



HM Prison &
Probation Service

Action Plan: HMP/YOI Erlestoke

Action Plan Submitted: 17th September 2024

A Response to the HMIP Inspection: 10-21 June 2024

Report Published: 16 September 2024

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 His 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 priority and key concerns. Action plans provide specific steps and actions to address the priority and key concerns, that are clear, outcome focussed, 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.



ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP/YOI Erlestoke

1. Rec No	2. Concerns	3. Response Action Taken/Planned	4. Responsible Owner	5. Target Date
	Priority concerns			
1	Illicit drugs were far too easily available. In our survey, 60% of respondents said that it was easy to get hold of drugs, and 32% of all random drug test results had been positive in the last year.	<p>In order to better manage the ingress of goods and parcels into the establishment, HMP Erlestoke has committed additional resources to the Enhanced Gate Security (EGS), including a dedicated Custodial Manager and Supervising Officer.</p> <p>Collaborative working between the Drug Strategy Lead, Head of Security and Head of Safety has been improved, including through sequencing of the Drug Strategy and the Security meetings and improved attendance. The improved information and analysis sharing will lead to a better understanding of the drivers and impact of the illicit economy.</p> <p>HMP Erlestoke has implemented the photocopying and swabbing of mail which is being managed through a dedicated Hub.</p> <p>Drug Recovery Wing led interventions have been introduced to support those wanting to remain addiction free, with priority access to the Incentivised Substance Free Living (ISFL) unit for those who maintain abstinence.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>November 2024</p> <p>Complete</p> <p>Complete</p>



		<p>HMP Erlestoke will ensure that 60% of the ISFL unit is reserved for prisoners with an addiction history.</p> <p>HMP Erlestoke has completed an increased number of suspicion-based tests, which are managed through the weekly regime meeting. The establishment has also expanded the range of drugs tested by introducing steroid-based testing with two intelligence led tests per month currently being administered.</p> <p>Staff training days will be used to provide upskilling on the correct management and accounting of prisoner processes to mitigate against flow of illicit substances whilst in activities on or off the unit.</p> <p>HMP Erlestoke will continue to identify all funding opportunities and bid for additional funding to improve the security of the prison. This will include perimeter fence CCTV.</p> <p>HMP Erlestoke have recognised the link between boredom and the use of substances amongst prisoners and will ensure that prisoners are more constructively engaged in purposeful activity spaces.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>November 2024</p> <p>Complete</p> <p>December 2024</p> <p>March 2025</p> <p>March 2025</p>
2	<p>There were not enough spaces available in education, skills or work. In addition, leaders did not make sure that the spaces available were fully used and allocated to prisoners based on their needs and aspirations.</p>	<p>A full review of the allocations and sequencing process has taken place with a revised Terms of Reference, agenda and meeting structure which maximises access to available spaces and avoids duplication of allocation.</p> <p>Improvements will be made to sequencing to ensure that prisoner learning needs and pathways are identified early, and</p>	<p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>November 2024</p>



