

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP PENTONVILLE

TIMETABLE	DATE	STATUS OF THIS RETURN
Full Unannounced inspection	2 - 13 February 2015	
Report published	23 June 2015	
Action Plan Submitted	September 2015	Attached

ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP PENTONVILLE

POSITION AS AT: SEPTEMBER 2015

1. Rec. No.	2. Recommendation	3. Accepted/ Rejected	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
Main recommendations to the governor					
5.1	The reasons for the high and increasing levels of violence should be further explored, prisoners should be consulted and action should be taken to make the prison safer. (S57)	Accepted	<p>A new violence reduction strategy has been created and delivered in line with the Violence Reduction (VR) project.</p> <p>Actions taken include:</p> <ul style="list-style-type: none"> • New VR strategy written • New violence matrix tool implemented. • Body worn video cameras piloted. • Gang awareness training will be delivered. • Course on knife crime / trading places delivered to Young Adults (YAs). • More VR investigations completed. <p>Better use of violence prevention measures e.g. good order or discipline, wing moves, transfers and London protocols have also been implemented.</p>	Head of Safer Prisons and Equality	31 March 2016
5.2	The cleanliness and conditions of cells, communal areas and external areas should be improved and prisoners should have access to sufficient clothing bedding, cleaning materials and eating utensils. (S58)	Accepted	<p>A comprehensive cleanliness strategy has been launched to address cleanliness issues with a manager allocated to solely lead on this for three months.</p> <p>The decline in standards of cleanliness are being addressed with a modest reduction in the operational capacity made to allow sections of cells to be taken out of action on a rolling programme to facilitate a deep clean.</p> <p>All new prisoners are now issued a sealed pack of utensils in addition to a pillow and kettle. A system is in place to ensure that all vacated cells are checked for decency standards prior to re-occupation and any defects</p>	Heads of Residence / Service Delivery Manager / Head of Corporate Services	30 September 2015

			<p>are rectified.</p> <p>Supply problems with regards to prisoner kit and bedding have been addressed and an active programme of excess kit retrieval from cells has been implemented to make sure prisoners do not stockpile kit which can be allocated where it is needed.</p>		
5.3	The reasons for prisoners' poor perception of staff should be explored and formal complaints about poor behaviour should be investigated and acted on. (S59)	Accepted	<p>Reasons will be explored during the Measuring the Quality of Prison Life assessment and also as part of the prisoner council sessions.</p> <p>The current system has been reviewed and replaced to make sure that formal complaints are answered fully in a timely manner and accurate records of replies kept and acted upon.</p>	Deputy Governor	31 October 2015
5.4	There should be sufficient suitable employment and other activity places for the population and these should be fully utilised. More prisoners should have opportunities to gain educational and vocational qualifications. (S60)	Accepted.	<p>Activity places will be fully utilised to achieve maximum attendance.</p> <p>There are currently two closed workshops, Manchester college are taking over one for the delivery of industrial cleaning and the other will be converted into a recycling centre. Recruitment campaigns are currently underway to recruit staff.</p> <p>Weekly challenge meetings will take place to look at the use of the incentive and earned privileges scheme (IEPS) on those offenders who have not turned up to work and to look at individual residential unit's efficiency in getting allocated offenders to work.</p> <p>The Activity hub will ensure that sufficient offenders are allocated to work taking into account acceptable absences of offenders who have to attend visits, court, medical appointments etc.</p> <p>A banding review, to determine the type of offender that can work in an area of the workshops, will take place.</p>	Head of Reducing Re-offending	31 December 2015

			<p>Where a banding can be lowered this will increase the numbers of prisoners available to be employed in certain workshops (i.e. multi-skills/carpentry). and therefore increase attendance and efficiency.</p> <p>In the carpenters shop this has already resulted in attendance rates increasing from 35% to 90%.</p> <p>The newly agreed education curriculum which is tailored to suit the needs of the prison population at HMP Pentonville will be implemented and accreditations will be attached to current (and future) workshops.</p>		
5.5	The offender management unit should be sufficiently resourced to ensure that all eligible prisoners receive an offender assessment system (OASys) assessment, sentence plan and risk management plan, as well as a nominated offender supervisor to monitor and support progress and contribute to risk management release planning. (S61)	Accepted	<p>There is ongoing recruitment to fill the Band 4 and Band 5 roles within the Offender Management Unit (OMU) at the prison.</p> <p>The management of sick absence remains a strong focus for the establishment.</p> <p>Once the OMU is fully resourced steps will be implemented to address any backlogs and monitor progress.</p>	Deputy Governor/ HR Business Partner	31 December 2015
	Recommendations				
	Courts, escort and transfers				
5.6	Vans used to transport prisoners should be kept clean and free of graffiti. (1.5)	Accepted	All of the contractor's vehicles are frequently checked by both lay observers and NOMS Prisoner Escort and Custody Service (PECS) contract delivery managers and any issues including graffiti are reported to the contractor for them to address. In addition to this, all vehicles are part of the maintenance and cleaning schedule (internal and external) carried out by the vehicle base. The vehicle crew are required to carry out a check for graffiti as part of their daily maintenance checks prior to leaving the vehicle base. Any vehicles that are soiled during a journey will be cleaned that day.	NOMS Prisoner Escort and Custody Service (PECS)	Ongoing
	Early days in custody				

