



HM Prison &  
Probation Service

Action Plan: HMP Durham

Action Plan Submitted 18 April 2019

A Response to the HMIP Inspection 25 September-5 October 2018

Report Published 12 February 2019

## 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, 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 <b>must</b> 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 <b>must</b> 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.





		<p>All incoming prisoner correspondence is photocopied before issue to prisoners to eliminate the possibility of paper impregnated with psychoactive substances and other illicit drugs entering the prison.</p> <p>The drug diagnostic team from headquarters have undertaken a drug and alcohol readiness assessment of the prison and the actions from this work are being addressed.</p> <p>Rapiscan technology is used to swab legal correspondence to detect illegal substances preventing the false use of Rule 39 legal privilege mail, and during the searching of all property handed or posted in.</p> <p>Joint operations with the police are sharing intelligence and disrupting the activity of prisoners involved in illicit drug use and supply. Coordinated work continues with the DORIS project which identifies and disrupts recalled prisoners intending to return to prison with concealed drugs.</p> <p>HMP Durham is supported by the North East Regional drug dog team, who visit the establishments several times each week to conduct checks on mail and undertake visitor searching. The team can be called upon flexibly to attend the prison to respond to risk and need.</p> <p>HMP Durham submitted a bid for ISCAN technology to x-ray prisoners where intelligence or suspicion suggests they are in possession of illicit drugs, weapons or mobile phones. This equipment has been received and is operating with an illicit items protocol in place.</p> <p>HMP Durham has now received and installed a Multi sensor walk through detector.</p>	<p>Governor</p> <p>HMPPS Drug Strategy Taskforce</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Director Operational Security Group Governor</p> <p>Governor</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Complete &amp; Ongoing</p> <p>Complete &amp; Ongoing</p> <p>Completed</p> <p>Complete</p>
	<b>Main recommendations to the governor</b>			



5.2	Reception and first night processes should include a thorough assessment of prisoners' immediate vulnerabilities, needs and risks through a private interview with custodial staff to ensure appropriate support is offered. (S43)	Agreed	<p>The functional Heads of the Operations, Residence Safety, Offender Management and Healthcare departments will meet to review the current assessments made during the reception and first night period. The review will consider the current scope and integration with other assessments and determine points for improvement whilst adding best practice activity from the wider prison estate. The output will be the design and implementation of a new Vulnerabilities Assessment (VA) interview which will consistently assess and act upon prisoners' immediate issues, risks and needs. The new VA will reduce duplication and address issues of consent and information sharing and notification to support services to provide the necessary assistance for prisoners.</p>	Governor	May 2019
			<p>The first night centre custodial manager (CM) will visit HMP Low Newton to observe the delivery of their vulnerability assessment interview in practice and complete a report of their findings to the functional head reference group to consider imbedding appropriate processes and links into the development of HMP Durham's VA.</p>	Governor	May 2019
			<p>A review of reception and First Night Centre (FNC) regimes, resources, space and processes will be undertaken to establish the most appropriate deployment of officers to ensure that VA interviews are delivered effectively and in a safe, decent and private space. The considerations and recommendations will be presented to the functional head reference group for approval.</p>	Governor	May 2019
			<p>Embed an assurance process which monitors the quality of the assessment and ensures that steps are taken to address any highlighted vulnerabilities. Once a new VA is agreed between all partners, this will be subjected to a management dip test, to check whether prisoners' immediate issues, risks and needs have been identified, which will be fed back to the local management delivery board.</p>	Governor	September 2019
5.3	Additional night time checks should be undertaken for all new arrivals. (S43)	Partly agreed	<p>This recommendation is partly agreed as HMP Durham will establish a process to provide additional night observations for the first 24 hours for newly received prisoners where vulnerabilities have been clearly identified, and for prisoners whose status may have changed. However, due to the volume of newly received prisoners and those returning from court it is not possible within current resources and budgets to provide a system where all new arrivals are the subject of additional night checks where no increased risk has been identified.</p>	Governor	July 2019



