

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP FEATHERSTONE

TIMETABLE	DATE	STATUS OF THIS RETURN
Full Unannounced inspection	24 October 2016 – 3 November 2016	
Report published	28 February 2017	
Action Plan Submitted	5 June 2017	Attached

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1. Rec. no	2 Recommendation	3. Accepted/ Rejected/ Partially Accepted / Accepted Subject to Resources	4. Response Action Taken/Planned	5. Function Responsible/ Policy Lead	6. Target Date
	Main recommendation To HMPPS				
5.1	The showers should be fully refurbished. Cells and communal areas should be maintained and decorated to an acceptable and decent standard. (S52)	Accepted Subject to Resources	<p>Cells in the care and separation unit have been taken out of use and renovated. With the exception of cell 4 (which is awaiting a steel shroud to protect the pipework), the other cells are now in use. The pipe shrouds for cell number 4 will be supplied and the contractor has been instructed to fit them once these arrive.</p> <p>Renovation works to house block 2 B spur to be completed by the end of June 2017, which will cover the following:</p> <ul style="list-style-type: none"> • Cell and corridor flooring. • Repair and replace damaged sanitary ware. • Fixing the damage to electrical outlets. 	Service Delivery Manager	<p>30 June 2017</p> <p>Ongoing (fixture of the pipe shrouds)</p>

			<p>The service delivery manager (SDM) has instructed the contractor to promptly deal with the ventilation problems in the shower rooms as and when they arise, through the reactive repair process. SDM has also instructed the contractor to carry out ventilation tests.</p> <p>The painting programme is being revised to meet the Governor's requirements of addressing matters in order of priority. Discussions between the Governor, SDM and contractor site manager will take place.</p> <p>The major maintenance business case for the refurbishment of the showers was submitted in time for the 2017-18 allocation period. An estates investment proposal bid was submitted in March 2017 to carry out refurbishment of residential units 1 to 5 including showers and cell doors.</p> <p>The issue surrounding cells being out of use is being regularly monitored. As a result of the contractor using additional labour hours to carry out the work, numbers have greatly reduced. HMP Featherstone and SDM are monitoring the situation on a weekly basis. Regional and national bids have been submitted to address conditions. The SDM is monitoring the timeliness of reactive repairs.</p>		
	Main recommendations To the governor				
5.2	All violent incidents should be analysed, to understand the causes and identify patterns and trends. Coordinated action should be taken to make the prison safer. (S49)	Accepted	<p>All violent incidents are analysed by a multi-disciplinary team, in addition to other safety meetings held.</p> <p>The following two main meetings will also be conducted:</p> <ul style="list-style-type: none"> • A weekly violence reduction meeting chaired by a senior manager; either the head of safety or security. The previous seven days' incidents are analysed to establish causes and identify patterns and trends, and co-ordinate follow-up actions. • A monthly safer custody meeting to analyse monthly and yearly data, including the violence diagnostic tool to identify the causes, wider patterns and trends and hot spots for violence in terms of time and location. Follow-up actions are co-ordinated by the head of safer custody and recorded on a local action plan. 	Head of Safer Custody and Equalities	Completed and ongoing

			The senior management team (SMT) discusses outcomes during the monthly SMT meeting.		
5.3	Prisoners who are described as self-isolating and are effectively in unregulated segregation should have adequate safeguards and managerial oversight. These prisoners and also those officially segregated should have an adequate regime which safeguards their mental wellbeing. The underlying causes behind problems or vulnerable behaviour should be addressed effectively and appropriately, and options for prisoners' safe reintegration back into the main prison or transfer should be identified. (S50)	Accepted	<p>A local policy to manage self-isolating prisoners was developed and implemented in May 2017.</p> <p>The policy sets out that:</p> <ul style="list-style-type: none"> • Investigating the issues causing a prisoner to self-isolate. • The level of support offered and the regime including arrangements for exercise, showers and phone calls. • Reintegration and transfer planning options. • Governance arrangements that include management of visits, case reviews and mental health assessments. • The monitoring of the numbers of self-isolators – these are monitored daily as part of daily operational meeting and as part of the safer prisons functional head report to the SMT. • Self-isolators are randomly visited on a daily basis by Duty Governors and reported at the daily operational morning meeting. <p>Procedures are in place for prisoners to have access to showers, open air and telephone calls. The prison has seen a reduction in the number of self-isolators and the number of complaints submitted by them.</p> <p>The regional violence lead will be working with the head of safer custody to assure the work being done to manage self-isolators and to support the prison to implement a Promoting Risk Intervention by Situational Management report.</p>	Head of Safer Custody Regional Safer Custody Team	30 September 2017
5.4	The full extent of drug availability should be monitored, and a strategy and action plan put in place to reduce drug supply. (S51)	Accepted	A whole prison approach will be adopted to reduce drug availability. At the monthly drug strategy meeting (chaired by the head of reducing reoffending) actions will be coordinated and progress monitored in respect of the following:	Head of Security	31 May 2017

			<ul style="list-style-type: none"> • A specific supply reduction strategy will be developed that will seek to identify sources, ingress routes and actions required to prevent/disrupt the supply of drugs. • To include identifying training for staff, interventions, education and support for prisoners, family engagement and improving physical security. • Data will be collected relating to psychoactive substances and drug usage/incidents. This data will be analysed at the drug strategy meeting. • Improving partnership working and collaboration between security, healthcare, residential, education providers and Community Rehabilitation Companies (CRCs). • Improving prisoner engagement in relation to drug use. User Voice is an outside agency which has been commissioned to run a prison council within HMP Featherstone. Part of their engagement will involve the discussion of drugs supply within the prison and reducing drug supply will form part of their agenda, alongside other prominent issues raised by both management and prisoners. 		
5.5	<p>Learning and skills and work activities should be given a far higher priority. The number of activities interrupting the working day should be reduced. Staff at all levels should cooperate to promote participation and attendance at learning and skills and work activities, and prisoners who do not attend should be challenged. (S53)</p>	Accepted	<p>A regime custodial manager is now in place and their role will include monitoring interruptions to activities.</p> <p>To reduce interruptions to prisoners' learning and skills and work activities, as well as to encourage attendance, HMP Featherstone will take the following actions:</p> <ul style="list-style-type: none"> • Review appointment time and locations and prioritise essential appointments. • Encourage the activity board to have more involvement with internal and external stakeholders in order to manage appointments. • All staff to continue to promote participation and use behaviour management strategies available to 	Head of Reducing Re-offending	31 July 2017

