

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

<b>TIMETABLE</b>	<b>DATE</b>	<b>STATUS OF THIS RETURN</b>
Full Unannounced inspection	6 – 17 February 2017	
Report published	28 June 2017	
Action Plan Submitted	27 September 2017	

**ACTION PLAN - HMCIP REPORT  
ESTABLISHMENT: HMP BIRMINGHAM**

**POSITION AS AT: 27 SEPTEMBER 2017**

<b>Rec. No.</b>	<b>Recommendation</b>	<b>Accepted / Rejected</b>	<b>Response - Action Taken/Planned</b>	<b>Function Responsible/ Policy Lead</b>	<b>Target Date</b>
5.1	A clear strategy and plan to reduce the level of violence should be introduced. The effectiveness of action to reduce violence should be monitored(S46)	Accepted	<p>A review of the current strategy and action plan will take place to incorporate new management actions such as:</p> <ul style="list-style-type: none"> <li>• Completion of violence pro-forma</li> <li>• Operational meeting daily to capture follow up required</li> </ul> <p>The Introduction of the Violence Management meeting will be chaired by the Director and will continue on a monthly basis, this will co-ordinate the plan for the actions required to reduce violence at HMP Birmingham.</p> <p>The Violence Reduction Strategy will be re-launched for HMP Birmingham.</p>	Head of Safer Custody	December 2017
5.2	Consistent staff-prisoner relationships should be embedded and clear expectations for prisoners' behaviour set. (S47)	Accepted	<p>In order effectively support consistent staff prisoner relationships, the local Incentives and Earned Privileges (IEP) Policy will be reviewed and updated. The clear expectations for prisoner behaviours will be communicated to prisoners by Notice To Prisoners, N force Machines, Prison Council and signage on Residential Units</p> <p>The re-profile exercise ensuring consistency is driven across the prison will be led by the Deputy Director.</p> <p>The review and re-launch of the Violence Reduction Strategy for the establishment, will also prioritise consistency through IEP, adjudication and police referral to the response to violent incidents</p>	Head of Residential	October 2017
5.3	All prisoners should have a decent regime, including access to learning and skills and work activities, daily association and exercise in the open air(S48)	Partially Accepted	The C1 landing was a discreet unit and was used to accommodate prisoners who claimed to be under threat from other prisoners in HMP Birmingham. This unit has now been closed as a discrete unit for this purpose and is now used to accommodate main location prisoners and is now part of the C Wing as a whole.	Head of Residential / Head of Learning Skills	October 2017
5.4	All available activity places should be used to maximise the number of prisoners attending learning and skills and work. Prisoners allocated to activities should attend them for the full duration of their course. (S49)	Accepted	The Residential, Learning and Skills functions are conducting a joint review of all of prison systems that support attendance at work. Attendance will be reported to the Operational Meeting on a daily basis and the Performance Meeting on a weekly basis This will also be included in the monthly Controllers	Head of Residential / Head of Learning Skills	September 2017

			<p>report.</p> <p>The re-profiling exercise includes addressing deployment of staff at key times in order to support the movement to activities.</p>		
5.5	Prisoners from local courts should be transferred promptly to the prison following their court appearance.1.5, repeated recommendation 1.7)	Accepted	<p>The contractors are fully aware of their obligations to escort prisoners from court at the earliest opportunity and of the risks posed by late arrivals, with every effort being made to ensure that vehicles arrive within the latest reception time. The current contract established the use of escort vehicles with a separation capability, which allows different types of prisoners (male/female, adult/young people) to be carried on the same vehicle. The change results in more efficient scheduling, with a reduction in prisoner waiting times in addition to significant savings to the Service. However, reducing waiting time is also dependent upon the assistance of other stakeholders, notably HM Courts &amp; Tribunals Service (HMCTS) and also on the times that their cases have been dealt with by the courts.</p> <p>There may be occasions when traffic conditions, adverse weather or redirections have a detrimental impact on arrival times. In such instances, where a late arrival is unavoidable, the escorts 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. Prisoner Escort and Custody Services (PECS) continue to monitor all aspects of the contractors' performance and, where it fails to meet the agreed levels, it is raised with the contractor for improvement.</p> <p>PECS meets with the prison's managers from HMP Birmingham through the quarterly HMCTS stakeholder meetings, in addition to communications through email and telephone as required. There is also a monthly review of the return phase data that is reviewed by PECS and the contractor and all late returns are identified and challenged and the findings shared with HMP Birmingham. Neither PECS or the escort contractor has received any complaints regarding late arrivals from HMP Birmingham in the last 12 months.</p> <p>Figures showing the number of returns made before the latest reception time to HMP Birmingham over the last six months are as follows.</p>	Prisoner Escort and Custody Service (PECS)	Completed and ongoing

