

ACTION PLAN: HMCIP REPORT**ESTABLISHMENT: HMP LINDHOLME**

TIMETABLE	DATE	STATUS OF THIS RETURN
Full Unannounced inspection	7 – 18 March 2016	
Report published	7 July 2016	
Action Plan Submitted	8 September 2016	Attached

ACTION PLAN - HMCIP REPORT**ESTABLISHMENT: HMP LINDHOLME****POSITION AS AT: 08 SEPTEMBER 2016**

1. Rec. no	2 Recommendation	3. Accepted/ Rejected	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	Main recommendations To NOMS				
5.1	Prisoners nearing release should have access to timely, effective and comprehensive resettlement services. (S61)	Accepted	<p>The National Offender Management Service (NOMS) note the concern raised by the Inspectorate and expect all prisoners in custody, including the small number being released from non-resettlement prisons, to receive resettlement services towards the end of their sentence.</p> <p>NOMS reforms mean that major transitions have been taking place in resettlement services, resulting in virtually all those sentenced to less than 12 months receiving support both in custody and on release.</p> <p>NOMS is currently evaluating delivery of Through The Gate services across the country, including for offenders released from non-resettlement prisons, to make sure they are being appropriately supported on their return to the community.</p>	Directorate of Contracted Services	Ongoing
	Main recommendations To the governor				
5.2	Violence reduction	Accepted	The area Zero Tolerance to violence process will be used to	Head of Safety	30 Sept 2016

	management systems should establish and address the underlying causes of violence, particularly if they relate to drugs. Identified causes should be addressed with a prison-wide strategy to reduce violence. Perpetrators should be identified and managed, and victims should be supported. (S57)		manage both perpetrators and victims of violence. This includes issuing warning letters where concerns are identified and behaviour compacts for perpetrators that monitor their behaviour and associations. It also includes victim support compacts to help them with any issues and give them strategies not to become a victim again. Extra resource will be used to ring fence the officers to enable them to do more one to one work in addressing and changing behaviours in both perpetrators and victims.	& Equality	
5.3	Vulnerable prisoners and victims of bullying should not be routinely segregated and isolated on normal location. They should have a support plan and access to association and activities, and their underlying safety issues should be addressed. (S58, repeated recommendation HP53)	Accepted	Support plans will be developed for each individual to address issues they have, and to ensure that vulnerable prisoners have access to a regime. One to one support will be monitored through victim support compacts. These will be co-ordinated by the safer prison admin team.	Head of Safety & Equality	31 Oct 2016
5.4	Prisoners should have timely access to a GP, in line with community provision, and be able to attend all clinically necessary external hospital appointments; these should not be cancelled repeatedly owing to shortages of prison staff. (S59)	Accepted, Subject to Resources	<p>The Physical Healthcare Clinical Matron and GP are reviewing those patients on the GP waiting list, it is understood the cause of the long GP waiting list is due to inappropriate triage. In order to resolve this the clinical matron is implementing a new system that all healthcare appointment requests for physical healthcare are triage by the clinical matron initially and then allocated to the correct healthcare professional. Utilising the other specialist services we have such as the practice nurse, sexual health nurse, pain management nurse, pharmacist and our advanced nurse practitioner. Once the clinical matron and GP have reviewed the waiting list those patients identified who do not need to see a GP, as their presenting complaint can be treated by a nurse, will be seen in the Matron Nurse Clinic and this will be running two full days a week from September. The waiting list is being reviewed weekly by the Head of Healthcare to ensure the new triage system being implemented is showing a reduction in the GP waiting list and an effective triage to our other specialist services.</p> <p>The protocol for additional hospital escorts via provision of Payment Plus to be re-vitalised and co-ordinated with healthcare</p>	Head of Reducing Reoffending	31 Oct 2016

