

Action Plan: HMP & YOI Styal

Action Plan Submitted 19 December 2018

A Response to the HMIP Inspection

Report Published 5 September 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		
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 (Spec 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 <b>mus</b> t 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 <b>must</b> 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 STYAL

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 Ministry of Justice				
5.1	The Ministry of Justice should reconsider the decision not to provide authority and funding to refurbish the disused buildings outside the prison gate into supported accommodation for women released from Styal. (S44)	Not Agreed	<ul> <li>This recommendation is not agreed at this point in time as the decision on the design of the Women's Estate is yet to be published. The Ministry of Justice (MoJ) Estates will need to consider funding streams and this initiative will be potentially driven through the Female Offender Strategy, for which a model is yet to be proposed.</li> <li>As part of the Female Offender Strategy, the MoJ will be exploring and developing more options for managing women in the community, particularly by improving accommodation provision.</li> </ul>	Director of Estates Director for Offender & Youth Justice Policy, Ministry of Justice (MoJ)	
	Main Recommendations to the Governor				
5.2	Oversight of peer workers should be sufficient to ensure that their excellent work is not undermined by legitimate concerns that women have about their access to personal information and privileges. (S42)	Agreed	The prison will centralise the line management of peer workers, introduce bi- monthly performance meetings, and produce clear job descriptions. The practice of peer workers handling mail, complaints and other prisoners' personal information has now ceased; all prisoner information is now safeguarded using new processes i.e. officers now issue complaint responses directly to prisoners.	Governor	December 2018 Completed

			Processes will be put in place to safeguard personal information and ensure that staff and, where appropriate partner agencies have only access to relevant personal information.	Governor	December 2018
5.3	There should be effective measures to increase significantly the proportion of women who achieve their functional skills qualifications in English and mathematics. (S43)	Not Agreed	<ul> <li>This recommendation is not agreed as it may prove difficult to significantly increase the proportion. However, HMP &amp; YOI Styal will commit to ensure the proportion of women who achieve functional skills qualifications in English and mathematics is increased.</li> <li>The functional skills strategy will be reviewed to ensure these skills are prioritised.</li> <li>During the current retendering of the Offender Learning and Skills Service (OLASS) contract, specific attention will be paid to ensure literacy and numeracy outreach support in workshops and vocational training is achieved.</li> <li>A review of the functional skills strategy will take place. It will include measures and targets to monitor performance and give assurance; the targets will regularly be reviewed at bi-laterals with the Governor / Head of Function / Head of Learning and Skills and performance standards at the quarterly held Quality Improvement Group (QIG). There will be early indicators to highlight non-performance to ensure this is effectively managed and mitigated; these will be raised at the regular review meetings previously noted. Attendance to sessions, both within education and in outlying areas, will monitored and reported to the Senior Management Team; action will be taken promptly to address non-attendance. Priority will be given, across the site, to English and mathematic qualifications.</li> </ul>	Governor	
	Recommendations				
	Courts, Escort and Transfers				
5.4	Women should be held in court cells for the minimum possible period and arrive at Styal before 7pm. (1.2, repeated recommendation 1.5)	Partly Agreed	This recommendation is partly agreed due to operational reasons. The Women's Estate is significantly dispersed with longer journeys at times resulting in later arrivals. The objective of minimising the time prisoners spend waiting in court cells is reflected in the Prison Escort and Custody Services (PECS) contract. Where late arrivals occur and it is confirmed that the PECS contractor is culpable of the failing, remedies built into the contract to address the poor performance will be used. The implementation of Digital Warrants will reduce	Head of Custodial Contracts	Completed and Ongoing

