



HM Prison &
Probation Service

Action Plan: HMP & YOI Low Newton

Action Plan Submitted 2 October 2018

A Response to the HMIP Inspection 12-22 February 2018

Report Published 6 June 2018

INTRODUCTION

HM Inspectorate of Prisons (HMIP) is an independent inspectorate which provide scrutiny of the conditions for and treatment of prisoners. They report their findings for prisons and Young Offender Institutions across England and Wales to Ministry of Justice (MOJ) and Her Majesty's Prison and Probation Service (HMPPS). In response to the report HMPPS / MOJ are required to draft a robust and timely action plan to address the recommendations. The action plan confirms whether recommendations are agreed, partly agreed or not agreed (see categorisations below). Where a recommendation is agreed or partly agreed, the action plans provides specific steps and actions to address these. Actions are clear, measurable, achievable and relevant with the owner and timescale of each step clearly identified. Action plans are sent to HMIP and published on the HMPPS web based Prison Finder. Progress against the implementation and delivery of the action plans will also be monitored and reported on.

| Term | Definition | Additional comment |
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| Agreed | All of the recommendation is agreed with, can be achieved and is affordable. | The response should clearly explain how the recommendation will be achieved along with timescales. Actions should be as SMART (Specific, Measureable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress. |
| Partly Agreed | Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons. | The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There must be an explanation of why we cannot fully agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons. |
| Not Agreed | The recommendation is not agreed and will not be implemented. This might be because of commissioning, policy, operational or affordability reasons. | The response must clearly state the reasons why we have chosen this option. There must be an explanation of why we cannot agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons. |



ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP & YOI LOW NEWTON

| 1. Rec No | 2. Recommendation | 3. Agreed/Partly Agreed/Not Agreed | 4. Response Action Taken/Planned | 5. Responsible Owner | 6. Target Date |
|-----------|---|------------------------------------|---|----------------------|----------------|
| | Main recommendation | | | | |
| | To the governor | | | | |
| 5.1 | The prison should ensure women receive consistent offender management support, especially in the lead up to their release. Managers should monitor the support and implement necessary changes. (S49) | Partly Agreed | <p>This recommendation is partly agreed as the prison does not have full control of the release planning for Low and Medium risk offenders. Community Rehabilitation Companies (CRCs) are responsible for resettlement planning in the last 12 weeks of a prisoner's sentence. The prison will ensure women receive consistent OM support prior to handover of responsibility in the lead up to release.</p> <p>However, once the female estate Offender Management in Custody (OMiC) model has been agreed the prison will be implementing this, which in turn should see improvement of consistency around offender management support including lead up to release.</p> <p>The OMiC model is anticipated to be agreed late October 2018, moving roll out into 2019 due to elements of the Probation Offender Manager Role.</p> | Governor | September 2019 |
| | Main recommendation | | | | |
| | To the governor and HMPPS | | | | |
| 5.2 | Low Newton and HMPPS should, with partner organisations, explore alternatives to using the prison as a place of safety for women with significant and acute mental health problems. (S48) | Agreed | <p>HMP Low Newton and HMPPS will explore the issues with partner organisations, primarily NHS England (see below for further details), however a significant strategic shift in sentencing policy is required along with the infrastructure to support the change.</p> <p>The NHS-led 'Liaison and Diversion Service' (L & D) is the primary route of diverting women away from custody and is available in HMP Low Newton's region. The L & D Service operate out of police stations and courts to identify and assess those with vulnerabilities and refer them to treatment and support (including diversion away from prison where appropriate). As this is outside the control of the establishment and of HMPPS, the Governor will</p> | Governor | |



