



HM Prison &
Probation Service

Action Plan: HMYOI Feltham A

Action Plan Submitted: 16 June 2022

A Response to the HMIP Inspection: 21 February – 4 March 2022

Report Published: 14 June 2022

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, 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 provide 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 GOV.UK website. 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, Measurable, 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: HMIP REPORT

ESTABLISHMENT: HMYOI FELTHAM A

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	Key concerns and recommendations				
7.1	<p>Key concern (1.41): Important safety procedures such as the protocol for entering a cell in an emergency overnight and calling an ambulance were not known by some staff who only worked nights. A cell door was left unsecured and was set up with a television and chair. This had occurred before the handover to night staff who did not have ready access to a cell key.</p> <p>Key recommendation: Staff should adhere to policies which make sure that children are properly</p>	Agreed	<p>The Emergency Response and the Entering Cells protocols will be reviewed and published every six months, to remind staff of the correct procedures to follow. Night Orders and the Local Security Strategy will be updated to reflect any changes. An aide memoire for the protocols will be provided to all staff and will be displayed prominently in the control room.</p> <p>The Head of Security will brief all night managers of the correct procedures to follow, who in turn will ensure all night staff are aware of the procedures for entering a cell, calling an ambulance and location of defibrillators. Night managers will conduct and record weekly compliance checks of the processes to follow, with additional monthly checks carried out as part of the Duty Governors night visit.</p> <p>All staff working night shifts will receive local awareness training on application of the protocols in order to conduct their duties in a child focussed way.</p>	Governor	September 2022



	safeguarded during the night. (To the governor)				
7.2	<p>Key concern (1.42): Equality work was underdeveloped. In particular, data were not used effectively to identify and address any unequal treatment.</p> <p>Key recommendation: Leaders and managers should monitor data in order to identify and address any unequal treatment.</p> <p>(To the governor)</p>	Agreed	<p>The analyst, supported by the development lead will collate and analyse all equalities data, separating the data for Feltham A and B, so specific data relating to Feltham A can be discussed at the Diversity and Inclusion (D&I) meeting so any disproportionality can be identified and addressed, with appropriate time-bound actions added to the D&I action plan.</p> <p>The equalities action plan will be reviewed at the D&I meeting to allow concerns about equality to be monitored and tracked.</p> <p>HMYOI Feltham A will hold children consultation forums for all Protected Characteristics (PC's) within the demographic of the prison. Each PC will have a nominated Senior Management Team (SMT) lead who will chair the consultation forums, that will have a standard agenda, be minuted and have a supporting action plan with timebound actions, to allow children within each PC to discuss any concerns.</p>	Governor	July 2022
7.3	<p>Key concern (1.43): Children lacked confidence in prison procedures to redress perceived injustice. Discrimination incident report forms and complaints were not thoroughly investigated, and responses were inadequate and often late.</p>	Agreed	<p>HMYOI Feltham A will ensure all children who submit a complaint or a Discrimination Incident Report Form (DIRF) are routinely interviewed as part of the investigative process, prior to a response being provided to the individual.</p> <p>The Deputy Governor will quality assure 10% of all complaints, and the Deputy Governor will quality assure all DIRF's and all complaints relating to allegations against staff, to ensure responses are timely and any identified learning is shared with staff. All complaints and DIRF's will also be monitored, tracked</p>	Governor	July 2022



	<p>Quality assurance of DIRFs and complaints did not improve outcomes.</p> <p>Key recommendation: Complaints and DIRFs should be thoroughly investigated, and children should be routinely interviewed as part of the investigation.</p> <p>(To the governor)</p>		<p>and issues identified through a local database. The business hub will produce a monthly complaints report for discussion at the safety meeting, to discuss which children needed to be spoken to as part of the investigate process.</p> <p>Procedural justice awareness training will be developed and delivered to all managers to improve the quality of responses to complaints and DIRF's.</p> <p>The prison will explore options to seek external Quality Assurance of the DIRF process from the local community.</p>		
7.4	<p>Key concern (1.44): Children did not spend enough time out of their cell and plans to increase it could not be realised with the current staffing shortfalls.</p> <p>Key recommendation: Children should have 10 hours a day out of their cell.</p> <p>(To the governor)</p>	Partly Agreed	<p>This recommendation is partly agreed as delivering the regime is subject to available staff resources, continued behaviour management risk factors and children being prepared to engage with the regime.</p> <p>However, it remains a key priority of HMYOI Feltham A's Senior Management Team who will endeavour to maximise the Time out of Room (TOOR) each day for every child, in line with a new Regime Management Plan (RMP) and core day. Children who are prepared to engage will have increased access to purposeful activity and community/partner delivered activities under the integrated care framework, with the maximum TOOR available on weekdays exceeding 10 hours for some children.</p> <p>The RMP and TOOR for each child will be monitored and recorded on the Duty Governors report on issues that may have affected the delivery of the regime.</p>	Governor	July 2022



