



HM Prison &
Probation Service

Action Plan: HMP Thameside.

Action Plan Submitted: 06 June 2025.

A Response to the HMIP Inspection: 3 -13 February 2025

Report Published: 12th May 2025

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 Thameside

1. Rec No	2. Concerns	3. Response Action Taken/Planned	4. Responsible Owner	5. Target Date
	Priority concerns			
1.	Levels of violence were high. Low-level poor behaviour went unchallenged, and the adjudication system was mostly ineffective.	<p>All incidents of violence are discussed with the Senior Leadership team each morning and investigations / interventions tasked. This will result in CSIP management, SIM referrals and multidisciplinary interventions being applied accordingly.</p> <p>All new Prison Custody Officer's (PCO) will be trained in REACT prior to commencing live duties. We will continue to refresh staff throughout the calendar year.</p> <p>Embed the CSIP model including the upskill of all staff in identifying the drivers of violence.</p> <p>Utilise the CSIP QA to improve support for prisoners that are prone to anti-social behaviours resulting in physical violence and referring to the SIM for action.</p>	<p>Director</p> <p>Director</p> <p>Director</p> <p>Director</p>	<p>July 2025</p> <p>August 2025</p> <p>July 2025</p> <p>September 2025</p>



		<p>A review of staff deployment will be completed to ensure a better mix of experience levels amongst staff on the Houseblocks.</p>	<p>Director</p>	<p>July 2025</p>
		<p>The use of Violence Reduction peer support workers will be developed across all residential areas to encourage better peer interaction where conflict arises using a restorative approach. Terms of Reference to be devised that creates a regular forum for the Safer Custody team, Residential and prisoners to meet, to discuss violence to highlight themes and data with a view to supporting prisoners more proactively and effectively.</p>	<p>Director</p>	<p>July 2025</p>
		<p>The prison will monitor gang affiliations and culture through the Catch 22 Gangs team to ensure we manage the safety of prisoners who have serious gang conflicts. All prisoners will be seen on Early Days in Custody (EDC) to identify conflicts. A regular MDT will be led by the gang's team to ensure our population is understood and risk identified and actioned promptly.</p>	<p>Director</p>	<p>July 2025</p>
		<p>Monthly Segregation, Monitoring, Assurance and Risk Governance (SMARG) meetings will focus on all incidents of violence that have resulted in adjudication, to ensure adjudicators are providing consistent responses and appropriate referrals to police or the Independent Adjudicator.</p>	<p>Director</p>	<p>August 2025</p>



		<p>The adjudications tariff will be regularly reviewed so that the consequences for acts of bullying and other forms of violence are sufficiently robust.</p>	Director	September 2025
		<p>Review the incentives policy and core day to engage prisoners in a community-based vision – Positive behaviour will be rewarded, and negative behaviour will be challenged.</p>	Director	December 2025
2.	<p>The use of drugs was too high. In random mandatory drug tests a quarter of prisoners had tested positive in the last year.</p>	<p>A full review of the Drug Strategy will be undertaken to ensure there is a firm focus on supply reduction, clinical interventions through the Healthcare provider and psychosocial interventions through the substance misuse partner, Turning Point.</p>	Director	September 2025
		<p>There will be a review of current dog section provision to consider whether there is adequate active drugs dog resource. We will seek regular support from HMPPS dog team in response to intel and data in relation to drugs.</p>	Director	September 2025
		<p>More staff will be trained in Mandatory Drug Testing (MDT) processes to enable more suspicion testing.</p>	Director	November 2025
		<p>The prison will support the remand population by introducing an Incentivised Substance Free Living (ISFL) unit on Houseblock 1. This will allow prisoners awaiting sentencing or outcomes at court</p>	Director	January 2026