			Month	Number of returns to HMP Birmingham	Number of returns before latest reception time to HMP Birmingham	Percentage of returns before latest reception time to HMP Birmingham		
			May 2017	1002	988	98.60%		
			April 2017	750	746	99.47%		
			March 2017	695	693	99.71%		
			February 2017	622	618	99.36%		
			January 2017	604	603	99.83%		
			December 2016	664	657	98.95%		
5.6	The transfer of all prisoners should be informed by a good up-to-date OASys document and sentence plan. (4.13)	Partially Accepted	<p>The OASys policy requires a specific cohort of offenders to have an OASys completed at the start of a custodial sentence. These are outlined in policy and guidance however essentially this excludes the majority of offenders serving under 12 months in custody except those assessed as High Risk of Serious Harm. HMPPS current guidelines require local prisons, once a prisoner is sentenced to complete an initial assessment (OASys) on risk and needs. This assessment is subject to review, dependant on sentence and at points of significant change which may include transfer, release or other individual related circumstances. There is no requirement to review OASys assessments solely on the basis of a transfer between prisons, the only exception being transfers into the open estate. HMPPS guidance to staff ensures that a review is always considered upon transfer and an assessment updated if considered necessary. If it is determined that a review is not required this should be documented within the Case Management System.</p> <p>HMP Birmingham will ensure that Community Engagement First Line Manager's (FLM) print a PNOMIS report that identifies overdue assessments for both HMPPS and National Probation Service (NPA). Additionally they produce a weekly report that identifies outstanding and or late OASys reports and sentence plans. This will be used to prioritise prisoners eligible for transfer.</p>				Head of Community Engagement	December 2017
5.7	More places should be made available for category B prisoners, including sex offenders, to ensure they do not have to stay at a local prison for too long (4.25)	Accepted	The system is designed so that category B prisoners, including those convicted of sexual offences who are serving over 12 months and indeterminate sentence prisoners (ISPs) are transferred from local prisons to training prisons in a timely				Prison Estate Transformation Programme (PETP)	December 2021

			<p>way. HMP Birmingham manages the allocation of these prisoners held at the prison including requesting appropriate transfers. For some groups, however, particular bottlenecks develop and at this time this appears to be the case for category B prisoners convicted of sexual offending and ISPs. Work is underway to address this through the Prison Estate Transformation Programme working in conjunction with the HMPPS Sexual Offending Management Board to minimise length of stays in a local prison.</p>		
5.8	Prisoners should be able to open a bank account prior to release. (4.41)	Accepted	<p>The Community Rehabilitation Companies (CRCs) are required to provide a Through the Gate service to prisoners prior to release. This includes, but is not limited to, help to find prisoners suitable accommodation, employment, education or training and advice on finances, benefits and debt.</p> <p>The Staffordshire and West Midlands CRC recognise there have been challenges with the banking scheme at HMP Birmingham, including some application packs being destroyed during the December disturbance. The CRC has been working with the prison and banking provider to resolve the issues. The banking process with the provider has been established, and is now being used, with a number of account applications having been submitted. The CRC are using their Housing and Welfare caseworker to process the applications.</p> <p>Contracted Services have undertaken an overarching review of probation, looking at the standards we set for providers and how they can be held to account, and will be setting out the findings in due course.</p> <p>A system to be put in place to allow prisoners to open a bank account. This will be done by the CRC team in liaison with Community Engagement managers.</p>	Contracted Services	Completed
5.9	All new receptions should receive an appropriate induction 1.13, repeated recommendation 1.21)	Accepted	<p>Working with the De Profundis induction consultancy, all aspects of the induction programme will be reviewed and K Wing will be established as the second stage induction wing to ensure a full induction for all prisoners.</p>	Head of Safer Custody / Head of Residential	Completed
5.10	Perpetrators of violence should be challenged and their behaviour addressed and monitored. (1.23)	Accepted	<p>A monthly meeting will be introduced to be chaired by the Director of the prison which focusses on Violence Reduction.</p> <p>HMP Birmingham will be fully engaged in the Improving Prison Safety Project along with 19 other public and private sector prisons. This will be co-ordinated by the Head of Safer</p>	Head of Residential / Head of Safer Custody	Completed