			the waiting time in court cells allowing for PECS contractors to depart without having to wait for court officials to produce a hard copy of a warrant.		
	Early Days in Custody				
5.5	On their first night, women should be held in clean, graffiti-free cells, receive basic supplies and be able to shower and make a telephone call. (1.7)	Agreed	Staff on the First Night Centre (FNC) will offer prisoners a shower and a phone call. In case of late arrival, staff will place the prisoner into a cell that has a shower (if this has been requested). The night Orderly Officer will be made aware during their handover and will also check the daily log to see whether a shower has been provided; if not, they will facilitate for a shower to be offered (this will be the exception). The Duty Governor, as part of their evening tasks will check whether all arrivals have been offered a shower.	Governor	December 2018
			Systems will also be put in place to ensure that staff check cells to ensure they meet the required standard for the next occupant. Checks will be made to ensure that new occupants are equipped with basic supplies. If cells are not up to standard, the staff will arrange for remedial actions to be carried out. A small stock of surplus equipment will be held within the prison stores to enable staff to replace items immediately.	Governor	January 2019
			Random, weekly management checks will be put in place to ensure cells are clean and graffiti removed. The complaints system will be reviewed to check for any complaints about missing equipment or poor accommodation.	Governor	January 2019
5.6	Induction should only be delivered to women when they are stabilised from the effects of detoxifying. (1.8)	Agreed	The delivery of induction on the day after a prisoner's arrival will be reviewed to ensure that prisoners are stabilised from the effects of detoxing before an induction is delivered. This will be done through adopting a method of assurance (a green light system) between the prison site and the drugs team to ensure prisoners are fully assessed as ready and able to participate in the induction programme.	Governor	January 2019
			Proposal is to deliver inductions once a week on a weekend. The Head of Operations to attend healthcare strategic meeting.		
	Safe and Supportive Relationships				
5.7	Quality assurance checks of the incentives and earned privileges scheme should ensure that it takes an equitable approach. (1.17)	Agreed	HMP & YOI Styal will change its management approach to monitoring and quality assuring the Incentives and Earned Privileges Scheme (IEP) from a paper based check to observing 5% of IEP boards. The boards will be attended by a Custodial Manager or Functional Head. Consideration will be given for anonymised IEPs to be reviewed by a prisoner forum to ensure a consistent approach is being applied.	Governor	December 2018

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5.8	The prison should explore why some women feel inhibited to access the safer custody hub and take action to address their concerns. (1.18)	Agreed	Focus groups will be held with representatives from different groups within the prison to explore why some prisoners feel inhibited to access the safer custody hub. The Head of Safer Custody will be responsible for progressing actions following outcomes of the focus groups if appropriate.	Governor	December 2018
	Self-Harm and Suicide Prevention				
5.9	Work to support women at risk of self-harm and suicide, and quality assurance of assessment, care in custody and teamwork (ACCT) case management, should focus on the effectiveness of support and quality of engagement by staff. (1.27)	Agreed	<ul> <li>HMP &amp; YOI Styal will change its quality assurance (QA) process. The new QA process will include compliance activity to check the effectiveness of support to women at risk of self-harm and the quality of staff engagement.</li> <li>The rollout of Suicidal and Self-Harm training and the Offender Management in Custody (OMiC) keyworker training will ensure that staff have the correct skill set to improve the quality of delivery.</li> <li>The frequency of QA will be risk based and will increase or decrease accordingly based on outcomes of the compliance activity.</li> </ul>	Governor	January 2019
	Safeguarding (protection of adults at risk) and Women with Complex Needs				
5.10	Partnership working between the prison, health care and mental health, and relevant regular staff training, should ensure that all women admitted to and discharged from the Dove unit receive consistent evidence-based support that meets their needs. (1.32)	Agreed	A review of the Dove Unit has been agreed, and will be conducted between the prison healthcare, the mental health team and NHS England (NHSE). Following the review, it is anticipated that an integrated service design to be developed to ensure those discharged from Dove Unit receive the correct standards of consistent evidence based support that meet their needs. Staff training provision will be decided following the outcome / recommendations of the review.	Governor, Director of NHS England (NHSE), Director of Greater Manchester Mental Health NHS Foundation Trust and Spectrum Community Health CIC Mental Health Provider	October 2019

