



HM Prison &
Probation Service

Action Plan: HMP/YOI Drake Hall

Action Plan Submitted: 3rd August 2020

A Response to the HMIP Inspection: 22nd January to 6th February 2020

Report Published: 22nd May 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

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.

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP/YOI DRAKE HALL

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				
5.1	Key concern (S52): The average MDT positive rate for the six months leading up to this inspection was lower than that reported at our last inspection. Despite this we were concerned that much of the other available evidence suggested that illicit substances, including diverted prescribed medications, were too easily available within the prison. For example, in our survey, 48% of prisoners said that it was easy to get illicit drugs and many of the staff we spoke to supported this view. More prisoners (15%) than at similar prisons (4%) and compared with our last inspection (4%) said they had developed a drug	Agreed	<p>HMP/YOI Drake Hall will implement a supply reduction strategy that will be based upon the most current intelligence, data and evidence. It will focus on understanding drug ingress and supply, ensuring the strategy is current to reduce the supply of drugs. The monthly Drug Strategy and Security meetings will discuss the supply reduction strategy, and ensure the prison sets security objectives that are based upon current intelligence to reduce supply that are agreed by all key stakeholders.</p> <p>To reduce the availability of drugs further, HMP/YOI Drake Hall will:</p> <ul style="list-style-type: none"> Continue with increased levels of Mandatory Drug Testing (MDT), including frequent and risk based testing. The Intelligence department will continue to work in collaboration with the Offender Management Unit (OMU), to identify any concerns with Release on Temporary License (ROTL) and continue with the Risk Testing Programme. Nationally MDT remains a very effective and the only comprehensive means of monitoring drug misuse. A comprehensive programme of work is underway to improve the effectiveness of MDT which will include routinely testing for emerging drugs. Following a prevalence study in December 2018 two new PS were added to the MDT panel in October 2019 and Tramadol was added on 2 March 2020 in replace of Barbiturates. Additionally, we will be adding Pregabalin and Gabapentin 	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>HMPPS</p>	<p>October 2020</p> <p>October 2020</p> <p>Completed and ongoing</p> <p>Ongoing</p>

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	<p>problem since being at the prison. In addition, two thirds of the security department's intelligence related to illicit substances and over half of completed suspicion drug tests in the previous six months had been positive. We were concerned that some of the prisoners undertaking ROTL said they felt under pressure from peers to bring illicit items into the prison. (Directed to: The Governor.)</p> <p>Recommendation: The availability of illicit drugs should be reduced through the implementation of an evidenced-based, robust supply reduction strategy.</p>		<p>to the panel in the near future. These changes will be reflected in the MDT figures.</p> <ul style="list-style-type: none"> • The intelligence department will work with Healthcare to develop a targeted plan to address the issue of diverted medications, that will focus on current intelligence, incorporating safe delivery of prescription medication to the individual, whilst minimising the risk of trading. • Women going out on ROTL who feel pressured to bring back illicit items will be offered increased support from Offender Supervisors (OS). Additional avenues will be explored to support and prevent those going out on ROTL to bring back illicit items, by holding a series of forums, to find solutions to the issue. • A business case will be submitted to upgrade the Closed-Circuit Television (CCTV) in the visits room, to provide greater oversight of the area to prevent any conveyance of illicit articles taking place. The visits policy will be updated to ensure that it appropriately addresses trafficking issues, including more robust processes for applying visits restrictions where necessary. • To utilise and act upon our intelligence effectively, we will continue our partnership working with the Midlands Area Search Team, and Dedicated Search Teams, who will help with intelligence lead searching and area searching, including utilising drug detection dogs. • The risk assessment for intelligence led searching will be reviewed to ensure that it fully meets the establishment needs, incorporating management checks to ensure good standards of searching that are appropriate and decent. • All incoming mail and parcels will be tested using Rapiscan drug detection equipment, to prevent drug soaked paperwork entering the Establishment. <p>Progress against these actions will be monitored through our quarterly assurance meetings.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>September 2020</p> <p>September 2020</p> <p>September 2020</p> <p>Completed and ongoing</p> <p>September 2020</p> <p>Completed and ongoing</p> <p>Completed and ongoing</p>
--	---	--	--	---	--