			manage prisoners who do not attend, i.e. through using Incentives and Earned Privileges and adjudication procedures.		
5.6	Prisoners should receive regular structured and meaningful contact from their Offender Supervisors. There should be sufficient opportunities for them to address their offending behaviour, reduce their risk and progress. (S54)	Accepted	All prisoners will be provided with regular and meaningful contact with their offender supervisors, giving them the opportunity to address their offending behaviour. This contact will be recorded on case notes and will be quality assured by the offender management unit (OMU) manager.	Head of Offender Management	31 July 2017
	Recommendations To HMPPS				
	Equality and diversity				
5.7	Establishments should be provided with timely and relevant equality monitoring data. (2.22)	Accepted	<p>The Equalities Monitoring Tool (EMT) is currently produced at an establishment level each quarter. It allows for comparisons both between establishments and with national level data. The EMT is produced in as timely a manner as the data allows. Individual case records require extensive cleaning and manipulation to produce meaningful and accurate outputs. Improvements to data accuracy and completeness from establishments will help to improve the timeliness of centrally produced toolkits.</p> <p>The Performance and Analysis Group is currently reviewing the equalities data and tools used by HM Prisons and Probation Service (HMPPS) to monitor outcomes for prisoners with specific protected characteristics. This will include a review of data inputs to ensure that outputs remain fit for purpose, while providing meaningful indicators for further assessment by establishments and equalities leads. This wider programme of work is expected to be delivered by December 2018.</p>	<p>HM Prisons and Probation Service (HMPPS), Head of Performance and Analysis Group /</p> <p>HMPPS, Head of Equalities</p>	31 December 2018
	Offender management and planning				
5.8	Initial OASys assessments and sentence plans should be completed at the local prison before transfer. (4.13)	Accepted	HMPPS continues to review the offender assessment systems (OASys) backlog and the prioritisation criteria remain in force, which ensures the highest priority cases are completed in full, with a reduced assessment for those lower risk cases.	HMPPS	Ongoing

			Further, public sector prisons (PSP) are currently pursuing a revised operating model, using the principles of the recent offender management review as its firm basis. This will ensure there is increased time for building effective relationships with prisoners, and also a more robust approach to prioritising assessments in the future, including ensuring initial OASys are routinely completed. Staff- prisoner relationships are at the heart of the revised offender management model. All prisoners will have dedicated time for regular meetings which will focus on supporting prisoners settle into the establishment, motivating progression throughout their sentence and preparing for resettlement back in to the community. In addition, high risk prisoners will receive increased one-to-one sessions with prison based national probation service officers once the model is implemented across PSP.		
5.9	Prisoner transfers should not be delayed owing to a lack of escort arrangements. (4.25)	Accepted	The Prisoner Escort Custody Service (PECS), along with HMPPS Population Management Unit (PMU), has agreed levels of court escort resources to meet inter-prison service requirements. This capacity currently meets HMPPS demands. All inter-prison transfer (IPT) bookings are made between PMU and the establishment and, as such, volume requirements are not made by the contractor. The escort contractor responds to IPT requirements through PMU. PECS constantly monitor and challenge all aspects of the escort contractors' performance, meeting them regularly to review operational issues. PECS has received no formal complaints in the last 12 months from HMP Featherstone regarding this area of service.	Prisoner Escort Custody Services / HMPPS Population Management Unit	Completed
	Recommendations To the governor				
	Early days in custody				
5.10	First night risk interviews should take account of all prisoner issues and ensure that these are adequately dealt with and relevant departments notified. (1.11,	Accepted	HMP Featherstone will review its first night interview process to ensure specific safety risks are effectively captured by staff. This will be implemented by introducing training and staff development. Examples of best practice will be identified to ensure lessons are effectively learnt and translated into local practice and delivery.	Head of Residence	30 June 2017

	repeated recommendation 1.14)		On reception, individual interviews are conducted between both healthcare and operational staff, who are trained to identify trigger points and open assessment, care in custody and teamwork (ACCT) documents. A tracking system will be put in place to ensure that the right information is passed to relevant departments highlighting identified risks.		
5.11	New arrivals should be able to buy a reception pack. (1.12)	Partially Accepted	All new prisoners will be able to purchase a reception pack; dependent on when they last ordered / had their canteen. They will be able to purchase a reception pack in reception at HMP Featherstone regardless of time of arrival. The reception pack will include essential items and this will be discussed through the prison council.	Head of Residence	31 July 2017
	Bullying and violence reduction				
5.12	Investigations into and formal monitoring of perpetrators of violent and antisocial incidents should be improved and should include interventions that are evaluated for effectiveness. (1.17, repeated recommendation, 1.26)	Accepted	<p>In addition to the response provided for recommendation 5.2, HMP Featherstone will carry out the following actions:</p> <p>All incidents of anti-social behaviour will be investigated, monitored and shared with staff and external agencies.</p> <p>Interventions for victims and perpetrators will be explored and put in place subject to available resources.</p> <p>The current formal process (including all documentation/monitoring books) for supporting victims and monitoring perpetrators will be reviewed to improve outcomes for prisoners.</p> <p>A new prison officer specialist post in violence reduction (VR) has been created. Two members of staff will be recruited to carry out this role and their key duties will include:</p> <p>Coordinating the implementation and day-to-day delivery of VR policies and monitor effectiveness.</p> <p>Checking that all incidents of bullying and assaults have been reported, investigated and dealt with effectively, and that all perpetrators and vulnerable prisoners are monitored according to safer custody and VR policies.</p> <p>The body worn video camera(s) location has been moved to the gate in order to increase uptake from all staff.</p>	Head of Safer Custody and Equalities	31 July 2017

