaner to provide cleaning to the clinical and waiting rooms.</p> <p>However, there continue to be issues regarding the remit areas within the Amey contract. This is being addressed on a continuous basis at the Prison Partnership Board meetings and will be subject to a formal review.</p>	<p>Director for Care UK</p> <p>Director for Care UK</p> <p>Governor and Executive Director of Facilities Management</p> <p>Governor and Executive Director of Facilities Management</p>	<p>Completed</p> <p>Completed</p> <p>May 2018</p> <p>August 2018</p>

5.32	All frontline custody staff should be trained to provide basic life support. (2.61)	Not Agreed	This recommendation is not agreed. To provide basic life support training to frontline custody staff is not a commissioned responsibility of the prison healthcare provider. Prison Officer Entry Level Training (POELT) officers receive first aid training as part of their initial training programme, which covers basic life support.	Director for Care UK	
5.33	The application of triage should ensure that clinical support is prioritised, equitable and transparent so that patients have confidence in the service. (2.70)	Agreed	A new triage process has been implemented to ensure that clinical support is prioritised.	Director for Care UK	Completed
			Healthcare has its own referral form (also available to segregated and basic regime prisoners) and a covering slip that notifies a patient of an appointment. This process will be monitored through feedback obtained from the Governor's Question Time.	Director for Care UK	Completed
			The process by which healthcare representatives collate patients' applications is being reviewed.	Director for Care UK	June 2018
5.34	Men with mental health needs residing on the social care unit should receive regular, dedicated support from mental health practitioners to facilitate recreational and daily living activities as part of a shared care plan available to prison and social care staff. (2.73)	Partly Agreed	This recommendation is partly agreed as delivery is dependent on the Local Authority.		
			Leeds City Council local authority are responsible for publicising services, pro-actively identifying need, assessment, care planning and care and support services. The Governor is responsible for enabling the local authority to carry out their statutory duties.	Director of Social Care, Leeds City Council Local Authority	Ongoing
			All patients with mental health needs residing on the social care unit have a dedicated nurse and are referred to the Multi Professional Case Conference to review and develop a care plan to facilitate recreational and daily living activities. The Local Operating Procedure for Mental Health Service referrals has been revised to include a clear procedure, to manage the mental health patients on the social care unit. Since November 2017, the senior nurse on duty attends the social care unit to check for new patients, evidence of assessments, care planning, joint management plans and reintegration plans.	Director for Care UK	Completed
			The data and performance lead has developed a template on SystmOne to monitor and record daily visits to the mental health patients on the social care unit. Weekly multi-agency meetings are held on the unit involving Safer Custody; prison officers; Mental Health; Social Care and Primary Care; cases are reviewed and care plans updated.	Director for Care UK and Governor	Completed

5.35	Mental health triage arrangements should ensure that all urgent referrals are seen within 24 hours. All other referrals should be seen within 72 hours according to the Care UK policy. (2.79)	Partly Agreed	<p>This recommendation is partly agreed due to policy reasons. To see urgent referrals within 24 hours and other referrals in 72 hours is considered aspirational.</p> <p>The Local Operating Procedure has been revised since the inspection, all urgent cases are seen within 24 hours and all other referrals seen within five days.</p> <p>A tracker has been developed to monitor compliance of mental health referrals and has been in place since January 2018 and daily triage clinics.</p>	<p>Director for Care UK</p> <p>Director for Care UK</p>	<p>Completed</p> <p>Completed</p>
5.36	Care planning should be developed for prisoners with primary mental health needs. (2.80)	Agreed	<p>All staff have been trained by the Mental Health Regional Lead on developing care plans. Staff use the same care planning template and are aware of the standards required.</p> <p>Monthly compliance checks are completed by the Mental Health Manager and audited by Care UK's lead nurse.</p>	<p>Director for Care UK</p> <p>Director for Care UK</p>	<p>Completed</p> <p>Completed</p>
5.37	Prison officers should have access to and should complete ongoing mental health awareness training. (2.81)	Partly Agreed	<p>The recommendation is partly agreed as HMP Leeds cannot hold ongoing mental health (MH) awareness training events for officers as this would result in regime curtailment, which would have an impact across the whole prison.</p> <p>MH awareness training is provided to new prison officers as part of their induction.</p> <p>A local MH awareness session is also provided to prison officers on training days and MH is covered in the mandatory Suicide and Self-Harm training.</p>	<p>Director for Care UK</p> <p>Governor</p>	<p>Completed</p> <p>Completed</p>
5.38	The transfer of patients to hospital under the Mental Health Act 2015 should occur within agreed Department of Health timescales. (2.82, repeated recommendation 2.90)	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 (NHSE) 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>	National Director of NHSE	Completed

