

Action Plan: HMP/YOI Stoke Heath

Action Plan Submitted 22/05/2019

A Response to the HMIP Inspection 12-22 November 2018

Report Published 19 March 2019

INTRODUCTION

HM Inspectorate of Prisons (HMIP) and HM Inspectorate of Probation for England and Wales are independent inspectorates which provide scrutiny of the conditions for, and treatment of prisoners and offenders. They report their findings for prisons, Young Offender Institutions and effectiveness of the work of probation, Community Rehabilitation Companies (CRCs) and youth offending services 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 mus t 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 STOKE HEATH

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	Oversight of safer custody should ensure that Prisons and Probation Ombudsman recommendations are implemented. Prisoners at risk of self-harm should have a comprehensive care plan that includes	Agreed	All Prisons & Probation Ombudsman recommendations will be discussed as part of the agenda for the monthly Safer Prisons meeting, chaired by the Head of Safer Custody and quarterly by the Deputy Governor. These recommendations will be incorporated into the Safer Prisons action plan, where a designated owner of the risk will be identified and tasked with ensuring compliance. Evidence of compliance will be submitted monthly to the Safer Prisons team and will be logged by the Safer Prisons Business Administrator for audit purposes. Failure to comply with a recommendation will be investigated by the Risk Owner and action taken accordingly.	Governor	June 2019
	care plan that includes access to activity.		The Head of Safer Prisons will publish an instruction to all Case Managers of Assessment, Care in Custody & Teamwork (ACCT) monitoring of the need to incorporate all elements of the ACCT assessment and subsequent Case Reviews into the Care Map each time. Case Managers will be required to evidence access to activity and why, if applicable. Prisoners placed on a constant watch will have an initial review completed by a Governor that will consider and ensure access to the regime and activities. A daily review is carried out for the first three days and one at the seven day point. Other reviews will be agreed by the review board on the day.	Governor	June 2019
			Quality assurance will be provided via the Governors daily check sheets completed by the Duty Governor on 10% of all open cases. Feedback as a result of these assurance checks will be passed to Safer Custody and Case Managers who do not evidence Care Plans as above will be given appropriate support and guidance from the Safer Team in tandem with Regional Safer Custody.	Governor	October 2019

There should be sufficient opportunities for all prisoners to participate in full-time purposeful activity. Prisoners should be allocated to activities promptly. (S36)	Partly Agreed	This recommendation is partly agreed as providing full-time activity spaces for all prisoners would require significant additional funding, which is not currently available as HMP/YOI Stoke Heath is subject to a significant budget cut of 32% under the new prison education framework. This impacts significantly on the number of prisoner qualifications and activity spaces available across the establishment which is projected to leave 35% of the population with no purposeful activity space as at April 2019. However HMP/YOI Stoke Heath will, where course requirements allow, allocate prisoners to daily activity spaces as vacancies arise. A review of the gym programme is being undertaken to maximise the numbers of prisoners participating (currently 44%) in daytime, evening, and weekend gym activity to help mitigate the lack of activity spaces. Prisoners who are in full time industries, education or vocational training will be priority for Friday afternoon, evening and weekend gym sessions, aiming to offer all prisoners a minimum of 2 sessions per week together with specialist sessions i.e. over 45's. A new gym programme will be introduced by 30 June 2019. The establishment unfortunately does not have the resources to expand the library service or association time to reduce prisoners' time in cell.	Governor	June 2019
All prisoners should have an up-to-date OASys assessment that is reviewed regularly by the responsible prison or community offender manager to ensure sentence plans reflect current risks and needs relevant to the custodial part of their sentence. (S37)	Partly Agreed	This recommendation is partly agreed as HMP/YOI Stoke Heath cannot guarantee that arriving prisoners will have an up-to-date OASys and therefore not entirely in the establishment's control. A dedicated member of staff has been assigned to complete OASys (Offender Assessment Systems) assessments since April 2018 and this has seen a reduction from over 170 outstanding OASys assessments to 54, the lowest level it has ever been. Every effort will be made to ensure this level is maintained however the HMP/YOI Stoke Heath cannot guarantee this will be achieved due to factors outside of the establishment's control such as the churn rate of offenders and the number of offenders transferring without an up-to-date OASys The Head of Offender Management Unit (OMU) and the Senior Probation Officer will review the number of outstanding OASys assessments and reviews monthly, and report these via the National Assurance Process (NAP). This enables monitoring during the work to clear the backlog, and will provide ongoing assurance once this has been resolved. OASys assessments will be reviewed annually or if a need or risk is identified. The Head of Offender Management and the Senior Probation Officer will be responsible for this.	Governor	June 2019
Recommendations				

