



HM Prison &  
Probation Service

Action Plan: HMP & YOI New Hall

Action Plan Submitted: 2<sup>nd</sup> September 2019

A Response to the HMIP Inspection: 25<sup>th</sup> February to 8<sup>th</sup> March 2019

Report Published: 28<sup>th</sup> June 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 <b>must</b> 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 NEW HALL**

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	<b>Main recommendation to the Governor</b>				
5.1	The mental health service should be improved. There should be sufficient staff to ensure that all prisoners with mental health needs receive the range of support they need, including ongoing group work and regular reviews. (S45)	Agreed	<p>The Provider is progressing the recruitment for Mental Health Nurse Vacancies and that of the Perinatal Mental Health Nurse post. Two Assistant Psychologists have now been appointed to support the roll out of further group work in partnership with Midlands Partnership NHS Foundation Trust (MPFT) and the wider Mental Health team. The Clinical Psychologist is now in post and has commenced a review of the current waiting list and will provide onsite Psychology sessions.</p> <p>A tracker has been created to identify Care Programme Approach (CPA) review dates and Triage wait times. The Mental Health team and Head of Healthcare will ensure this is monitored regularly.</p> <p>Following the introduction of a group work program this will be reviewed on a quarterly basis to encompass patient and staff feedback, and to ensure satisfaction and effective outcomes. The first groups will be delivered by September with a review in December measured by monthly performance reports run by the data and performance lead, who will submit this data to the Head of Healthcare for review. Non-compliance will be actioned as required.</p> <p>Any planned cancellations of group work will be escalated to the Head of Healthcare to ensure all options have been exhausted.</p> <p>Inclusion services, provided by Midlands Partnership Foundation Trust, deliver group work predominantly in relation to relapse prevention, motivation, health and well-being, self-esteem and managing emotions.</p>	<p>The Governor CEO Care UK</p> <p>The Governor CEO Care UK</p>	<p>December 2019</p> <p>December 2019</p>
	<b>Recommendations</b>				



	<b>Early days in custody</b>				
5.2	Additional night-time welfare checks should be carried out on all new prisoners in the first night centre. (1.9)	Agreed	The First Night Centre Head of Function will develop the night-time checks and introduce a standardised format for a welfare check that supports the safety and decency of all newly arrived prisoners. Records of the checks will be maintained.	The Governor	Completed
	<b>Safe and supportive relationships</b>				
5.3	Data about violence should be analysed thoroughly and used to develop the violence reduction strategy. (1.16)	Agreed	The Safety Analyst will produce a monthly report on violence, identifying the drivers for this behaviour. This will be discussed at the monthly Safer Custody meeting to consider the strategy and review the effectiveness of the previous month's actions. New actions will be added to the Safer Custody action plan and monitored at the same meeting. Analysis of information to inform the strategy will also include data from Challenge, Support and Intervention Plans (CSIP), the review of the annual anti-bullying survey and the visitor's survey.	The Governor	Completed
	<b>Self-harm and suicide prevention</b>				
5.4	Prisoners should have 24-hour access to Listeners. (1.22, repeated recommendation 1.38)	Agreed	<p>The prison has now achieved 24 hour a day Listener cover.</p> <p>When the number of listeners reduces to an unacceptable level, a dynamic risk assessment will be undertaken to assess the current requirements of the population.</p> <p>Agreement with the local Samaritans branch has been reached to ensure that regular training courses can be delivered so new recruits can be trained.</p> <p>The prison now has in cell telephony in all cells so prisoners can access the Samaritans when the phones are on, with additional 24-hour access to dedicated Samaritan phones.</p>	The Governor	Completed
	<b>Safeguarding (protection of adults at risk) and women with complex needs</b>				



5.5	Prisoners with the most complex needs living in Holly House should not be locked in their cells during the core day; they should be provided with a constructive range of therapeutic interventions to help them cope. (1.26)	Partly Agreed	<p>This recommendation is partly agreed due to the complex nature of the prisoners in Holly House who often display a range of acute and chronic mental health conditions, meaning that mixing with others can be counterproductive and can negatively affect an individual's mental health condition.</p> <p>A health needs analysis has been commissioned and will be progressed specifically for Holly House. This will be done in conjunction with the prison to establish other needs of the prisoners in Holly House, such as offending behaviour, education, risk profiles.</p> <p>Following this analysis there will be a complete review of service delivery and decisions made on what interventions can be offered.</p> <p>Staffing profiles are being rewritten to ensure adequate cover to provide these interventions.</p> <p>Individual care plans for the prisoners on the unit will be in place and reviewed regularly to safely manage access to the regime and support prisoners.</p>	The Governor	December 2019
	<b>Security</b>				
5.6	Prisoners' movements to and from activities should be less restricted unless an individual risk assessment demonstrates the need for additional control. (1.32)	Agreed	<p>HMP &amp; YOI New Hall will continue with the current prisoner's movement schedule, but through the forthcoming re-profiling exercise movement Officers will be identified to facilitate individual movement outside of the main movement times so this does not restrict access to the regime.</p> <p>Individual risk assessments for internal movements are in place for Restricted Status and Escape list prisoners.</p>	The Governor	October 2019
5.7	Suspicion drug tests should be completed when supporting intelligence considers them appropriate. (1.33)	Agreed	All Security intelligence will be collated and analysed through the Mercury system within the agreed timescales. Where corroborated intelligence identifies that a suspicion Mandatory Drug Test (MDT) is appropriate this will become a formal action. The resources to allow for these tests to be conducted will be prioritised.	The Governor	Completed & ongoing
	<b>Disciplinary procedures</b>				



