

**ACTION PLAN: HMCIP REPORT**

**ESTABLISHMENT: HMP RANBY**

<b>TIMETABLE</b>	<b>DATE</b>	<b>STATUS OF THIS RETURN</b>
Full Announced inspection	24-25 August; 1-4 & 7-11 September 2015	
Report published	25 February 2016	
Action Plan Submitted	22 April 2016	Attached

## ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: RANBY

POSITION AS AT: MAY 2016

1. Rec. no	2 Recommendation	3. Accepted/ Rejected	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	<b>Main recommendation To NOMS</b>				
5.1	Urgent action is needed to stabilise the prison and to make it safer. NOMS should temporarily reduce the size of the prison's population to help stabilise it, and in the medium term simplify the role of the prison as a working prison only. (S46)	Partially accepted	<p>Urgent steps have been put in place as indicated in 5.2. During September and October 2015 the population was reduced by 120 to stabilise the prison population which has since increased with Population Management Unit providing support to the Deputy Director of Custody (DDC) and establishment.</p> <p>HMP Ranby provides a resettlement role appropriate to the demands of offenders generated by Derbyshire, Nottinghamshire and Leicestershire contract package area, along with other prisons in the NOMS East Midlands region. Reconfiguration activity across the prison estate as part of the PETP will re-evaluate the resettlement demands placed on all prisons, including HMP Ranby.</p>	Prison Estate Transformation Programme (PETP)	31 October 2016
	<b>Main recommendations To the governor</b>				
5.2	An effective, whole prison strategy to reduce violence and its contributory causes should be put in place, based on consultation with staff and prisoners and an analysis of the causes of high levels of violence. (S47)	Accepted	<ol style="list-style-type: none"> <li>1. Conduct a staff and prisoner survey around safety, violence and general stability</li> <li>2. Analyse the violence and contributing factors at HMP Ranby resulting from the survey</li> <li>3. Respond to recommendations from the imminent Measuring the Quality of Prison Life (MQPL)</li> <li>4. Conduct regular staff and prisoner focus groups / consultations surrounding violence and how to reduce it</li> <li>5. Undertake a full review of the violence reduction strategy informed by the above ensuring practical outcomes to challenge perpetrators and support victims</li> <li>6. Establish a peer mentoring scheme dedicated to violence reduction to increase prisoner engagement and promote a zero tolerance to violence.</li> </ol>	Head of Safer Custody	31 July 2016

5.3	The quality of assessment, planning and monitoring for prisoners subject to ACCT procedures should be improved and include effective care planning and better attendance at review meetings. (S48)	Accepted	<ol style="list-style-type: none"> <li>1. Implement a Case Manager model to make sure of continuity in reviews and care planning.</li> <li>2. ACCT document management checks will routinely be completed</li> <li>3. Address any findings from ACCT management checks with individual staff members</li> <li>4. Discuss emerging themes from ACCT management checks at the Safer Prisons meeting to identify and improve quality</li> <li>5. Train all Band 4 and Band 5 staff in ACCT Case Management</li> <li>6. All ACCT Case managers and Assessors will receive refresher training every three years</li> <li>7. Weekend morning meetings will be conducted to identify associated risks</li> </ol>	Head of Safer Custody	31 May 2016
5.4	The prison should provide a full purposeful working day for all the men held, attendance and punctuality should be good and a good work ethic promoted. (S49)	Accepted	<ol style="list-style-type: none"> <li>1. Create an environment where attendance to work is a priority.</li> <li>2. Create an environment where prisoners benefit from engaging in activity. Incentives and Earned Privileges (IEP) review will include a way of recording regular attendance on NOMIS allowing consideration for enhanced privileges and access to be considered for Home Detention Curfew (HDC) and Category D status. Those that fail to engage will also have NOMIS recorded notes that will not support progression.</li> <li>3. Communicate and advise staff on the importance of creating an enabling opportunity to attend activities focusing on Every Contact Matters protocol and setting targets of 80% into activity areas leaving the House Block on a regular basis.</li> </ol>	Head of Residence	31 August 2016
5.5	The backlog of offender assessment system (OASys) and home detention curfew assessments should be tackled and all relevant prisoners should be seen promptly by their offender supervisor to be assessed, have relevant targets set and risks addressed. Contact should be regular and meaningful. (S50)	Accepted	<ol style="list-style-type: none"> <li>1. Monitor the OASys backlog on a weekly basis and record reasons</li> <li>2. Allocate OASys assessments to Offender Supervisor (OS) by the Senior Probation Officer (SPO) to make sure they always have at least three task list to complete</li> <li>3. Include target completions within staff performance development report (SPDR) and monitor delivery</li> <li>4. Contact Offender Manager (OM) as prisoners arrive in Reception to identify possible programmes / interventions / targets to include in OASys and Sentence Plans</li> <li>5. Notify prisoners who their OS is upon allocation</li> <li>6. Re-introduce OMU satellite offices to provide regular and meaningful contact</li> <li>7. Monitor HDC backlog on a weekly basis and record reasons</li> <li>8. Any prisoner transferring after the 10 week HDC timeframe or after their eligibility date will have their assessment started immediately on Reception</li> </ol>	Head of OMU	30 June 2016