	To HMPPS				
5.4	All eligible prisoners transferred to Stoke Heath should have an up-to-date OASys assessment. (4.15)	Partly Agreed	This recommendation is partly agreed as HMP/YOI Stoke Heath does not have the power to ensure every prisoner arrives at the establishment with an up to date OASys report and is unable to effect the processes at other sending establishments. HMPPS is aware of the issues regarding the completion of OASys assessments. The new Offender Management in Custody (OMiC) model will move the resource for OASys completion into the training and resettlement Prison Estate and away from local and reception prisons, where there is more time for engagement with the prisoner and for the plan to be produced. The additional staff provided for key work will assist in reducing cross deployment, which has significantly contributed to the reduced completion of OASys assessments. The case management element of the model aims to be in place in all prisons by September 2019. The backlog of OASys assessments is also a key issue to address as part of this	Deputy Director of Public Protection and Victims Deputy Director of	September 2019 September 2019
			roll out, and the work to address the backlog continues on a national level. As part of OMiC implementation, prisons and probation are being asked to develop and implement plans to reduce their OASys backlogs for assessments they are responsible for and this should result in a reduction in the numbers of prisoners transferred to HMP/YOI Stoke Heath without an OASys.	Public Protection and Victims	September 2019
5.5	There should be sufficient bail accommodation and support services hostel places to enable the prompt release of prisoners on home detention curfew. (4.24)	Partly Agreed	This recommendation is partly agreed as the Bail Accommodation and Support Services (BASS) are not able to commit to expand sufficiently to meet the required demand. The BASS contract is for 550 bed spaces across England and Wales. The Local Authorities are working closely with the NACRO (National Association for the Care and Resettlement of Offenders) supplier to ensure that this requirement is realised as quickly as possible. The contract also allows the Authority to enter negotiation about providing an additional number of bed spaces to a maximum of a further 55, which will be subject to remaining within the affordability threshold.	Deputy Director of Approved Premises, BASS and Accommodation	September 2019
5.6	Prisoners should be transferred to Stoke Heath in good time to allow for comprehensive resettlement work. (4.34)	Agreed	As part of the Reconfiguration Project, additional training and resettlement spaces will be created across the estate to ensure that prisoners can progress to the right establishment at the right point in their sentence. HMP/YOI Stoke Heath currently receives prisoners in the last 12 weeks of their sentence for resettlement, however, following the reconfiguration, prisoners will spend much	Executive Director of Prison Estate Transformation Programme/Population Management	March 2023

	Recommendations Early days in custody		longer in resettlement prisons (up to 24 months) depending on the length and type of their sentence. Stoke Heath is in scope to be reconfigured as part of the Reconfiguration Project, which is expected to be completed by the end of March 2023. Reconfiguration will take place in geographical lots between now and 2023. The exact date for reconfiguration of HMP/YOI Stoke Heath is not known and currently falls into Lot 4.		
5.7	The induction programme should be condensed to avoid prisoners being locked up for long periods between sessions. (1.7)	Partly Agreed	This recommendation is partly agreed as it is not currently possible to condense the induction programme as the 1-2-1 regime allocation meeting can take up to two weeks to schedule and conclude. This meeting takes place with every newly arrived prisoner and provides the quality needed to appropriately assess and meet the individual needs. The meeting takes into account previous training, previous work, and intended work on discharge, and is vital in providing effective resettlement opportunities.	Governor	
			The induction programme is however being reviewed and the first week of induction is being developed to include more peer mentoring and additional time out of cell. To reduce the time prisoners are locked in cells between sessions, a mix of staff and peer-led activity will be introduced.	Governor	June 2019
			Gym staff will review the gym programme with an aim to enhancing the gym offer to prisoners in week two which will provide further time out of cell. Information, Advice & Guidance, and 1:1 interviews will be added to the induction programme once this service is reintroduced, expected by June 2019.	Governor	June 2019
5.8	New arrivals should not experience delays in booking visits. (1.8)	Agreed	Additional guidance for booking visits will be given at reception to advise offenders how to complete the approved visitors list as a matter of urgency. A check will be introduced in the Induction programme to ensure all offenders have completed their approved visitors list and the Business Hub have actioned the document. The Business Hub manager will have responsibility for ensuring compliance. The establishment re-approve all previously approved visitor lists from previous establishments as a safeguarding approach, ensuring that all visitors are eligible to visit, and that there have been no changes to Safeguarding or Security Risks and that people still wish to have contact with the offender.	Governor	June 2019