			<p>Custody</p> <p>The use of the existing TABS documentation will be reviewed, providing training to staff and FLM's. This will be co-ordinated through the Safer Custody department, and reviewed further.</p>		
5.11	<p>Management of ACCT procedures should ensure that all action identified in assessments are included in care maps, objectives are addressed promptly and reviews include contributions from all prison departments responsible for progressing objectives. The outcomes of action should be recorded and objectives should be achieved as far as possible before cases are closed. (1.28)</p>	Accepted	<p>In order to ensure that all of the Assessment, Care in Custody and Teamwork (ACCT) procedures are managed in a manner compliant with PSI 64/2011, a system of quality assurance will be introduced to be undertaken by Safer Custody leading to an action plan for compliance.</p> <p>All actions and best practice will be communicated to all FLM's,</p> <p>A monitoring programme will be introduced, which will be used by Residential managers.</p> <p>All of these points will be taken forward by the new Head of Safer Custody.</p>	<p>Head of Residential / Head of Safer Custody</p>	October 2017
5.12	<p>Tasks assigned to prison departments as a result of intelligence reports should be completed promptly and action reported back to the security department. (1.38)</p>	Accepted	<p>HMP Birmingham will ensure intelligence led searches and associated activities are actioned as promptly as is practically possible. This will be monitored on a weekly basis through the performance meetings by the Security department.</p>	<p>Head Of Residential / Head of Security</p>	October 2017
5.13	<p>Security and drug strategy staff should develop an integrated approach to reducing the demand and supply of drugs(1.39)</p>	Accepted	<p>The establishment Drug Supply Reduction Action Plan will feature as a standing item on both the Security and Drug Strategy monthly meetings. This will include suspicion based testing as a priority.</p> <p>As part of a joint ownership approach, the action plan will be reviewed and updated to support reduction in both the supply and demand for drugs within the prison. These meetings will be held monthly and minutes will reflect the discussion and action points.</p>	<p>Head of Security / Head of Community Engagement</p>	Completed
5.14	<p>Targets for those on the basic level should focus on addressing the individual's poor behaviour. ((1.43)</p>	Accepted	<p>The establishment of the IEP policy will be reviewed, part of this will include the use of the Basic regime. The Basic review process will be changed to ensure that a board completes the review and that behavioural targets are set during that review.</p> <p>The targets set will not be generic and will be offender specific with a focus on challenging the individual behaviour. The Basic book will be rewritten to make it an outcome focused document.</p>	<p>Head of Residential</p>	October 2017

			A review of Basic books will form part of the weekly compliance process so that we can monitor effectiveness. This will be completed by Wing Managers.		
5.15	A regular adjudication standardisation process should be implemented to ensure adjudications are dealt with promptly and appropriately (1.47)	Accepted	<p>A quarterly standardisation meeting will be established, to be attended by Adjudicating Managers. The Director will chair these meetings on a quarterly basis and Minutes will be taken at each meeting.</p> <p>The timelines for adjudications are set out in PSI 47/2011 which prisons must follow. Governors are required to regularly review the conduct of adjudications within their establishments to ensure that the outcomes required by the Adjudications Specification are being achieved, and that the mandatory instructions in this PSI are being followed. In particular they are to monitor adjudications to ensure they are fair, lawful, and just, that punishments are normally within locally published guidelines and proportionate, and that no prisoner is charged or punished for any reason other than their disciplinary behaviour. The Governor will hold regular meetings of staff who conduct adjudications to discuss these issues, and to review local statistics on rates and trends in offending, levels of punishment, restoration of additional days, quashed and mitigated cases, and the ethnic or other social breakdown of charged and punished prisoners.</p>	Head of Safer Custody	October 2017
5.16	The use of the quiet cells should be clarified and their use subject to appropriate governance. (1.58)	Accepted	The quiet cells will be taken out of use. HMP Birmingham is in the process of furnishing these cells to the standards of normal accommodation. This is being arranged between the Care and Separation Unit (CSU) Managers and the Estates department.	Head of Safer Custody	January 2018
5.17	A senior manager should authorise the segregation of prisoners subject to ACCT procedures and ensure their regime is aligned with the ACCT care map(1.59)	Accepted	A defensible decision pro-forma will be put in place to assist with and capture this. This will be completed and an initial review will take place and will include regime considerations.	Head of Safer Custody	Completed and ongoing
5.18	All prisoners subject to reintegration should have an effective management plan that provides sufficient information regarding their daily management. Their access to regime should be documented and any reasons for deviation from the daily published regime recorded. (1.60)	Accepted	Reintegration planning will be captured outside of the Good Order or Discipline (GOOD) process. A pro-forma will be developed to ensure full and equal understanding of an individual plan. This will also take into account regime access.	Head of Safer Custody	October 2017
5.19	Opiate-dependent prisoners should receive treatment promptly on arrival and prescribing regimes should be in line with national guidance.(1.68)	Partially Accepted	To confirm a prisoner is opiate-dependent a urine sample is required for on-site testing and/or confirmation of a community prescription. The prison is currently unable to obtain a urine sample whilst maintaining dignity due to the physical layout of reception and often do not receive confirmation of community	Head of Health / Head of Safer Custody	September 2017