			When identified perpetrator documents are opened, the perpetrators are placed on a report and are seen by violence reduction representatives. An immediate review is completed and consideration of suitability for categorisation C takes place. Perpetrators are also discussed at security meetings alongside P-MASH meetings (weekly population management meetings; to assess and reduce risk) and then any disruption moves taken forward.		
5.13	Support for victims of violent and antisocial behaviour, including those in debt, should be improved. (1.18, repeated recommendation, 1.28)	Accepted	<p>Staff awareness training will be raised around supporting victims.</p> <p>Quality assurance (QA) will be carried out by the VR co-ordinator for prisoners on support documents both for victims and perpetrators.</p> <p>A draft safeguarding policy is due to be implemented and HMP Featherstone is looking to explore delivering training to all staff through the safeguarding board.</p> <p>The regional violence lead will work with the head of safer custody to establish links with the local authority to enable adult safeguarding to be effectively referred and to access training for staff.</p>	<p>Head of Safer Custody and Equalities</p> <p>Regional Safer Custody Team</p>	30 September 2017
	Self-harm and suicide				
5.14	Information about self-harm incidents and trends should be analysed and shared with relevant departments, to identify appropriate strategic action. (1.24)	Accepted	<p>The monthly safer custody meetings now focus more on the analysis of self-harm incidents and trends. The minutes of the meetings will be circulated more widely to all departments, including partner agencies within the prison.</p> <p>Action plans in response to recommendations from Prisons and Probation Ombudsman investigations are also part of the discussions at the safer custody meeting and this is part of the agenda and terms of reference of the meeting.</p> <p>Following each meeting any learning points or best practice are communicated to staff via publication of a notice to staff.</p> <p>Where appropriate, action plans are put in place and monitored as part of the safer custody meetings.</p>	Head of Safer Custody and Equalities	Completed and ongoing

			Self-harm incidents and trends now form part of periodic full staff briefings. Information on self-harm incidents are discussed at the monthly full staff meeting conducted by the Governor.		
5.15	Entries in assessment, care in custody and teamwork (ACCT) documents should clearly demonstrate meaningful interaction with prisoners and decisions made at MASH meetings should inform and be informed by the ACCT document. (1.25)	Accepted	<p>The quality of entries in ACCT documents will be improved. These improvements and the decisions made at the multi-agency safer health (MASH) meeting will be achieved and better informed through adopting the following actions:</p> <ul style="list-style-type: none"> • Guidance on how to make quality entries in ACCT documents will be published to staff quarterly. • The weekly MASH meeting will refer to the most recent notes in an individual's ACCT. Entries will be made in all ACCT documents and discussed following each meeting. • Nominated delegates at the MASH meeting will be directed to complete such entries. • A quality assurance process will be in place and carried out by managers. • VR team will complete a quarterly report and share with staff. <p>Staffs' understanding will be assessed through the feedback from the quality assurance process and training feedback forms. Quality assurance feedback forms will be published monthly via a staff notice in order to develop better practice.</p>	Head of Safer Custody and Equalities	31 July 2017
5.16	All suicide attempts with potentially the most serious consequences should be investigated quickly and action taken to prevent similar incidents. (1.26, repeated recommendation, 1.41)	Accepted	<p>All incidents of serious self-harm are reported on the daily duty manager's report. Safer custody managers ensure that all incidents are logged on the serious incidents of self-harm database.</p> <p>All serious acts of self-harm are quickly investigated. The investigation is co-ordinated by a manager, quality assured and required action taken forward by the head of safer custody. Any learning points are published to staff and discussed at the safer custody meeting.</p>	Head of Safer Custody and Equalities	Completed and ongoing

5.17	Prisoners should be able to speak to a Listener or to the Samaritans when they wish. (1.27)	Accepted	<p>Additional Samaritan phone lines have been purchased and are available for prisoners to use. With the resources in place, prisoners are able to use the phones or have Listener access. The dedicated number for the Samaritans has been added to prisoners' pin phones.</p> <p>The number of trained Listeners has doubled to 18 following HMIP's inspection.</p> <p>The Samaritans co-ordinator attends the monthly safer custody meetings and feeds back on any concerns about access and discusses areas of good practice.</p>	Head of Safer Custody and Equalities	Completed and ongoing
	Safeguarding				
5.18	The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.29, repeated recommendation, 1.47)	Accepted	<p>The Governor has made contact with both the director of adult social services and the local safeguarding adults board. A single point of contact within the SMT has been appointed. A decision is still to be made by the director as to which board HMP Featherstone will attend due to geographical location.</p> <p>An adult safeguarding policy will be put in place and shared with staff.</p>	Head of Safer Custody and Equalities	31 July 2017
	Security				
5.19	Security meetings should have clear monthly security objectives, communicated to staff, relating to the threats and actions required to mitigate the risk. (1.36)	Accepted	<p>A bulletin was published to staff following the monthly security committee meeting which contained information on the following:</p> <ul style="list-style-type: none"> • Security objectives. • Key threats and required actions. • Data / trends, intelligence gaps and information required on developing Nominals and Prominent Nominals (two groups of prisoners demonstrating increasing security risks). <p>Emerging risks are captured and objectives set which are communicated to all staff via the bulletin.</p>	Head of Security	Completed and ongoing
5.20	All serious incidents should be reported and recorded accurately. (1.37)	Accepted	<p>Processes are in place at HMP Featherstone to ensure all serious incidents are reported and recorded accurately. The Duty Governor is responsible for ensuring that incident reports are completed by custodial managers and recorded on the operational report that is discussed at the morning meetings. The safer custody team carry out QA on the reporting of all</p>	Head of Security	Completed and ongoing

			serious incidents.		
5.21	Prisoners should only be strip-searched on the basis of intelligence or specific suspicion. (1.38, repeated recommendation, 1.53)	Rejected	<p>National Security Framework Function 3.1- PSI 67/2011 Searching of the Person, 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 release on temporary licence (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.</p> <p>Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. HMPPS 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>	Head of Security	
5.22	All suspicion drug testing should be undertaken in time. (1.39, repeated recommendation, 1.54)	Accepted	To improve response times HMP Featherstone has increased the number of trained testers. The number of suspicion tests are recorded on the daily manager's log and reported daily at the management meeting.	Head of Security	Completed
	Discipline				
5.23	Data on adjudications should be routinely analysed to identify emerging patterns, with trends investigated and appropriate action taken to address them. (1.46)	Accepted	The terms of reference for both the adjudications standardisation meetings will be revised to include a review of data and trends. Actions, where appropriate, will be put in place and outcomes monitored as part of the meeting.	Head of Residence	31 July 2017
5.24	Adjudications should be completed within the proper timescales. (1.47)	Accepted	<p>HMP Featherstone will put processes in place to manage remanded adjudications and to ensure they are completed in time. However, factors such as prisoner transfers, police investigations and having legal access may result in delays to the process. The number of remanded adjudications will be discussed at the daily operational meeting.</p> <p>The Prisoner Discipline policy is being reviewed, including the processes and logistics supporting adjudications and ways to make sure that adjudications in process continue where prisoners are transferred during a case or when the case is referred back from the police. In the meantime, a note has been issued to prisons providing clearer guidance on</p>	<p>Head of Residence</p> <p>Ministry of Justice Offender, Reform and Commissioning Group</p>	<p>30 September 2017</p> <p>Ongoing (for adjudication review)</p>

