

## ASH HOUSE 2016 INSPECTION ACTION PLAN - Summary

Last updated on

Tab	Number of Recommendations	Red	Amber	Green	Unassigned
<a href="#">Main Recommendations</a>	4	2	2	0	0
<a href="#">Courts, Escorts &amp; Transfers</a>	1	0	1	0	0
<a href="#">Early Days in Custody</a>	1	0	0	1	0
<a href="#">Self-harm &amp; suicide prevention</a>	3	0	2	1	0
<a href="#">Safeguarding</a>	1	0	1	0	0
<a href="#">Security</a>	2	0	1	1	0
<a href="#">Disciplinary Procedures</a>	2	1	0	1	0
<a href="#">Residential Units</a>	1	0	0	1	0
<a href="#">Equality &amp; Diversity</a>	2	1	1	0	0
<a href="#">Complaints</a>	1	0	0	1	0
<a href="#">Legal Rights</a>	1	0	0	1	0
<a href="#">Health Services</a>	16	0	0	1	15
<a href="#">Time out of cell</a>	1	0	0	1	0
<a href="#">L&amp;S and Work Activities</a>	1	1	0	0	0
<a href="#">PE &amp; Healthy Living</a>	1	0	1	0	0
<a href="#">Strategic Mgmt of Resettlement</a>	1	0	0	1	0
<a href="#">Offender Management &amp; Planning</a>	2	0	2	0	0
<a href="#">Reintegration Planning</a>	7	0	1	6	0
<b>Totals</b>	<b>48</b>	<b>5</b>	<b>12</b>	<b>16</b>	<b>15</b>

ASH HOUSE 2016 INSPECTION ACTION PLAN - Main Recommendations						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.1	A more strategic, multidisciplinary approach to substance misuse dependency is needed. This should address both supply and demand issues, be informed by a needs assessment of the population and result in an action plan that ensures that those dependent on drugs or alcohol have prompt access to specialist support, which includes addressing links to offending behaviour. (S44)	Res. Gov. SIC.	A joint Substance Misuse Policy with SEHSCT and NIPS is currently in draft form, once this is published a local policy will be developed for HBW  To be raised with David Eagleson and OMB	28/06/2017	red	A draft joint policy between NIPS & SET is currently with SEHSCT, once this has been agreed by both parties a local policy will be developed.
5.2	The complex needs of many women held at Ash House must be recognised and a more coordinated approach adopted. The criminal justice and health care systems need to provide therapeutic alternatives to Ash House for the small number of highly vulnerable women with the most challenging behaviour. (S45)	Res. Gov. Healthcare	SDU officers identify within the first 24 hours any urgent risks a female prisoner may have, e.g. children, housing etc. Consideration should be given to utilising the 'seperated unit' as a therapeutic unit separate from Ash house.	28/04/2017	Amber	SDU make referrals to both internal and external organisations for any urgent matters which may arise during their stay in custody, these can be evidenced through inmate notes and PRISM referrals.
5.3	There should be a dedicated women's prison for Northern Ireland. (S46)	PSHQ.	This is not within the gift of HBW or NIPS, this recommendation can only be progressed at Ministerial level.	29/03/2017	Red	This recommendation has been raised in every inspection since the transfer of female prisoners from Mourne House to Hydebank Wood.
5.4	Joint planning between Hydebank Wood/Ash House and BMC management teams should be further developed to ensure all women benefit fully from high quality, well-planned learning and skills and work provision that supports work to reduce their likelihood of future reoffending. (S47)	SDU Gov. Head of L&S	Partnership meetings set up in December 2016 to discuss L&S plans for employment and learning. These are attended by both HBW depts and BMC.  A 20% check to be completed between Residential Governors and SDU Governor on PDPs and ILPs  Assessment tool to be reviewed and implemented by HOL	29/03/2017	Amber	These minuted meeting are held on a monthly basis. PSHQ steering group has bi-monthly meeting but this is currently being evaluated.