			<p>NHSE will be consulting on new guidance in relation to transfer and remissions in the first quarter of 2018-19, 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>Director for Care UK and Governor</p>	<p>December 2018</p> <p>August 2018</p>
5.39	<p>Training on overdose management, including the use of Naloxone, should be made available to prisoners with substance misuse needs before their release. (2.89)</p>	Partly Agreed	<p>This recommendation is partly agreed due to policy reasons, syringes are not supplied to prisoners prior to release. The community provider will continue to provide Naloxone as it provides a safer pathway and encourages offenders to engage with the community services.</p> <p>The Drug and Alcohol Recovery Service completes an overdose management checklist for all prisoners being released who have a substance misuse issue and this includes the use of Naxolene. The checklist provides assurance that patients have been provided with information about the dangers of overdose and tolerance levels and to encourage engagement with community services.</p> <p>The community providers attends HMP Leeds to start the engagement process for planned releases and also engages with family members where appropriate.</p>	<p>Director for Care UK</p> <p>Director for Care UK</p>	<p>Completed</p> <p>Completed</p>
5.40	<p>In-possession risk assessments, which consider the risks of the drug as well as the patient, should be completed routinely and consistently. The policy should be followed robustly and the status and its rationale recorded accurately on SystemOne. (2.97)</p>	Agreed	<p>Pharmacy Technicians have been reminded of the reviewing assessments guidance to ensure clear focus on in-possession risk assessments and this is recorded accurately on SystemOne. Monthly audits are in place. March 2018 statistics illustrate that all new arrivals received an in possession risk assessment and 74% of patients received six weekly reviews.</p> <p>To ensure 14 day reviews are actioned a recall reminder is set at the reception risk assessment. Monthly compliance checks are completed to monitor the percentage of up to date risk assessments.</p>	<p>Director for Care UK</p> <p>Director for Care UK</p>	<p>Completed</p> <p>Completed</p>

5.41	Medicines should be stored safely. The controlled drugs cabinets should be secure and the temperatures for medicines storage should be in accordance with manufacturers' recommendations. (2.98)	Agreed	All fridge temperatures are checked and logged daily to maintain a temperature range of two and six degrees Celsius (in line with the manufacturers' recommendations).	Director for Care UK	Completed
			The medication room temperature is mapped to ensure it does not exceed 25 degree centigrade. The on duty Pharmacist is alerted to temperatures which rise above this.	Director for Care UK	Completed
			In order to store medicines safely, list of requirements and repairs to the cabinets has been agreed along with a work schedule to secure the cabinets and lockers in treatment rooms. This will be monitored by the Deputy Governor to ensure the work is carried out.	Director for Care UK	June 2018
			A new reception suite currently in build phase and is due to be completed by the end of 2018, which will provide a better room to maintain normal range of ambient temperature for storage of medications. As a short term measure, a large fan has been installed to help reduce the temperature in the clinical room used on the FNC (Unit D1).	Director for Care UK	December 2018
5.42	Patients should receive their medicines in a timely manner and a second checker should be present whenever a controlled drug is administered. (2.99)	Agreed	Datix (a patient safety organization that produces web-based incident reporting and risk management software) is used to record any non-compliance. To address delays in issuing medication a remote prescriber deals with tasks and one hour is set aside each day to do this work.	Director for Care UK	Completed
			Care UK have employed additional designated pharmacy staff as second checkers employed across all wings to ensure compliance with all controlled drugs. This is monitored daily and monthly audits conducted to ensure compliance.	Director for Care UK	Completed
Time out of cell					
5.43	All prisoners should receive at least an hour of exercise outside every day. (3.9, repeated recommendation 3.4)	Not Agreed	This recommendation is not agreed. National policy PSI 75 / 2011 Residential Services states that prisoners to be afforded a minimum of 30 minutes in the open air daily. This provision is mandatory subject to weather conditions and the need to maintain good order and discipline.	Ministry of Justice, Director of Prisons Policy	
5.44	A computerised integrated library management system should be introduced. (3.10)	Not Agreed	This recommendation is not agreed due to affordability reasons to implement an integrated library system. The library contract is due for renewal at which point existing library systems at HMP Leeds will be evaluated, with a view to implementing a computerised system.	Governor	