			<p>adjournments to ensure that cases are not unnecessarily lost or dismissed and about the time given to obtain legal advice. The time given to obtain legal advice must be dependent on the individual facts of the case, rather than an automatic two week adjournment each time.</p>		
5.25	<p>Oversight of use of force should be improved to ensure that documentation is completed, force is used appropriately and as a last resort, and that information about trends and patterns is used strategically to help to reduce the use of force. (1.52)</p>	Accepted	<p>A duty manager is assigned to each incident as a single point of contact to ensure documentation is completed in a timely fashion.</p> <p>The use of force (UoF) meeting is prioritised and held on a monthly basis. The meeting is chaired by a senior manager who reviews every individual incident, quality assures UoF paperwork and analyses data and trends.</p> <p>F213 forms (injury to prisoner) are collated and assurance checks are conducted at the UoF meeting. They are completed promptly by both operational staff and healthcare. Learning points are shared with control and restraint (C&R) instructors and this is included within C&R training</p> <p>Any learning points arising from UoF, areas of concern or best practice, are published via a notice to staff. Staff are aware that force should be used appropriately and as a last resort.</p>	Head of Safer Custody and Equalities	Completed
5.26	<p>Living conditions in the segregation unit should be improved. (1.59)</p>	Accepted	<p>The location of the segregation unit changed as a result of refurbishment works on the unit. Future damage and repairs will be appropriately reported and prisoners will be held to account for their actions.</p> <p>The education provider provides in cell opportunities for prisoners to engage in education. Prisoners who engage will receive a wage. All prisoners who request a portable radio have one made available to them. Distraction packs are also made available upon request, which include colouring and puzzles. Access to other regime activities such as chaplaincy, the library, drug support workers and offender supervisors will be offered to prisoners on a risk assessed basis and in line with PSI 26/2009- Segregation. Improvements continue to be made.</p>	Head of Residence	Completed and ongoing
	Substance misuse				

5.27	The drug and alcohol health needs assessment should include clear recommendations to develop future services. (1.65, repeated recommendation, 1.85)	Accepted	National Health Service England will start a procurement process in December 2017 for a substance misuse health needs assessment (HNA) to be conducted in 2018. The outcome of the HNA will be used to develop future services	Health and Justice Commissioning Manager	2017 - 2018
5.28	The psychosocial team should be sufficiently well staffed to ensure the consistent delivery of group work and one-to-one interventions. (1.66)	Accepted	Recruitment is ongoing, with only one vacancy now outstanding, which is being back filled with agency staff.	Head of Healthcare	Ongoing
Residential units					
5.29	Prisoners should be able to access basic essentials such as adequate clean clothing, bedding, kettles, cell furniture and televisions. (2.9)	Accepted	Prisoners on induction will have access to basic essential items and continuous stocks will be readily available if needed.	Head of Residence	30 September 2017
5.30	Cell bells should be answered within five minutes. (2.10)	Partially Accepted	In accordance with PSI 75/2011 Residential Services - residential staff must respond promptly to calls for assistance. HMP Featherstone staff will be reminded to answer cell bells as quickly as they can. During peak times, however, it may not be possible to answer cell bells as quickly. Appropriate action will be taken against those who abuse the call system.	Head of Residence	Completed and ongoing
5.31	The application system should be managed effectively and prisoners should be able to have their applications dealt with quickly and fairly. (2.11)	Accepted	A revised application process and form will be introduced. This approach will provide greater accountability and transparency to the application system process. Prisoner information orderlies will also assist with ensuring this system is fit for purpose. Feedback will be sought through the prisoner council and the Chair of the Independent Monitoring Board will be contacted to provide suitable assurance of the proposed application system.	Head of Residence	30 September 2017
Staff-prisoner relationships					
5.32	Prison officers should consistently challenge and report inappropriate conduct. (2.17)	Accepted	Expected standards of behaviour will be published to both staff and prisoners. Prisoners demonstrating inappropriate behaviour will be challenged through behaviour management strategies and IEP policy and adjudication processes will be used effectively to ensure standards of discipline are maintained.	Head of Residence	Review date of 31 July 2017 and Completion date of 30 September 2017

	Equality and diversity				
5.33	Monitoring data should be routinely interrogated, to determine if any minority groups are being disadvantaged, and remedial action taken where necessary. (2.23)	Accepted	<p>A different senior manager lead is responsible for each protected characteristic (PC) and all managers will routinely use available data to determine whether there is any disadvantage to any groups within their PC strand and they will be responsible for monitoring outcomes.</p> <p>PC leads will be required to hold quarterly forums.</p> <p>Local databases will be developed to allow for more contemporary analysis of the population.</p> <p>The bi-monthly equalities and diversity meeting will have a greater focus on determining whether any minority groups are being disadvantaged.</p> <p>The diversity and equality team, as part of the agenda, will review and monitor monthly data. An action plan will be drawn up and will be reported back on at subsequent meetings.</p>	Head of Safer Custody and Equalities	31 July 2017
5.34	The prison should have an equality policy which is specific to the population at Featherstone, including arrangements for the monitoring of equality against all protected characteristics and detailing the provision for prisoners from each minority group. (2.24, repeated recommendation 2.27)	Accepted	<p>HMP Featherstone's equality policy has been rewritten and an equality impact assessment conducted. The policy was written to ensure that it is specific to the population and includes arrangements for the monitoring of outcomes against all PCs and details the provision for prisoners from each minority group.</p> <p>Feedback from the assessments will be discussed during the equalities meeting.</p> <p>PC leads will be required to hold quarterly prisoner forums and provide reports for the equality meetings.</p>	Head of Safer Custody and Equalities	30 June 2017
5.35	Discrimination incident report forms should be freely available on all house blocks. (2.25)	Accepted	Discrimination incident reporting forms are readily available on all house blocks and regular monitoring is being carried out by a manager.	Head of Safer Custody and Equalities	Completed and ongoing
5.36	Managers should develop links with community organisations to provide support and advice for each protected characteristic. (2.26)	Accepted	The senior managers / PC lead will explore the opportunities to work with community organisations such as CRCs, and links through the chaplaincy and various charities to provide support and advice for protected characteristics.	Head of Safer Custody and Equalities	31 July 2017
5.37	There should be effective	Accepted	The policy on Equalities stipulates that senior managers / PC	Head of Safer	31 July 2017