7.5	<p>Key concern (1.45): Leaders and managers had not yet improved the quality of education sufficiently. Teaching and assessment practices were of inconsistent quality which adversely affected the progress children made in education. Too many teachers did not adapt their teaching to reflect known support strategies for children with special educational needs.</p> <p>Key recommendation: Leaders and managers should continue to identify the weaknesses in teaching and assessment practices. They should ensure that staff development activities are targeted to the needs of individual teachers, and that they monitor closely the impact of these activities on improving teachers' skills so that more children, including</p>	Agreed	<p>The education provider for HMYOI Feltham A provides Continuing Professional Development (CPD) support to staff identified as requiring key area(s) for development. These are identified through data, learning observations or book / folder sampling. Staff who are on a CPD Support plan will be provided with a mentor, with the plan focusing on different areas of practice over a four-week period linked to the areas of development identified. If sufficient progress is not made at the end of the four weeks, the CPD support plan will transition to an Intervention Plan.</p> <p>The effectiveness of quality improvement measures will be monitored closely at the YCS Performance Review Meeting (PRM), Contract Review Meeting (CRM), the Quality Improvement Group (QIG) and through quality monitoring visits by the YCS Education Lead. Data from the Teaching and Learning Dashboard is utilised at the PRM, CRM and QIG meetings to measure the progress made by all children, including those with special educational needs.</p>	Governor/YCS Central Lead/Education contract provider	Complete
-----	---	--------	---	---	----------



	<p>those with special educational needs, make more rapid progress in developing their skills and knowledge. (To the governor)</p>				
7.6	<p>Key concern (1.46): Not all children had enough time scheduled during the core day in education activities and too few children could access vocational training.</p> <p>Key recommendation: Leaders should increase the time children are timetabled to spend in education and should make sure that the timetable enables more children to access vocational training. (To the governor)</p>	Agreed	<p>A revised timetable has been devised which when implemented, will result in a significant increase in the time children are timetabled to spend in education, and ensure that more children have access to vocational training.</p> <p>Due to the complex needs of a small proportion of the learners at HMYOI Feltham A, a full education timetable is not always conducive to their needs. Through the integrated care model and our partnership with internal stakeholders, the prison will continue to devise individual timetables consisting of a range of care, interventions and education specific to that learner, which may result in authorised absences from the individuals scheduled education timetable.</p> <p>Learner attendance, access to vocational settings and the effectiveness of individual timetables in improving learner outcomes, will be measured at the CRM, PRM, QIG, and at the Reducing Reoffending Meeting by the Head of Education and the Head of Reducing Reoffending (HoRR).</p>	Governor	July 2022
7.7	<p>Key concern (1.47): Poor ICT infrastructure was adversely affecting the experience of</p>	Agreed	<p>The investment required to install Virtual campus 2 and Wi-Fi in all education settings at HMYOI Feltham A has been secured. The HoRR and education provider will work in partnership to</p>	Governor	April 2023



	<p>children in education. Children were not able to develop essential ICT skills or achieve appropriate qualifications in this subject.</p> <p>Key recommendation: Leaders should urgently improve the technical resources available in education. They should ensure that the curriculum enables children to develop the essential ICT skills they need to succeed in their lives and careers, and that children are able to achieve appropriate qualifications in this subject.</p> <p>(To the governor)</p>		<p>ensure that the IT facilities and IT curriculum at HMYOI Feltham A mirrors that of a comparable school in the community. The estimated timescale for completing the infrastructure work provided by the contractor, in conjunction with the delay in the awarding of the new education contract, means that this action will be met by April 2023.</p> <p>Additional IT resources such as Virtual Reality headsets, Mini-Macs and accessible software for Special Educational Needs (SEN) learners, will be purchased and implemented in the interim.</p>		
7.8	<p>Key concern (1.48): Children did not receive ongoing careers advice and guidance. They were not aware of how to reach their career goals and did not have any opportunities to raise their aspirations through the curriculum</p>	Agreed	<p>Careers advice is part of the education contract renewal and therefore not impartial, however, external impartial advice will be provided via Education Training Employment Open days.</p> <p>Career aspirations will be recorded at Induction and learners allocated to education pathways, where possible, based on their career aspirations. The terms of reference of the Allocation Board will be amended to include the allocation of learners based on their career choice.</p>	Governor	September 2022