	Managing behaviour				
5.9	The prison should be able to evidence that the underlying causes leading to self-isolation have been identified and that there is a plan in place to address these	Agreed	The self-isolator protocol has been incorporated into the Challenge Support and Intervention Programme (CSIP) model which went live in March 2019, and is the sole system for identifying and supporting self-isolators at HMP/YOI Stoke Heath. The Safer Prisons Custodial Manager will identify and record the underlying causes of self-isolation on the Prison Service's electronic case management system (P-NOMIS), and for developing a plan to address the issues. These	Governor	Completed Completed and ongoing
	issues. (1.19)		plans will be monitored at the weekly Safety Intervention Meeting (SIM) between Safer Custody, Residential and Security, with quality assurance provided by the Head of Safer Custody or Safer Custody Custodial Manager, in their absence.		
			In addition to this HMP/YOI Stoke Heath will commission an investigation into the causes of isolation at the prison to establish if any institutional factors are contributing/causing men to isolate themselves.	Governor	June 2019
5.10	Prisoners who self- isolate should have access to a shower, telephone call and an hour's exercise each day. Records should	Partly Agreed	This recommendation is partly agreed as an hour's exercise each day is not possible within the current regime and staffing model. National policy (PSI 75/2011 Residential Services) also states that prisoners are afforded a minimum of 30 minutes in the open air daily as opposed to one hour's exercise recommended by the Inspectorate. This provision is mandatory subject to weather conditions and the need to maintain good order and discipline.	Governor	
	demonstrate that these prisoners are continuously encouraged and supported to take part in some activities with their peers. (1.20)		HMP/YOI Stoke Heath will however provide a minimum of 30 minutes exercise each day and will offer, where possible, daily showers and a phone call. Residential Senior Officers will be responsible for delivering the regime together with monitoring and recording self-isolating prisoners access and/or refusal of elements of the regime on P-NOMIS. The Safer Custody department now carry out daily assurance checks to ensure compliance.	Governor	Completed
i.11	plan, based on all available evidence about violence in the prison,	Agreed	The establishment will be implementing a 2019-20 action plan focussed on tackling violence, separate from the Safer Prisons Action Plan, which will evidence HMP/YOI Stoke Heath's commitment to CSIP and will build upon the significant reductions in violence the prison has achieved during 2018-19.	Governor	June 2019
	should be robustly managed to further		The Head of Safer Prisons will be responsible for the producing the action plan utilising available data and evidence from Safety Diagnostics Tool and Violence Reduction reports, Intelligence Reports, consultation with prisoners, and body		