	consultation arrangements for all minority groups. (2.34, repeated recommendation 2.28)		leads will structure consultation forums for all minority groups. Senior managers / PC leads will be expected to have a schedule in placing listing the forums. Feedback from the forums held at HMP Featherstone will be discussed at bi-monthly meetings.	Custody and Equalities	
5.38	Staff should use the professional telephone interpreting service to communicate with non-English speakers whenever confidentiality is required. (2.35)	Accepted	Awareness has been made to all staff about the availability of The Big Word translation / interpreting service. Staff have also been trained on how to access this service. A notice to staff providing guidance about the service will be published quarterly.	Head of Safer Custody and Equalities	Completed and ongoing
5.39	Independent immigration advice should be available within the prison. (2.36)	Accepted	HMP Featherstone will contact external partners and stakeholders to raise the feasibility to support prisoners who are subject to immigration notices. An electronic toolkit, Tracks, is available on a compact disc and distributed to all prisons for the use of foreign national offenders. Produced in partnership with Praxis (a non-governmental organisation established in 2004), Tracks provides comprehensive information on the immigration and deportation processes including how to appeal as well as resettlement advice. In addition, HMPPS will work with the Home Office and the Legal Aid Agency to discuss options for the provision of legal advice to detainees in prison.	Head of Safer Custody and Equalities HMPPS, Foreign National Offender Team	31 December 2017
5.40	Personal emergency evacuation plans should be up to date and clearly located in each house block office, and staff should be regularly reminded of their importance. (2.37)	Accepted	A new user friendly Personal Emergency Evacuation Plan (PEEP) has been developed. All house units have reviewed their PEEPS and these are up-to-date and kept in the wing office. PEEPS have also been introduced to working areas. QA checks are in place to ensure PEEPs are kept up-to-date. PEEPS are discussed at the bi-monthly equality and diversity meeting to ensure that they are relevant and whether any further individuals need to be considered for a PEEP. Staff will be briefed by managers in their function of the importance of PEEPs. An information sheet will be added to the PEEP folders explaining the importance of PEEPs.	Head of Safer Custody and Equalities	Completed and ongoing
	Faith and religious activity				

5.41	The chaplaincy should have a clear strategy for resettling prisoners in their faith communities, including stronger ties with community faith leaders and arrangements for support on release. (2.41)	Accepted	The chaplaincy team will establish links with the faith community to provide arrangements for support on release and tie in with the local reducing offending strategy.	Chaplaincy Lead	31 July 2017
	Complaints				
5.42	Complaints, particularly those against staff, should be fully investigated. (2.44)	Accepted	Where appropriate, complaints against staff are investigated by a senior manager. There is a QA process in place, completed by the Deputy Governor.	Deputy Governor	Completed and ongoing
	Legal rights				
5.43	Prisoners should be able to have a private legal visit. (2.47)	Accepted	HMP Featherstone will comply with national policy requirements to ensure that legal visits are undertaken within sight but out of earshot of staff. The visits room will be used for legal visits when no social visits are taking place. Attempt to build private booths would significantly limit the number of social visit places for prisoners' families, and will be costly.	Head of Security	Completed and ongoing
5.44	Prisoners should be given their legal correspondence without a delay. (2.48)	Accepted	HMP Featherstone will ensure that any delay in handing legal correspondence to prisoners is kept to a minimum and legal correspondence is not delayed due to lack of dog handlers. Other security checking methods will be adopted.	Head of Security	Completed and ongoing
	Health services				
5.45	Health services staff should be in date with all mandatory training, receive regular recorded supervision and have a current performance appraisal. (2.58)	Accepted	Rolling mandatory training, supervision and appraisal process have been implemented for health service staff. Healthcare is fully compliant with mandatory staff training and appraisal compliance is currently above 85 %.	Head of Healthcare	Completed and ongoing
5.46	Prisoners should be able to access routine GP appointments within two weeks. (2.63)	Accepted	The current waiting time is six days. Monitoring of waiting lists is being conducted on a weekly basis and the introduction of robust clinical triage sessions will ensure that routine appointment waiting times do not exceed two weeks.	Head of Healthcare	Completed and ongoing
5.47	Clinical records should accurately reflect all the care given and prisoners with	Accepted	All patients with complex needs now have comprehensive care plans. An ongoing audit programme will ensure that all care is accurately recorded within the patient's clinical records.	Head of Healthcare	Completed and ongoing

	complex health needs should have comprehensive care plans. (2.64)				
5.48	Prisoners who require secondary health services should be seen within community equivalent waiting times. (2.65)	Accepted	<p>All planned hospital escorts are facilitated but may be subject to staff escort resources.</p> <p>An improvement to escort slots has been made. There is an increased communication between healthcare managers and the people hub to organise external escorts. There has also been an increase in clinics provision within the establishment such as x-rays, which has reduced the need for external escorts.</p> <p>There are currently three breaches to the 18 week recommended wait, two were due to hospitals rescheduling appointments and the third due to insufficient escorting staff being available to facilitate all required appointments.</p>	Governor	Completed and ongoing
5.49	Prison officers should consistently monitor and manage medication administration queues, to reduce the opportunities for bullying and diversion and maintain patient confidentiality. (2.71)	Partially Accepted	<p>HMP Featherstone's benchmark profile does not provide cover to manage medication queues. However, within staff resources the establishment will continue to try and provide cover as consistently as possible.</p> <p>Due to the location and structure of the medication hatch, it is impossible to maintain full confidentiality. However, nurses managing the medication hatch decide whether an appointment should be held in healthcare where confidentiality can be fully maintained.</p>	Governor	Completed and ongoing
5.50	Prisoners who do not attend for prescribed medication should be followed up systematically. (2.72)	Accepted	<p>A local operating follow-up procedure (LOP) has been developed and will be considered for approval at the next quality assurance and improvement meeting to be held on 6 June 2017. Once approved, the LOP will be implemented.</p> <p>The LOP will include the following:</p> <ul style="list-style-type: none"> • Ensuring patients that do not attend (DNA) for medication are DNA's on Systm One (healthcare database), so that we can report these and spot trends. • When a trend is apparent, a task via Systm One is 	Head of Healthcare	30 June 2017

