



HM Prison &
Probation Service

Action Plan: HMP Wealstun

Action Plan Submitted: 21st April 2020

A Response to the HMIP Inspection: 15–25 October 2019

Report Published 13th February 2020

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 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 WEALSTUN

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	Key Recommendations				
	Directed to: The Governor				
S55	<p>Key concern: The prison did not adequately act on the information gained from analysing the large number of intelligence reports submitted, and had not used these to inform a plan to reduce violence and drug supply in the prison.</p> <p>Recommendation: The analysis of intelligence should be used to inform a plan that leads to a clear reduction in drug supply and associated violence.</p>	Agreed	<p>Key intelligence and information from the weekly Safety and Interventions Meeting (SIM), where key individuals are discussed and managed, feeds into the weekly DART meeting in order to ensure a holistic whole prison approach to address the drug supply and associated violence in HMP Wealstun.</p> <p>A weekly Drug Action Reduction Team (DART) meeting has been introduced. This is chaired by the Deputy Governor with representatives from key functions within the prison namely operations, safety, security and drug strategy. The purpose of the meeting is to highlight and act on live intelligence and appoint actions which are then tracked through this meeting such as target searching, security moves or suspicion drug testing. Terms of Reference of this meeting will be drawn up to ensure that a framework is in place to continue to drive and review the drug strategy.</p> <p>An assurance process will be developed in order to evaluate the success of the DART meeting and the impact it is having on the reduction in drugs and violence in HMP Wealstun.</p>	Governor	April 2020
S56	<p>Key concern: Despite some improvements to physical security, drugs were far too easily available. Drug use was having a negative effect on</p>	Agreed	<p>This recommendation cross references to Key Concern S55 in that the reduction in the availability of drugs is to be driven through the newly developed weekly DART meeting. The segmentation data and local data will be analysed to establish the cohort of prisoners that are most likely to</p>	Governor	April 2020



	<p>outcomes for prisoners, including levels of violence, bullying and intimidation, and the immediate and long-term consequences to their health.</p> <p>Recommendation: The availability of drugs in the prison should be reduced substantially, providing improved outcomes for prisoners in terms of less violence, bullying, intimidation and reduced immediate and long-term risks to their health.</p>		<p>partake in drug use and the routes of entry. This will drive the local drug strategy via the weekly DART meeting in terms of determining actions to reduce supply.</p> <p>HMP Wealstun will carry out a full review of the Incentivised Substance Free Living (ISFL) unit ensuring it meets the requirements of the national policy, whilst reducing the demand for illicit drugs in the Prison, encouraging men to remain drug free.</p> <p>An increased focus on reducing the demand of drugs within our population will include:</p> <ul style="list-style-type: none"> • Corruption Prevention meeting and strategy to identify and address possible staff corruption around the trafficking of illicit substances. • Use of the maturity screening toolkit to target young people who have the highest drug dependency. • Reduce demand through weekly DART meeting and increase alternative activities including; increased Gym sessions and wing based peer groups. • Working with outside partners: Drugs and Alcohol Reduction Service (DARS), Care UK, Leeds safeguarding, Dogs Trust, Leeds Rhinos to motivate Prisoners to move away from drug use through meaningful activities. • Identify and implement alternatives to punitive adjudications i.e. suspended awards if prisoners work with DARS. 		<p>Completed</p> <p>June 2020</p>
S57	<p>Key concern: The level of self-harm was six times higher than at the time of the previous inspection. Interviews with all prisoners who had self-harmed were carried out, to help staff to understand the causes of the problem. However, there was no clear strategy to reduce the level of self-harm.</p>	Agreed	<p>The Head of Safety will review the safety strategy so it includes a comprehensive analysis of data captured following consultations with prisoners, interviews with prolific self-harmers, as well as identifying specific groups at risk of self-harm such as young people, debtors and those prisoners in post closure period of the Assessment Care in Custody and Teamwork (ACCT) document.</p> <p>The data will be used to develop a clear understanding of the causative factors driving levels of self-harm within the establishment. The outcomes of this analysis will be shared at both the weekly Safety Intervention Meeting (SIM) and DART meetings to ensure actions are set and</p>	Governor	May 2020