	reduce levels of violence. (1.21)		worn video camera footage. The action plan will be reviewed during the monthly Safer Prisons meeting.		
5.12	Officers should always use de-escalation to full effect, and the prison should ensure that force	Agreed	The Control & Restraint (C&R) Instructors have committed to reinforcing the need to use all forms of de-escalation in the training delivered to staff. Annual C&R training, Personal Protection training, and any other ad-hoc training delivered following incidents will include a focus on de-escalation techniques.	Governor	October 2019
	is only used as a last resort. (1.26)		A Notice To Staff (NTS) has been issued reminding staff of the requirement to use Body Worn Cameras (BWCs) during an incident.	Governor	Completed
			Use of Force is monitored at the weekly Restraint Minimisation Meeting (RMM) which identifies trends in use of force and reviews its justification. C&R Instructors will attend when possible. Staff will be given feedback by their line manager to support and improve their responses to incidents and their decision-making in relation to use of force.	Governor	June 2019
			The terms of reference for the RMM meeting will be revisited and the inclusion of C&R Instructors will provide additional expertise to ensure that those incidents requiring further investigation are identified and reported to the Deputy Governor to ensure they are acted upon.	Governor	June 2019
	Security				
5.13	Closed visits should only be imposed for visits-related activity. (1.39)	Not Agreed	This recommendation is not agreed as Prison Service Instruction (PSI) 15/2011 'Management of Security at Visits', provides that closed visits may be imposed in the absence of specific security intelligence relating to visits. Closed visits may be imposed as an administrative measure where necessary in accordance with Prison Rule 34 (1) and (3), i.e. for reasons of securing good order and discipline or for the prevention of crime or in the interests of any persons. The prison holds monthly review meetings for prisoners that are subject to these restrictions. The reviews ensure decisions are justified and/or necessary and are chaired by the Deputy Governor.	Governor	
	Safeguarding				
5.14	Prisoners on open assessment, care in custody and teamwork (ACCT) documents	Agreed	Prisoners on open ACCTs will only be located in segregation for serious incidents which pose a significant threat to safety and security. Prisoners on open ACCTs are subject to a safety screening and a defensible decision making log is completed by the Duty Governor that is reviewed daily.	Governor	June 2019

	should only be segregated in exceptional circumstances. (1.47)		Reintegration plans are set up for each segregated prisoner at the point of segregation to identify reasons for the issues that have led to segregation, and to detail what can be done to support the prisoner back onto normal location as soon as possible.	Governor	October 2019
	Daily life				
5.15	The prison should ensure that all cells are well-furnished and have suitable mattresses, and that all prisoners have weekly access to clean prison clothing and bedding. (2.11)	Agreed	Suitable mattresses are now available and Accommodation Fabric Checks by residential staff will include ensuring the standard of furnishings in cells is sufficient and where equipment is broken, this will be removed and replaced where possible. Sanctions will be considered for individuals that are responsible for intentional damage where appropriate. Residential Custodial Managers will complete three cell inspections per month to ensure compliance. The Head of Function will complete weekly wing inspections and cell standards will form part of the visit.	Governor	June 2019
			The clothing exchange policy will be reviewed in July 2019 and, in consultation with the contractors (Amey), an operationally viable and mutually agreed protocol will be implemented that meets the needs of the residential areas.	Governor	July 2019
5.16	Staff should answer cell call bells within five minutes. (2.12)	Agreed	All staff will be advised through a 'Notice to Staff' of the requirement to answer cell bells within five minutes. Residential Managers and Residential Supervising Officers will monitor compliance of this on a daily basis by activating a random cell bell and recording the time taken to respond. The Safer Prisons Department will carry out additional ad-hoc covert testing and share the results with Residential Managers to address any issues.	Governor	June 2019
5.17	Prisoners should be able to place a shop order within 24 hours of arrival. (2.19, repeated recommendation 2.116)	Partly Agreed	This recommendation is partly agreed due to the limitations of the prison shop contract. The prisons shop is operated by DHL Warehouse on a weekly contract and orders are therefore restricted to the contractors operating times. Any prisoner arriving after the scheduled operating day will not be able to place an order until the following week.		
			Newly received prisoners are provided with a canteen bag within 24 hours of arrival. They are offered the choice of a vape bag (cartridges for vape pens or ecigarettes for those who don't have vape pens) or non-vape bag (juice, chocolate, and crisps) and includes a phone credit as part of this shop.	Governor	Completed