5.7	Newly arrived prisoners should be provided with clean first night accommodation and a full range of essential equipment be able to take a shower and be subject to enhanced observations by night staff to ensure their safety. (1.15)	Accepted	All new prisoners are now issued with a sealed pack of essential equipment. They are also issued with a pillow and kettle. Newly vacated cells/bed spaces are subject to a decency check and any defects are addressed prior to re-occupation. Showers are offered to all prisoners as part of the reception process. New prisoners are routinely accommodated on A and F wing, and each wing has clear lists of new prisoners to allow the night patrols to maintain adequate levels of observation.	Head of Residence	Completed and ongoing
	Bullying and violence reduction				
5.8	The placement of young adults on the vulnerable prisoner wing should be informed by a comprehensive and individualised risk assessment to promote their safety. (1.25)	Accepted	Risk assessment will be created to ensure suitability of YAs on the vulnerable prisoner (VP) unit to ensure safety.	Head of Safer Prisons and Equality	30 September 2015
	Self-harm and suicide				
5.9	Case reviews and care plans for prisoners at risk of suicide and self-harm should be improved with consistent case management to ensure that identified needs are met. (1.34, repeated recommendation 1.41)	Accepted	Consistent case management will be improved by Safer Prisons allocating case managers to Assessment, Care in Custody and Teamwork (ACCT). Training has been given to all Residential supervising officers (SO) focusing on CAREMAPs with the intention to deliver the full case manager training package.	Head of Safer Prisons and Equality	31 December 2015
5.10	Safer cells should be available on all residential wings. (1.35, repeated recommendation 1.44)	Accepted Subject to Resources	Safer cells will be explored. If feasible and if funding is available they will be installed.	Head of Drug Strategy and Healthcare Provision	30 November 2015
5.11	Constant observation cells should be sited where they afford some privacy. (1.36)	Accepted	Constant supervision cells on A wing and in the segregation unit have been moved down the landing. Constant supervision cell on G wing has been moved to G1. Moving of G1, E1 and A2 gated cell is included in the business case for Rec 5.10 (G2 to be moved to G1, A2 to	Head of Safer Prisons and Equality	30 November 2015

			be moved down the landing along with E1's down the landing)		
5.12	Prisoners should be able to speak to a Listener in private when they request one. (1.37)	Accepted	<p>Staff will be reminded to make sure prisoners are able to speak to a Listener in private when they request one.</p> <p>There is no Listeners suite on F5 landing (Vulnerable Prisoner Unit) and it is not safe to move F5 prisoners to suites on A or G wing for meetings. A Listeners suite on F5 has been explored; however, due to limited space there is no space for a specific private Listeners suite to be created (unless a cell was taken out of action)</p>	Head of Safer Prisons and Equality	31 August 2015
	Safeguarding				
5.13	The initial contact made with the local safeguarding adults board should be followed up to establish effective safeguarding adults processes across the prison. (1.40, repeated recommendation 1.49).	Accepted	<p>Healthcare has currently nominated a safeguarding adults lead who will work with the prison lead to ensure the right safeguarding processes are introduced in the prison. HMP Pentonville is in the process of embedding processes to identify and prevent abuse or neglect, and to support and protect victims, witnesses or reporters. The prison will work with the local safeguarding adults board to monitor any potential cases.</p> <p>HMP Pentonville is committed to providing a level of protection for prisoners who are unable to protect themselves as a result of having care needs.</p>	Head of Drug Strategy and Healthcare Provision	31 December 2015
	Security				
5.14	Prisoners should only be placed on closed visits for illicit or inappropriate activity related to visits or when there is sufficient intelligence to indicate the likelihood of such activity. (1.51, repeated recommendation 1.58)	Rejected	<p>Prison Service Instruction (PSI) 15/2011, '<i>Management of Security at Visits</i>' provides that closed visits may be imposed in the absence of specific visits-related activity.</p> <p>Closed visits may be imposed as an administrative measure where necessary in accordance with Prison Rule 34 (1) and (3), i.e. for reasons of securing good order and discipline or for the prevention of crime or in the interests of any persons. They should be applied where prisoners are proved or reasonably suspected of involvement in</p>	NOMS Security Group	

			<p>smuggling prohibited items through visits, or are considered to pose a reasonable risk of involvement, or when the application of closed visits is otherwise necessary for the grounds specified in the Prison Rules. In considering the imposition of closed visits, establishments should be able to demonstrate that in deciding to apply closed visits they: (a) have taken into account all the individual circumstances of the case; (b) have acted proportionately; and, (c) have kept the requirement for the closed visit under review.</p> <p>HMP Pentonville has reviewed closed visits in line with national policy and, with some minor changes now in place, is content with provision.</p>		
5.15	A more strategic approach to supply reduction should be developed, including the implementation of an up-to-date supply reduction strategy. (1.52)	Accepted	The new policy will include guidance and information on all aspects of substance misuse and addiction at HMP Pentonville, in addition to an enhanced supply and reduction strategy which will be developed between drug strategy and security operations.	Head of Drug Strategy and Healthcare Provision	31 August 2015
5.16	The mandatory drug testing programme should be adequately resourced to undertake the required level of random and suspicion testing. (1.53)	Accepted	Minimum staffing levels for the testing programme have now been agreed and has been implemented.	Head of Security and Intelligence	Completed
	Incentives and earned privileges				
5.17	Prisoners should not have to wait three months to apply for enhanced status. (1.59)	Rejected	The national policy is set out in PSI 30/2013 - <i>Incentives and Earned Privileges (IEP)</i> . Prisoners on standard level may apply for progression to enhanced level after three months, and at three monthly intervals thereafter. Standard level prisoners, who do not apply for progression, and all those on enhanced, should be reviewed annually to ensure their behaviour is reflective of their incentive level. An earlier review can take place if there is a change in overall performance or behaviour.	NOMS Equality, Rights and Decency Group (ERDG)	
5.18	Prisoners on the basic regime should be set individualised targets and more opportunity to demonstrate improvements in behaviour. (1.60)	Accepted	There is bespoke target setting for prisoners on basic regime, which includes advice on how to demonstrate improvements in behaviour. The limit on access to association periods is specified in the IEP policy and is	Head of Residence	Completed and ongoing