		<p>prisoners are allocated appropriately to maximise their progression and employment opportunities on release.</p> <p>A Learning Needs Analysis will be completed with input from the Prison Employment Lead, Information, Advice and Guidance colleagues to ensure that activities meet prisoners' needs and aspirations.</p> <p>The Industries Manager will work with New Futures Network and the Industries, Retail, Catering and Physical Education team to identify opportunities to increase activity spaces and improve existing contracts.</p> <p>HMP Erlestoke has introduced a new Activities Custodial Manager position to drive attendance in purposeful activity and improve the operational interface with residential and activities functions. This has seen improved assurance processes in identifying reasons for non-attendance and barriers to attendance.</p> <p>The Neurodiversity Support Manager now feeds into the allocations process to provide support to prisoners with complex needs.</p> <p>A dedicated training day in October 2024 was used to upskill staff and provide clear expectations regarding their responsibilities in supporting prisoners to engage in Purposeful Activity.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>December 2024</p> <p>January 2025</p> <p>Complete</p> <p>Complete</p> <p>Complete</p>
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		<p>HMP Erlestoke will introduce 'roll on/ roll off' allocations across all applicable Education courses to maximise course attendance.</p> <p>Educational and vocational activities will be incentivised through a review of the pay policy which will be completed in accordance with the revised national pay guidelines.</p>	<p>Governor</p> <p>Governor</p>	<p>December 2024</p> <p>February 2025</p>
3	<p>The amount of force used by staff on prisoners and use of unfurnished cells was high. Scrutiny arrangements were not sufficiently robust, and we identified some examples of disproportionate use of force and an inappropriate use of PAVA (pelargonic acid vanillyl amide) spray.</p>	<p>The Head of Safety and/or Deputy Governor reviews all decisions to use Special Accommodation (unfurnished cells) and where possible this is always prior to use to ensure the decision is proportionate and all other options have been considered.</p> <p>All use of Special Accommodation is reviewed as part of the Segregation, Monitoring and Review Group (SMARG). This ensures that use is defensible and proportionate, identifies any disproportionalities and offers feedback for improvement. The frequency of the SMARG has also been increased to monthly to provide more effective oversight.</p> <p>The Use of Force, including Body Worn Video Camera footage is thoroughly reviewed in the weekly scrutiny meetings to identify lessons learned, which are shared with staff. Monthly governance meetings focus on the importance of de-escalation techniques and the appropriateness of force, along with learning outcomes and early intervention strategies. Minutes from these meetings are recorded for reflective learning, and findings are communicated to the wider staff group, with ongoing progress monitored.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>



		<p>HMP Erlestoke will increase the use of Body Worn Video Cameras by upskilling staff through training days and monitoring the use and drawing of cameras through the Use of Force meeting.</p> <p>Since the inspection, HMP Erlestoke has employed an experienced national Use of Force Instructor who provides ongoing expert advice on the Use of Force including the appropriate use of PAVA.</p>	<p>Governor</p> <p>Governor</p>	<p>November 2024</p> <p>Complete</p>
4	<p>Clinical governance of health care services was weak. Clinical risks were not always identified, the management of clinical incidents was ineffectual, and patients' complaints were poorly managed.</p>	<p>HMP Erlestoke has revised the Local Delivery Quality Board (LDQB) Agenda to ensure it provides comprehensive oversight of all aspects of health delivery, including ensuring that commissioned and subcontracted service delivery is in line with the commissioned provision. Actions and progress are tracked through the LDQB, and the meeting frequency has been increased from bi-monthly to monthly.</p> <p>HMP Erlestoke has introduced a local Health Improvement Board (HIB) to closely oversee improvements across key areas. Any concerns from the LDQB are escalated to the HIB and actions and progress are be tracked through this format. The HIB is attended by NHS England and periodically by the Prison Group Director.</p> <p>Since the inspection, Healthcare have implemented changes to improve the identification of clinical risk. These include the review of risk register, the updating of the scheduling of monthly risk review meetings, and enhanced administrative processes. 100% of Mental Health Patients have received a Care Programme Approach (CPA).</p>	<p>Governor and Head of Healthcare</p> <p>Governor and Head of Healthcare</p> <p>Head of Healthcare</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>



		<p>A recall function is under development to aid in the long-term management of annual patient reviews, alongside the ongoing development of a Health and Wellbeing strategy.</p> <p>The backlog of clinical incidents identified during the review has been successfully cleared. To prevent future accumulation, clinical incident reviews and the associated learning have now been added into local team agendas, ensuring ongoing attention and proactive management of such incidents.</p> <p>The complaints process has been changed and effectively communicated to ensure that patients can lodge complaints in confidence. The processing of complaints has been updated internally, with the administrative team collaborating with the prison's new electronic guidelines to maintain continuity.</p> <p>The Healthcare Forum is being re-established to actively listen to the patients' voice and implement necessary changes to practice based on their feedback.</p>	<p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p>	<p>December 2024</p> <p>Complete</p> <p>Complete</p> <p>December 2024</p>
5	<p>The curriculum provided was not broad enough, and the quality of education, skills and work was insufficient to meet prisoners' needs and interests.</p>	<p>The Head of Education, Skills and Work will work with Milton Keynes College to review the curriculum, so it meets learner needs and is enriching and engaging. Actions and progress from the review process will be monitored through the local Quality Improvement Group (QIG).</p> <p>A full Learning Needs Analysis will be conducted by the Head of Education, Skills and Work, in collaboration with the Prison Employment Lead and Information Advice and Guidance colleagues to inform the curriculum for the next year to ensure it</p>	<p>Governor</p> <p>Governor</p>	<p>February 2025</p> <p>December 2024</p>