5.18	Prisoners should not be disadvantaged by delays in the transfer of their monies from private prisons. (2.20)	Partly Agreed	This recommendation is partly agreed as HMP/YOI Stoke Heath can only complete the transfer of monies from private prisons once the sending establishment have completed their part on P-NOMIS. Further delays are caused by the processing of refunds from the sending establishments when offenders have placed orders but not received the contents of the spend. HMP/YOI Stoke Heath do however offer a credit advance to prisoners transferring from private establishments and are subject to delays in transfer of monies. The recovery of advances is also set at an affordable rate by the establishment.	Governor	Completed
5.19	Prisoner consultation should be improved and actions arising addressed within reasonable timescales. (2.27)	Agreed	The monthly Prisoner Consultation meeting, as an established meeting, will remain in place however the chairing-Governor of the meeting will ensure that all points raised will be actioned by the following meeting, or a meaningful update provided by the appropriate Head of Function or their deputy. Non-compliance will result in a referral to the Deputy Governor for appropriate action. To provide consistency between meetings, a Band 5 manager is now allocated to the Prisoner Consultation meeting for a minimum period of four months at a time. This provides consistent management presence to allow additional follow-up of actions and issues.	Governor	June 2019 Completed
5.20	Confidential access complaints should be properly investigated. (2.28)	Agreed	A new quality assurance process has been implemented whereby the Governing Governor completes a 10% check of Confidential Access complaints on a monthly basis. These checks assess the level of response, what action (if any) has been agreed, and what progress against the actions has been made. Feedback is provided to the staff members responsible for the response and actions, and follow up actions are allocated where necessary.	Governor	Completed
	Equality, diversity and faith				
5.21	There should be regular formal consultation arrangements for prisoners from all minority groups to raise their specific concerns and have these addressed. (2.35)	Agreed	All Protected Characteristic (PC) leads will hold consultation meetings with prisoners on a quarterly basis. Any concerns will be raised at the quarterly Equalities & Diversity Action Team meeting. The findings and actions from concerns raised will be communicated through Prisoner Consultation Meetings, Notices To Prisoners, Notices To Staff, and form the basis of the PC-specific action plan.	Governor	June 2019

			PC leads will ensure that consultation meetings will be promoted to staff and prisoners using Notice To Staff and Notice To Prisoners ahead of each scheduled meeting, and will also be highlighted at the monthly Prisoner Consultation meeting.	Governor	July 2019
5.22	Prison managers should explore and address the reasons behind black and minority ethnic prisoners' negative	Agreed	The Equalities Officer has produced a four-hour bespoke training package designed to educate staff in understanding racial bias, and to support the improvement of negative perceptions held by the Black, Asian, and Minority Ethnic (BAME) population. This training will be delivered to all prisoner-facing staff and will be added to the annual training plan for the establishment.	Governor	June 2019
	perceptions in our survey. (2.43)		Consultation sessions have been held to explore the negative perceptions held by BAME prisoners, the findings of which will be built into the 2019-2020 Action Plan for Equalities. Consultation with BAME prisoners will be repeated on a quarterly basis from Q1 2019/20 in order to monitor progress.	Governor	July 2019
			Redacted Discrimination Incident Reporting Forms have been produced for peer group quality assurance with prisoner groups, to demonstrate transparency and to improve prisoner confidence in the establishment's systems. This is run by the Equalities Officer following the quarterly Equality Diversity Action Team (EDAT) meetings.	Governor	October 2019
5.23	There should be formal support structures for gay prisoners. (2.44)	Agreed	The PC lead and Deputy Governor will put in place formal structures such as Focus Groups and Awareness Sessions to build on the level of support offered to gay prisoners. This will be built into the establishment's Equalities Action Plan for 2018-2019.	Governor	July 2019
			A new Prisoner Representative for gay prisoners has been appointed and is supported by the PC lead and Deputy Governor.	Governor	Completed
			The PC lead will identify appropriate outside agencies and make contact with them to source additional information and support for gay prisoners at HMP/YOI Stoke Heath.	Governor	June 2019
	Health, well-being and social care				
5.24	Emergency resuscitation equipment should be deployed around the site	Agreed	Shropshire Community Health NHS Trust will provide an additional defibrillator and two additional full response kits to be sited in the main prison to provide total and effective coverage.	Director of Shropshire Community Health NHS Trust	June 2019

