

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP GARTH

TIMETABLE	DATE	STATUS OF THIS RETURN
Full unannounced inspection	9–20 January 2017	
Report published	19 April 2017	
Action Plan submitted	24 July 2017	Attached

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1. Rec. no	2 Recommendation	3. Accepted/ Rejected/ Partially Accepted / Accepted Subject to Resources	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	Main recommendations To the governor				
5.1	A clear strategy and plan to reduce the levels of violence should be introduced. The effectiveness of actions to reduce violence should be monitored. (S55)	Accepted	<p>HMP Garth will undertake a comprehensive review of the violence reduction (VR) strategy in operation across the Long Term and High Security Estate (LTHSE) with a view of amalgamating it within HMP Garth's local systems. A terms of reference will be issued to provide a clear strategy plan to reduce the levels of violence which will identify stakeholders responsible for the delivery of a zero tolerance approach to violence. Consultation will also take place with the police and the Crown Prosecution Service to ensure that prosecutions are prioritised where appropriate.</p> <p>Publication of the strategy which will include information for prisoners, staff, and visitors on pathways to support victims as well as consequences for perpetrators of violence. Progress will be monitored at the VR meeting, senior management team (SMT), prisons scorecard, and by staff associations and the prisoner Community Action Support Team (CAST meeting.</p> <p>A senior manager has been appointed to concentrate on</p>	Head of Safety and Equalities	October 2017

			<p>matters of safety and equality.</p> <p>Training in support of the strategy will be carried out on staff training days and delivered by safer custody staff. Adhoc training sessions for managers will be undertaken during the core day outside of labour movement times to minimise disruption to the regime and maximise attendance. Compliance with the policy will be monitored by safer custody and reported during the safer custody meetings, SMT, the regional safer custody lead site visits.</p>		
5.2	<p>Greater managerial oversight and accountability of the segregation unit should be put in place, to ensure that all prisoners receive a basic regime and effective case management. (S56)</p>	Accepted	<p>A senior manager has been appointed as Head of Segregation and Discrete Units, who will oversee the segregation recovery plan formulated to develop the prison regime, staffing levels, incentives earned privileges (IEP), interventions, support, environment and case management. Whilst at the same time ensuring segregation is being used effectively.</p> <p>A recovery plan will be introduced to include improved case management for segregated prisoners with the introduction of a reintegration plan scheme which is linked to a bespoke segregation IEP policy and is managed by the Band 4 segregation supervising officer (SO) in partnership with the prisoner and the offender supervisor. This scheme will include improved risk assessment processes, future planning and setting of behaviour targets.</p> <p>Updates on the recovery plan will be overseen by the Deputy Governor during bilats and quarterly work stream meetings to measure progress.</p> <p>A business change request has been submitted for an uplift of two Band 3 prison officers to the daily profile to improve the consistency of the regime delivery. This will enable the establishment to increase regime provision throughout the core day and also offer regime in the evening thus allowing prisoners access to regime that mirrors that offered across the whole prison and more importantly phone access at a more suitable time for prisoners to maintain family ties.</p> <p>The new group will review and revise alternatives to segregation for prisoners. This will be done by creating</p>	Head of Segregation	July 2017

			<p>effective pathway options between the discrete units, Beacon unit, Residential Support Unit (RSU) and Building Hope Unit and Segregation, and developing progression planning to other prisons for those assessed as requiring a transfer.</p> <p>Daily feedback on issues within the Segregation Unit will be discussed at the operational morning meeting to ensure there is SMT oversight and support.</p> <p>HMP Garth are reviewing mental health provision to ensure it meets the needs of segregated prisoners and ensures improved recording systems are in place that reflect the work undertaken. These systems will include improved communication between mental health staff and segregation staff that ensures prisoner's needs are being shared, thus providing a level of consistency from all professionals in their contact with men subject to segregation.</p> <p>This review will also consider what mental health training is required for staff, this will be based on a needs analysis which will be undertaken once the revised systems for prisoners is up and running.</p>		September 2017
5.3	Staff presence and the supervision of all prisoner areas should be improved. Consistent and confident staff-prisoner relationships should be embedded which set clear expectations on behaviour of staff and prisoners. (S57)	Accepted	<p>The regional prison officer entry level training mentor has been tasked with improving staff confidence in managing poor prisoner behaviour.</p> <p>Body worn video cameras in response to violence levels are being rolled out along with the Five Minute Intervention (FMI) training. The FMI training will cover elements of expectations of how staff manage prisoner behaviour. This should improve staff confidence. Roll out is expected to be completed by December 2017.</p> <p>A bespoke work stream will be commissioned to look at improving staff and prisoner relationships. A terms of reference will be issued to look at ways in which relationships between staff and prisoners can be improved in line with the LTHSE rehabilitative culture ethos. This will incorporate the FMI, staff mentoring, buddy scheme for new entrants and middle management coaching.</p> <p>Clear expectations on behaviour of staff and prisoners will be outlined to custodial managers (CMs) and promoted through</p>	Head of Residential and Services	December 2017

			<p>bilats within residential.</p> <p>Effectiveness of delivery will be monitored by the Duty Governor through observations during the course of their daily rounds, which will be fed back at the following day's operational morning meeting.</p> <p>The Duty Governor will conduct rounds in visiting every residential area, walking into wing offices and visiting landings, questioning staff on concerns or ongoing matters of housekeeping gives insight into the wing and the staff and management grip.</p> <p>Wing SOs and CMs orderly officers and duty governors are briefed to support the presence of staff on the landings appropriately when prisoners are unlocked. The roll out of a rehabilitative culture from HMP Garth's designated units (Beacon, Therapeutic Community and RSU) to other areas of the prison will continue.</p>		
5.4	<p>Management oversight of diversity should be prioritised, to ensure that the needs of all prisoners from minority groups are identified, assessed and met, and that any negative perceptions of particular groups are understood and addressed. (S58)</p>	Accepted	<p>Overarching work stream to be commissioned to deliver the required improvements to equalities.</p> <p>Action will be taken to improve SMT attendance at the equalities action team (EAT) by incorporating this as a job objective with ownership of protected characteristic allocated within the team.</p> <p>SMT members will report on their areas of responsibility at EAT and SMT meetings about progress.</p> <p>Sub meetings will be established to allow specific forums for prisoners to address their concerns about any negative perceptions. A meeting terms of reference will be issued by the end of July 2017.</p> <p>Loss of equalities hours will be monitored via the weekly regime meeting and regime management plan review (the agreed protocol used to determine regime restriction to maintain safe decent secure regimes).</p> <p>HMP Garth will initiate and complete a review of all their local equalities policies and copies to be published to provide staff and prisoner awareness and easy access to the policies.</p>	Head of Equalities and Diversity	December 2017