5.8	Use of force data should be evaluated fully so that recommendations can be identified and implemented. (1.41)	Agreed	<p>HMP YOI New Hall will introduce use of force meetings in compliance with Policy PSI 30/2015. The Safety Analyst will produce a report for discussion at this meeting and actions based on this analysis are to be agreed. Progression and effectiveness of these actions will be monitored at this meeting.</p> <p>All planned use of force incidents will be quality assured by the Head of Residence and Safety within a month of the incident. All other recorded uses of force will receive a 10% quality check which will be completed at the Use of Force meetings. Feedback will be provided individually or to all operational staff if common themes arise from these checks.</p> <p>The prison is monitoring the frequency of involvement in Use of Force incidents of all staff and residents and identifying trends and themes to inform any required remedial action.</p>	The Governor	October 2019
5.9	If special accommodation is used it should be accurately recorded and appropriately managed regardless of the location. (1.42)	Agreed	<p>Reporting of the full use of special accommodation is a standard agenda item in the Segregation Monitoring and Review Group (SMARG) report and meeting. All incidents that could be considered as using special accommodation are discussed at the daily managers meeting, monitored through the daily operational briefing and are reviewed by the Duty Governor, where the correct application of the policy is checked and ensured. A local policy is in place to ensure documentation is completed and this has been re-launched to support this.</p> <p>Guidance and awareness on the correct use of special accommodation is communicated locally to Operational Manager grades and is shared locally through the link to the policy through the Local Security Strategy.</p>	The Governor	Completed
	<b>Residential units</b>				
5.10	The timeliness of responses to applications should be monitored to ensure they are answered promptly. (2.7)	Agreed	<p>An initial review of the applications system has been completed and there is now a working system when applications are booked out of the prisoner's wings.</p> <p>Recording of returns in relation to applications is routinely being completed by Prisoner Information Desk (PID) workers.</p>	The Governor	October 2019



			This system will include a quality assurance process where a residential Supervisor/Manager will ensure that the system is working correctly and timely responses are provided.		
	<b>Staff-prisoner relationships</b>				
5.11	The proportion of female prison officers should be increased to at least 60% and oversight of the shower areas should be improved. (2.14)	Agreed	<p>HMP YOI New Hall has now agreed gender specific recruitment into Prison Officer grades, with an identified target of 70% female staff. However, the process and timescales of achieving this target are subject to the levels of staff leaving and joining the establishment.</p> <p>Given the current female/male staff ratio (and specific female only staff tasks), the prisons detail office will actively monitor deployment of female staff around the establishment to ensure that female staff are available at the correct places at critical times in the working day.</p> <p>A briefing exercise where staff were reminded of the level and objectives of the supervisory elements of their jobs, has taken place and ongoing delivery will be monitored by Supervising Officers.</p>	<p>The Governor</p> <p>The Governor</p>	<p>December 2021</p> <p>Completed &amp; ongoing</p>
	<b>Equality and diversity</b>				
5.12	Equality and diversity work should be based on a thorough needs analysis and given a higher priority with clear strategic management that promotes equalities work across the prison. (2.20)	Agreed	<p>An equality and diversity needs analysis will be completed to inform service provision.</p> <p>Each Senior Management Team (SMT) member has been allocated a protected characteristic to lead on and will progress forums and take action to deliver further improved equality, diversity and inclusion outcomes. Progress will be monitored by the Equalities Action Team (EAT), with actions contributing to an establishment Equality Action Plan (EAP).</p> <p>The Quality analysis of Discrimination Incident Reporting Forms (DIRF's) is completed by a Scrutiny Panel and an independent person.</p> <p>The EAT has recommenced and they are responsible for reviewing the information from the needs analysis, analysing data, directing service provision and compiling EAP's will be used to drive forward progress. Progress against this action plan will be monitored in the meeting.</p>	The Governor	November 2019



