

**ACTION PLAN: HMCIP REPORT**

**ESTABLISHMENT: HMP LEEDS**

<b>TIMETABLE</b>	<b>DATE</b>	<b>STATUS OF THIS RETURN</b>
Full Announced inspection	30 November -11 December 2015	
Report published	27 April 2016	
Action Plan Submitted	13 July 2016	Attached

## ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP LEEDS

POSITION AS AT: JULY 2016

1. Rec. no	2 Recommendation	3. Accepted/Rejected	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	<b>Main recommendations To the governor</b>				
5.1	First night processes should ensure that prisoners are held safely and that their practical and well-being needs are met. (S42)	Accepted	<p>A full review of first night procedures will be undertaken.</p> <p>A visit has taken place to HMP Holme House which has a good first night centre. Learning from the visit will form part of the review in order to improve HMP Leeds' processes.</p>	Head of Residence and Safety	31 July 2016
5.2	Managers should take further action to reduce the high levels of violence evident, including establish a strategy to address the underlying causes, undertake better analysis and investigation of incidents and provide specific support for victims. (S43)	Accepted	<p>The violence reduction (VR) strategy will be reviewed in conjunction with the regional safer custody lead.</p> <p>The regional VR strategy was adopted in 2015 and is currently being revisited to ensure it is fully embedded at HMP Leeds.</p>	Head of Safety	30 September 2016
5.3	The prison should have an equality and diversity strategy and action plan embedded across the prison; they should describe how the needs of all the protected characteristics will be met and outline an efficient process for dealing with complaints of discrimination. (S44)	Accepted	<p>Work was ongoing at the time of the inspection to bring the equalities department back to the standard expected.</p> <p>An interim action plan was completed between September 2015 and April 2016 to address the main deficiencies of the department. An action plan for 2016 – 2017 has been developed and includes actions to meet the specific needs of those with protected characteristics; this is a live document and includes actions / issues which come from the prison's forum</p>	Head of Safety	Completed

			meetings.  HMP Leeds has an efficient process for dealing with complaints of discrimination. This is now embedded into the daily life of the equalities department.  Equalities strategy for HMP Leeds will provide information on how the prison meets the needs for both staff and prisoners in terms of protected characteristics and the process for dealing with complaints of discrimination.		
	<b>Recommendations To the governor</b>				
	<b>Courts, escort and transfers</b>				
<b>5.4</b>	The prison should be able to complete release procedures for prisoners whenever courts are sitting. (1.5)	Accepted	A review of core attendance times for all administrative grades will be conducted and attendance will be extended to 6pm. Once agreed, a rota will be implemented for case administrators.	Head of Offender Management / Business Continuity	30 September 2016
	<b>Early days in custody</b>				
<b>5.5</b>	Conditions in reception should be improved. (1.14, repeated recommendation 1.9)	Accepted	A new reception has been agreed, however this is on hold until further notice.  An interim painting refurbishment will be completed to soften the appearance of the reception to enhance prisoner experience.	Amey Manager	30 November 2016
	<b>Bullying and violence reduction</b>				
<b>5.6</b>	Vulnerable prisoners should be able to exercise without fear of being verbally abused by other prisoners. (1.23, repeated recommendation 1.19)	Accepted	Vulnerable prisoners (VPs) have now been moved from A wing to F wing, enabling them to participate in exercise without fear of being abused.  Robust management under the incentives and earned privilege (IEP) scheme and anti-bullying procedures is taking place.	Head of Residence and Services	Completed
	<b>Self-harm and suicide prevention</b>				
<b>5.7</b>	ACCT procedures should be improved: the prison should	Accepted	A full review of the induction process is currently under way.	Head of Residence	31 July 2016