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| | | | not commit to any target dates but will actively work with the NHS to support their diversion efforts. | | |
| | Main recommendation | | | | |
| | To HMPPS | | | | |
| 5.3 | The prison should be equipped with full body scanner technology to help prevent illicit substances and other items from being smuggled in. (S47) | Not Agreed | This recommendation is not agreed due to funding constraints. Although introduction of full body scanners is being considered across the Women's Estate, this has not been approved and no dates are available. HMPPS cannot commit to the introduction of the equipment at HMP Low Newton at this time. | Governor | |
| | Recommendations | | | | |
| | Safe and supportive relationships | | | | |
| 5.4 | Issues raised through consultations with women about safety should be addressed and information from exit surveys used to inform the prison's safety policy. (1.22) | Agreed | Monthly Resident Consultation Committee meetings are conducted with the wing representatives. Any concerns or issues raised in relation to Safety are allocated as an action to an identified manager to address and feedback at the next meeting. Any safety concerns that are raised through the formal complaint process are also addressed and investigated by the Supervising Officer/Custodial Manager considering the complaint. Where appropriate, this is also investigated by the Safer Custody department and appropriate actions are taken. In order to ensure wider consultation and enable a more accurate picture of perceptions of safety, an additional focus group will be held quarterly with a random selection of residents. The exit survey will be reviewed to encourage feedback. Outcomes from all will become a standing agenda item on Safer Custody Committee Meetings to ensure strategic oversight and appropriate responses. | Governor Governor | Completed November 2018 |
| | Self-harm and suicide prevention | | | | |
| 5.5 | The prison should ensure that there are always enough trained Listeners | Partly Agreed | This recommendation is partly agreed. HMP Low Newton endeavour to have at least 6 trained listeners amongst the population, but this cannot always be maintained as trained listeners are often released or transferred to the | | |



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| | to provide 24-hour support. (1.32) | | <p>nearby open prison, HMP Askham Grange, on direction from the parole board, sentence planning or due to population pressures.</p> <p>The Samaritans resources to train are also limited and they cannot provide on-demand training. A minimum number of suitable candidates/residents are required to be selected and ready to commence training before the Listener training can take place and thereby hindering a sufficient complement of Listeners at all times. The training schedule and resilience of the scheme were reviewed in June 2018 with the Samaritans and the current position is agreed as a practical and reasonable arrangement which will provide sufficient Listeners.</p> | Governor | Completed |
| | Safeguarding (protection of adults at risk) and women with complex needs | | | | |
| 5.6 | Information from the local safeguarding board should be disseminated to key staff within the prison and the safeguarding policy should be updated. (1.38) | Agreed | Local Criminal Justice Board (LCJB) newsletters and appropriate information will be forwarded to relevant staff as and when published and discussed in team meetings. The 'Safeguarding Adults and Children' policy will be updated and agreed by September 2018. Staff attending any form of Safeguarding Training on behalf of the department will feed back to relevant staff at team meetings. A request for staff from HMP & YOI Low Newton to attend local safeguarding board meetings has been submitted and the Governor is awaiting response as at July 2018. | Governor | September 2018 |
| | Disciplinary procedures | | | | |
| 5.7 | Women's concerns about their own safety raised during adjudications should be investigated promptly. (1.48) | Agreed | A protocol will be put in place for Adjudicating Governors to follow if/when residents raise concerns about their safety in adjudications. All events when residents report concerns will be referred for investigation to residential or safer custody managers. | Governor | August 2018 |
| 5.8 | The condition of the segregation unit exercise yard should be improved. (1.56, repeated recommendation 1.69) | Agreed | A feasibility study is to be undertaken to review improvements to the care and separation unit exercise yard. Good practice from the Women's Estate will be sought as part of the feasibility study and appropriate improvements will be made. | Governor | September 2018 |
| | Substance misuse | | | | |