		to stabilise and seek support with their drug misuse and actively engage in recovery.		
3.	The previous requirements for improvements imposed by the health care regulator in 2024 had not been addressed. Inconsistent leadership and failing governance had led to inadequate management of complaints, poor record keeping in primary care and mental health, and deficiencies in recording medicines. This fundamentally undermined patient safety.	<p>A remedial action plan has been developed focussing on the key areas highlighted by the CQC and this has been ratified and approved by the National Practice Plus Group Summit Process (National Governance structure for sites under clinical quality risk) and NHS England. This action plan runs until the CQC repeat inspection in June 2025. The frequency of the Summit meetings has also increased to weekly to ensure suitable oversight and scrutiny is applied to progress on site.</p> <p>A specific patient safety plan has been created which includes a key focus on complaints and is mapping the quality and response times to complaints.</p> <p>A new Head and Deputy Head of Healthcare started in post on 22 April 2025.</p> <p>The London Regional Pharmacist has been redeployed to Principal Pharmacist at HMP Thameside to drive through required changes in medicines and this is captured within the remedial action plan</p>	<p>Practice Plus Group</p> <p>Practice Plus Group</p> <p>Practice Plus Group</p> <p>Practice Plus Group</p>	<p>June 2025</p> <p>Complete</p> <p>Complete</p> <p>Complete</p>



		<p>Governance structures and support have been reset from the March 2025 with a new meeting structure including monthly quality assurance meetings, patient safety incident review group meetings, bi-weekly senior leadership team meetings and monthly medicines management meetings. All meetings are chaired either by the head or deputy head of healthcare and in the case of medicines management, the principal pharmacist. This meeting structure is also replicated on a regional level so that data can be compared with other similar sites. The service is also receiving support from some of the national clinical team who are on site throughout the week to support with teaching and learning for staff.</p>	Practice Plus Group	Complete
4.	<p>Several components of primary care administration and practice were inconsistent, so the needs of patients were not being fully met.</p>	<p>Additional resourcing and support for the administration function at HMP Thameside has been provided to drive through improvement.</p> <p>An experienced GP Consultant will join the Transformation Team from April 2025 to lead on improving primary care practice.</p> <p>The Long-Term Conditions (LTC) pathway and clinic progress has been formalised through a recent review of how the clinics are organised and the frequency at which they are delivered. Clinics</p>	<p>Practice Plus Group</p> <p>Practice Plus Group</p> <p>Practice Plus Group</p>	<p>September 2025</p> <p>Complete</p> <p>Complete</p>



		<p>now run 3 times per week with oversight from senior clinicians. In order to continue to upskill the current nursing workforce on sight, senior clinicians are supporting through attendance at clinics and reviewing patient cases and documentation with nurses.</p> <p>An LTC diabetic specialist has also been recruited to work at HMP Thameside and will commence employment once vetting is complete.</p> <p>The Patient application pathway has been improved and has reduced from 11.7 days (January) to 1 day in March. Access to the Case Management System (CMS) will be provided for healthcare staff to maintain this.</p> <p>External hospital appointments have been reviewed and a new process implemented to support the safe management of patients requiring access to secondary care services.</p> <p>All areas of the above action plan are monitored and reviewed on a weekly basis in an action plan review meeting that is attended by local and regional managers and leads.</p>	<p>Practice Plus Group</p> <p>Practice Plus Group</p> <p>Practice Plus Group</p> <p>Practice Plus Group</p>	<p>Ongoing</p> <p>June 2025</p> <p>Complete</p> <p>Complete</p>
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<p>5.</p>	<p>There were too few prisoners allocated to activity.</p>	<p>There will be a full review of the activity spaces offered, the allocation board and the underpinning processes to allocate prisoners to activities. This will ensure allocation to the most appropriate work/training pathway and ensure that all prisoners have access to education and employment. This will include a full accommodation review to identify areas where capacity for work/ activities can be maximised. We will aspire for all prisoners to be offered a activity placement within the first month of custody</p>	<p>Director</p>	<p>September 2025</p>
		<p>Attendance to mandatory education induction will be incentivised using a range of approaches. This will include prioritising education induction over gym induction as well as the introduction of additional mobile credits for all successful attendance and completions.</p>	<p>Director</p>	<p>September 2025</p>
		<p>Functional Heads to identify where further activities can be created that is purposeful and engaging</p>	<p>Director</p>	<p>September 2025</p>
		<p>A policy to support the creation of new activities will be established and shared with Functional Heads to ensure everyone understands the process of activity creation.</p>	<p>Director</p>	<p>September 2025</p>
		<p>All employment activities will be banded according to level of qualification and skill needed.</p>	<p>Director</p>	<p>September 2025</p>