ASH HOUSE 2016 INSPECTION ACTION PLAN - Courts, Escorts & Transfers						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.5	Handcuffs should only be used under escort if justified by an individual risk assessment. (1.2)	PECCS	PECCS do cuff whilst in transit and this practice should be reviewed by PECCS management	28/06/2017	amber	<p>PECCS have been asked for comment (TRIM 17/33917)</p> <p>(24/02/2017) Both of these will be addressed through the Chapter 42 changes that are being presented to OMB shortly.</p> <p>PECCS receives a risk assessment for each prisoner that informs them of the required strength of escort and any conditions such as 'Must be handcuffed'.</p> <p>Females: Will not be handcuffed unless Category A (or equivalent) and those who are Risk Assessed as requiring handcuffs.</p>

ASH HOUSE 2016 INSPECTION ACTION PLAN - Early Days in Custody						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.6	All women should receive a full induction that starts with key essential information on the first full day after their arrival. (1.8)	Res. Gov.	Ash house currently have an agreed timetabled induction programme. This programme can at times be ad hoc due to very low committal numbers, however all committals are supplied with information DVD and booklets in written, picture and various language formats	N/A	Green	The First night Information folder has been updated in January 2017. <b>TRIM folder 16/196880</b> . The Induction Information DVD is presently being updated by the PSC training staff & Ash House staff. Full induction time table is in place. Hard copies of induction checklist pertaining to each committal is retained on file on the committal landings.

ASH HOUSE 2016 INSPECTION ACTION PLAN - Self-harm & suicide prevention						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.7	SPAR documents should be further improved. (1.25)	Gov. Safer Custody	There is presently a working group at corporate level reviewing the current SPAR process and associated documentation.	28/06/2017	Amber	OT services, voice of release, dogs, sheep, goats, bees, chickens, sensory gardens, sports, handicrafts, acupuncture, Insider Scheme.  SPARs continue to be audited and the findings are delivered to the monthly Safety & Support Steering Group, managers and partner agencies within HBW (see <b>SPAR and TOP 10</b> reports issued monthly and stored on <b>TRIM 8860\15</b> )
5.8	Observation rooms and anti-ligature clothing should only be used exceptionally, and after all other alternatives have been considered and discounted. (1.26)	Gov. Safer Custody	Review with a view to improvements	N/A	Green	Any decision to use an observation room and or anti-ligature clothing is under authority of the duty manager / governor and reasons recorded in the SPAR booklet. If this is following an incident a full incident report is submitted to SIC and all records held on PRISM. Use of observation cells and special clothing continues to be audited and the findings are delivered to the monthly Safety & Support Steering Group, managers and partner agencies within Hydebank Wood (see <b>SPARs and Top 10</b> reports issued monthly and stored in <b>TRIM folder 8860\15</b> )
5.9	Insiders should receive support and training. (1.27)		Review with a view to improvements	28/06/2017	Amber	Responsibility for Insiders has been given to Ash House managers who are best placed to monitor delivery and provide succession planning. Training is delivered in-house as required. See <b>Insiders Peer Support Scheme and Insiders Scheme Guidance</b>

ASH HOUSE 2016 INSPECTION ACTION PLAN - Safeguarding						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.10	Key staff should be trained in identifying adult safeguarding concerns and set up a referral process to local authorities in women's home areas. (1.31)	Gov. Safer Custody	Staff to be identified, training arranged and a referral process implemented	28/06/2017	Amber	<p>PSC has been requested to develop a training package (<b>TRIM 17/23683 and 17/23684</b>).</p> <p>The pack has been created and will be rolled out ASAP.</p> <p>Update 30/03/2017 "We are currently planning to de-cant from the offices and deliver recruit training at the same time. Once I know for sure the full decant plans I can plan better. We are having a meeting next Wednesday.</p> <p>I would like to run a pilot of the course mid to late April and one of the options I have is to use a classroom in the ground floor of Cedar. I will liaise with the duty office and see what day suits them best." (<b>TRIM 17/74809</b>)</p> <p>Update from PSC requested 05/05/2017 (<b>TRIM 17/74810</b>)</p> <p>Update from PSC 09/05/2017 "I intend to speak to the CDO today and organise a date to run the pilot. It is my intension to have run the first session before the end of May." (<b>TRIM 17/76335</b>)</p> <p>Update 08/08/2017 - the first full day's training will be delivered on 04/09/2017 and will include staff from HBW as well as Maghaberry.</p> <p>First course delivered 04/09/2017</p>