	Security				
5.11	The prison should take further action to reduce the supply of illicit substances through visits. (1.43)	Agreed	The current approach to searching requires an officer from a group of over 100 to be assigned to the visits area. HMP & YOI Styal will conduct a staff re-profile to create a stand-alone visits group to help improve searching. A smaller and more consistent deployed group of staff will be assigned to this task so they will become more skilled in this role.	Governor	December 2018
			The Security department will work with National Intelligence Hubs / Regional Office Crime Units to develop intelligence and use this to reduce the risk of illicit substances entering the prison via visits.	Governor	December 2018
			HMP & YOI Styal will also work with the regional search team and the police to ensure operations can be appropriately resourced.	Governor	December 2018
			The Head of Operations has been tasked to review information providing to visitors and consider warning about penalties relating to the supply of drugs or other contraband on visits.	Governor	December 2018
	Disciplinary Procedures				
5.12	Women in segregation should have access to a daily regime. (1.56)	Agreed	A daily check sheet is in place, which outlines required actions. Prisoners now have access to a radio, distraction packs, books and to visits (which take place in the visits hall or on the unit depending on the risk).	Governor	Completed
			HMP & YOI Styal will publish the Segregation Unit's daily regime. Management checks will be carried out to ensure full compliance	Governor	December 2018
5.13	The segregation unit's exercise yard should be improved (1.57)	Agreed	HMP & YOI Styal will make improvements to the exercise yard by adding plants, seating, painting it and installing exercise equipment.	Governor	April 2019

	Substance Misuse				
5.14	<ul> <li>Women undergoing treatment for alcohol and/or drug withdrawal should receive regular monitoring through the day and night during their stabilisation.</li> <li>Prescribing should be consistent and flexible, in line with a regularly reviewed local policy that reflects current national guidance. (1.63)</li> </ul>	Agreed	All patients screened at reception as requiring a clinical substance misuse / alcohol detox are located on the FNC. Nursing staff on the first night in custody conduct a minimum of two night observations and this is recorded this on SystmOne (a clinical computer system). Overnight observations will continue if clinically necessary. Substance misuse / alcohol detox patients are managed on Waite wing where nursing staff carry out clinical observations at least twice daily and complete appropriate assessments as required. These clinical observations continue for the first five days. However, performed more frequently, if necessary. This is in accordance with National Drug Misuse and Dependence UK Guidance.	Director Spectrum Community Health Community Interest Company (CIC) Director Spectrum Community Health CIC Director Spectrum Community Health CIC	Completed Completed
5.15	Residential Units           Conditions on the houses	Partly Agreed	This recommendation is partly agreed pending consideration of available		
0.10	should be improved so that women have decent bathing and showering facilities, and sufficient graffiti-free furniture. (2.8)	Faruy Agreeo	<ul> <li>financial funding.</li> <li>The Head of Residence has conducted with prisoners a condition of houses survey about living standards.</li> <li>A repair / replacement plan will be agreed with the Estates Manager, this will include ensuring bathing and showering facilities are decent, sufficient supply of furniture and graffiti free.</li> <li>Improved weekly decency checks will be introduced and carried out by Custodial Managers. An assurance report will be provided to the Head of</li> </ul>	Governor / Governor / Executive Director, Estate Transformation Governor	Completed December 2018 January 2019
5.16	The prison should monitor call bell response times on the houses, and there should be clear guidance for women living on the	Agreed	Residence for monitoring and taking action where appropriate. A clear record to monitor response times to call bells is in place. Response times are monitored by the Residential and Operations Custodial Managers. The Head of Residential reviews this data on a bi-weekly basis and addresses any concerns.	Governor	Completed