			common to all prisons in Greater London. Other opportunities do exist to demonstrate improved behaviour, such as attendance at activities, whilst collecting food, at corporate worship and during exercise periods.		
	Discipline				
5.19	Monitoring and analysis of the use of force should be improved. (1.69)	Accepted	A more formal structure will be convened.	Head of Residence	31 October 2015
5.20	Authorising paperwork for the use of special accommodation should fully justify the need for its use and ensure that the prisoner is removed at the earliest opportunity. (1.70)	Accepted	The quality of authority paperwork (OT013) completion didn't accurately reflect the prisoners were always removed at the earliest opportunity. Segregation staff, duty governors and orderly officers have now been reminded of the need for full completion of the paperwork.	Head of Residence	Completed
5.21	The management and oversight of segregation should be improved. (1.77)	Accepted	<p>Policy guidance around the monitoring of segregation use is presently being reviewed. Among the proposals being considered to strengthen current arrangements is the introduction of a mandatory monthly establishment return that will provide Deputy Directors of Custody (DDCs) with occupancy data to highlight any particular concerns, which DDCs will in turn address during their visits. The importance of SMARG meetings will be underlined and greater prescription given in regard to the detail of the information that must be included in their quarterly reports to the Governor and the DDC.</p> <p>The Segregation Unit will move into the safer custody function which will allow for greater management oversight. As part of these changes the Segregation Unit will also be allocated 2 x SOs. As a consequence of this change there will be improved management information which will form the basis for structured and scheduled SMARG and Standardisation Meetings. These changes will also provide quality assurance for all Unit paperwork and standards.</p>	<p>Security Policy Unit</p> <p>Head of Safer Prisons & Equality</p>	30 September 2015
5.22	The regime for prisoners on the segregation unit should be improved and all prisoners should be allowed to have radios. (1.78)	Accepted	All prisoners within the segregation unit have access to daily showers, radio and phone calls. In addition, reading materials are available within the unit and are regularly	Head of Residence	31 October 2015

			replenished by the library. Prisoners are also given the opportunity for exercise and cell clean. Within the available timeframe it is sometimes difficult to deliver this regime in its entirety, especially when there are a high number of adjudications or prisoners with difficult and disruptive behaviours. There has been a trend of prisoners refusing to leave the segregation unit and remaining for some weeks. Maintaining clear demarcation between segregation and mainstream location is important as an incentive for a return to normal conditions. Notwithstanding this, a new regime will be implemented to encourage good behaviour and to instil stability into volatile prisoners.		
	Substance misuse				
5.23	The drug and alcohol strategy should be updated, contain development targets and be informed by a comprehensive needs analysis. The drug and alcohol strategy committee should meet regularly and all relevant departments and service providers should attend. (1.84)	Accepted	The revised substance misuse policy is being written by the Head of Drug Strategy in conjunction with substance misuse clinicians, Phoenix Futures interventions leads and operational colleagues in security / intelligence. The new policy will include substantial information and guidance on all aspects of substance misuse and addiction at HMP Pentonville, including alcohol, drugs and new psychoactive substances protocols including clinical management, in addition to an enhanced supply and reduction strategy.	Head of Drug Strategy and Healthcare Provision	31 August 2015
	Residential units				
5.24	Single cells should not be used to accommodate two prisoners (2.10)	Rejected	The current national prison population pressures mean it is necessary to maximise use of all available places across the estate. These pressures are expected to continue for the foreseeable future and can result in greater numbers of prisoners being required to share cells. All cells currently being used for double occupancy are certified by the London Deputy Director of Custody as being suitable for two prisoners in line with PSI 17/2012 - <i>Certified Prisoner Accommodation</i> . The Deputy Director ensures that each cell has sufficient heating, lighting and ventilation and is of adequate size for the number or prisoners it has been approved for.	Deputy Director of Custody	

5.25	Prisoners should have daily access to clean showers with privacy screens (2.11, repeated recommendation 2.10)	Accepted.	Shower curtains are being placed in every shower and there is an ongoing plan to renovate some of the showers. We remain committed to delivering a full regime, however we are currently delivering a temporary regime that guarantees access to showers on alternate days. This follows a sustained period where, due to staffing challenges we have been curtailing the regime on an ad hoc basis.	Heads of Residence	31 December 2016
5.26	Cell bells should be answered within five minutes. (2.12, repeated recommendation 2.9)	Accepted	Staff have been reminded to answer cell bells as quickly as they can. A recent notice was issued to prisoners reminding them not to press bells unnecessarily. The Head of Safer prison is also monitoring data to check the frequency of when bells are answered.	Heads of Residence	Completed
5.27	Prisoners should be able to use the telephone in private every day outside the working day. (2.13, repeated recommendation 2.12)	Partially Accepted	Prisoners are able to use the telephone during the course of the day when they are at work and during association and the split regime. There is not the facility to allow prisoners out in the evening to use the PIN phones due to the current staffing profile.	Heads of Residence	Completed
Equality and diversity					
5.28	The equality policy should be supported by an action plan covering all the protected characteristics. (2.25)	Accepted	An action plan will be created to pull together all actions from the various equality meetings. This will be reviewed frequently and discussed at the bi-monthly prisoner equality meeting. An action plan has been created but not fully used yet.	Head of Safer Prisons and Equality	30 December 2015
5.29	Equality monitoring should include all protected characteristics, and action should be taken to address issues identified for any specific group. (2.26)	Accepted	Data will be collected to allow monitoring of sexual orientation and disability to take place and data recorded for new receptions.	Head of Safer Prisons and Equality	30 November 2015
5.30	Appropriate support, including forums, should be provided to all groups of prisoners with protected	Accepted	Protected characteristics forums are in place at least once a month and the quality of these is improving.	Head of Safer Prisons and	31 December