			<p>Head of Healthcare and Head of Residence Safety develop a standard operating procedure for staff to follow for first night checks of new arrivals (ensuring this procedure describes record keeping, preferably through use of NOMIS).</p> <p>Once the process for identifying new arrivals is established, and the operating procedure for ensuring additional night time checks is in place, expand this to men who may not be in First Night (e.g. those who have had a change in status via video link).</p> <p>Establish and embed an assurance check (included on the assurance framework) to make sure that the processes for identifying and checking new arrivals during the night is consistently operating.</p> <p>To ensure identifying and checking new arrivals during the night is embedded and fit for purpose a review process will be implemented using views of prisoners, staff and stakeholders, creating a plan for adjustments as necessary.</p>	Governor	July 2019
				Governor	July 2019
				Governor	September 2019
				Governor	September 2019
5.4	The management of prisoners at risk of suicide or self-harm should be given a high priority. There should be a comprehensive action plan covering PPO recommendations that is regularly reviewed to ensure they continue to be implemented effectively. ACCTs should be consistently good and ensure that individual prisoners receive appropriate care and support. (S45)	Agreed	<p>The Terms of Reference (TOR), standing agenda items (including data analysis and attendees of the Monthly Safer Prisons meeting will be reviewed. The Deputy Governor, or Head of Safer Prisons, in the Deputy Governor's absence will chair the meeting to ensure it is consistently and effectively analysing trends, reviewing and imbedding processes and Prison and Probation Ombudsman (PPO) recommendations and focusing on care and risk minimisation.</p> <p>Governance of completed and outstanding actions relating to safety, including PPO and coroner's recommendations will be assessed and monitored at the monthly Safety Prisons meeting as a standing agenda item. Progress will be overseen at the SMT Performance and Assurance meeting.</p> <p>A request will be made for the inclusion of mandatory Suicide and Self Harm training (SASH) for all Healthcare staff as part of the forthcoming contract review for the delivery of Healthcare services in prisons. The new contract will be fully in place from May 2020.</p>	Governor	July 2019
				Governor	July 2019
				Governor	July 2019



			<p>HMP Durham will improve the attendance of HMP Durham staff on SASH training through involvement in the Tees and Wear Prisons Group (TWPG) approach by accessing training sessions held at other prisons in the geographical region.</p> <p>Lessons learned from PPO reports will be communicated to staff via structured and regular briefings on Information Technology platforms and direct engagement from managers and the Safer custody team. This will provide the opportunity for them to fully understand the causes of fatal incidents and how the implementation of PPO recommendations through new or refined procedures reduces risk.</p> <p>A review will be undertaken of case management in Assessment Care and Teamwork in Custody (ACCT). This will focus on an improvement in quality of delivery, attendance at reviews and outcomes while focusing on consistently good risk assessment and management through the introduction of a system for allocating a caseload for Residential Supervising Officers. The review will be led by the Head of Safer Custody and will develop conclusions on the improved case management system through residential manager consultation.</p> <p>ACCT management and process assurance will be strengthened and improved, this will be reflected in HMP Durham's assurance framework. HMP Durham will work with the TWPG Safety team to develop a Quality Assurance process for ACCT management and embed said process. This will include daily compliance checks on all open ACCT documents by the duty Custodial Manager (CM). There will be a 20% quality review of ACCT documents weekly by the safer prisons committee. Residential CM's will undertake quality reviews of all ACCT's in their own areas each week. An overview of these checks and any issues will be presented to the safer prisons meeting. There will also be a 10% weekly dip test of post closure reviews conducted by the safer prisons team.</p> <p>Deliver risk and trigger identification training for Supervising Officers (SO) and CM to improve case management and ensure robust and effective maintenance of records.</p>	Governor	July 2019
				Governor	July 2019
				Governor	September 2019
				Governor	September 2019
				Governor	September 2019
5.5	Offender management of prisoners presenting high risk of harm to others	Agreed	HMP Durham has reviewed the allocation processes and procedures for high risk cases using the tiering system in Offender Management in Custody (OMiC)	Governor	Completed and Ongoing