	to enable a swift response in a medical emergency, and there should be no delay in summoning an ambulance when required. (2.55)		A Notice to Staff has been reissued reinforcing the need to call an ambulance immediately when a Code Red or Code Blue is reported. This will be reviewed as part of the post-incident reviews to ensure compliance.	Governor	Completed
5.25	Staff should be clear of their duty to report incidents of potential abuse, including unexplained injuries. All safeguarding incidents should be reported to the prison for review. (2.56)	Agreed	A new policy has been drafted and agreed between the Head of Safer Prisons and Healthcare partnerships. A standardised reporting procedure has been devised and will be published in line with the policy, and closer links have been made with Shropshire Council on adult safeguarding matters. Healthcare staff will receive additional safeguarding training, above the level of mandatory training, to enhance their knowledge. This will cover the actions required in cases of suspected abuse, including unexplained injuries.	Governor/Director of Shropshire Community Health NHS Trust Director of Shropshire Community Health NHS Trust	June 2019 September 2019
5.26	Responses to health complaints should attempt to resolve concerns from patients face to face, and indicate how they can make a formal complaint if they are dissatisfied with the response. Health concerns raised should be monitored to inform service improvement. (2.57)	Agreed	Clinical governance workshops were hosted in January and February 2019 to review complaints process within all health providers. A new process has been introduced to include improved face to face resolution meetings. Quarterly reviews of local resolutions and concerns forms will commence in April 2019 to identify trends within concerns, and to inform actions and service developments.	Director of Shropshire Community Health NHS Trust Director of Shropshire Community Health NHS Trust	Completed
5.27	An enhanced pain management protocol and shared care process should be agreed between service providers to ensure more	Agreed	New clinical pathway for pain management will commence from April 2019, with the addition of multi-disciplinary reviews.	Director of Shropshire Community Health NHS Trust	Completed

	effective patient-centred care. (2.66)		New clinical pathways will be developed as part of integrated partnership and include shared care processes.	Director of Shropshire Community Health NHS Trust	September 2019
5.28	Prisoners should have access an integrated range of mental health provision that fully meets the needs of the population. (2.73)	Agreed	A new NHS England mental health specification will be incorporated into the new contract commencing in April 2019 along with a new secondary mental health provider. Services will include IAPT (psychological therapies), a learning disability nurse service and new pathways for integration between primary and secondary mental health service.	Director of Shropshire Community Health NHS Trust	Completed
5.29	The transfer of patients to hospital under the Mental Health Act should take place within agreed Department of Health timescales. (2.74, repeated recommendation 2.101)	Partly Agreed	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. A weekly conference call with providers and commissioners will start in October with a view to addressing delayed discharges and expediting Mental Health transfers across NHS organisations. The referral of patients in need of assessment will continue to take place within a timely manner as specified within the Department of Health (DOH) guidance. Concerns will be escalated to the receiving hospitals/trusts and gate keepers and monitoring of timeframes for such transfers will continue and information provided to commissioners as requested. NHS England continues to work with partners across the criminal justice system to improve services for offenders with mental health difficulties and is reviewing the current Prison Transfer and Remission Guidance published by the Department for Health in 2011. A particular focus of the work will be to ensure that the most appropriate timescales are developed and implemented in relation to prison transfers and remission, taking into account clinical urgency and need. It is anticipated that revised timescales for transfer from prison to hospital will be developed by the autumn to enable the current Guidance to be reviewed by the end of the year.	NHS England	June 2020
5.30	Lockable boxes should be provided for prisoners	Not Agreed	This recommendation is not agreed as currently there is no funding available for lockable boxes and it is not certain that funding will be available during the	Governor	

	in shared cells to store their medicines safely and securely. (2.87)		current financial year. Whist the establishment will endeavour to seek funding, HMP/YOI Stoke Heath cannot commit to delivering this recommendation at present.		
5.31	The arrangements for the collection and supervision of medicines should ensure safe prescribing and administration (including dosage intervals), with practices maintaining patient confidentiality and limiting the risk of bullying and diversion. (2.88)	Agreed	The Head of Residence will commit to reviewing the current protocols for monitoring the medication queues, ensuring suitable support and supervision. Residential Managers, in conjunction with Safer Prisons, will review the Safety Diagnostic Toolkit to look for patterns and trends in incidents involving medication, and use available resources to challenge and disrupt. A new process has commenced in the Care & Separation Unit (CSU) to ensure safe administration of medication, using a portable medication trolley that can be secured in the CSU when not in use. A new Standard Operating Procedure (SOP) has been agreed to support this process. Staff have been informed by email of the Standard Operating Procedure and this will be discussed at staff meetings.	Governor Director of Shropshire Community Health NHS Trust	June 2019 Completed
5.32	General stock medicines should be subject to audit to ensure a suitable quantity of appropriate medicines is available for patient need. (2.89)	Agreed	A new pharmacist took up post in December 2018 and an additional pharmacy technician's post will be added to the new contract commencing in April 2019 to support this work. An audit to ensure a suitable quantity of appropriate medicines is available for patient need is to be agreed and commence in June 2019.	Director of Shropshire Community Health NHS Trust Director of Shropshire Community Health NHS Trust	April 2019 June 2019
5.33	Waiting times for prisoners to be assessed for dental treatment should be in line with those in the community. (2.92, repeated recommendation 2.92).	Agreed	Additional dental clinics commenced with a contracted company in December 2018 and the waiting list is now reducing. Weekly monitoring of waiting times by the NHS Trust is taking place and service demand has now been mapped against current provision. A new contract with Time for Teeth (private company) has been agreed and will commence from April 2019.	Director of Shropshire Community Health NHS Trust	April 2019
	Time out of cell				