	characteristics. (2.27)		Information on particular issues are also published.	Equality	2015
5.31	Prisoners with disabilities and older prisoners with identified needs should have a multidisciplinary care plan to which all staff have ready access and about which prisoners are consulted. (2.39, repeated recommendation 2.40)	Accepted	This has already started to develop with increased joint partnership between prison and healthcare, a multi-disciplinary care plan created and the ability to refer prisoner to receive Social Care. This has started with the Equalities Officer working with Healthcare to complete multi discipline care plans for prisoners who require them.	Head of Safer Prisons and Equality	31 December 2015
5.32	Older prisoners and prisoners with disabilities should be provided with regular and appropriate regime activities; this should include specific activities for vulnerable prisoners. (2.40, repeated recommendation 2.41)	Accepted.	Gym provision has been increased to 12 PE instructors, to provide specialist sessions for remedial prisoners, over 55 year olds and healthcare in-patients. The Manchester College (TMC) will provide an outreach teacher for prisoners who are unable to attend including vulnerable prisoners.	Head of Reducing Re-offending	30 November 2015
5.33	Translated information should be provided in the most commonly spoken languages and professional telephone interpreting services used when required. (2.41)	Accepted	There are already some documents translated into different languages but access to these documents is limited. Posters will be created in different languages to publish what is available and how to access them. First night in prison information booklet will be translated. Documents will be available at foreign national workshops. This is monitored bi-monthly at Prisoner equality meeting.	Head of Safer Prisons and Equality	31 December 2015
	Complaints				
5.34	Responses to complaints should be respectful and fully address the issues raised, and complaints against staff should be tracked and fully investigated. (2.52)	Accepted	A 10% dip testing of all Comp 1 (standard, non-confidential) is carried out with feedback given to managers on content and tone. All complaints about staff (Comps 1 and/or2) are subject to management analysis and after simple enquiry or disciplinary process, where applicable, all responses are complete.	Head of Corporate Services	Completed and ongoing
	Legal rights				

5.35	Formal advice about legal rights and bail information should be provided. (2.58)	Accepted	<p>It is no longer mandatory for prisons to have a designated trained legal services officer. As part of the NOMS' Specification Benchmarking and Costing (SBC) Programme, NOMS looked at the current procedures for helping prisoners to seek specialist legal advice. The review concluded that, rather than having one designated member of staff, an integrated support system would allow prison governors to better target their resources whilst ensuring prisoners who require legal services understood what was available and how services may be accessed. Therefore, as the requirement that prisoners understand their entitlements and responsibilities while in custody is an existing specified output in the Early Days & Discharge Specification, it was decided that prisoners will be provided with information on how to apply for legal services as part of the induction into custody process.</p> <p>PSI 07/2015 – <i>Early Days in Custody</i> (Paragraph 2.7) states that prisoners should be allowed to contact their legal advisers for help in resolving disputes. Making applications for bail and obtaining advice on legal services and details of active civil and criminal providers can be accessed via the following website link: https://www.gov.uk/find-a-legal-adviser</p> <p>Additionally, the Residential Services Instruction (PSI 75/2011) has been amended to specify that residential staff provide lists of legal advisers and supply the appropriate forms for prisoners who wish to access legal advice. The absence of a legal service officer does not mean that prisoners will be unable to seek legal advice.</p> <p>All prisoners continue to have access to their legal representatives.</p> <p>HMP Pentonville plans to provide information leaflet about legal rights and bail to prisoners.</p>	NOMS Equality, Rights and Decency Group (ERDG)/Head of Operations	30 September 2015
------	--	----------	--	---	-------------------

5.36	More booths for legal and professional visits should be provided and they should be in a better condition. (2.59)	Accepted Subject to Resources	Redecoration of legal visits has taken place and upkeep is ongoing. Legal visit allocation has increased, more slots are now available through an additional day using the social visits hall. A business plan for an 80% expansion of current legal visit provision is being drafted.	Head of Operations	Completed and ongoing
	Health services				
5.37	An up-to-date health needs analysis should inform all service provision. (2.70)	Accepted	The commissioning of a health needs analysis is the responsibility of NHS England and a health, social and psychosocial needs assessments is being conducted by external assessor. .	Heads of Healthcare/ NHS England	30 September 2015
5.38	All clinical areas should be fully compliant with infection control guidelines. (2.71)	Accepted	Healthcare has developed an infection control audit cycle for a rapid identification of issues and to ensure compliance.	Heads of Healthcare	Completed and ongoing
5.39	A designated senior health lead should develop health services for older prisoners and those with disabilities. (2.72)	Accepted	Healthcare has nominated a disability liaison nurse for initially assessing needs and ensuring appropriate liaison with the local authority social care service and to ensure internal care plans are put in place to monitor prisoners' needs. The Service Provider has now identified clinical leads for long term conditions, disabilities and older persons. The entire process will be made as a standard operating procedure and regular training will be provided to staff.	Heads of Healthcare	31 August 2015
5.40	Prisoners should be able to complain about health services through a well-publicised confidential system, and all responses to complaints should be timely and fully address all the issues raised. (2.73)	Accepted	The complaints management system has now been revised. Prisoners no longer complain using the prison system. Healthcare boxes have been made available in all the wings so prisoners can make confidential complaints to healthcare. The service provider has developed standardised initial responses to acknowledge the patient concerns/complaint which are then followed up. The Head of Healthcare carries out random audits of responses and the provider is in the process of capturing complaints through Datix, a	Heads of Healthcare	Completed

