



HM Prison &
Probation Service

Action Plan: HMP & YOI Standford Hill

Action Plan Submitted: 29th January 2020

A Response to the HMIP Inspection 19th August 2019 to 5th September 2019

Report Published: 4th 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, 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: HMCIP REPORT

ESTABLISHMENT: HMP & YOI STANFORD HILL

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				
S35	<p>Key concern: Officers did not routinely complete paperwork after using handcuffs to move prisoners back to closed conditions. This meant not all force was accurately recorded or justified.</p> <p>Recommendation: The prison should ensure that all use of force against prisoners, specifically the application of handcuffs, is recorded in full and justified.</p>	Agreed	<p>HMP YOI Stanford Hill will ensure that all use of force against prisoners is recorded in full and justified:</p> <ul style="list-style-type: none"> • A Use of Force Coordinator has been appointed, who will ensure correct process is followed to assess and record all use of force. • The Head of Security and Operations will issue updated guidance to all staff regarding the authority for use of handcuffs when relocating a prisoner to reception prior to return to closed conditions. • The Daily Briefing Sheet will be updated to identify any application of handcuffs. <p>All incidents are reviewed at the quarterly Use of Force meetings, including to ensure that use of handcuffs is justified and proportionate.</p>	<p>Governor</p> <p>Governor</p>	<p>February 2020</p> <p>February 2020 and quarterly</p>
S36	<p>Key concern: Following the receipt of intelligence, not all required actions were conducted. For example, not all suspicion drug tests or room searches were carried out when required.</p>	Agreed	<p>HMP YOI Stanford Hill will promptly conduct all room searches and suspicion drug tests identified as high priority by the Head of Security and Operations;</p> <ul style="list-style-type: none"> • In response to credible security intelligence, Security Intelligence Analysts will propose actions to be approved and prioritised by the Head of Security, clearly identifying which actions are necessary for the security and safety of the establishment. • Outstanding room searches and suspicion drug tests assessed as necessary, will be tracked and actioned through the Weekly Operational Meeting. 	Governor	March 2020



	Recommendation: The prison should promptly conduct all room searches and suspicion drug tests necessary following the receipt of credible security intelligence.				
S37	<p>Key concern: The management of serveries had declined since the previous inspection and was now poor. Although generally clean, hot cupboards and hot plates were sometimes dirty. They were not always switched on early enough to ensure that food was kept at the required temperature and some food was not placed on the hot plate. Some food was only lukewarm by the end of service. Some prisoners were not dressed correctly when serving food. Trolleys used to transport food were dirty.</p> <p>Recommendation: Food should be served hygienically and at a sufficient temperature.</p>	Agreed	<p>HMP YOI Stanford Hill will ensure that all food is served hygienically and at a sufficient temperature:</p> <ul style="list-style-type: none"> • Cleaning schedules have been reviewed and cleanliness checks of the serveries, including the hot cupboards and hot plates, will be completed prior to serving of the meals by the Cleaning Officer. • The Cleaning Officer will complete and sign a Food Safety Hygiene Log in order to provide an audit trail. This will include the temperature of the food, the correct use of utensils and confirmation that the correct Personal Protective Equipment is being worn. • Cleaning schedules and the Food Safety Hygiene Log will be quality assured via a management check once a day. <p>All Cleaning Officers will be trained in Food Safety and Health and Hygiene.</p>	Governor	March 2020
				Governor	December 2020
S38	<p>Key concern: The management of equality and diversity work had improved but remained weak. Senior managers were allocated a protected characteristic to</p>	Agreed	<p>The Governor will ensure that Senior Managers are clear about their core responsibilities to deliver the Equalities Strategy. Equality Champion training will be facilitated by the Group Equalities Lead</p> <p>In order to promote and support the role of protected characteristic champions, HMP YOI Stanford Hill will:</p>	Governor	March 2020
				Governor	March 2020