		<p>is maximised, engaging and supports sentence progression and employment on release.</p> <p>The Industries Manager will work with New Futures Network to identify additional vocational courses that can be offered to support pathways and employment on release.</p> <p>The Neurodiversity Support Manager at HMP Erlestoke is developing specific interventions and initiatives for neurodivergent prisoners so they are able to fully engage in activities.</p>	<p>Governor</p> <p>Governor</p>	<p>January 2025</p> <p>November 2024</p>
	Key concerns			
6	First night cells were dirty, and some were not fit for use. The regime on the induction unit was poor, and delays with the first shop order increased the risk of debt.	<p>The Induction Officers will complete a decency check on Induction cells prior to occupation, these will be overseen by the Induction Manager carrying out weekly assurance checks.</p> <p>A new range of First Night Canteen packs which include basic necessities and vapes will be available for new prisoners upon arrival.</p> <p>The repayment of First Night Canteen packs is now delayed by two weeks to ensure that prisoners have enough funds to purchase goods on the next scheduled Canteen ordering day.</p> <p>Prisoner feedback from the planned Safety and Violence Summits will be used to identify processes that could further inform the broader local debt strategy.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>November 2024</p> <p>December 2024</p> <p>Complete</p> <p>November 2024</p>



		<p>The regime on the Induction Unit will be refreshed to allow access to education, gym and other purposeful activities. This will ensure that prisoners, including individuals transferring to HMP Erlestoke from other establishments, adjust to prison life and are able to access a full regime promptly.</p> <p>The Induction programme will be reviewed so it meets the needs of prisoners, and this will include prisoner feedback so lived experience can inform the future offer.</p>	Governor	December 2024
			Governor	January 2025
7	<p>The prison was not doing enough to tackle violence. Not all such incidents had been investigated and there was no overarching plan to reduce violence.</p>	<p>HMP Erlestoke has invested in the Safer Custody team and increased resources to include an additional Supervising Officer and Custodial Manager. A Safer Custody Hub will also be created to co-locate the new team into a shared office to better drive data sharing and analysis.</p> <p>HMP Erlestoke has relaunched Challenge, Support and Intervention Plan (CSIP) to include unit folders which contain guidance, best practice and unit check sheets. This supports the CSIP training already provided to unit managers. Staff and prison champions have been identified to continue to drive the standards of CSIP referrals and investigations.</p> <p>The Head of Safety and Safety Custodial Manager at HMP Erlestoke will complete 20% quality assurance on referrals, investigations and open plans with learning from the findings shared with relevant staff. In addition, the Prison Group Safety Team will carry out periodic assurance checks as part of their scheduled visits to HMP Erlestoke.</p>	Governor	November 2024
			Governor	Complete
			Governor	December 2024



		<p>The Head of Safety and Safety Custodial Manager will quality assure and observe CSIP review meetings to ensure consistency and to provide feedback. This will also support specific targets being allocated to drive improved behaviours.</p> <p>The Safety Supervising Officer now works with the Safety Analyst to identify where CSIP referrals are missing from violent incidents and allocates staff accordingly.</p> <p>The Head of Safety will work collaboratively with the Head of Residence to support timely completion of CSIP referrals and to ensure HMP Erlestoke is proactively responding to incidents.</p> <p>An overarching Safety Strategy will be developed, and actions and progress will be monitored through the Safety Meeting and weekly Safety Intervention Meeting. Attendance at the Safety Meeting and Safety Intervention Meetings will be monitored by the Deputy Governor to drive increased attendance and collaborative working.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>November 2024</p> <p>Complete</p> <p>December 2024</p> <p>December 2024</p>
8	<p>The recorded levels of self-harm were very high and not enough was being done to reduce these.</p>	<p>HMP Erlestoke ensures that Healthcare staff are now invited to and routinely attend Assessment, Care in Custody and Teamwork (ACCT) reviews.</p> <p>HMP Erlestoke will develop an overarching Safety Strategy which will be informed by an analysis of current data in relation to self-harm incidents. Actions and progress will be tracked through the Safety Meeting. The Deputy Governor will monitor attendance at the weekly Safety Intervention Meeting to drive a collaborative approach and better data sharing and use of data</p>	<p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>December 2024</p>