	houses in case of an emergency. (2.9)		A notice to staff has been issued reminding them of the importance of responding to call bells. Clear emergency guidance has been provided to the prisoners.	Governor	Completed
			Health and Safety carry out emergency evacuation tests.	Governor	Completed
	Equality and Diversity				
5.17	The Governor should establish systems for the management of equality and diversity that ensure that women from the protected characteristic	Agreed	HMP & YOI Styal has inputted positively into a piece of work commissioned by the Director of Women's Prisons and lead by the Women's Estate lead for Equalities. The project will enable the sharing of good equality and diversity practice, assist with policy input, provide training, support sites and address concerns within any of the equality strands.	Governor	Completed and Ongoing
	groups have their needs met. (2.18)		reviewed to ensure prisoners from protected characteristic groups have their needs taken forward. Equality data will be viewed.	Governor Executive Director,	December 2018 Ongoing
		HM Prison and Probation Service (HMPPS) Equalities Interventions and Operational Practice Group will as part of its role, offer advice and support to the prison where necessary.	Rehabilitation & Assurance		
5.18	The prison should take action to promote confidence in the complaints system among women, and staff should ensure that their responses to complaints are legible. (2.34)	Agreed	Staff hand out typed responses to complaints, rather than peer mentors. The Governor has promoted confidence in the new complaints system process by publicising it through notice boards. For new arrivals this is promoted through peer support workers.	Governor	Completed
	Health Services				
5.19	All clinical areas should be suitable and compliant with infection control guidelines. (2.49, repeated recommendation 2.84)	Agreed	An Infection Prevention Control (IPC) audit was completed in November 2017 with a number of recommendations acted upon. The Nurse Lead areas of responsibility is to oversee and ensure that IPC measures are in place. This takes place daily during clinic hours. A full re-audit was completed in February 2018 which evidenced that areas RAG rated as Red had been addressed (rating meaning active major concerns, overdue or requiring immediate action and escalation through internal governance processes). The Healthcare IPC Lead within the service attends a regional IPC update meeting. Healthcare has a contracted a cleaner (supplied by AMEY) to clean	Director of Spectrum Community Health CIC	Completed and Ongoing



