HM Prison & Probation Service

Action Plan: HMP Altcourse

Action Plan Submitted: 3rd November 2025

A Response to the HMIP Inspection: 7th – 18th July 2025

Report Published: 6th October 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 ALTCOURSE

1. Rec No	2. Concerns	3. Response Action Taken/Planned	4. Responsible Owner	5. Target Date
	Priority concerns			
1	**There had been six self-inflicted deaths since the previous inspection and a concerning recent rise in the rate of self-harm**. The prison did not investigate all near-fatal incidents and had not done enough to understand and address the causes of self-harm.	The Head of Safety and Wellbeing will improve the investigations of all fatal near miss incidents, and improve the procedures for understanding the cause of self-harm by: 1. Definition of a near fatal incident will be clarified with the National Safety Team immediately. 2. An investigation will be completed, by the safety team, on all near-fatal incidents. Resulting actions will be tracked on the consolidated action plan. Lessons learnt will be recorded and where appropriate shared with staff. All near fatal incidents will be discussed in the weekly Safety Intervention Meting (SIM). 3. Facilitated by HMPPS Senior Safety Project and Procedures Lead, members of the safety team will attend a Safety Data workshop to understand how to best use and analyse collated data. 4. New safety analyst will provide up-to-date and live data to enable the prison to identify trends and drivers for self-harm. This will be reported in the monthly Safety Meeting, fortnightly stability meeting and weekly SIM meeting.	Director	Completed April 2026 Completed January 2026

		5. The Head of Safety and Wellbeing will commission an annual prisoner survey to identify views on the causes of self-harm at HMP Altcourse, actions from this will be added to the consolidated action plan and overseen by the Head of Safety and Wellbeing.		April 2026
2	**The entry and use of illicit drugs was a major threat to safety and security.** The positive drug testing rate was among the highest for this type of prison.	The Head of Security, Safety and Wellbeing, Residential Services and Drug Strategy Lead will work together to combat the conveyance and use of illicit drugs throughout the prison by: 1. The Drug Strategy will be reviewed and aligned with the new Drug and Alcohol Policy Framework. The Drug Strategy Lead will continue attending regional meetings to gather best practices and insights, which will inform the development of the updated strategy. 2. A new policy will be implemented to guide the management of prisoners under the influence, developed in collaboration with Healthcare and Substance Misuse Services. This policy will be shared with all staff, along with briefings to ensure clear understanding of expectations and the importance of appropriate and safe practices. 3. Review the latest Drone Risk Assessment to ensure it still meets the needs of the establishment. 4. Engage with HMPPS Risk and Capabilities Unit to undertake a joint assessment to identify and understand potential routes for ingress of contraband.	Director	January 2026 December 2025 December 2025 December 2025

		5. All solicitors and legal firms will be advised to use the national barcode system when submitting confidential legal mail. This measure is being enforced to help identify and prevent fraudulent legal correspondence from entering the prison. Any instances of non-compliance will be escalated to the relevant company directors, and where necessary, the legal mail will be returned to the sender. 6. Increase the use of risk based and frequent drug testing across the site. 7. Review of process for incoming prisoner property to ensure it robustly minimizes the risk of illicit items entering through this route. 8. Pheonix Futures (SMS Provider) will engage with all prisoners who fail a drug test to offer support and guidance. 9. Introduce random patrol during night state to help deter drone activity. This will be evidence in the Tier 3 assurance document (internal management QA check). 10. Engage with local police force to ensure response to crime are appropriate. 11. Drug use data to be presented in the Stability meeting and Security meeting. Actions to address causes to be added to the security action plan database and overseen by Head of Security.		February 2026 January 2026 February 2026 Completed Completed January 2026 December 2025

3	**The quality and quantity of food for prisoners were insufficient.** In our survey, only one in five prisoners said that they got enough to eat, which was much worse than at our last inspection.	The Head of Facilities Management (FM), Soft Services Manager and Deputy Director will work together to improve the quality and quantity of food for all prisoners by: 1. User Voice will conduct a biannual survey to gather prisoner feedback. Food quality and quantity will be a standing agenda item on their council meetings, reporting any concerns to the Deputy Director. 2. Review of menus and catering budgets to ensure they meet the need of prisoners, including caloric intake. As a result, the budget has been increased to support improvements in both the quality and quantity of food provided. 3. Head of Residence to ensure all serveries are supervised by staff and ensure portion control is managed appropriately. Staff will ensure that servery workers receive suitable training to carry out their duties effectively, this will be evidence in the Tier 3 assurance document. 4. Ensure food comments books are available in every servery, Duty Directors to check at least one servery each day to ensure food is of a good quality and quantity. Soft Services Manager to produce a quarterly report to the Head of FM in relation to comments about food and how to address any concerns.	Director	Completed Completed February 2026 February 2026
4	**There were several longstanding risks to patient safety.** These included a lack of staff in key areas, which reduced prescribing	Head of Healthcare, Safety and Wellbeing, Practice Plus Group (Health Provider) and Commissioner will work together to improve patient safety by:	Head of Healthcare	