	focus on determining risks in prisoners' early days in custody and providing a consistent and competent case manager supported by staff from other disciplines; a key worker should also be appointed. (1.29)		<p>Assessment Care in Custody and Teamwork (ACCT) management checks have been added to the "Decency Walks," which are undertaken by all band 5 and above. Managers will ensure compliance.</p> <p>ACCT case management model has been introduced with safer custody staff allocating case managers in order that accountability and consistency are improved.</p> <p>Deficiency notices have been issued via functional head and management support and guidance to identified staff.</p>	and Safety	
5.8	All night staff should have access to cell keys so they can enter cells in an emergency. (1.30)	Accepted	All night staff have been issued with sealed pouches to enable them to enter cells in an emergency. They have been provided with guidance and training in personal safety.	Head of Operations	Completed
	<b>Safeguarding</b>				
5.9	A local safeguarding adults policy should be developed and include agreed protocols with Leeds safeguarding adults board so that prisoners at risk can be referred. (1.35)	Accepted	A local adult safeguarding standard operating procedure will be developed. Protocols will be agreed between HMP Leeds and the Leeds Safeguarding Adults' Board.	Head of Safety	31 October 2016
	<b>Security</b>				
5.10	Strip-searching should be proportionate and reflect the risks presented. (1.45)	Partially Accepted	NSF Function 3.1 (Prison Service Instruction - PSI 67/2011), "Searching of the Person", sets out the minimum national searching requirements for prisoners. It requires that male prisoners outside of the high security estate are routinely given a full search on initial reception to prison, on reception on return from ROTL or an outside working party (closed prisons only), on return from a non-prison escort, on transferring to another prison and all other discharges apart from on final discharge and discharge for ROTL. All prisons must comply with the PSI's minimum requirements. Local risk assessments are undertaken in other circumstances.	Head of Security  Security Policy Group	Completed

			<p>Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. NOMS has a duty of care to prevent and deter illicit items from entering establishments, which could be used by a prisoner to harm themselves or others.</p> <p>Locally, a revised searching strategy has been produced that is in line with searching requirements.</p>		
5.11	Staff supervision of prisoners, particularly on the residential wings and during visits, should be improved. (1.46)	Accepted	<p>Patrol zones have been designated for visits staff identifying the areas they are responsible for supervising. Regular management checks take place to ensure compliance. All staff have been informed of the zoned patrolling areas and the requirements. Robust management of this process is in place.</p> <p>Staff on the residential wings are allocated a landing and are responsible for patrolling that landing. Management checks are in place.</p>	Head of Operations	31 August 2016
	<b>Incentives and earned privileges</b>				
5.12	The IEP scheme should be applied in line with the written policy, monitoring should be sufficient to ensure it is applied fairly to all and those on the basic level should receive a more structured, purposeful regime. (1.54)	Accepted	<p>The IEP was reviewed in October 2015 to ensure full compliance with national guidance. The next review will take place in October 2016.</p> <p>Weekly / monthly management checks are in place.</p> <p>The core day has been reviewed in line with the introduction of the Benchmark. As part of the core day a basic regime is included enabling a more structured, purposeful regime for those on the basic level.</p>	Head of Residential Services / Safety	Completed
	<b>Discipline</b>				
5.13	All disciplinary hearings should be heard and dealt with on time. (1.58)	Accepted	A full review of the segregation process is underway and will include the adjudication process and prisoner attendance.	Head of Residence and Safety	31 July 2016

			Electronic monitoring system is in place that identifies any hearings that are approaching a 'timed out' status so they are not missed. This will be monitored and reviewed.		
5.14	Managers should ensure that the use of special cells is properly authorised, only employed as a last resort and until the prisoner is no longer violent or refractory. (1.64)	Accepted	As above, management checks are also in place to ensure minimum use of special cells is enforced.	Head of Residence and Safety	30 May 2016
5.15	Conditions in the biohazard cells and special cell should be improved. (1.72)	Rejected	These cells are designed in this way and cannot be 'improved'. They are only used in exceptional situations.  The cells will be painted in line with the painting schedule	Head of Residence and Safety	30 September 2016
5.16	Formal individual care planning should be developed to help prisoners return to the normal location. (1.73)	Accepted	Individual reintegration plans are carried out for all prisoners located in the segregation unit. The reintegration plans and the prisoner's location are reviewed weekly at the operational managers meeting.	Head of Residence and Safety	Completed
	<b>Substance misuse</b>				
5.17	Substance use services should be sufficient to meet the assessed needs of the population, including those on A wing and prisoners with alcohol-related issues. (1.81)	Accepted	From July 2016, a two week recovery programme will be available to prisoners, with a separate programme available to the VP group. The programme will include an alcohol awareness session that explores health issues and consequences. There will also be weekly Alcoholic Anonymous meetings with an option for a one-to-one session with peer sponsors.	Head of Healthcare	31 July 2016
5.18	Prisoners in recovery from substance use problems should be housed separately from those not in treatment. (1.82)	Rejected	Due to population pressures there is no capacity to situate all prisoners in recovery on one wing. The recovery programme will be available to all prisoners across the prison. Recovery champions will promote recovery throughout the prison with an emphasis on peer group support.	Head of Healthcare	
	<b>Residential units</b>				
5.19	Cells designed for one prisoner should not accommodate two. (2.9)	Rejected	The occupancy of prison cells is determined by establishments and certified by Deputy Directors of Custody (DDC) in accordance	Deputy Director of Custody	

