

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP THAMESIDE

| TIMETABLE | | STATUS OF THIS RETURN |
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| Announced inspection | 1 – 5 September 2014 | |
| Report published | 20 January 2015 | |
| Action Plan submitted | 2 April 2015 | Attached |

ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP THAMESIDE

POSITION AS AT: March 2015

| 1. Rec. No. | 2. Recommendation | 3. Accepted/ Rejected | 4. Response Action Taken/Planned | 5. Function Responsible/ Policy Lead | 6. Target Date |
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| | Main recommendation to NOMS and the governor | | | | |
| 5.1 | Probation staff in the community should complete offender assessment system (OASys) and home detention curfew reports on time. Senior managers should monitor timeliness and produce an action plan to improve it. (S56) | Accepted | Reasons for delays in the production of HDC reports are being explored to see which areas are affected. A system has been put in place to monitor the date reports are requested, the dates they are chased and where problems arise, that this is escalated to Head of Offender Management to raise with National Probation Service (NPS) / Community Rehabilitation Company (CRC). | Sentencing Policy Unit Senior Manager Offender Management | Completed and ongoing |
| | Main recommendations to the governor | | | | |
| 5.2 | The amount and range of learning and skills activity should be increased and should include good quality work and vocational training. (S55, repeated recommendation HP57) | Accepted | Initial discussions have taken place to increase the amount and range of learning and skills and there are plans to provide/increase vocational training opportunities. The current policy on activities is currently being reconsidered to introduce part time working, in addition to embedded learning in the sports academy | Senior Manager Prisoner Activities and Learning | October 2015 |
| 5.3 | The transfer list should be kept up to date and sentenced prisoners should be transferred swiftly. The number of prisoners on transfer holds should be reduced and all holds should be time bound. (S57) | Accepted | A new database has been established which ensures Observation, Categorisation and Allocation (OCA) are fully aware of those eligible to transfer. A population management meeting will be held fortnightly to oversee this process. A policy for prisoner holds will be introduced which will reduce the amount of prisoners on hold and enable managers to monitor the reasons and length of time prisoners are kept on hold. | Senior Manager Offender Management & Senior Manager Prisoner Activities and Learning | August 2015 |
| 5.4 | Prisoners should be supported in finding suitable | Accepted | Steps will be taken to ensure all partners are working | Senior Manager | October |

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| | employment, education or training on release and this should include timely advice from the careers service and access to virtual campus and job search facilities. (S58) | | together to maximise opportunities for prisoners, allowing for completion of employability skills learning using local labour market intelligence as a driver. This will include education, training and self-employment workshops. | Prisoner Activities and Learning AD Reducing Reoffending | 2015 |
| | Recommendation to the Prison Escort and Custody Services | | | | |
| | Courts, escort and transfers | | | | |
| 5.5 | Person escort records should be fully and properly completed and prisoners should be transferred to prison shortly after the conclusion of their court appearance. (1.4, repeated recommendation 1.5) | Accepted | <p>It is a contractual requirement for the Person Escort Record (PER) to be fully completed at all times and if this is found not to be the case then appropriate action is taken to resolve the failing.</p> <p>The objective of minimising the time prisoners spend waiting in court cells is reflected in the Prison Escort and Custody Services (PECS) contract, with the contractors fully aware of their obligations to escort prisoners from court at the earliest opportunity. The current contract established the use of escort vehicles with a separation capability, which allows different types of prisoners (male/female, adult/young people) to be carried on the same vehicle. The change also results in more efficient scheduling, with a reduction in prisoner waiting times in addition to significant savings to the Service. However, reducing waiting time is also dependant upon the assistance of other stakeholders, notably HM Courts & Tribunals Service and also on the times that the prisoners' cases have been dealt with by the courts. PECS continue to monitor all aspects of the contractors' performance and on occasions where it fails to meet the agreed levels will be raised with the contractor for improvement.</p> | PECS | August 2015 |
| | Recommendations to the governor | | | | |
| | Early days in custody | | | | |
| 5.6 | Prisoners arriving on transfer should only be strip-searched following a robust risk assessment. (1.11) | Accepted | A process has been put into place and a full search will only be conducted on a prisoner from another establishment if there is intelligence to suggest illicit items are being conveyed into the prison. All other prisoners on transfer from another prison are given a level B rub-down search and hand-held metal detector scan. | Senior Manager Reception | Completed |

