

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP THE MOUNT

TIMETABLE	DATE	STATUS OF THIS RETURN
Unannounced inspection	7-17 April 2015	
Report published	21 August 2015	
Action Plan submitted	29 October 2015	Attached

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POSITION AS AT: OCTOBER 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	Professional telephone interpreting should be available in reception. Staff should use this service to assess prisoners' health needs on arrival, and to assess, inform and consult them during their sentence. (S53)	Accepted	Telephone Interpretation is now available through Language Line. Posters in various languages are now displayed in Reception advising prisoners of the service available. All reception staff now utilise Language Line for any non English speaker and this is recorded within prisoners' files. A phone line has been installed which enables confidentiality to be maintained.	Head of Operations	Completed
5.2	The underlying causes behind problems or vulnerable behaviour should be effectively and appropriately addressed, and options for each prisoner's safe reintegration back into the main prison or transfer should be identified. (S54)	Accepted	The Violence Reduction Team now investigate all incidents of violence and requests for own protection. A report with recommendations suggested to minimise the risk to the individual is made and recorded on an electronic database which will be provided to relevant managers. These will be discussed at the bi weekly violence reduction forum and monitored by the Head of Safer Custody.	Head of Safer Custody/ CSU/Equalities	Completed
5.3	Plans to increase the number of activity places to meet the new and increased population should be implemented as soon as possible and prisoners should be allocated to an activity which meets their needs. (S55)	Accepted	Additional work placements are planned in Industries including the development of a call centre and other contracted work representing a further 50 spaces. The new skills centre will represent another 60 spaces. The resettlement prisoners' regime will be restructured to access resettlement courses and services provided as part of the Community Rehabilitation Company (CRC) contract. Work is also underway to develop more activity places within the new gymnasium.	Head of Reducing Re-offending	31/12/2015
5.4	Arrangements to identify and meet the resettlement needs of all prisoners (not just those within the remit of the Community Rehabilitation Companies) should be put in place immediately. (S56)	Accepted	All prisoners are now able to access the services of the CRC Team based at HMP The Mount. For those prisoners subject to probation supervision, services are supplied under the rate card- which is the payment for services not in scope for contracted CRCs. This allows	Head of Reducing Re-offending	Completed

			probation supervision prisoners access to resettlement services. For prisoners with releases in other contract Package Areas i.e. outside of Bedfordshire, Hertfordshire, Northampton and Cambridge; a referral is made by the host CRC to the prisoner's release area CRC.		
5.5	A full programme of family support work should be provided and visits facilities should be upgraded to meet the needs of the population. (S57)	Accepted	Family work is now being provided through the Ormiston Trust and the charity, Sova to provide services at HMP The Mount. Fathers Inside is no longer run; however, the locally established Family Links course is being prepared as a replacement. New initiatives will be implemented by the Head of Operations linked to improving support with children and families. Enhanced Family Visits are being improved to allow access for a greater number of prisoners and the visitors centre will be upgraded.	Head of Operations	30/06/2016
	Recommendations				
	Courts, escort and transfers				
5.6	Reception should stay open over the lunch period, to avoid unnecessary delays in prisoners disembarking from escort vans. (1.4)	Accepted Subject to Resources	This is not part of bench marking but is managed on a proactive basis by the daily operational manager. This is dependent upon the level of resource available on the day.	Head of Operations	Completed
	Early days in custody				
5.7	Reception interviews should be undertaken in private. (1.14)	Accepted	An office in reception will be made available to provide privacy and a telephone for translation purposes.	Head of Operations	31/10/2015
5.8	All new prisoners should receive the full range of first night activities, such as telephone calls and showers, and be provided with an adequate amount of prison-issue clothing. (1.15)	Accepted	All first night activities are provided in reception or on the Induction wing. The only exception to this would be in the event of very late receptions, and in those circumstances prisoners would have access to all activities the next morning on the induction wing.	Head of Operations	Completed
5.9	First night staff should know where new prisoners are located and provide additional checks to promote their safety. (1.16)	Accepted	A spreadsheet detailing all new first night receptions and their location will be introduced and maintained on the wing. First night checks will be recorded on this and risk assessed, based on initial staff interaction and/or time of arrival. This will be monitored by Night Managers.	Head of Residence and Safety	31/10/2015
	Bullying and violence reduction				
5.10	A localised violence reduction strategy should be developed, based on all the intelligence gathered and trend information about the establishment, and should include the direct challenging of perpetrators, more use of	Accepted	The local violence reduction policy will be reviewed to reflect local issues based on intelligence and other relevant information. The policy will contain measures designed to challenge perpetrators and support victims. The new Gangs, Responsibility, Antisocial behaviour,	Head of Safer Custody/ CSU/Equalities	30/11/2015