			web-based patient safety software for healthcare risk management applications including management of complaints. This then enables the Governance Team and manager to have oversight. Monthly Governance meetings review complaints and identify any patterns, which are then addressed at local level. Trend analysis and resulting action plans are also reviewed at quarterly contract review meetings.		
5.41	Systematic health promotion should take place throughout the prison, overseen by a prison health promotion action group, which should include prisoner representation. (2.74)	Accepted	A range of new initiatives to address health promotion and wellbeing are in the process of being introduced. Those are different programmes covering from health trainers to live coaches and self-management programmes. Health promotions will be available in all healthcare areas for prisoners to take. Health promotion diaries are provided on first night.	Heads of Healthcare	30 September 2015
5.42	Prisoners with lifelong conditions should receive regular reviews and have an evidence-based care plan prepared by staff that are appropriately trained and supervised. (2.84, repeated recommendation 2.76)	Accepted	A nurse specialist on long term care has been appointed and is running regular clinics four times per week. The nurse links with GPs for more complex cases in line with primary care guidelines in the community.	Heads of Healthcare	Completed
5.43	There should be an efficient, confidential health care application process, managed by health services staff. (2.85)	Accepted	Application process is currently under review alongside the complaints process. Applications will be collected by healthcare staff to ensure confidentiality. Staff will process the applications and inform prisoners of appointments.	Heads of Healthcare	30 September 2015
5.44	The queues for the collection and supervision of medicines should be adequately supervised to ensure that patient confidentiality is maintained and that the risk of diversion is limited. (2.93)	Accepted	As far as is possible, queues are monitored by staff and there are clear barriers highlighted on the floor for prisoners not to cross until it is their turn.	Heads of Residence	Completed and ongoing
5.45	Prisoners should have secure storage for medication. (2.94)	Partially Accepted	Comprehensive in-possession risk assessments completed and reviewed appropriately. Prisoners in shared cells are unable to store in-possession medicines securely as there are no lockable cabinets. This will be re-visited and reviewed with the Head of Corporate Services.	Heads of Healthcare	30 September 2015
5.46	Systematic checks should be conducted on	Accepted	The pharmacy manager is currently reviewing all	Head of	30

	patients receiving in-possession medication. (2.95)		<p>pharmacy policies and procedures including in-possession policy.</p> <p>This review will include how the prison monitors prisoners with in-possession medication. Random checks on prisoners with certain conditions are being carried out but the process could be extended to all administration.</p>	Healthcare	September 2015
5.47	Discipline staff should have mental health awareness training so that they can take appropriate action when a prisoner has mental health problems. (2.107, repeated recommendation 2.99)	Accepted	<p>The local Mental Health Team (Barnet and Enfield NHS Trust) has developed a robust staff training package to help staff identify prisoners with potential mental health needs, and action to take in order to ensure the prisoners safety and well-being, and that of staff, is not compromised.</p> <p>This training has been rolled out primarily to discipline staff working in the healthcare centre, and nurses on the wards. There is now an ongoing programme for all residential staff to undertake this training, which happens once per month as part of the full prison shutdown training afternoons.</p>	Head of Drug Strategy and Healthcare Provision	Ongoing
5.48	A comprehensive primary mental health service should be provided, offering a full range of support for prisoners with mild and moderate mental health problems, including psychological therapies and counselling. (2.108)	Accepted	<p>A comprehensive primary mental health and therapy service has been developed and is now functioning as part of the wider mental health service.</p> <p>All required staff are in post including a primary mental health worker, assistant psychologists, clinical psychologist lead and occupational therapists.</p> <p>The therapy service is primarily available in the Day care Centre which is co-led by the lead clinical psychologist and lead occupational therapist.</p> <p>The service provides a four tier model for forensic mental health:</p> <p>Tier 1: See Think Act, staff training, modelling of good practice, staff consultation etc.</p>	Heads of Healthcare	Completed

			<p>Tier 2: primary mental health services working across primary care and substance misuse services including shared clinics, assessment and care plans and roles.</p> <p>Tier 3: zoning of complex needs with case management system based on recovery model utilizing a broader mandatory drug test.</p> <p>Tier 4: inpatient service: physical health and mental health. Highly skilled workforce, broad skill mix and grading of staff. Clear roles and responsibilities for staff, working as one team with officers.</p> <p>Therapy service is now delivering the tier 4 service</p>		
	Catering				
5.49	Breakfast should be served on the morning it is eaten and lunch should not be served before noon and the evening meal not before 5pm. (2.115, repeated recommendation (2.105)	Rejected	<p>Due to the national core day and the current establishment profile. It is not possible to serve the evening meal after 5pm due to the staffing profiles</p> <p>The serving of breakfast packs the evening before is a well-established practice across the prison estate and the contents of the packs are suitable to be stored in the prisoners' cells overnight.</p>	Head of Residence	
5.50	All catering equipment and areas should be in good order and problems with the flooring should be addressed. Wing serveries and equipment should be cleaned comprehensively immediately after use. (2.116)	Accepted	Every servery is cleaned at the end of the working day by servery workers after the final meal is completed. Any problems with flooring is reported and acted upon.	Head of Residence	Completed and ongoing
	Purchases				
5.51	Prisoners should be able to access a full prison shop order within 72 hours of arrival. (2.121)	Rejected	It is national policy that there is one standard order, and one following delivery day per week for each prison. It is not financially viable to fund additional deliveries for new arrivals outside of this schedule. New arrivals should be offered the option to purchase reception packs on arrival. There are a number of different types of packs available that the establishment can choose to hold and sell. An	Directorate of Commissioning and Contract Management	