			and admin staff. The decision to cancel an escort or curtail regime due to staff shortfalls is now taken by Duty Governor in consultation with senior healthcare manager, and will not be decided at a lower managerial level.		
5.5	All prisoners should have a high-quality, up-to-date offender assessment system (OASys) assessment and regular and meaningful contact with their offender supervisor, to enable effective management of risk, promote progression and challenge offending behaviour. (S60)	Accepted, Subject to Resources	A system is in place to complete initial assessment for prisoners who do not arrive from the local prison with an assessment complete, this will be delivered by using the Payment Plus for OASys trained staff. A notice advertising the availability of Payment Plus for unified grades who are OASys trained has been issued. A process is in place to prioritise urgent cases, The probation officer offender supervisors now mentor band 4 offender supervisors and complete most high risk cases and countersign OASys, to improve quality.	Head of OMU	31 Aug 2016
	Recommendations To NOMS				
	Offender management and planning				
5.6	Escort vehicles should be provided promptly, to avoid prisoners facing unnecessary delays in progressive transfers. (4.21)	Accepted	Whilst every effort is made by the escort contractors to ensure their vehicles arrive and depart within the agreed reception times, there may be occasions when unforeseen events, including traffic issues and adverse weather conditions en route have an impact on arrival times. Escort contractors will advise the prison 30 minutes before arrival to assist the prison to have prisoners ready for transfer. The escort contractors are required to ensure that receiving prisons are informed of delays and agreement is sought in advance for the safe receipt of any late arrivals. Additionally, the escort contractors depend on the holding prisons having their prisoners ready for collection on time. If the prisoners are not ready for collection, or the discharging procedure is delayed in any way, there is an impact upon the contractor's ability to deliver prisoners on time. During the last 12 months PECS have received no complaints regarding transfer delays.	PECS	Ongoing
	Recommendations To the governor				
	Early days in custody				

5.7	First night procedures should ensure that accommodation is adequately prepared and include a private interview with a member of staff which addresses feelings of safety, and night staff should make themselves known to all new arrivals. (1.6)	Accepted	Each cellular accommodation block has been allocated an identified member of staff to provide the induction role for new arrivals on that wing. The job description specifies responsibilities including checking the cellular accommodation and completing the interview which is done in a wing office. Reception staff will provide all new arrivals details to the night orderly officer who allocates the night unit staff to ensure the new arrivals are aware of how to request support if it is required.	Head of Residence 2	31 Aug 2016
5.8	Prisoners who have to wait for induction should have access to essential information as they require it. (1.7)	Accepted	Essential information booklets have been produced and are provided on reception to each new arrival. Prisoner induction representatives are in place with prisoner information desk workers to meet new arrivals and each new arrival receives an individual interview and briefing from an allocated wing member of staff. This is recorded on the compacts that are stored in the wing folders.	Head of Residence 2	Complete
	Self-harm and suicide				
5.9	The quality of assessment, care in custody and teamwork (ACCT) assessment, planning and care should be improved and this should be reflected in the quality of case records. (1.18, repeated recommendation 1.38)	Accepted	An ACCT quality check process is in place where deficiency notices are issued in the morning operational meeting. These notices are returned the following day with updates. General learning points from monthly quality assurance checks are communicated via the safer custody meeting and also to all case managers. Further training will be completed to support and develop the case managers to further improve the quality.	Head of Safety & Equality	30 Nov 2016
5.10	All staff should have up-to-date training in self-harm and suicide prevention. (1.19, repeated recommendation 1.37)	Accepted subject to resources	A training plan is to be developed using the support from the DDC, where extra trainers will be made available to deliver training packages. Safer custody staff will also carry out one to one support when deficiencies have been identified.	Head of Safety & Equality	31 Mar 2017
5.11	Action plans arising from death-in-custody investigations should be overseen by the safer custody meeting and their implementation kept under review to ensure that they are embedded in practice. (1.20)	Accepted	Death in Custody Action plans are a standing agenda item at the monthly safer custody meeting and are now discussed each month.	Head of Safety & Equality	Complete
	Safeguarding				
5.12	There should be a local safeguarding adult's policy, supported by a training	Accepted	There is an agreed memorandum of understanding with Doncaster Metropolitan Borough Council and the other three prisons in the area on how to collaborate in order to deliver	Head of Safety & Equality	30 Nov 2016