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| | Bullying and violence reduction | | | | |
| 5.7 | Interventions should be provided to address the attitudes of prisoners on stage three of violence reduction measures. (1.20) | Accepted | Stage 3 reviews are multi-disciplinary with interventions decided at the reviews which can now include, Circles programme (gang related work aimed at challenging thinking and behaviour which may be related to gang affiliation, gathering intelligence and working with gang members to manage and try to diffuse the underlying tensions between gangs.), Prison Smart, Scar and in cell activities/education. All interventions are recorded on the review paperwork and a lack of engagement is actively discussed at subsequent reviews. | Senior Manager CSU | Completed |
| | Self-harm and suicide | | | | |
| 5.8 | The reasons for the negative response from prisoners in our survey regarding access to Listeners should be investigated and action taken. (1.30) | Accepted | Listeners were consulted separately from the monthly safer custody meeting and it was identified that the removal of Prisoner passports had limited their ability to move around the prison. Coloured lanyards and ID cards have been ordered for the Listeners. Listeners have reported things have improved and a further survey is planned to measure progress. All Prison Custody Officers have been briefed regarding the Listener scheme and its importance. | Safer Custody Manager | March 2015 |
| | Security | | | | |
| 5.9 | The mandatory drug testing programme should be sufficiently resourced to undertake the required level of target testing. (1.43) | Accepted | A review of the current staffing deployment will assess these concerns and a "smarter" way of deploying staff will be agreed. | AD Security and Operations | March 2015 |
| | Discipline | | | | |
| 5.10 | Quality assurance procedures for use of force should be developed to ensure that all incidents, including planned interventions, are reviewed quickly to ensure that force was used proportionately and as a last resort, and that reports reflect events accurately and in sufficient detail. (1.56) | Accepted | Report training has been completed and orderly officers are now ensuring paperwork is completed in a timely manner and checked for accuracy and content. All planned interventions are recorded using the Oscar cam, and the Use Of Force meeting critically analyses paperwork for detail and accuracy | Deputy Director. | Completed |
| 5.11 | Use of special accommodation should be properly documented. (1.57) | Accepted | Special accommodation is only used as a last resort and the standard operational procedure will be followed. Any use will be authorised by the duty manager and a log maintained. | AD Residential | Completed |
| 5.12 | The regime in the care and separation unit | Accepted | A new improved regime is in place. Subject to a suitable risk | AD Residential | Completed |

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| | should be improved. Subject to risk assessment, prisoners should be able to collect their meals from the servery, exercise together and have access to suitable regime activities. (1.63, repeated recommendation 1.71) | | assessment prisoners are allowed to collect all meals, exercise together and attend interventions/education. | | |
| | Substance misuse | | | | |
| 5.13 | The substance misuse strategy should include an annual action plan for treatment services which is informed by a comprehensive needs analysis. (1.71) | Accepted | A needs analysis and action plan on prisoner substance misuse needs will be commissioned by Oxleas NHS and Turning Point (via service level agreement). The resulting action plan will be included in the drug strategy and discussed as an agenda item at drug strategy meetings. | AD Reducing Reoffending | October 2015 |
| 5.14 | The clinical substance misuse service should develop secondary detoxification provision. (1.72, repeated recommendation 1.82) | Partially Accepted | As part of the resettlement and through the gate work, clients wishing to be de-toxed prior to release can undertake a joint review with both the clinical and psycho-social team. Anyone who has used illegal substances within the prison while in custody will be seen and placed on a detox accordingly. | Head of Healthcare | Completed |
| 5.15 | Previous prescribing regimes should be confirmed promptly so as not to interrupt treatment continuity. (1.73) | Accepted | All efforts are made to contact local GPs and pharmacy services to confirm the prescriptions that new receptions are on, so ensuring continuity of treatment. With the potential initiation of Smart Cards for access within S1, it is also hoped that clinical records and prescription information can be sourced. | Head of Healthcare | Completed |
| 5.16 | The clinical substance misuse service should develop a mechanism for service user feedback to inform future developments. (1.74) | Accepted | Service user forums are to be set up. | Head of Healthcare | September 2015 |
| | Residential units | | | | |
| 5.17 | Information on the custodial management system should be available in a range of languages to reflect the prison's population. (2.6) | Accepted | Information on custodial management is now available to prisoners in seven different languages and is being reviewed and converted to an easy read format with languages extended. This will explain in full how to use the custodial management system (CMS) system. Hard copies are also available on the first night centre and translation services room. | First Night Centre Manager | April 2015 |
| 5.18 | The time taken for telephone numbers to be approved should be reduced. (2.7) | Accepted | Telephone numbers are currently cleared within the induction process. An explanation about how numbers are cleared will be provided to prisoners as part of the induction | AD Security and Operations | May 2015 |