			<p>HMP Garth will conduct a full review and re-launch the equalities action plan and ensure that it is maintained effectively to enable informed discussion and be reviewed at EAT meetings. Managers undertaking the reviews will first undertake an equality analysis surgery available from Her Majesty's Prison & Probation Service (HMPPS), Equalities Interventions and Operational Practice Group to support the correct determination of the review(s). SMT leads for each equality strand have been identified to ensure that a strategic management oversight is maintained when faced with competing priorities. Each functional head will report on their strand at the SMT as part of a rota.</p> <p>Equality monitoring trend data (when available) to be analysed and discussed at the equalities meeting which is held bi-monthly. Equalities questionnaires completed on reception and prisoner needs explored through induction interviews. The equalities subcommittee to meet monthly and forums to be held for the various strands and issues raised monitored via the equality action plan.</p>		
5.5	Prisoners should be able to access all primary care and hospital services within community equivalent waiting times. (S59)	Accepted	<p>A new health provider commenced April 2017. Contract performance meetings are attended by the Governor and head of reducing re-offending, and this will be part of the forum for two way feedback to enhance the service provided for prisoners. A monthly report will be provided to the Governor setting out outstanding appointments and any unacceptable delays so that these matters can be prioritised for action, and also to enable delivery to be effectively monitored.</p> <p>In addition, closer working with commissioners to allow a greater understanding of need.</p>	Governor	Completed and ongoing
	Recommendation to HMPPS				
	Offender management and planning				
5.6	Prisoners requiring a transfer on from HMP Garth should be moved without delay, in order to support their sentence plan delivery and progression, and enable	Accepted	<p>A strategic review has been commissioned by the Director of the LTHSE to look at population flows into, within and onward from directorate prisons. HMP Garth awaits the outcome of the review as progressive moves out of region remains an issue at this establishment (due to national population pressures).</p> <p>HMP Garth's relationship with 'core locals' is likely to improve</p>	Head of Offender Management Unit (OMU)	October 2017 and ongoing

	them to receive resettlement support in preparation for their release. (4.21)		under the leadership of a single Director and is likely to better facilitate the movement of prisoners, now that the LTHSEs is combined. Any problematic issues with transfer and progressive moves will be escalated to management by the Head of Offender Management unit (OMU).		
	Recommendations to the governor				
	Courts, escort and transfers				
5.7	New receptions should only be handcuffed if it is necessary and proportionate. (1.3, repeated recommendation 1.8)	Partially Accepted	<p>There is currently limited camera coverage within the sterile area, combined with the fact that escort staff do not carry radios, means that there is a risk around removing handcuffs when outside the security of the reception area. The use of handcuffs is necessary until prisoners are located safely and securely inside reception. However, if prisoners are arriving at or returning to HMP Garth and their intelligence reports are known to staff, a risk assessment will be completed to determine whether or not a prisoner needs to be handcuffed in the sterile area. This ensures processes are secure but appropriate to each prisoner's individual circumstances.</p> <p>A feasibility review will be undertaken to measure the security risks within the sterile area. This work will be completed jointly by the Head of Security and Head of Operations.</p> <p>Prisoner Escort and Custody Service contract staff will comply with the local security strategy of the prison. Where there are specific risks associated with the movement of a prisoner from a vehicle to reception escort staff will liaise with the prison staff in order to agree the level of restraint.</p>	Head of Operations / Head of Security and Prisoner Escort and Custody Service	July 2017
	Early days in custody				
5.8	Cells for new arrivals should be well prepared and contain all necessary equipment. (1.11)	Accepted	<p>Cell inventory checks will be implemented which will be included in daily accommodation fabric checks. Weekly rounds will be conducted overseen by residential CMs and checked by the Head of Residential during bilat meetings. These checks incorporated in the residential work stream and progress will be fed back to the Governor on a quarterly basis as well as providing updates via SMT meetings monthly.</p> <p>A new process has been introduced to improve the standards of service through a 'Room Ready' orderly process being implemented (whereby an employed prison orderly will assess a cell prior to it being occupied to ensure that it has the basic</p>	Head of Residential and Services	July 2017

			<p>facilities and equipment, i.e. – furnishings, mattress and other basic necessities. They will also check that the room is painted accordingly) will be adopted at HMP Garth. This will support the arrival experience of prisoners transferred into HMP Garth and is quality assured by Prison Officers prior to occupation</p> <p>Ongoing efforts to obtain cell furniture are being made. The situation continues to improve both with furniture and basic electrical items.</p>		
5.9	The contribution by prisoners to inducting new arrivals should be supported by clear staff direction, oversight and recording. (1.12)	Accepted	<p>The contribution by prisoners to the induction of new arrivals will be directly overseen by first night staff to ensure that direction, recording and quality checks are acceptably delivered. Two 'insiders' will provide support to new reception prisoners and will be situated in reception and supported and overseen by staff to ensure clear staff direction, oversight and recording. The first night office is staffed daily through the week and these officers deliver an initial interview which encompasses a comprehensive overview of HMP Garth, both verbally and via the 'Garth Offer', induction booklet.</p> <p>No formal induction presentation takes place due to the very small portion of new receptions which make this impractical. Instead, the induction process will be spread over the course of a week, during which time new arrivals see various prison services and partners, including chaplaincy, drug and alcohol partners, education and gym staff to aid swift transition.</p> <p>All of the above actions contribute to a comprehensive induction and this is monitored by the operations CM on a monthly basis and feedback provided for action by the head of operations.</p>	Head of Operations	July 2017
	Self-harm and suicide				
5.10	There should be a systematic exploration of the reasons for prisoners' self-harming, to inform an action plan for preventing further incidents. (1.27)	Accepted	<p>A systematic work stream to improve safer custody will be implemented with the terms of reference to include the necessity to review learning from acts of self-harm. When acts of self-harm occur, after an Assessment Care in Custody and Teamwork (ACCT) assessment the information will be gathered and recorded centrally in the safer custody database in order to identify trends or triggers. This information will be routinely reported and discussed at the safer custody meeting as a specific agenda item to ensure that learning is maximised.</p> <p>Governance of the work stream will be provided by the</p>	Head of Safety and Equalities	July 2017