ASH HOUSE 2016 INSPECTION ACTION PLAN - Security						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.11	Intelligence should be used to inform strategies to reduce supplies of illegal drugs and the diversion of prescribed drugs to support efforts to reduce bullying and violence. (1.40)	Res. Gov. SIC	SIC currently hold monthly security meetings which are attended by operational managers. including Drug & Alcohol issues, attendees should include; SIC, Healthcare, start 360 / ad:ept, residential governor and possibly PSNI.  Working group being set up to examine current policies and response to bullying issues.	28/06/2017	Amber	Monthly security meetings are minuted and records retained. Minutes of monthly Security Meetings ( <b>TRIM 4927\14</b> )  A new working group is being set up to look at all aspects of bullying and anti-social behaviour within the College and to review current bullying policies. The first meeting is scheduled to be held on 24/05/2017 ( <b>TRIM 17\54538, 17\75605</b> )
5.12	Mandatory drug testing should be sufficiently staffed to ensure all testing is carried out within identified timescales and without gaps in provision. (1.41, repeated recommendation 1.47)	CDO SIC	Due to staff pressures MDT is carried out on an ad hoc basis, this results in mandatory random testing being prioritised usually at the detriment of other testing considerations i.e. progression, work placement, etc.	28/06/2017	Green	Stats between 01/01/2016 and 31/01/2017 (See Business Object report <b>SY: Hy: DS 0016: Drug Test Breakdown</b> ) show that when we combine the random and other tests we far exceeded our 10% target each month - average tests per month between 01/01/2016 and 30/04/2017 = 16.  The random test stats average = 5.  CDO has been reminded of the need to prioritise drug testing and Security monitor across the month to ensure targets are met.  MDT on schedule

ASH HOUSE 2016 INSPECTION ACTION PLAN - Disciplinary Procedures						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.13	Senior managers should scrutinise all use of force incidents, including paperwork completed by all the officers involved, and deal with emerging issues promptly. (1.51)	SIC, Dep. Gov. C&R co-ordinator	Minuted monthly Use of Force meetings are being attended by SIC manager and the Deputy Governor, more use of the local C&R co-ordinator at these meeting should be considered.  Recent scrutiny of CCTV of C&R incidents has resulted in some staff being charged under PCOC and referred to the PSNI	N/A	Green	Minutes held in <b>TRIM folder 4927/14</b>
5.14	All prison officers should have up-to-date training in control and restraint. (1.52, repeated recommendation 1.63)	CDO, Dep. Gov. C&R co-ordinator	Staffing pressures have resulted in minimal training; however, there is now an agreement that HBW staff will attend Maghaberry for training as there is currently only one C&R Instructor available in HBW.	28/06/2017	Red	There has been a 70% increase in the number of staff trained in C&R and C&R Advanced between May 2016 and December 2016 (up from 50 to 85 - see Safer Custody Figures supplied by Training each month in <b>TRIM folder 11375\13</b> )



ASH HOUSE 2016 INSPECTION ACTION PLAN - Residential Units						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.15	The arrangements for monitoring and managing the interactions between the female and young male populations at the Hydebank Wood campus needed ongoing scrutiny and periodic formal review. (2.9)	Res. Gov SIC	This is a standing item on the agenda of the monthly Security meetings.	N/A	Green	Minutes of monthly Security Meetings (TRIM 4927\14)