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| | | | process. New receptions submit social and legal contact numbers to staff who then request security to call the number and ascertain if contact is welcomed and appropriate. The prison's monitoring process aims to ensure the first attempt to clear contacts is made within a determined time period. This process is reliant on members of the public answering their phone and numbers cannot be cleared until this takes place. Staff try to gain clearance as soon as possible, but accept that on occasion it can be frustrating and seemingly slow. | | |
| | Staff-prisoner relationships | | | | |
| 5.19 | The personal officer scheme should be further developed to include a focus on sentence planning and resettlement needs, and records of engagement should be recorded in electronic case notes. (2.13) | Accepted | <p>Collaborative work with Catch 22 will deliver resettlement training for all residential staff. On each training day Catch 22 will send a copy of every prisoner's sentence plan over to the personal officer once it has been completed. This will allow residential staff to promote the objectives and track their progress i.e. if a prisoner is not being pro-active and remains in his cell all day rather than going to education/work. The personal officer will be able to cross reference their objectives and encourage/motivate them to engage with their plan.</p> <p>Personal officers will be able to comment on an offender's progression in line with these objectives in their weekly Prison-NOMIS entries and a monthly management check of case notes will also be undertaken.</p> | AD Residential | June 2015 |
| | Equality and diversity | | | | |
| 5.20 | All diversity investigation reports should be recorded, investigated fully and completed within timescales, and prisoners should be advised of the outcome. (2.18, repeated recommendation 2.24) | Accepted | <p>A system will be implemented to track investigations and responses to prisoners Discrimination Incident Reporting Forms (DIRFs) managed by the equalities manager and chair of Diversity and Equality Action Team (DEAT).</p> <p>Timeliness of responses will be prioritised and prisoners will receive replies to all DIRFs submitted.</p> | Deputy Director | September 2015 |
| 5.21 | Older prisoners with care needs and those with a disability should have an integrated care plan and a personal emergency and evacuation plan, both of which should be reviewed regularly. (2.28, repeated recommendation 2.35) | Accepted | These prisoners will be identified on induction with care plans and personal emergency evacuation plans (PEEPS) being put in place. Reviews of care plans will be led by residential staff and will be individually tailored to meet prisoner need. | Deputy Director | June 2015 |

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| 5.22 | Prisoners over the age of retirement should not pay for their televisions. (2.29) | Rejected | HMP Thameside apply the instruction as set out in Annex E of PSI 30/2013 subject to a local dynamic assessment of prisoners on a case to case basis. No charge is levied against those assessed as inappropriate to charge them. | Deputy Director | |
| 5.23 | The needs of the under-21-year-olds should be assessed and met. (2.30) | Accepted | A strategic assessment of the needs of this group takes place monthly at the age group consultations and will look at the concerns raised in the report (adjudications, segregation, and use of force). Action is taken to address any identified needs which have had a positive impact on the age group concerned. | Deputy Director | September 2015 |
| | Complaints | | | | |
| 5.24 | Analysis of complaints data should be undertaken and any trends or issues identified addressed quickly. (2.38, repeated recommendation 2.46) | Accepted | Spreadsheets, graphs and analysis of complaints data produced in order to identify any issues or trends. Results are reviewed monthly by senior management and any issues or trends requiring further investigation are identified and, if appropriate, corrective action taken. | AD Business Services | Completed |
| | Health services | | | | |
| 5.25 | The X-ray facilities should be brought into use immediately. (2.56) | Accepted | The facilities will be brought into use but due to the Commissioners tender for X-Ray reading, the ability to facilitate this immediately is no longer an option. | Head of Healthcare | September 2015 |
| 5.26 | Custody officers should be trained to use automated external defibrillators. (2.57) | Rejected | There is risk associated with all medical devices and some of these concerns surround the use of external defibrillators reliability. It is a concern in that were a device to fail during a rescue attempt; it could contribute to patient harm or death. HMP Thameside has a 24/7 in-house Healthcare, which provides immediate medical response to all Code Red or Code Blue emergency calls. As part of the Healthcare staff response, they attend incident with Crash Bag containing defibrillators, where they then make medical assessment to determine whether it appropriate of not to use this medical device. It is for these reasons it is not appropriate for Custody Officers to use automated external defibrillators. | Head of Healthcare/AD Residential | |
| 5.27 | Complaints responses should be regularly quality | Accepted | All complaints are reviewed and quality assured. Themes | Head of | Completed |