			<p>Governor on a quarterly basis supported by monthly updates provided to the SMT meeting.</p> <p>Learning and actions identified as a result of the analysis of self-harm triggers recorded in the ACCT assessment will be recorded on the continuous improvement action plan, for follow up and monitoring. Learning from trends will be cascaded to staff and other departments in order to raise awareness and prevent repeat occurrences.</p>		
5.11	Investigations into incidents of life-threatening self-harm should include scrutiny of the actions taken by staff to prevent or minimise risk of harm. (1.28, repeated recommendation 1.44)	Accepted	All serious self-harm incidents will be investigated and the outcomes scrutinised by safer custody to identify learning which will be appropriately published to staff to prevent the likelihood of future occurrences.	Head of Safety and Equalities	July 2017
5.12	The use of the constant observation cell in segregation should cease. (1.29, repeated recommendation 1.42)	Accepted Subject to Resources	<p>Constant observation provision will be reviewed as part of the safer custody work stream.</p> <p>The terms of reference will include submitting bids for improved safer cell provision including the provision of gated cells located outside of the segregation unit. Bids to be submitted by July 2017 and will form part of the discreet unit review to possibly be included with the 'Building Hope' unit subject to risk assessment and in the longer term, in the healthcare centre, subject to the relocation of mandatory drug testing.</p> <p>Where it is unavoidably necessary to segregate prisoners that have an opened ACCT in such incidents will be authorised by the Governor or Deputy Governor.</p>	Head of Safety and Equalities	<p>March 2018</p> <p>July 2017</p> <p>Completed</p>
	Security				
	Strip-searching on entry to the segregation unit should be proportionate and reflect the risk presented. (1.43)	Accepted	<p>The searching policy published within the local security strategy stipulates unless intelligence suggests that it is necessary then a level B rub-down search should be conducted.</p> <p>A notice to staff will be published to remind all staff of this requirement.</p> <p>Reviews of instances of full searches in segregation will be</p>	Head of Security and Intelligence	July 2017

			monitored at the segregation monitoring and review group and security meetings to ensure that the search is proportionate to the risk in line with the local security strategy. These will be added to the agenda of both meetings to ensure governance arrangements are in place.		
5.14	Closed visits should be managed properly, removed at the earliest opportunity and used only for incidents related to visits. (1.44)	Partially Accepted	<p>The focus of the current closed visits policy is on the prevention of smuggled contraband, although this should not necessarily exclude other considerations for closed visits such as where a prisoner has history of, or risk of being, violent during visits. Prison staff are under a duty of care to keep prisoners safe and that duty naturally extends to visitors. Therefore various security measures such as restrictions on visits may be appropriate to ensure this duty is upheld.</p> <p>However, in each case the suitability of the imposition of closed visits is considered on the facts, and any closed visits decision must be necessary, proportionate and justified. The policy states closed visits may be imposed in cases where these measures are met and in the interests of upholding public safety, for the prevention of disorder or crime, and to ensure the good order and discipline of the establishment.</p> <p>HMP Garth's closed visits policy has been reviewed and a new policy is in place.</p> <p>Monthly reviews are taking place and only those prisoners with drug and other illicit items intelligence linked to the visits route are now placed on closed visits. This has resulted in a number of prisoners on closed visits at HMP Garth. Consistently in single figures, this figure now currently stands at eight.</p> <p>Monitoring takes place via a tracking system recorded at the security meeting which is chaired by the Deputy Governor.</p>	Head of Security and Intelligence	Completed
	Incentives and earned privileges				
5.15	The incentives and earned privileges scheme should be used proportionately by staff to address routine challenging antisocial behaviour and to incentivise positive	Accepted	<p>The PSI 30/2013 IEP requirements will be met through local policy and good behaviour will be recognised and action taken against antisocial behaviour.</p> <p>The level of appropriateness of prisoners placed on enhanced will be quality assured by sampling case notes, searching for negative and positive entries that have influenced the trigger of an IEP review. This will be further supported through sampling</p>	Head of Residential and Services	October 2017

	behaviour (1.47).		<p>of IEP reviews and the contents of those reviews. The process will be overseen by the wing CM and the Head of Residence will monitor through bilats providing governance oversight.</p> <p>Adjudications will be reviewed to assess the use of the adjudication disciplinary process in comparison to utilising the IEP process and whether IEP sanctions are the most appropriate sanction.</p> <p>CMs will provide feedback during IEP bilats to ensure that there is fairness and consistency. Staff will be coached on alternatives to disciplinary sanctions as part of the FMI training which is currently being rolled out across the establishment.</p> <p>Progress against this recommendation will be reviewed and feedback or any concerns reported to SMT.</p>		
5.16	<p>Discipline</p> <p>All documentation relating to use of force should be fully completed. (1.52)</p>	Accepted	<p>Notices have been published to staff advising them of the requirement to complete Use of Force (UoF) paperwork.</p> <p>Staff with a backlog of paperwork are receiving support to complete this on training days.</p> <p>All incidents of UoF will be overseen by the daily operational Band 5, who will ensure effective management of the incident and co-ordinating of reports and record keeping. This will be with the expectation of collating paperwork within 72 hours. This will afford better ownership and accountability. Improved partnership working between the prison and healthcare has been developed that ensure all UoF incidents are either attended by a healthcare professional or prisoners are assessed at the earliest opportunity following UoF, this includes regular communication between healthcare and the Band 3, administrator working within segregation.</p> <p>The UoF co-ordinator has introduced improved systems that ensure all planned interventions are video recorded and that these are accurately documented and storage appropriately. This has been further improved with the introduction of BWVC and systems are in place that ensure these are logged, recorded and stored effectively.</p> <p>Ongoing monitoring will be provided by the head of</p>	Head of Segregation	July 2017