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

5.2	Key concern (S53): The pre-fabricated residential Plymouth and Richmond units were not suitable for use and were damp and mouldy. The problems had been highlighted for about the previous 15 years and, although some cosmetic refurbishment had been undertaken to improve the shower areas, the units remained poor. (Directed to: The Governor.) Recommendation: The Plymouth and Richmond units should be replaced with suitable accommodation.	Agreed	The Governor agrees that the Plymouth and Richmond units should be replaced with suitable accommodation which have been noted as not fit for purpose for a number of years, however this is subject to funding and will be dependent upon the outcome of the women's estate strategic overview.	Governor	October 2020
			To improve conditions at HMP/YOI Drake Hall whilst the outcome of the women's estate strategic overview is considered, the Prisons Maintenance Group (PMG) have facilitated the following work on Plymouth and Richmond units which was funded by the Governor through current resources to improve the standards of decency, following the withdrawal of the promised funding to replace these units. This has ensured that they benefited from recent internal refurbishment which has improved physical conditions, standards of decency and safety. In residential areas older wooden doors have been replaced with new UPVC doors, which not only improve fire safety, but increase internal light levels. Extensive refurbishment of Richmond unit's only showering facility was completed in May 2019, including new shower cubicles, sinks, lighting and flooring. A new CCTV system has also recently been installed on Richmond unit which has improved observation and safety.	Governor	October 2020
			Capital funding bids have been submitted for 2020/2021 for site wide residential shower and toilet refurbishments, along with site wide residential kitchenette refurbishments,	Governor	October 2020
			PMG will continue to bid for additional funding and undertake planned routine maintenance as necessary, and prompt reactive repairs via our onsite maintenance provider Amey.	Governor	October 2020
5.3	Key concern (S54): We were concerned that prison managers did not have accurate data on how many prisoners went into education, training and employment on release, preventing them from evaluating the impact of the curriculum on	Agreed	HMP/YOI Drake Hall will capture appropriate data for Education, Training and Employment (ETE) upon discharge and following release, so that the curriculum meets the women's rehabilitation needs by: <ul style="list-style-type: none"> Carrying out exit interviews for all women, to capture a record of their ETE data upon release, which will allow us to develop a picture of our Women's path from release back into the community. Continuing to work with the Community Rehabilitation Companies (CRCs), Keyworkers, and Community Offender Managers, to develop a 	Governor	October 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	<p>prisoners' education, skills and work. (Directed to: The Governor.)</p> <p>Recommendation: Prison managers should ensure that they have accurate and up-to-date information on the number of prisoners going into education, training and employment following their release so that they can better evaluate the impact of the curriculum on prisoners' rehabilitation and adjust it to ensure activities prepare prisoners well for release.</p>		<p>contact plan for our women six months post release to obtain ETE information.</p> <ul style="list-style-type: none"> • Implement a process to understand what is not working or what the barriers to reintegration are, by interviewing all women that are returned to our custody following release from HMP/YOI Drake Hall. • Formulating all the above information into a needs analysis, combining it with segmentation data, Prison National Offender Management Information System (P-NOMIS) and the Offender Assessment System (OASys) data, to provide us with a greater understanding of the needs of our women. This will be presented quarterly at the Establishment's Senior Leadership Team (SLT) assurance meeting to allow for a strategic overview, and following this the curriculum will be evaluated and adjusted if evidence supports the need to change. 		
	General recommendations				
5.4	<p>General recommendation (1.9): Staff should carry out first night welfare checks on all new arrivals. (Directed to: The Governor.)</p>	Agreed	<p>The Safer Custody (SC) department has produced and implemented a first night welfare check pro-forma. It will record checks and any issues on newly arrived women, to ensure their safety and address any immediate concerns. The checks will be conducted every three hours by night staff, with the process being overseen by the Night Orderly Officer who will be responsible for ensuring the forms are completed, and returned to SC for checking, actioning as necessary, and retention. These checks will supplement, and not replace any frequency checks for any woman who has an open Assessment, Care in Custody, Teamwork (ACCT) document. This will be monitored through the establishments assurance process.</p>	Governor	Completed
5.5	<p>General recommendation (1.16): All violent, bullying</p>	Agreed	<p>To ensure that all violent, bullying or intimidating behaviour is reported to SC for investigation, the following actions will be implemented:</p>	Governor	September 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	or intimidating behaviour should be reported to the safer custody team for thorough investigation. (Directed to: The Governor.)		<ul style="list-style-type: none"> All observations books will be photocopied during night state, and copies handed to the SC to review all entries. A database will be developed to record the incident, along with outcomes of the investigation and any appropriate actions taken. The Head of Security will ensure that all Intelligence Reports relating to violence, bullying or intimidation are shared with all relevant departments including SC, by briefing the security staff and carrying out compliance checks. The SC department will provide staff training with regards to communicating and reporting all instances of violence, bullying and intimidation to the team. This will reinforce the use of Challenge, Support and Intervention Plan (CSIP) to investigate instances of violence, bullying and intimidation. 		
5.6	General recommendation (1.17 Error! Reference source not found.): Management plans developed for individual prisoners should include specific, meaningful targets that address their poor behaviour. (Directed to: The Governor.)	Agreed	<p>An interventions directory will be developed providing a combined list of interventions which can be incorporated into setting specific meaningful targets, based on key drivers to address problematic behaviour in a more supportive, meaningful and measurable way.</p> <p>A user-friendly guide for all CSIP case managers will be developed to utilise alongside the interventions directory, which can be used as a point of reference for CSIP Case Managers when setting targets as part of the intervention plan.</p> <p>The SC Team will develop a robust and outcome focused quality assurance process, which will be carried out on CSIP case management, identifying any areas of concern or best practice which will be shared through CSIP case manager forums and assurance meetings, to support case managers.</p>	Governor Governor Governor	September 2020 October 2020 September 2020
5.7	General recommendation (1.37): Reintegration planning should be meaningful and address the reasons for the behaviour that has led to segregation. (Directed to: The Governor.)	Agreed	The Reintegration Planning document will be revised with specific adjustments to ensure that it is more directive, and will focus senior managers to set meaningful targets, involving key personnel and stakeholders. A series of training events for senior managers will be arranged to ensure that they are fully conversant in how to use the document, and how to improve target setting. The revised document and targets will look to increase the time spent out of cell during segregation in relation to their reintegration, with an emphasis on rewarding compliant and good behaviour.	Governor	October 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