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| | assured. (2.58) | | are discussed at Governance meetings and contract review meetings. | Healthcare | |
| 5.28 | Smoking cessation programmes should be available to patients. (2.59) | Accepted | This service is available to the prison population and running on a weekly basis | Head of Healthcare | Completed |
| 5.29 | Health care consultations in reception should be conducted in private. (2.69) | Accepted | All new screenings for receptions must be undertaken in the consulting room. Only those that are for release/returns from court can be spoken to at the front desk | Head of Healthcare | Completed |
| 5.30 | Waiting times and did-not-attend rates for the optician should be improved. (2.70) | Accepted | A review of service provision was undertaken and the waiting list reduced. A new healthcare provider is due in April 2015 and the service provision will be reviewed accordingly. | Head of Healthcare | October 2015 |
| 5.31 | Patients should be able to receive their medications in a confidential manner. (2.77) | Partially Accepted | Due to the design of the building and how the medication hatches are positioned, an officer will be present to observe and ensure minimal diversion of medication could take place, therefore not enabling for total confidentiality. | Head of Healthcare | Completed and ongoing |
| 5.32 | Prescribing of medicines, and administration times, should optimise therapeutic effect. (2.78) | Accepted | Prescribing of medication takes into account the need for optimising therapeutic effects. Due to a new provider for Healthcare coming into operation in April 2015 the completion date will need to be reviewed in accordance with their policies and prescribing formulary. | Head of Healthcare | October 2015 |
| 5.33 | Prisoners assessed as requiring external mental health beds in the community should be transferred expeditiously. (2.87) | Partially Accepted | The transfer of prisoners requiring section transfer is not solely influenced by the Healthcare provider. All the necessary paperwork is completed in a timely manner, however the allocation and availability of beds is under the remit of specialist commissioning. Should there be delays – this will be drawn to the commissioner's attention accordingly at contract review meetings. | Head of Healthcare | Completed |
| | Catering | | | | |
| 5.34 | Prisoners should be provided with an adequate breakfast on the day it is to be eaten. (2.93) | Accepted Subject to Resources | Ideally staff would issue breakfast on the day of consumption. However, due to high levels of early court hearings, it is not feasible to issue breakfast packs in the mornings due to resourcing. This would be achievable if the additional costs relating to an increase in staffing levels are provided. Currently, costs would rise considerably if this action were to be introduced and could impact on the contract requiring a NOC (notice of change) regards regime hours. Currently, staff continue to issue breakfast packs the | AD Business Services | Completed |

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| | | | <p>evening before. This allows each prisoner the opportunity to have breakfast prior to unlock. Each breakfast pack is sealed tight to ensure no food hygiene or safety issues arise as a result of being kept overnight in cell. Prisoners accept this and no issues have been raised by prisoners at Thameside regarding this matter.</p> <p>This issue will be raised at a prisoner consultation on the next monthly PIAC (prisoner information and consultation) to ascertain whether there are any concerns and work with the population to meet prisoners' needs.</p> | | |
| | Purchases | | | | |
| 5.35 | All new arrivals should be provided with suitable reception packs. (2.98) | Accepted | <p>All new arrivals are given, free of charge, a Comfort Pack containing chocolate biscuit, tea, coffee, sugar, milk.</p> <p>Those who require tobacco have the option to purchase (at retail price) a small tobacco pack to see them through their evening of arrival.</p> <p>All new arrivals are offered on the next business day the opportunity to order and purchase from their available funds and receive canteen items from the prison shop.</p> | AD Business Services | Completed |
| 5.36 | Restrictions on the purchase of items by prisoners on assessment care in custody and teamwork (ACCT) documents should be based on an individual assessment of risk. (2.99) | Accepted | <p>ACCT is a prisoner - centred, flexible care-planning system which, when used effectively, can reduce risk. The purchase of items is risk assessed on a case by case basis.</p> <p>Staff consider and agree any items which the prisoner might wish to purchase with due regard to the prisoners wellbeing.</p> <p>Prisoners on ACCT procedures are not restricted to access of certain shop items, only from unmonitored purchase.</p> | AD Business Services/AD Residential | Completed |
| | Time out of cell | | | | |
| 5.37 | Prisoners should have access to evening association. (3.6) | Accepted Subject to Resources | The prison is currently not contracted to provide evening association. If funding was made available staff could review the necessary resource implications, conduct a costing exercise, and submit a business plan in line with a NOC (notification of change) regards the contract. | AD Residential | Completed |
| 5.38 | All prisoners should have access to one hour of outdoor exercise a day. (3.7, repeated | Accepted Subject to | The current PSI 2011 section 2.21 states that 30 minutes of outdoor exercise should be provided. Prisoners located at | AD Residential | Completed |