	programme, which outlines how staff should identify concerns and make referrals to the local safeguarding adult's board. (1.23)		social care to those residing at Lindholme. This includes referral guidelines for staff and prisoners. Head of Safety & Equality is a member of the Doncaster Safeguarding Adults board. A meeting has been set up with the newly appointed independent Chair in order to further improve the collaboration with the board and agree on how they can support the training of our staff. Lindholme has established a monthly meeting with social care, healthcare, safer custody and residential function where patients of note are discussed, and in this meeting actions will be agreed on how to assess and support them. A training programme will be implemented to improve awareness by staff on signs to look out for to identify potential safeguarding issues and how to complete referrals.		
	Security				
5.13	Closed visits should be imposed only for visits-related activity. (1.30, repeated recommendation 1.55)	Accepted	Closed Visits are reviewed on a monthly basis, intelligence related to visits will be factored in when making decisions around this sanction.	Head of Security & Intel.	Complete
5.14	Mandatory and suspicion drug testing should be adequately resourced to undertake the full range of testing. (1.31)	Accepted subject to resources	The prison has been re-profiled and it is anticipated that all aspects of MDT testing will be adequately resourced. A review of the re-profile will take place in three months (30 th Sept 2016) and allocated MDT resources over the previous three months will be reviewed to see if the issue has been resolved.	Head of Security & Intel.	30 Sept 2016
	Incentives and earned privileges				
5.15	The incentives and earned privileges scheme should be applied consistently with timely reviews and a clear focus on incentivising good behaviour, through effective and consultative target setting. (1.35)	Accepted	The IEP scheme will be reviewed to include a focus on consistency and the incentivising of behaviour. Monthly management checks will focus on the effectiveness of this. Prisoners will be consulted regarding behavioural targets.	Head of Residence 1	28 Feb 2017
	Discipline				
5.16	Use of force dossiers should always include officer reports and a completed F213 (injury to prisoner) form. (1.42)	Accepted	All Use of Force reports are collated by safer custody B3 admin and any missing reports are listed and sent to custodial manager's to progress with staff. This process will be supported by the Deputy Governor in the weekly operations meetings, and where this is not sufficient letters will be issued to members of staff who have not completed the report in time. Any that still do not complete the reports will be dealt with managed by the SPDR process.	Head of Safety & Equality	31 Oct 2016

5.17	A formal reintegration and care planning process for segregated prisoners should be introduced. (1.47, repeated recommendation 1.82)	Accepted	Re-integration plans are discussed as part of the R45 reviews. These are overseen by the CM managing the unit, who liaises closely with the security department, the residential function and observation, classification and allocations (OCA) as appropriate. These matters are also discussed at the multi-disciplinary weekly safety intervention meeting (SIM) the day prior to the R45 board and the details of this are captured in the minutes.	Head of Safety & Equality	30 Sept 2016
	Substance misuse				
5.18	An in-depth substance use needs analysis should be conducted to update the drug and alcohol strategy and develop substance use interventions of sufficient intensity and ease of access to meet the needs of the prison's population. (1.54, repeated recommendation 1.92)	Accepted	Substance misuse lead (Steve Brookes- Nott's Healthcare lead) will contact NHS England regarding in-depth needs analysis for substance misuse. Recent prison led drug and alcohol survey will be discussed at next HMP substance misuse service strategy meeting in September 2016.	Head of Reducing Reoffending	30 Nov 2016
5.19	Treatment regimes for substance misuse should be more recovery focused, and prisoners should be offered increased support and coordinated care to enhance motivation and improve treatment outcomes. (1.55)	Accepted	The development of a "Recovery Wing" is underway. Prisoners will be located on this 64 bed unit to receive specific support and intervention focused on recovery. Mentors and peer workers are being located on the unit already and prisoners who wish to access the service are being selected now.	Head of Reducing Reoffending	30 Nov 2016
	Residential units				
5.20	All cells should be clean and adequately furnished. (2.8)	Accepted	Large orders for cell furnishings have been completed. Wing inspections have been put in place where a number of cells are checked across the wings on a weekly basis.	Head of Residence 1 & 2	30 Apr 2017
5.21	Prisoners should be able to access their stored property within 14 days of their application. (2.9, repeated recommendation 2.12)	Partially Accepted	Due to the volume and unpredictability of transfers/ movements in and out of reception on a daily basis Lindholme is unable to issue prisoners property within the two week timescale, the current design of the reception building means that the prison is unable to facilitate prisoner movement in/out of reception and process prisoner property requests at the same time. During the few periods of no prisoner movement in/out of reception property applications are processed and prisoners called up for it to be issued to them. Lindholme has applied via the DDC to have the schedule 26 (Geomey/Population Management Unit reception opening times) timings changed to have no transfers in/out on a	Head of Operations	30 Nov 2016