			<p>When the Offender Management in Custody (OMIC) model is implemented in the Women's Estate, we will adapt this process to involve Key Workers as they will play an integral part in the reintegration plans, and help them address any identified issues.</p> <p>Robust and outcome focussed quality assurance will be carried out on reintegration plans by the Deputy Governor, who will highlight any deficiencies and feedback to the senior manager.</p>	<p>HMPPS</p> <p>Governor</p>	<p>Date to be confirmed</p> <p>October 2020</p>
5.8	<p>General recommendation (2.10): Prisoners should have easy access to support and advice from staff and the personal officer scheme should be effective. (Directed to: The Governor.)</p>	Agreed	<p>The enquiry times available for women to speak to staff will be revisited and revised, to enhance the community ethos and to allow increased periods of time to seek support, advice and guidance from staff, and to assist them with any queries they may have.</p> <p>As an interim process, prior to the implementation of OMiC, we will review our Personal Officer scheme in collaboration with focus groups of women, to identify current weaknesses and develop a strong and effective scheme. From this consultation a Personal Officer Interaction document will be developed, which will include specific actions officers are required to take during their interactions, ensuring a consistent approach,</p> <p>Current management checks for personal officer P-NOMIS entries will be enhanced with a specific management checklist, making it more comprehensive and robust, so any issues can be addressed in a timely manner which will be reported on as part of our assurance process. This will include providing a narrative of 10% of the checks each month that will cover the interaction, feedback from management check, and any actions taken to improve the interactions.</p> <p>Upon implementation of the OMiC model in the Women's Estate, this process will change. OMiC Key Workers will supersede the personal officer scheme with one to one Key Worker meetings with the individual being intrinsically scheduled and recorded.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>HMPPS</p>	<p>October 2020</p> <p>October 2020</p> <p>October 2020</p> <p>Date to be confirmed</p>