			<p>medication on the first night. Prisoners who are identified as potentially opiate-dependent are therefore given medication to alleviate symptoms of withdrawal on the first night and 100% of identified prisoners are commenced on an opiate substitute, where appropriate the following day. This is currently the safe implementation of the national guidelines, and this would only change this once a safe workable alternative is identified.</p> <p>NHS England is nearing the end of revising the national Service Specification for Integrated Substance Misuse Treatment Services in prisons, following extensive consultation. This states for the Screening and Assessment; The Service Provider must undertake an appropriate level of screening for substance misuse and those identified as needing structured treatment must then receive the comprehensive substance misuse assessment. This screening/assessment will undertake a clinical assessment to ensure that any clinical issues requiring immediate attention are managed appropriately. To ensure that they are managed in the appropriate location according to their needs (i.e. Stabilisation Unit or Healthcare)</p> <p>Drug Testing:</p> <ul style="list-style-type: none"> <li>• Testing for substances must be undertaken prior to any initiating prescribing and on a risk assessed basis thereafter.</li> <li>• Testing will be undertaken for therapeutic purposes only and not Mandatory or Compact Based Drug Testing.</li> <li>• The provider must ensure that testing complies with Quality Assurance processes, legislation and relevant Prison Service Instructions (PSI) or Prison Service Orders (PSO).</li> <li>• Positive tests must be shared with other parties where there are concerns that not doing so will harm the individual or jeopardise the security and safety of the prison and or staff or other offenders.</li> </ul>		
5.20	Prisoners requiring stabilisation or detoxification should receive appropriate 24-hour monitoring and observation. (1.69)	Partially Accepted	Prisoners requiring stabilisation can receive 24 hour monitoring and observation in 24 hour healthcare or stabilisation cells where the risk has been assessed to be high. Since the inspection HMP Birmingham has commenced night time observations for all prisoners who are at risk of withdrawal. The observation panels within first night and the induction wings do not have 'open' panels and clinical staff have to	Head of Health Head of Safer Custody /	October 2017



			<p>observe through a Perspex panel and can request officers to open the cell doors if there are any concerns.</p> <p>To be discussed at local delivery board meeting, currently reviewing the first five day pathway within Integrated Drug Treatment System to ensure the prison has the most effective pathway possible.</p>		
5.21	Clinical substance misuse and psychosocial support services should improve joint working to provide more integrated care. (1.70)	Accepted	<p>HMP Birmingham will further develop partnership working and meetings will take place between Drug and Alcohol Recovery Team (DART) and clinical services to discuss client needs.</p> <p>There are constant regular reviews, DART attend all clinics, there is joint working between key workers from DART and Integrated Drug Treatment System (IDTS) for all individual Drug strategy meetings that take place.</p>	Head of Community Engagement / Head of Health	Completed and ongoing
5.22	All communal areas, including showers, should be maintained to a consistently good standard. ((2.8)	Accepted	<p>A schedule of refurbishment of communal areas has been agreed with the Estates Department.</p> <p>All areas will be reviewed on a weekly basis to ensure compliance against the cleaning schedule and standards. This will be monitored by Wing Managers through the compliance process.</p> <p>The non-working shower and water pressure will be repaired. Some repairs have taken place but the work is ongoing</p>	Head of Residential / Head of Support Services	Ongoing
5.23	All cells should be maintained to a reasonable standard and have windows, sufficient furniture for the number of occupants and adequate screening around in-cell toilets. (2.9)	Accepted	<p>A review of all cellular accommodation on A, B, C, D, G and J Wings will be completed to assess the condition of the windows. A cell refurbishment plan will be developed. This will be arranged by Wing Managers and agreed with the Estates Department. This will include K wing.</p> <p>The cell furniture will be ordered to replace damaged or missing stock.</p> <p>The Prison will continue to produce and distribute privacy screens. This will be agreed between Wing Managers and the Learning Skills department.</p>	Head of Residential / Head of Support Services	October 2017
5.24	All prisoners should have an identified officer who supports them through their sentence and checks on them regularly. This should be reflected in comprehensive electronic case notes entries. (2.15)	Accepted	<p>In line with the roll out of the new Offender Management model, key workers will be allocated appropriately.</p> <p>This will be managed by Wing and Residential Managers who will ensure that a weekly case note entry under the heading of "key worker / personal officer entry" is completed.</p>	Head of Residential/ Head of Community Engagement	November 2017

			<p>This will be managed and monitored through the weekly compliance process and reported at the weekly performance meeting.</p> <p>The weekly compliance books will be updated to focus on the quality of entries and reported to the weekly performance meeting</p>		
5.25	Foreign national prisoners should have access to independent immigration advice(2.28)	Accepted	Independent immigration solicitors will be contacted. This will be arranged through the Community Engagement department.	Head of Community Engagement	October 2017
5.26	The needs of prisoners with disabilities should be identified, assessed and met and they should be able to access all prisoner services and facilities. (2.29)	Accepted	<p>The Prison will oversee 100% of new prisoners through Reception and where appropriate a Personal Emergency Evacuation Plan (PEEP) will be created.</p> <p>This will be completed by the prison Equalities department, and will be reviewed on a monthly basis. A local policy will be developed to incorporate the Carers policy and Safeguarding policy</p> <p>The lift for access to the dentist has been repaired. The lift is bespoke and designed for use in the space available. It was fully refurbished this year and will be serviced in accordance with directions. In the event of a mechanical failure of the lift the vast majority of the population can continue to access dental services. Those with mobility issues who have outstanding dental treatment needs will be triaged and external treatment will be arranged for those who are clinically determined as in need of it. Dental waiting times are monitored by the NHS through Health and Justice Indicators of Performance (HJIPs) data collated locally and are in line with the National Institute for Health and Care Excellence (NICE) guidelines.</p>	Head of Safer Custody	October 2017
5.27	Older prisoners should have access to a range of age appropriate activities during the day(2.30)	Accepted	<p>A needs analysis will be conducted jointly by the Head of Safer Custody and the Head of Learning and Skills.</p> <p>Milton Keynes College (MKC) will engage with external community groups including CRC's to include activities for the older prisoners.</p>	Head of Safer Custody and Head of Learning and Skills / Head of Healthcare	December 2017
5.28	Services should be introduced to support gay and bisexual prisoners.(2.31, repeated recommendation 2.39)	Accepted	The prison will continue to seek support and assistance from community groups. Previous enquiries have found no local groups who are funded or able to assist.	Head of Safer Custody	Completed