			order from the full local range can then be placed on the next usual ordering day.		
	Time out of cell				
5.52	Prisoners' time out of cell should be increased, and they should have access to daily association, including some evening association. (3.6)	Partially Accepted	Daily association is available. Evening association cannot be accessed. This is part of the national core day and adherence to that regime will be improved.	Heads of Residence	Completed
5.53	The published daily routines for prisoners, including association and exercise, should be adhered to consistently. (3.7, repeated recommendation S47)	Accepted	The regime is adhered to routinely, however there are (not infrequent) occasions when the regime is interrupted, delayed or curtailed due to incidents involving prisoners. These could be acts of violence, or injury or illness, requiring attendance at hospital. Prisoners hiding, incidents at height, cell fires and flooding are also contributors to regime interruptions. Normal service will always be restored as quickly as possible.	Heads of Residence	Completed and ongoing
	Learning and skills and work activities				
5.54	Arrangements to improve teaching, learning and assessment should be sufficiently effective and raise quality to at least good. (3.15)	Accepted	The Manchester College (TMC) has reviewed their assessment arrangements and a regular robust framework put in place. Data is reviewed via the Quality Improvement Group (QIG), and on a weekly basis by a Band 6 learning and skills manager and on a monthly basis by the regional learning skills manager.	Head of Reducing Re-offending	31 December 2015
5.55	Attendance at quality improvement group meetings should be improved and include more robust discussion about the quality of teaching, learning and assessment. (3.16)	Accepted	Terms of reference of the QIG meeting will be reviewed, agreed by the Governor and implemented. This will include mandatory attendees. The quality of teaching and assessment will be discussed and qualifications gained will be a standing agenda.	Head of Reducing Re-offending	31 August 2015
5.56	Observations of teaching, learning and assessment should extend across all areas of the provision, to provide clearer information about the quality and to be able to share best	Accepted	TMC have employed an advanced practitioner working at HMP Pentonville for two days a week and also at HMP Holloway. A robust system of observations of teaching and learning will be put in place with data shared and	Head of Reducing Re-offending	31 December 2015

	practices. (3.17)		discussed at the QIG.		
5.57	All prisoners with identified learning needs in English and/or mathematics should be appropriately supported across the prison and in discrete classes. (3.26)	Accepted	Two classes for English and English for speakers of other languages (ESOL) are ongoing in shop 1 and one class of Maths and Outreach on F wing. Plans are in place to expand outreach into shop 3, 6 and the weights room.	Head of Reducing Re-offending	31 December 2015
5.58	Teachers should ensure that all learners, particularly the more able, are suitably challenged to achieve their full potential. (3.27)	Accepted	The number of level 2 qualifications will increase following the curriculum review including carpentry and painting and decorating.	Head of Reducing Re-offending	31 December 2015
5.59	Success rates should be improved further, to at least good, across all qualifications, and particularly in English. (3.32)	Accepted	See 5.56. TMC has employed an advanced practitioner working at HMP Pentonville for two days a week and also at HMP Holloway. A robust system of observations of teaching and learning will be put in place. Data will be shared and discussed at the QIG.	Head of Reducing Re-offending	31 December 2015
5.60	Library access should be improved for all prisoners. (3.36, repeated recommendation 3.26)	Accepted	The library timetable for the wings will be reviewed, published and implemented. In-reach library service will be available for disabled prisoners, healthcare and segregation unit residents (i.e. mobile library)	Head of Reducing Re-offending	31 October 2015
	Physical education and healthy living				
5.61	Prisoners' access to PE should be improved. (3.42)	Accepted	Gym facilities have improved throughout the establishment (sports hall/shop 6/ E/F wing/Healthcare/Weights room). Current PE staffing also improved from 8 to 12.	Head of Reducing Re-offending	31 October 2015
	Strategic management of resettlement				
5.62	Resettlement services should be promoted more widely, so that more prisoners know who to turn to for help and feel prepared for release. (4.4)	Accepted	The prison will provide operational support and publicity for Community Rehabilitation Company (CRC) service provision. The resettlement strategy will be rewritten and implemented. with a dedicated resettlement landing in G1 to allow reciprocal access between CRC staff and resettlement prisoners.	Head of Reducing Re-offending	31 October 2015
	Offender management and planning				
5.63	Community offender supervisors should respond to home detention curfew requests promptly, to enable prisoners to be released at their earliest	Accepted	Revised guidance to Probation Service providers about their responsibilities in respect of the Home Detention Curfew (HDC) scheme is currently being drawn up.	Sentencing Policy Unit / Heads of	30 September 2015

	eligibility date. (4.11)		<p>A system is in place at HMP Pentonville to monitor and log all HDC reports requests sent to offender supervisors in the community. If there is no reply, a follow-up request is made and logged. If there is no response, this is brought to the attention of the hub manager and a third request will be made to the manager of the offender supervisor in the community with a supporting message from the hub manager. This will also be logged again. These actions will ensure that all requests are being monitored by both the HDC clerk and hub manager. The prison is aware who to escalate issues to if not getting prompt replies from the community offender supervisor. This system will be reviewed by management.</p>	Offender Management	
5.64	All public protection prisoners should have their telephone numbers screened promptly and should be informed if their application is denied. (4.18, repeated recommendation (4.19)	Accepted	A new process for screening of public protection case PIN numbers is being implemented.	Head of Operations	31 October 2015
5.65	Multi-agency public protection arrangements (MAPPAs) levels should be confirmed six months before release and the interdepartmental risk management team should be reviewed to improve its effectiveness and oversight of all relevant cases. (4.19)	Accepted	<p>A comprehensive review of the Interdepartmental Risk Management Team meeting took place in March 2015 after the feedback from the HMIP Inspection team.</p> <p>The review identified a system where on a weekly basis the public protection clerk gets a printout from Prison NOMIS, of offenders being released within six months to ensure they have Multi Agency Public Protection Agency (MAPPAs) levels. For any offender without a MAPPAs level, the outside MAPPAs co-ordinator in the probation department will be contacted to provide the information.</p> <p>New terms of reference introduced for the Interdepartmental meeting to ensure that good practices are in place with responsibility for providing regular assessments for offenders who present the greatest risk to the public. All offenders being discussed at the meeting are assigned offender supervisors whose role is to provide up to date risks on offenders and the risk</p>	Heads of Offender Management	30 September 2015