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| | recommendation 3.6) | Resources | Thameside are offered 0.75 hrs outdoor exercise, which exceeds the PSI requirements by 0.25hrs. It is only prisoners attending Court or another external event that do not receive this. If funding was made available staff could review the necessary resource implications, conduct a costing exercise, and submit a business plan in line with a NOC (notification of change) regards the contract. | | |
| | Learning and skills and work activities | | | | |
| 5.39 | The education provider should complete a thorough analysis of prisoner needs to inform the planning of learning and skills across the prison and develop a clear plan for the implementation of vocational training and work activities. (3.15, repeated recommendation3.12). | Accepted | The curriculum is constantly being reviewed in line with Labour Market Intelligence (LMI) data and an initial proposal has been submitted for the new build. Further discussions / agreement pending The Manchester College (TMC) TUPE and another prisoner needs analysis will be completed. A needs analysis was carried out in June 2014 to ascertain learning needs of prisoners. Provision provided for barbering course, music production, customer service and employability skills courses have been refreshed to incorporate current trends and employer requirements. A meeting has been set up with to improve provision and reach a wider audience. | TMC Education Manager AD Reducing Reoffending | Completed and ongoing |
| 5.40 | The quality improvement group should generate action plans which are specific, realistic and measurable. (3.16) | Accepted | Meetings involve all partner/prison departments and each area produces their own Quality Improvement Group (QIG) which will be incorporated into the overall prison Learning Skills and Work QIG to drive/ monitor measurements of success. A review of this QIG will form the basis /agenda for meetings. The education provider has submitted a first draft and update which has been shared at the QIG Meeting. The final draft will incorporate more specific measures of success | Senior Manager – Activities and Learning AD Reducing Reoffending | Completed |
| 5.41 | Self-assessment practice should involve a critical and concise evaluation, which forms a succinct basis for strategic improvement action planning. (3.17) | Accepted | The Education provider submitted a final 2013/14 Self Assessment Group Report (SAR) which formed the basis for the QIG. Overall prison SAR to be completed. | Senior Manager Prisoner Activities and Learning AD Reducing | September 2015 |

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| 5.42 | The observation of teaching and learning system should focus on the impact of teaching on learning and the progress made by prisoners during learning sessions in order to determine the grade awarded and their professional development needs. (3.18) | Accepted | <p>Teachers will provide written evaluations prior to their one-to-ones for discussion with their line managers and will reflect on their own delivery, teaching and learning /resources being fit for purpose.</p> <p>Peer/ten minute observations/teaching observations are carried out regularly as part of the quality cycle and action plans will be developed from findings. Training needs will be implemented from these.</p> <p>New processes for formal observation of teaching and learning have been implemented which incorporate and record learner achievement / progress, which reflects on the final grade awarded to teachers.</p> | Reoffending TMC Education Manager AD Reducing Reoffending | Completed |
| 5.43 | Managers should identify and regularly analyse the most appropriate range of data, to improve the management, monitoring and planning of the learning, skills and work provision. (3.19) | Accepted | <p>The education provider analyses data monthly and uses this as a basis to modify delivery. RPA (Retention, Progression, Achievement), as well as attendance data are currently being submitted to the QIG.</p> <p>Sharing of Basic English & Maths levels across the prison is saved on CMS but not used to support other areas of learning / work. This is partially being addressed at the Labour Board but plans as to how to share and use these more widely are being discussed.</p> | Senior Manager Prisoner Activities and Learning TMC Education Manager AD Reducing Reoffending | October 2015 |
| 5.44 | The education provider should improve the quality of teaching and learning. (3.35) | Accepted | Action plans inform the training needs for teachers, following on from teaching observations. Regular observations and feedback are incorporated into the quality planning and a training calendar developed to support need. Peer observations look at specific areas of development including the use of interactive whiteboards and resources. | TMC Education Manager AD Reducing Reoffending | Completed |
| 5.45 | Teachers should make better use of information about each prisoner to plan lessons that challenge all learners to reach their potential. (3.36) | Accepted | <p>A review of the current centralised individual learning plans (ILPs) looked at the efficiency of gathering and sharing relevant information.</p> <p>Bi monthly lesson plan audits will be undertaken to ensure differentiation is shown and used in lesson plans and resources. These will clearly evidence extension activities.</p> | TMC Education Manager AD Reducing Reoffending | Completed |