			segregation & discrete units and feedback given during the operational morning meeting to ensure timely and satisfactory completion is achieved.		
	Residential units				
5.17	The older units, including shower areas, should be refurbished. Showers and toilets on all units should be properly screened to provide privacy. (2.6)	Accepted Subject to Resources	<p>A full assessment of residential accommodation to take place with prioritised bids for refurbishment presented to the Director. Secondary bids will be drafted for the eventuality that full refurbishment is ruled out so that shower areas and toilet screening requirements can be met.</p> <p>A programme of work to improve the cellular flooring is already underway.</p> <p>Early scoping for the provision of a painting party is underway to improve the presentation of the decorative environment.</p> <p>A review of cleaning schedules to be carried out to ensure all residential areas are adequately covered and that management checks are effective.</p> <p>A current piece of work is underway to identify all residential areas that are currently below requirements and those that will be similar in the near future.</p>	Head of Residential and Services	July 2017 and ongoing
5.18	Single cells should not be used to accommodate two prisoners. (2.7, repeated recommendation 2.10)	Rejected	<p>The occupancy of prison cells is determined by establishments and certified by the Director in accordance with PSI 17/2012, which provides clear guidelines for determining cell capacities. Cells will only be shared where a Director has assessed them to be of adequate size and condition for doing so. All accommodation is compliant with the certified cell certificate.</p> <p>Utilisation of operational capacity in relation to population management need will be kept under review to enable consideration of potential opportunities to reduce the level of occupancy in the cells highlighted by this recommendation.</p>	Executive Director, Long Term High Security	
5.19	Applications should be made confidentially and responses should be monitored, to ensure that they are timely and helpful. (2.8)	Accepted	<p>Prisoner involvement continues to assist in monitoring the general standards of application responses and supported by monitoring conducted by wing staff. Records are being kept on the timeliness and quality of responses.</p> <p>Posters outlining the service and any other option such as other documents that are utilised to access services will be published, further highlighted through the prisoner information desk (PID) and the prisoner's council identified locally as</p>	Head of Residential and Services	July 2017

			<p>community action support team (CAST) meeting.</p> <p>Where a prisoner feels an application should be treated confidentially an envelope addressed to the prisoner will be directed through the internal post system to the recipient (bypassing by the PID worker).</p> <p>A notice to this effect will be published to all staff and prisoners. This will also be outlined to the prisoner information desk workers and CAST members.</p>		
5.20	Prisoners should have ready access to adequate clean and suitable clothing and other basic essentials. (2.9)	Accepted	<p>The Head of Residential and Services will meet with the laundry provider to address concerns. In addition, the store manager will monitor performance issues and ensure timely and appropriate escalation to the Governor and Public Sector Prison Industries (as the service provider).</p> <p>This matter will be further monitored through the complaints analytical report and through feedback from the prisoner consultative forums.</p> <p>Quality assurance checks are in place in the main stores department to ensure quality of goods received and sent from neighbouring establishment in relation to clothing, as well as stock control to ensure correct amount of items received.</p> <p>To add continuity to the cleaning officer's role a wing 'Janitor ' role has been created to assist in monitoring stock and supply of cleaning products.</p>	Head of Residential and Services / Head of Business Assurance	July 2017
5.21	Prisoners should be able to access their stored property promptly. (2.10)	Partially Accepted	<p>Frequency of access to property stored locally is a decision for individual Governors. Other than in exceptional circumstances or when they are about to be released prisoners will not be allowed access to property stored centrally at the Ministry of Justice National Distribution Centre Branston within 12 months of the property being put into storage and then only if the prison has capacity within the volumetric control limits or the items are handed or sent out.</p> <p>Access to stored property has been reviewed by the Head of Operations. Measured timeframes demonstrate a window of between 1 and 14 days from application to the prisoner arriving in reception to collect his property, dependent on time of application received, number of applications received and the</p>	Head of Operations	July 2017

			<p>nature of the request. This is subject to resourcing on the day so a specific timescale is not provided, however the guideline of 14 days will be publicised to prisoners to set expectations and will be monitored as expected practice.</p> <p>Property related complaints will be monitored via the SMT complaints analytical report and through user surveys carried out by the CAST membership.</p>		
	Equality and diversity				
5.22	<p>A professional telephone interpreting service should be used for all prisoners requiring it, particularly in circumstances where confidentiality and accuracy are critical. (2.26, repeated recommendation 2.35</p>	Accepted	<p>The nationally commissioned / contracted translation service is in place at HMP Garth.</p> <p>Posters are published on units and efforts will be made to ensure staff are made aware of this service and how to utilise it via speed training events, notices, posters etc.</p> <p>A prisoner notice will be circulated in various languages outlining the service as well as an email notice to staff explaining the procedure.</p> <p>The Equalities Officer assists with the delivery of foreign national surgeries in order that prisoners have the opportunity to access equalities staff on a one to one basis and the Equalities Officer is aware of any underlying issues, HMP Garth is currently seeking engagement from Foreign National (FN) prisoners to become FN representatives. However, the prison does currently have FNs represented with the EAT subcommittee. Induction staff are advising equality colleagues of any prisoners new to HMP Garth with difficulty communicating due to language barriers and this is also an element of the equalities questionnaire to capture issues and ask about reasonable adjustments needed.</p>	Head of Safety and Equalities	September 2017
5.23	<p>Prisoner carers should be trained and operate under clear guidance. (2.27)</p>	Accepted	<p>A peer support policy will be implemented by the Head of Reducing Reoffending to outline the expectation of all peer workers. The viability of training will be scoped by the Head of Reducing Reoffending in terms of provision for prisoners under the healthcare contract. Formal accreditation and reward will be included in the considerations.</p> <p>There is a clear job description and guidance for prison carers in place outlining what they can and can't do to support someone else. This was recently been republished to all staff. All prisoners undertake manual handling training.</p>	Head of Safety and Equalities / Head of Reducing Reoffending	October 2017