		clinical areas. The prison Healthcare orderly continues to clean communal areas within healthcare.		
Women should be able to complain about health services through a separate well-publicised confidential system, and the health applications process should preserve patient confidentiality.	Agreed	The Healthcare complaints process was reviewed in May 2018. New confidential healthcare complaint boxes are located outside the healthcare building and one is located on Waite Wing. Well publicised notices have been circulated advising patients on the process of raising a concern / complaint with healthcare and instructions to discipline staff to inform patients to use the dedicated boxes as opposed to passing concerns to officers.	Director Spectrum Community Health CIC Director Spectrum Community Health CIC	Completed and Ongoing Completed and Ongoing
(2.50)		The Healthcare team are monitoring the complaints process to ensure complaints are coming through this confidential route and not via the prison. This team will continue to monitor any issues at the Queensland meeting.	Director Spectrum Community Health CIC	Completed and Ongoing
Women should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their clinical record. (2.66, repeated recommendation 2.101)	Agreed	A pharmacy-led weekly clinic medicine use review commenced in healthcare from mid-August 2018. This includes a full review of prescribed medications and a compliance check for patients in possession of medication. Medication reviews are documented on SystmOne. In the event of a patient not being able to attend healthcare, the pharmacist reviews clinical notes prior to seeing the patient and then makes a clinical entry on SystmOne after the consultation.	Director Spectrum Community Health CIC	Completed
2.101)		For patients receiving multiple medications, the medication review is performed to include a multi-professional approach by using a GP or Advanced Nurse Practitioner.	Director Spectrum Community Health CIC	December 2018
		SystmOne will be available on two laptops so that clinical information of patients residing in the Segregation and Dove Unit can be recorded.		
Women should receive their medication promptly, including repeat prescription medication	Partly Agreed	This recommendation is partly agreed as currently the process to obtain routine medication can take a few days and can be delayed further if admission to healthcare falls during the weekend.		
and following arrival, so that there are no unnecessary delays or gaps in treatment. (2.67)		All patients upon arrival at HMP & YOI Styal are asked to complete a consent form for their community GP to be contacted to establish their current medication and any health issues. All patients with a prescription for urgent medication, non-urgent will be prescribed it on their first night, and, for those patients who have their medication marked in a clear container.	Director Spectrum Community Health CIC	Completed
	complain about health services through a separate well-publicised confidential system, and the health applications process should preserve patient confidentiality. (2.50)Women should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their clinical record. (2.66, repeated recommendation 2.101)Women should receive their medication promptly, including repeat prescription medication and following arrival, so that there are no unnecessary delays or	complain about health services through a separate well-publicised confidential system, and the health applications process should preserve patient confidentiality. (2.50)AgreedWomen should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their clinical record. (2.66, repeated recommendation 2.101)AgreedWomen should receive their medication promptly, including repeat prescription medication and following arrival, so that there are no unnecessary delays orPartly Agreed	women should be able to complain about health services through a separate well-publicised confidential system, and the health applications process should preserve patient confidentiality.         Agreed         The Healthcare complaints process was reviewed in May 2018. New confidential system, and the health applications process should preserve patient confidentiality.         Well publicised notices have been circulated advising patients on the process of raising a concern / complaint with healthcare and instructions to discipline staff to inform patients to use the dedicated boxes as opposed to passing concerns to officers.           Women should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their clinics including medicine use reviews, which should be documented in their clinical record. (2.66, repeated recommendation 2.101)         Agreed         A parmacy-led weekly clinic medicine use review commenced in healthcare from mid-August 2018. This includes a full review of prescribed medications and a compliance check for patients in possession of medication reviews are documented on SystmOne. In the event of a patient not being able to attend healthcare, the pharmacis threws clinical notes prior to seeing the patient and then makes a clinical entry on SystmOne after the consultation.           Women should receive their medication promptly, including repeat prescription medication and following arrival, so that there are no unnecessary delays or gaps in treatment. (2.67)         Partly Agreed         This recommendation is partly agreed as currently the process to obtain routine medication and any health issues. All patients with a prescription for urgent medication, non-urgent will be prescribed it to their first all patients with a prescription for urgent medication, non-urgent will be prescribed it to their first night,	Women should be able to complain about health services through a separate well-publicised confidential system, and the health applications process should preserve patient confidentiality. (2.50)AgreedThe Healthcare complaint power are located outside the healthcare building and one is located on Waite Wing. Well publicised notices have been circulated advising patients on the process of raising a concern / complaint with healthcare and instructions to discipline patient confidentiality. (2.50)Director Spectrum Community Health CICDirector Spectrum Community Health CICWomen should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their 2.101)AgreedA parmacy-led weekly clinic medicine use review commenced in healthcare repeated recommendation 2.101)Director Spectrum Community Health CICWomen should have access to pharmacy-led clinics including medicine use reviews, which should be documented in their 2.101)AgreedA pharmacy-led weekly clinic medicine use review commenced in healthcare repeated recommendation 2.101)Director Spectrum Community Health CICWomen should receive their medication reviews are documented on SystmOne. In the event of a patient not being able to attend healthcare, the pharmacist reviews isincial notes prior to seeing the patient and then makes a clinical inclusion for dipication.Director Spectrum Community Health CIC2.101)For patients receiving multiple medications, the medication review is performed to include a multi-professional approach by using a GP or Advanced Nurse Practitioner.Director Spectrum Community Health CICWomen should receive the