	structured interventions and individualised support to victims. (1.23)		Segregation, Positive Change (GRASP) initiative for perpetrators will be further consolidated.		
	Self-harm and suicide				
5.11	All Prisons and Probation Ombudsman recommendations should be reviewed regularly to evidence full and ongoing achievement. (1.32)	Accepted	Prison and Probation Ombudsman (PPO) recommendations are discussed at the monthly Safer Custody meeting along with any learning points and appropriate action taken. A consolidated action plan will be monitored.	Head of Safer Custody/ CSU/Equalities	31/10/2015
5.12	Procedures for managing in-cell incidents of self-harm should be clarified and communicated to all staff. (1.33)	Accepted	Code red and code blue procedures are now in place and new guidance will be issued to staff.	Head of Safer Custody/ CSU/Equalities	31/10/2015
5.13	The quality of assessment, care in custody and teamwork (ACCT) care maps should be improved, to identify and address all underlying risk factors. (1.34)	Accepted	New check sheets will be introduced for ACCT documents. This will be placed at Custodial Manager (CM) level and checked by the Safer Custody CM. All closed ACCT documents are already discussed at the monthly Safer Custody meeting.	Head of Safer Custody/ CSU/Equalities	31/10/2015
5.14	All prisoners at acute risk of self-harm who are placed on constant watch should have access to an individualised and constructive daily regime. (1.35)	Accepted	All wings have been informed that prisoners on constant supervision must receive the minimum of exercise, shower and offered access to the telephone. The constant supervision log will record this. A notice has been issued to wing staff to this effect and placed in the constant supervision folders.	Head of Safer Custody/ CSU/Equalities	Completed
5.15	Access to Listeners should be reviewed and improved. (1.36)	Accepted	Listeners now have access to all areas and are now doubled up to allow them to see prisoners on a high risk cell sharing risk assessment (CSRA).	Head of Safer Custody/ CSU/Equalities	Completed
	Safeguarding				
5.16	The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes(1.39).	Accepted	The Governor and NHS commissioners are raising the issue of Social Care assessments and the delivery of social care support via the NHS Partnership Board. The prison has formally written to the local Director of Social Services, in order to get the service embedded.	Governor	30/11/2015
	Security				
5.17	Closed visits should only be applied in response to trafficking-related activity. (1.47)	Rejected	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 trafficking activity. Closed visits may be imposed as an administrative measure where necessary in accordance with Prison Rule	Security Policy Unit (SPU)	

			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 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.		
	Discipline				
5.18	All use of force dossiers should be complete, including a F213 form. (1.58)	Accepted	A custodial manager has daily responsibility to check all use of force dossiers are completed. Use of control and restraint (C&R) is monitored by the C&R Committee on a monthly basis.	Head of Safer Custody/CSU/Equalities	Completed
5.19	All uses of batons should be reviewed, to ensure proportionality. (1.59)	Accepted	All use of batons is now discussed at the monthly C&R Committee meeting.	Head of Safer Custody/CSU/Equalities	Completed
5.20	Robust governance arrangements should ensure that the use of the special cell is reduced, authorised only as a last resort and that all paperwork is fully completed. (1.60, repeated recommendation 7.27)	Accepted	The use of special accommodation is discussed at the Use of Force Committee meeting to make sure correct usage is consistent. This is also discussed at the morning meetings following its use. Governors and orderly officers have already been instructed that prisoners must be given every opportunity to return to a normal cell at the earliest opportunity including during the night state.	Head of Safer Custody/CSU/Equalities	Completed
5.21	Reintegration planning for prisoners on the segregation unit should be formalised and individual objectives should be set, according to their needs and risks. (1.65)	Accepted	A reintegration policy is now in place, which includes individual objectives.	Head of Safer Custody/CSU/Equalities	Completed
5.22	All prisoners should be offered at least an hour's exercise in the open air. (1.66)	Rejected	Policy guidance is contained in PSI 75/2011 <i>Residential Services</i> . "Time in the open air" means time spent in a	Policy Team, Equalities, Rights	

