



HM Prison &
Probation Service

Action Plan: HMP Dovegate Therapeutic Prison

Action Plan Submitted 12 December 2018

A Response to the HMIP Inspection 12-22 March 2018

Report Published 16 July 2018

INTRODUCTION

HM Inspectorate of Prisons (HMIP) is an independent inspectorate which provide scrutiny of the conditions for and treatment of prisoners. They report their findings for prisons and Young Offender Institutions 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, Measureable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress.
Partly Agreed	Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons.	The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There must be an explanation of why we cannot fully agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.
Not Agreed	The recommendation is not agreed and will not be implemented. This might be because of commissioning, policy, operational or affordability reasons.	The response must clearly state the reasons why we have chosen this option. There must be an explanation of why we cannot agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.



ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP DOVEGATE THERAPEUTIC PRISON

1. Rec No	2. Recommendation	3. Agreed / Partly Agreed /Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	Main recommendation				
	To the governor				
5.1	The TP should ensure the learning, skills and work opportunities provided are appropriate for the population, the quality is sufficient and the provision supports men's progression and the therapeutic process itself. (S35)	Agreed	<p>A review took place of the curriculum to ensure that the learning, skills and work opportunities provided are appropriate for the population. The review included both the main prison, HMP Dovegate and on the Therapeutic Prison (TP) education timetable. A new timetable was drawn up to be implemented in July 2018, this is currently on hold waiting for the approval of the Director.</p> <p>The results of the review will be analysed and used to influence the revised program which will then be published and implemented.</p>	Director	Completed
	Recommendations				
	Early days in custody				
5.2	Prisoners should not be strip-searched unless specific intelligence suggests this is necessary. (1.12, repeated recommendation 4.54)	Partly Agreed	<p>This recommendation is partly agreed as there are circumstances in which prisoners are required to be full-searched as a matter of routine.</p> <p>PSI 07/2016 - Searching of the Person. All prisoners may be subject to Level-A or Level-B rub-down searches or full searches where appropriate, in accordance with local security strategies and procedures at Annex B. Searches may be conducted routinely or in response to intelligence, suspicion or specific incidents.</p> <p>All prisons must comply with the PSI's minimum requirements.</p> <p>Full searching is an essential method used to find items of contraband secreted on the person and to prevent its importation into establishments. HMPPS has a duty of care to prevent and</p>	Director	Completed



			<p>deter illicit items from entering establishments which could be used by a prisoner to harm themselves or others.</p> <p>HMP Dovegate will, however, conduct a Level B (a routine rub-down external search of the prisoner, not necessitating removal of clothing) search on all prisoners who are transferred from another establishment and will be located on the TP. HMP Dovegate Local Security Strategy (LSS) will be updated to reflect this.</p> <p>All new prisoners are routinely subject to level B with the following exceptions, where they will be strip-searched:</p> <ol style="list-style-type: none"> 1. All new receptions walking through security poles that highlight if a metal object is secreted on the body which a prisoner refuses to hand over. 2. Where intelligence from escorting staff of drug/tobacco use or mobiles phone usage, on transport is received. 3. Intelligence from police or security prior highlights there may be illicit articles. 		
5.3	All reception interviews should be confidential. (1.13)	Agreed	<p>HMP Dovegate will ensure that reception interviews are conducted in private and appropriate facilities are made available.</p> <p>An additional dedicated medical room has been created and there are extra facilities in place for Staff to interview prisoners in private.</p>	Director	Completed
	Safeguarding				
5.4	Emergency response procedures should be reviewed in line with national policy and defibrillators should be available in the TP. (1.31)	Agreed	<p>HMP Dovegate is implementing a plan to roll out defibrillators across all TP residential units for Custodial Staff to use in a medical emergency. The HMPPS and NHS England Commissioners are in liaison with Care UK. This is to be discussed and reviewed at the next Local Delivery Board. In the interim period defibrillators are located in Healthcare which is in close proximity to the TC and have nurses located in the area 24 hours per day.</p> <p>HMP Dovegate has 24 hour Healthcare, that have and maintain defibrillators and they attend all emergency responses.</p>	<p>Director</p> <p>NHS England / Head of</p>	<p>Completed</p> <p>Completed</p>