			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.		
5.20	All cells should be adequately equipped and toilets should be screened. (2.10)	Accepted	A rolling programme of refurbishment will be put in place. HMP Leeds is currently waiting for equipment which has been ordered via the DDC.	Head of Residential Services / Safety	31 October 2016
5.21	A quality assurance system should be developed to oversee the work of PID workers to prevent abuses by workers, staff and prisoners. (2.11)	Accepted	This will be discussed at the next prisoner information desk (PID) meeting with a view to putting the appropriate measures in place.	Head of Residential Services	31 July 2016
	<b>Staff-prisoner relationships</b>				
5.22	Wing staff who know the prisoners should make regular, substantive, informative entries in their records. (2.15)	Accepted	Staff are required to make a minimum number of entries per month. These are monitored by Supervisory Officers/Custodial Managers and Heads of Function to ensure entries are substantive and informative. Staff are challenged for poor entries	Head of Residential Services / Safety	Completed and ongoing
	<b>Faith and religious activity</b>				
5.23	Chaplains should offer all new arrivals the chance to have a meaningful conversation in private. (2.35)	Accepted	All prisoners are now being seen individually on initial reception by a member of the Chaplaincy.	Head of Chaplaincy	Completed
	<b>Health services</b>				
5.24	Cleaning schedules should be introduced and monitored to ensure compliance with infection prevention standards. (2.55)	Accepted	The cleaning schedule has been reviewed and has been in place since February 2016. Amey now facilitate a weekly cleaning schedule. Care UK also carried out an inspection to ensure compliance in April 2016.	Head of Healthcare / Head of Works	Completed
5.25	A sufficient number of staff trained in first aid should be on duty and have access to resuscitation equipment that is in good working order. (2.56)	Accepted	New lighter weight mobile emergency bags have been ordered. Bags are checked daily and stock replaced immediately. New ECG machines have also been ordered. All nurses on duty are trained in first aid.  All eight PE instructors will be trained in basic and emergency first aid. They will	Head of Healthcare	31 December 2016

			develop a rota to train staff		
5.26	Access to smoking cessation services should be equivalent to those found in the community. (2.57)	Accepted	There are currently three trained smoking cessation workers as part of the pharmacy team. A local smoking cessation course will be sourced to train a number of healthcare staff and PE instructor staff to deliver smoking cessation.	Head of Healthcare	31 October 2016
5.27	All prisoners should be screened on reception before being received in the main prison and have access to all necessary treatments and services on their arrival. (2.65)	Accepted	All prisoners will be screened in reception on a daily basis and a second day assessment completed in the first night centre. All appropriate services are identified and referred to. The substance misuse recovery service also screens all Integrated Drug Treatment Service prisoners on the second day.	Head of Healthcare	Completed
5.28	Triage facilities should be routinely available during the core day. (2.66)	Accepted	Due to staffing issues, as a result of immobilisation of a new service provider, triage assessments are routinely available on a needs' basis. However, a wing based model will be developed when the staffing levels have increased.	Head of Healthcare	30 November 2016
5.29	The use of available clinic places should be improved as should waiting times to see the optician. (2.67)	Accepted	All clinics will be reviewed by the new healthcare provider (Care UK) to ensure there is maximum use of the facilities. A new contract is in place with Penoptical and sessions are scheduled to take place twice a week.	Head of Healthcare	31 October 2016
5.30	The prison should introduce a formal operational policy for the intermediate social care unit to establish agreed admission and discharge criteria. (2.70)	Accepted	<p>Monthly meetings take place between the establishment, Leeds City Council and social care nursing staff. These meetings are now minuted to provide an auditable and evidenced record.</p> <p>Individual care management plans have been introduced for all those resident on the social care unit. This allows a multi-disciplinary and holistic approach to the care of those in the prison's charge. These are reviewed regularly to ensure optimum ongoing care.</p> <p>A social care strategy will be added to the safeguarding policy referred to in</p>	Head of Safety	31 August 2016