<p>should be improved, and should include adequate training for offender supervisors. High risk cases due for release should receive better management oversight from within the prison, and release planning with the community-based offender manager should be consistently good. (S46)</p>	<p>to ensure appropriately trained staff are responsible for such cases. This has started and is subject to ongoing review.</p>	Governor	May 2019
	<p>A training needs analysis will be completed for all band 4 Offender Supervisors (OS) to establish the level of training they require. On completion of the training needs analysis the required training places will be sourced to support and develop the OS group to confidently and competently manage high risk prisoners.</p>	Governor	September 2019
	<p>Quality Assurance work will be completed to ensure all cases are appropriately managed. As part of the supervision process OS staff will discuss cases at supervision sessions. This will allow for the development of a reflective practice approach and identify areas for improvement to be considered. The Offender Assessment System (OASys) will be completed as required and countersigned by Probation. The Senior Probation Officer (SPO) will complete Quality Assurance checks in accordance with the Quality Assurance (QA) audit requirements which currently identifies one per month, dependent on completions. The SPO will further implement random sampling of cases monthly and outcomes will be discussed in supervision.</p> <p>HMP Durham will introduce a system of Bi-monthly individual supervision of Offender Supervisors by the Senior Probation Officer (SPO). Supervision will focus on case discussion and identify any gaps in management and specifically effective development of and arrangements for release planning of high risk prisoners. This will also provide the opportunity to discuss and monitor the level of contact between the OS and their prisoners. To improve release planning and consistency as part of a schedule of development sessions there will be specific briefings on the actions that need to take place for high risk offenders being released including timescales and communication with outside Probation. Probation Officers will be allocated a number of OS staff to mentor. As part of the ongoing development OS staff will attend the Inter-Departmental Risk Management Team (IDRMT) meeting in respect of high risk cases they have been allocated. OS staff will be provided opportunities to shadow community based Probation staff to improve links and assist with understanding the importance of liaison prior to release. As part of the OMiC case management there will be a transition document to assist this, however case management phase will not start until September 2019.</p>	Governor	September 2019





	<b>Recommendations</b>				
	<b>Early days in custody</b>				
5.6	The induction programme should be clear, concise and relevant, providing all prisoners, including those who have never been in custody, with enough information to be able to access all services and regime activities. (1.10)	Agreed	<p>A review of the current induction process, in line with early days assessments and interventions review will be undertaken. This will include input from user forums and consider the sequencing of induction to maximise attendance and engagement. This will also explore the feasibility of introducing a reduced duration fast track induction session for men who have recently been in custody at Durham or elsewhere with no increased risk issues. This will allow the review to assess improved use of resources to focus a full induction programme more meaningfully on prisoners new to custody or with issues of vulnerability.</p> <p>HMP Durham will develop a new induction programme distinct for and relevant to a reception prison. This will contain all the necessary information that any prisoner coming into the establishment will require to access all the services and understand the daily regime.</p> <p>A review will be undertaken to improve time out of cell for prisoners on the first night centre through ensuring access to work and gym sessions is encouraged and maximised. This will involve working in conjunction with the intelligence hub to ensure work place risk assessments are completed in a timely manner.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>July 2019</p> <p>November 2019</p>
	<b>Managing behaviour</b>				
5.7	The casework approach to managing and changing poor behaviour and assisting vulnerable prisoners through support and intervention plans should be embedded in practice. (1.18)	Agreed	<p>HMP Durham will embed assurance processes to improve and maintain the quality of Challenge Support Intervention Plans (CSIP) and ensure that the Assurance Framework reflects this system of checks.</p> <p>A daily operational briefing will be introduced for residential staff and other agencies and partners responsible for the care and management of prisoners to exchange share and inform about the behaviour of those prisoner's subject to CSIP.</p> <p>HMP Durham has trained fifty staff as CSIP investigators to inquire into the circumstances of incidents of violence, disruption or anti-social behaviour.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p> <p>Completed</p>



			<p>Establishment of an effective pathway for investigations to be referred to the residential CM promptly for a decision about ongoing management and intervention planning.</p> <p>The number of open CSIP documents in the prison will be reported each day in the CM stability report. This will be discussed at the daily operations management meeting and by the Senior Management Team (SMT).</p> <p>HMP Durham will introduce a weekly multi-disciplinary Safety Intervention Meeting (SIM) which discusses actions to manage, support and challenge the behaviour of vulnerable and disruptive prisoners. This will provide individualised support and intervention plans which will include signposting to relevant and available services.</p> <p>Undertake a project with the TWPG Safety team to develop and issue easy guides explaining the application of CSIP to all staff and their role in the process.</p> <p>The Safer Custody admin team maintain a Violence Reduction Triangulation Log daily. Members of the team will examine the Incident Reporting System, Custodial Manager (CM) Stability Report, wing observation book and National Offender Manager Information System (NOMIS) and specifically case notes entries, adjudication and IEP (Incentives and Earned Privileges) history to identify and record all perpetrators of violence to ensure that incidents are recorded and that appropriate action is taken against the individual. A record is maintained on the log and where there are information gaps, a communication is sent to the manager of the area requesting remedial action. In cases where a CSIP referral is appropriate and has not been initiated, one will be requested and entered onto a CSIP log.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>September 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p>
5.8	Data on adjudications should be routinely analysed to identify emerging patterns; trends should be investigated and action taken to address them. (1.22)	Agreed	<p>The frequency of the Adjudications Standardisation Meeting (ASM) will be increased from quarterly to Monthly. The meeting minutes will record evidence of discussions about the type and volume of adjudication charges being brought and trend analysis which require the meeting to consider distinct actions to be taken.</p> <p>The Terms of Reference (TOR) and agenda for Segregation Management and Review Group (SMARG) will be reviewed to ensure that appropriate data is</p>	<p>Governor</p> <p>Governor</p>	<p>July 2019</p> <p>July 2019</p>