	capacity to an unsafe level, and poor oversight and governance of medicines management.	1. Medicines management meetings to be introduced monthly to provide oversight of medicine management and governance. 2. Business case to be submitted to increase the staff workforce and whilst awaiting approval all gaps to service are covered by agency staff including second checkers on every unit, a second nurse in admission and a second nurse on nights. 3. GP Rota is completed for all sessions face to face until end of December 2025. Work has commenced on recruitment of permanent GP. 4. Safer prescribing clinics to be introduced weekly. 5. National GP support to be provided to improve GP planning and training, which will reduce waiting times significantly for patients. 6. Data to be provided prior to Local Delivery Board to provide Director and Deputy Director with opportunity to review. 7. Lead SMS GP will provide complex care clinics and support for the team.		April 2026 April 2026 Completed April 2026 April 2026 April 2026 April 2026
5	**The prison did not offer sufficient activity spaces in education, skills and work to occupy the population purposefully, and too many prisoners were unemployed.**	The Head of Education Skills and Work (HoESW) will work closely with our education provider and all the Senior Leadership Team to increase activity spaces for all prisoners by:	Director	

		1. 20 new full time activity spaces will be created with the opening of two new work areas in the Staff Canteen and a Combat to Coffee (coffee roasting) workshop. 2. Industries workshop spaces to be increased by exploring new opportunities such as Go-Karting repair workshop, expanding the Media Hub, and increasing Outreach work. 3. Each workshop will review its current risk assessment; this will ensure that spaces are being maximised and increase the number of workshop spaces being offered to prisoners. 4. Weekly Employment Board and Purposeful Activity Meeting to be introduced to ensure workspaces are filled and identify gaps in provision. 5. Monthly Quality Improvement Group meeting to address any shortfalls in education provision. Actions to be added to a consolidated action plan and overseen by HoESW.		Completed April 2026 February 2026 Completed February 2026
6	**The prison was too slow to allocate prisoners to spaces in education, skills and work.**	The Head of Education Skills and Work will work closely with our education provider to improve allocation to prisoner spaces by: 1. Additional resource (1 x full time post) will be directed to Work Allocation to increase efficiency and speed of workplace allocation. Waiting lists will be kept up to date to allow for efficient allocations, with identified gaps in work areas and delays in allocations presented at the Weekly Employment Board.	Director	January 2026

		2. A joint working approach between Novus (education provider) and the Prison Employment Lead in relation to information sharing will be implemented. This will allow speedier identification of employment pathways for prisoners.		February 2026
	Key Concerns			
7	**New arrivals often waited too long in reception and did not get to bed on their first night until the early hours of the morning.**	The Head of Safety and Wellbeing will ensure prisoners all new arrivals are allocated to their cell in a timely manner by: 1. The reception remodel will streamline the admissions process by enabling Safety interviews and Healthcare assessments to be conducted simultaneously. This will help eliminate bottlenecks at the bottom of admissions and reduce the number of individuals waiting to see the nurse. 2. Two nurses will be allocated to admissions to support the healthcare assessment process.	Director Head of Healthcare	January 2026 Completed
8	**The prison had no clear and coordinated strategy to reduce violence.** Leaders did not use data well to understand violence or inform actions to reduce it.	The Senior Leadership Team will work together with staff at HMP Altcourse to understand violence by: 1. Facilitated by HMPPS Senior Safety Project and Procedures Lead, members of the safety team will attend a Safety Data workshop to understand how to best use and analyse collated data. 2. Violence strategy will be reviewed by the Head of Safety to ensure it remains fit for purpose, ensuring data is used to inform decision making.	Director	Completed March 2026

		3. New safety analyst will provide up-to-date and live data to enable the prison to identify trends and drivers for violence. This will be reported in the monthly Safety Meeting, fortnightly stability meeting and weekly SIM meeting. 4. The Head of Safety and Wellbeing will commission an annual prisoner survey to identify views on the causes of violence at HMP Altcourse, actions from this will be added to the consolidated action plan and overseen by the Head of Safety and Wellbeing. 5. Challenge Support Intervention Plans (CSIP) will be managed by the Violence Reduction Manager. CSIP actions will be SMART and targeted to reduce risk. CSIP reviews will include relevant staff from departments/agencies involved in the prisoner's care. To ensure consistency and effectiveness, the Head of Safety will Quality Assurance 10% of CSIP reviews each month, feedback will be shared with relevant case managers.		January 2026 April 2026 February 2026
9	**Work to make sure there was fair treatment and inclusion of prisoners was weak**. There was a lack of understanding and provision for prisoners' diverse individual needs and experiences.	Senior Leadership Team, Safety Team and Equality & Diversity will improve this area by: 1. An equality needs analysis will be completed. Findings and feedback from prisoners from the needs analysis will inform a new Equality and Inclusion policy to be introduced. 2. Review of the equality data currently being provided the monthly Equality Action Group meetings. Head of Safety to chair the monthly meeting, to improve attendance and frequency has become embedded practice.	Director	 April 2026 April 2026