	Complaints				
5.24	The monitoring of complaints data should include protected characteristics, and any potential inequalities should be referred to the equality action team meeting. (2.37)	Accepted	Key trends identified through the performance hub data which will enable HMP Garth to identify any inequalities and take action accordingly. This is discussed at the SMT meeting monthly. The monitoring of complaints including discrimination incident reporting forms and trends will be reviewed as a standing item at the SMT and the EAT meeting, including protected characteristics data (a member of the SMT is responsible for each protected characteristic).	Head of Business Assurance	July 2017
	Legal rights				
5.25	Legal visit rooms should provide better privacy. (2.40)	Accepted	The legal visits area will be reviewed to ensure rooms provide adequate privacy through conducting a comprehensive survey on legal visitors and prisoners. Through the survey feedback HMP Garth will ascertain what further actions are required and these results will dictate the nature of any potential bid to improve the environment or alterations required.	Head of Operations	September 2017
	Health services				
5.26	Health care delivery should be informed by a current health and social care needs assessment. (2.51)	Accepted	NHS England, North West region are currently undertaking a review of the process and format of health needs assessments across North West region prisons (HMP Garth will be included in this work). This will be formulated in to the healthcare delivery and this includes the population social care needs. HMP Garth will implement a social care policy and a user forum to obtain feedback.	NHS England – North West	September 2017 and ongoing
5.27	All clinical environments should comply with infection control standards, and the size, ventilation and décor of the waiting area should be appropriate. (2.52)	Accepted	All clinical areas now comply with the infection prevention and control guidelines. To address the issues identified concerning the waiting area, the Head of Healthcare and Head of Reducing Reoffending will complete a business case to redevelop the waiting area, in order to improve the service users' experience.	Head of Healthcare	September 2017
5.28	Responses to health care complaints should consistently address all issues raised. (2.53)	Accepted	There is now a robust management system in place to oversee the complaints procedure. All complaints are now initially dealt with locally and responded to within 3 working days and a written response within 7 days. Should a patient wish to escalate their complaint a clear formal process is in place. All staff will undertake specific training that addresses the quality of complaint responses. This training is a tailored programme to assist staff in their quality of answers when	Head of Healthcare	September 2017

			<p>responding to complaints. An audit process is also in place to monitor the quality of the complaint responses.</p> <p>New documentation and guidance about the complaints process has been distributed on each wing.</p> <p>Complaints are monitored throughout the procedure by the Greater Manchester Mental Health Trust (GMMHT) customer care department. All complainants are advised that if they are not fully satisfied with the response received it will be referred to director level and / or to the ombudsman.</p>		
5.29	<p>Prisoners should have easy access to health promotion services, including barrier protection and smoking cessation, and relevant regularly updated health promotion information. Older prisoners should receive regular individualised health checks. (2.54)</p>	Accepted	<p>A local delivery group has been developed, the group is represented by all area of the prison, healthcare, HMPPS, Discover (a local substance misuse service), and Beacon. The role of the group is to improve the experience of the service user, focusing on areas such as regular health promotion, barrier protection and smoking cessation. A review of current service delivery will take place, and an organisational remodelling is to be rolled out in line with current healthcare contract. A lead nurse will be identified to improve the access to healthcare for the older population.</p> <p>HMP Garth is due to become a smoke free prison in September 2017. Smoking cessation is being managed through a local delivery group chaired by a HMPPS operational manager. Healthcare have significant input into this group. Smoking cessation sessions have already been rolled out to prisoners.</p>	Head of Healthcare	September 2017
5.30	<p>Prisoners with life-long conditions should receive regular reviews which generate an evidence-based care plan, delivered by appropriately trained and supervised staff. (2.61, repeated recommendation 2.78)</p>	Accepted	<p>The Healthcare provider, Lancashire Care Foundation Trust is no longer responsible for the provision of healthcare at HMP Garth. On 1 April 2017 the partnership of Greater Manchester Mental Health NHS Foundation Trust (GMMHT) and Bridgewater Community Healthcare NHS Foundation Trust (BWCH) became the provider. The findings pertain to the previous provider, however the GMMH/BWCH partnership are committed to improving patient care and will undertake all necessary actions (as below).</p> <ul style="list-style-type: none"> • Develop a SOP (standard operating procedure) to guide staff on the management of long term conditions. • Staff to be identified to attend external training courses around the management of long term conditions. 	Head of Healthcare	September 2017

			<ul style="list-style-type: none"> Weekly staff meetings to discuss the care needs of the identified prisoners. <p>The health provider is also introducing smarter ways of working by updating and allocating the clinic system to meet the demands of the service and the individual needs of prisoners with long term conditions. Lead nurses will be identified to manage prisoners with long-term conditions, and adequate training and resources will be provided to support this work.</p>		
5.31	The prescribing and administration of medicines should ensure that opportunities for diversion and bullying are reduced. (2.69)	Accepted	<p>Areas for diversion have been identified and additional gates have been fitted to control and limit access.</p> <p>Supervising prison staff will be briefed and reminded of the importance for direct supervision when prisoners receive their medication.</p> <p>The healthcare provider has established protocols in place for routine spot checks to be completed on prisoners receiving in possession medication. Spot checks are currently being delivered solely on an intelligence led basis until staffing levels improve sufficiently.</p> <p>GMMH / BWCH partnership are committed to improving patient care and will undertake all necessary actions (below).</p> <ul style="list-style-type: none"> Actively recruit to address the identified shortfalls in qualified nursing staff- posts are out to advert. To take place a trial of wing based medication lockers. The lockers will be stored on the secure corridor so that no medication is kept in cells, prisoners will be allowed access to their medication one at a time, the process will be supervised by wing officers to prevent incidents of diversion and bullying. <p>A medicines management committee will review prescribing practice to evaluate less tradable options.</p>	Head of Healthcare	October 2017
5.32	Prisoners should receive their required medicines in a timely manner, with good supervision from	Accepted	Continued work and audits are in place to improve the supply of prescribed medication, other avenues are being explored by the healthcare provider and HMP Garth.	Head of Healthcare	September 2017