		<p>The pay policy will be reviewed and rewritten to be better aligned with the employment bands. This will incentivise regular attendance</p>	Director	September 2025
		<p>An activities co-ordinator will be appointed to be responsible for the Purposeful Activities administration team.</p>	Director	September 2025
		<p>The Labour Board will be replaced with an Allocations Board and led by the Learning and Skills Manager to ensure that prisoners are allocated appropriately to education, training and or work.</p>	Director	September 2025
		<p>Reporting on allocations will be introduced as part of a focus on Quality Assurance. This will include weekly reports as part of the morning meeting and bi-monthly reviews as part of the Quality Improvement Group (QIG) agenda.</p>	Director	September 2025
6.	<p>Teaching was not consistently good across education, skills and work, and prisoners did not develop the relevant knowledge and skills that would help them on release.</p>	<p>Working with the Curriculum Managers, and using the Ofsted framework as a guide, the Learning Education Manager (LEM) will create a baseline of strengths and areas of development for all teaching staff.</p>	Director/ NOVUS	September 2025
		<p>The LEM and Hub Managers will devise a targeted Continuing Professional Development (CPD)</p>	Director/NOVUS	September 2025



		<p>programme which addresses individual areas of development but also identifies areas which need improvement across the team. This will include a focus on, but is not exclusive to, Learning Difficulty and/or Disability strategies effective feedback to learners and address inconsistencies in English for Speakers of their Language delivery.</p> <p>The CPD programme will be implemented, and improvements monitored through learning walks and observations undertaken jointly by the LEM; Learning and Skills Manager and Head of Education, Skills and Work (HoESW). Curriculum Managers will also be included on a rotation to ensure there is a consistent view of what constitutes effective practice. Data on improvement will be reported at the Education Performance Meeting (EPM); QIG and Quality Education Framework meetings.</p> <p>Time will be given to teaching staff to observe each other.</p> <p>As part of the CPD programme, the updated marking and feedback policy will be relaunched to all teaching staff, with all updates and expectations shared with the HoESW.</p> <p>Monthly planned quality assurance activities, led by Curriculum Managers, will continue to monitor marking and feedback standards across all learning areas, and findings from all quality</p>	<p>Director/ NOVUS</p> <p>Director /NOVUS</p> <p>Director/NOVUS</p> <p>Director/NOVUS</p>	<p>September 2025</p> <p>September 2025</p> <p>September 2025</p> <p>September 2025</p>
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		<p>assurance processes will be shared with the LSM at the EPM.</p> <p>Teacher planning, including Schemes of Learning (SOLs), will be required to demonstrate clear opportunities for learners to develop oracy and literacy skills in all subjects and these will be monitored through planned learning walks and as well as through scrutiny of the SOLs. Individual Learning Plans will identify key employability skills that are being developed through classroom delivery, and these will be introduced into work areas. The Individual Learning Plans will be sampled and signed off for quality during planned learning walks.</p>	Director/NOVUS	September 2025
	Key Concerns			
7.	Care for prisoners in crisis was not good enough. ACCT documents did not offer suitable support for prisoners in crisis and there was insufficient input in their management from health care professionals.	<p>A review of ACCT use will be conducted in June 2025. The review will consider risk management strategies, appropriate action setting, and if the documents adopt a person-centred approach from opening to closing. An action plan will then be created to track progress and regular quality assurance will be completed and evidence gathered throughout.</p> <p>Case Managers have been upskilled to ensure that they are aware of the different sources of support that need to be recognised in case reviews. Training will be delivered at 6 monthly intervals to</p>	<p>Director</p> <p>Director</p>	<p>August 2025</p> <p>August 2025</p>