			<p>situation where the prisoner is able to benefit from fresh air and natural light. Time spent outdoors as part of a formal activity, for example outdoor work or watching or participating in sport, counts as meeting this requirement. The time in the open air does not have to be spent in a single period, but must be in no more than two periods, which can include time in the open air moving between activities. Prisoners are afforded a minimum of 30 minutes in the open air daily, as defined in the Service Level Agreement/ Contract. This provision is mandatory subject to weather conditions and the need to maintain good order and discipline.</p> <p>On a local level, prisoners are given time in the open air during movement to and from work, and between cease work and lunch, this is all during the working day. This guarantees between 30 and 60 minutes daily.</p>	and Decency Group (ERDG)/ Head of Residence and Services	
	Substance misuse				
5.23	Only prisoners engaged in recovery should be housed on the recovery wing. (1.76)	Partially Accepted	The number of prisoners actively involved or engaging in recovery rarely equals the total number of spaces on the unit. An accommodation review has been conducted which recommends that only those engaged, those who have completed the programme or enhanced prisoners and prisoner workforce are housed on this unit. Changes to the population on the wing will be managed by the wing manager to achieve this recommendation where possible.	Head of Residence and Safety	31/12/2015
5.24	Officers working on the recovery unit should be specially selected and trained for the task. (1.77)	Accepted	As part of staff rotation, expressions of interest will be sought from staff wishing to work on this unit. The wing manager working with the contract lead will select and offer local training to successful staff.	Head of Residence and Safety	31/12/2015
5.25	Officers supervising medication queues should consistently prevent overcrowding of the hatch area. (1.78)	Accepted	A number of changes have taken place around the medicine queue, these include the locking of gates in order to restrict movement, only allowing those on the list to exit the wing to attend the medical hatch and supplying some medicines from the pharmacy on Nash unit. Supervision around the medicine queue has been strengthened. Other dispensing areas will open shortly to reduce pressures on the existing dispensary.	Head of Residence and Services	30/11/2015

	Residential units				
5.26	Two prisoners should not share cells meant for one. (2.8, repeated recommendation 2.1)	Rejected	The occupancy of prison cells is determined by establishments and certified by Deputy Directors of Custody (DDC) in accordance with PSI 17/2012, which provides clear guidelines for determining cell capacities. Cells will only be shared where a DDC has assessed them to be of adequate size and condition for doing so. All accommodation is compliant with the certified cell certificate.	Deputy Director of Custody (DDC)	
5.27	Toilets in all cells should be appropriately screened. (2.9)	Accepted	A review of all cells (with those used to hold two prisoners made priority) will be conducted to make sure adequate screening is in place.	Head of Residence and Safety	31/10/2015
5.28	The applications process should be standardised across the prison and should include an active tracking system. (2.10)	Accepted	The application system has been overhauled and a pilot study undertaken on two of the residential units. The new system relies more on dealing with prisoners' issues at the point of contact, only submitting formal applications where they are clearly necessary. Following a prisoner engagement forum this will be rolled out across the establishment.	Head of Residence and Safety	31/01/2016
	Staff-prisoner relationships				
5.29	Staff should have regular, meaningful contact with prisoners and this should be recorded. (2.14)	Accepted	A review of the Personal Officer scheme will be conducted with a view to increasing prisoners' knowledge of who their Personal Officer is. Staff/ prisoner interaction will be at the forefront of the updated local policy, including the requirement to record interactions. Wing supervising officers will be tasked with maintaining checks to guarantee compliance.	Head of Residence and Safety	28/02/2016
	Equality and diversity				
5.30	Comprehensive equality data across all protected characteristics should be collated and interrogated, and action should be taken to address any identified inequalities. (2.20)	Accepted	At present analysis of Ethnic Monitoring Data (EMT) is done on a quarterly basis as it is produced and only covers five of the protected characteristics as laid out in the Equalities Act 2010. On a local level, equality data is checked each month and any missing information is requested from the relevant wing managers. These are discussed at both the prisoner equality meeting and prisoner forums.	Equalities Team, ERDG/ Head of Safer Custody/ CSU/ Equalities	Completed and ongoing
5.31	Responses to discrimination incidents should be completed within an agreed time frame.	Accepted	Weekly checks are now carried out by the Head of Function and the Safer Custody Custodial Manager to	Head of Safer Custody/	Completed and ongoing