	Education, skills and work activities				
5.45	Novus managers should ensure that they evaluate accurately the strengths and weaknesses of teaching, learning and assessment practices. (3.21)	Agreed	<p>Since late January 2018, two learning walks were conducted and action plans produced. These were shared with relevant staff to improve teaching quality and learning and assessment practices.</p> <p>A schedule of joint observations of teaching, learning and assessment is now conducted on a monthly basis.</p> <p>A fortnightly learning walk schedule will be in place by the end of the year.</p>	<p>Director of Novus</p> <p>Director of Novus</p> <p>Director of Novus</p>	<p>Completed</p> <p>Completed</p> <p>December 2018</p>
5.46	Prison managers should evaluate the quality of training, learning and assessments in prison work. (3.22)	Agreed	<p>Recorded learning walks will be introduced and conducted monthly in all prison work areas to evaluate the quality of teaching.</p> <p>Observation of teaching, learning and assessment and self-assessment training / awareness sessions will be facilitated for Industries and Catering Managers, in aid of improving the quality of teaching.</p>	<p>Governor</p> <p>Governor</p>	<p>December 2018</p> <p>December 2018</p>
5.47	Tutors should use information about prisoners' existing skills to plan learning activities which enhance these skills and knowledge, and ensure that they know what they need to do to improve their written work. (3.29)	Agreed	<p>Individual Learning Plans (ILP) were updated in January 2018 to include relevant English, maths and employability targets.</p> <p>Monitoring and quality assurance checks will be conducted on Lesson Plans, ILPs and Learning Support Plans as part of the joint learning walk and observation processes.</p> <p>Tutor training and development sessions will be introduced utilising information about prisoners' existing skills to plan learning activities and improve written will be facilitated through setting SMART (Specific, Measureable, Achievable, Realistic and Time-bound) ILP targets and providing feedback for learners, and further Continuing Professional Development sessions held throughout the year in relation to learning walk / observation judgements.</p> <p>Joint scrutiny of learners' work / portfolios will be conducted on a monthly basis.</p>	<p>Director of Novus</p> <p>Director of Novus</p> <p>Director of Novus</p> <p>Director of Novus</p>	<p>Completed</p> <p>July 2018</p> <p>July 2018</p> <p>July 2018</p>
5.48	Effective arrangements should be put in place for prisoners engaged in prison work to improve their use of English and mathematics. (3.30)	Agreed	<p>The functional skills outreach and embedded English and mathematics delivery models will be reviewed during the May 2018 curriculum review process and incorporated into the delivery plan for the 2018 /19 academic year to incorporate English and mathematics in to workshops.</p> <p>The Head of Learning and Skills will monitor implementation and the provider will be held accountable for its delivery. The extent to which functional skills are</p>	<p>Director of Novus and Governor</p> <p>Director of Novus and Governor</p>	<p>August 2018</p> <p>August 2018</p>

			recognised, incorporated and embedded in prison work activities will be evaluated and developed.		
5.49	Prison and Novus managers should ensure that prisoners start on courses that they can complete, especially those undertaking functional skills in English and mathematics. (3.37)	Agreed	<p>A scoping exercise will be conducted to establish the reasons why prisoners do not finish courses.</p> <p>Learner withdrawals (quantity and reasons for withdrawal) will be reviewed on a monthly basis. Any associated issues / trends will be addressed with the relevant stakeholders (Novus / Activities Hub) and included within the Offenders' Learning and Skills Service (OLASS) Governance Performance Report.</p> <p>By the end of the current academic year, learner withdrawals will be planned to equate to no more than 5%. With the help of the education manager, Head of Learning and Skills and Residence Manager, HMP Leeds will support prisoners in attending classes. The HoRR will oversee this action point and measure the progress especially those undertaking functional skills in English and mathematics.</p> <p>A full review of the service provision will be conducted based on the outcome of the scoping exercise.</p>	<p>Director of Novus and Governor</p> <p>Director of Novus and Governor</p> <p>Director of Novus and Governor</p> <p>Director of Novus and Governor</p>	<p>August 2018</p> <p>August 2018</p> <p>August 2018</p> <p>September 2018</p>
5.50	Prison managers should ensure that instructors recognise and record accurately the skills that prisoners develop in prison work. (3.38)	Agreed	<p>Monitoring and quality assurance checks are conducted on a monthly basis by the HoRR. The Head of Residence will dip test a small percentage of work plans every month to ensure that instructors are recognising and recording accurately the skills that prisoners develop in prison work.</p> <p>The 'Work Progress Plan' scheme (individual learning plan for use within non-OLASS activity areas) will be introduced and embedded in prison work areas. The scheme will be monitored and matters discussed at the Quality Improvement Group held monthly.</p> <p>Instructors will receive further training on individual target setting.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>September 2018</p> <p>September 2018</p>
	Children and families and contact with the outside world				
5.51	Courses enabling prisoners to become better fathers and partners should be reintroduced. (4.4)	Not Agreed	This recommendation is not agreed due to commissioning reasons. The service provider Jigsaw (a registered charity that offers services and support to those visiting loved ones in prison) are not funded to provide this intervention, similarly HMP Leeds is not commissioned to provide this service. However, the Community Rehabilitation Company (CRC) will be contacted to explore whether there is sufficient need to commission specific relationship and parenting skills programmes as part of the Through The Gate resettlement provision. HMP	Governor	