			<p>9. HDC1 and HDC2 documentation will be issued immediately on Reception for return within seven days</p> <p>10. HDC1 and HDC2 documentation that is not returned will be taken to the prisoner by OSs that are on duty at weekends.</p>		
	<b>Recommendations To the governor</b>				
	<b>Security</b>				
<b>5.6</b>	All requested intelligence-led searches should be completed. (1.46)	Accepted	<ol style="list-style-type: none"> <li>1. Prioritise all requested intelligence-led searches</li> <li>2. Grade cell searches to the risk presented</li> <li>3. Grade searches involving weapons as the highest level of search</li> <li>4. Head of Security to monitor progress weekly and identify how many searches have been completed with crosscheck against the F78 (Searching paperwork)</li> <li>5. Monthly – To add discussion at Monthly Security Meeting around how many cell searches have been conducted and identify any trends or patterns and findings.</li> </ol>	Head of Security	30 June 2016
<b>5.7</b>	There should be enough staff supervising to provide a safe environment during mass movement of prisoners. (1.47)	Accepted	Undertake a review of staff supervising line route to provide a safe environment during mass movement of prisoners	Head of Operations	31 May 2016
	<b>Incentives and earned privileges</b>				
<b>5.8</b>	The IEP scheme should be equitably applied to ensure full compliance with the regime. (1.52)	Accepted	<ol style="list-style-type: none"> <li>1. Conduct an IEP Equality Impact Assessment</li> <li>2. Review IEP scheme including options to reward prisoners who attend activities on a regular basis</li> <li>3. Create a transparent approach with better attendance at IEP reviews and appropriate grades chairing the review</li> <li>4. Create a robust approach to non-attendance into activities. Place those who refuse to engage on Basic and do not allow access to privilege work/activity areas until engagement is evidenced on a regular basis</li> <li>5. Develop opportunities to reward enhanced prisoners that are equitable to the effort shown when attending work and creating a supportive environment within HMP Ranby. This will include Mentor roles.</li> </ol>	Head of Residence	30 June 2016
	<b>Discipline</b>				
<b>5.9</b>	Oversight and recording arrangements for use of force should be robust enough to provide re-assurance that it is	Accepted	<ol style="list-style-type: none"> <li>1. Record all planned interventions with the video camera</li> <li>2. Body Worn Cameras will not be used to record planned interventions</li> <li>3. Review recordings of planned interventions at the Use of Force meeting</li> </ol>	Head of Safer Custody	31 May 2016