			Defibrillators are kept in all emergency response bags located throughout the prison (House 1, 2, 3, Reception, Healthcare) When an emergency response is called, an ambulance is requested immediately and the emergency response Nurse / Paramedic will attend the scene with an emergency bag containing a defibrillator. Where defibrillators are required for Custodial Staff this will be an action for the prison to take forward, with advice from healthcare where required.	Healthcare (Care UK) Director	
	Equality, diversity and faith				
5.5	Data monitoring should consider outcomes that are relevant for TP prisoners. (2.20)	Agreed	HMP Dovegate Equalities Team now include data specifically monitoring the outcomes for TP residents separately in the Diversity and Equality Action Team (DEAT) meeting. This will be documented in the minutes of the meeting.	Director	Completed
5.6	Investigations into allegations of discrimination should be timely and thorough and subject to external scrutiny. (2.21)	Agreed	<p>The HMP Dovegate Equalities Team will thoroughly investigate all allegations of discrimination in a timely manner in accordance with PSI guidance.</p> <p>The Discrimination Incident Reporting Forms (DIRF) will be randomly selected and the whole investigation/enquiry will be assessed by an independent panel. The methodology will be set when the Terms of Reference (TOR) is agreed by October 2018</p> <p>A follow up meeting has taken place (on 12 September 2018) with further meetings scheduled to take place on a six weekly rotation where the TOR was agreed with all four parties.</p> <p>The subsequent meetings will scrutinise 10% of the DIRFS. All the parties who are involved are from either community or public organisations</p> <p>Those parties represented are: Birmingham City Council Muslim Hands- Nottingham Resettlement/ CRC Community Worker- Birmingham Area</p>	Director	Completed



			undertake monthly audits to include infection control of all equipment and environmental areas		
5.10	Prisoners should be able to access all primary care clinics within community-equivalent waiting times. (2.56)	Agreed	<p>The NHS England will ensure that waiting times are within community equivalent guidelines by maximising the utilisation of primary care clinics. This will be achieved through the recruitment of a permanent full time General Practitioner, and scheduling of additional dental clinics to meet demand. Care UK will work with SERCO to reduce Did Not Attend (DNA's) and No Access to appointments through continued focus on initiatives to reduce these at Local Delivery Boards and Quality Assurance Meetings. The "walk in" clinics will continue to operate on the wing, so patients can have immediate access to care, advice and support without waiting for a primary care appointment.</p> <p>The Healthcare provider has recruited a permanent full time General Practitioner and scheduled additional dental clinics to meet the demand of the recent population increase.</p> <p>As part of a Service Development Improvement Plans (SDIP) for Healthcare in 2018-2019, PRACTICE ASSIST – a telephone consultation service with a General Practitioner, will be implemented. This will increase availability and access to primary care services.</p> <p>Additional funding has been agreed between NHS England and Care UK to meet the additional pressures placed on primary care services by the increase in prison population. This will enable additional primary care clinic capacity</p> <p>Care UK will work with SERCO to reduce Did Not Attend (DNA's) and No Access to appointments through continued focus on initiatives to reduce these at Local Delivery Boards and Quality Assurance Meetings.</p>	NHS England / Head of Healthcare (Care UK)	Completed
				NHS England / Head of Healthcare (Care UK)	Completed
5.11	Prisoners with mental health needs should have timely access to a face-to-face assessment and a full range of interventions	Partly Agreed	The current commissioned service is not required to deliver counselling interventions therefore this recommendation is only partly agreed. However the commissioner has confirmed that NHSE will consider individual cases where there is a clinical need.	Head of Healthcare (Care UK)	



	including groups, counselling and psychological support. (2.62)		<p>Care UK have conducted a full Mental Health Pathway review and implemented new working processes which ensure that prisoners with Mental Health needs have timely access to a face-to-face assessment and a full range of interventions including groups and psychological support.</p> <p>The service will continue to triage referrals and offer welfare checks, working closely with the Safer Custody Team. Urgent referrals will be prioritised for assessment and intervention.</p> <p>The service will continue to operate a workforce plan, and recruit to vacancies, and manage short-term with the use of agency staff.</p> <p>The service will implement the new national NHS England Service specification for mental health.</p>	<p>Head of Healthcare (Care UK)</p> <p>Health Commissioner</p>	<p>Completed</p> <p>April 2019</p>
5.12	Prisoners should consistently receive all required medication promptly and at clinically appropriate times. (2.72)	Agreed	<p>A Medicine management workshop has been completed and in order to ensure that medications are administered at clinically appropriate times, The prisoners are consistently receiving all their required medication promptly and at clinically appropriate times. Care UK have increased the in-possession list of medications, and also added the ability to issue daily in possession packs</p>	Head of Healthcare (Care UK)	Completed
5.13	Prisoners should have easy access to a pharmacist for advice and community-equivalent clinics, such as medicine use reviews. (2.73)	Agreed	<p>HMP Dovegate now has a full time pharmacist and a full pharmacy dispensary service within the prison, which now offers access to a pharmacist for advice.</p> <p>It is recognised that medicines review meetings are not currently being completed due to a staffing change; however this recommendation will be implemented by December 2018</p> <p>A new establishment staffing profile and regime has been implemented to ensure full access to services is facilitated; this is monitored at the local delivery board.</p> <p>Completion of these will be monitored through Local Delivery Boards and Quality Assurance Meetings.</p>	Head of Healthcare (Care UK)	January 2019
	Time out of cell				