	discipline staff to ensure adequate privacy. (2.70)		Medication will be delivered where appropriate to wing based lockers to allow prisoners to receive their required medicines in a timely manner. The Head of Healthcare and Head of Reducing Reoffending to submit a business case to redevelop the treatment area, in order to improve service users' experience.		
5.33	Prisoners who do not attend for prescribed medication should be followed up systematically, within a well-understood policy. (2.71)	Accepted	A local standard operating procedure is to be developed to address the issues identified by the inspectorate and monitored by the Governor and SMT. GMMH will ensure that prisoners who do not attend for their prescribed medication will be paid a visit the subsequent day and if they fail to attend twice an appointment will be booked into to see the doctor for a medical review to ascertain the reasons and whether they still need the medication. GMMH have a clearly defined policy about missed medications in place. All prisoners to sign a compact, which details the consequences. These are reiterated by staff following any missed medication.	Head of Healthcare Greater Manchester Mental Health Trust (GMMHT) Governor	September 2017
5.34	The dental X-ray equipment should be maintained appropriately. (2.74)	Accepted	A systematic review of the service contracts took place and deficits have been addressed. Progress will be measured at the healthcare quarterly contract meeting. All remedial work has been completed. A weekly audit sheet has been developed for the dental service. All equipment requiring regular maintenance within the healthcare department is stored on a local database and control by the support service supervisor.	Head of Healthcare	Completed
5.35	All discipline officers should receive mental health awareness training, to enable them to recognise and support prisoners with mental health problems. (2.81)	Accepted	GMMH / BWCH partnership is committed to improving patient care and will undertake all necessary actions (below). <ul style="list-style-type: none"> GMMH will be deliver mental health awareness training at a training day in August 2017 and plans to incorporate this for new prison staff. Feedback will include an assessment to determine whether the training was a success. Progress will be monitored. 	GMMHT Lead	September 2017
5.36	Patients requiring a transfer under the Mental	Accepted	The current Department of Health Good Practice Procedure Guide, the transfer and remission of adult prisoners under s47	National Health Service England	October & Ongoing

	Health Act should be assessed promptly and transferred within the current NHS transfer guidelines. (2.82)		<p>and s48 of the Mental Health Act, 2011, suggests that patients can be assessed and transferred to hospital within the period of 14 days.</p> <p>All patients requiring transfer under the Mental Health Act are assessed promptly, and every effort is made to expedite transfers. However, this is dependent on the availability of Mental Health hospital beds which is beyond the control of the prison's healthcare.</p> <p>The current Prison Transfer and Remission Guidance published by the Department of Health in 2011 is being reviewed. In particular, a focus of the work is about ensuring that the most appropriate timescales are developed and implemented in relation to prison transfers and remission, taking into account clinical urgency and need.</p> <p>It is anticipated that revised timescales for transfer from prison to hospital will be developed by autumn 2017 to enable the current guidance to be reviewed by the end of the year.</p> <p>HMPPS is working with NHS England to ensure assessments and transfers to hospital from prison take place within appropriate timescales. Where there are delays evident, work is underway to establish the reasons for this and work collaboratively to address the issues.</p>	(NHSE) / Head of Health Care and Her Majesty's Prison and Probation Service (HMPPS)	
5.37	Prisoners with social care needs should be assessed within the agreed timescales and have their identified needs met in a timely manner. (2.84)	Accepted	<p>A systematic review of the service contracts has taken place and deficits have been addressed. The social care policy will be reviewed to identify gaps in provision and responsibilities.</p> <p>Assessment of patients is the responsibility of the local authority and timeliness of assessment is outside the scope of the healthcare provider. GMMH / BWCH partnership are committed to improving patient care and will undertake necessary actions (below).</p> <ul style="list-style-type: none"> • A referral pathway has been developed by Lancashire County Council (LCC), the referral pathway and has been shared with the relevant departments within the prison. • A local pathway for monitoring referrals is in place, which is reviewed by the admin team on a weekly basis and any outstanding referrals are escalated to LCC. 	Head of Healthcare and Lancashire County Council	September 2017

	Learning and skills and work activities				
5.38	Permitted personal activities during the working day should be minimised, to ensure that more prisoners attend their education and workplace. (3.9)	Accepted	<p>A review of the activities provision will be undertaken to maximise education and workshop attendance.</p> <p>The activities hub will monitor allocation to ensure activities are appropriate and to avoid unnecessary scheduling clashes.</p> <p>A review of gymnasium provision will be undertaken to explore possible options as well as a review of education provision prior to implementing Offenders' Learning and Skills Service agreement 5.</p> <p>Progress will be tracked via the Reducing Reoffending work stream and by identifying the current activities that interrupt both work and education. Where feasible, HMP Garth will reduce the number of prisoner appointments in the core day and schedule these for the evening.</p>	Head of Reducing Reoffending	September 2017
5.39	The range and variety of activities for vulnerable prisoners, sex offenders and those on the segregation unit should be increased. (3.15)	Accepted	<p>A comprehensive activities review will be undertaken to look at ensuring parity between all populations held at HMP Garth. Development work in relation to activities for segregated prisoners will be explored and overseen as part of the segregation work stream and include in cell provision for those prisoners prepared to engage.</p> <p>As part of the reforms detailed within the Prison Safety and Reform White Paper published in November 2016, unnecessary rules and governance have been stripped from education contracts to allow governors more oversight and control of existing services. HMPPS will also be making prison governors fully responsible for the education delivered in their prisons so that they can purchase the services they think are most appropriate for their prison. This means governors will be able to decide how to structure their education, who provides their learning delivery and how they will spend their budgets effectively.</p>	Head of Reducing Reoffending	September 2017 Ongoing
5.40	Instructors should set sufficiently individualised and clear learning targets for prisoners in vocational training and work, so that they are clear about their achievements and complete their qualifications quicker.	Accepted	HMP Garth are currently developing a training package that will give clear guidance and instruction, to provide instructors with the skills to undertake individual learning plans and set clear learning targets for prisoners, which will include encouraging prisoners to undertake work place qualifications. Individual learning plans (ILP), combined with the Skills Action Plan written by the National Careers Service, will identify the prisoner needs and identify specific training / developments needs and outcome requirements. Progress will be monitored	Head of Reducing Reoffending	October 2017