Deleted: -

			Friday PM thus giving a defined period where property applications can be processed and the prisoners called up to reception for it to be issued to them - this request has now been approved. The prison has reviewed the option of property issue during the evening or weekend period however the staffing resources required to facilitate this are not available within the current staffing profile.		
	Staff-prisoner relationships				
5.22	Electronic case note entries by staff, including personal officers, should be regular and meaningful. (2.13)	Accepted	Additional resources have been allocated across the residential function to enable better working practices to be achieved. Management checks are also being introduced across the residential function to ensure that case notes are both at the expected frequency and quality.	Head of Residence 1 & 2	30 Sept 2016
	Equality and diversity				
5.23	Equality impact assessments should be undertaken and adverse data from the equality monitoring tool should be examined promptly. Consequent actions should be included in the action plan and progress reported to the prisoner equality action team meeting. (2.17)	Accepted	There is an equality impact assessment plan in place. This is a standing agenda at the prisoner equality action group meeting where any issues are discussed. Further action will be carried out to ensure that the plan is delivered.	Head of Safety & Equality	28 Feb 2017
5.24	All prisoners with disabilities should have their needs fully addressed, including the provision of care and evacuation plans for those who need them. (2.24)	Accepted	A full review of the Personal Evacuation Escape Plans (PEEP) is being completed and support plans are created where required to meet individual's needs. The communication of these to all relevant staff will be improved to ensure that all residential staff are aware by including this in case notes as well as the hard copy of the PEEP. All prisoners are given a questionnaire on induction, and then added to the PEEP register and the Prison National Offender Management Information System (P-NOMIS) and any concerns are passed on to healthcare as an extra check following completion of the induction process.	Head of Safety & Equality	31 Oct 2016
5.25	Prisoner buddies and peer representatives should receive adequate supervision, training and support in their role. (2.25)	Accepted	A manager has been identified to take the lead in supporting buddies and peer supporters. This will include setting up meetings where feedback and support is offered, in addition to agreeing job descriptions and ensure that all staff are clear about what they should deliver and are able to get support with any issues that arise.	Head of Safety & Equality	28 Feb 2017
	Health services				
5.26	Prisoners from L wing visiting the health centre should have	Accepted, subject to	Current environment in healthcare department doesn't allow for a separate waiting area and a capital bid will be required to	Head of Reducing	31 Oct 2016

	access to a secure, comfortable waiting area. (2.42)	resources	construct these facilities. Meeting scheduled for 1st Sept to progress this recommendation, where a bid will be formulated.	Reoffending	
5.27	Sufficient custodial staff should be trained in basic life support and know the location of automated external defibrillators, to ensure a prompt response to out-of-hours emergencies. (2.43)	Accepted	A risk assessment as outlined in PSI 29/2015: First Aid: is currently being reviewed by the health and safety team to identify numbers of staff still needing to be trained. Once this is completed then the training plan will be updated to reflect the additional training requirements. The location of automatic defibrillators will be published in a Notice to Staff and these pieces of equipment will be signposted around the prison.	Head of Corporate Services	31 Oct 2016
5.28	Prisoners should be able to access a well-advertised health care complaints system and receive a timely response which is quality assured, with signposting to enable concerns to be escalated if a prisoner remains dissatisfied. (2.44)	Accepted	Prisoners can now submit a confidential healthcare related complaint using the existing complaint boxes via a sealed envelope that is attached to all healthcare complaint forms.	Head of Reducing Reoffending	Complete
5.29	Waiting times for podiatry and physiotherapy services should be equivalent to those found in the community. (2.50)	Accepted	Provision of podiatry and physiotherapy services will be increased in the first instance to address excess waiting list and a review of referral process will be conducted to prevent future build-up of waiting list. The additional finances for the physiotherapy sessions have been agreed and these will be delivered in September to November 16 – one extra physiotherapy session a month. The extra sessions for podiatry have been agreed and are already being delivered and the waiting list will be reviewed in September. A trained foot care healthcare assistant is returning from maternity leave in September 16 and will be able to support the podiatry specialist in delivering foot care treatments.	Head of Reducing Reoffending	30 Oct 2016
5.30	Prisoners with chronic and complex diseases should have formal, good quality care plans. (2.51)	Accepted	Complex Case Management is now fully embedded as evidenced in assurance email to Associate Director and HCC Area Manager.	Head of Reducing Reoffending	Complete
5.31	Medication administration should be fully supervised by prison staff. (2.56)	Accepted	Additional staffing has been provided to both the cellular accommodation where medication dispensing takes place as well as the main healthcare department as part of the new profiles to ensure individuals are allocated to supervise the dispensing medication and support healthcare colleagues. The member of staff supervising medication is now detailed and checks are conducted by the wing supervising officers.	Head of Residence 1 & 2	31 Jul 2016
5.32	In-possession risk	Accepted	The in-possession medication risk assessment clinics are	Head of	31 Sept 2016