			management plan to manage the offender a few months from release into the community with the support of the offender manager in order to reduce the risk they may pose to members of the public. This action will be reviewed.		
5.66	Category B prisoners should not stay too long at the establishment. Sentence plan objectives and proactive offender supervision should aim to ensure that they are transferred quickly to the most appropriate establishment. (4.22)	Partially Accepted	<p>NOMS will always find appropriate accommodation for those committed by the courts and therefore the first priority for prisoner transfers will be to maintain headroom in local prisons.</p> <p>Enabling progressive transfers of prisoners is subject to space in the appropriate part of the prison estate becoming available. The speed of transfers, therefore, reflects these constraints on the availability of places in a particular location or of a particular type. NOMS remain committed to making the most effective use of the estate to support prisoners' needs, including by seeking to hold prisoners in the most appropriate security conditions and in prisons that are able to meet the needs presented by their individual case.</p> <p>At HMP Pentonville, offender supervisors have been assigned caseloads and to plan sentence planning boards and risk management plan as part of OASys assessment. The actions from these will enable offenders to be identified for transfer to a suitable establishment.</p>	Strategy and Stakeholder Management Team / Heads of Offender Management	30 September 2015
5.67	There should be a system to identify and support potential indeterminate sentence prisoners during the first days of custody, and throughout the remand and trial period. (4.25, repeated recommendation 4.25)	Accepted	<p>Establishments cannot fully predict if someone will be given an indeterminate sentence during remand time as it the Judge that makes a final decision during sentencing.</p> <p>If the prisoner is in custody on remand for a charge that warrants life imprisonment e.g. murder, manslaughter, a system is in place to support those group of offenders where they will be seen by an offender supervisor and supported as they go through their remand period and time.</p>	Heads of Offender Management	30 September 2015
	Reintegration planning				

5.68	All prisoners should have a resettlement needs assessment and plan across the resettlement pathways well ahead of their release. (4.31)	Accepted	Basic Custody Screening Tool 1 & 2 will be completed both prison and TMC staff, identifying initial pathway needs. More intense pathway needs work with offenders will be undertaken by Penrose staff during the last three months of a prisoner's sentence/prior to their release.	Head of Reducing Re-offending	31 October 2015
5.69	The effectiveness and sufficiency of all resettlement provision should be regularly monitored in partnership with service providers and service users to ensure needs are being effectively met. (4.32, repeated recommendation 4.31)	Accepted	Regular CRC contract review meetings will take place at a regional level. Bi-monthly reducing re-offending meeting will take place in the prison with CRC service provision as a standing agenda item to feedback progress/issues. Education, training and employment key performance targets will be handed over to CRCs.	Head of Reducing Re-offending	31 October 2015
5.70	Better links should be established, with a wider range of employers, to provide more jobs for prisoners on release. (4.39)	Accepted	Links will be established with external agencies to assist prisoners with employment and education provision (Sue Ryder Trust & Shaw Trust) Islington Council will be invited to the reducing re-offending meetings.	Head of Reducing Re-offending	31 October 2015
5.71	All prisoners with finance and debt problems should be able to access specialist help and, where relevant, they should be able open bank accounts before release. (4.45)	Accepted	This is part of the service provision by CRCs.	Head of Reducing Re-offending	31 October 2015
5.72	Family visits days should be open to all prisoners, regardless of their IEP level. (4.53, repeated recommendation 4.50)	Rejected	As part of the revised Incentives and Earned Privileges (IEP), where operationally possible extra and improved visits can be offered as a key earnable privilege for prisoners who engage with efforts to rehabilitate themselves. Prisoners on enhanced level may receive improved visits if possible in better surroundings and with more flexibility over times. Basic prisoners are not eligible to apply for Family/Arsenal Days but other family support services and interventions are available to them.	NOMS Equality, Rights and Decency Group	

5.73	The prisoner search area and waiting room should be clean and refurbished. (4.54)	Accepted	Regular cleaning plan has been implemented. A regular cleaning schedule, with built-in weekly reviews, is now in place to ensure compliance.	Head of Operations 1	Ongoing
5.74	Closed visits booths should be located out of sight of other visits. (4.55)	Rejected	There is no obvious suitable alternative site.	Head of Operations 1	
5.75	The scale and type of provision to address offending behaviour should be based on a local analysis of need. (4.60)	Accepted	A prisoner needs analysis will be completed in conjunction with OMU, this will be part of the resettlement strategy to include high risk offenders.	Head of Reducing Re-offending and Heads of Offender Management	31 December 2015
5.76	Prisoners should be able to access interventions to help them address experiences of abuse. (4.62)	Accepted	There are a range of support services and intervention groups for prisoners to access, ranging from excellent substance misuse interventions run by Phoenix Futures, Certitude Peer Mentoring scheme, Alcoholics Anonymous, Narcotics Anonymous, anger management programmes, Enhanced Support Services (ESS) for non-engaging prisoners, and a full complement of psychologists and psychiatrists for more in depth support where necessary. All prisoners can apply for support from any of the groups, which are advertised in the new five day induction programme. Additionally drop in clinics are offered to prisoners on wings by various partner agencies.	Head of Safer Prisons and Equality & Head of Drug Strategy and Healthcare Provision	Completed
	Housekeeping points				
	Incentives and earned privileges				
5.77	Prisoners on the entry level of the incentives and earned privileges scheme should be reviewed no later than 14 days after arrival. (1.61)	Accepted	This is in line with PSI 30/2013 – <i>Incentives and Earned Privileges</i> and is the current system at HMP Pentonville.	NOMS Equality, Rights and Decency Group / Head of Residence	Completed
	Residential units				
5.78	Prisoners should be able to access their stored property without delay. (2.14)	Accepted	A review will take place of prisoner's property to include: how property is accepted; what is allowed; what prisoners	Heads of Residence and	31 October 2015