	used proportionately and only as a last resort. (1.61)		<ol style="list-style-type: none"> <li>4. Review Terms of Reference of the Use of Force meeting to make sure robust oversight of use of force</li> <li>5. Engage with interested parties to make sure clear understanding of expected outcomes</li> </ol>		
5.10	The transfer out policy should be evaluated and poor behaviour by prisoners should be managed without routinely resorting to transfers out. (1.68)	Accepted	<ol style="list-style-type: none"> <li>1. Devise Terms of Reference for an Order and Control meeting that provides high level oversight of the management of prisoners who behave poorly</li> <li>2. Agree all non-routine transfers through the Safeguarding and Order and Control meetings</li> </ol>	Head of Safer Custody	30 June 2016
	<b>Substance misuse</b>				
5.11	Substance misuse services should be sufficient to meet demand. (1.75)	Accepted	<ol style="list-style-type: none"> <li>1. Business case submitted to NHS England and approved for an additional substance misuse service post. Funding in place as at April 2016</li> <li>2. Explore opportunities for a more integrated House-block based multi-disciplinary approach</li> </ol>	Head of Healthcare  Head of Healthcare	Completed  30 June 2016
5.12	All prisoners prescribed methadone should be consistently located on the drug treatment unit. (1.76)	Accepted	<ol style="list-style-type: none"> <li>1. Develop a protocol where it is not possible for prisoners who are engaged in prescribed methadone practice to move from the Drug treatment unit until they have successfully completed the course.</li> <li>2. Identify and challenge those prisoners who are not located on the drug treatment unit. Offer opportunity to rapid detox in a safe manner on another House Block or arrange to transfer if this is not an option.</li> <li>3. Discuss with commissioners and agree a contingency if numbers exceed 10% of operational capacity.</li> </ol>	Head of Residence  Head of Residence  Deputy Governor	30 June 2016  30 June 2016  30 June 2016
	<b>Residential units</b>				
5.13	Recent management action to address a range of prisoners' frustrations by improving cellular accommodation, cleanliness and the applications process should be sustained and developed. (2.10)	Accepted	<ol style="list-style-type: none"> <li>1. Create a monitoring cell check system that maintains decency when cells become available to re-allocate.</li> <li>2. Create a working party of prisoners who can assemble and fit white wood furniture that supports the cell refurbishment programme.</li> <li>3. Review access to cleaning materials and make available to prisoners during association and domestics</li> <li>4. Develop a quality assurance framework that maintains the quality of Fabric checks.</li> <li>5. Discuss the Decency policy during team meetings</li> <li>6. CMs to conduct monthly 10% quality assurance checks of the applications process to ensure they are processed, recorded, distributed to the correct person and prisoners receive an appropriate response in a timely manner.</li> <li>7. Test the process through a 'mystery shopper' approach.</li> </ol>	Head of Residence	31 May 2016

5.14	The cell call system should be routinely monitored by a senior manager and explanations provided for delays. (2.11)	Accepted	<ol style="list-style-type: none"> <li>1. Submit a business case to update the cell call technology</li> <li>2. Upload cell call data onto the shared drive every day</li> <li>3. Head of Safer Custody to check data and identify trends</li> <li>4. Report any issued to House Block managers</li> <li>5. Any unacceptable delays will be explained by House Block managers</li> <li>6. Record and analyse trends at multi-disciplinary Safer Custody meeting and ensure Head of Safer Custody provides routine explanations for delays</li> </ol>	Head of Safer Custody	30 June 2016
	<b>Equality and diversity</b>				
5.15	Strategic management of equality needed to be strengthened by more consistent attendance by relevant functional areas at equality action team meetings, a needs analysis of the population and regular monitoring of outcomes for prisoners. (2.25)	Accepted	<ol style="list-style-type: none"> <li>1. Senior Management Team (SMT) members from relevant functional areas to attend the bi-monthly Equalities Action Team (EAT) meeting if available and send an appropriate representative if unable to attend</li> <li>2. Set up a Working Group, involving staff and prisoners, to focus upon the Needs Analysis and incorporate the nine protected characteristics.</li> <li>3. Change the frequency of the EAT meetings to bi-monthly from quarterly</li> <li>4. Ensure SMT members regularly monitor outcomes for prisoners within their designated protected characteristic and feedback at EAT meetings</li> </ol>	Head of Equalities	30 June 2016
5.16	Support for all the protected groups should be adequate to understand their concerns and, where possible, meet their specific needs. (2.34)	Accepted	<ol style="list-style-type: none"> <li>1. All prisoners will be screened on arrival and seen by the Equalities Mentors</li> <li>2. Conduct regular focus groups for all the protected characteristics</li> <li>3. All prisoners will have access to the Equalities Team and address their specific needs on an individual basis</li> <li>4. Each house block to have a dedicated Equalities Mentor full time who will be in regular contact with the Equalities Team to take any further actions forward.</li> </ol>	Head of Equalities	30 June 2016
	<b>Legal rights</b>				
5.17	Legal services should be provided and resources to assist prisoners with their legal problems should be kept up to date. (2.49)	Accepted	<p>PSI 75/2011 (revised 08/01/2016) states “...there is no longer a mandatory requirement on prisons to have a Legal Services Officer. <i>Residential staff must assist prisoners who wish to access legal advice by providing lists of legal advisers, supplying appropriate forms and assisting prisoners to complete them where requested due to language or literacy difficulties</i>” (Italics are mandatory)</p> <ol style="list-style-type: none"> <li>1. Provide a list of legal advisers through the Prisoner Information Desks (PID) desks within all residential areas</li> <li>2. Supply appropriate legal forms for prisoners' use</li> <li>3. Ensure staff assist prisoners in completing forms where any language or literacy difficulty has been identified.</li> </ol>	Head of Residence	31 May 2016