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| 5.9 | Prescribing should be flexible and based on an individual approach that provides women with continuity and supports their safe release into the community. (1.69) | Agreed | <p>Non-clinical Drug and Alcohol Recovery Team (DART) co-ordinators will arrange all appointments for individuals who are due at court or released to ensure continuing care from custody to community. However, if the resident declines to engage, the prison will undertake this responsibility to ensure smooth transition for the resident from custody to the community provider.</p> <p>The issue of the prescribing of Buprenorphine has been raised at a Northern Regional Drug and Alcohol Recovery Team level as this is a policy decision which affects establishments across the North East Region. Professionals working within the establishment are working within the parameters of the current guidance. Buprenorphine is now available to all women, if clinically indicated, as a second line choice</p> | <p>Governor</p> <p>Governor and Director of Spectrum CIC/Director of G4S Healthcare (Healthcare providers)</p> | <p>October 2018</p> <p>Completed</p> |
| 5.10 | Single cells should not be used as doubles. (2.9, repeated recommendation 2.10) | Not Agreed | <p>This recommendation is not agreed as the occupancy of prison cells is determined by establishments and certified by the Prison Group Director (PGD) in accordance with Prison Service Instruction (PSI) 17/2012, which provides clear guidelines for determining cell capacities. Cells will only be shared where a PGD has assessed them to be of adequate size and condition for doing so. All accommodation is compliant with the certified cell certificate.</p> <p>The wider problem of crowding in prisons is a longstanding national issue that can only be addressed through sustained additional investment in the estate over the long term. Crowding is the result of population levels that exceed the system's total certified normal accommodation (CNA). Holding two women in a single cell is facilitated to accommodate national population pressures and although this does not breach HMPPS standards for crowded accommodation, it is not a desirable practice.</p> <p>HMPPS' strategy for reducing prison crowding entails the incremental replacement, as resources allow, of older, crowded prisons with new accommodation that is safe, decent, and uncrowded. As plans to transform the prison estate gather pace and more new prisons are delivered while existing crowded unsuitable capacity is closed, a steady reduction in crowding is achievable.</p> | Governor | |
| 5.11 | The prison should investigate why so many women said they had been prevented from | Agreed | This issue will be investigated by the Prison's Safer Custody Team through the Monthly Resident Consultation Committee meetings with the wing representatives from all areas. A report will be provided to the Governor with recommendations and this will subsequently be considered at a Senior Management Team meeting. Actions taken will be recorded in the minutes of | Governor | November 2018 |



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| | making a complaint and address any issues. (2.38) | | the Senior Management Team meetings and the Safer Custody Team meetings. | | |
| | Legal rights | | | | |
| 5.12 | The prison should investigate and address women's negative perceptions of the way legally privileged mail is managed. (2.44) | Agreed | <p>A notice will be published to all staff about the handling of resident's post and particularly handling of legally privileged mail. Staff dealing with legally privileged mail will be individually reminded of their responsibilities through direct briefings with line managers.</p> <p>The issue of women's negative perceptions will be raised with the residents' Consultative Committee to explore their perceptions and understanding of the processes the prison follows in respect of legal mail. Actions arising from the discussion will be addressed. This will be reviewed at future Resident Consultation Committee meetings to measure whether perceptions have changed.</p> | Governor Governor | August 2018 December 2018 |
| | Health services | | | | |
| 5.13 | Primary care and inpatient facilities should not be co-located. (2.61, repeated recommendation 2.62) | Not Agreed | This recommendation is not agreed as due to the infrastructure of the prison, it is not possible to separate primary care and inpatient facilities. | Governor and Director of G4S Healthcare (Healthcare provider) | |
| 5.14 | Emergency resuscitation equipment and medicines should be in good order, stored appropriately and easy to access. An effective monitoring system should be in place and all prison staff should be familiar with the emergency code protocol and feel confident about using it. (2.62) | Agreed | <p>Since the inspection a review of emergency resuscitation equipment has been undertaken. Equipment is accessible, and emergency "Grab Bags" have been introduced which contain the relevant medication required in an emergency situation. A weekly checking mechanism is now in place and all equipment is inspected to ensure that it is in good order and that medicines are in date.</p> <p>The emergency code protocol will be incorporated into the security induction talk for all key holders so that all staff (operational, non-operational, and contracted) are briefed and are confident in its use. It will be reiterated in an annual notice to colleagues. This will be tested as part of the security assurance programme</p> | Governor and Director of G4S Healthcare (Healthcare provider) Governor | Completed August 2018 |
| 5.15 | All stock medicines should be obtained in line with legal requirements. (2.82) | Agreed | A system has been implemented and stock reconciliation procedures have been established for medicines to treat minor ailments. | Governor and Director of Spectrum | September 2018 |