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| | | | <p>Individualised, SMART targets are shown in ILPs that meet individual learners' ILP audits.</p> <p>Learners now take ownership of their learning and are clear of progression routes this will also be evidenced in their ILP.s.</p> | | |
| 5.46 | The classrooms in the house block should be better ventilated and cooled. (3.37) | Accepted subject to resources | This issue has been raised with Serco costings for air conditioning. The ventilation and cooling system of classrooms in the house block will be checked and a solution provided by a specialist contractor, together with a request for a quote for any works required. | AD Business Services | July 2015 |
| 5.47 | Class sizes should be reduced to an appropriate number for the size of classroom. (3.38) | Accepted | All classrooms to be re risk assessed to ensure compliance with Health and Safety. | TMC Education Manager | April 2015 |
| 5.48 | Overall attendance rates, particularly by remand prisoners at education sessions, should be improved. (3.44) | Accepted | The system for tackling non-attendance of sentenced prisoner attendance has been extended to include remand prisoners requesting Education sessions. Local the Incentives and Earned Privileges policy (IEP) has been introduced to challenge unauthorised non-attendance with a review after two weeks then monthly. | Senior Manager Prisoner Activities and Learning AD Reducing Reoffending | Completed |
| 5.49 | Pass rates on all courses should be raised to a consistently high level. (3.45) | Accepted | Achievement data is analysed monthly in conjunction with learner feedback. Teacher monthly activity reviews provide insight as to individual performance and form the basis for bi weekly curriculum managers' meetings where these are discussed and awarding awards bodies and qualifications are reviewed to ensure that they are fit for target population. | Senior Manager prisoner Activities and Learning | Completed |
| 5.50 | The number of prisoners who start but do not complete their course should be reduced substantially. (3.46) | Accepted | <p>Local processes introduced that improve the management of transfers and conflicts, schedule in a smarter way to improve retention and communications improved between partner agencies.</p> <p>Use of video links increased to see if this has reduced the daily absences to attend court. Remands not attending education are now challenged under IEP.</p> | TMC Education Manager Senior Manager Prisoner Activities and Learning | Completed |
| 5.51 | The prison should provide qualifications and other mechanisms to record and recognise the skills that prisoners gain at work. (3.47) | Accepted | The prison is in collaboration with the education provider and works parties to jointly provide appropriate vocational skills that will facilitate learners to seek more employment opportunities upon release. Education provider to embed employability, English and maths in work areas | Senior Manager Prisoner Activities and Learning | October 2015 |

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| | | | | TMC Education Manager AD Reducing Reoffending | |
| 5.52 | Managers should introduce a more efficient and more detailed data reporting system. (3.52) | Accepted | Regular monthly meetings have been introduced to discuss the Learning and Skills report which looks at the entire provision. | Senior Manager Prisoner Activities and Learning TMC Education Manager AD Reducing Reoffending | Completed |
| | Physical education and healthy living | | | | |
| 5.53 | The gym should develop structured and routine reports providing key information, such as the different groups of prisoners using the gym, to identify trends and improvements in performance. (3.60) | Accepted | A gym database is to be introduced which will provide up to date information to inform on usage and access identifying continual improvements. | Senior Manager Prisoner Activities and Learning | May 2015 |
| | Strategic management of resettlement | | | | |
| 5.54 | An overarching analysis of need should be developed, based on an adequate range of sources and exploring the needs of specific types of prisoners, such as young adults or those serving long sentences. A comprehensive action plan should be developed and monitored. (4.8) | Accepted | A needs analysis has been developed; this will be revisited to ensure we capture the needs of specific prisoner types such as young adults, and those serving longer sentences. This will be monitored at both the Pathways meeting and QIG. | Senior Manager Prisoner Activities and Learning | September 2015 |
| 5.55 | All Catch 22 case managers should have the appropriate knowledge and skills to assess and manage risk of harm confidently. (4.9) | Accepted | Catch22 have held several training sessions covering areas of Risk of Serious Harm (ROSH) and ensure that all reports are quality assured with this as the main focus. Staff have been encouraged to create feedback files to ensure that their work is consistent which is reviewed and managed through the supervision process. Catch22 staff are trained/working towards completion of the (NOMS) Offender Supervisor Foundation Course and are all now fully trained in Working With Indeterminate Sentenced Prisoners (WWISP) a MoJ Offender Management policy group and practitioners training package. | Senior Manager – Offender Management | November 2015 |