			Prescribers now have access to the Summary Care Record on the FNC portal to ensure that community prescribed medications can be issued without delay.	Director Spectrum Community Health CIC	Completed
			<ul> <li>HMP &amp; YOI Styal has an on-site Pharmacy with an out of hours medication store where prescribed medications can be obtained. There is also access to paper based prescriptions Family Practice10s for urgent prescribing if the Pharmacy does not have the required amount of medication in stock. Repeat medication is re issued in a week advance.</li> <li>As part of the first night reception process a risk assessment on urgent medications takes place along with the medicines in-possession risk assessment which is completed as part of the second health screening.</li> </ul>	Director Spectrum Community Health CIC Director Spectrum Community Health CIC	Completed
5.23	There should be increased communication and more consistent partnership working between the prison and the mental health team to optimise the delivery of mental health services for women. (2.77)	Agreed	Greater Manchester Mental Health NHS Foundation Trust and HMP & YOI Styal will develop a memorandum of understanding (MoU) of communication and more consistent partnership working, to include current commissioning arrangements in mental health provision across the prison.	Director Spectrum Community Health CIC, the Governor and the Director of Greater Manchester Mental Health NHS Foundation Trust	December 2018
5.24	Group work should be re- launched to maximise the support options for women with primary mental health needs. (2.78)	Agreed	The mental health team have existing group work material to meet the needs of prisoners with primary mental health needs. Group work is now established and ongoing in the same place at the same time on a weekly basis.	Director Spectrum Community Health CIC	Completed
5.25	Transfers under the Mental Health Act should occur within the current Department of Health transfer time guidelines. (2.79, repeated recommendation 2.120)	Partly Agreed	This recommendation is partly agreed as although every effort is made to expedite transfers and assess patients promptly, 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. The Prison Transfer and Remission Guidance published by the Department of Health in 2011 has not been agreed by NHS England (NHSE). NHSE will be consulting on refreshed guidance in relation to transfer and remissions with timescales that consider clinical urgency and need.	Director of NHSE	2019-20

			Locally at HMP & YOI Styal there are currently no patients awaiting a secure bed from a mental health approved hospital. The wait for secure beds are constantly monitored by the mental health team, any delays in access to secure beds are raised directly with commissioners.	Director Spectrum Community Health CIC	Completed and Ongoing
5.26	The prison should develop a memorandum of understanding on social care with the local authority and Spectrum CIC. (2.81)	Agreed	This recommendation is agreed on the basis that the provision of adult social care is subject to the needs assessment, funding and prioritisation processes of the local authority's adult services. There is a local agreement between the local authority and Spectrum regarding social care and the prison facilitates assessments when required. This is a prison led action. It is for the local authority to make arrangements to ensure the care and support needs of prisoners are met, subject to their assessment and application of the eligibility criteria in the Care Act. Prison Service Instruction (PSI) 03 / 2016 Adult Social Care supports the implementation of the mandated actions of the Care Act 2014 within prisons. All staff within HMP & YOI Styal will ensure that individuals with needs for care and support are identified and referred for assessment, and that the prison enables access to care and support services where these are provided. A MoU is mandated between all prisons and Local Authorities where applicable. A MoU between Key Care (who provide social care), HMP & YOI Styal and the healthcare provider will be developed. A meeting with the council member responsible for adult social care will be arranged to formalise the provision of service to address social care needs.	Governor	December 2018
	Learning and Skills and Work Activities				
5.27	Novus managers should ensure that staffing issues do not disrupt learning, and that the appropriate learning resources are available and used effectively. (3.15)	Partly Agreed	This recommendation is partly agreed due to operational reasons. It is not possible to commit that staffing issues will not disrupt learning. A review of all learning resources has been completed. A variety of resources is now used in all sessions. This is being monitored by the Head of Learning and Skills regularly through contract compliance management checks and escalation to Novus the education provider where appropriate.	Governor	Completed
5.28	The virtual campus should be fully operational to support women's learning, development and job search. (3.16)	Agreed	Virtual Campus (VC) provision is being updated to ensure it offers a service that meets the needs of prisoners'. VC will be re-launched. The volume of usage will be monitored to ensure it is being fully utilised; this action will be overseen by the Head of Learning and Skills.	Governor	May 2019