	<b>Health services</b>				
<b>5.18</b>	Out-of-hours provision should be sufficient to meet the needs and health challenges presented by prisoners. (2.61)	Accepted	<ol style="list-style-type: none"> <li>1. Source a fit-for-purpose out-of-hours provider to meet the needs and health challenges of prisoners. Improvements include access to SystemOne and regular liaison with provider.</li> <li>2. Liaise with Commissioners regarding the possibility of establishing 24 hour Health Care provision and submit business case if appropriate.</li> </ol>	Head of Healthcare  Head of Healthcare	Completed  31 May 2016
<b>5.19</b>	Local responses to prisoners' health care questions and concerns should be quality assured to ensure they address the issues raised before being sealed and securely sent back to the prison. (2.62)	Accepted	<ol style="list-style-type: none"> <li>1. All respondents receive appropriate training</li> <li>2. The Head of Healthcare to quality check a random selection of Health Care concerns / compliments / comments forms every month, with the aid of a simple audit tool.</li> <li>3. Log the findings of the quality checked concerns / compliments / comments and discuss at monthly SMT meetings</li> </ol>	Head of Healthcare	31 August 2016
<b>5.20</b>	Waiting times for smoking cessation services should be equivalent to those in the community. (2.63)	Accepted	<ol style="list-style-type: none"> <li>1. Train additional staff in smoking cessation</li> <li>2. Initiate multi-site clinics</li> </ol>	Head of Healthcare	Completed
<b>5.21</b>	Waiting times should be published and waiting times for physiotherapy services should be equivalent to those found in the community. (2.69)	Accepted	<ol style="list-style-type: none"> <li>1. Publish waiting times through the PID desks on the House Blocks</li> <li>2. Work is underway with a member of the Primary Care team to assist in the triage process to make sure that referrals are more appropriate and therefore bring waiting times in line with current KPI targets.</li> <li>3. Work as detailed above has resulted in the waiting time for the Physiotherapist coming in line with current KPI targets</li> </ol>	Head of Healthcare	31 May 2016
<b>5.22</b>	Men who require routine re-prescriptions should be periodically seen and reviewed by the GP. (2.70)	Partially accepted	<p>A process will be devised that links the re-prescribing of long term condition medications with the appropriate practitioner to reduce the pressure on prescribing GPs and alleviate the backlog of prescriptions.</p> <p>Work is underway with the new GP providers to ensure a more efficient way of prescribing for Prisoners with Long Term Conditions as per QOF prescribing guidelines.</p> <p>Prescriptions will be reviewed at this point or earlier if clinically indicated.</p> <p>These men will be seen by the GP in line with national guidelines.</p>	Head of Healthcare	30 September 2016

5.23	Failure-to-attend rates should be monitored for all clinics, the reasons for non-attendance explored, and the results published. (2.71)	Accepted	<ol style="list-style-type: none"> <li>1. Scrutinise and review Did Not Attend (DNA) rates at the monthly management meeting.</li> <li>2. Display DNA data in the patient waiting room.</li> <li>3. Introduce appointment slips for all clinics excluding GP and triage</li> </ol>	Head of Healthcare	31 May 2016
5.24	The drugs and therapeutics committee should ensure that all the appropriate policies, including the in-possession policy, are in place, in date and adhered to. (2.78)	Accepted	<ol style="list-style-type: none"> <li>1. Establish a 'Task &amp; Finish' Group to monitor and update the In-Possession Policy</li> <li>2. Set up a local meeting for HMP Ranby</li> </ol>	Head of Healthcare	Completed
5.25	Full records of administration of medicines should be made, including a record of all refusals of medication or failure to attend, to enable follow up. Medicines should be administered at the clinically appropriate time. (2.80)	Accepted	<ol style="list-style-type: none"> <li>1. Moved to SystmOne dispensing therefore full record of administration of medication is present on the electronic system</li> <li>2. All efforts are made to be clinically appropriate however bound by prison regime</li> </ol>	Head of Healthcare	Completed
5.26	Prescribing data on potentially tradable medicines and prisoners on in-possession medicines should be routinely reviewed to inform practice and prisoners should be able to store their medicines securely. (2.81)	Accepted	<ol style="list-style-type: none"> <li>1. A regular audit of medication In-Possession has now been initiated by the Pharmacy team in collaboration with the Head of Healthcare</li> <li>2. Pursue the feasibility and financial implications of in-cell medication lockers</li> </ol>	Head of Healthcare Head of Reducing Re-Offending	Completed 30 June 2016
5.27	Prisoners should be assessed promptly following receipt of referral. (2.92)	Accepted	<ol style="list-style-type: none"> <li>1. The weekly allocations meeting will be chaired by the Mental Health Matron and attended by the Psychiatrist and Psychologist will discuss all referrals and allocates caseworkers</li> <li>2. All referrals into the Mental Health team will be triaged within five working days</li> </ol>	Head of Healthcare	Completed
	<b>Purchases</b>				
5.28	Prisoners should be able to place a shop order on the day after they arrive to minimise bullying. (2.104)	Rejected	Allowing all prisoners to place and receive a full shop order within 24 hours of arrival is at present cost prohibitive as it would increase the number of deliveries. All new arrivals are offered a non-smokers or smokers pack as necessary. An order from the full local range can then be placed on the next usual ordering day.		