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| | | | <p>Spectrum have submitted an application for the renewal of the Controlled Drug licence, and the prison had a successful inspection visit on 22 June 2018 and are now awaiting receipt of the licence.</p> <p>HMP and YOI Low Newton now has a dedicated pharmacist (employed by Spectrum) working within the establishment. The pharmacist countersigns all requisitions as required by law.</p> | CIC/Director of G4S Healthcare (Healthcare providers) | |
| 5.16 | In-possession medication should be prescribed, reviewed and administered by health care professionals in line with an up-to-date policy that reflects current prescribing guidelines, and includes a robust risk assessment of the patient and the medication. (2.83) | Agreed | <p>The healthcare providers, Spectrum and G4S, now have an overarching policy in relation to In-Possession medication; this is available to all clinicians. The Chief Pharmacist and Health and Justice Operational Lead from Spectrum is to facilitate a desk top exercise during July 2018 to reinforce how it is used in practice by all professionals. There will be representation from a range of providers at this event, including those from HMP and YOI Low Newton</p> <p>NHS England expects all healthcare providers to adhere to the NHS Standard Contract which includes the need to meet professional standards. In-possession medication status is now recorded on all patients and should be reviewed by health care professionals whenever prescribed or if the patient's circumstances change. Risk assessment is a dynamic process. A new standardised risk assessment has been uploaded onto the SystmOne Clinical Tree to assist in this process.</p> | <p>Governor and Director of Spectrum CIC/Director of G4S Healthcare (Healthcare providers)</p> <p>Governor and Director of Spectrum CIC/Director of G4S Healthcare (Healthcare providers)</p> | <p>August 2018</p> <p>Completed</p> |
| 5.17 | Medicines should be administered in line with recommended dosage schedules for optimal and effective care, and procedures should be put in place to reduce the quantity of well-known tradeable medicines prescribed. (2.84) | Agreed | <p>Clinical judgement, assessment of the patient, and consideration of the individual patients needs is utilised to guide the prescribing of medication including well-known tradable medicines. In some cases pain relief medicine is prescribed for symptomatic relief on an as required basis to enable a more flexible and responsive administration of medication to control pain. This is, outside of the current drug administration times which take place three times daily.</p> <p>Most tradable medication is prescribed not in possession and there is a system in place to ensure that patients are not secreting medication in order to trade. In an effort to improve patient safety and reduce the abuse of tradable medications within prison, there are plans to implement a system-wide initiative to tackle the issue. Spectrum Community Health CIC's 'Pain Management Project' intends to ensure the right medications are prescribed as safely as possible and to separate out the genuine cases presented by patients from the false ones. There is a pilot planned in the regional Drug Reform prison, and the Head of Healthcare from HMP and YOI Low Newton</p> | <p>Governor</p> <p>Governor and Director of Spectrum CIC/Director of G4S Healthcare (Healthcare providers)</p> | <p>Completed</p> <p>December 2018</p> |



