

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP FULL SUTTON

TIMETABLE	DATE	STATUS OF THIS RETURN
Full UnAnnounced inspection	11-22 January 2016	
Report published	5 May 2016	
Action Plan Submitted	4 August 2016	Attached

ACTION PLAN - HMCIP REPORT

ESTABLISHMENT: HMP FULL SUTTON

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	<p>Day-to-day oversight of decision making in the segregation unit should be adequate to ensure that actions are authorised appropriately.</p> <p>Unlock protocols should be proportionate to the risk posed.</p> <p>For prisoners at risk of self-harm, decisions to remove their clothing and locate them on the segregation unit should always be based on evidence of exceptional circumstances, and authorised by a senior manager. (S53)</p>	Accepted	<p>Management oversight and governance is to be reviewed as part of the segregation development strategy, which will consider the regime, day to day management and input by mental health services and psychology. The Governor has commissioned a review of methods of risk management and considering possible alternatives to the operating of the Segregation.</p> <p>HMP Full Sutton has taken immediate action to make sure all personal protection equipment (PPE) protocols are reviewed at time of placement and minimum weekly reviews are held by the Segregation Unit Governor making sure that risks are proportionate and evidenced.</p> <p>A full review of ACCT procedures in the Segregation unit is being undertaken.</p> <p>ACCT reviews are now conducted by a Custodial Manager grades and the Governor / Deputy Governor countersigns any ACCTs for prisoners held within the Segregation unit.</p> <p>Quality assurance checks are also carried out by the Safer Custody Manager post closure of an ACCT to make sure correct procedures were followed.</p>	<p>Head of Segregation & Closed Supervision Centre (CSC)</p> <p>/ Head of Psychology</p> <p>/ Head of Clinical Services</p> <p>Head of Segregation & CSC / Head of Safer Custody</p>	<p>30 September 2016 (for reviews to be completed)</p> <p>and</p> <p>31 March 2017 (for further actions to be implemented)</p> <p>Completed and ongoing</p> <p>30 September 2016 (for review)</p> <p>Completed and ongoing</p>

5.2	Further action should be taken to understand and, where possible, improve black and minority ethnic and Muslim prisoners' negative perceptions of their treatment and conditions. (S54)	Accepted	<p>A Black, Asian Minority Ethnic (BAME) and Muslim forum will be established and chaired by the Deputy Governor to discuss ways in which the perception of treatment and experience of BAME & Muslim prisoners can be raised and understood.</p> <p>The forums will be held regularly for example, quarterly and, led by user needs. Any actions points from the meetings will be incorporated in the BAME forum action plan and monitored.</p>	Head of Residence & Equality	31 August 2016
5.3	<p>All prisoners should have an up-to-date offender assessment system (OASys) assessment.</p> <p>Offender supervisors should motivate and assist prisoners to reduce their risk and enable them to progress. (S55)</p>	Accepted	<p>Managing the offender assessment system (OASys) backlog will form part of the offender management development strategy to assist offenders in individual progression. This has been identified as a priority objective for HMP Full Sutton in 2016 / 2017 and forms part of the establishment Service Level Agreement (SLA).</p> <p>A functional focus on both Her Majesty's Prisons and National Probation Service outstanding cases are now taking place to assist in identifying the responsible owners of assessments. There will be a monitoring process to keep track of the backlogs and completed assessments and to make sure that resources are appropriately allocated taking in to account mitigating factors.</p> <p>Clear expectations for Offender Supervisors will be set out based on offender contact and engagement which will result in a personalised progression plan for each offender and tailored input to sentence plan reviews.</p> <p>Training for Offender Supervisors will be introduced to help develop their confidence, resilience and knowledge.</p>	Head of Offender Management	<p>31 December 2016</p> <p>31 December 2016</p> <p>30 September 2016</p>
Recommendations To					