5.14	All prisoners should be able to spend at least one hour outside every day. (3.7)	Agreed	<p>HMP Dovegate now provides all residents on the TP access to two 30 minute exercise periods daily. The timings are in the morning (am) prior to group therapy sessions and (pm) following education, work and visits.</p> <p>These sessions will be subject to daily dynamic risk assessments and may be curtailed due to operational reasons or on the grounds of health and safety. Any curtailments will be documented in the Custodial Operation Managers handover book.</p>	Director Director	Completed
5.15	All prisoners should have weekly access to the library, which should expand its stock significantly. (3.8)	Agreed	<p>HMP Dovegate have employed a new library assistant which allows improved access and the opening of the TP library. A Librarian has also been appointed and is awaiting a start date who will then be able to carry out a full review of library stock. The stock will be refreshed annually with first expansion date of November 2018</p>	Director	Completed
	Education, skills and work activities				
5.16	Managers should improve prisoners' punctuality and attendance. (3.18)	Agreed	<p>HMP Dovegate TP Management and Staff ensure that the published regime is adhered to and prisoners attend the Learning and Skills provision at the published times.</p> <p>All the prisoners working are unlocked in a timely manner.</p> <p>The Education Manager and TP Head of Operations will continue to review at the Therapy Governance Operational Meeting.</p>	Director	Completed
5.17	Target setting in individual learning plans should ensure that prisoners' progress can be monitored effectively. (3.26)	Agreed	<p>All Learning and Skills Tutors will receive training to improve target setting in Individual Learning Plans (ILPs) ensuring that prisoners' progress can be monitored effectively. A training package was delivered to all staff by Newcastle Under Lyme College (NULC). A new Education Manager has been appointed and as part of the role will review staff training.</p> <p>This will be monitored through the quality assessment process. HMP Dovegate are also receiving support from an Ofsted Inspector.</p>	Director	Completed February 2019



5.18	Teachers should make the best use of the support provided by learning support assistants by planning their work, and their effectiveness should be monitored. (3.27)	Agreed	<p>All learning and skills teachers will receive training to improve their skills in making the best use, including the planning of work of the support provided by learning support assistants. The training will be delivered by Newcastle Under Lyme College (NULC).</p> <p>HMP Dovegate are also receiving support from a named Ofsted inspector.</p> <p>A training package was delivered to all staff by NULC and a new Education Manager has been appointed and as part of their role, staff training and the effectiveness of the learning support role will be reviewed by the new manager now in post.</p> <p>An Ofsted support visit will take place for education on the main side of the prison. A similar visit has been requested for the TC although this has not yet been confirmed.</p> <p>A full training review will take place for education staffing now a manager has been recruited to the post.</p>	Director	<p>Completed</p> <p>January 2019</p> <p>February 2019</p> <p>January 2019</p>
5.19	Managers should ensure that education and therapy staff improve the way they communicate and both functions should be better coordinated, so they contribute to positive outcomes for prisoners. (3.32)	Agreed	<p>HMP Dovegate Education Management will attend the Therapy Governance meeting, where communication between the Education and Therapy Staff can be improved.</p> <p>Therefore this will contribute to positive outcomes for prisoners by creating a more joined up approach to working with a greater understanding of roles and needs of prisoners to help support therapy and personal development.</p> <p>There will be an introduction to the TC compact for participation within education as part of therapy.</p> <p>Therapeutic Specific Training (TCAT) training will be provided to teaching staff on the TC to increase awareness of the therapeutic process when available and form part of the TC training schedule.</p> <p>Education achievement data will be included within therapy review processes.</p>	Director	<p>Completed</p> <p>Completed</p> <p>Completed</p>



5.20	Managers should use data to identify underperforming courses and take action to improve qualification outcomes. (3.37)	Agreed	Data presented to the QIG is presently being reviewed for effectiveness which includes data from each provision and subject including IT, Art and bookkeeping. The new timetable new timetable is approved and delivery is planned.	Director	Completed April 2019
5.21	Prisoners working on wings should be able to gain accreditation and have their employment skills recognised. (3.38)	Agreed	<p>A review of job roles has taken place and none are yet linked to qualifications.</p> <p>It is envisaged that the Food/Hygiene course will be available to those doing servery work, BICS will be offered on TC for cleaners wishing to undertake a qualification.</p> <p>A review of available qualifications for gardens and horticulture will also take place in this time period.</p> <p>The new Education Manager will review this following their recent appointment. Accreditation and employment skills will be recognised through certification, entries on individual learning plans and entries on PNOMIS</p>	Director	January 2019
	Reducing risk, rehabilitation and progression				
5.22	All men joining the TP should have an up-to-date OASys report. An escalation process should be agreed for cases managed by the National Probation Service. (4.24)	Agreed	<p>HMP Dovegate does not accept prisoners onto the TP without a complete up to date Offender Assessment Systems (OASys) report, unless there are exceptional circumstances. Every referral is completed by the Offender Supervisor (OS) (unless a self-referral is made by the offender), which is provided electronically along with the current or most recent OASys.</p> <p>Within circumstances of absent OASys, a review is conducted by the OS to incorporate this target to prepare for assessment. Once accepted onto the programme, a further review is completed by the OS to reflect a positive 'significant change'. Although therapy cannot be added directly as a sentence plan target, a psychological intervention target can go in place of it until the assessment has been completed by the TC. A contribution from external Probation / Offender Manager is always sought by the OS, however this is not</p>	Director	Completed