	Recommendation: Evidence from data analysis and information gained from prisoners about their reasons for self-harming should be used to develop an effective strategy and action plan that address the underlying causes and reduce the number of incidents of self-harm.		<p>progressed through the establishment to support a reduction in acts of self-harm and suicide.</p> <p>The Safer custody team will undertake quality assurance of the ACCT by dip sampling 10% of all documents and where deficiencies are identified will implement training sessions for individuals to improve quality and understanding.</p>		Completed
S58	<p>Key concern: Over 28% of prisoners were locked in their cells during the working day, which was far too many for a training prison.</p> <p>Recommendation: There should be sufficient structured purposeful activity to ensure that all eligible prisoners are engaged in work or training activities during the working day.</p>	Agreed	<p>The Head of Reducing Re-offending will conduct a regime review to include; activities profile, allocation process and movements to purposeful activities with the Heads of Residence and Head of Operations. The review will identify the causative factors for prisoners not attending purposeful activities and will include consultation with prisoners to better understand why they fail to attend.</p> <p>Having implemented additional work places in the Laundry, Bricklaying and Plasterers workshops, HMP Wealstun are able to offer all able Prisoners purposeful activity, and will ensure those places are available and that the mechanisms for getting men to their place of work are consistently managed.</p> <p>Performance will be tracked through both the morning Governors meeting and the Bi-Monthly Reducing Re-Offending Strategy meeting. Analysis of data from the New National Offender Management Information System (NOMIS) activities package (unlock lists) will be used to interrogate reasons for non -attendance.</p>	Governor	<p>June 2020</p> <p>Completed</p> <p>April 2020</p>
S59	<p>Key concern: Too few prisoners attended their allocated activity sessions owing to conflicting priorities during the working day.</p> <p>Recommendation: The number of prisoners</p>	Agreed	<p>Members of the Senior Management Team (SMT) have been signposted to individual residential units which they will attend each morning. They will support staff to drive the regime by ensuring those men who have off wing activities attend.</p> <p>The New National Offender Management Information System (NOMIS) activities package (unlock lists) has now been implemented providing a sessional (am/pm) timetable of scheduled activities to manage previous</p>	Governor	<p>Completed</p> <p>April 2020</p>



	attending their allocated activity sessions during the working day should be increased, by removing conflicting priorities within the prison regime.		<p>conflicts of activities to support an improvement in attendance. Performance is discussed at the daily morning meeting with the SMT and managers, allowing for swift actions to be undertaken.</p> <p>To increase attendance at allocated activities HMP Wealstun have undertaken a second line route (process for supervising men walking to work from residential units) to those activities, ensuring prisoners who have conflicting appointments can attend their workplace once their appointment has finished.</p> <p>HMP Wealstun will review the processes at the Bi-monthly reducing reoffending strategy meetings in order to monitor consistency.</p>		<p>Completed</p> <p>June 2020</p>
S60	<p>Key concern: During the inspection, 12% of eligible prisoners did not have an OASys assessment. A further 27% had an out-of-date assessment, which did not reflect their recent behaviour in custody. The lack of effective assessments undermined sentence progression and access to appropriate interventions for some.</p> <p>Recommendation: All eligible prisoners should have an up-to-date offender assessment system (OASys) assessment to inform their progression and access to interventions.</p>	Agreed	HMP Wealstun will ensure that all reviews of OASys are carried out as per the current Offender Management in Custody (OMiC) model and the Head of OMU will develop an assurance process that will ensure that all eligible offenders are picked up. Results of this assurance process and backlog numbers will be discussed at the monthly reducing re-offending meeting. The Head of Offender Management Unit (OMU) and the Senior Probation Officer (SPO) will continue to work with relevant colleagues within the community to ensure that all cases managed by the National Probation Service have timely OASys completions.	Governor	July 2020
S61	Key concern: Levels of contact with prison offender managers were poor, which undermined sentence progression.	Agreed	All eligible prisoners will receive 1 hour of contact with a Prison Offender Manager (POM) per month as per current policy. All POM's have received additional training and are ring fenced i.e. do not form part of the staff resource for the day to day running of the establishment.	Governor	June 2020