	NOMS				
	Offender management and planning				
5.4	Multi-agency public protection arrangements (MAPPA) levels should be confirmed well ahead of release to enable the prison to be involved in pre-release risk management planning in all relevant cases. (4.17)	Accepted	<p>MAPPA levels should be set well ahead of release.</p> <p>This issue has been raised direct with the National MAPPA team by Her Majesty's Chief Inspector of Prisons. A Senior Leadership Bulletin message was sent in July 2016 which outlined the process for prison establishments to follow if they have not received this information from Probation six months pre -release. This process should improve practice and will mean that responsible managers get an up to date feedback on non-compliance.</p> <p>A new escalation process is ongoing concerning prisons who do not have the necessary MAPPA level information.</p>	Head of National MAPPA Team Offender Management and Public Protection Group- NOMS	Completed and ongoing
5.5	Access to the National Probation Service case recording system should be provided, to improve communication and risk management information exchange. (4.18)	Accepted Subject to Resources	<p>A project to implement a link from the prison network (Quantum) through to probation applications on the OMNI network (used by National Probation Service) has already started but is at the early stages of discovery.</p> <p>It is expected that, subject to financial and technical approvals, this would deliver direct access within the current financial year.</p> <p>Although similar work was previously carried out between the courts network and OMNI, there are specific differences in connecting Quantum and the project is therefore investigating a number of solutions for the best long term benefit to probation. Imminent changes to the delivery and topology of the OMNI network, through the Future IT Sourcing programme, will need to be carefully considered and possibly may delay this project.</p>	Custody and Assistive Technology- NOMS	March 2017 (for review)
	Recommendations To the governor				
	Early days in custody				
5.6	Prisoners' property should arrive with them, and should be issued within two days of arrival. (1.15)	Accepted Subject to Resources	HMP Full Sutton is committed to improving the issue of property times whilst adhering to prison service operating procedures. The establishment will make sure prisoners receive their property in a timely manner subject to the transfer of property	Head of Operations	31 December 2016

			provision and restrictions, and operational availability of staff to process.		
	Security				
5.7	The supply reduction strategy should be overseen and implemented with the involvement of the drug treatment service team. (1.36)	Accepted	<p>The drug treatment service team attends the supply reduction meeting on a monthly basis (as per the terms of reference). This is a multi-disciplinary meeting which creates a joined up approach to drug treatment.</p> <p>This will be monitored through the establishment's combined action plan (CAP).</p>	Head of Operations / Head of Clinical Services	Completed and ongoing
	Discipline				
5.8	The role of the reintegration unit should be clarified. (1.55)	Accepted	The role of this unit and a clear strategy setting out expected working practices and aims of the unit will be published to all staff and prisoners to reinforce clarity.	Head of Operations	30 September 2016
	Equality and diversity				
5.9	The equality action group and senior management team should receive analysis of the implications of the equality monitoring tool data, decide on actions to be taken in consequence, and monitor the outcomes of those actions. (2.17)	Accepted	<p>The Senior Management Team (SMT) now receive a quarterly agenda presentation on the recently published equalities monitoring tool (EMT) data.</p> <p>Any actions arising from the analysis will be agreed by the Equalities Action Group and managed through the establishments Equalities Action Plan. This information will also be shared with Prisoner Equality Representatives to improve their perceptions of management action and commitment in response to identified concerns.</p>	Head of Operations	30 September 2016
5.10	Key prisoner information should be translated into relevant languages and professional interpreting services should be used for confidential matters. (2.26)	Accepted	<p>Key documentation will be determined in consultation with prisoner representatives and translated copies secured where this is possible to achieve / or access to translation services where it is not.</p> <p>Healthcare professionals will use interpretation services for confidential matters. Staff awareness will be raised regarding the use of the interpreting service – via publication of a Staff</p>	Head of Residence & Equality	30 September 2016