			NOMS offers a variety of packs including smoking packs (large, medium small), non-smoking packs, grocery packs, juvenile packs, vegan packs and, more recently, e-cigarette and nicotine replacement therapy packs to assist with the smoke free initiative roll out. HMP Ranby will consider providing a wider variety of standard reception packs in future.		
	<b>Learning and skills and work activities</b>				
<b>5.29</b>	Quality systems should be systematically and consistently applied to ensure improvements to the quality of teaching, learning and assessment, and to provide feedback to learners on their work, particularly in English and mathematics. (3.16)	Accepted	<ol style="list-style-type: none"> <li>1. Introduce a set of 'Minimum Standards' to measure all tutors including the need to develop English and Maths</li> <li>2. Undertake a combination of graded, probation and supportive observations for the whole Learning and Skills (L&amp;S) team.</li> <li>3. Increase the quantity and intensity of Learning Walks and Management Checks</li> <li>4. Lesson observation actions coupled with Management Check findings and other 'ad hoc' development needs, are combined to form the agenda for one-to-one meetings with each staff member</li> <li>5. All observers will undertake the annual refresher training and complete at least one moderated observation with the Regional Quality Lead</li> <li>6. All staff will have a graded, supportive or probation observation</li> <li>7. All staff will have a monthly one-to-one meeting with agreed actions and development areas clearly identified and monitored</li> <li>8. All staff will have an annual appraisal / review meeting with their line manager with clearly identified and agreed development needs</li> <li>9. Continuation with robust programme of weekly themes for Learning Walks and Management Checks</li> </ol>	Head of Reducing Re-Offending	30 June 2016
<b>5.30</b>	More vocational training courses and a level 2 plumbing course should be provided. (3.22)	Accepted Subject to Resources	<ol style="list-style-type: none"> <li>1. To the end of February, there have been approximately 435 Level 2 enrolments representing approx. 17% of the total provision. By their very nature, Level 2 programmes are often longer and therefore have fewer learners participating in them.</li> <li>2. Introduce a number of additional units at Level 2 as plumbing requires the construction of a number of work bays to allow certain plumbing activities to be undertaken.</li> <li>3. Introduce Level 2 programmes in Laundry, Officer's Mess, Wood-Mill / Wood-Assembly, Painting &amp; Decorating and Business to complement existing Level 2 provision in English, Maths, ICT Track-works and Food Safety.</li> <li>4. Explore programme extensions for Art, Music, Technology, Joinery, Barbering and Health and Safety (with a view to CSCS card).</li> <li>5. Explore extending vocational course provision include dry-lining / plastering, bricklaying, tiling or building roof trusses subject to the availability of additional workspace and resources</li> <li>6. Service Delivery Manager to submit a business case to fund a</li> </ol>	Head of Reducing Re-Offending	31 July 2016