	(2.21)		check the progress of discrimination incident report forms (DIRF).	CSU/Equalities	
5.32	Each protected characteristic should have its own prisoner forum to provide opportunities for consultation, support and information. (2.22)	Rejected	Prisoner representatives for all the protected characteristics are invited to attend the monthly prisoner equality meeting and reports are given and discussed with any actions acted upon. Separate meetings are also held with some of the larger individual groups but there is insufficient time and resource to do this with all protected groups.	Head of Safer Custody/ CSU/ Equalities	
5.33	The negative perceptions of prisoners with disabilities should be explored and any necessary action taken. (2.29)	Accepted	Further research will be conducted in this area; this will be picked up at the prisoner equality meeting and this will form part of an ongoing action plan that will be monitored by the Equality Team.	Head of Safer Custody/ CSU/ Equalities	31/10/2015
5.34	Older prisoners with specific needs and all those with a disability should have, and be involved in the development and regular update of, a multidisciplinary care plan that sets out how their needs are to be met, in line with the Care Act 2014. (2.30, repeated recommendation 4.44)	Accepted	An older prisoner forum is held every three months to discuss issues that may affect this particular group. Membership is made up of a multi disciplinary team and outside agencies including Help the Aged, also attend sessions for these prisoners. Personal emergency evacuation plans (PEEP) are held on the respective units and are reviewed as and when required. Closer links with social care teams will be forged.	Head of Safer Custody/ CSU/Equalities	30/11/2015
5.35	Services and facilities for gay and bisexual prisoners should be developed. (2.31, repeated recommendation 4.65)	Accepted	Links with outside agencies including the Hertfordshire Lesbian Gay Bisexual and Transgender (LGBT) who can provide support when required, have been developed to address the specific needs of gay and bisexual prisoners. Further links with other organisations are to be forged.	Head of Safer Custody/ CSU/Equalities	Completed and ongoing
Faith and religious activity					
5.36	The reason for the high number of complaints submitted should be investigated and action taken to ensure that issues are dealt with at the appropriate level. (2.38)	Accepted	In May 2015, a new system for applications was trialed on Lakes and Ellis Wing which has led to a significant reduction in the number of complaints. Prisoner focus groups have found that prisoners are positive about the new system; and following review by the Senior Management Team, plans are now in progress to train staff in the new system and roll it out across the whole establishment.	Head of Corporate Services	31/12/2015
Health services					
5.37	Health staff should have easy access to regular recorded supervision and all required mandatory training. (2.54)	Accepted	Staff training is monitored routinely by a member of the administration staff within the department. Staff training is recorded on a spreadsheet detailing course details and	Head of Healthcare	Completed

			attendance; which is flagged and passed to departmental manager on a monthly basis to make sure staff remain up to date. Staff clinical supervision has been implemented in line with the Trust clinical supervision framework policy.		
5.38	Prisoners should not have to queue for long periods to access the health centre and receive their medication. (2.55)	Accepted	The collection of medication queue has been reviewed and additional staffing is now in place to streamline the collection process. There has been a systematic review of patient medication to review their in-possession status and where appropriate reduce the requirement to return to healthcare on numerous occasions to collect. An additional dispensing hatch has been opened for prisoners located in Nash Wing. This again has reduced the number of prisoners waiting for medication collection.	Head of Healthcare	Completed
5.39	Staff should ensure that patients receive follow-up appointments as determined by health assessments. Those who fail to attend appointments or collect their medicines should be routinely followed up. (2.56)	Accepted	<p>Patients that fail to collect supervised medication on three consecutive appointments or seven times within a month are booked for a follow up with the GP.</p> <p>Patients who fail to attend for their appointments are notified on the day of their attendance failure via a healthcare generated letter. This informs the patient that they have failed to attend an appointment and advises them on how to rebook an appointment.</p>	Head of Healthcare	Completed
5.40	All custodial staff should be aware of the location of emergency equipment and what to do in an emergency. (2.57)	Accepted	Notices to staff have been issued outlining what is required in an emergency and highlighting where emergency equipment is located.	Head of Corporate Services	Completed
5.41	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. (2.58)	Accepted	<p>A healthcare complaints process, separate to the prison complaints process has been introduced, supported by integration in the Trust complaints management policy. The process of making a complaint is displayed on all wings and a notice to prisoners and staff has been issued. Complaints forms and posters are available in numerous languages. Non-English complaints are managed via the interpretation services.</p> <p>Training has been conducted by the Trust Patient Experience Team on the management of complaints. Complaints are reviewed monthly by the Head of</p>	Head of Healthcare	Completed