			<p>Information Notice.</p> <p>All requests for, and use of, translating services will be recorded, to further monitor and make adjustments in light of specific need(s).</p>		
5.11	There should be a clear system for assessing and meeting the needs of those with disabilities, including safe and effective arrangements for peer support. (2.27)	Accepted	<p>All new arrivals at HMP Full Sutton receive a healthcare screen and, a disability assessment will be included.</p> <p>The establishment will develop a training / awareness package (including a clear job description) and provide guidance on improving prisoner peer support to both include references to provisions set out in Adult Social Care policy PSI 03/2016 and Social Care Act.</p>	Head of Residence & Equality	31 October 2016
5.12	A care plan should be in place and available to all staff for any prisoner seeking or contemplating gender reassignment. (2.28)	Accepted	<p>HMP Full Sutton will record all instances where a prisoner is seeking or contemplating gender reassignment.</p> <p>Care plans will be drawn up for all those prisoners recorded in the database. These care plans are to be made available to key stakeholders in the prisoner's sphere of association within the establishment. Each Care Plan will contain a compact which sets out the behavioural expectations from both the prisoner and expectations of the prison and prison staff.</p> <p>Care plans will be available to staff to make sure there is consistency and management confidence.</p>	Head of Residence & Equality	31 October 2016
	Health services				
5.13	All staff should participate in all aspects of core mandatory training, and clinical supervision should be available and taken up by all professional staff. (2.51)	Accepted	<p>All Spectrum staff will achieve the mandatory training requirements within the allocated timeframes set out within the training policy. This includes face to face and e-learning routes.</p> <p>All Clinical staff will have a dedicated supervisor, signed supervision agreement in place and will participate in the supervision sessions (as defined within the policy and individual agreement). A signed copy of the meeting (not contents) will be passed to Head of Service assuring compliance and will be monitored by the Executive Nurse.</p>	Head of Clinical Services (Spectrum)	31 July 2016

5.14	The emergency resuscitation equipment should be secured and maintained appropriately. (2.52)	Accepted	Defibrillators stored on the wings for the use of custodial staff will be checked weekly by Spectrum staff. An additional weekly check will be made by safer custody staff. These will be stored in dedicated areas informed by the first aid risk assessment with clear signage as to their location.	Safer Custody Manager / Head of Residence	31 December 2016
5.15	Custodial staff should be trained in basic life support, and know the location of and how to use automated external defibrillators. (2.53)	Accepted Subject to Resources	Wing managers will make sure all new staff are briefed as to the location of defibrillators. The First Aid risk assessment will be revisited to identify the level of training and location of defibrillators in the prison. It is unrealistic for all staff to be trained in basic life support, as this is subject to resources and other mandatory training requirements.	Head of Residence and Services Health & Safety manager	1 August 2016 31 December 2016
5.16	There should be an ongoing timetable of health promotion activity that meets the needs of the population, supported by accessible literature, a health promotion action group and health promotion action plan. (2.54, repeated recommendation 2.74)	Accepted	Annual health promotion events are in line with the national calendar for health promotion. This will be improved by increasing wing based materials. A Health Promotion Action Group will be established with relevant operational staff from key departments led by Spectrum Community Health Community Interest Company. A published action plan will form part of the Senior Management Team agenda.	Head of Clinical Services	30 September 2016
5.17	Access to smoking cessation and optician services should be improved and equivalent to community provision. (2.60)	Partially Accepted / Subject to Resources	a). Smoking cessation – The National Offender Management Service (NOMS) Security Group have approved four Nicotine Replacement Products for use in prisons – patches, inhalators, lozenges and oral strips as part of a smoking cessation service. E-Cigarettes are available for prisoners to purchase from the prisons shop to stop using tobacco and help manage their nicotine dependency. Supply of	Head of Clinical Services (Spectrum)	31 August 2016

			<p>nicotine replacement therapy products has yet to be quantified and prescriptions may not be issued on a repeat basis. This does not equate to an equivalent service to community provision as it has to be adapted to the prison context.</p> <p>Smoking cessation courses to increase -doubling the sessions when nursing resources improve to address excessive waiting times.</p> <p>New funding resources will be obtained in April 2017 from National Health Service England (NHSE) to support additional staff, pharmacy and promotion materials to meet the demand of the whole prison moving towards going tobacco smoke free.</p> <p>b). Optician services –</p> <p>A review of the optical services contract and provision will take place along with an action plan to address waiting times.</p>	Head of Clinical Services (Spectrum)	31 December 2016
5.18	External appointments should not be cancelled unless there are exceptional reasons. (2.61)	Accepted	HMP Full Sutton is committed to facilitating all external appointments subject to safe and available staffing levels. When appointments must be cancelled for exceptional reasons this is in consultation with the provider and cancellations are assessed and prioritised by the GP.	Governor	Completed and ongoing
5.19	The inpatient unit should introduce a formal operational policy that establishes agreed admission and discharge criteria. (2.62)	Accepted	A written standard operational policy will be introduced which supports the current practice of all clinical admissions assessed and prioritised in line with the National Early Warning System. Prisoners that are located in the department for operational safety reasons (under exceptional circumstances) a note will be recorded of this and signed off by the Governor.	Head of Clinical Services	October 2016
5.20	In-possession risk assessments should consider the risks of the drug as well as the patient and be reviewed regularly. (2.67)	Accepted	<p>Spectrum's Medicines Management Committee will agree Spectrum's operational procedures for risk assessment and in possession medication policy to be in line with best practice and national guidance.</p> <p>This standardised policy will be introduced across the prison estate in which it delivers its services informed by national guidance.</p>	Superintendent Pharmacist (Spectrum)	31 August 2016