	Recommendation: All eligible prisoners should have regular contact with an appropriately trained prison offender manager, in order to progress.		<p>The quality of interactions will be assured by the SPO who will carry out a 10% dip test per month. An analysis of all deficiencies will formulate an improvement plan moving forward which will be discussed in the clinical supervision meeting held monthly with both POM's and Probation staff.</p> <p>The Governing Governor will track performance with the Head of OMU and the SPO through regular supervision.</p> <p>Key worker delivery is monitored by the Head of Business Assurance (HoBA). A quality assurance process is in place with 10% being dip sampled by Functional Heads and the SPO monthly.</p>		
S62	<p>Key concern: The application of some public protection procedures was inadequate. For example, arrangements to monitor prisoners' telephone calls were ineffective as there was a large backlog of calls waiting to be listened to. Restrictions on sending and receiving correspondence were not always enforced. When prisoners had applied for contact with specific children, there was often no evidence of the outcome.</p> <p>Recommendation: Contact restrictions to protect the public should be appropriately enforced and managed.</p>	Partly Agreed	<p>HMP Wealstun are currently unable to address the backlog of calls waiting to be listened to. This is due to a significant increase in the number of calls since the introduction of in cell telephony.</p> <p>Currently HMP Wealstun have suspended all random monitoring in favour of risk based monitoring for those subject to Public Protection measures.</p> <p>HMP Wealstun will, however, review the current processes for the protection of children in line with the Public Protection manual. Deficiencies within the monitoring of correspondence and the outcomes from child contact applications will be tracked through the bi-weekly Inter Departmental Risk Management Team (IDRMT) meeting.</p> <p>The current IDRMT meeting will be reviewed to ensure it meets the mandatory requirements within the Public Protection manual.</p>	Governor	June 2020
S63	<p>Key concern: The interdepartmental risk management meeting did not review release plans for all high-risk prisoners and there was too little evidence of contact with the community-based offender manager to</p>	Agreed	<p>The Head of OMU will review current risk management planning procedures and ensure processes are in place to eradicate inconsistencies, this will include an assurance process for managers.</p> <p>Under the new Offender Management in Custody (OMiC) model, there is a greater focus on the transition of the offender from custody to community with the sharing of key risk information prior to release.</p>	Governor	June 2020



	<p>discuss risk management release plans, including MAPPAs management levels.</p> <p>Recommendation: The release of prisoners who present a high risk of harm to others in the community should be robustly overseen by the interdepartmental risk management meeting and include regular and meaningful contact with the community-based offender manager, including confirmation of multi-agency public protection arrangements (MAPPAs) management levels where relevant.</p>		<p>The current IDRMT meeting will be reviewed to ensure it meets the mandatory requirements within the Public Protection manual.</p> <p>In accordance with the Public Protection Manual, all Multi Agency Public Protection Arrangements (MAPPAs) and high-risk prisoners will be identified on arrival and recorded on the Prison Case Management System, with a nominated POM who will manage them. All MAPPAs prisoners with three months to their release date will be prioritised for review at the monthly IDRMT meeting.</p> <p>The POM will work with the Community Offender Manager (COM) to complete release planning and confirm MAPPAs arrangements. If there are issues in engaging the COM, a MAPPAs S form will be submitted to the MAPPAs Co-ordinator as per the escalation process.</p> <p>Public Protection Unit (PPU) team meetings are to be re-introduced to ensure staff are briefed regarding any changes. The PPU Case Administrator will identify MAPPAs prisoners 6 months prior to release and add them to the IDRMT agenda.</p>		<p>Completed</p> <p>June 2020</p> <p>June 2020</p> <p>June 2020</p>
	General recommendations				
	Directed to: The Governor				
1.32	<p>The prison should ensure that all staff receive annual refresher training on the use of PAVA.</p>	Agreed	<p>Since the inspection, there has been a reduction in the teaching time required to deliver Pelargonic Acid Vanillyl Amide (PAVA) training. HMP Wealstun are developing a training plan that will prioritise refresher training for those staff who are currently issued with PAVA but have not received an annual refresher, as well as delivering initial training to new staff.</p> <p>HMP Wealstun will have all staff trained by the end of June 2020. PAVA refresher training has been incorporated into the establishments training delivery plan. The HoBA will track training delivery.</p>	Governor	June 2020
1.51	<p>Prisoners should be able to access Samaritans telephones 24 hours a day.</p>	Agreed	<p>Every cell within the establishment, including Segregation, has access to an in-cell phone. Although in-cell phones are restricted to domestic calls during set time periods, all in-cell, and landing phones, now have the capability to be used 24 hours a day to contact the Samaritans.</p>	Governor	Completed