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

5.9	General recommendation (2.24): A formal interpretation service should be used for prisoners with a limited understanding of English. (Directed to: The Governor.)	Agreed	It will be a requirement for all staff to use the professional interpretation service for all women who have a limited understanding of English. These women will be identified during their initial reception and highlighted on P-NOMIS to ensure all staff understand that they require the use of translations services. Advice and guidance will be circulated to all staff on how to use and access local interpretation services, and visible guidance will be displayed as a permanent point of reference to be made available to staff in reception.	Governor	September 2020
			The use of Professional Telephone interpretation will be monitored through the management checks of personal officer entries, and by the Equalities Lead who will report their findings to the assurance meeting to ensure the service is being used by those who require it.	Governor	October 2020
5.10	General recommendation (2.47): Care plans, which should be audited, should be drawn up with the patient to ensure they reflect their wishes. (Directed to: The Governor.)	Agreed	The national governance team has been requested to develop a 'care plan audit' which can be added to the audit schedule.	Governor/Head of Health Care Services	October 2020
			Locally a review of 'care plan' quality will be carried out as part of the supervision sessions, on both a group and one to one basis. The importance of 'care planning' with the patient will be discussed at staff briefings which are held daily, to raise awareness and progressively embed patient contribution to the care plan.	Governor/Head of Health Care Services	October 2020
5.11	General recommendation (2.56): Oversight of medicines stock, storage and transportation should be improved to ensure the safety and integrity of medicines. (Directed to: The Governor.)	Agreed	To ensure the safety and integrity of all medicines, date and temperature checks have been implemented for all items, including fridge items and resuscitation equipment.	Governor/Head of Health Care Services	October 2020
			A review of the pharmacy will take place to determine what further improvements can be made to ensure the safe storage of medicines.	Governor/Head of Health Care Services	October 2020
			Medication is given directly from the Pharmacy to individual women. In cases where this is not possible, Healthcare staff attend the women's location where the medications are transported in a locked bag.	Governor/Head of Health Care Services	October 2020
5.12	General recommendation (2.70): Prisoners with mental health problems	Agreed	A recruitment campaign is currently taking place to bring the Mental Health Team up to its full complement of staff, which will allow us to deliver groups more frequently, and allow increased access to those women requiring them.	Governor/Head of Health Care Services	October 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	and/or psychosocial needs should be able to access group therapies. (Directed to: The Governor.)		<p>A comprehensive groupwork schedule has been developed which is expected to be delivered in the Autumn to reflect the needs of the population. This schedule will include the Managing Emotions Group, Psychosocial Interventions will also be offered, including the Self-Management and Recovery Training and Inclusion Recovery, which are long term behavioural change programmes.</p> <p>Holistic therapies, and Inclusion gym twice weekly, will also continue to be offered.</p> <p>A bid has been submitted to MOJ estates for funding for healthcare, which includes confidential therapeutic space for mental health services.</p>	Governor/Head of Health Care Services	October 2020
				Governor/Head of Health Care Services	October 2020
				Governor/Head of Health Care Services	October 2020