5.21	All supervised medicines should be transported and administered safely and in line with professional accountabilities. Confidentiality should be adhered to appropriately. (2.68)	Accepted	A dedicated dispensing room is in place on G wing for the administration of supervised medication and the delivery of medication in possession medication. Patients will be moved to the dispensing area individually to receive medication.	Head of Clinical Services	Completed
5.22	Access to the dentist should be equivalent to that in the community. (2.72)	Accepted	<p>The local delivery board to include dental access and waiting times as a standing agenda item, to enable the monitoring of the service delivery, the enabling activity impacting on waiting times and from this develop an action plan to improve the waiting times.</p> <p>Dental service access is not contracted equivalent to the community and would require additional NHS England resource. However, emergency treatments could be offered external to the prison (where appropriate).</p>	<p>Head of Clinical Services /</p> <p>National Health Service England (NHSE)</p>	31 December 2016
5.23	Mental health services should include clinical psychology, cognitive behavioural therapy and therapeutic groups. (2.77, repeated recommendation 2.105)	Accepted Subject to Resources	<p>Current SLA meets the commissioning agreement but does not include psychology. This will require an agreed change to the SLA.</p> <p>A range of individual psychological interventions are in place for patients assessed as in need of this service. Group work to cover tier three and tier four interventions will commence on the appointment of qualified and competent staff.</p>	Head of Clinical Services (Spectrum)	Completed and ongoing
5.24	Care programme approach planning arrangements should comply with national standards. (2.78)	Accepted	All patients on the Care Programme Approach (CPA) register will have a clear care plan outlining the CPA interventions and review date, managed and coordinated by the Mental Health Team Leader and agreed with the Psychiatrist.	Head of Clinical Service	31 August 2016
5.25	The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.79)	Accepted	The Mental Health Team will have responsibility for proactively managing the process for patients who require transfer to hospital under the Mental Health Act 1983. The Mental Health Team will make sure that patients are referred to the provider of tertiary mental health services in a timely way, and in line with agreed protocols.	National Health Service England (NHSE)	Completed and ongoing

			The Mental Health Team Leader will proactively monitor referral dates, assessments and recommendations for transfer under the Mental Health Act, pursue dates and report waiting times to the Commissioner.		
5.26	Mental health awareness training should be provided to all frontline prison staff. (2.80)	Accepted Subject to Resources	<p>A review of training needs will be undertaken, with external input from Spectrum and MIND to facilitate the training initially to priority groups such as Segregation staff.</p> <p>Continued monitoring will take place through the training committee meeting. A full role out to all frontline staff will be subject to resources.</p>	Head of Corporate Services	<p>30 September 2016 (review date)</p> <p>31 December 2016</p>
	Time out of cell				
5.27	Exercise areas should contain adequate seating and provide a pleasant environment for time outdoors. (3.4)	Accepted Subject to Resources	Seating suitable to the environment of the exercise yards will be sought and subject to financial considerations.	Head of Residence	31 December 2016
	Learning and skills and work activities				
5.28	The analysis and use of data to identify areas of low participation and underperformance should be improved. (3.11)	Accepted	<p>HMP Full Sutton will examine the data currently available and will develop a system to monitor classroom attendance, whilst examining access, allocation and, retention within industries and education.</p> <p>Data will be examined at monthly activities hub meetings discussing clear outcomes of improvement, inclusiveness, performance and participation across all work areas. This will be used in the activity strategy meeting to support and guide and monitor improvement planning.</p>	Head of Reducing Re Offending	30 September 2016