			As part of the daily SMT checks of accommodation, each cell is checked to evidence it has a working telephone. Deficiencies are reported to both the Wing manager and Business hub to ensure a replacement is made available.		
1.52	A Listener suite should be available, to allow prisoners in double cells access to Listeners at night.	Agreed	<p>The refurbishment of the Listener suite on C Wing will be completed by June 2020. This will be available to all prisoners whose cell share risk assessment is not deemed as high risk.</p> <p>For those prisoners who are deemed as high risk they will still have access to the Samaritans help line via their in-cell phone (24 hours a day). As part of the Listener suite roll out the Head of Security will produce a protocol for the movement of prisoners from other residential units to the Listener's suite. Listeners will be on a rota basis to ensure they are in the room when available. The implementation date will be publicised to both staff and prisoners.</p>	Governor	<p>Completed</p> <p>June 2020</p>
1.53	All staff should carry an anti-ligature knife.	Agreed	<p>All staff who are eligible are issued an anti-ligature knife at HMP Wealstun. A bi-annual notice to staff will be issued instructing staff of the requirement to carry their anti-ligature knife whilst on duty.</p> <p>Daily checks will be undertaken by the Duty Governor or the Night Orderly Officer to ensure all eligible staff are carrying anti-ligature knives, with deficiencies fed back to managers within the daily morning meeting or the Night Orderly Officer checklist sheet.</p>	Governor	Completed
2.9	All showers should be clean and have good ventilation and drainage.	Partly Agreed	<p>This recommendation is partly agreed as any future refurbishment work to address the drainage and ventilation is dependent on funding that has not currently been agreed.</p> <p>All wings now have a cleaning schedule and it is the responsibility of the Cleaning officer to check the standards of cleaning daily. Assurance will be tracked in residential unit cleaning schedule books. The Wing Custodial Manager will undertake daily compliance checks to ensure standards are maintained.</p>	Governor	Completed



			A chemical clean of several shower block walls has been requested through our Estates contractor, Amey. This is part of Amey's annual planned maintenance, and has been prioritised for completion.		August 2020
2.23	Responses to applications, complaints and discrimination incident report forms should be tracked, to ensure that prisoners receive a timely response.	Agreed	<p>The introduction of a new assurance process of the applications, complaints and Discrimination Incident Report Form (DIRF) systems will be undertaken by the Head of Equalities by April 2020 in order to ensure it supports a tracking process that will evidence when prisoners receive a response.</p> <p>The Head of Equalities will analyse the data and report trends through the relevant meetings i.e. Safety and Security, Prisoner consultation, Decency Equality Action Team (DEAT), and Performance, monthly.</p> <p>Advice and guidance will be given to staff who fail to meet the required timescales or standards, and evidence for this will be tracked through the monthly performance meeting.</p>	Governor	June 2020
2.29	Comprehensive analysis of data relating to equality and diversity should be used to develop further the action plan for the whole prison, and this should include addressing any disproportionate treatment of prisoners with protected characteristics.	Agreed	<p>The Equalities Monitoring Tool (EMT) is a standard agenda item on the DEAT, where it is scrutinised to ensure that all characteristics reporting out of scope on the EMT are fully investigated and actions, where necessary, propose to eradicate disproportionate treatment of protected characteristics.</p> <p>Prisoner equality leads are being recruited, and will be asked to bring prisoners concerns and proposed actions from their quarterly forums to the DEAT. Agreed actions are set to address any areas of concern and are embedded in the establishment's local action plan which is reviewed at every DEAT.</p>	Governor	April 2020
2.30	Regular and effective consultation should be in place for all prisoners with protected characteristics.	Agreed	<p>Prisoners who fall into a protected characteristic group are identified through the reception and induction process, which is recorded on NOMIS.</p> <p>Prisoner equality leads will undertake bi-monthly consultation meetings with prisoners. Findings from these meetings are discussed in the quarterly DEAT meeting. Actions are drawn up and monitored in the DEAT and where these haven't been addressed they are challenged.</p>	Governor	June 2020