			<p>sent to the relevant party to book in a review and ascertain why the patient had not attended, and the importance of remaining concordant with the specific medication.</p> <ul style="list-style-type: none"> Investigating root causes of any trends or serious incidents and ensure remedial work is instigated where possible to resolve issues. Reporting significant omissions and delays on Datix (the leading provider of software for patient safety) along with corresponding reasons. Since there are multitudes of reasons why a dose may be omitted there must be scrutiny of each and every case to weigh up the risk involved. Some omitted doses will pose little risk to the patient and may not involve any further action, but others will need prompt action and may be critical to the individual. 		
5.51	Prisoners should receive in-possession medication following a consistent recorded risk assessment that is regularly reviewed. (2.73)	Accepted	All new receptions undergo an initial in-possession risk assessment. It is then the responsibility of the prescriber, when prescribing new medication, to ensure that the risk assessment is complete and up-to-date.	Head of Healthcare	Completed and ongoing
5.52	There should be effective oversight of prescribing trends to ensure appropriate prescribing. (2.74)	Accepted	<p>The volume of prescriptions generated each month for medications that have the potential to be abused, and trends, are monitored. Any increase in the number of such prescriptions is investigated, to identify the reason for the prescription and the identity of the prescriber. In the event that trends are identified, this would be addressed with the prescriber through clinical supervision.</p> <p>There is a Care UK preferred prescribing formulary embedded into System One and any prescriptions made outside of this formulary must be accompanied by a disclaimer from the prescriber, which explains the rationale for that script. This is monitored as above.</p>	Head of Healthcare	Completed and ongoing
5.53	The integrated mental health and substance misuse team	Accepted	Recruitment of one vacancy is ongoing, which is being back filled with agency staff to ensure there are sufficient resources	Head of Healthcare	Completed and ongoing

	should be sufficiently staffed to meet patients' mental health needs. All staff should have access to regular structured managerial supervision and undertake mandatory training to support their role. (2.83)		<p>to meet the needs of the client group.</p> <p>Structured managerial supervision is now in place and is conducted monthly by the team manager and clinical lead.</p> <p>Supervision records are now being kept on site. The team manager reviews files weekly, ensuring that all staff have a record of supervision and highlights any gaps / issues to the clinical lead.</p> <p>All staff, including mental health and recovery staff are now given allocated time to complete training and to access supervision. Care plan templates have been developed and published on System One and staff training on usage has been provided.</p> <p>All assessments and interventions are now accurately recorded on System One, in a timely manner.</p>		
5.54	All discipline officers should receive mental health awareness training, to enable them to recognise and support prisoners with mental health problems. (2.84)	Accepted	<p>A programme of mental health awareness training will be developed and taken to the quality assurance and improvement meeting for approval. Once approved, the training will be rolled out to discipline officers.</p> <p>Knowledge and Understanding Framework training relating to personality disorders, is currently being delivered for all staff within the establishment, both directly and non-directly employed.</p>	Head of Healthcare	31 July 2017
5.55	Patients requiring a transfer under the Mental Health Act should be assessed promptly and transferred within the current transfer guidelines. (2.85)	Accepted	<p>The Department of Health Good Practice Procedure Guide, the transfer and remission of adult prisoners under s47 and s48 of the Mental Health Act, 2012, suggests that patients can only be conveyed and admitted to hospital within the period of 14 days starting with the day on which the patient was last examined by a doctor.</p> <p>All patients requiring transfer under the Mental Health Act are assessed promptly, and every effort is made to expedite transfers. However, this is dependent on the availability of Mental Health hospital beds which is beyond the control of the prison's healthcare.</p> <p>The current Prison Transfer and Remission Guidance published by the Department of Health in 2011 is being</p>	<p>National Health Service England / Head of Health Care</p> <p>And</p> <p>HMPPS</p>	Ongoing

			<p>reviewed. In particular, a focus of the work is about ensuring that the most appropriate timescales are developed and implemented in relation to prison transfers and remission, taking into account clinical urgency and need.</p> <p>HMPPS is working with NHS England to ensure transfers to hospital from prison take place within appropriate timescales. Where there are delays evident, work is underway to establish the reasons for this and work collaboratively to address the issues.</p>		
	Catering			Residence	
5.56	The kitchen should be clean and in a good state of repair. (2.90)	Accepted Subject to Resources	<p>The kitchen and serveries will be deep cleaned periodically and repairs to broken equipment recorded on Planet FM. Bids have been submitted to replace some equipment.</p> <p>New items are being replaced as part of the asset replacement programme in June 2017 (1 x tilting kettle and 2 x combination ovens). As of 22 May 2017 there was only one outstanding repair for a tea boiler. The repairs are being monitored by the kitchen manager and the SDM.</p> <p>The kitchen has been decorated and several floor tiles have been replaced. A business case for additional funding to replace the flooring will be submitted within this business year.</p>	Head of Residence	30 September 2017 2017-18 –business case for flooring
5.57	House block serveries and food trolleys should be clean and well maintained, and servery workers should wear appropriate protective clothing. (2.91)	Accepted	<p>Food trolleys will be repaired or replaced and kept clean. Cleaning schedules will be adhered to and randomly quality assured by a residential manager. To ensure levels of cleanliness are maintained and servery workers wear protective clothing, discussions about this take place on a weekly basis at the morning operational meeting chaired by the Governor.</p> <p>Sufficient protective clothing will be made available to prisoners in line with health and hygiene requirements. All servery workers will undergo relevant health and safety training.</p>	Head of Residence	30 September 2017
	Purchases				
5.58	Consultation arrangements to update the prison shop list should be formalised and include prisoner	Accepted	<p>Quarterly meetings are held with prisoner representatives to review what is available on the prison shop canteen list.</p> <p>A full canteen sheet is made available to all prisoners to</p>	Head of Business Assurance	Completed and ongoing