5.34	Prisoners should have at least 10 hours out of cell on weekdays. (3.8)	Not Agreed	This recommendation is not agreed as there is not currently any scope to revise the core day to permit more time out of cell than is already provided. Those engaged in full-time purposeful activity receive 9.5 hours out of cell during the week, but as there is a significant shortfall in commissioned activity spaces at HMP/YOI Stoke Heath there are a notable number of prisoners who are either unemployed or only in part-time activity. For part-time prisoners, the maximum time out of cell the regime can facilitate is 7.25 hours on weekdays together with the opportunity for up to 1-hour library access and 2.75 hours gym access per week. For unemployed prisoners the regime facilitates a maximum of 4-hours per day out of cell with an opportunity for up to 1-hour library access and 2.75 hours gym access per week.	Governor	
	Education, skills and work activities				
5.35	Prisoners should receive effective careers information, advice and guidance. (3.21)	Agreed	The dynamic purchasing system (DPS) is being used to commission a service that will provide an effective careers Information, Advice and Guidance (IAG) service tailored to individual needs. This service will need to be reviewed and recommissioned annually.	Governor	June 2019
5.36	Wing workers should be employed productively throughout the working week. (3.22)	Agreed	The Activities Manager has reviewed the allocation of wing workers to each wing with Residential Managers, who are developing further activities to ensure wing workers are employed productively throughout the working day. The responsibility for ensuring that Wing Workers are working productively sits with the Wing Supervising Officers and assurance will be provided by Residential Custodial Managers via monthly inspections of their areas of responsibility.	Governor	June 2019
5.37	Prisoners should participate in pre-release activities that prepare them effectively for rehabilitation and resettlement. (3.23)	Agreed	Virtual Campus (VC) activity will be expanded, including the areas it is used by the new digital solution and strategy, and usage will be monitored at the Regime Improvement Group meetings with relevant partners. The VC will be available in more classes and embedded into teaching through the use of virtual learning platforms. HMP/YOI Stoke Heath are currently commissioning IAG careers services that will include pre-release activities and employer engagement.	Governor & Director of Novus	June 2019 June 2019

			Once the enhanced through the gate (TTG) service is fully mobilised, HMP/YOI Stoke Heath will develop TTG data collection and analysis of prisoners' Employment, Training and Education destinations on release.	Governor, Director of Wales Community Rehabilitation Company, St Giles' Trust	December 2019
			Employability courses and the Job Club which are currently run at HMP/YOI Stoke Heath will be further promoted around the prison by the new IAG workers in partnership with the TTG service and supported by key workers, posters and leaflets.	Governor	September 2019
5.38	Tutors should ensure that the level of study challenges all prisoners to achieve their potential. (3.31)	Agreed	The new Prison Education Framework contract will improve information sharing across prisons, which will assist with the induction process and in identifying the correct starting point for learners. Tutors will ensure that learners are engaged in learning that is challenging and reflects their starting points. Tutors, through Quality First teaching, will plan thoroughly to ensure that learning is differentiated and meeting the needs of all learners in the class. This will involve the support of a peer mentor where appropriate. This will be monitored and developed through the Observation Teaching and Learning process and learning walks focusing on the specific area of 'differentiation' will be conducted by line managers throughout the quality cycle. The Internal Quality Assurance and External Quality Assurance process also supports the development in this area.	Director of Novus	September 2019
5.39	Prisoners in the production workshops should receive learning target planning and checks to ensure they achieve rapidly. (3.32)	Agreed	Instructors will set learning targets and review & record the progress quarterly. The Band 6 Activities Unit Manager Quality Assessment will be carried out as part of the staff appraisal process.	Governor	July 2019
5.40	English and mathematics provision should address all prisoners' needs. (3.33)	Agreed	Novus processes for initial assessments and diagnostic assessments will capture learners' correct level for those with higher abilities. Appropriate teacher support will be given.	Director of Novus	June 2019
5.41	Education managers should ensure that	Agreed	The SAR (Self-Assessment Report) Action plan will be used to drive forward improvements in achievement rates across all provision and ensure that the	Director of Novus	September 2019