	assessments should be completed for every prisoner, with the reasons for any decision made being clearly documented. (2.57)		underway and being delivered weekly, all patients requiring risk assessments have been identified and are being booked into the pharmacy clinics.	Reducing Reoffending	
5.33	The introduction of patient group directions should be considered, to enable the legal supply of more potent medication by the pharmacist and/or nurse. (2.58)	Accepted	This recommendation was taken to the Offender Health Drugs and Therapeutic Committee for further consideration in August 2016. Initial discussions are underway to review the supply of medications under PGDs.	Head of Reducing Reoffending	31 Oct 2016
5.34	Appropriate arrangements to enable prisoners with mobility issues to access the dental suite should be introduced. (2.61)	Accepted, subject to resources	An agreed protocol is currently in place to allow access to a dental suite for any prisoner with mobility issues. Any affected prisoners are escorted to HMP Moorland and returned promptly following dental appointments. Further discussions scheduled for 24th Sept to consider business case for funding of chair lift for Lindholme HCC.	Head of Reducing Reoffending	31 Oct 2016
5.35	All dental equipment should be safe for use, with assurance provided by clear maintenance schedules and accessibility of contemporary safety certification. (2.62)	Accepted	To ensure maintenance schedule is organised with new dental provider and records are kept up to date. Quotes have now been received to re-model the dental suite and the Governor has agreed to submit a funding request to progress these upgrades.	Head of Reducing Reoffending	31 Oct 2016
5.36	The capacity of the primary mental health team should be expanded, to ensure that it meets the needs identified in the draft health needs assessment. (2.68)	Accepted	The mental health service is currently under review by the clinical matron. An initial proposal has been drafted for discussion with Clinical Director of Nott's Healthcare- Dr Kaul.	Head of Reducing Reoffending	30 Nov 2016
5.37	The transfer of prisoners to external health care beds should be expedited and occur within Department of Health transfer target timescales. (2.69)	Accepted	The prison will develop a system that will ensure there are appropriate escalation procedures in place locally should any patient requiring a mental health admission, be delayed and therefore exceed the transfer target. This will be escalated where it is not met with the NHS England Specialist Commissioning team.	Head of Reducing Reoffending	30 Nov 2016
	Catering				
5.38	Breakfast packs should be enhanced and should be distributed on the morning they are to be eaten. (2.74)	Rejected	There is no capacity to serve breakfast to prisoners on the day without severely impacting on the regime. The serving of breakfast packs the evening before is a well-established practice across the prison estate and one, which contributes to a swifter start to the morning regime, including start time for work and other activities. The contents of the packs are suitable to be stored in the prisoners' cells overnight.	Head of Residence 2	

	Purchases				
5.39	Prisoners should be able to receive their first full shop order within a few days of arrival. (2.78)	Rejected	Each prison has one set ordering day in the week for retail purchases, and one corresponding delivery day. To provide extra deliveries outside of this for new arrivals would be cost prohibitive. Prisoners should be offered a reception pack to purchase on arrival; a number of different packs are available. Their first order can then be placed on the next usual ordering day.	Head of Residence 1 & 2	
5.40	Prisoners should not be charged an administrative fee on catalogue orders. (2.79)	Rejected	The national catalogue fee was introduced with board approval, and brought in as part of PSI 23/2013 Prisoner Retail, following consultation. There is provision within the PSI for the catalogue handling fee not to be charged in circumstances where products are being purchased as specific requirements for a protected group, where to charge the handling fee would disadvantage the individual compared to the general population. The charge is only a contribution towards the cost of providing this ordering service for prisoners, and is mandatory across all prisons.	Head of Corporate Services	
	Time out of cell				
5.41	Prisoners who are unemployed (through no fault of their own), older or have disabilities should be unlocked during the core day, with regime activities provided. (3.4, repeated recommendation 3.5)	Accepted	Provision for prisoners in these categories is being reviewed. A system will be developed to facilitate time out of cell during the core day for prisoners in these categories.	Head of Residence 1 & 2	31 Dec 2016
	Learning and skills and work activities				
5.42	The prison should ensure that the plans to introduce more prison industry and work places are implemented, so that all prisoners, including vulnerable and excluded prisoners, can be fully occupied for the core day. (3.13)	Accepted	There is now a plan to increase activity spaces to occupy the population. By 31 st December 2016 Lindholme aims to have 45 prisoners in the MOD flat racks project, 40 prisoners in MOD camouflage netting workshop, 15 Prisoners in the developing Tier Haltung project and 6 places completing work for Alco Valves. By the end of Q4 30 prisoners will be employed in the Intel Call Centre. As part of the funding the prison are receiving in relation to safety, we are planning to increase our safer prisons team which will enable them to conduct robust risk assessments to ensure suitable work places are identified for individuals who are self-isolating and vulnerable.	Head of Business Enterprise	31 Dec 16
5.43	Prisoners taking distance learning or Open University courses should have the	Accepted	The Learning & Skill Manager (LSM) will work with Novus, Virtual Campus Staff, the Open University / Distance Learning (OU/DL) Co-ordinator, Prisoners Education Trust and the OU/DL	Head of Reducing Reoffending	31 Oct 2016