	representatives from each protected characteristic. (2.95)		access the products they require. Prisoners with specific protective characteristic are encouraged to attend. Attendance at this meeting will be encouraged through the prison council.		
5.59	Prisoners should not have to pay a catalogue administration fee. (2.96, repeated recommendation 2.125)	Rejected	Administration charges for catalogue orders are mandatory under section 7 of PSI 23/2013 - Prisoner Retail, and provide a contribution towards the costs incurred in providing this service. It is not subject to local discretion, and is in addition to postage and packing. The catalogue-handling fee may be waived in circumstances where products are being purchased as specific requirements for a protected group, where to charge a handling fee would disadvantage the individual compared to the general population.	HMPPS Prison Retail	
	Time out of cell				
5.60	The prison should operate a full category C regime, with daily association and unlock of at least 10 hours a day. (3.3)	Accepted	There is more flexibility availability for public sector governors to agree appropriate regimes that meet the needs of the establishment's population within available resources as part of the Service Level Agreement (SLA) / contract discussions. There is therefore greater local discretion to decide on issues such as the timing, length and frequency of association, work and other activities within each establishment, approved through normal line management arrangements. A regime will be in place to deliver 10 hours of unlock per day and, as per a regime of a category C prison, structured activity time is offered to prisoners on return from their daily activities.	Deputy Governor	30 June 2017
5.61	Daily exercise periods of at least one hour should be available to all prisoners. (3.4)	Rejected	Prisoners at HMP Featherstone will be given access to exercise in the open air for a minimum of 30 minutes daily. In line with national policy PSI75 / 2011 Residential Services - prisoners are afforded a minimum of 30 minutes in the open air daily. This provision is mandatory subject to weather conditions and the need to maintain good order and discipline.	Head of Residence	
	Learning and skills and work activities				
5.62	Senior managers should introduce a greater number and range of employability-related courses, better to meet the resettlement needs of the population. (3.14)	Partially Accepted	HMP Featherstone will conduct a needs analysis. The number of vocational courses available has increased and consideration taken into account of the jobs within the prison which will reflect employability when released. There will be opportunities for the National Careers Service and Milton Keynes College to include employability courses. Job clubs through Job Centre Plus have started running at the	Head of Reducing Re- offending	30 June 2017

			<p>prison.</p> <p>HMPPS expect CRC providers of 'through the gate services' to work closely with prisons to ensure that the training prisoners receive in custody meets their resettlement needs on release.</p> <p>HMPPS have been carrying out a comprehensive review of the probation system, including 'through the gate services' to improve outcomes for offenders and communities, while making sure public protection remains top priority. The review is considering all aspects of the probation system, and HMPPS will set out our intentions in further detail in due course.</p>	HMPPS	Ongoing
5.63	The number of vocational training opportunities should be increased across all work areas. (3.15)	Accepted Subject to Resources	Additional vocational accredited qualifications will be explored across the full range of activity areas and then appropriate courses will be added to the curriculum in conjunction with education provider (Milton Keynes College). This is dependent upon the funding stream.	Head of Reducing Re- offending	30 June 2017
5.64	Senior managers should further extend education and training provision to include higher level learning and a greater range of subjects, better to meet the needs of those serving longer sentences or with higher prior academic attainment. (3.16)	Partially Accepted	<p>A needs analysis will be completed on long-term serving prisoners in order to assess and address their training and educational needs in line with the spectrum of learning provision available. This will inform the decisions made by the OMU when agreeing sentence plans.</p> <p>There has been an increase in opportunity to access Open University and higher level NVQ courses through distance learning.</p> <p>New work based courses in welding, rail-track and graphic design have been introduced. Additional qualifications, including an Introduction to Industry and Manufacturing Process will be introduced in September 2017.</p> <p>Discussions will take place with the education provider following the outcome of the needs analysis to decide on subject ranges.</p>	Head of Reducing Re- offending	31 July 2017
5.65	Teachers should ensure that they use the results of initial assessment well to deliver teaching and assessment that meets the needs of all	Accepted	All learners' initial assessment results will be used to meet the needs of prisoners and to sequence their progression in education, training and work. Those that arrive without initial assessment results are assessed on arrival in order to start their individual learning plan / Sequencing of Training and	Head of Reducing Re- offending	31 July 2017

	learners, including those with high levels of prior attainment. (3.23)		Education Plans document. This allows multi-agencies to share information relating to individual prisoner learning plans.		
5.66	Instructors in all work areas should provide detailed feedback to prisoners, to help them to develop useful employability and personal skills, including English and mathematics. (3.24)	Accepted	All learners, where appropriate, will receive regular detailed feedback to help them to develop useful employability and personal skills, including literacy and numerical skills. The training records will be updated and industrial managers will carry out random checks.	Head of Reducing Re-offending	30 June 2017
5.67	All instructors should be qualified in the technical aspects of the work that they oversee. (3.25)	Partially Accepted	Some engineering instructors have completed further technical training to operate equipment, Where appropriate, instructors will have the required training in line with the work they oversee. Training needs will continue to be identified on individual staff learning plans and training needs analysis.	Head of Reducing Re-offending	30 June 2017
5.68	Senior managers should take immediate action to drive up success rates on courses in English at level 1 and mathematics at levels 1 and 2. (3.35)	Partially Accepted	Discussions will take place with the education provider. An outcome based quality assurance analysis will be introduced to measure and drive up standards at level 1 English and level 1 and 2 in mathematics. The analysis will be monitored monthly.	Head of Reducing Re-offending	31 July 2017
5.69	Prisoners should be able to access the library at least once a week. (3.41)	Accepted	All prisoners have an allocated time to attend the library once per week. Attendance will be monitored to ensure fair access.	Head of Reducing Re-offending	Completed
5.70	Library staff should collect data on library usage, so that they can identify whether particular groups of prisoners are not benefiting from library services and activities, and take appropriate action. (3.42)	Accepted	Data on library attendance will be collated and used to identify particular groups of prisoners who do not access the library. Action will be taken to explore reasons and encourage library attendance through the library staff, Toe by Toe, Shannon Trust and peer mentors.	Head of Reducing Re-offending	30 June 2017
	Physical education and healthy living				
5.71	Managers should analyse available data to monitor participation in activities and take appropriate action to	Accepted	Monthly physical education regime monitoring will be introduced. Data will be analysed to ensure all prisoners have good access and participate in activities. This is especially with regard to regular gym attendance.	Head of Reducing Re-offending	30 June 2017