			recommendation 5.9 above.		
<b>5.31</b>	In-possession risk assessments, which consider the risks of the drug as well as the patient, should be routinely and consistently completed. The policy should be robustly followed and the status and its rationale recorded accurately on System One. (2.78)	Accepted	E-prescribing will be available from June 2016. All patients are currently undergoing a review of medication and status will be recorded on SystmOne.	Head of Healthcare	30 June 2016
<b>5.32</b>	The pharmacy should receive support to develop more pharmacy-led clinics and medicine	Accepted	International Ratio/Warfarin clinic has been implemented on a weekly basis. More clinics will be developed when Advanced Nurse Practitioners are in post.	Head of Healthcare	31 October 2016
<b>5.33</b>	The prison should review the transport of medicines within the prison to ensure they are secure. (2.80)	Accepted	All staff have been reminded of safe operating procedures. A review will be conducted by September 2016.	Head of Healthcare	30 September 2016
<b>5.34</b>	The range of primary mental health services should be equivalent to community provision and meet the needs of the men held. (2.88)	Accepted	A full review of mental health provision will take place. An integrated model will be developed with a stepped care approach and Improving Access to Psychological Therapies worker. The review will ensure that primary and secondary mental health interventions are part of the pathway.  The secondary mental health team are now located in the prison and are working alongside primary care. All mental health provision is now delivered by the same provider.	Head of Healthcare	31 October 2016
<b>5.35</b>	Concerns about the location of men at risk should be considered through complex case management arrangements; custodial staff should provide input and be able to escalate cases through adult safeguarding arrangements if appropriate.	Accepted	Weekly safety intervention meetings have been implemented by safer custody to discuss complex cases with a multi-disciplinary team. The Care UK multi professional complex case model will be implemented to discuss healthcare needs. Healthcare, including mental health, regularly attend ACCT reviews and MAPPA meetings. A regional safer custody	Head of Safety / Head of Healthcare	30 September 2016

	(2.89)		management plan template will be developed for safer custody and mental health to plan the care of complex case prisoners.		
<b>5.36</b>	The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.90)	Rejected	All cases are referred in a timely manner. The availability of bed space is not something that HMP Leeds can control. However, location is always planned with consideration given to the Health and Social Care Unit.	Head of Healthcare	
	<b>Catering</b>				
<b>5.37</b>	Prisoners should be consulted on food issues and the provision improved on the basis of sound nutrition and prisoner requests. (2.95)	Accepted	A prisoner survey will be carried out after the new kitchen has been opened. Regular monthly consultation is taking place via the PID meeting to rectify local issues. The food comments book is checked weekly. Catering staff are positioned at serveries during the serving of meals.	Head of Residential Services / Catering Manager	31 October 2016
	<b>Purchases</b>				
<b>5.38</b>	Prisoners should have their first canteen order within a few days of arriving at the prison. (2.99, repeated recommendation 2.93)	Accepted	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 are offered the option to purchase smokers' or non-smokers' reception packs on arrival. An order from the full local range can then be placed on the next usual ordering day.  On a local level, HMP Leeds will examine the possibility of prisoners having larger reception packs to alleviate any issues with late canteen.	Head of Business Continuity / Head of Finance	31 July 2016
	<b>Time out of cell</b>				
<b>5.39</b>	All prisoners should receive at least an hour of exercise outside every day. (3.4)	Rejected	National policy set out in the Residential Services Instruction, states 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.	Equality, Rights & Decency Group Policy	

	<b>Learning and skills and work activities</b>				
5.40	The prison should ensure that all learning and skills and work activities keep prisoners purposefully occupied for the full duration of sessions. (3.22)	Accepted	Various areas highlighted during the inspection will be reviewed, with qualifications and work streams incorporated to ensure prisoners are fully occupied.	Head of Reducing Reoffending	30 November 2016
5.41	The prison should provide sufficient library staff to enable opening hours to be extended to better meet the population's needs. (3.33)	Accepted	Library coverage will be reviewed as part of the new contract with NOVUS and the implementation of the Benchmark regime to ensure maximum coverage for all prisoners, in all areas of the establishment, and those that work.	Head of Reducing Reoffending	30 November 2016
	<b>Strategic management of resettlement</b>				
5.42	The prison should have an up-to-date reducing reoffending strategy, driven by ongoing and robust reducing reoffending meetings that are attended by staff from all relevant departments. (4.6)	Accepted	A new reducing reoffending policy will be drafted which links to the needs analysis of the population held at HMP Leeds. A new revised terms of reference and reducing reoffending meeting will monitor and drive the future direction and outcomes.	Head of Reducing Reoffending	30 September 2016
5.43	ROTL should be available to suitable prisoners, subject to a risk assessment, for resettlement purposes. (4.7)	Accepted	Progress will be made once the resettlement wing is formed properly. Work activities are planned for ROTL and the offender management unit is ready to move forward with this.	Head of Reducing Reoffending / OMU	30 September 2016
	<b>Offender management and planning</b>				
5.44	Offender supervisors should have regular meaningful contact with prisoners to motivate and support them throughout their sentence. This should be underpinned by robust management oversight and quality assurance to ensure all elements of offender	Accepted	Appropriate levels of staffing will be provided in order to deliver the work as described within the benchmark profile.  Offender Assessment System (OASys) backlog will be addressed using the resources as described above.  Management oversight and quality assurance of sentence planning and OASys	Head of Offender Management	31 October 2016