	(3.23)		through quarterly reviews of ILPs within the workshops, at Quality Improvement Group (QIG) meetings, and at instructor's appraisal reviews.		
5.41	Tutors should provide prisoners with effective feedback on how to improve their work, so that they achieve their full potential. (3.24)	Accepted	Novus (the education provider) undertakes annual and routine observations of teaching and learning, where they routinely check the quality and effectiveness of teaching and prisoner engagement. Any tutors who fail to achieve a good or better will be set improvement objectives and a support plan, which will include an allocated mentor, from Novus. Regular support and observations will continue until a higher standard is achieved.	Head of Reducing Reoffending	September 2017 and ongoing
5.42	Instructors should encourage prisoners in work to take up job-specific vocational courses and gain qualifications. (3.29)	Accepted	HMP Garth are currently developing a training package that will provide clear guidance and instruction to instructors with the skills to encourage prisoners. Progress will be monitored through meetings and during instructors' appraisal reviews.	Head of Reducing Reoffending	October 2017
5.43	Instructors should recognise and record the development of prisoners' employability, personal, English and mathematics skills. (3.30)	Accepted	HMP Garth are currently developing a training package that will give clear guidance and instruction for instructors to recognise and record prisoners' development. Progress will be monitored through meetings and at instructors' appraisal reviews.	Head of Reducing Reoffending	October 2017
5.44	The achievements of different groups of prisoners in education, vocational training, work and the gym should be monitored systematically, to ensure that all groups of prisoners achieve well. (3.34)	Accepted	HMP Garth will further develop monitoring prisoners' achievement through engagement to ensure that accurate achievements are captured via the QIG, the activities strategy and education contract meeting. Novus will continue to fully monitor all prisoners via the data book, learner record system and education tool. The Physical Education (PE) department, library and workshops have been tasked in setting up databases that will monitor engagement, attendance and achievements of all prisoner groups. Analysis will be undertaken quarterly via the QIG and will provide evidence to support any needed change in strategy.	Head of Reducing Reoffending	September 2017
5.45	Prisoners' access to the library should be improved by the provision of effective arrangements for escort staff. (3.39)	Accepted Subject to Resources	The library is contracted to operate Monday to Thursday mornings, afternoons and evenings and Friday morning and afternoon (weekend library is unavailable). HMP Garth will endeavour to ensure that regular access is available to the library subject to staffing resourcing of escorting staff. Loss of planned hours will be monitored at the morning daily operational meeting and monthly by the SMT	Head of Reducing Reoffending	July 2017

			through assessing the functional heads report. Recruitment of additional staff is currently ongoing and once achieved will permit regular access to the library provision.		
5.46	All new prisoners should have an effective induction to the library and its resources. (3.40)	Accepted	HMP Garth will adapt the current induction process to include an effective induction to the library and its resources. The library has been tasked in setting up databases that will monitor engagement, attendance and usage of all prisoner groups. Analysis will be undertaken quarterly via the QIG and will provide evidence to support any needed change in strategy.	Head of Reducing Reoffending	August 2017
	Physical education and healthy living				
5.47	Outside team sports should be provided. (3.46)	Accepted Subject to Resources	HMP Garth conducted a security risk review. A local decision was taken to use the existing sports field to undertake outside activities. However, a significant amount of work is required to make the area fit for purpose. Due to costing involved, this work is being undertaken locally by the Land Based Activities team (Farms & Gardens). It is anticipated, weather permitting, that it will be ready by September 2017.	Head of Reducing Reoffending	September 2017
5.48	Arrangements for the maintenance of gym facilities on the wings should be clear. (3.47)	Accepted	The current Amey contract does not include the maintenance of gym facilities located on the residential units. Advice will be sought from the Service Delivery Manager, and Regional Estates Manager how to have this included within the asset register and ensure maintenance and timely repairs. Wing managers will also be reminded to be proactive in monitoring provision and feedback any issues to the Head of Residence via bilats.	Head of Reducing Reoffending	July 2017
5.49	Data on the usage of PE facilities should be analysed, to identify if any particular groups of prisoners are not accessing them. An effective strategy should be developed to address any issues that are identified. (3.48)	Accepted subject to resources	HMP Garth will further develop monitoring of prisoner engagement of PE facilities to ensure that an accurate 'footfall' is captured to include different prisoner groups, assess usage, and targeting under usage within defined groups. The PE department has been tasked in setting up databases to monitor engagement, attendance and achievements of all prisoner groups. Analysis will be undertaken quarterly via the QIG and will provide evidence to support any needed change in delivery to ensure services are provided that meet the needs of all prisoners at HMP Garth.	Head of Reducing Reoffending	August 2017
	Strategic management				