			Leeds are also working with the police around possible appropriate courses being delivered.		
5.52	The closed visits booths should be relocated out of sight of the main visits area. (4.5)	Not Agreed	This recommendation is not agreed due to affordability reasons to reconfigure the visiting complex. The funding to carry out the planned works has not currently been approved.	Governor	
	Reducing risk, rehabilitation and progression				
5.53	All prisoners should be given regular, meaningful and coordinated individual support to make positive use of their sentence, through shared and consistent assessment, planning and delivery by the offender management unit, key workers, and departments responsible for planning and delivery of activities and interventions. (4.18)	Partly Agreed	<p>This recommendation is partly agreed as the implementation of the OMiC model is in two phases and it will not apply to all prisoners until the completion of the national roll out.</p> <p>The first phase is the introduction of key work to all prisoners. The second phase is a revised approach to case management where all prisoners who are high risk and / or serving longer sentences will receive specialised offender management from skilled prison staff or probation officers. This will include revised requirements in relation to risk assessment, sentence planning and provision of on-going support with an emphasis on targeting resources, and a focus on the crucial period just before prisoners re-join the community.</p> <p>HMP Leeds will fully implement the key worker element of the model by the end of 2018, this will provide prisoners with regular, meaningful and coordinated individual support and encourage attendance at activities.</p> <p>A local Offender Management strategy will be introduced in the interim and monitored via a monthly board. This strategy will ensure that risks / needs are appropriately addressed and sentence plans achieved working alongside the CRC provider. Sentence plan and co-ordination of services will be managed by a designated Probation Offender Manager.</p>	<p>Executive Director of Prisons</p> <p>Governor</p> <p>Governor</p>	<p>September 2019</p> <p>December 2018</p> <p>August 2019</p>
5.54	Prisoners approved for HDC should be released on the earliest eligible date. (4.19, repeated recommendation 4.15)	Agreed	HMP Leeds will develop a local robust Home Detention Curfew (HDC) process to reflect the requirements of PSI 1/2018 Home Detention Curfew Assessment Process so that: prisoners' HDC eligibility status is determined and recorded on Prison-NOMIS and the status of eligible prisoners is updated as necessary; the HDC process starts in good time for eligible prisoners who have at least 28 days to their conditional or automatic release date; and the HDC decision is taken, wherever possible, no later than two weeks prior to the HDC eligibility date. This is to ensure that prisoners are released on HDC, on average within seven days of their HDC eligibility date.	Governor	August 2018

	Interventions				
5.55	Release on temporary licence should be available to suitable prisoners, subject to a risk assessment, for resettlement purposes. (4.29, repeated recommendation 4.7)	Agreed	HMP Leeds will develop a local policy on Release on Temporary Licence (ROTL) to ensure that the relatively small pool of prisoners who will be eligible, and for whom temporary release for resettlement purposes is part of their sentence plan during their time at the prison, may be considered for ROTL.	Governor	July 2018
5.56	Appropriate interventions, either through programmes or one-to-one work, should be available for prisoners who stay at HMP Leeds for long periods. As a priority, this should include motivational work for sex offenders in denial of their offence. (4.30, repeated recommendation 4.45)	Partly Agreed	<p>This recommendation is partly agreed as it is not the current commissioning position to place accredited interventions into local prisons; and through reconfiguration work by 2021 HMP Leeds will become a reception prison. Longer term prisoners will no longer be part of the population, and in a more timely manner will be transferred to a prison delivering the relevant treatment programs. There is insufficient time before the reconfiguration changes are in place to establish a treatment team therefore it would not be prudent to give additional resources at this time.</p> <p>As an interim action to provide some support and interventions within the current limited resources, HMP Leeds will liaise with regional psychology services to source one-to-one motivational support for sex offenders and for long stay prisoners' through intervention programmes or one-to-one work. Under the OMiC, one to one work with a Prison Offender Manager, and through sentence planning suitable interventions will be allocated.</p>	<p>Executive Director of Transformation Estate / Ministry of Justice Director of Commissioning</p> <p>Governor</p>	September 2019

Recommendations	
Agreed	38
Partly Agreed	11
Not Agreed	7
Total	56