	qualification achievement rates are consistently high for all programmes. (3.42)		department targets are met. Extra focus will be placed on the provision where courses achievement rates fall below the department average and these will be targeted through the SAR. Novus education managers will ensure high achievement on all courses by embedding and robustly working through the quality schedule and calendar. Novus have performance management and other poor performance measures which support this together with robust internal Quality Assurance and External Quality Assurance processes.		
	Reducing risk, rehabilitation and progression				
5.42	Prison offender managers should record all prisoner contact and assessments on P-NOMIS to aid communication across departments. (4.16, repeated recommendation 4.19)	Partly Agreed	This recommendation is partly agreed as some elements cannot be recorded on P-NOMIS, such as non-disclosed data, and therefore such information will be recorded on contact-entry sheets as an alternative. This will ensure the data is not lost, but available to only those who require access to it. All staff have been advised at the monthly OMU department meeting held in February 2019 to prioritise and record all actual contact with prisoners on P-NOMIS. All other comments, third party information, and non-disclosed information will be recorded in Contact sheet entries. This will be monitored by the Senior Probation Officer (SPO) in the OMU as part of the quality checks under the OMIC model and will form part of their supervision. Each Prison Offender Manager will have an entry check completed weekly and monitored by the SPO in OMU as part of the quality checks under the OMIC model.	Governor	June 2019
5.43	All prison offender managers should have regular professional supervision, casework reviews and appropriate training to aid personal development, and quality assurance should be extended across all offender management work to ensure consistency and	Agreed	The roll-out of the Offender Management in Custody (OMiC) model across the estate ensures there is a comprehensive training plan in place for Prison Offender Managers which is supported by Senior Probation Officers and the Learning and Development team. The Excellence and Quality in Probation (EQuiP) processes and digital tools being designed and implemented further supports key work and case management and provide tools to support consistent and effective delivery of offender management work. Additional e-learning refresher courses are being produced by Learning and Development as well as Local Delivery Unit development days within the community which will be optional for continuous professional development.	Deputy Director of Safety & Rehabilitation (HMPPS HQ)	April 2020

	effectiveness. (4.17, repeated recommendation 4.17)		Senior Probation Officers in prisons have responsibility to support and develop their offender managers in the community and custody including regular supervision of staff. The OMiC team have Key Work Implementation Managers overseeing quality and assurance within prisons. Assurance involves undertaking a detailed assessment of implementation activities so that key work is assessed as fully implemented. A shadow Key Performance Indicator (KPI) is to be introduced 2019/20. This will measure the percentage of key work sessions conducted out of those that were meant to take place in a given month. Work is also being completed to develop performance targets for Case Management.		
5.44	The range and number of accredited programmes provided should meet the identified needs of prisoners at Stoke Heath. (4.30)	Partly Agreed	This recommendation is partly agreed as the decision for programme delivery is not made at a local level. The Executive Director must approve a local delivery plan which is then forwarded to the prison sub-committee for final agreement. Additionally HMP/YOI Stoke Heath do not have the resources locally to fund the accredited programmes identified as being necessary for the prisoners at Stoke Heath. A Needs Assessment was completed in September 2018 using the OASys screening tool which highlighted potentially 117 prisoners that may have a learning disability. The establishment concluded that this evidences a high need and justification for delivering more 'New Me Strengths' course within the establishment (only 8 places are being offered annually).	Governor	Completed and
			A bid for resources was submitted to the regional Psychology Commissioners in November 2018 and a further request for additional staffing resources was submitted in February 2019. HMP/YOI Stoke Heath are awaiting the outcome of the bids.	Governor	Completed and ongoing

Recommendations	
Agreed	31

Partly Agreed	11
Not Agreed	3
Total	44