			<p>HMP Birmingham will work with other G4S establishments (specifically HMP Parc) to build on the good practice evidenced at those sites.</p> <p>This will be managed through the Equalities department. The first contacts have been made through the organisation called Stonewall. This has also been included in the Action Plan which is reviewed and updated monthly.</p>		
5.29	Vulnerable and at-risk prisoners and prisoners with disabilities should have equitable access to adequate multi-faith facilities.(2.37, repeated recommendation 2.47)	Accepted subject to Resources	A review of provision will take place to see if any alternative measures can be considered.	Head of Learning Skills / Chaplaincy Manager	October 2017
5.30	All prisoners should have access to a chaplain of their faith.(2.38)	Accepted	The provision of faith based chaplains with HMPPS and the Birmingham Chaplaincy Manager will be reviewed, this will include visiting chaplaincy and lay services.	Head of Learning Skills	October 2017
5.31	Responses to complaints should be respectful and considerate. (2.42)	Accepted	A monthly meeting will take place to scrutinise at least 10% of all complaints received. This will be chaired by the Deputy Director with support from Secretariat.	Deputy Director / Audit Manager	Completed
5.32	Complaints data should be analysed for trends so lessons are learned and improvements made. (2.43)	Accepted	<p>A weekly performance meeting will be introduced where complaints will be a standing agenda item. Any trends of concerns will be analysed and actions given to appropriate managers.</p> <p>The meeting will be chaired by the Director or Deputy Director.</p>	Head of Support Services	Completed
5.33	All clinical rooms should comply with infection control standards and offer a decent, safe and accessible environment for prisoners and staff. (2.55)	Accepted	All clinical rooms have had a deep clean and cleaning schedules are clearly displayed. G4S is invited to attend health care Infection Control meeting. An Audit Tool is currently being designed to enable regular audit and maintenance of standards.	Head of Health/ Head of Safer Custody	Completed and ongoing
5.34	Prisoners should be able to complain easily through a confidential well-advertised health system that outlines escalation and support options. (2.56)	Accepted	The Health Complaints leaflet has been amended to advertise complaints process and options. The complaints responses have been reviewed to ensure prisoners have full information about escalation process.	Head of Health/ Head of Safer Custody	Completed and ongoing
5.35	Prisoners should have easy access to pertinent health promotion services, including barrier protection and smoking cessation. (2.57)	Accepted	<p>Two Health and Wellbeing days have taken place with a focus on smoking and wider health benefits. The health promotion events will continue to be rolled out to each wing. These will focus on smoking cessation whilst the prison becomes smoke free. Barrier protection is available through the sexual health clinic and prisoners are made aware of this.</p> <p>All prisoners are screened regarding sexual health on reception and during Well Man Clinics and if relevant all advice is given regarding sexual health clinics and keeping safe in</p>	Head of Health / Head of Safer Custody	Completed and ongoing

			prison, including barrier protection. If there is health contact with any prisoner where sexual health may be relevant, sexual health advice is provided.		
5.36	All prisoners should receive a secondary health screening within seven days of their arrival in the prison.(2.65)	Accepted	<p>The Well Man Clinic (secondary screening) backlog is consolidated with Healthcare managers. The plan is to utilise The B3 clinical hub to carry out during other Health drives such as smoke free clinics.</p> <p>The actions highlighted below will help to achieve screening to take place within seven days and the development of the clinic on the new Induction Wing, which will ensure this is sustained. The current actions are:</p> <ul style="list-style-type: none"> <li>• Well Man Clinics are to be prioritised by both NHS and G4S staffing to ensure clinics are not cancelled.</li> <li>• Additional Well Man Clinics are being incorporated to ensure people receive a check prior to leaving D Wing.</li> <li>• The clinic space is being prepared on the new Induction Wing and then the Well Man Clinics will commence to ensure prisoners have the check prior to going to normal location.</li> <li>• Recruiting to administration to support the Well Man Clinic.</li> <li>• A 'pop up' on SystemOne has been set up, so when the record is opened for a prisoner who has not had a secondary health check, there is a reminder. Which enables the prisoner to be booked into a clinic or to be completed there and then, using the making every contact count approach.</li> <li>• The Well Man Clinic waiting list is documented every night by H15 in their handover to ensure it remains a priority for the B3 Staff.</li> </ul> <p>The Head of Healthcare and Primary Care Services Manager are working together to improve the secondary health screening within HMP Birmingham.</p>	Head of Safer Custody/ Head of Health / NHS England	October 2017
5.37	Prisoners should be able to access all primary care clinics within community equivalent waiting times. (2.66)	Accepted	All primary care clinics are currently running with equivalent waiting times to a community setting and this is monitored through HJIPs.	Head of Health / Head of Safer Custody	Completed and ongoing
5.38	Prisoners in shared cells should be able to store medicines securely. (2.74)	Accepted	The provision of in cell storage boxes and how they are to be made available in cells will be reviewed. This review and any corresponding actions will be conducted by Residential Managers. This has been escalated to local commissioners.	Head of Residential	October 2017