			<p>replaced by offender managers, who will be based within the prison. These prison offender manager posts will be held by a combination of Band 4 prison staff and NPS probation officers.</p> <p>Roll out of the new OM model has commenced within the 10 pathfinder sites and HMP Berwyn. HMPPS are currently working through the roll out schedule into the wider estate. The new OM model will be in place in all closed prisons by March 2019 and hopes to be announced the expected roll out schedule in due course.</p>		
5.52	<p>The frequency and type of contact with offender supervisors should be based on the prisoner's level of risk and need. It should provide meaningful engagement and encouragement to progress, alongside appropriate offence-focused work. (4.11)</p>	Accepted	<p>All OSs to be emailed and reminded regularly through team briefings that the frequency and type of contact should be based on the prisoners level of risk and need. Effective contact through sentence plan boards to encourage prisoners to progress alongside appropriate offence-focused work.</p> <p>Monthly quality assurance checks of contact levels is in place and quality assured by the Band 5 CM.</p> <p>The new OM model will concentrate resources to where they are most needed. All prisoners will have the support of a key worker. A main part of their role will be to motivate throughout the sentence to progress and achieve the sentence planning objectives. For higher risk cases, NPS and selected Community Rehabilitation Companies (CRC) cases will have additional support of a prison offender manager (POM). POM's will consist of a mixture of probation officers and prison service Band 4 staff depending on the complexity of the case. POM's will be supervised and line managed by a senior probation officer (SPO) who will work in the Governor's line.</p>	<p>Custodial Manager</p> <p>HMPPS</p>	<p>Completed</p> <p>Ongoing until March 2019</p>
5.53	<p>The quality of risk of harm analysis, management plans and MAPPA reports should be improved, to achieve a consistently high standard. (4.16, repeated recommendation 4.22)</p>	Accepted	<p>OSs to complete OASYS as per guidance notes and this will inform the planning.</p> <p>Risk of Serious Harm training has been carried out since the inspection resulting in an improvement to the completion of OASY's.</p> <p>All multi-agency public protection arrangements (MAPPA) F forms (a completed by key stakeholders which provides information from the prison perspective as a responsible agency under the MAPPA guidance) will be countersigned and</p>	Head of OMU	Completed

			<p>completed by a public protection manager.</p> <p>All MAPPA 2-3 cases will be transferred on a timely basis to the high risk pod in the OMU (a unit where the high risk prisoners are managed by the probation officers and two trained operational OSs).</p> <p>The countersigner will quality assure MAPPA F forms and this will be further quality assured by the relevant Local MAPPA Strategic management Board. This is demonstrated by the countersigning process of OASYs and the QA of a nationally selected sample of both of the above as well via line management supervision.</p> <p>The new offender management in custody model, will introduce a Head of Offender Management delivery, this post will be held by a SPO in all closed prisons. Part of the focus of this post will be to drive up the quality of offender management in custody, they will also line manage both prison service and probation office prison offender managers to improve the quality of reports.</p> <p>The national MAPPA team are working with De Montfort University to revise the MAPPA F form. The final outcome should improve the quality of reports and raise awareness of the intelligence report across the prison estate.</p>		April 2018 and ongoing
	Reintegration planning				
5.54	Provision of money management training and debt advice should meet the needs of the prison population. (4.36)	Accepted	<p>The One3One function of the rehabilitation services group will support the Governor and head of reducing re-offending to identify and acquire appropriate training to meet the action identified above.</p> <p>As part of the reforms detailed within the Prison Safety and Reform White Paper published in November 2016, unnecessary rules and governance have been stripped from education contracts to allow governors more oversight and control of existing services. HMPPS will also be making prison governors fully responsible for the education delivered in their prisons so that they can purchase the services they think are most appropriate for their prison. This means governors will be able to decide how to structure their education, who provides their learning delivery and how they will spend their budgets effectively.</p>	Head of Reducing Reoffending	

			<p>The Head of Reducing Reoffending (in conjunction with education department) will investigate the potential of delivering money management training as part of education provision. It is hoped governor empowerment in relation to the control and expenditure of the education budget will enable this to be procured.</p> <p>Debt advice service is currently not resourced, or funded, as HMP Garth is non-resettlement prison. Prisoners who require such advice, can engage with their offender manager, who can authorise this work via the 'Rate Card' associated with the CRCs.</p> <p>Research in to best practice will also be undertaken within the LTHSE as well as undertaking a review of potential options for third sector involvement in debt and money management.</p>		September 2017
5.55	The children and families provision should be improved and expanded to reflect the needs of a long-term population. (4.43)	Accepted	<p>The Head of Operations will undertake a full review of the children and family pathway to look at ways in which provision can be expanded or improved. This will form part of the bespoke pathways reviewed quarterly by the Governor and monthly by the SMT. There are several plans in motion to improve the family pathway at HMP Garth. A monthly family pathway meeting is held which ties together the various partner agencies and has boosted the pathway since inspection. Family visits have been extended to reflect the needs of the long-term population to spend as much time building family ties as possible. Prisoner representatives are a regular part of the family pathway meetings to ensure their opinions are heard and factored in.</p> <p>New family services contracts are due to commence on 2 October 2017. Governors have been instrumental in devising specifications for the new services. Contract management will encourage ongoing review.</p>	Head of Operations	October 2017 and ongoing
5.56	Access to the visits hall should be improved, to avoid unnecessary delays in the start of visits. (4.44, repeated recommendation 4.54)	Accepted	<p>A comprehensive review of visits has commenced to look at staffing, timings and the environment of the visits hall. This will form part of the families work stream. Proposals include allowing visitors to enter the hall earlier as well as a review of entry searching procedures. In the interim, managers will actively monitor and drive timings to optimise time during visits.</p> <p>Visits managers have been tasked to ensure that the timings of</p>	Head of Operations	October 2017

			visits are driven and adhered to. Installation of biometric scanners will speed up access to the visits hall which will also assist.		
5.57	All sex offenders should undertake appropriate offence-focused work. (4.50)	Partially Accepted	<p>Core sex offending treatment programme(s) are no longer commissioned at HMP Garth. The replacement programmes are accessible to men who are in denial of their offending but suitable in other regards. Accredited programmes are not commissioned for prisoners convicted of sexual offending with a low risk of re-offending given the current evidence base.</p> <p>OSs through interaction and intervention processes will identify suitable offence related work. Prisoners identified as suitable to undertake programmes will be allocated accordingly.</p> <p>Availability of offence focussed work will be formulated by a needs analysis and population review.</p> <p>Consultation will be conducted by the head of psychology and the LTHSE estate psychology lead to maximise delivery options for this prisoner cohort.</p>	Head of OMU and Head of Reducing Reoffending	July 2017

Recommendations	
Accepted	47
Accepted Subject to Resources /Partially Accepted	9
Rejected	1
Total	57