			Healthcare to identify trends and learn from any significant incidents /complaints.		
5.42	Health information and health promotion information should be available in a range of formats and languages, and accessible to all prisoners. (2.59)	Accepted	Health promotion material is available in the healthcare department in numerous languages. Patients are given a patient information leaflet in their preferred language when they arrive in reception, which details access to services and processes for medications.	Head of Healthcare	Completed
5.43	Secondary dispensing should cease and medicines should be transported in a safe manner. (2.69)	Accepted	All medication is dispensed from original boxes to the patient and (if required) transported to the patient in a locked trolley.	Head of Healthcare	Completed
5.44	Pharmacy staff involved in the administration of medication should receive appropriate training for this activity and pharmacist medication reviews should be available. (2.70)	Accepted	A protocol has been developed by Lloyds Pharmacy Services, instructing staff on the process for the administration of supervised medication. A supervised competency assessment will be conducted by the Lead Pharmacist of all Pharmacy Technicians	Head of Healthcare	30/11/2015
5.45	A clear administration chart, which records the issue of individual medications, should be used and prisoners who do not attend for their medication should be followed up. (2.71)	Accepted	A standardised administration chart is now used for all supervised medication. As 5.39, patients who do not attend for medication on three consecutive appointments or seven in a month will be booked in for a review with the GP.	Head of Healthcare	Completed
5.46	The use of general sales list medicines should be reviewed to ensure consistency in the issuing of medication, and additional patient group directions should be introduced to enable the pharmacist or nurse to supply more potent medication, avoiding unnecessary consultations with the doctor. (2.72)	Accepted	The minor sickness medication policy is reviewed on a rolling basis and developed for those nursing staff who are not non-medical prescriber (V150 or V300) qualified. Nursing staff who are registered as non-medical prescribers are able to supply medication within their competency and area of expertise.	Head of Healthcare	Completed and ongoing
5.47	There should be effective ventilation in the dental suite and waiting area, to ensure a therapeutic and comfortable environment for patients and staff. (2.77)	Accepted Subject to Resources	An initial quote was received for the installation of an air conditioning unit for the dental suite and waiting area. A business case was submitted but the application was suspended due to cost this financial year. A re-application for funding will be made in January 2016.	Head of Healthcare	31/07/16
5.48	Prisoners should have access to routine dental appointments within six weeks. (2.78)	Accepted	The clinic structure has been developed to triage patients to make sure that acute patients are seen quickly and non acute patients within a six week timeframe.	Head of Healthcare	Completed
5.49	Prisoners should have timely access to a full range of care-planned support for mild and moderate mental health problems, including a	Accepted	A Primary Mental Health nurse has been appointed, who will have clinic space within the in-reach mental health facility and provide support for prisoners with mild and	Head of Healthcare	30/11/2015

	dedicated primary mental health nurse and group therapies. (2.84)		moderate mental health problems at a primary care level.		
	Catering				
5.50	Breakfast packs should be issued on the day of consumption. (2.90)	Rejected	There is no capacity to serve breakfast to prisoners on the day without severely impacting on the regime. The serving of breakfast packs the evening before is a well-established practice across the prison estate and one, which contributes to a swifter start to the morning regime, including start time for work and other activities. The contents of the packs are suitable to be stored in the prisoners' cells overnight.	Head of Residence and Services	
5.51	All catering equipment should be maintained to a reasonable standard and quickly repaired when necessary. (2.91)	Accepted	Maintenance systems are now in place in order to provide effective repair.	Head of Residence and Services	Completed and ongoing
	Purchases				
5.52	Prisoners should not be expected to pay an administration charge for catalogue orders. (2.96)	Rejected	The national catalogue fee was introduced with board approval, and brought in as part of PSI 23/2013 <i>Prisoner Retail</i> , following consultation. There is provision within the PSI for the catalogue handling fee not to be charged in circumstances where products are being purchased as specific requirements for a protected group, where to charge the handling fee would disadvantage the individual compared to the general population. The charge is only a contribution towards the cost of providing this ordering service for prisoners, and is mandatory across all prisons. The handling fee is currently set at 50 pence.	Directorate of Commissioning and Contract Management (DCC)/ Head of Corporate Services	
	Time out of cell				
5.53	Prisoners should have access to evening association periods. (3.3)	Rejected	The national core day for category C training prisons does not allow or resource this.	Policy Team, ERDG	