	management are timely and adequate. (4.14)		will take place.		
5.45	Prisoners approved for HDC should be released on the earliest eligible date. (4.15)	Accepted	A review of the entire home detention curfew (HDC) process will take place in order to expedite board decisions and release on HDC.	Head of Offender Management	30 September 2016
5.46	The IRMT meeting should be reinstated as a priority and MAPPA levels should be set within prescribed timescales. (4.19)	Accepted	The Integrated Risk Management Team meeting has been reinstated.  The process for attributing MAPPA levels has been reviewed.	Head of Offender Management	Completed
	<b>Reintegration planning</b>				
5.47	Discharge arrangements should be robust; men should have clean clothes to wear, know how to get to their next destination and fully understand any licence conditions they are subject to. (4.27)	Accepted	Clean clothing is readily available on discharge should this be required. This is prison issue taken from stores.  A leaflet is issued to all discharges that has directions and timetables for buses, trains and directions to Leeds City Centre. All Licences are read and prisoners asked if they understand the conditions.	Head of Security	31 August 2016
5.48	The prison should provide prisoners with greater access to the virtual campus. (4.32)	Accepted	NOVUS is currently in the process of installing an upgraded Broadband lease line which will support a 'Hybrid' Virtual Campus (VC) network. This will enable the VC platform to be accessible on the vast majority of NOVUS computers, as opposed to just the 10 in one area which is the present situation due to the current IT infrastructure. The project requires support from the establishment's IT manager and finance department to ensure that the project roll out is completed by the project deadline of July 2016.  From this date the employability courses will also be delivered in the area where the VC is currently located to ensure effective and regular use of the VC for the primary purpose it was intended.		31 July 2016
5.49	Searching arrangements should be respectful and proportionate; Muslim women	Accepted	Briefings to staff have been given regarding searching techniques. All staff have been issued with a copy of the searching strategy	Head of Operations	31 August 2016

	should not be asked to remove headscarves in public and babies and toddlers should only be searched when there is specific intelligence to indicate a risk. (4.41)		and management checks are being carried out to ensure compliance and correct searching techniques are used. This will continue to be monitored.		
5.50	Closed visits should only be imposed when there is clear security intelligence abuse of visits. (4.42) relating to the abuse of visits. (4.42)	Rejected	PSI 15/2011 - <i>Management of Security at Visits</i> provides that "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 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.	Head of Security Security Policy Group	
5.51	Appropriate interventions, either through programmes or one-to-one work, should be available for prisoners who stay at HMP Leeds for long periods. As a priority this should include motivational work for sex offenders in denial of their offence. (4.45)	Rejected	HMP Leeds is not resourced under the national Benchmark to provide offending behaviour programmes (OBPs). OBPs are delivered and are available elsewhere in the region, such as HMP Wealstun, HMP Hull and HMP Moorland.	Governor	
	<b>Housekeeping points</b>				
	<b>Health services</b>				
5.52	Clinical supervision arrangements should be embedded in the service. (2.58)	Accepted	Clinical supervision is being reviewed and a system implemented by new provider Care UK. A regional psychologist will be employed to support the mental health service.	Head of Healthcare	30 September 2016
5.53	Staff should make full and complete records of medicines administration, which should include recording all occasions where	Accepted	All cases are recorded on SystmOne. The implementation of E-prescribing will assist this procedure in June 2016. All patients who miss medication are also discussed as part of the afternoon handover meeting	Head of Healthcare	30 June 2016

	the patient refused medication or failed to attend administration sessions. (2.81)		between all healthcare staff.		
<b>5.54</b>	Near misses should be recorded in detail and logs reviewed and analysed to identify trends that could help prevent future errors. (2.82)	Accepted	All managers will be trained to review and investigate Datix and this will be monitored daily. Root cause analysis training will be delivered to all senior managers.	Head of Healthcare	30 September 2016

<b>Recommendations</b>		<b>Housekeeping Points</b>	
Accepted	43	Accepted	3
Accepted Subject to Resources /Partially	1	Accepted Subject to Resources /Partially	0
Accepted		Accepted	
Rejected	7	Rejected	0
<b>Total</b>	<b>51</b>	<b>Total</b>	<b>3</b>