5.29	The education provision should be extended to include higher-level learning and a greater range of subjects to meet the needs of those serving longer sentences or with higher prior academic attainment. (3.17)	Accepted Subject to Resources	HMP Full Sutton will examine opportunities subject to appropriate funding to develop this curriculum during the next curriculum review to take place in August 2017 and look at further development of partnership working with higher level education bodies and opportunities for wider distance learning.	Head of Reducing Re Offending	31 March 2017
5.30	Opportunities for prisoners to gain accredited qualifications at work should be increased. (3.18)	Accepted	HMP Full Sutton will examine opportunities to develop relevant qualifications in both Offender Learning and Skills Services (OLASS) and non-OLASS options. This will include a review of work activities and the link to learning pathways.	Head of Reducing Re Offending	31 December 2016
5.31	The recording of skill development in education, training and work areas should be improved, to plan challenging progression targets. (3.26)	Accepted	HMP Full Sutton will use Individual Learning Plans (ILPs) and passport to employment documentation to make sure that the skills acquired by prisoners are properly documented and used to inform the setting of progression targets. Assurance of this will be by the activities hub on a monthly basis reporting the statistics around ILP progression to the activities hub meeting. This data will drive the offender management development strategy.	Head of Reducing Re Offending / Head of Offender Management	30 September 2016
5.32	The recognition and recording of all behavioural, personal and social development to measure achievement on non-accredited courses should be improved. (3.27)	Accepted	Guidance will be issued to staff to improve the recording of all behavioural, personal and social development achievements from non-accredited courses onto ILP's and passports to employment. Assurance of this will to be monitored by the activities hub on a monthly basis.	Head of Reducing Re Offending	31 August 2016
5.33	Support provided to learners on English courses should be improved so that all make good progress and achieve their planned qualifications. (3.36)	Accepted	Effective utilisation of regional and national English tools such as peer support, virtual campus and outreach facilities to provide individual support to learners to improve progress to achieve their qualifications. Support will also be given to learners with learning difficulties and disabilities. This will include a monthly practitioner forum for sharing good practice, and increased personnel development for staff. Delivery will be monitored data through the Quality Improvement Group meeting.	Head of Reducing Re Offending	30 September 2016

5.34	The analysis of data to monitor the use of the library should be improved. (3.40)	Accepted	HMP Full Sutton will examine and monitor data for monthly use during the activities hub meeting and develop a strategy to actively promote use of the Library across the whole population.	Head of Reducing Re Offending	30 September 2016
	Offender management and planning				
5.35	The resettlement help provided by Advanced Personnel Management (APM) should be better publicised, and APM staff should attend the pre-release public protection meeting, to establish a risk-based resettlement plan. (4.24)	Accepted	The services provided by Advanced Personnel Management (APM) will be promoted through staff and prisoner information notices. Their representatives and other outside providers will be invited and encouraged to attend pre-release public protection meetings and records kept.	Head of Offender Management	31 August 2016 30 September 2016
	Reintegration planning				
5.36	All prisoners, whatever their privilege status, should be able to attend family visits, subject to security and risk assessments. (4.38, repeated recommendation 4.39)	Accepted	A multi-disciplinary review meeting takes place prior to all visits to review all applications to confirm eligibility and to allocate places on events. All prisoners, whatever their privilege level, can apply to attend family visits.	Head of Operations	Completed
5.37	A family learning/parenting course should be reintroduced. (4.39, repeated recommendation 4.38)	Accepted Subject to Resources	This will be explored and developed in conjunction with the development of the Children & Family Strategy for the establishment. The prison is engaging with third sector parties (which is subject to resource costs and course availability) and engaging with the national review of services with a view to accessing parenting courses if available within the allocated budget.	Head of Operations	31 January 2017

Recommendations		Housekeeping Points	
Accepted	28	Accepted	0
Accepted Subject to Resources / Partially Accepted	9	Accepted Subject to Resources / Partially	0

		Accepted	
Rejected	0	Rejected	0
Total	37	Total	0