	Learning and skills and work activities				
5.54	The prison should provide sufficient, appropriately qualified and experienced staff to deliver teaching and training in all planned sessions. (3.11)	Accepted	The issues with staffing are being managed by the Offender Learning and Skills Service (OLASS) 4 Governance Board that meets quarterly. The OLASS 4 contracted provider, People Plus, are being encouraged to make sure that sufficient numbers of trained teaching staff are recruited and retained, with access to regular development opportunities.	Head of Learning and Skills	31/07/2016
5.55	The supply of materials to the workshops and the work flows should provide continuous activity for prisoners in these settings. (3.17)	Accepted	Regular contact is made with responsible managers in Prison Service Industries to make sure there is a regular supply of work and material. Previous problems regarding deliveries being rejected due to no escort staff have been resolved with the appointment of two full time operational support grade (OSG) staff now managing vehicles to the compound.	Head of Reducing Re-offending	Completed
5.56	The outcomes for learners on English for Speakers of Other Languages courses should be improved. (3.28)	Accepted	The new Education Manager is working to enrol all learners on the appropriate English for Speakers of Other Languages (ESOL) course. While recruitment is underway for a replacement ESOL tutor, cover arrangements are in place to maintain the published timetable.	Head of Learning and Skills	Completed and ongoing
5.57	Library orderlies should be provided with the opportunity to achieve an appropriate vocational qualification. (3.34)	Accepted	Library Orderlies have access to the education -run Customer Service qualification. Orderlies are given the opportunity to attend the course when they are released from their library duties. Library staff resources will increase in 2016 to help facilitate this.	Head of Learning and Skills	Completed
	Physical education and healthy living				
5.58	All prisoners should have access to drinking water while exercising. (3.40)	Accepted	Drinking water is now accessible in the old gym and a request for this to be available in the new facility is being taken forward by Carillion.	Head of Reducing Re-offending	30/11/2015
5.59	Use and care of the cardiovascular equipment on the wings should be closely managed and maintained. (3.41)	Accepted	Current provision is being reviewed to decide if the facility can be maintained. If this is to remain a facility for residential areas, appropriate management of equipment will be undertaken by the PE department. Training will be provided to a wing based representative to supervise the	Head of Reducing Re-offending	30/11/2015

			facility and monitor Health and Safety safe systems of work and risk assessments are updated and followed by those using the facility.		
	Strategic management of resettlement				
5.60	The reducing reoffending strategy and action plan should be updated to reflect new resettlement arrangements. (4.6)	Accepted	The reducing re-offending strategy has been updated to reflect new resettlement arrangements and the action plan is currently being updated.	Head of Reducing Re-offending	31/10/2015
5.61	The resettlement committee should set up further mechanisms to monitor the views and outcomes for prisoners of resettlement services. (4.7, repeated recommendation 9.4)	Accepted	Exit monitoring will be reinstated through the introduction of a basic questionnaire delivered to those prisoners due for release; and collected by the resettlement representative. Feedback will be collated and presented at the resettlement meeting bi monthly.	Head of Reducing Re-offending	31/10/2015
	Offender management and planning				
5.62	Offender assessment system (OASys) risk assessments and sentence plans should be complete and up to date for all prisoners. The resources for offender supervisors should be reviewed, to allow them sufficient time to undertake the full requirements of the role. (4.17, repeated recommendation HP58)	Accepted Subject to Resources	Fair & Sustainable increased Offender Management work from prison officer (pay band 3) to specialist pay band 4 roles. The benchmarking principles optimised this role by grouping the Supervising Officers and Offender Supervisors into one profile. This means that all pay band 4 staff will be trained in OM and will have an identified caseload - at HMP The Mount this caseload equates to approximately 1:59. This is significantly lower than the 'standard', NOMS recognises that a proportion of the band 4 work will be conducting supervisory roles, hence the lower benchmark. This makes sure that the core function of offender management is embedded in the officer cadre and allows integration of sentence planning into regime provision, thereby preventing 'silo-working' of the sort which the existence of a separate OMU often created. The resource allocated by Business Development Group is considered sufficient to undertake the full requirements of the role. HMP The Mount is a Category C Training prison, and is not resourced to complete initial OASys/ Sentence Plans for prisoners. However, as a minimum all new receptions are allocated interim sentence plan targets and referred to the appropriate courses through the sequencing process .Additionally, when resources allow, an Initial OASys is completed. We await the national announcement regarding the new OM model due Autumn 2015.	Head of Offender Management	Completed and ongoing

