

Action Plan: HMYOI Wetherby and Keppel Action Plan Submitted:17 September 2019 A Response to the HMIP Inspection: 11-21 March 2019 Report Published: 23 July 2019

INTRODUCTION

HM Inspectorate of Prisons (HMIP) and HM Inspectorate of Probation for England and Wales are independent inspectorates which provide scrutiny of the conditions for, and treatment of prisoners and offenders. They report their findings for prisons, Young Offender Institutions and effectiveness of the work of probation, Community Rehabilitation Companies (CRCs) and youth offending services 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 (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 mus 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 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: HMYOI WETHERBY AND KEPPEL

| 1. Rec No | 2. Recommendation | 3. Agreed/ Partly Agreed/ Not Agreed | 4. Response Action Taken/Planned | 5. Responsible Owner | 6. Target Date |
|-----------------|--|--|---|-------------------------|-------------------|
| | Main recommendations to the Governor | | | | |
| 5.1 | The use of force should only be used as a last resort. The application of pain-inducing techniques should only be used when there is an immediate risk of serious physical harm to the child, staff or others. (S41) | Agreed | The Terms of Reference for the weekly Use of Force (UoF) review panel will be amended to require all incidents of UoF to be scrutinised to establish whether sufficient de-escalation was attempted. Any unsatisfactory reviews will require the individual(s) concerned to have formal refresher training on de-escalation techniques. Where pain-inducing techniques have been used, the staff member applying these techniques will be subject to a de-briefing by the Use of Force co-ordinator to establish justification and if any learning can be achieved. Any incidents of unwarranted application of pain-inducing techniques will be addressed through the staff appraisal process and disciplinary action if appropriate. | Governor | September 2019 |
| 5.2 | Behaviour management systems should be simplified and the emphasis should be on reward to motivate positive behaviour. (S42) | Agreed | The Behaviour Management Strategy will be reviewed, and guidance provided to all staff on the proportionate and appropriate response required to respond to poor behaviour and promote positive engagement. The Strategy will be based on the Building Bridges Framework. | Governor | October 2019 |
| 5.3 | The core day should allow reasonable time for all children to complete all domestic tasks. (S43) | Agreed | The core day and daily regime access on each residential unit will be reviewed, and timings provided (and displayed) informing young people when they can complete domestic tasks including access to time in the fresh air, telephones and showers. | Governor | September 2019 |

| 5.4 | Release planning should be comprehensive and coordinated to reduce risk on return to the community. (S44) | Agreed | HMYOI Wetherby will review the allocations process for the pre-release course with the education provider Novus. Novus will also secure college places for young people being discharged from custody. Caseworkers will work with Youth Offending Teams (YOT's) to secure accommodation 28 days prior to discharge from custody. Risk Management training will be sourced and delivered for all caseworkers. SECURE STAIRS training programme will be scheduled and delivered to all caseworkers to improve coordinated and integrated care planning, including formulations. HMYOI Wetherby will engage with the national Youth Custody Service (YCS) Casework Review team to inform recommendations for improvements to casework across the YCS and implement agreed recommendations. | Governor | November 2019 |
|-----|--|--------|---|----------|----------------|
| | Recommendations to the Governor | | | | |
| | Safeguarding of children | | | | |
| 5.5 | All child protection referrals should meet national safeguarding protocols and should be forwarded to the local authority designated officer for investigation. (1.16) | Agreed | The Head of Safeguards and the Local Authority Designated Officer (LADO) have reviewed the current arrangements against national safeguarding protocols. Following this meeting all referrals are now submitted to the LADO with accompanying triage advice, and evidence of the submissions are retained. | Governor | Completed |
| | Suicide and self-harm prevention | | | | |
| 5.6 | The use of strip-clothing and bedding for children in crisis should be justified on every occasion and a record kept of the decision- making process. (1.23) | Agreed | A Risk Assessment pro-forma will be developed and introduced for the decision making around the use of alternative clothing (including the use of force to achieve this) to be evidenced and justified. Those subject to Constant Supervision arrangements will be seen by a Safeguards Manager daily. A management check of the Assessment Care & Custody Teamwork (ACCT) document will be undertaken daily. | Governor | September 2019 |