5.39	Medicines should be prescribed and administered at clinically appropriate times to required professional standards. There should be sufficient effective officer supervision to ensure privacy and reduce opportunities for bullying and diversion. (2.75)	Accepted	The re-profile of the staff resource across the jail will be managed.  The additional resources will be provided to B Wing to assist with the supervision of medication dispensing.	Deputy Director / Performance and Resources Manager	October 2017
5.40	Health staff should be able to administer a wider range of medicines without a prescription within a robust clinical framework. (2.76)	Accepted	The full list of available medicine is to be agreed in the Medicines Management Committee.	Head of Health / Head of Safer Custody	October 2017
5.41	Room and drug refrigerator temperatures should be monitored effectively and prompt remedial action taken when required to ensure medicines are stored at the correct temperature. (2.77)	Accepted	The audit of the temperature recording is completed and the audit process will be run on an ongoing basis to ensure continuing compliance. This will be managed by the Head of Healthcare.	Head of Health / Head of Safer Custody	Completed and ongoing
5.42	The dental decontamination room should be kept free of clutter and required infection prevention standards should be maintained(2.80)	Accepted	The room has been de-cluttered, deep cleaned and the cleaning schedule is displayed. This will be kept to infection prevention standards and will be managed by the Head of Healthcare.	Head of Health	Completed and ongoing
5.43	All custody officers should receive regular mental health awareness training to enable them to recognise and support prisoners with mental health problems. (2.86)	Partially Accepted	The prison will work with NHS Colleagues and the training department to assess what level of training can be provided and identify providers.  All new Prison Custody Officers have mental health training as part of their initial training course.	Head of Safer Custody / Head of Health	Completed
5.44	Patients requiring a transfer under the Mental Health Act should be transferred within the current transfer guidelines. (2.87)	Accepted	The prison will as far as possible transfer patients within the current guidelines, however there is a significant wait for Medium Secure Unit beds and a gap when a prisoner requires psychiatric assessment, but this cannot be facilitated within the timescale before the prisoner is released.  Links exist between prison healthcare and the specialist commissioning team who oversee access to secure beds, this includes an agreed escalation process. Every effort is made to support timely referrals and access to patients for assessments, however secure bed availability and admission to these beds falls outside of the control of prison healthcare and Health and Justice Commissioning. Nationally work is underway between specialised Commissioning and Health and Justice national teams to identify how access times can be reduced. In the interim prison Healthcare and Health and Justice Commissioning teams continue to engage with specialised Commissioners regarding access, pathways and escalation.	Head of Safer Custody / Head of Health / NHS England	Completed
5.45	All prisoners involved in the preparation and	Accepted	Sufficient stocks of Personal Protective Equipment have been	Head of Residential	Complete and

	<p>serving of food should wear appropriate clothing and have access to personal protective equipment. (2.94))</p>		<p>ensured for prisoners involved with serving of food. These will be requested by Residential staff through the requisition process and ordered by Procurement. An ordering system will be set up.</p>		ongoing
5.46	<p>Senior prison managers should ensure the college provides sufficient capable staff to meet the training and teaching needs of the curriculum. (3.11)</p>	Accepted	<p>A meeting will take place with Senior Managers from the College to discuss direction and the inspection action plan.</p> <p>This will be an on-going monthly meeting which discusses the performance of the college. A MKC action plan will be circulated and monitored by the Head of Learning and Skills and Regional Manager.</p>	Head of Learning Skills	Completed
5.47	<p>Staff who observe prison-run training as part of quality assurance process should focus on the learning that has taken place and identify areas for improvement to ensure all learners make rapid progress. (3.12)</p>	Accepted	<p>A member of staff will be trained to complete education walk through and lesson observations. A calendar of observations will be created and these lesson observations will be in line with the Common Inspection Framework guidelines. This will be managed by the Head of Learning Skills and the Activity Allocation Unit Manager.</p>	Head of Learning Skills	Completed
5.48	<p>Managers should provide an informative induction for all purposeful activities, which all prisoners should attend, so they know what is available and can complete the mandatory education assessment to ensure their education and training needs are captured. (3.17)</p>	Accepted	<p>A second stage induction on K Wing will be set up and meetings will take place to establish content and stakeholder involvement.</p> <p>The Gymnasium and Library will dovetail with the current programme to inform all opportunities available.</p>	Head of Learning Skills	Completed
5.49	<p>Prison and college managers should take immediate action to improve the quality of learning for prisoners through more inspirational teaching. (3.24)</p>	Accepted	<p>The MKC post inspection action plan will be agreed and monitored by college managers and also head of Learning and skills.</p>	Head of Learning Skills	Completed
5.50	<p>Opportunities for prisoners to develop confidence in English and mathematics should be available in all workshops. (3.25)</p>	Accepted	<p>There are exits opportunities for prisoners to develop confidence in English and Mathematics in workshops 5, 6, 7 and in- cell, which is now available with the new 2017-2018 curriculum. Opportunities exist for prisoners to gain WorkSkills qualifications and functional skills in English and Mathematics.</p>	Head of Learning Skills	October 2017
5.51	<p>The quality and availability of specialist learning support should be improved to meet the complex and challenging needs presented by prisoners. (3.26)</p>	Accepted	<p>The Head of Learning and Skills will work closely with the Education Manager to increase learner support. The current position is not ideal with Additional Learning Support tutor on long term sick. The College is to provide additional resource.</p> <p>The review and update to be provided on a monthly basis at the Performance Development Review and funding sign off meeting.</p> <p>The number of prisoners and students is to be analysed from the learning and skills induction figures.</p>	Head of Learning Skills	Completed