	ensure good access by all groups of prisoners. (3.47)				
5.72	Staff should monitor and manage the safe use of fitness equipment in the house blocks. (3.48)	Partially Accepted	Under the Benchmark profile there is no specific resources for staff to closely monitor and manage the use of the fitness equipment. However, safe systems of work and prisoner notices will be displayed in house blocks where there is fitness equipment provided. If prisoners report faults to staff, or staff observe equipment damage, these will be actioned for repair.	Head of Residence	31 July 2017
	Strategic management of resettlement				
5.73	Offender management and resettlement provision should be fully informed by a comprehensive and robust analysis of needs, including evidence gathered from an analysis of offender assessment system (OASys) data, and be specific to the different types of prisoner held at the establishment. (4.4)	Accepted	<p>A comprehensive and robust needs analysis will be undertaken across the following seven resettlement pathways:</p> <ul style="list-style-type: none"> • Accommodation • Education Training and Employment • Health • Drugs and Alcohol • Finance, Benefit and Debt • Children and Families of Offenders • Attitudes, Thinking and Behaviour <p>These pathways will be discussed with prisoners and specific to the individual prisoner. The outcomes will inform sentence plans for prisoners (in discussion with offender supervisors / managers).</p>	Head of Reducing Re-offending	31 July 2017
5.74	Offender management should be fully integrated into the reducing reoffending strategy and action plan, in order to ensure that it is at the heart of the work undertaken across the prison. (4.5)	Accepted	<p>This will be part of the reducing reoffending strategy and action plan.</p> <p>Offender management staff awareness training will be made available for all staff dealing with prisoners.</p>	Head of Reducing Re-offending	31 July 2017 Ongoing
	Offender management and planning				
5.75	OASys assessments and sentence plans should be reviewed regularly, and be of a good quality and tailored to the individual prisoner. (4.14)	Partially Accepted	There is a plan in place to prioritise the backlog of OASys. For those with an OASys, the OMU will ensure they are reviewed regularly. The quality of OASys assessments will be assessed via monthly QA. All prisoners will be consulted and engaged throughout the assessment process to make the sentence plan	Head of Offender Management	30 September 2017

			<p>targets tailored and outcome focused.</p> <p>As part of the Sentence planning framework (currently in draft format), there will be a standard included to ensure prisoners are fully involved in the sentence plan and included in the objective setting process. This is scheduled for issue in autumn 2017.</p>		
5.76	All high risk of harm cases should be reviewed by the interdepartmental risk management team, and comprehensive risk management plans should be developed and reviewed each month to monitor progress made. (4.19)	Accepted	<p>This is now in place and fully embedded. A comprehensive risk management plan of all high risk cases is completed at the Interdepartmental risk management team meeting.</p> <p>All high risk prisoners are assessed on a monthly basis for a period of six months prior to release. This ensures risk factors are shared and encourages interdepartmental information sharing and communication with various stakeholders.</p>	Head of Offender Management	Completed and ongoing
5.77	Multi-agency public protection arrangements (MAPPA) management levels should be confirmed at least six months before release, to promote the offender management unit's involvement in risk management release plans. (4.20)	Accepted	<p>National Probation Service offender manager(s) should communicate the assigned multi-agency public protection arrangements (MAPPA) level(s) to prisons no later than six months before a prisoner's release.</p> <p>HMP Featherstone will use the MAPPA escalation process when reasonable attempts to establish the level from the offender manager have failed.</p> <p>This will be monitored and updated through the interdepartmental risk management team and to promote the offender management unit's involvement in risk management release plans.</p>	Head of Offender Management	30 June 2017
	Reintegration planning				
5.78	Resettlement outcomes following release should be gathered and analysed, to evidence the effectiveness of the resettlement services. (4.34)	Accepted	<p>HMP Featherstone will work with on site CRC representatives to collect and share data resettlement outcomes. Data on housing, employment and training will be shared and analysed as part of the resettlement pathway meetings.</p> <p>HMPPS is introducing enhanced measures of resettlement which include the recording of employment and accommodation at the start and end of the sentence and at the end of the licence supervision period for any offender. CRCs are required to collect data on employment outcomes, which will support these performance measures, and this data will start being available to governors in 2017-18.</p>	<p>Head of Reducing Re-offending</p> <p>HMPPS</p>	<p>30 June 2017</p> <p>2017-18</p>

5.79	The use of the virtual campus should be increased, to help with electronic CV preparation and support 'live' job searches and applications. (4.42)	Accepted	HMP Featherstone has now completed the infrastructure of the virtual campus (VC) intranet and this is operating and available to prisoners. A satellite VC room has been introduced, together with job clubs and employability courses. VC training is also now delivered for staff awareness sessions relating to CV preparation and employability opportunities. Staff will promote and publish VC usage via a campaign, provide training and raise awareness and also use education peer mentors.	Head of Reducing Re-offending	30 June 2017
5.80	Drug and alcohol recovery service release plans should be shared with the offender management unit, to ensure a coordinated approach to resettlement planning. (4.46)	Accepted	Information governance requirements will be determined and a compliance process which supports appropriate information sharing in support of resettlement planning will be agreed.	Head of Healthcare	30 June 2017
5.81	A comprehensive analysis of the offending behaviour needs of the population should be completed and used to develop the appropriate range and number of interventions to meet prisoners' needs. (4.57)	Accepted Subject to Resources	A comprehensive needs analysis will be undertaken to gather the information required to make an informed decision regarding the types of offending behaviour programmes delivered. This is subject to available funding. This will be shared with commissioners to provide offending behaviour and intervention work.	Head of Reducing Re-offending	31 July 2017
5.82	Prisoners should be provided with money management skills. (4.49)	Accepted	Prisoners will be provided with a range of money management skills in areas such as debt and court fines, in order to develop a greater understanding of financial management. This action will be provided by the Citizens Advice Bureau, CRC and the Prison Advice and Care Trust. Post advice questionnaires will be completed to assess prisoners learning.	Head of Reducing Re-offending	30 June 2017

Recommendations	
Accepted	66
Accepted Subject to Resources / Partially	13

Accepted	
Rejected	3
Total	82