			workshop of the required specification.		
<b>5.31</b>	English and mathematics teachers should plan adequately for individual learning and should monitor and record learning to provide clear information about learners' progression. They should ensure that good quality lesson resources are used and provide detailed feedback to help learners to improve. (3.32)	Accepted	<ol style="list-style-type: none"> <li>1. Following Initial Assessment, all learners in English and Maths classes will be given a further diagnostic test to confirm (or amend where appropriate) the Initial Assessment scores, for allocation to the correct programme / level of learning.</li> <li>2. All tutors will create and regularly update individual learner profiles and support learners to identify and agree future targets relating to English and Maths.</li> <li>3. Use 'Confidence Barometers' as a way of measuring and recording every learner's starting point.</li> <li>4. Adapt Lesson Plans to take into account the individual objectives of each learner as well as overall group learning outcomes.</li> <li>5. Progression trackers will be in place in English and Maths classes at all levels and are used to the required standard.</li> <li>6. All courses and tutors will be using Individual Learning Plans to monitor progress, provide feedback and enable learners to reflect on their own learning.</li> <li>7. All courses / tutors will agree and set English and Maths targets for all learners</li> <li>8. All courses / tutors will adopt and maintain accurate and up to date systems of tracking individual learner progress in English and Maths</li> <li>9. Systematically remove 'legacy' resources that relate to 'key skills', literacy or numeracy programmes and replace with full colour, proprietary workbooks specific to the delivery of functional skills.</li> <li>10. Create interactive resources to support learning and reduce the reliance on black and white photocopies</li> <li>11. Convert all resources to full colour and to reflect functionality</li> <li>12. Feedback mechanisms will be in place to provide feedback to learners through assessment of portfolios, Individual Learning Plans and during tutorial session's mid-way through and at the end of each course.</li> <li>13. Undertake staff training to make sure that feedback is constructive, positive and developmental.</li> <li>14. All tutorials will be recorded with agreed actions clearly identified</li> <li>15. Check that spelling, punctuation and grammar is being corrected on all written work</li> </ol>	Head of Reducing Re-Offending	30 June 2016
<b>5.32</b>	Tutors' knowledge of equality and diversity issues should be developed to improve their confidence in challenging stereotypical views and to provide more frequent	Accepted	<ol style="list-style-type: none"> <li>1. Appoint an Equality and Diversity (E&amp;D) 'Champion' to help co-ordinate E&amp;D activities.</li> <li>2. Milton Keynes College (MKC) will hold bi-monthly regional meetings for E&amp;D champions to provide a forum for 'champions' from different establishments to share ideas and best practice, and to formulate a cluster-wide approach to E&amp;D.</li> </ol>	Head of Reducing Re-Offending	30 June 2016

	assessment of progress in all workshops. (3.33)		<ol style="list-style-type: none"> <li>3. Introduce an E&amp;D feedback mechanism to enable tutors to report back on E&amp;D activity undertaken in the classroom and to make an informed assessment of its impact.</li> <li>4. Publish a detailed E&amp;D calendar for the department supported by resources and information to enable tutors to talk comprehensively about different 'themes'</li> <li>5. Senior Manager will attend the Tacking Extremism Conference in London and then disseminate across the regional and department teams</li> <li>6. Team members who have not already done so will attend 'Prevent' training</li> <li>7. All of the team to enrol on and complete 'Prevent' training online via the Police Colleges training website</li> <li>8. Undertake monthly checks to make sure that resources reflect a mix of E&amp;D content and cultural diversity</li> <li>9. Education Manager and E&amp;D Champion to attend all HMP Ranby Equality and Diversity meetings and forums</li> <li>10. Promote the visibility of the tutor</li> </ol>		
<b>5.33</b>	Teachers and instructors should focus on developing and accrediting prisoners' employability skills and should recognise and record the valuable personal and social skills that are developed. (3.38)	Accepted	<ol style="list-style-type: none"> <li>1. Employments skills will be embedded in all courses and form part of the agreed 'minimum standards' for tutors and are monitored through lesson observations, learning walks and management checks.</li> <li>2. Employability skills will be taught in timetabled sessions with specific, relevant tutors in the officer's mess, plumbing, P&amp;D, joinery and Track-works.</li> <li>3. Employability skills will be timetabled for all MKC workshop activities</li> <li>4. Introduce bespoke employability skills sessions in all other classroom delivery</li> <li>5. Develop a mechanism for identifying employments skills at the beginning, middle and end of courses and to measure progress made</li> <li>6. Develop and implement a process for identifying employability skills in prison workshops and to monitor progress made</li> </ol>	Head of Reducing Re-Offending	30 June 2016
<b>5.34</b>	The progress and achievements of English and mathematics learners should be improved so that they are at least good. (3.41)	Accepted	<ol style="list-style-type: none"> <li>1. Appoint Functional Skills Programme Manager</li> <li>2. Appoint new Lead Tutor for Maths</li> <li>3. Appoint a second Additional Learning Support Tutor</li> <li>4. Re-shape Maths delivery team</li> <li>5. Change the mix of lessons to better reflect need based on Initial Assessment data</li> <li>6. Introduce Exam Preparation class for English and Maths</li> <li>7. Re-write all Schemes of Work to reflect 'functionality' with a 'project-based' approach to E&amp;M</li> <li>8. Appoint new Lead Tutor for English</li> </ol>	Head of Reducing Re-Offending	30 June 2016