ASH HOUSE 2016 INSPECTION ACTION PLAN - Equality & Diversity						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.16	The strategic management of equality and diversity should have a multidisciplinary approach and more involvement from and a greater focus on women. Monitoring data should be clearly explained and publicised and external practitioners should be consulted in line with the NIPS equality and diversity improvement plan. (2.22)	E&D Co-ordinator	<p>The E&amp;D co-ordinator has approached the Equality Commission and the Rainbow Project to attend the monthly E&amp;D Meeting.</p> <p>Resources of external agencies are stretched and it is not possible to make their attendance mandatory with the result that attendance by them, for the most part, has been disappointing; however, they remain on the distribution list of those invited each month.</p> <p>A range of Business Objects reports are produced and distributed each month and work is on-going with other establishments and PRISM to amend these reports. (The reports were originally compiled following input from the Equality Commission). During attendance at the E&amp;D meetings, Aidan Fitzpatrick, questioned the correlation between complaints and regime in that those on Basic Regime may make more complaints, following which a Business Objects report was generated and made available (Business Objects report <b>EM: Regime at Date of Complaint</b>) - no negative correlation was observed.</p> <p>The Safety &amp; Support SO holds a meeting with student representatives prior to each monthly Strategic Meeting to ascertain any E&amp;D issues. These students</p>	28/06/2017	Amber	<p>Request to attend (TRIM 16/94109, 16/98392, 17/23387)</p> <p>Invitations and Minutes of E&amp;D Meetings (TRIM 2753\12 and TRIM 2572\12)</p> <p>Stats - Business Objects Reports (TRIM 2574\12)</p> <p>Minutes (TRIM 2572\12)</p> <p>Minutes of meetings with Student Reps (TRIM 2573\12)</p>
5.17	The mother and baby unit should provide an appropriate environment for mothers and babies and be staffed by appropriately trained officers. A current mother and baby policy agreed with all key stakeholders should be established to reflect the specific arrangements at Ash House, including childcare arrangements. (2.30)	Dep. Gov. Res. Gov. PSHQ Social Services Child protection	<p>There is currently a working group consisting of the deputy and female residential governors in conjunction with PSHQ and social services / child protection to produce a working mother &amp; baby policy and strategy. There is currently an assessment of the extended visiting facility being adapted as a Mother &amp; Baby unit.</p>	28/04/2017	Red	

ASH HOUSE 2016 INSPECTION ACTION PLAN - Complaints						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.18	Women's lack of confidence in the complaints process needs to be understood and the process should be implemented consistently; replies should be respectful and address the issue raised and a full investigation of complaints about staff should be undertaken. (2.39)	Dep. Gov. Res. Gov.	<p>Weekly key performance indicators (KPI) in relation to E&amp;D and Section 75 issues are monitored and recorded.</p> <p>Section 75 complaints are presented and analysed at the monthly E&amp;D Meetings.</p> <p>The Safety &amp; Support SO holds a meeting with student representatives prior to each monthly Strategic Meeting to ascertain any E&amp;D issues. These students are then invited to the E&amp;D Meeting.</p> <p>Managers challenge inadequate responses to complaints</p>	N/A	Green	<p>Currently the dep. gov. conducts a monthly 20% quality assurance check on complaints (<b>TRIM 17/124</b>), this has resulted recently in a number of staff disciplinary investigations by PSHQ. Residential governors have the responsibility to ensure complaints are responded to in a timely, fair and appropriate manner</p> <p>SMT Minutes (<b>TRIM 481\17</b>)</p> <p>E&amp;D Minutes (<b>TRIM 2572\12</b>)</p> <p>Minutes of meetings with Student Reps (<b>TRIM 2573\12</b>)</p> <p>Challenges to staff (<b>TRIM 8778\15</b>)</p>

**ASH HOUSE 2016 INSPECTION ACTION PLAN - Legal Rights**

Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.19	Managers should investigate whether systems are robust enough to ensure legal and other privileged mail is not being opened without the prisoner being present. (2.42)	Res. Gov. Ops Gov.	As per IOCCO best practice recommendations	N/A	Green	All incoming mail is subject to 5% censoring and all privileged correspondence (SO 5.3.5) is recorded. Any privileged mail opened in error is recorded and counter-signed by the area senior officer.