			are entitled to have in possession; how prisoners obtain their property; the length of time from applying to receiving items and appropriate storage of property.	Head of Operations 2	
5.79	The applications processes should be publicised to staff and prisoners, to ensure prison-wide adherence to the policy and that sufficient levels of privacy are maintained. (2.15)	Accepted	The application system is publicised and is a successful working system. Prisoners have access to envelopes to hand in an application.	Head of Residence and Head of Corporate Services	Completed and ongoing
	Complaints				
5.80	Low-level domestic issues should be resolved on the wings, to avoid the prisoner having to make a formal complaint. (2.53)	Accepted	The application system allows prisoner representatives to deal with low-level concerns/issues/requests for information in the first instance. These are passed to officers if they are unable to deal with the application.	Head of Residence and Head of Corporate Services	Completed
	Health services				
5.81	Health services staff should have regular access to individual management and clinical supervision and this should be recorded. (2.75)	Accepted	Training has been provided to senior nurses on clinical supervision and is currently being rolled out to all staff. Slots have been allocated on a weekly basis (Friday afternoon) for managers to have clinical supervision with their staff. The deputy head of healthcare is developing the process to ensure all sessions are recorded.	Heads of Healthcare	Completed and ongoing
5.82	Health services staff should have easy access to, and be aware of, all current health policies and procedures. (2.76)	Accepted	In-house training programme has been introduced on a weekly basis where all policies, internal procedures, national policy and any items identified through lessons learnt are shared with staff. Attendance is signed off.	Heads of Healthcare	Completed
5.83	Prisoners should be made aware of the availability of barrier protection. (2.77)	Accepted	Condoms and information regarding sexually transmitted infections and blood-borne viruses are available at every treatment room in the prison and will be distributed on request by nursing staff. Additionally the library holds information and new condom packs (condoms and leaflets), plus regular well man clinics and health promotions communicate to all prisoners the availability of protection if necessary.	Head of Drug Strategy and Healthcare Provision	Completed
5.84	The high failure-to-attend rate for clinics should be investigated and measures taken to improve the use of appointments where appropriate.	Accepted	Healthcare has concluded an audit on clinics 'Did not attend' (DNA). Outcomes will be evaluated and an action plan developed to ensure the issues leading to high DNA	Heads of Healthcare	31 October 2015

	(2.86)		rates are addressed.		
5.85	Prisoner access to a pharmacist for routine advice about medicines should be well advertised. (2.96)	Accepted	Pharmacy led clinics are run by the pharmacist and pharmacy technicians. Information is included as part of healthcare induction and information will be available on the wings from staff and notices to prisoners.	Heads of Healthcare	31 August 2015
5.86	Date-checking procedures for medications should be documented. (2.97)	Accepted	The lead pharmacist is currently reviewing all pharmacy policies including stock control and management.	Heads of Healthcare	31 August 2015
5.87	Requisitions for controlled drugs should be signed when medicines are received on the wings. (2.98)	Accepted	The lead pharmacist is currently reviewing all pharmacy policies including control drugs management (from stock to prescribing, administration etc.)	Heads of Healthcare	31 August 2015
	Catering				
5.88	All prisoners involved in the preparation and serving of food should be appropriately trained in food hygiene. (2.117)	Accepted	Training in food hygiene is in place and is ongoing.	Head of Residence	Completed
	Purchases				
5.89	Problems with shop orders should be dealt with quickly. (2.122)	Accepted	Any issues with canteen are raised at the time it is distributed. These issues are recorded and then sent to prisoners monies to make the appropriate refund.	Head of Residence	Completed
	Learning and skills and work activities				
5.90	Rigorous tests should be introduced to assess and identify prisoners' English and mathematics support needs at all levels more accurately. (3.28)	Accepted	TMC will rigorously follow BSKB framework which is a nationally recognised assessment tool.	Head of Reducing Re-offending	31 October 2015
	Offender management and planning				
5.91	The identification of MAPPA-eligible cases on NOMIS should be up to date and accurate. (4.20)	Accepted	A system had been introduced that will enable the MAPPA clerk to print out discharge list from Prison NOMIS on a weekly basis and update the MAPPA eligible cases and ensure that they are accurate. This will be monitored by a manager on a monthly basis and signed off.	Heads of Offender Management	Ongoing
	Reintegration planning				
5.92	Skill action plans should be used in allocations to activity. (4.40)	Accepted	Sequencing (i.e. matching prisoners to the right jobs/activity based on their status and length of sentence) and the induction processes will be developed and improved to make them fit for purpose. There are plans in place for a fully functioning Activity Hub.	Head of Reducing Re-offending	31 March 2016

5.93	Prisoners should use the virtual campus (VC) to develop employability skills and search for jobs on release. (4.41)	Accepted	VC computers will be located in specific areas in order to promote maximum usage (Shop 5 / Library / G1). Small Firms Enterprise Development Initiative qualifications will be used to increase the use of Virtual Campus.	Head of Reducing Re-offending	31 December 2015
5.94	Prisoners on closed visits should have access to the full range of refreshments. (4.56)	Partially Accepted	The supervision of visits areas must remain proportionate to the risk assessed. Prisoners on closed visits have access to unsealed refreshment items passed to them by staff	NOMS Equality, Rights and Decency Group Head of Operations	Completed

Recommendations		Housekeeping Points	
Accepted/Existing Practice	63	Accepted/Existing Practice	17
Accepted Subject to Resources /Partially Accepted	6	Accepted Subject to Resources /Partially Accepted	1
Rejected	7	Rejected	
Total	76	Total	18