5.29	Tutors should check women's learning regularly to ensure that they have a secure understanding of the concepts and skills taught in their lessons. (3.25)	Agreed	Regular checks will be conducted through lesson observations and plans and checking whether learning objectives are focused and whether improvement can be made. Individual learning plans (ILPs) will contain targets and milestones; tutors will carry out regular tutorials, in line with ILPs, to ensure individual targets are met; success rates will be monitored through the contract, any decrease will initiate a review of the topic and its delivery methods. The Head of Learning and Skills will monitor via the QIG meetings; any concerns will be raised to the Governor and remedial actions put in place to raise performance standards.	Governor	January 2019
5.30	Tutors and instructors should set women useful individual learning targets, and use learning resources to match women's abilities. (3.26)	Agreed	Novus ensures ILPs are being used more effectively through monitoring. The Head of Learning and Skills also monitors through compliance checks. Individual achievable targets are set for each learning areas and resources introduced appropriate to an individual's ability level.	Governor	Completed
5.31	All women should use the appropriate personal protective equipment during activities. (3.31)	Agreed	The Recycling Lives Supervisor has been reminded to ensure that prisoners wear their protective equipment when working in the recycling workshop i.e. wearing goggles.         Reducing Re-offending managers will visit workshops to carry out checks. Signage will be displayed in workshops about the importance of wearing protective equipment.	Governor Governor	Completed December 2018
5.32	All women should arrive at their activities on time, and should attend education lessons regularly. (3.32)	Agreed	A meeting was held in August 2018 involving the Head of Reducing Re- offending, Head of Residential, Head of Security and the Head of Offender Management Unit to look at improving punctuality and attendance at activities. A notice to staff has been issued about this. Staff have become more vigilant about attendance and punctuality at activities and education attendance has since improved.	Governor	Completed
5.33	Instructors should recognise and record the skills that women develop during their work inside and outside the prison. (3.36)	Agreed	<ul> <li>The Head of Learning and Skills will review the type of achievements prisoners can develop from working inside and outside the prison. The skills gained by individuals will be recognised and celebration of success events held to highlight achievements.</li> <li>A Work Progress form (a passport to employment type initiative) will be designed to capture skills gained e.g. attendance, punctuality, team participation, managing relationships, social skills, personal communication skills and shared with outside community placement providers/employers.</li> </ul>	Governor	April 2019 April 2019

	Offender Management and Planning				
5.34	MAPPA management levels for MAPPA nominals should be confirmed with the National Probation Service six months before a prisoner's release. (4.15, repeated recommendation 4.20)	Agreed	HMP & YOI Styal has adapted systems to ensure multi-agency public protection (MAPPA) levels are routinely achieved. MAPPA cases including nominals are now included as an agenda item at the weekly Interdepartmental Risk Management Meeting (IRMM). Cases are now scheduled to be placed on the IRMM agenda seven months prior to release. The data base will be utilised to identify such cases and cases of concern will be raised with the Senior Probation Officer (SPO) via the Custodial Manager and formally with the Function Head at the regular weekly meetings (similar to the escalation system for outstanding Offender Assessment System reports, which is proving effective).	Governor	Completed and Ongoing
			A MAPPA document is used to escalate pre-release cases to the National Probation Service, where MAPPA levels have not been confirmed for prisoners serving less than six months before release.	Governor	Completed and Ongoing
5.35	MAPPA F forms should include concise summaries of relevant risk information. (4.16)	Agreed	The IRMM will be used to coordinate relevant risk information to include in the offender information sharing report (MAPPA F form). The SPO will conduct a monthly dip sample of MAPPA Fs to assess the quality of reports and the effectiveness of the counter-signing role in ensuring the quality of reports. Local training will be carried out as a refresher for all MAPPA F report writers.	Governor	April 2019
5.36	Women should be transferred to the prison closest to their release address at least three months before their home detention curfew eligibility date. (4.20)	Partly Agreed	This recommendation is partly agreed due to operational capacity within the women's estate. A large number of prisoners serve their sentence in their home local prison and transfers only tend to take place when local prisons are reaching capacity. There are no reasons why prisoners cannot be transferred back to their home area three months prior to their home detention curfew date if this was considered the most appropriate thing to do, and providing that spaces exist	Governor	Completed
	Reintegration Planning		at the home establishment.		
5.37	All women should be able to access through-the-gate support on their day of release. (4.29)	Agreed	HMPPS is aware the performance of the probation system, including Through the Gate (TTG) resettlement services for prisoners leaving custody, is in need of improvement. Discussions with providers have taken place and an enhanced TTG offer will be offered, in addition to current Community	Executive Director, Community Interventions	Ongoing (review date of April 2019)