5.63	Prisoners' recategorisation should not be held back to complete a programme unless completion would significantly affect their risk level. (4.24)	Accepted	There has been a review of the process for allocation of courses to make sure that appropriate referrals are being made. Extra guidance via briefings from managers has been provided to the relatively new team of Offender Supervisors. Additionally, written guidance has been provided by the Programmes Treatment Manager for the intense programmes, as well as Programme awareness, which is ongoing.	Head of Offender Management	Completed and ongoing
Reintegration planning					
5.64	Education, training and employment provision should be adequately publicised and all prisoners should receive appropriate training and advice before release, to meet their resettlement needs.	Accepted	All education, training and employment (ETE) provision is publicised within the Reducing Re-offending booklet. Services are well advertised within the unit and around the establishment. CRC staff and their Resettlement representatives see every prisoner and explain what provision is available. Access to job searches through the Virtual Campus is also being made available on the Resettlement Wing.	Head of Reducing Re-offending	30/11/2015
5.65	The virtual Campus should be used to support prisoners' active job searches. (4.42)	Accepted	Virtual campus has been installed onto the new education network. It will be accessible from Nash Unit, the new skills centre (old kitchen) and music room (Main Education) if required. Weekly updates are being sought and obtained from People Plus regards a definitive go-live date.	Head of Reducing Re-offending	30/11/2015
5.66	Family visits should be available to all prisoners. (4.56, repeated recommendation 9.71)	Partially Accepted	There is no statutory requirement for prisons to provide family days for all prisoners. On a local level, the whole area of family ties and support for families is under review. This will include additional levels of enhanced family visits which will be subject to additional resources being found.	Policy Team, ERDG/ Head of Operations	31/10/2015
Housekeeping points					
Discipline					
5.67	Electronic case notes for segregated prisoners should include meaningful entries that provide a clear picture of their behaviour and issues. (1.67)	Accepted	Weekly checks will be carried out by the Unit Manager to make sure meaningful entries are recorded.	Head of Safer Custody/ CSU/ Equalities	31/10/2015
Health services					
5.68	Medication should be stored in its original labelled box. (2.73)	Accepted	All medication is now being stored and dispensed in its original box.	Head of Healthcare	Completed

5.69	Reference texts should be current. (2.74)	Accepted	Out of date reference material has been removed from pharmacy. Electronic versions are utilised where possible and hard copies replaced one for one with the departments.	Head of Healthcare	Completed
Learning and skills and work activities					
5.70	The monitoring of the impact of additional learning support and the English and mathematics support in workshops should be improved. (3.12)	Accepted	The future use of individual learning plans (ILP) is being considered by Regional OLASS partners. By introducing Personal Development Plans across regime activity areas all regime staff will be able work with prisoners to recognise their starting point and the progress they have made. This can and will need to include Maths and English progress.	Head of Learning and Skills	28/02/2016
5.71	The quality and clarity of achievable learning objectives in lesson plans should be improved. (3.24)	Accepted	10 minuted target observations will be used to quality check Lesson Plans in 2015-16. Best practice is being shared between Cluster 2 prisons.	Head of Learning and Skills	31/12/2015
5.72	Teaching staff should make better use of information learning technology in lessons. (3.25)	Accepted	Broken interactive whiteboards (IWB) have been fixed. The Functional Skills Curriculum Manager will undertake initial training with staff on effective use of IWBs. Staff will then be given adequate time to practice using them and piloting resources.	Head of Learning and Skills	31/01/2016

Recommendations		Housekeeping Points	
Accepted	54	Accepted	6
Accepted Subject to Resources/Partially Accepted	5	Accepted Subject to Resources/Partially Accepted	0
Rejected	7	Rejected	0
Total	66	Total	6