| | Separation/removal from normal location | | | | |
|------|--|--------|---|----------|----------------|
| 5.7 | Supervision of children on A3 landing in the segregation unit should be strengthened. (1.60) | Agreed | The staffing profile/deployment for Anson Unit (A3) has been reviewed which now provides a dedicated officer to undertake engagement and supervision of young people located on A3. | Governor | Completed |
| | Living conditions | | | | |
| 5.8 | All children at Wetherby should be able to access a shower and telephone call each day. (2.13) | Agreed | The core day and daily regime access on each residential unit will be reviewed and timings provided (and displayed) informing young people when they can access the shower and phone each day. | Governor | September 2019 |
| | Residential services | | | | |
| 5.9 | Children at both Wetherby and Keppel should be able to buy clothes. (2.20) | Agreed | A series of consultation events will be undertaken with young people to determine what types of personal clothing should be made available for purchase. The local facilities list will then be updated accordingly and a procurement process put in place. | Governor | October 2019 |
| | Consultation, application and redress | | | | |
| 5.10 | Consultation arrangements should be developed to ensure that children's voices are heard and they can contribute to positive change in the establishment. (2.28) | Agreed | The consultation arrangements for young people are to be communicated via the Induction programme and through wing signage. This will outline when meetings are to take place, and which young people represent their wing/unit. Minutes will be amended so that actions and responses are clear. Minutes will be displayed on units on a dedicated notice board. | Governor | September 2019 |
| | Strategic management of equality and diversity | | | | |
| 5.11 | An equality needs analysis should be conducted and used to inform the equality | Agreed | An equality needs analysis will be undertaken which will inform the equality policy and action plan. Actions will be monitored via the Equalities Action Group (EAG) meeting on a quarterly basis. | Governor | September 2019 |

| | policy and action plan. Performance against the plan should be monitored at the equality action group. (2.35) | | | | |
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| | Protected characteristics | | | | |
| 5.12 | Data on all protected characteristics should be analysed for evidence of disproportionality to ensure fair treatment and equal access to services and opportunities on offer. (2.46) | Agreed | Data collected on a quarterly basis across all relevant protected characteristics for different areas of work in the establishment such as Incentives and Earned Privileges (IEP), and adjudications and restraint, will be presented in a report to the Senior Management Team (SMT) by the EAG. The quarterly EAG meeting will analyse the data to identify if any disproportionality has been applied to one of the protected characteristic groups. The EAG will have responsibility to scrutinise the findings where disproportionality is identified and take appropriate action, and progress will be monitored by the SMT meeting. | Governor | September 2019 |
| | Strategy, clinical governance and partnerships | | | | |
| 5.13 | An effective monitoring system should be in place to ensure that all emergency resuscitation equipment is in good order. (2.61) | Agreed | All resuscitation bags are now sealed and a new checking system has been introduced. The governor has overall responsibility to ensure the equipment is in good order and is supported in this through the Head of Healthcare assurance checks on equipment and expiry dates monthly. Expiry dates for all resuscitation equipment are documented in the treatment room folder. The recently developed expiry sheet log is now checked monthly by the Head of Healthcare. Any expired products are removed and signed when replaced. | Governor | Completed |
| 5.14 | There should be sufficient staff to ensure that all aspects of the service are delivered. (2.62) | Agreed | The recruitment and retention strategy will continue to be implemented to ensure all vacancies are filled. The recently conducted health needs assessment will inform the further development of the service model to ensure resources are allocated to deliver the service effectively and appropriately. Co-production with the establishment will take place to ensure any changes are embedded. The commissioning plan for the Secure Stairs programme has now been approved and recruitment over the next year will ensure that sufficient Child and | Director of Leeds Community Healthcare NHS Trust | January 2020 |

| | | | Adolescent Mental Health Services (CAMHS) and substance misuse workers are in post to deliver required services. | | |
|------|---|--------|--|---|----------------|
| | Promoting health and well-being | | | | |
| 5.15 | There should be a whole- prison strategy to support health promotion, including healthy eating. (2.71) | Agreed | A local health promotion strategy will be developed by the Head of Residence and will include input from Healthcare, Education, Physical Education, Kitchen and Residence representatives. A series of health promotion events will be scheduled and delivered commencing September 2019. | Governor | September 2019 |
| | Primary care and inpatient services | | | | |
| 5.16 | Children should have timely access to the optician and dentist. (2.82) | Agreed | HMYOI Wetherby and the healthcare provider will review the referral and appointment processes to ensure appointments are triaged and allocated responsively. The provider will work with the dedicated prison service manager to reduce failure to attend rates as high levels of these impact on the efficiency of the service delivery and increases waiting times. The failure to attend rates will be monitored via the Contract Monitoring & Partnership arrangements. | Governor and Director of Leeds Community Healthcare NHS Trust | September 2019 |
| 5.17 | Failure-to-attend rates for clinics should continue to be investigated and reduced. (2.83) | Agreed | A dedicated prison service manager will be appointed to work with the healthcare provider to ensure that attendance at clinics is maximised and non-attendance investigated to reduce occurrences. All failure-to-attend incidents will be discussed at the monthly Healthcare Operations meeting and will remain a standing agenda item. | Governor | September 2019 |
| | Time out of cell | | | | |
| 5.18 | All children should be able to shower, phone home, and exercise in the open air every day. (3.12) | Agreed | The core day and daily regime access on each residential unit will be reviewed and times for domestic tasks increased. Timings will be provided (and displayed) informing young people when they can complete domestic tasks including access to time in the fresh air, telephones, and showers, both during the evenings and weekend periods. | Governor | September 2019 |
| | Education, skills and work activities (Ofsted) | | | | |