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| | | | Catch22 are also currently working with a training provider to design and develop an Offender Management Training package for all staff which includes the management of risk . | | |
| 5.56 | Joint working and communication between the custody office and Catch 22 should be improved. (4.10) | Accepted | <p>Co-location of OCA and Custody with Catch22 is being put in place and a programme of meetings between the managers and teams are timetabled.</p> <p>Monthly Senior Management Team meetings between Catch22 and Serco will provide strategic oversight to the delivery of OMU services</p> <p>Monthly meetings now established between Catch22 Coordinators/Managers and Custody Managers to review operational issues and embed joint working practices</p> <p>Catch22 have provided training to the Observation Categorisation and Allocation (OCA) team to access and operate the Catch22 allocation database to identify prisoners for appropriate transfers.</p> <p>Catch22 and OCA to cross allocate multi-disciplinary training opportunities to enhance joint working knowledge e.g. the Parole Clerk was invited to the WISP training with Catch22</p> | Senior Manager – Offender Management | June 2015 |
| | Offender management and planning | | | | |
| 5.57 | Prioritisation of work should ensure that case managers have meaningful contact with prisoners who are most at risk of harm or likely to reoffend. (4.18, repeated recommendation 4.15). | Accepted Subject to Resources | Greater governance on offender management processes and timescales has now been created through the restructure of Catch22 Line Management. Co-coordinators are now empowered to monitor team performance through quality assurance and supervision processes .When an offender is at risk of harm or likely to reoffend, resources are put into place via correct case management on the offenders needs or risk. Signposting to other agencies or individual case management will happen as and when required. | C22 Service Manager | Completed and ongoing |
| 5.58 | Offender assessment system (OASys) assessments, including sentence and risk management plans, should be of a consistently | Accepted | Increased governance and quality assurance processes introduced in the restructure of the co-coordinator role to undertake OASys quality assurance, supervision processes | C22 Service Manager | Completed |

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| | high quality and reviewed as necessary, particularly when circumstances change or new information comes to light. (4.19) | | and feedback through staff supervision sessions. Introduction of Catch22 performance monitoring tool to monitor quality, timeliness and performance of key Basic Custody Screening tool (BSCT), OASys and offender management unit tasks. Monthly review highlights performance issues and training needs which are addressed through supervision. | | |
| 5.59 | Multi-agency public protection arrangements (MAPPA) levels should be confirmed at least six months before a prisoner's release, to enable the offender management unit to contribute to more MAPPA release plans. (4.23) | Accepted | MAPPA levels now set at the monthly Inter Department Risk meetings when this decision is made in the multi-disciplinary forum. Catch22 case workers are aware that MAPPA levels are set at this meeting | C22 Service Manager | Completed |
| | Reintegration planning | | | | |
| 5.60 | All sentenced prisoners should have their resettlement needs reassessed before release and plans made to address outstanding issues. (4.33) | Accepted | Continued work to improve this is ongoing in conjunction with Catch 22 and once CRC's are in place, continued oversight will be undertaken to ensure effectiveness Prisoner pre-discharge process are facilitated by Catch22 administrators screening the release list to alert case workers of any prisoners due for release. Case workers then undertake pre-release planning reviewing all support/sentence plan objectives including resettlement actions. Case managers chase up referrals/complete discharge meeting with prisoners (where necessary) and record outcomes on the Discharge Outcome Sheet, which is screened weekly by co-coordinators and resettlement manager. | Senior Manager Offender Management | Completed and ongoing |
| 5.61 | The number of prisoners helped into settled accommodation should be monitored, to evidence the effectiveness of the service. (4.38) | Accepted | Continued work to improve this is ongoing in conjunction with Catch 22 and once CRC's are in place, continued oversight will be undertaken to ensure effectiveness Catch22 resettlement manager has now created a database to track and monitor the progression of all accommodation referrals. Catch22 co-coordinators now provide management oversight checking and monitoring all weekly accommodation outcomes tracking team performance and | Senior Manager Offender Management | Completed and ongoing |

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| | | | <p>achievement</p> <p>Evidence is gathered and retained from Discharge Outcome Sheet's for internal assurance and audit purposes</p> <p>Resettlement Manager reports Accommodation Pathway Compliance at the bi-monthly establishment pathways meeting.</p> | | |
| 5.62 | Sufficient offending behaviour courses should be introduced, to meet the immediate needs of the population. (4.56) | Accepted | <p>Although HMP Thameside is not commissioned to deliver accredited offending behaviour programmes in line with the role of the establishment as a Local Resettlement establishment holding prisoners serving under 12 months, HMP Thameside are taking actions to address prisoners needs including:</p> <p>The introduction of live Catch22 in cell prisoner packs</p> <p>CRC's will deliver core resettlement services within the establishment from March 2015 under Transforming Rehabilitation.</p> <p>C22 complete an annual needs analysis and ongoing assessment of prisoner needs will define risks and needs to be addressed.</p> <p>The Circles programme – a generic offending behaviour related programme is now being delivered to 240 annual prisoner starters.</p> | Senior Manager Offender Management | September 2015 |
| | Housekeeping points | | | | |
| | Bullying and violence reduction | | | | |
| 5.63 | Security and health representatives should attend and contribute to the monthly violence reduction meeting. (1.21) | Accepted | Discussions have taken place with security and health representatives and meeting calendar invites are sent out to remind all required attendees of meeting dates. | AD Residential Senior Manager Safer Custody | Completed |
| | Self-harm and suicide | | | | |
| 5.64 | Contributions to assessment care in custody and teamwork (ACCT) review meetings should include all departments relevant to the risks identified. (1.31) | Accepted | New procedure for allocating ACCT documents will provide a more singular management of ACCT ensuring that case managers are able to take ownership of ACCT documents in their charge. This will also ensure more improved accountability. ACCT reviews will be scheduled on CMS and | AD Residential Senior Manager Safer Custody | Completed |