			The HMPPS Equalities HQ team will provide advice and guidance to the Equalities Lead at HMP YOI New Hall when required.		
	<b>Health services</b>				
5.13	All health care staff should receive regular clinical and managerial supervision. (2.62)	Agreed	<p>The healthcare provider has ensured that all qualified staff have been provided with a list of available Clinical Supervisors and instructed to arrange regular clinical supervision. Managers monitor the uptake of Clinical Supervision and this is reported on a quarterly basis through the quarterly Contract Monitoring process with NHS England &amp; NHS Improvement. Staff who repeatedly fail to access Clinical Supervision will be managed via Human Resources (HR) processes.</p> <p>All staff will have regular managerial supervision. This will be monitored monthly.</p>	CEO Care UK	September 2019
5.14	The non-attendance rates for all clinics should continue to be investigated and reduced including a review of the applications process to see if this is hindering attendance. (2.63)	Agreed	<p>The application system is currently under review by the Head of Healthcare to ensure a more robust process.</p> <p>Development work is ongoing to provide wing based healthcare interventions.</p> <p>Did Not Attend (DNA) rates are monitored through the local Healthcare partnership board and the NHS contract performance review meeting chaired by the Governor or Deputy Governor. This partnership is working to identify the reasons for DNA's and identify barriers to accessing appointments. Once this has been established, a plan will be developed to manage and reduce DNAs. DNA rates are part of the National Contract Management process with NHS England 7 NHS Improvement as part of the Health &amp; Justice Indicators of Performance. If DNA's continue to be an issue, this will be escalated via the Yorkshire &amp; Humber Prison Partnership Board and then the North Prison Group Directors Board if required.</p> <p>The trial on delivering appointment slips to the wings in sealed envelopes was successful and has now been embedded.</p>	<p>The Governor CEO Care UK</p> <p>The Governor CEO Care UK</p>	<p>November 2019</p> <p>Completed &amp; ongoing</p>
5.15	Immunisations and vaccinations should be	Agreed	Additional immunisation and vaccination training has now been accessed by members of the healthcare team. Plans are in place to offer weekend	CEO Care UK	September 2019





	available to eligible prisoners in line with national programmes. They should be implemented promptly to promote prisoners' health. (2.64)		vaccination/immunisation clinics, thus ensuring improved access for all prisoners. Work is ongoing between NHS England and the Prison to ensure enabling needs are met for these additional clinic sessions.		
5.16	Routine waiting times to see the GP should be reduced and should not exceed two weeks. (2.70)	Agreed	<p>NHS England and NHS Improvement have commissioned a new Health Needs Assessment (HNA) which includes a review of the sufficiency of GP provision and will be used to inform future commissioning decisions regarding the level of GP sessions required to ensure that patients can be seen within expected timescales.</p> <p>The GP is triaging all GP applications to reduce waiting times and monitor non-attendance. Urgent GP review is available on the day, dependent upon clinical need.</p>	CEO Care UK	December 2019
				CEO Care UK	Completed
5.17	The out of hours' medicines cupboard and drug refrigerators should be robustly monitored to ensure medication is appropriately and safely stored. (2.80)	Agreed	<p>The Senior Pharmacy Technician and Pharmacist will ensure all stock is stored as per manufacturer's guidelines. All drug fridge temperatures will be recorded and monitored daily. Any discrepancy with storage conditions/fridge temperatures will be escalated immediately to Pharmacist / Head of Healthcare and reported via Datix. Manufacturers will be contacted to seek further stability guidance if required.</p> <p>Medicines management issues are monitored through the completion of audits and are part of the quarterly contract monitoring process.</p>	CEO Care UK	Completed & ongoing
				CEO Care UK	Completed & ongoing
5.18	The prison should ensure the process for transporting dental tools across the prison is safe. (2.84)	Agreed	The transfer of tools from gate to healthcare department occurs at a time when prisoners are on movement around the prison grounds. The Head of Healthcare and the Dental provider will work with HMPPS colleagues to identify Operational Support Grade staff to accompany and provide safe transportation of dental tools. A suitable lockable box will be provided to transport dental tools within the prison.	The Governor	September 2019
5.19	Transfers under the Mental Health Act should occur	Not Agreed	This recommendation is not agreed as although every effort is made to expedite transfers and assess patients promptly, transfers are dependent on several	NHS England & Improvement	