5.52	The development of prisoners' employability and interpersonal skills should be promoted, recognised and recorded. (3.31)	Accepted	<p>The CRC will provide information on all available courses, including the arrangement and management of resettlement fairs, which take place four times per year.</p> <p>The job outcomes from the resettlement fairs will be evidenced and recorded on prisoner records.</p> <p>The Head of Learning and Skills will continue to progress this work.</p> <p>The Employer Engagement events will continue to take place on a regular basis.</p>	Head of Learning Skills / Head of Community Engagement	Completed and ongoing
5.53	Opportunities for prisoners to progress to higher level learning should be increased.(3.32)	Accepted	<p>The Education Contractor will provide monthly data on the number of prisoners who are assessed for suitability for higher level distance learning.</p> <p>The current provision will be increased to ten learners-</p>	Head of Learning Skills / Deputy Education manager	Completed
5.54	Achievement rates in functional skills English and maths courses should be improved and delivered within planned timescales. (3.36)	Accepted	<p>The prison will work with the Education Contractor to improve achievement rates and work through the MKC post inspection action plan.</p> <p>The Education Contractor will be required to set a baseline for the performance at the time of the inspection, and a method of demonstrating performance improvement against this baseline. To be reviewed on a monthly basis.</p>	Head of Learning Skills	Completed and ongoing
5.55	The reasons why prisoners withdraw from their courses early should be identified and addressed. (3.37)	Accepted	<p>The withdrawals will be monitored on a monthly basis at the Professional Development Resource (PDR) / funding sign off meeting, where any trends or individuals issues of concern will be investigated.</p> <p>The Education Administrators will be given access to the pre-transfer check list to avoid unnecessary non completions.</p> <p>In cases where prisoners withdraw from courses the offender supervisor will update the sentence plan on PNOMIS.</p>	Head of Learning Skills / Head of Community Engagement	Completed
5.56	The library should be promoted and access improved so all prisoners, including those in full-time purposeful activity, can use it(3.42)	Accepted	<p>As part of the re-profile exercise, the introduction of two evening Library sessions per week to the programme will be considered. If this is achievable the prison will produce a programme and an impact study for the introduction of sessions will commence.</p>	Head of Learning Skills	October 2017

5.57	Library staff should collect data on library use so they can identify whether particular groups of prisoners are benefiting and take appropriate action to increase participation. (3.43)	Accepted	The prison will work with the Library Contractors to produce data on age, ethnicity nationality and disability.  These will be shared with the Equalities team and any significant findings will be actioned. A monitoring process is in place.	Head of Learning Skills / Equalities Manager	October 2017
5.58	All prisoners should receive an appropriate, timely induction to PE, which should include healthy living and fitness information(3.47)	Accepted	As part of the new second stage induction programme all prisoners will visit the gymnasium and complete all necessary aspects of the induction.  Prisoners will not be moved on from Induction until key elements, including gym induction are completed and signed for by staff.  The evidence of completion of induction will be recorded in the prisoners wing file.	Head of Learning Skills	Completed
5.59	The reducing reoffending strategy should be informed by a comprehensive needs analysis. (4.5)	Accepted	A comprehensive needs analysis will be undertaken to inform the reducing reoffending strategy.  The data collected from PNOMIS for index offenses, utilise segmentation data and work with reducing re-offending to complete the needs analysis.	Head of Community Engagement	January 2018
5.60	Information sharing across departments, between the prison and community-based offender managers and the CRC should be improved to promote effective risk management. ((4.6)	Partially accepted	The development and improvement of information sharing will continue. A monthly meeting will be held with Offender Management Unit (OMU) and CRC's to discuss Basic Custody Screening and other issues. The CRC's also attend the Integrated Risk Management Team meeting. The CRC and OM Representatives will attend the weekly performance meeting.	Head of Community Engagement	November 2017
5.61	In higher risk of harm cases, where prisoners remain at the prison for several months, contact with offender supervisors should be frequent and meaningful to help prisoners make progress towards their sentence plan objectives and reduce their risk of harm. (4.14)	Accepted	A system will be put in place to ensure Offender Supervisors (OSs) meet with their allocated prisoners at least once per month. The Head of Community Engagement will set up this system.  The meetings will build relationships, whilst in prison which will continue in the community. OS's will provide support, guidance and assist in identifying interventions for offenders. This will encourage offenders to progress against their sentence plan.	Head of Community Engagement	December 2017
5.62	The effectiveness of the IRMT should be improved: all high risk of harm cases due for release should be reviewed regularly and risk management plans should be drawn up and	Accepted	HMP Birmingham will review the terms of reference, the agenda and the attendees of the monthly IRMT meeting. The interaction between the OMU and CRC will continue to improve. Further work will take place to increase the	Head of Community Engagement	Completed