ASH HOUSE 2016 INSPECTION ACTION PLAN - Health Services						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.20	Health service delivery should be informed by an up-to date health needs assessment. (2.51)					
5.21	Details of investigations into adverse incidents and lessons learned should be published promptly and the Trust monthly performance report reviewed to improve data collection. (2.52)					
5.22	There should be sufficient permanent well-trained and motivated health staff to provide consistently all required health services. (2.53)					
5.23	There should be current regularly reviewed information-sharing policies and procedures in place to support effective collaborative working. (2.54)					Update requested on all healthcare recommendations from Tracey Heasley and Karen Allen on 08/05/2017 ( <b>TRIM 17/75360</b> ) Advice is that this information will be provided at corporate level
5.24	All clinical areas should fully comply with relevant infection prevention and control standards. (2.55)					
5.25	Emergency resuscitation equipment should be in good order and an effective monitoring system should be in place. (2.56)					
5.26	All relevant risk information from courts and the police for new arrivals should be passed on to health staff before they complete an initial reception health screening interview. (2.62)		All PACE 15 and PACE 16 documentation is given to committal nurses. A record of what is received and given is maintained on PRISM as well as being recorded on a Healthcare Cover Sheet, which accompanies the committal to the committal landing and to the committal nurse	N/A	Green	Copies of Committal Cover Sheets from Committal Files. PRISM First Night Questionnaire (See <b>Notice to Staff 26/16 Committal Documentation</b> )
5.27	Women should have access to external hospital appointments within community equivalent waiting times. (2.63)					
5.28	Compliance checks should be completed on in-possession medicines in accordance with Hydebank Wood's policy. (2.68)					
5.29	Discipline staff should routinely supervise medication administration to maintain patient confidentiality and reduce the potential for bullying and diversion. (2.69)					
5.30	The practice of routinely providing some medication that should be taken under supervision as take away doses should end and appropriate alternative measures put in place to ensure women receive their medication as prescribed. (2.70)					
5.31	A list of critical medicines where timeliness of administration is crucial should be devised. (2.71)					
5.32	Work to ensure compliance with current guidance on the decontamination of reusable dental and medical instruments should be completed. (2.73)					
5.33	Mental health assessment at committal should be reviewed to ensure they are of sufficient depth. (2.79)					

ASH HOUSE 2016 INSPECTION ACTION PLAN - Health Services						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.34	The mental health service should ensure all urgent referrals are seen promptly and that it meets the needs of all women including those with learning disabilities, autism spectrum, PTSD and personality disorders. (2.80)					
5.35	Performance management should take place for some mental health nurses and preparation for multidisciplinary team meetings should be improved. (2.81)					

## ASH HOUSE 2016 INSPECTION ACTION PLAN - Time out of cell

Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.36	All women should have the opportunity for a daily period of association and exercise. (3.3)	Res. Gov		N/A	Green	Exercise offered and entered in the landing occurrence journal and countersigned by the residential governor / senior officer and the duty manager.

ASH HOUSE 2016 INSPECTION ACTION PLAN - L&S and Work Activities						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.37	The learning and skills accommodation should provide a good learning environment that supports a wider range of provision matched to the needs of the women, and offer better progression opportunities. (3.12)	Head of L&S	HBW have produced a business case to have the L&S accommodation improved to.	28/05/2017	Red	



ASH HOUSE 2016 INSPECTION ACTION PLAN - PE & Healthy Living						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.38	Women's access to PE needs improvement and a broader range of activities, specific to their needs, should be offered. (3.28)	Gym SO	<p>Following the introduction of open gym sessions, access for women was still overly restricted. There were no timetabled gym sessions for women during core times from Monday to Friday.</p> <p>Consider publishing the range of activities available to women through the PE department.</p> <p>Update requested 08/05/2017 (TRIM 17/75372)</p> <p>Response (TRIM 17/75931) "Not long after the inspection report the open gym sessions were brought to an end, this was due to the perception that the male population was spending too much time in the gym. When this happened I took the opportunity to introduce sessions for female prisoners during the core day, unfortunately they did not attend these sessions. In response to this I put out a questionnaire to Ash House querying if people wanted to attend the gym and if so what activities they wished to see in addition to that which is already on offer. From 56 questionnaires that were put out I got 8 back, asking for activities that simply could not be provided. As you can see from the evidence previously provided there is a comprehensive programme of activities already on</p>	28/06/2017	Amber	Range of activities available to female inmates are: outdoor pursuits, running club, weights, volley ball, badminton, IFA soccer course, yoga, Frisbee, rounders, sponsored walks, spinning, cycling club also the PE staff offer 1 to1 sessions for vulnerable inmates and sessions for the physically challenged.