	opportunity to improve their academic writing and thinking skills. (3.16)		Forum to identify and deliver suitable courses. This will be monitored through the Quality Improvement Group (QIG) meetings and has been added as an action to the Quality Improvement Plan		
5.44	The prison should ensure that health and safety control measures are rigorously applied to all prison work activities, so that prisoners are adequately protected from potential hazards to their personal health and safety. (3.23)	Accepted	All Safe Systems of Work (SSOW) and risk assessments are fully up to date in all areas. This action was specifically pertinent to two particular areas and immediate rectified whilst the Inspection was taking place. Lindholme has reviewed all SSOW and risk assessments and will continue to do so for all new work areas. The SSOW and Risk assessments are published and available on the z drive and in hard copy format in folders in all activity areas. Instructors are clear on the presence of the folders and Personal Protection Equipment (PPE) is available as per the risk assessments in all areas. Consumable PPE is checked by Instructors and ordered on a needs basis. The Senior Management Team (SMT) Health and Safety tours check the SSOW and risk assessments are in place.	Head of Business Enterprise	31 Aug 2016
5.45	The prison should ensure that all prisoners arrive promptly and are ready to start work or training activities at the start of sessions. (3.27)	Accepted	The new core day and associated staff profiles have provided officers to actively encourage prisoners to move to their workplace faster allowing the prompt start of their activity session.	Head of Reducing Reoffending	30 Sept 2016
	Strategic management of resettlement				
5.46	The resettlement strategy should be based on a comprehensive needs analysis and locate the offender management unit at the centre of reducing reoffending work. (4.6)	Accepted	A resettlement strategy is to be developed following ongoing work into the introduction of a Service Level Agreement between Lindholme and Sodexo (South Yorkshire Community Rehabilitation Company (SY CRC)) for provision of resettlement services which are currently not available to us as a "Working Prison."	Head of Reducing Reoffending	31 Dec 2016
	Offender management and planning				
5.47	Management oversight of case management, including the quality of offender assessment system (OASys) assessments and sentence plans, should result in clear improvements. (4.13)	Accepted	The probation officer offender supervisors now mentor band 4 offender supervisors and complete most high risk cases and countersign OASys, to improve quality. A 10% quality check also takes place by a manager.	Head of OMU	31 Aug 2016
5.48	The multi-agency public protection arrangements (MAPP) management level	Accepted	A comprehensive review of the inter departmental risk management meeting (IDRMT) is taking place, one of the components of the meeting will now involve The multi-agency	Head of OMU	30 Sept 2016

	should be confirmed at least six months before release, to promote good information sharing and develop risk management plans well ahead of release. (4.18)		public protection arrangements (MAPPA) cases being discussed at the IDRMT, to promote good information sharing and develop risk management plans well ahead of release. A tracking system will be developed to ensure that the information sharing and management plans are developed in good time before release.		
	Reintegration planning				
5.49	Additional weekend visits should be provided. (4.38)	Accepted, subject to resources	Lindholme has reviewed the ability to offer morning visits at a weekend however due to the availability of staffing resources and financial considerations this is not currently feasible. The available funding will be reviewed at the end of the financial year (6 April 2017).	Head of Operations	6 April 2017

Recommendations		Housekeeping Points	
Accepted	38	Accepted	0
Accepted Subject to Resources /Partially Accepted	8	Accepted Subject to Resources /Partially Accepted	0
Rejected	3	Rejected	0
Total	49	Total	0