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| | | | calendar invites will be sent out reminding all interested parties of review dates. | | |
| | Security | | | | |
| 5.65 | Visiting restrictions should be lifted at the end of the specified period unless intelligence suggests that they still pose a risk to security and safety. (1.44) | Accepted | All prisoners are reviewed at the associated review periods with a view to remove from restrictions unless the initial concerns remain. | AD Security and Operations | Completed |
| | Incentives and earned privileges | | | | |
| 5.66 | Prisoner applications for the enhanced regime should be considered quickly and prisoners promoted if appropriate. (1.49) | Accepted | <p>Applications for enhancement through the Incentives and Earned Privileges (IEP) scheme are now received into the senior managers office for logging and recording. These are issued to the unit managers with a three day target date for completion.</p> <p>Each review that takes place is reviewed at the end of each month by the senior manager alongside the 10% IEP review quality check to ensure that appropriate decisions are being made and the process is fair and consistent.</p> | AD Senior Manager Residential | Completed |
| | Residential units | | | | |
| 5.67 | In-cell showers and toilets should be kept clean and maintained well. (2.8) | Accepted | <p>Cleaning materials are provided for toilets each weekend to ensure that they remain clean and maintained and prisoners are provided with cleaning materials each day to clean their own cells.</p> <p>Unit managers carry out a weekly check on cells cleanliness, including toilets and showers, during Accommodation Fabric Checks (AFC) to ensure that they remain clean and senior managers conduct a monthly check of cells to ensure that they are well maintained.</p> <p>During the unit manager weekly check, any showers that require painting are reported through a central point to the painting party to arrange a date for painting.</p> <p>Any toilet faults are reported through a central point daily to the facilities department, following daily AFC's.</p> | AD Senior Manager Residential | Completed |
| | Health services | | | | |
| 5.68 | There should be a forum where patients are consulted about health services. (2.60) | Accepted | Healthcare does attend the Prisoner Incentives and Activities Committee (PIAC). However a local focussed | Head of Healthcare | September 2015 |

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| | | | forum will be established to solely identify Healthcare needs. This action is to be taken forward with the new healthcare provider. | | |
| 5.69 | Staff members should record receipt of clinical supervision. (2.61) | Accepted | Staff have clinical supervision and a template is completed. This will be reflected in the supervision notes where staff will be given the opportunity to make comment. | Head of Healthcare | Completed |
| 5.70 | Envelopes should be supplied on the wings to accompany health complaint forms. (2.62) | Accepted | The new provider will be required to adjust the complaint forms to identify their name. It will then be their responsibility to ensure envelopes are supplied accordingly. | Head of Healthcare | June 2015 |
| 5.71 | The medicines in-possession risk assessment should be reviewed. (2.79) | Accepted | Completed at a recent Medicine Management forum and will need to be reviewed again when the new healthcare provider starts in April 2015. | Head of Healthcare | Completed and ongoing |
| 5.72 | Patients who do not appear for the administration of prescribed medications should be followed up. (2.80) | Accepted | Prisoners that do not attend for essential medication are followed up. If someone does not attend for "special sick" medication then it would not be viable to chase all these clients up accordingly. | Head of Healthcare | Completed |
| | Reintegration planning | | | | |
| 5.73 | The basic custody screen should be completed on time for all sentenced prisoners. (4.34) | Accepted | Compliance to the 72 hours is monitored on a daily basis by co-ordinators. Deadlines are inputted into workload database. | C22 Service Manager | Completed |

| Recommendations | | Housekeeping Points | |
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| Accepted | 53 | Accepted | 11 |
| Accepted Subject to Resources/Partially Accepted | 7 | Accepted Subject to Resources/Partially Accepted | 0 |
| Rejected | 2 | Rejected | 0 |
| Total | 62 | Total | 11 |