	<p>champion, but they did not fully understand or promote their role.</p> <p>Recommendation: Managers should demonstrate strong leadership in eliminating all forms of discrimination and promoting equality.</p>		<ul style="list-style-type: none"> • Circulate notices to prisoners and staff, outlining details of how to contact the relevant leads. • Display photographs of the Senior Management Team (SMT) Champions and the Equalities Team members around the prison. • Outline the Discrimination Incident Reporting Form (DIRF) process to all new prisoners at induction. • Ensure that DIRFs are available and accessible on every wing. • Publish Equalities data, investigation findings and subsequent actions to prisoners and staff via Equalities noticeboards. <p>Equalities data collection has been increased and a full investigation of any concerns takes place by a Band 5 manager or above, through the DIRF process. Equalities data and investigation findings are discussed at the bi-monthly Equalities Meeting. Outcomes are added to the Equalities Action Plan and reviewed at the Equalities Meeting by the Deputy Governor as appropriate.</p>	Governor	March 2020 and bi-monthly
S39	<p>Key concern: Managers analysed some equality monitoring data, but the range was too narrow. For example, prisoners' access to ROTL, a key feature of the prison, was not routinely analysed. Where unequal outcomes were found, investigations were conducted, but findings were not shared widely with prisoners. This meant some prisoners still had poor perceptions of how they were treated.</p> <p>Recommendation: A wide range of equality monitoring data, including on ROTL, should be analysed regularly. Findings from investigations into unequal</p>	Agreed	<p>HMP YOI Stanford Hill has access to a range of data on equalities via the Equalities Monitoring Tool (EMT). The tool is subject to on-going review nationally, which will result in improvements to the ease of use, availability and frequency of outcome measures by prison. The next part of development will result in the monthly analysis of EMT data. Release on Temporary Licence (ROTL) forms part of this development work.</p> <p>EMT, ROTL, return to closed conditions, and abscond data will be monitored and analysed on a bi-monthly basis.</p> <p>Issues raised via the Prisoner Forums regarding poor perceptions are investigated by a Band 5 manager or above and any subsequent actions will be published to prisoners and staff via the Equalities noticeboards and added to the Equalities Action Plan as appropriate.</p> <p>Monitoring and assurance of the above will be co-ordinated through the Equalities Meeting chaired by the Deputy Governor.</p>	<p>Deputy Director, Prison & Probation Analytical Services</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Ongoing</p> <p>April 2020</p> <p>April 2020</p> <p>April 2020 and bi-monthly</p>



	outcomes should be shared widely with prisoners.				
S40 (& 2.43)	<p>Key concern: Out-of-hours access to primary and mental health services for approximately half the population, who worked outside during core hours, was limited.</p> <p>Recommendation: Out-of-hours' access to primary and mental health services, including nurse and GP clinics, should be increased to support the significant number of prisoners who work off site.</p>	Partly agreed	<p>This recommendation is partly agreed as out-of-hours access to primary and mental health services can only be increased subject to funding and contractual arrangements (including sub-contracting arrangements for GP provision).</p> <p>Out of hours access will form part of a wider, long-term review of Mental Health and Primary Healthcare service delivery and contractual arrangements.</p> <p>Arrangements with Integrated Care 24 (IC24) provide for weekly nursing evening clinics. IC24 are working towards this commitment and have reinstated evening clinics once per fortnight. IC24 and Oxleas Foundation Trust will continue to work with the establishment and with commissioners to achieve contractual commitments.</p>	<p>NHS England commissioners</p> <p>Head of Healthcare, IC24 and Oxleas NHS Foundation Trust</p>	<p>December 2021</p> <p>January 2020 and ongoing</p>
	General recommendations				
	Directed to: The Governor				
1.7	First night rooms should contain adequate furniture, including lockable cupboards, and suitable flooring.	Agreed	<p>A prioritised program of floor replacement for the sixteen induction rooms will be developed.</p> <p>A prioritised program to provide adequate furniture (including lockable cupboards) for the sixteen induction rooms will be developed.</p> <p>Room condition checks will be conducted by the Induction Officer when allocating new receptions to the induction rooms. The Wing Manager will carry out a weekly room check with quality assurance provided via Head of Residence dip testing, which will be reported through the SMT report.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>December 2021</p> <p>December 2020</p> <p>April 2020</p>
1.14	The prison should work with prisoners to determine the reasons for prisoners' perceptions of threats and intimidation from staff so they can be addressed.	Agreed	'Staff-Prisoner relationships' will be added as a standard agenda item to all prisoner focus groups, providing a forum in which the reasons for prisoners' perceptions of threats and intimidation from staff can be identified. Any issues identified will be investigated by a Band 5 manager or above. Actions will be addressed and monitored through the Equalities Meeting.	Governor	April 2020
2.4	The personal officer scheme should be properly implemented –	Agreed	A Personal Officer will be allocated upon Induction and the prisoner will be informed of who that is.	Governor	June 2020