		Learning points from investigations will be shared with staff to mitigate against future incidents and the training days will be used to upskill staff on risk and triggers of self-harm and the ACCT process.	Governor	November 2024
9	The key worker scheme was ineffective. Delivery was inconsistent and did not support sentence progression.	<p>HMP Erlestoke has adopted a unit-based approach to keywork which has resulted in a 100% increase in the number of key work sessions being delivered. This is supporting more meaningful relationships between staff and prisoners which will be conducive to sentence progression.</p> <p>The quality of key work sessions will be monitored locally, with regional support, to ensure that conversations are meaningful and promote sentence progression. Residential Custodial Managers will quality assure sessions with the Head of Residence performing an additional 10% dip test of the keyworker case notes. Feedback will be provided to staff to inform best practice and address improvements where necessary.</p> <p>Staff training days will be used by the Head of Offender Management Services to upskill staff on what a quality session looks like and the importance of a meaningful conversations. This will be supported by regular feedback and reflective sessions for unit Custodial Managers. HMP Erlestoke will further improve the quality of keywork by using the new Keywork Quality Audit baselines to structure local quality assurance arrangements.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>November 2024</p> <p>February 2025</p>
10	Standards of cleanliness and access to cleaning materials were inconsistent.	A review of stock process on units will take place to identify any issues with stock management and delivery of cleaning items. The Head of Residence and Business Hub Manager will provide	Governor	December 2024



		<p>support to Government Facilities Services Ltd (GFSL) staff to monitor that delivery and ordering processes are fit for purposes and that a clear delivery schedule is in place. Any identified issues will be escalated via the monthly GFSL governance meeting for actions to be identified and progress tracked.</p> <p>HMP Erlestoke will ensure high standards of cleanliness and decency via weekly assurance checks provided by Custodial Managers and Head of Residence.</p> <p>The Living Conditions audit action plan will be used to ensure that effective oversight is given to decency on the units. Actions will be tracked through a Consolidated Action Plan and discussed at the monthly Senior Management Team and GFSL governance meetings.</p>	Governor	November 2024
			Governor	February 2025
11	Food portions were too small.	<p>The Catering Manager will work with the Head of Residence to maximise portion sizes within the allocated budget for the daily food allowance. The Area Catering Manager will be asked to support and advise on how the food offer can be improved.</p> <p>HMP Erlestoke will introduce dedicated quarterly food forums alongside the Prison Forum to collate prisoner feedback. This feedback will be used to inform menu choices.</p>	Governor	February 2025
			Governor	November 2024
12	There was limited action to address negative perceptions of treatment among prisoners from ethnic minority groups. These prisoners expressed frustration that their concerns were not being addressed.	External scrutiny takes place on Discrimination Incident Reporting Form (DIRF) responses and the findings from these are discussed with the SMT and managers so that good practice can be shared, and learning taken forward. Actions are monitored and tracked through the monthly Diversity and Inclusion (D&I) meetings.	Governor	Complete