	<p>offered or the activities to which they were allocated.</p> <p>Key recommendation: Leaders and managers should make sure that children receive impartial careers advice and guidance during their custody at the prison. All children should be allocated to activities relevant to their career goals and should have more access to employers. Leaders should make sure that ROTL is used appropriately and that children explore the full extent of the careers available to them. (To the governor)</p>		<p>A timetable for monthly Custody Information Advice and Guidance (CIAG) reviews for all learners will be devised at Induction.</p> <p>The effectiveness of CIAG and delivery of CIAG Key Performance Indicators will be included in the quality cycle and quality assured by the Shaw Trust Operational Support Services.</p> <p>All children who are approaching their eligibility for Release on Temporary Licence (ROTL) are supported through their sentence plan to become suitable. All ROTL activities are linked to sentence plans to ensure they are purposeful, with each child engaged in the process prior to their ROTL to ensure that they understand the desired outcomes. Following each ROTL, children and facilitators (parents) will be debriefed to measure the outcomes.</p> <p>The Deputy Governor will conduct a monthly quality assurance of the previous months ROTL's, to ensure that they were appropriate, meaningful, and linked to the child's sentence / progression plan.</p>		
7.9	<p>Key concern (1.49): Too many children were leaving custody with no confirmed education or training placement.</p> <p>Key recommendation: Leaders should implement</p>	Agreed	<p>The prison and the education provider working in partnership with the Youth Offending Teams (YOTs), will make sure that children are supported in securing recognised educational and training placements when transitioning from custody to the community.</p> <p>Monthly Resettlement Planning Meetings will be held which will review what plans are in place for all children due for release or transition in the next 28 days. Any gaps or lack of confirmed</p>	Governor	July 2022



	robust systems to make sure that children are supported in securing recognised educational and training placements when transitioning from custody to the community. (To the governor)		<p>Education, Training or Employment (ETE) will then be highlighted and the YOT Worker or YOT Manager will be contacted to escalate the lack of Resettlement Plans prior to release.</p> <p>A data base will be maintained to record each child's placement back into the community, whether or not their ETE outcome is appropriate, and in cases where it is not, the escalation pathway and response received.</p>		
	Recommendations				
7.10	Recommendation (3.26): Ambulances should be requested without delay by staff who identify a medical emergency. (To the governor)	Agreed	<p>The Local Security Strategy and local medical emergency policy will be reviewed and updated to include clear instructions relating to when to call an ambulance in response to medical emergencies. These instructions will be prominently displayed in the control room.</p> <p>A Governors' notice to staff will be published outlining the policy and procedure every six months.</p> <p>Responses to each Code Blue and Code Red (medical emergency codes) will be reviewed by a security manager following each incident to ensure adherence to the process.</p>	Governor	June 2022
7.11	Recommendation (3.58): Pain-inducing techniques should only be used when there is a risk of serious harm to a child or member of staff. (To the governor)	Agreed	HMYOI Feltham A Minimising & Managing Physical Restraint (MMPR) coordinators will review all uses of Pain Inducing Techniques (PIT) following each incident to ensure it was justified, appropriate, and of its correct application. Reflective discussions will be held with staff every time a PIT is used.	Governor/YCS MMPR Central lead	June 2022



			The Terms of Reference with the Local Authority Designated Officer (LADO) will be reviewed, to include the LADO having oversight of all PIT.		
7.12	Recommendation (4.5): All children should have a designated personal officer. (To the governor)	Agreed	<p>All children will be allocated a Custody Support Plan (CuSP) Officer during their induction period and subsequent move to their residential unit.</p> <p>Children will receive CuSP sessions in line with the CUSP delivery model. Where a child receives CuSP, they will do so weekly and in response to any significant events.</p> <p>The CuSP Custodial Manger will conduct a weekly audit of CuSP delivery to ensure:</p> <ul style="list-style-type: none"> • All children have a CuSP Officer allocated. • All CuSP sessions are completed as scheduled. • Oversight and accountability for any non-delivery. • Timeliness and quality of the Prison National Offender Management Information System (NOMIS) entries. • Adherence to the delivery model. <p>Managers within the residential function will chair a monthly Local Management Team, monitoring performance data to inform progressive delivery in line with the Integrity Assurance Framework and developing an ongoing action plan to mitigate any identified risks.</p>	Governor	October 2022



7.13	Recommendation (4.44): The local delivery board should meet regularly so that all partners have oversight of the governance of health services to make sure that health outcomes for children are optimised. (To the governor)	Agreed	The Local Delivery Quality Board (LDQB) will be held monthly. The terms of reference and agenda of the LDQB will be reviewed to ensure that prison leaders have good governance and oversight of health service delivery. Additionally, quarterly Partnership Boards (PB) take place where any issues of concern can be escalated.	Governor	July 2022
------	---	--------	--	----------	-----------

Recommendations	
Agreed	12
Partly Agreed	1
Not Agreed	0
Total	13