| 5.19 | Leaders and managers should continue to improve attendance rates to a consistently high level by analysing the impact of unauthorised absences and targeting actions to decrease it. (3.24) | Agreed | A review of the non-attendance/refusals protocol will be undertaken, led by the Novus Inclusion Manager, with the aim of analysing and investigating absence data to drive up attendance and achieving consistently high rates. | Governor and Director of Novus (education provider) | September 2019 |
|------|--|--------|---|---|----------------|
| 5.20 | Leaders and managers should evaluate the progress that children who are removed from class or transferred from prison make during their time at Wetherby and Keppel. (3.25) | Agreed | Extensive work is being carried out to provide progress tracking through elements of qualifications. This is particularly important if a learner does not complete a qualification if they are transferred or released from custody. Progress trackers are being prepared which will sit within the new holistic Individual Learning Plan model. Additionally, work is continuing at a national level in conjunction with the Youth Custody Service (YCS) in relation to the tracking of progress of soft skill development such as time keeping, punctuality etc. | Governor | September 2019 |
| 5.21 | Leaders and managers should improve the education, training and employment prospects of young learners on release (3.26). | Agreed | Novus is recruiting Engagement & Resettlement staff to ensure that all vacancies are filled and to build links with, Education, Training, and Employment (ETE) providers in the community, particularly national organisations. | Director of Novus | September 2019 |
| 5.22 | More children should benefit from the use of RoTL to develop valuable personal, social and employment related skills and more should leave the prison with a positive ETE destination. (3.26) | Agreed | A bi-monthly Release on Temporary Licence (ROTL) clinic has been created with Leeds Youth Offender Team to build resettlement links for young people on release. The Business Engagement Manager will identify young people who are approaching their ROTL eligibility date each month to develop employment or training options. | Director of Novus | Completed |
| 5.23 | Teachers should ensure that they consolidate and | Agreed | All Curriculum Managers now have a dedicated Curriculum Mentor who conducts supportive observations of teaching and learning assessments and takes the lead on learning walks that are partnered with HMPPS. | Director of Novus | Completed |

| | check learners' knowledge and understanding of topics taught before they move on to a new activity. (3.35) | | Middle-managers have a team level overview and staff are updated and informed through briefings, curriculum meetings and dedicated information boards for learner walks. | Director of Novus | Completed |
|------|---|--------|---|----------------------|--------------------------------|
| 5.24 | Teachers should improve the clarity of the progress targets they set for children, ensuring that they are fully understood. (3.36) | Agreed | HMYOI Wetherby introduced an Individual Learning Plan (ILP) model in August 2019. This process begins at the induction stage and has sections dedicated to the learning and progress for learners relative to their vocational pathway including English, Maths, Information Technology, and Physical Social and Health Education. Progress trackers are also being devised to enable teachers and learners to track progress through a qualification and not simply by the certificate at the end of the process. Soft targets such as punctuality are also an important part of the ILP process and learners will have the opportunity to select a number soft skill targets. Having the opportunity to identify soft targets that relate to their individual needs will give the learners greater ownership. | Director of Novus | September 2019 |
| 5.25 | Children should have the opportunity to undertake learning activities which support them to develop their written skills further. (3.47) | Agreed | The Curriculum Mentor has undertaken work to develop learners' writing skills. The curriculum has been reviewed and written work skills development introduced into the individualised learning pathways. Development opportunities for higher level learners have been introduced via Level 3 accredited units. | Director of Novus | Completed |
| | Training planning and remand management | | | | |
| 5.26 | The role of casework should be defined and caseworkers provided with training and support to fulfil all elements of the role. (4.16) | Agreed | Planning Meetings will be reviewed and a consistent approach developed which will include setting sentence planning targets in child-friendly language. A role brief for caseworkers will be developed and a training needs analysis will be undertaken against the role brief to determine what support and training is required for the caseworker role. Necessary training will be provided and scheduled accordingly. | Governor Governor | November 2019 November 2019 |
| | | | Risk Management Training will be delivered to caseworkers by Youth Offending Team colleagues from the local areas. | Governor | November 2019 |

| | Interventions | | | | |
|------|---|---------------|--|----------|---------------|
| 5.27 | All children should be able to complete interventions which address their needs while in custody. (4.35) | Partly Agreed | This recommendation is partly agreed as HMYOI Wetherby have a number of young people who serve short sentences, transition to the adult estate, move to a medium secure mental health unit, or are successful at obtaining early release and/or Home Detention Curfew (HDC). As such, it is not always possible for them to complete interventions whilst at Wetherby. | | |
| | | | The intervention needs of any child released or transferred with an outstanding requirement will be shared with community Youth Offending Teams or adult establishments as part of the pre-release/transition planning so that the required intervention can still be pursued. | Governor | November 2019 |
| | | | A needs assessment of the required interventions for young people will be undertaken on a bi-monthly basis and incorporated into the establishment's Reducing Reoffending Action Plan. | Governor | November 2019 |

| Recommendations | |
|-----------------|----|
| Agreed | 26 |
| Partly Agreed | 1 |
| Not Agreed | 0 |
| Total | 27 |