			<p>Bi-annual questionnaires will be issued to Prisoners to test the effectiveness of HMP Wealstun's policies and procedures.</p> <p>Managers will be held to account for addressing actions from the DEAT by the Governor</p> <p>Additional prisoner equality representatives from residential areas are being recruited, and will work together to produce a questionnaire.</p>		
2.41	Prisoners with disabilities should be identified and given good, consistent and organised support.	Agreed	<p>Prisoners who have not previously been identified as having a disability on NOMIS or System 1 at other establishments, are identified as part of the Induction Health Care screening process. Information about the support required for prisoners with disabilities will be shared with Health Care, the Disabilities Lead, the Safety Team and residential staff and managers to ensure consistent organised support is offered to meet the individual's needs.</p> <p>To ensure compliance a quality assurance process will be developed by June 2020.</p> <p>Anyone needing specialist equipment or adaptations for them to be able to use shower and toilet facilities and access all areas of the prison they need to, will be referred for a full Adult Social Care Assessment by the local authority. A record of this and all outcomes are held by Care UK.</p> <p>The Equalities lead completes a weekly check of all prisoners with Personal Emergency Evacuation Plans (PEEP). The duty governor will complete daily compliance checks on staff awareness of the PEEP register and the location of those prisoners who require individual assistance</p>	Governor	June 2020
2.42	Action should be taken to address the potentially disproportionate treatment of younger prisoners and provide them with specific support tailored to their needs.	Agreed	<p>Following the Young people's event held on the 29th January 2020, a strategy document and action plan will be formulated to address the potentially disproportionate treatment of young prisoners. Outcomes will be tracked within the DEAT meeting.</p>	Governor	Completed



			HMP Wealstun will analyse data from the EMT, Age protective characteristic forum, and Use of Force committee meeting, around our younger cohort to determine if actions taken to support their behaviour is proportionate. Findings will be discussed by SMT and tracked through the DEAT meeting.		April 2020
2.43	The needs of the small number of veterans should be analysed, and support provided as needed.	Agreed	Veterans are identified at induction and recorded on NOMIS. The Head of Equalities will undertake a Needs Analysis in consultation with the veterans, to determine appropriate support mechanisms for those veterans in our care. An action plan will be formulated and progress monitored at the DEAT meeting.	Governor	April 2020
2.72	Health care managers, in collaboration with the prison, should investigate the reasons for high failure to attend rates and implement measures to ensure that prisoners' health care needs are met.	Agreed	<p>Following a meeting to investigate the high failure to attend rates it was identified that prisoners were not always aware they had an appointment, and they were not always collected from their units or places of work. To resolve this, HMP Wealstun has implemented a system where prisoners who have an appointment receive a 'call up' slip the previous day notifying them of this. There is also the implementation of an additional line route (process for supervising men walking to work from residential units) AM and PM to support the movement of prisoners to healthcare appointments.</p> <p>Staff training will be implemented and Know Your Job Sheets circulated to all staff to ensure compliance with the new policy. Performance is tracked through the analysis of attendance data and discussed at the weekly Operations meeting and Prison Health Operations Group (PHOG) meeting.</p>	Governor	August 2020
2.98	Systems to audit non-attendance at medication administration should be developed.	Agreed	<p>Attendance at all healthcare interventions is under review due to ongoing enabling issues within the establishment.</p> <p>To assist in identifying patients who are not engaging with medication treatment, a weekly report has been implemented to identify those putting themselves at risk by not engaging in treatment. This is discussed as part of a weekly clinical review with prescribers, and the patient is invited for a medication review in healthcare.</p> <p>Patients on high risk medication are identified in each treatment area to closely monitor daily non-attendance with immediate follow up.</p>	Governor	Completed