	meetings should take place regularly and case notes should be completed routinely.		Personal Officers will hold monthly meetings with prisoners and routinely complete case notes through pNomis. The Head of Residence will implement a robust management system to oversee this contact, including the need for staff to report their compliance to their manager. The wing manager will dip test to ensure compliance.	Governor	March 2020
2.43 (& S40)	Out-of-hours' access to primary and mental health services, including nurse and GP clinics, should be increased to support the significant number of prisoners who work off site.	Partly Agreed	<p>This recommendation is partly agreed as out-of-hours access to primary and mental health services can only be increased subject to funding and contractual arrangements (including sub-contracting arrangements for GP provision).</p> <p>Out of hours access will form part of a wider, long-term review of Mental Health and Primary Healthcare service delivery and contractual arrangements.</p> <p>Arrangements with Integrated Care 24 (IC24) provide for weekly nursing evening clinics. IC24 are working towards this commitment and have reinstated evening clinics once per fortnight. IC24 and Oxleas Foundation Trust will continue to work with the establishment and with commissioners to achieve contractual commitments.</p>	NHS England commissioners Head of Healthcare, IC24 and Oxleas NHS Foundation Trust	December 2021 January 2020 and ongoing
2.44	The head of health care should ensure that all incidents and risks are identified and managed through agreed governance processes.	Agreed	<p>All staff have been trained on the Ulysses Risk Management System. Every member of staff involved or witness to an incident is responsible and accountable for reporting.</p> <p>Incidents and risks are discussed at the Quality Board ensuring the incident has been reported onto Ulysses Risk Management System and for the attention of the Service Manager.</p>	Head of Healthcare, IC24 Head of Healthcare, IC24	Completed Completed
2.45	The head of health care should ensure that all staff communicate with prisoners with respect and should monitor the issue through governance processes.	Agreed	<p>The Head of Healthcare will ensure that all staff communicate with prisoners with respect by:</p> <ul style="list-style-type: none"> • Mandatory Equality and Diversity training has been completed for all staff. • Reflective discussions regarding communication with prisoners in full-staff meetings. • Six-weekly Clinical Supervision. <p>The quality of staff/prisoner relationships has been monitored through Resident surveys, which will be repeated twice yearly.</p>	Head of Healthcare, IC24 Head of Healthcare, IC24	Completed September 2020



			IC24 will monitor the number of complaints and present data for analysis in the Quality Board, including trends relating to complaints about staff/prisoner relationships. Outcomes will be shared with the Governor.	Head of Healthcare, IC24	September 2020
2.70	The pharmacist or a pharmacy technician should attend the prison regularly to offer face-to-face appointments with prisoners and to support dispensary staff.	Agreed	Oxleas Pharmacy have re-instated monthly pharmacy medication reviews to support dispensary staff. One pharmacist medication review will be held per month, to help patients manage their medicines effectively, highlight problematic side-effects/ potential solutions, improve adherences and reduce medicine wastage. Any patient can access the service upon request or through a referral by healthcare staff, with patients on high-risk medication prioritised.	Oxleas Prison Services Pharmacist	April 2020
2.71	All missed doses of medicine should be monitored, reported as clinical incidents and treated as a service risk until rectified.	Agreed	All staff have been trained on the Ulysses Risk Management System. Every member of staff who becomes aware of a missed dose of medication is responsible and accountable for reporting. The member of staff will secure the required medication and deliver it to the prisoner in accordance with the Medications Management Policy. Incidents are treated as a service risk until rectified. Incidents are reported and actioned through the Quality Board and the Kent Prison's Medicines Management Committee accordingly.	Head of Healthcare/IC24 Head of Healthcare/IC24	Completed September 2020
2.75	Prisoners should have access to routine dental appointments within six weeks. (Repeated recommendation 2.81)	Partly Agreed	This recommendation has been partly agreed as dental provision can only be increased through commissioning and contractual changes. Kent Community Health Foundation Trust have submitted a business case to commissioners to increase the number of sessions provided, to support a target of six-week waiting times. This business case will be progressed through the Quality Board.	Regional Clinical Manager, KCHFT	January 2020
3.15	Prison managers should improve arrangements to assure the quality of the vocational provision delivered by East Kent College.	Agreed	The monthly Quality Assurance Meeting will be strengthened through a revised agenda. This will cover Allocation, Attendance, Number of starts, Completions and Success Rates. A program of management quality assurance observations (Learning Walks) and engagement with learners via focus groups (Learner Voice) will be further developed. Prison managers will continue to monitor the quality of vocational provision through the bi-monthly Quality Improvement Group (QIG) Meeting.	Governor Governor Governor	July 2020 March 2020 Completed and bi-monthly