**ASH HOUSE 2016 INSPECTION ACTION PLAN - Strategic Mgmt of Resettlement**

Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.39	Managers should work with women to establish the reasons for their negative perceptions of the impact of resettlement work on their prospects of reoffending on release and develop a strategy for improvement. (4.6)	SDU	SDU and residential staff work with women to assist in their progression to Ash 2. Ash 5 and if eligible to Murray House and outside work placements in the community. Eligible women can also be placed in outside work with voluntary agencies.	N/A	Green	The general demographics of the female population would suggest that too many short / longer/ lifer sentences and too few medium sentences excludes some women from taking advantage of these initiatives. Cross reference with 4.6 (males). Staff have also completed Motivational Interviewing.

ASH HOUSE 2016 INSPECTION ACTION PLAN - Offender Management & Planning						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.40	PDPs should include the learning and skills targets women agree, so that their achievements at work and in education can be used to assess their ongoing risks. (4.10)	SDU Gov.	Female students PDP reviews held by SDU at a maximum of 6 months.	28/06/2017	Amber	L&S conduct an initial education needs analysis within a students first 10 days, results entered on Prism. This information is drawn upon to meet individual educational / vocational needs; this PDP process is reviewed by SDU and education update and maintain these records of achievement on Prism
5.41	Intelligence on women presenting a high risk of serious harm or on potential PPANI cases should be disseminated to sentence coordinators. (4.15)	SDU Gov.	Requirement for SIC to be supplied with current list of PANNI and sROSH cases in HBW; these are reviewed at the monthly security meeting, which a member of SDU staff does attend.	28/06/2017	Amber	SDU management attend monthly security meetings which are minuted and records retained TRIM. See minutes of monthly Security Meetings ( <b>TRIM 4927\14</b> ).

ASH HOUSE 2016 INSPECTION ACTION PLAN - Reintegration Planning						
Ref	RECOMMENDATION	OWNER /LEAD	ACTION	TARGET DATE	RAG STATUS	EVIDENCE
5.42	The needs assessment should be completed as soon as possible after arrival to ensure that women have the maximum benefit from resettlement services. (4.22)	SDU Gov.	Business reports set up to record average number of days.	N/A	Green	The agreed PDU Standard date for this work to be completed, is within 30 working days. Currently this work is being completed within 11 days, as evidenced by a Business Objects report.
5.43	The wide range of family support work delivered by a variety of staff and agencies should be properly coordinated to maximise its effectiveness. (4.30)	SDU Gov.	Family Strategy to be reviewed by PSHQ	N/A	Green	Family support work is co-ordinated by SDU staff through PDP's and multi-agency case conferencing. PDP's are completed within 40 working days of committal.
5.44	Staff should receive training so they can encourage women to disclose experiences of domestic violence, rape, abuse or prostitution and refer them to specialist services. (4.33)	SDU Gov.		N/A	Green	New and existing staff are currently receiving training by NEXUS, to date <b>XX</b> have been trained. SDU staff conduct any referrals. Sign posting leaflets are available on the landings.
5.45	The PDM process should be used to identify and inform the future accommodation needs of the population. (4.37)	SDU Gov.	A business objects report is generated	N/A	Green	A business objects report "Headline Stats HBW" is generated to cover all headline stats from the needs profile and these are reviewed both locally and by PSHQ.
5.46	All women being released should be offered pre-release drug and alcohol harm reduction advice. (4.42)	SDU Gov.		N/A	Green	This service is currently available through AD:EPT for all students who have an identified need of the service, this can be evidenced through the referrals screen on PRISM. Information leaflets are offered to inmates on discharge.
5.47	NIPS should review the provision of specialist advice on finance, benefits and debt, using the PDM process to ensure it meets the women's needs. (4.48)	SDU Gov.		N/A	Green	There is currently provision for a member of NIACRO to provide this specialist advice, this is currently on a monthly basis. This can be evidenced through referrals on PRISM.
5.48	The range of offending behaviour programmes available to women should be extended to meet their needs. (4.50)	SDU Gov.	SDU are currently identifying Offending Behaviour Programmes specific to females.	28/06/2017	Amber	Currently only Enhanced Thinking Skills is delivered in group sessions, however, individual work can be delivered by the psychology department on an ongoing basis.