			<p>always necessary for target review. Where available, NPS are involved through the OS.</p> <p>The review and referral process is more robust. Those without relevant OASys and risk assessment are not considered for the TP.</p>		
5.23	<p>The role of the offender management unit and offender supervisors in progression planning for men in TCs should be clarified and staff involved should have appropriate training. (4.25)</p>	Agreed	<p>Following the HMIP Inspection, the role of the OS on the TP was questioned. It was highlighted that there is not a requirement for a specific OS when they are engaged on a significant intervention. Instead residents would be assigned a specific OS prior to finishing therapy (6 month phase). However with the introduction of OMiC it is unclear whether this is best practice as many of these residents will require a specialist service. Also they are currently out of scope for the OMiC Key Worker and deemed not necessary with them being on an intervention.</p> <p>All residents will have access to a duty OS</p> <p>All OS's are to attend Therapeutic Specific Training (TCAT) when this nationally accredited and managed training becomes available from January 2019.</p> <p>The individual objective will be entered into each OS's Personal Development Plan.</p> <p>All TC prisoners will have access to an OS, the majority are allocated a specific OS dependent upon their risk and need, and considering which stage of TC they are on. However, for prisoners with a significant level of support in place they will have a duty OS until an important event takes place i.e. de-selection or completion. For example, a duty OS will be responsible throughout the therapy period, but will have a specific OS allocated to concentrate on the assessment period and completion transition in order to structure a progressive move and new pathway. They will also be responsible for attending the reviews and completion of sentence planning respectively.</p>	Director	<p>March 2019</p> <p>March 2019</p> <p>June 2019</p>



5.24	All MAPPA cases should be reviewed by the IDRMT prior to release and MAPPA levels should be set in time for a management plan to be developed. (4.26)	Agreed	<p>This recommendation is Partly Agreed because the outcome of this action is influenced by external partners which is not in HMP Dovegate's control.</p> <p>HMP Dovegate will review all Multi-Agency Public Protection Arrangements (MAPPA) cases in the Inter Departmental Risk Management Team (IDRMT) meeting prior to release.</p> <p>An IDRMT meeting is arranged by the Public Protection team within the OMU. The agenda for the review meeting is provided in time for a monthly review. A data system is maintained by Public Protection to document risk levels, criteria and the OS who will liaise with the external Probation Officer. The OS will request the MAPPA level (if known at this stage) from Probation upon Reception. All other MAPPA levels or changes in MAPPA level will be requested 8 months prior to release or at times of significance i.e. parole. The OS's will maintain contact with these departments and produce a High Risk Management Plan as when requested on the agenda for discussion. At times of risk escalation, the OS will contact the Probation team to request a review providing the evidence through intelligence. The contact between services is then documented within NOMIS and CMS systems, the IDRMT minutes and within the OASys document.</p> <p>HMP Dovegate now have the provision of 0.4 Senior Probation Officer (SPO) and have an agreed escalation process in terms of MAPPA to utilise their service to obtain the required information. All prisoners that are high risk and due for release regardless of MAPPA level or indeed whether a MAPPA level has yet to be set are automatically now discussed at the meeting and from this communication made with NPS. The prison now look at all MAPPA 1 cases and feedback any issues or concerns to NPS. The IDRMT and Public Protection team have the support of the SPO in moving forward.</p>	Director	Completed
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5.25	The TP, in conjunction with the main prison, should implement an effective model for managing and supporting men during the transition from the TP to the main prison. (4.27)	Agreed	<p>HMP Dovegate will produce a Local Operating Procedure (LOP), which will detail the model for managing and supporting residents during the transition and early days from the TP to the main prison.</p> <p>A main prison wing will be established to move prisoners onto prior to moving to the TP and also to hold those prisoners that have completed therapy. This will allow a structure of support and guidance for those moving onto and leaving the TP.</p> <p>This LOP will be devised mutually between TP and Main managers and communicated to exiting TP prisoners /Main side prisoners and then included in TP referral packs to inform all potential future prisoners of the change in pathway.</p>	Director	January 2019
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<i>Recommendations</i>	
Agreed	23
Partly agreed	2
Not agreed	0
Total	25