		<p>ensure this information is live and captures any newly promoted case managers.</p> <p>There is a now a member of healthcare staff designated to attend ACCT reviews. A member of healthcare staff will attend all initial reviews and the SIM.</p>	Director/Practice Plus Group	Complete
8.	<p>Too many prisoners were unable to access functioning CMS terminals in their cells, preventing them from making applications and staying informed. Additionally, the application process was poorly managed, with many requests going unanswered.</p>	<p>A full review of the availability of CMS terminals in cells will take place across the site and a process put in place to ensure that replacements and repairs are timely. This will also include a design prototype that will ensure they are fixed in 1 location in cell.</p> <p>The current applications system will be reviewed, and processes put in place to monitor timeliness and appropriateness of responses. A Quality Assurance process will be embedded and discussed at the morning meeting daily to drive compliance. Work to identify any backlogs in response times will be undertaken to address and clear these.</p>	<p>Director</p> <p>Director</p>	<p>September 2025</p> <p>September 2025</p>



9.	There was no up-to-date health needs assessment.	NHSE will undertake a revised health needs assessment to review the changes in population residing in HMP Thameside.	NHSE	February 2026
10.	Patients needing care in a mental health hospital waited too long to be transferred.	<p>The Mental Health Bill, currently going through Parliament, sets out vital reforms to support people with severe mental illness in the criminal justice system. This includes a new statutory time limit of 28-days for transfers from prison and other places of detention to hospital, which together with operational improvements, aims to reduce unnecessary delays and deliver swifter access to treatment.</p> <p>The MoJ will be working with partners to create an implementation plan which sets out the operational changes which will be necessary to fulfil our commitment to commencing this reform 18-24 months post Royal Assent.</p> <p>MoJ are also working closely with our health and justice partners to support the development of the recently established Mental Health and Justice Strategic Advisory Group. This group will improve oversight of the transfer process by bringing together key partners across operational delivery to scrutinise data and intelligence on transfer timeliness and identify and deliver solutions to address common causes of delays.</p>	<p>Offender Health, MoJ.</p> <p>Offender Health, MoJ.</p> <p>Offender Health, MoJ</p>	<p>Ongoing 18 – 24 months after Royal Assent.</p> <p>Ongoing 18 – 24 months after Royal Assent.</p> <p>Ongoing</p>



		<p>NHS England (London Region) is undertaking work to focus on meeting timeframes across all service types and improving the average 'Referral to Transfer' times to reduce waits. This work is supported by the London Region Service Lead for Transfer and Remissions.</p> <p>A 'Transfer & Remissions Lead' has been employed to support the relationship and management of secure transfers.</p>	<p>NHSE</p> <p>Practice Plus Group</p>	<p>July 2025</p> <p>Complete</p>
11.	As a result of a long-standing probation officer vacancy, the one remaining probation-employed POM had a caseload of over 90 high-risk prisoners, which was too high.	Interviews have taken place for a Probation Officer and onboarding has commenced which will allow effective management of high-risk prisoners	National Probation Service	Ongoing
12.	Too many sentenced prisoners were released to accommodation that was not sustainable or did not have an address to go to when they left the prison.	<p>The housing support service, provided by St Mungo's, was expanded in January 2025. Once embedded this expanded provision will allow more prisoners to access the service; ensuring they have appropriate housing support for release.</p> <p>A bi-monthly Reducing Reoffending meeting will be introduced which will monitor all data and outcomes for those prisoners moving into accommodation on release. This will allow the</p>	<p>Director</p> <p>Director</p>	<p>July 2025</p> <p>August 2025</p>



		<p>analysis of data and prompt action to be taken in a forum which is multi-disciplinary.</p> <p>The prison will explore enhancing through the gate services and utilising charities and other community providers to provide additional support on release</p>	Director	November 2025
13.	<p>Many prisoners were released from the prison in the afternoon, which gave them limited time to get to their destinations. Some releases after court hearings took place in the evening, which was a particular concern.</p>	<p>An end-to-end review of release processes will be undertaken including:</p> <ul style="list-style-type: none"> • a review of staffing within the Custody department. • A review of the flow of prisoners through reception, taking account of planned and immediate releases and prioritising those who are being released to Approved Premises or CAS 2 accommodation. • Working with Healthcare colleagues to ensure that prisoners who are subject to immediate release get timely access to critical medications and prescriptions required for the community. • This review will lead to the aspiration that all planned releases occur at the earliest opportunity and are prioritised based on their external commitments. 	Director	September 2025