	within current Department of Health transfer time guidelines. (2.95)		<p>factors such as the completion of appropriate assessments, administrative processes within the NHS, and the availability of accommodation in mental health hospitals and other related issues.</p> <p>HMP &amp; YOI New Hall cannot commit to transfer within Department of Health guidelines ('The Prison Transfer and Remission Guidance' published by the Department of Health in 2011), which is not agreed by NHS England. NHS England guidance, published in March 2018, sets out timescales that consider clinical urgency and need. The healthcare provider and NHS England Health and Justice, and NHS England Specialised Commissioning, continue to robustly manage this challenging pathway.</p> <p>Care UK, the healthcare provider, will work in collaboration with NHS England and HMPPS to expedite transfers from prison to hospital under the Mental Health Act to strive to achieve the current time guideline.</p> <p>NHS England is currently reviewing arrangements for the timely transfer and remission of prisoners to and from secure mental health hospitals. A 10-point plan has been developed that will include a review of current best practice guidance, review of existing service specifications, the testing out of new models of care within prison settings and new navigator roles to support the transfer and remission process.</p> <p>The regional NHS commissioner for HMP &amp; YOI New Hall is working jointly with Care UK to ensure that patients receive the best standard of mental health care possible whilst awaiting transfer under the act.</p>	Specialised Commissioning	
	<b>Learning and skills and work activities</b>				
5.20	An allocations system that allows for better attendance monitoring should be introduced and effective action should be taken to improve poor attendance. (3.12)	Agreed	<p>An Allocations Manager is now in place to provide management input into this area and permanent recruitment will take place.</p> <p>The new appointments booking system has been introduced to better coordinate attendance. This information will be used to monitor and improve attendance.</p> <p>To support attendance at activities, the pay policy for prisoners is being reviewed to recognise performance and achievements. The Incentives and Earned</p>	The Governor	October 2019



			Privileges Scheme is being updated and re-launched in accordance with the requirements of the new Incentives Policy Framework 2019 to support attendance and challenge those who do not attend. This will incentivise prisoners to engage in education and work to ensure only those prisoners who engage with the regime and attend activities and work regularly will access the highest privileges levels.		
5.21	The number of prisoners who participate in accredited training in workshops and the prison kitchen should be increased. (3.20)	Agreed	HMP & YOI New Hall pay budget has been increased which allows the prison to target specific work areas and incentivise prisoners working in them and achieving accredited training qualifications.	The Governor	September 2019
			Specifically, this will include a pay differential so that prisoners engaged in education, training and offence related activities will earn more than those who do not. Additionally, there will be a small pay bonus for those who complete qualifications in this area, creating a pay environment where work towards sentence plans and personal resettlement needs is rewarded.  There is range of accredited training programmes available in the workshops and the kitchen, prisoners will be encouraged and supported to undertake these. Staff resources are currently being considered to create an additional internal verifier to support the delivery of these qualifications. Starts and completions will be monitored through the Reducing Reoffending and Learning and Skills functions.	The Governor	December 2019
5.22	Employment portfolios should be fully embedded in all activity areas to ensure that prisoners record their skills development. (3.27)	Agreed	The Head of Learning and skills (HoLS) is ensuring that the Employment portfolios are being reviewed, and this will be discussed at the Quality Improvement Group (QIG) meeting, chaired by the HoLS. Once reviewed, employment portfolios will be re-launched. Briefing sessions for staff and prisoners on their purpose and importance will take place at the re-launch.	The Governor Director of Novus	September 2019
			When Offender Management in Custody (OMiC) Keyworkers are rolled out, they will be asked to discuss and review these portfolios with their allocated prisoners and to champion them on an ongoing basis.	The Governor	December 2019
	<b>Reintegration planning</b>				



5.23	Visits should start and finish at the times specified in published material. (4.21)	Agreed	<p>A full review of the visits process from book-in to leaving the prison will be conducted and will focus on ensuring visitors can get into the prison promptly.</p> <p>Recommendations from this review will be delivered to ensure visits start and finish at the published times. A manager will be identified to carry out daily checks on this to ensure compliance.</p>	The Governor	October 2019
5.24	Visitors should have access to an efficient booking system. (4.22)	Partly Agreed	<p>This recommendation is partly agreed because visits are booked through the National Visits Booking Service.</p> <p>A visitor's survey will be conducted to gauge the satisfaction with visitors in the booking system and findings will be shared with the National Visits Booking Service.</p> <p>Follow up action will include a regular covert system check where the prison checks the timeliness of the response to telephone calls and when this falls below expectations a formal complaint will be raised.</p> <p>HMP &amp; YOI New Hall will also ensure that the relevant information is entered onto NOMIS (National Offender Management Information System) to support the booking process. A check of current compliance will be done and any issues rectified. The relevant staff will also be reminded of the need to do this for each prisoner at the appropriate stage in the process on an ongoing basis.</p> <p>The HMPPS Family Services team hold regular meetings throughout the year. HMP &amp; YOI New Hall will continue to provide a Single Point of Contact to attend these meetings.</p>	The Governor	November 2019

Recommendations	
Agreed	21
Partly Agreed	2
Not Agreed	1
<b>Total</b>	<b>24</b>