			Rehabilitation Companies (CRC) TTG provision, to increase the level of service by 1 April 2019 in all resettlement prisons, including women's prisons.		
5.38	The visitors' centre should provide full facilities to meet the needs of visitors. (4.40)	Not Agreed	This recommendation is not agreed as HMP & YOI Styal cannot currently agree this recommendation as the contract for the new visitor's centre has not yet been agreed and signed. It is hoped that a fully functioning visitor's centre will be in place by 2020.	Governor	
5.39	Visitors should have access to an extended range of refreshments during visits, including healthy options. (4.41)	Agreed	HMP & YOI Styal will work with partners to provide a better variety of refreshments during visits including healthy options and hot snacks or meals. Prison staff will conduct a consultation with prisoners, visitors and family services to establish their requirements / preferences and will work within its constraints / limitations to accommodate such requests.	Governor	January 2019
5.40	All women should be able to have at least one weekly visit. (4.42, repeated recommendation 4.46)	Not Agreed	This recommendation is not agreed due to national policy. IEP PSI 30/2013 requires that all prisoners including those on Basic level continue to receive the entitlements laid down in Prison /YOI Rules and other instructions in relation to visits etc. PSI 16/211 Provision of Visits and Services to Visitors, advises that convicted prisoners are entitled to a visit on reception after conviction and at least every two weeks (not two each month) thereafter, including at least one weekend visit every four weeks. There is no set maximum level entitlement to visits and this includes those on the Basic level.	Director Prisons Policy, MoJ	
5.41	There should be a greater understanding throughout the prison about the issues faced by trafficked	Agreed	Since HM Inspectorate of Prisons Inspection, Chaplaincy have co-ordinated a further awareness session on trafficking (provided by Greater Manchester Police Service).	Governor	Completed
	women. The local strategy for identifying and supporting women who are potential or actual victims of trafficking		The local strategy for identifying and supporting women will be rewritten. Awareness sessions will be included in the induction process for prisoners and in training programmes for staff. The Women's Estate Office will be contacted to raise awareness of this recommendation.	Governor	May 2019
	should focus on how women will be supported. (4.49)		The Managing Co-ordinating Chaplain will update the trafficking strategy and improve the support to women who are victims of trafficking.	Governor	May 2019
5.42	Prison managers should ensure that new arrivals are made aware of any limitations to their future employment due to their offence. (4.57)	Not Agreed	This recommendation is not agreed due to commissioning reasons. The resettlement provision for offenders, including help with employment disclosure statements will continue to take place in the final 12 weeks of their time in custody, and will form part of the enhanced Through the Gate (TTG) Resettlement Service provision agreed with CRCs to be implemented by 1 April 2019.	Executive Director, Community Interventions	

5.43	Finance, benefit and debt support should be readily available to women throughout their sentence. (4.62)	Not Agreed	This recommendation is not agreed due to commissioning reasons. The resettlement provision for offenders, including finance, benefit and debt advice, will continue to take place in the final 12 weeks in custody, and will form part of the enhanced TTG provision agreed with CRCs to be implemented by 1 April 2019.	Executive Director, Community Interventions	
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Recommendations	
Agreed	31
Partly Agreed	6
Not Agreed	6
Total	43