			<ul style="list-style-type: none"> <li>9. Re-shape English delivery team</li> <li>10. Investigate options to change awarding body from City &amp; Guilds to OCR</li> </ul>		
5.35	The use of the library by different groups should be monitored and the number of library closures for operational reasons should be reduced. (3.48)	Accepted	<ul style="list-style-type: none"> <li>1. Monitor Library closures</li> <li>2. Closures will be part of an equitable rota of closures making sure the Library has the best possibility of remaining open and operating to its full capacity as per the Regime Management Plan (RMP).</li> </ul>	Head of Reducing Re-Offending	30 June 2016
	<b>Physical education and healthy living</b>				
5.36	Privacy screens should be provided in the gym showers. (3.56)	Accepted	<ul style="list-style-type: none"> <li>1. Design fit-for-purpose privacy screens that make certain privacy whilst maintaining security</li> <li>2. Trial these in the old gymnasium and roll out to both gymnasiums</li> </ul>	Head of Reducing Re-Offending	30 September 2016
5.37	The number of gym closures for operational reasons should be reduced and better use should be made of the outside sports field. (3.57)	Partially Accepted	<ul style="list-style-type: none"> <li>1. Closures will be part of an equitable rota of closures making sure the gymnasium has the best possibility of remaining open and operating to its full capacity as per the RMP.</li> <li>2. Programme in the sports-field as part of the next review to make better use of this facility including inter-wing games and football and rugby matches</li> </ul>	Head of Reducing Re-Offending	30 June 2016
	<b>Strategic management of resettlement</b>				
5.38	OASys data should be used to inform the needs analysis. (4.9)	Accepted	<ul style="list-style-type: none"> <li>1. Collate Offender Assessment System (OASys) data and identify needs</li> <li>2. Integrate into the needs analysis into the Reducing Re-Offending meeting / strategy</li> </ul>	Head of Reducing Re-Offending	31 July 2016
	<b>Offender management and planning</b>				
5.39	All offender supervisors should receive feedback on the quality of their work and appropriate support to improve the quality of risk assessment, contingency and pre-release planning. (4.22)	Accepted	<ul style="list-style-type: none"> <li>1. OSs will be mentored by experienced Probation staff</li> <li>2. Mentors will provide constructive feedback including case discussion and quality assurance of the OS's work</li> <li>3. Highlight areas where OSs require support within the OASys countersigning process</li> <li>4. Devise and deliver training package around risk, to include internal training and external courses.</li> </ul>	Head of OMU	30 June 2016
5.40	Confirmation of MAPPA management levels should be	Accepted	<ul style="list-style-type: none"> <li>1. Prisoners subject to Multi Agency Public Protection Arrangements (MAPPA) will be identified for review at the Interdepartmental Risk</li> </ul>	Head of OMU	Completed

	sought six months before release. (4.25)		Management Team meeting (IRMT) six months prior to their release 2. Confirm correct MAPPA levels for all prisoners		
	<b>Reintegration planning</b>				
5.41	The CRC team should be fully staffed, including 'meet-at-the-gate' volunteers, and all prisoners and staff should understand their role. (4.37)	Accepted	<ol style="list-style-type: none"> <li>1. The system will refer prisoners to Sova who are the Meet-at-the-gate volunteers.</li> <li>2. Produce updated information for the induction process for all new receptions detailing the services offered by the Community Rehabilitation Company (CRC) resettlement team.</li> <li>3. Hold regular meetings with the PID workers/Mentors to keep prisoners up to date with developments and maintain awareness in resettlement.</li> <li>4. CRCs will hold awareness sessions with staff on training shutdown days to inform them of the resettlement services offered</li> <li>5. CRCs will hold quarterly resettlement events where external resettlement partners will target prisoners in the last 12 weeks of their sentence and offer support with their resettlement needs.</li> <li>6. Review staffing as part of the contract review meeting</li> </ol>	Head of Reducing Re-Offending	30 June 2016
5.42	The National Careers Service should develop suitable arrangements to track prisoners' education, work or training outcomes systematically following their release. (4.43)	Accepted	The National Careers Service (NCS) will review outcomes for prisoners on release through the contract review meetings.	Head of Reducing Re-Offending	30 June 2016
5.43	Methods of identifying prisoners during visits should be respectful and proportionate to the risks presented. (4.53)	Accepted	<ol style="list-style-type: none"> <li>1. Review visits to ensure methods of identifying prisoners are respectful and proportionate to the risks presented.</li> <li>2. Identify prisoners in Visits through using a bib system as this is proportionate to the risks presented</li> <li>3. Ensure the bibs are laundered weekly and remain fresh</li> <li>4. Replace any worn/torn or not fit-for-purpose bibs as and when required</li> </ol>	Head of Operations	31 May 2016
5.44	All officers supervising the visits room should be aware of prisoners subject to child contact restrictions. (4.54)	Accepted	Conduct a review of visits to make sure any public protection restrictions are dealt with appropriately, staff are aware and prisoners are allocated to the appropriate visits table. Include those prisoners deemed as a risk to children and any harassment orders	Head of Operations	01 May 2016
5.45	A family support worker should be employed to help prisoners maintain contact with their family and support those subject to child	Accepted subject to resources	Re-submit the business case originally presented in 2015 to the Business Development Group (BDG) for this role. Include this HMIP recommendation within the business case.	Head of Corporate Services	31 May 2016