	delivered in partnership with others including, where relevant, MAPPA meetings. (4.18)		attendance from other stakeholders.  HMP Birmingham will appoint a Senior Probation Officer who will chair the IRMT meeting, which will ensure that release information is shared.  This will be managed by Community Engagement Managers.		
5.63	Communication with probation offender managers should be improved to ensure that all information demonstrating a prisoner's risk of harm to others is shared and, where necessary, leads to a review of their MAPPA level and the development of a robust release plan. (4.19)	Accepted	The Prison will work closely with the Probation colleagues and request that Probation Officers attend the establishment to manage the high risk cases. This opportunity will be used to develop closer working relationships and share information.	Head of Community Engagement	November 2017
5.64	Prisoners not awarded re-categorisation should be told about the reasons and be given clear behavioural targets to achieve before their next review. (4.24)	Accepted	The re-categorisation results will be given to the OS and instructed that they provide feedback and advice directly to the prisoner. The Prison will further ensure that this information is recorded on PNOMIS. This will be monitored by Community Engagement Managers.	Head of Community Engagement	October 2017
5.65	Joint working between the CRC and the OMU should be improved to ensure good information exchange and effective resettlement plans. (4.30)	Accepted	The joint working between the CRC and OMU will be improved. The monthly meetings will be held to exchange information, in relation to BCS, risk of harm, release data. Both teams will work together to collate and deliver the Resettlement fair on a quarterly basis.  The OMU will also support the CRC in the delivery of the Coming Home and Building Stronger Families interventions. All of these actions will have been established and will be monitored by the Community Engagement Managers.	Head of Community Engagement	September 2017
5.66	The number of prisoners being released without a fixed address or to temporary accommodation should be closely monitored and validated. (4.33)	Accepted	HMP Birmingham will work with CRC colleagues to achieve increased oversight of hostel providers. Monitoring tools will be created for prisoners with No Fixed Address (NFA). This will be monitored by Community Engagement Managers as well as the establishment's main morning meeting.	Head of Community Engagement	Completed
5.67	Robust systems should be in place to ensure all patients, including those released at very short notice, can continue with their prescribed medication post-release without any breaks. (4.37)	Accepted	The development of a Standard Operating Procedure for FP10's which is the number of a prescription form to be used when unable to provide To Take Out's or link in with a suitable community service. This will be completed by Healthcare Managers.	Head of Health	October 2017
5.68	Breastfeeding facilities for visitors should be improved. (4.48)	Accepted	Sufficient furniture will be ordered by Community Engagement managers to enhance the comfort of the breast feeding facility.	Head of Community Engagement	October 2017
5.69	The range of offending behaviour interventions aimed at reducing the risk of harm and likelihood of reoffending should be reviewed to ensure it is	Accepted	The Anger Management courses will be run through the CRC and Thinking Skills Programme and Control Of Violence for Angry and Impulsive Drinkers through the in house	Head of Community Engagement	January 2018

	sufficient for the population's needs. (4.51)		Programmes Unit.  The courses will be reviewed in line with the needs of the population at the time. This review will be conducted by the Community Engagement team		
5.70	The prison should improve the identification of veterans to ensure this group's needs can be assessed so that appropriate provision is developed.(4.53)	Accepted	There will be a Veterans in Custody lead in place. This will be a First Line Manager (FLM) and the current provision will be reviewed and enhanced where possible.  The use of Third Sector, voluntary or charity agencies and links through CRC will be explored. A weekly Veterans report by OM is passed to CRC's for action when a veteran is due to be released. This will be completed by the Safer Custody team.	Head of Safer Custody	Completed

<b>Recommendations</b>	
Accepted	63
Accepted Subject to Resources /Partially Accepted	7
Rejected	0
<b>Total</b>	<b>70</b>