2.99	Any variances made to in-possession risk assessments should be recorded consistently.	Agreed	<p>Medications are administered 3 times per day as prison regime allows.</p> <p>Patients are appropriately assessed, as per policy, for medication in possession, and those not meeting the criteria remain on supervised medication.</p> <p>Abusable medication and controlled drugs are prescribed to be administered safely and supervised within regime times.</p>	Governor	Completed
2.105	Prisoners should be supported to access routine and planned ongoing dental care and treatment in a timely way.	Agreed	<p>To support attendance at appointments, for the same reasons as in recommendation 2.72, HMP Wealstun has introduced a process that distributes appointment slips for prisoners attending Dentist appointments the previous evening as well as introducing a second line route (AM/PM) to support attendance at appointments (full details in recommendation 2.72).</p> <p>Performance will be tracked through our monthly PHOG meeting between Health Care and the Governor.</p>	Governor	June 2020
2.106	The dental surgery should comply with infection control standards.	Agreed	<p>Having discovered a deficiency within the distribution of cleaning resource a meeting was held with the Deputy Governor, Estates and Health Care provider, which has rectified the situation at HMP Wealstun.</p> <p>To ensure continued compliance with infection control standards, the Head of Health Care and the Site Delivery Manager will jointly inspect the Dental surgery and assess the cleaning process on a monthly basis. Any future deficiencies will be addressed at the monthly facilities meeting.</p>	Governor	Completed
3.19	Leaders and managers should greatly reduce the proportion of prisoners who start qualifications but do not complete them, by ensuring that they allocate prisoners to activities according to the length of time they have left to serve	Agreed	<p>Allocations are now done in line with Home Detention Curfew (HDC) and release dates, to ensure prisoners complete courses they start.</p> <p>For cases where the prisoner has transferred for Operational, Security, and progression, HMP Wealstun ensure the receiving establishment has the information of the learning completed, so repetition is avoided. This is also supported by the full implementation of common awarding bodies across the prison estates. Performance will be tracked and monitored by the Prison Education Framework (PEF) monthly governance meeting.</p>	Governor	April 2020



3.27	Leaders and managers should ensure that teachers plan the activities that they use in classes carefully, so that prisoners find them interesting and useful. Teachers should ensure that they check sufficiently learners' understanding of topics taught before they move on to new learning.	Agreed	<p>An enhanced training package has been implemented for teachers as part of ongoing Continuous Professional Development (CPD), to ensure that they are enabling prisoners to understand key concepts; the information they are presenting is clear and promotes active discussion to secure learning, and identify and correct misunderstandings.</p> <p>CPD records for Teachers are discussed and monitored as part of the completion of the quarterly Teaching Quality Management Plan document between the Learning and Skills Manager and Local Education Manager on a monthly basis.</p>	Governor	April 2020
3.33	Leaders and managers should ensure that prisoners engaged in prison work use their skills portfolios effectively, to record the knowledge and skills that they are developing.	Agreed	<p>Measure your progress (MYP) will continue to be used in prison work areas. This will be supported by further training for staff, both in group sessions and one to one to ensure they support prisoners to accurately capture the knowledge and skills they are learning.</p> <p>Those who undertake MYP will have it recorded as part of their training plan. This will be monitored through the bi-monthly Quality Improvement Group (QIG) meeting to ensure compliance with this action.</p> <p>HMP Wealstun will engage the Prisoner Information Desk (PID) workers in the induction process to encourage the use of the skills portfolios to identify appropriate work placements.</p>	Governor	April 2020
3.38	Leaders and managers should ensure that the proportion of prisoners who achieve their functional skills qualifications in English and mathematics improves substantially.	Agreed.	<p>The Head of Learning and skills will analyse attendance data to gain an understanding as to why functional skills in English and Maths is so low. Deficiencies will be tracked via an action plan and reviewed through the Prison Education Framework (PEF) meeting.</p> <p>Continuous Professional Development will be put into place to up skill the tutors who teach functional skill; concentrating on securing learning, and identifying and correcting misunderstandings. Prisoners identified with Learning Difficulties and Disability needs can access one to one support, to help with functional skills. Further support is also offered for those who re-sit the functional skills exams.</p> <p>Progress will be monitored, including the tracking of the number of outcomes, at the PEF Governance monthly meeting so that early intervention can occur when necessary.</p>	Governor	April 2020



4.34	An up-to-date analysis of the offending behaviour needs of the population should inform the provision of an appropriate range of accredited programmes and other interventions to help prisoners address their attitudes, thinking and behaviour.	Agreed	We will carry out a needs assessment of our population to identify appropriate interventions to support offending behaviour needs. The assessment will determine what accredited programmes we will require to address our populations attitudes, thinking and behaviours.	Governor	June 2020
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Recommendations	
Agreed	28
Partly Agreed	2
Not Agreed	0
Total	30