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| | | | <p>has approached Spectrum to pilot this at HMP and YO1 Low Newton when that phase has been concluded. HMP and YO1 Low Newton will review feedback from the pilot and implement findings as appropriate (expected by December 2018).</p> <p>There is also an identified list of tradable medicines, and trends and prescribing issues are reviewed at the Regional Medicines Management meeting. Tradable medication is also reviewed as part of the monthly Contract.</p> | | |
| 5.18 | Patients being hospitalised under the MHA should be transferred within current Department of Health transfer guidelines. (2.98) | Not Agreed | This recommendation is not agreed as although every effort is made to complete Mental Health Act transfers within the guidelines, transfers are dependent on a number of factors such as the completion of appropriate assessments, administrative processes within the NHS, and the availability of accommodation in mental health hospitals and other related issues. | Governor and Director of Tees, Esk and Wear Valley NHS Mental Health Foundation Trust (Healthcare providers) | |
| | Learning and skills and work activities | | | | |
| 5.19 | The education provider should ensure that all identified learning needs are incorporated into teaching plans so that women consistently receive the support they need. (3.18) | Agreed | All teaching plans will be subject to audit by the Head of Reducing Reoffending. The education provider (Novus) will use these internal audits and feedback as a performance tracking/improvement tool to ensure identified learning needs are incorporated into teaching plans. | Director of Novus (education provider) | September 2018 |
| 5.20 | The prison should improve retention on maths and some vocational training courses. (3.25) | Agreed | Retention rates are reviewed monthly at the local governance board and the Reducing Reoffending Team at the prison will look at sequencing learners more effectively in order to maximise retention for maths, English and vocational training, measured by attrition/completion rates. This will be achieved by reducing the length of teaching sessions when the prison is re-profiled in summer 2018; revising the risk assessments for classes by September 2018; introducing an Academy model which gives residents a clear career path from completion of basic skills into vocational work from September 2019. | Governor | September 2018 |



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| | | | The prison is committed to improving communications and procedures with residents to ensure improved attendance/retention and is therefore utilising elements such as 'Way Out TV' to encourage learner participation. | | |
| | Physical education and healthy living | | | | |
| 5.21 | There should be a suitable outdoor area for PE activities. (3.31) | Not Agreed | This recommendation is not agreed due to financial constraints. Capital funding will be prioritised for more urgent capital works and there is insufficient funding for refurbishing/improving the outdoor Physical Education (PE) space. | Governor | |
| | Strategic management of resettlement | | | | |
| 5.22 | Subject to appropriate risk assessments, ROTL should be used more widely to support resettlement planning. (4.6, repeated recommendation 4.6) | Not Agreed | HMP & YOI Low Newton will continue to use Release on Temporary Licence (ROTL) as a means to support resettlement for eligible and suitable women where possible. In practice, however, it is imperative to utilise places in the open estate as fully as practicable, and the transfer of women to HMP Askham Grange impacts on the number of women at HMP Low Newton who are suitable for ROTL. In light of this, HMP & YOI Low Newton cannot commit to a wider use of ROTL at the establishment in the future. | Governor | |
| | Offender management and planning | | | | |
| 5.23 | Resettlement plans compiled by CRC staff should be based on women's HDC eligibility date. (4.14) | Not Agreed | This recommendation is not agreed as the CRC contract at present states that resettlement planning should occur within the last 12 weeks of sentence based on the Conditional Release Date. Whilst there is an informal arrangement for CRCs to consider Home Detention Curfew eligibility dates, the prison have no authority to enforce this and therefore cannot commit to adhere to the recommendation in all cases. | Governor | |
| | Reintegration planning | | | | |
| 5.24 | All women released from Low Newton should have a resettlement plan, which outlines work that has been undertaken across all resettlement pathways and include any | Agreed | Following changes in procedures and recruitment within the Offender Management Unit function, all residents now released from HMP and YOI Low Newton have a resettlement plan. | Governor | Completed |