3.16	Prisoners employed in prison work should be offered qualifications.	Agreed	Qualifications available to prisoners employed in prison work will be expanded in line with Education Inspection Framework Guidelines.	Governor	July 2020
3.17	The employability skills prisoners develop in prison work should be recorded and recognised.	Agreed	The 'Steps to Success' passports will be fully embedded across all workshops, and reviewed by the Learning and Skills Manager, including to record and recognise the employability skills developed by prisoners in prison work.	Governor	July 2020
			The bi-monthly QIG will monitor improvement and undertake standardisation and moderation.	Governor	July 2020
3.25	Teachers should ensure that they check prisoners' understanding of key concepts and facts before they proceed to the next topic.	Agreed	Teacher Learning and Assessment observations will be used to ensure that teachers check prisoners' understanding of key facts and concepts before moving on. Any issues observed will be addressed through developmental feedback and provided to the supplier contract meetings for analysis and action.	Governor, Weston College	July 2020
3.33	Managers should develop strategies to reduce the proportion of prisoners who arrive late at lessons and activities, and teachers should reinforce the importance of punctuality as a key workplace requirement.	Agreed	The following strategies will be used to reduce the proportion of prisoners who arrive late at lessons and activities: <ul style="list-style-type: none"> • Emphasis will be placed on time keeping and punctuality; this has been added to the Education Induction program. • Teachers and workshop instructors will reinforce the importance of punctuality as a key workplace requirement. • The Activities Custodial Manager will amend the registration process for all lessons and activities to include a record of those who arrive late/leave early. • Individuals will be set targets for improvement by the tutor/workshop supervisor as required. 	Governor, Weston College	August 2020
			Trends and issues will be analysed through the QIG to demonstrate continuous improvement and raised with other members of the Senior Management Team for action as required.	Governor	August 2020
3.38	Leaders, managers and teachers should ensure that prisoners understand the importance of achieving a level 2 qualification in English and mathematics to enhance their employment prospects. They should promote the message in the information, advice	Agreed	The Education induction program will include a greater emphasis on Level 2 qualifications in English & Maths in conjunction with wider support from other departments across the establishment.	Governor, Weston College	March 2020
			Personal Officers will promote and encourage Level 2 qualifications and will reflect this in NOMIS entries.	Governor	August 2020



	and guidance they provide to prisoners.		OASys interview questions and/or ROTL risk boards will be used to encourage progression to Level 2. Comments will be made to reflect progress against this when reviews are undertaken. Classes will be moved from evening activities to core day provision to target the induction cohort. Progress on uptake and completion will be monitored through the QIG and session times will be kept under review.	Governor	June 2020
				Governor, Weston College	November 2020
4.18	Prisoners' transfer checks to inform ROTL board decisions should be completed promptly.	Agreed	The Hub Manager will monitor completion of transfer checks on a weekly basis and if required, additional staff resources will be re-directed to this task. Assurance will be gained by the Head of Offender Management via the performance spreadsheet.	Governor	March 2020
				Governor	March 2020
4.23	The IDRMT should consider prisoners approaching release to ensure that risks are properly managed.	Agreed	The Inter-Departmental Risk Management Team (IDRMT) agenda and terms of reference have been updated to ensure that high risk cases are discussed 6 months prior to release. This will contribute to an effective, robust risk management plan including further clarification of the Multi Agency Public Protection Arrangement level. The discussion will review current risk issues, sentence plan objective progress, ROTL feedback and any other potential issues of concern or interest.	Governor	March 2020
4.25	The reasons for a return to closed conditions should be clearly communicated to prisoners.	Agreed	The Duty Governor will sign a letter which fully outlines the reasons for return to closed conditions to the prisoner.	Governor	March 2020

Recommendations	
Agreed	21
Partly Agreed	3
Not Agreed	0
Total	24