		3. A calendar schedule of Protected Characteristics forums will be implemented, ensuring that actions taken to review and address adverse trends are evidenced. Each protected characteristic will have a SLT lead identified with accountability given to deliver to schedule. 4. Actions from the Equality Action Group meetings and Protected Characteristics forums will be added to a consolidated action plan and overseen by the Equality & Diversity Manager. 5. Track the use of our translation line to ensure usage is in line with population. 6. Discrimination Incident Reporting Form (DIRF) complaints and responses to be tracked by the Equality Action Group. This will help provide analysis of areas of concern. 10% of responses and actions to complaints will be quality assured by the Head of Safety & Deputy Director.		February 2026 February 2026 December 2025 January 2026
10	**Patients waited too long for transfer to mental health hospital, which delayed their care and treatment.**	The North West Health & Justice Commissioning Team are working with the prison's Mental Health providers to ensure that internal identification and referral processes are robust by: 1. Escalating cases where referrals to specialist mental health in-patient units exceed 28-day waiting times. 2. Establishing monthly escalation meetings with providers and commissioners; HMPPS regional representatives invited to participate.	NHS North West Health & Justice and Mersey Care Foundation Trust	Completed and ongoing Completed

		3. Developing a live dashboard to track mental health referrals and delays in real time. 4. Engaging with Integrated Care Board mental health commissioners to address delays in transfers, acknowledging wider system pressures. 5. Preparing a review of prison health in-patient facilities and models to explore options for reducing external referrals. 6. Launching a 2-year pilot programme with Mersey Care Foundation Trust's Prison Pathways Team to support appropriate transfers across the prison and secure mental health estate.		December 2026 Completed and ongoing December 2026 December 2026
11	**Prisoners in work and industries did not have access to qualifications or accreditation, and the knowledge, skills and behaviours that they learned and developed were not recorded.**	The Head of Education Skills and Work will work closely with our education provider and all the Senior Leadership Team to increase improved access to qualifications by: 1. All prison workplaces will have supporting workbooks and progress trackers that recognise, record and track learner skills. To ensure consistency and effectiveness, the HoESW will Quality Assurance 10% of workbooks each month and feedback will be shared with relevant staff. 2. Qualifications will be made available for all prison workplace roles, with additional specific workplace qualifications in 'Combat to Coffee' and Staff Canteen.	Director	April 2026 April 2026

12	**Public protection processes were not sufficiently robust to provide adequate oversight of high-risk prisoners.** Leaders had not made sure that multi-agency working was effective or that monitoring was up to date.	The Head of Offender Management will ensure all multi-agency work is effective by: 1. Review of admin roles to support Interdepartmental Risk Management Meeting (IRMM). 2. Weekly IRMM will be reintroduced and ensure regular attendance from key stakeholders. All high-risk public protection cases are discussed at the IRMM. 3. Review of Operational Support Officer profile to ensure enough resource in place to manage the increase in correspondence monitoring. 4. Review the current location of call monitoring and consider relocation to Offender Management Unit where more robust oversight can be given. 5. Public Protection Manager to provide weekly updates on monitoring, to Head of OMU, ensuring where monitoring is not up to date action is taken to address this.	Director	December 2025 December 2025 March 2026 December 2025 December 2025
13	**Too many sentenced prisoners were released with no accommodation.** Leaders did not collate data on those who were released from court without accommodation.	The Strategic Housing Specialist (SHS) based at HMP Altcourse has been leading on the pre-release panel for Liverpool and engaged with other pre-release panels across the region. They have engaged with the local authorities in Liverpool, Sefton and St Helens in face-to-face housing needs assessments pre-release. In addition, there are weekly multi agency meeting for prisoners with who have complex needs and homeless.	Community Accommodation Service	Ongoing

		The SHS is working with the prison to deliver upskilling sessions to pre-release teams, probation practitioners and Commissioned Rehabilitative Services (CRS) providers in relation to the Duty to refer process and tenancy sustainment. They work with the prison peer mentors to deliver tenancy sustainment sessions to the prisoners.	Community Accommodation Service	Ongoing
		CRS Accommodation are currently procuring new contracts – Men's (Spring 2027) – which will enhance services for those leaving prison and in the community. These services will focus on the time-consuming support needed to secure and maintain housing and jobs.	Commissioned Rehabilitative Services	April 2027
		The Head of Offender Manager, Prison Employment Lead and Accommodation Provider will work jointly to provide data by: 1. A meeting will be arranged with our accommodation provider (Seetec) to request accountability from Seetec leaders in supporting this data capture and measuring resulting improvements in securing accommodation upon release. 2. Locally, the custody admin team will look at establishing a process to track the outcome of remand prisoners who are released for time served, sentenced to Community Orders or Suspended Sentenced Orders.	Director	February 2026 February 2026