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| | outstanding areas that need addressing. (4.28) | | | | |
| 5.25 | The prison should ensure that outcomes for women are monitored post-release, especially in relation to accommodation, and used to inform service development. (4.29) | Not Agreed | This recommendation is not agreed as the outcomes for women are monitored by the CRC. The prison cannot currently obtain detailed data to conduct its own monitoring of post release outcomes alongside that of the CRC's own data collation processes. Currently only very basic information, which is not prison specific, is available. Whilst work is being undertaken to negotiate sharing of information, compliance cannot be guaranteed. | Governor | |
| 5.26 | Women should be able to participate in relationship and parenting courses. (4.38, repeated recommendation 4.43) | Agreed | <p>The Drug and Alcohol Recovery Team have a programme relating to the impact of substance misuse on parenting. The Prison also runs the Freedom Programme focusing on relationships and domestic violence which explores the impact on the residents' ability to parent effectively. Two courses have been delivered in 2018 with another scheduled for July 2018.</p> <p>Additionally, as part of the new developments within the family strategy, there are plans to develop provisions further through the new learning and skills contract in September 2019. Additional services are available for purchase from the CRC's which include women's specific services and interventions.</p> | Governor Governor | Completed September 2019 |
| 5.27 | The prison should explore and address the reasons why so many women do not receive visits and consider new ways in which contact with the outside world can be maintained, for example, through Skype. (4.39) | Partly Agreed | <p>This recommendation is partly agreed as the prison cannot commit to address the reasons why some women do not receive visits in advance of knowing those reasons and what would be required to address them; and nor can the prison commit to introducing some alternative means of maintaining outside contact, such as Skype, due to funding constraints and unresolved policy questions.</p> <p>A detailed analysis is to be undertaken of residents that don't receive any visits and don't have any known family ties or links to external support. The prison will extract information from the Prison Service database (NOMIS) to review trends and discuss at the Family and Significant Others Pathway meeting. Appropriate support will provided for this group following the analysis.</p> <p>Communications have been sent out to all residents regarding the availability of accumulated visits, the exchange of Visits Orders for pin phone credits, and availability of Prison visitors to highlight provisions.</p> | Governor Governor | March 2019 Completed |



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| 5.28 | The prison should ensure there is a sufficient range of interventions in place to address the concerns of women who have been or are at risk of domestic abuse. (4.42) | Partly Agreed | <p>This recommendation is partly agreed as it cannot be guaranteed that all women will have access to appropriate interventions due to insufficient time at the prison or insufficient resource to facilitate the volume of programmes this would require.</p> <p>A full timetable for the Freedom programme for the forthcoming year is to be produced and adhered to. This will provide four programmes a year with a maximum of 12 participants in each group (see also response at 5.26).</p> <p>In addition to the Through The Gate (TTG) services provided by the CRCs, further services can be purchased by the prison via their Rate Cards. These include specific Women's services such as Positive Pathways for Women; Family Support-assessment and action planning, and also a range of Drugs and Alcohol services/interventions. Both CRCs also provide support for victims of domestic abuse through their Supply Chain provider 'Changing Lives'.</p> | Governor | September 2018 |
| 5.29 | The prison should offer naloxone to women being released, subject to an individual risk assessment. (4.49) | Partly Agreed | <p>This recommendation is partly agreed as a pilot in 2018/19 will make Naloxone available to suitable women on release, but HMP Low Newton cannot commit at this time to the continuation of this service in advance of the evaluation of the pilot.</p> <p>The pilot will see take-home naloxone being made available to everyone across North East prisons with a history of illicit opiate use. This task and finish group will be led by Change, Grow, Live (CGL) the psycho-social substance misuse provider.</p> | Director of Change Grow Live | October 2018 |
| 5.30 | The prison should undertake a regular analysis of the needs of women based on OASys data to ensure that the range of interventions is sufficient to meet the needs of women and to reduce their risk of reoffending. (4.54) | Partly Agreed | <p>This recommendation is partly agreed as HMP & YOI Low Newton cannot commit to ensuring that the range of interventions is sufficient to meet the needs of all of the establishment's women due to constraints in funding and the range of available interventions.</p> <p>An annual needs analysis will be conducted using information from OASys reports to inform the range of interventions available for the population. The information collated will be included in the Reducing Reoffending Meeting agenda to ensure available interventions are appropriate for the population to reduce their risk of reoffending.</p> | Governor | December 2018 |



| Recommendations | |
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| Agreed | 16 |
| Partly Agreed | 6 |
| Not Agreed | 8 |
| Total | 30 |