5.13	General recommendation (2.73): Peer workers should be supervised and trained to deliver support. (Directed to: The Governor.)	Agreed	<p>In conjunction with our partners we will ensure our women are trained in both Level 2 and Level 3 Information Advice and Guidance. People Plus will deliver the level 2 accreditation in a classroom setting, and St Giles Trust will deliver Level 3 using skills based assessments. This will enable the women to be trained, and to have the necessary skills to act as Peer Mentors appropriately within the establishment.</p> <p>Peer support will represent varying areas of the prison, they will act as mentors and advisors within each capacity who will signpost other women. They will have expertise in housing, finances, debt, education, training and employment. Additionally, Reducing Reoffending and Healthcare will run and manage the establishment's Community Hub, which will serve to develop and implement an effective Peer Support scheme. Peer support workers will be allocated a supervisor in their nominated workplace.</p> <p>In collaboration with Healthcare partners we will establish training and job descriptions for those acting as 'carers', so they are appropriately trained and supervised to carry out this work.</p>	Governor	October 2020
				Governor	October 2020
				Governor	October 2020
5.14	General recommendation (3.28): The prison should recognise, record, and, where possible accredit the skills and behaviour that	Agreed	<p>Personal Learning Plans (PLP) will be embedded in all work areas, with all instructors recognising and recording skills and behaviour in the individuals PLP. The PLP process will be robustly managed with monthly updates by work instructors, so that an evidence base of work-related skills and behaviour is recorded. Dip testing and outcome focused quality assurance will be carried out</p>	Governor	October 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	prisoners develop in work so they can provide evidence of their work experience when released. (Directed to: The Governor.)		<p>monthly on 10% of all plans by the Head of Learning and Skills, to ensure continuous improvement.</p> <p>Wherever possible women will be allocated to workplaces where they can gain accreditations and qualifications that support their chosen career path, that will enhance employment opportunities upon release. In work areas where accredited qualifications are currently not available, we will explore the possibility of delivering these. We will however ensure that the skills developed in these areas are sufficiently recorded and recognised.</p> <p>Accreditations and qualifications will be reviewed each year in conjunction with the establishment's needs analysis, and will be adapted to meet the needs of the population.</p>	Governor	October 2020
				Governor	October 2020
5.15	General recommendation (3.29): In vocational training and work, instructors and assessors should ensure that prisoners act on the feedback provided so they make swift progress. (Directed to: The Governor.)	Agreed	<p>The delivery of skills will be enhanced in work parties by instructors encouraging literacy and maths in the workplace. Women will be given feedback on a weekly basis to enhance their progress, and to understand what actions are required for them to progress. This will be monitored and reviewed at their next session to identify the progress made, and to determine if additional support is required. The feedback will be recorded on their PLP.</p> <p>Dip testing and outcome focused quality assurance will be carried out monthly on 10% of all plans by the Head of Learning and Skills to ensure continuous improvement.</p>	Governor	October 2020
				Governor	October 2020
5.16	General recommendation (3.35): Attendance at the gym should be improved. (Directed to: The Governor.)	Agreed	<p>A system for recording data relating to Gym attendance will be introduced, which will allow us to analyse and identify which women are not utilising these facilities. Once this cohort is identified we will survey them to explore the reasons why, and to allow us to take the necessary steps to improve attendance.</p> <p>An annual survey will be carried out to determine how an inclusive gym programme can be developed, so that it attracts and caters for all women, regardless of their ability, or any protected characteristic, with a view to improving attendance.</p>	Governor	October 2020
				Governor	October 2020