		<p>Priority is given to ensuring responses are timely, fair and consistent and that the prisoners are involved in the redress of their concern. Progress is tracked through the daily morning briefing and monthly D&I meeting.</p> <p>A central log of suggestions from forums will be managed and tracked through the D&I meeting with timescales attached to identified actions so tangible outcomes are achieved. Progress will be reported back to prisoners through the forums.</p> <p>Improved data analysis will be used to inform better outcomes for prisoners which will involve a deep dive of all available data for persistent areas of disproportionality such as Adjudications and Employment, to include NOMIS case management system entries, allocations data and complaints data. Findings will be shared in the monthly D&I meetings and actions tracked.</p> <p>Staff training days will be used to improve awareness in the staff group, and this will include presentations by prisoners on their Lived Experience.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Complete</p> <p>November 2024</p> <p>December 2024</p> <p>February 2025</p>
13	Prisoners' reading needs were not assessed effectively, so the amount of support needed for the population was not known.	<p>A full needs analysis will take place to understand the needs of prisoners and the support required to ensure they can engage proactively in their literacy needs.</p> <p>HMP Erlestoke will introduce reading 'nooks' in all activity areas and units to ensure that reading is accessible to all and promotes reading for pleasure.</p> <p>The progress of the local Reading Strategy and prisoner needs will be monitored through the monthly QIG with actions and</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>November 2024</p> <p>February 2025</p> <p>November 2024</p>



		progress tracked. The Reading Strategy will be reviewed to consider the feedback from Inspectors.		
14	The information, advice and guidance provided during induction was not of sufficient quality to enable prisoners to make progress towards achieving their goals and help prepare them for release.	<p>HMP Erlestoke will work with Information Advice and Guidance colleagues to assess all prisoners within a month of arrival and develop their Personal Learning Plans.</p> <p>Revised terms of reference and a standing agenda for the weekly Allocations meeting provides better oversight of prisoner needs and this is tracked through a robust tracking database that is reviewed weekly.</p> <p>Early involvement of the Prison Employment Lead will ensure that progress is linked with employment opportunities on release.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>December 2024</p> <p>Complete</p> <p>November 2024</p>
15	The governance and oversight of medicines were not robust, and inadequate support and reviews of opioid substitution therapy were putting prisoners at unnecessary risk of significant harm. There were gaps in patients' risk assessments and room and refrigerator temperature recording, missed doses of medicines were not always investigated and incidents were not reviewed in a timely manner.	<p>The LDQB agenda has been revised to provide comprehensive oversight and data to monitor delivery of health services and identify risks.</p> <p>HMP Erlestoke works closely with National Health Service England Commissioners and the Health provider to respond to the Care Quality Commission findings. Actions and progress are monitored through LDQB and the HIB.</p> <p>A clinical substance misuse prescriber resource has been redeployed to HMP Erlestoke to address immediate clinical risk concerns.</p>	<p>Governor</p> <p>Governor</p> <p>Oxleas</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>



		<p>Improved support and oversight is provided to the Head of Healthcare by the regional Oxleas Manager to address the immediate risk factors in delivery.</p> <p>To improve the support and reviews of opioid substitution therapy (OST), healthcare has increased the resources available temporarily. A permanent member of staff is being recruited to deliver OST.</p> <p>New In-Possession Risk Assessment (IPRA) guidance is currently being drafted, with plans to incorporate it into the In-Possession Policy. This revised guidance will include a narrative outlining the frequency for conducting assessments, based on the RAG rating.</p> <p>To ensure effectiveness, completion of weekly IPRA will be closely monitored, supported by the development of an IPRA clinic aimed at increasing both the uptake and review process to achieve an 80% completion rate for applicable patients.</p> <p>The processes for recording room and refrigerator temperatures have been streamlined to enhance accountability and facilitate better escalation procedures. Regular management checks have been introduced to ensure compliance and accuracy.</p> <p>A new Did Not Administer (DNA) policy has been developed, along with a critical medications list that includes a RAG rating system. A DNA Quality Improvement audit is being implemented to review and reduce instances of missed doses.</p>	<p>Oxleas</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p>	<p>Complete</p> <p>December 2024</p> <p>November 2024</p> <p>November 2024</p> <p>Complete</p> <p>November 2024</p>
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		<p>The use of instant messaging and other communication resources will be enhanced to engage with patients who have missed their medications, clearly outlining the consequences of non-concordance.</p> <p>Regular focused pharmacist-led clinics are being established to promote compliance and provide education to patients on the importance of adhering to their medication.</p> <p>The backlog of incident reviews has been cleared and operational changes have taken place to ensure there will not be a repeat.</p>	<p>Head of Healthcare</p> <p>Head of Healthcare</p> <p>Head of Healthcare</p>	<p>November 2024</p> <p>November 2024</p> <p>Complete</p>
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