	protection procedures. (4.55)				
5.46	The need to address violence in relationships should be assessed and a programme provided if necessary. (4.62)	Accepted Subject to Resources	<ol style="list-style-type: none"> <li>1. Assess the need to address violence in relationships by highlighting Domestic Violence through the OASys process and ensure appropriate signposting for risk reducing interventions</li> <li>2. Consider providing a programme to address violence in relationship, subject to resourcing approval for such a programme.</li> </ol>	Head of OMU	31 May 2016  N/A
5.47	The extent of historic abuse among the population should be identified and specific services introduced to meet need. (4.64)	Partially Accepted	<ol style="list-style-type: none"> <li>1. Conduct a confidential needs analysis to identify historic abuse amongst the population</li> <li>2. Specific services required are unknown until the results of this needs analysis</li> </ol>	Head of Safer Custody	31 August 2016
	<b>Housekeeping points</b>				
	<b>Health services</b>				
5.48	Local audit of record keeping should be used to support clinical supervision arrangements for all professional groups. (2.64)	Accepted	Three record keeping audits will be undertaken by the Clinical Matrons on a monthly basis and used within managerial supervision.	Head of Healthcare	Completed
5.49	The drugs and therapeutics committee should introduce a policy for recording and reviewing near misses. (2.82)	Accepted	<ol style="list-style-type: none"> <li>1. Introduce a process for identifying and recording near miss incidents which inform a 'Learning the Lessons' culture.</li> <li>2. Share lessons learned with the wider team at the monthly Full Staff Meeting.</li> </ol>	Head of Healthcare	31 May 2016
5.50	In-possession and supervised medicines should be kept separately to reduce risk. (2.83)	Rejected	Logistically, this is difficult to achieve due to space and is felt will not reduce the risk associated with In-Possession/Not-In-Possession administration. However, the move to SystmOne administration has significantly reduced the associated risks.	Head of Healthcare	
5.51	Controlled drugs should only be removed from the controlled drugs cupboard when they are going to be administered. Over-the-counter medicines should not be stored in the controlled drugs cupboard.(2.84)	Accepted	<ol style="list-style-type: none"> <li>1. Remove Controlled Drugs as required.</li> <li>2. Store only Controlled Drugs within the Controlled Drugs cabinet.</li> </ol>	Head of Healthcare	Completed
5.52	Robust stock reconciliation	Accepted	The SystmOne administration clinical package has inbuilt stock	Head of Healthcare	Completed

	procedures should be introduced. (2.85)		reconciliation.		
	<b>Learning and skills and work activities</b>				
<b>5.53</b>	The ordering and delivery of essential materials for production workshops should be expedited in a timely way. (3.23)	Accepted	Ordering and delivery process will be fit for purpose and will be a timely process	Head of Reducing Re-Offending	31 May 2016
	<b>Physical education and healthy living</b>				
<b>5.54</b>	Repairs to equipment should be carried out in a timely fashion. (3.58)	Accepted	<ol style="list-style-type: none"> <li>1. Report faulty equipment at the earliest opportunity</li> <li>2. Remove faulty equipment from the gymnasium</li> <li>3. Assess faulty equipment</li> <li>4. Report any repairs to Physique</li> <li>5. Present quote for repair or replacement to the budget holder</li> <li>6. Track all equipment to guarantee a swift and safe repair</li> </ol>	Head of Reducing Re-Offending	31 May 2016
	<b>Offender management and planning</b>				
<b>5.55</b>	Minutes of IRMT meetings should fully record responses to agreed actions. (4.26)	Accepted	Change the format of the IRMT minutes to include and record action outcomes	Head of OMU	Completed

<b>Recommendations</b>		<b>Housekeeping Points</b>	
Accepted	39	Accepted	7
Accepted Subject to Resources /Partially Accepted	7	Accepted Subject to Resources /Partially Accepted	0
Rejected	1	Rejected	1
<b>Total</b>	<b>47</b>	<b>Total</b>	<b>8</b>