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

			The profile of the Gym will be raised by increasing promotional work through induction, peer workers, Way Out TV, dining room slides, wellbeing events and collaboration with Healthcare.	Governor	October 2020
5.17	General recommendation (4.4): The prison's reducing reoffending strategy should be based on a needs analysis to ensure that the interventions and support available meet the needs of prisoners in their care. (Directed to: The Governor.)	Agreed	HMP/YOI Drake Hall will conduct its annual needs analysis, which will then be used to inform the reducing reoffending strategy. Data for the analysis will be captured by combining local questionnaire, P-NOMIS, and segmentation data. This will form the basis of the Reducing Reoffending action plan which will ensure that we are coordinating and driving progress, whilst also allowing us to adapt provision to the needs of our women. Findings from the Needs Analysis will be incorporated into the Interventions Directory, to provide a consistent approach that supports and meets the needs of the prisoners in our care.	Governor Governor	October 2020 November 2020
5.18	General recommendation (4.11): Contact between prisoners and their offender supervisors should take place regularly, be meaningful and support sentence progression. (Directed to: The Governor.)	Agreed	A minimum level of expected contact between Offender Supervisors and our women will be set, ensuring that these contacts are regular, planned and meaningful that will support sentence progression. A 10% monthly management checks will be carried out by the Head of the Offender Management Unit to ensure regular contact with the women is taking place, which compliments the drop-in service. When the OMIC model is introduced in the Women's Estate, we will adhere to the prescribed contact levels for Prison Offender Managers, along with regular and meaningful contact from Key Workers. Both will be an integral part in supporting sentence progression and helping our women address any identified issues.	Governor Governor HMPPS	September 2020 October 2020 Date to be confirmed
5.19	General recommendation (4.12): There should be a sufficient number of BASS spaces so prisoners approved for HDC can be	Partly Agreed	This recommendation is partly agreed as it is subject to the spending review, and dependent upon the number of spaces available at the point of referral and release. The Bail Accommodation and Support Service (BASS) contract let in 2018 for 550 is being expanded to 605 places by August 2020. Sourcing areas for this additional provision include North West England, Wales, London and	HMPPS	Ongoing

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

	released promptly. (Directed to: HMPPS.)		South East. Further provision expansion will be considered as part of the 2020 Spending Review. HMP/YOI Drake Hall will continue to make the necessary referrals for all women identified as requiring BASS accommodation, either through the CRC provider or Community Offender Managers.	Governor	Ongoing
5.20	General recommendation (4.17): The prison should check written correspondence to and from prisoners who are subject to child contact restrictions. (Directed to: The Governor.)	Agreed	A robust system has been put in place for those staff handling written correspondence, ensuring that any written correspondence relating to a woman who is subject to child contact restrictions is adequately checked. This includes the use of a checklist to ensure that all relevant information has been collated and checked. A user guide has also been produced and made available to staff, to ensure compliance. The Head of OMU will carry out a monthly compliance check on 10% of all written correspondence for those subject to child protection measures.	Governor Governor	Completed September 2020
5.21	General recommendation (4.26): Access to through-the-gate support should be based on prisoners' needs rather than probation area. (Directed to: The Governor.)	Agreed	We agree that Through the Gate (TTG) delivery should be provided according to individual needs and have implemented an enhanced TTG service, to aid the provision of resettlement in all resettlement prisons including HMP/YOI Drake Hall. This new specification includes the requirement that CRCs complete specific, tailored tasks to help women to secure and maintain settled accommodation, gain employment and manage debt and their financial affairs. To support this, we have invested an additional £22m per annum over the remaining life of the Community Rehabilitation Company contracts to deliver an enhanced TTG resettlement service to people leaving prison to prepare them for release. At the present time, however, we have put in place an 'Exceptional Delivery Model' (EDM) for CRC services to cope with high levels of staff absences and adhere to social distancing guidance during the Covid-19 crisis.	Governor/CRC Provider	Ongoing

Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.

Recommendations	
Agreed	20
Partly Agreed	1
Not Agreed	0
Total	21



Actions against target dates are likely to be delayed due to COVID-19 disruptions to service delivery.