			<p>gathered, analysed and presented which reflects trends from adjudications. The group will evidence this in recorded minutes of meetings.</p> <p>Governance procedures will be established for trends data identified in SMARG and ASM meetings to be reviewed by the Head of Residential &amp; Safety to ensure appropriate action is taken and fed into the Senior Leaders Team (SLT) by exception.</p>	Governor	July 2019
5.9	The governance of and accountability for the use of force, including special accommodation and all interventions should be improved. (1.28)	Agreed	<p>HMP Durham will establish a formal multi-disciplinary Use of Force (UoF) committee which will meet every two weeks to review the quality and completion of UoF reports. The meeting will also consider the proportionality of use of force and will seek to identify any trends or issues requiring inquiry or resolution to be addressed by prison management. The meeting will keep a formal record of its business and assigned actions.</p> <p>Use of Force figures will be presented at the weekly operational meeting to inform prison management about the frequency and circumstances in which force has been used. This platform will also ensure any omissions in UoF documentation are reported to functional heads and cascaded down to line managers for action and prompt completion.</p> <p>The Terms of Reference (ToR), agenda and standing items for the fortnightly UoF committee will be revised to include a review of Closed Circuit Television (CCTV) and Body Worn Video Camera (BWVC) footage used during any incident of use of force. The committee will ensure any lessons learned will be communicated to staff and Control and Restraint (C&amp;R) co-ordinators and trainers for integration into training delivery. Areas of good practice which are identified will also be shared with staff. Issues requiring further inquiry will be brought to the attention of prison management for appropriate action. The committee will monitor the use of BWVC during incidents and its effective use in de-escalation. The committee will link and communicate important messages about UoF and incident management to the Security and SMT Meetings.</p> <p>Staff have access to the electronic annex A UoF logging system to log on and submit documentation after an incident. This is managed by the UoF Coordinator</p>	Governor	Completed
			Use of Force figures will be presented at the weekly operational meeting to inform prison management about the frequency and circumstances in which force has been used. This platform will also ensure any omissions in UoF documentation are reported to functional heads and cascaded down to line managers for action and prompt completion.	Governor	Completed
			The Terms of Reference (ToR), agenda and standing items for the fortnightly UoF committee will be revised to include a review of Closed Circuit Television (CCTV) and Body Worn Video Camera (BWVC) footage used during any incident of use of force. The committee will ensure any lessons learned will be communicated to staff and Control and Restraint (C&R) co-ordinators and trainers for integration into training delivery. Areas of good practice which are identified will also be shared with staff. Issues requiring further inquiry will be brought to the attention of prison management for appropriate action. The committee will monitor the use of BWVC during incidents and its effective use in de-escalation. The committee will link and communicate important messages about UoF and incident management to the Security and SMT Meetings.	Governor	Completed
			Staff have access to the electronic annex A UoF logging system to log on and submit documentation after an incident. This is managed by the UoF Coordinator	Governor	Completed



			<p>New harnesses for BWVC to improve camera footage have been ordered and issued.</p> <p>All Senior Management Team (SMT) members who perform the role of Duty Governor and have the authority to approve the use of special accommodation will be trained in defensible decision making and record keeping.</p> <p>The Governor and in their absence the Deputy Governor will review and Quality Assure (QA) the documentation authorising the use of special accommodation at the time of a prisoner being placed in special accommodation or as soon as practicable thereafter. The Governor or Deputy Governor will address any issues of legibility, justification or proportionality with authorising managers if necessary.</p> <p>HMP Durham will develop a clear process and approved documentation for the use of special accommodation which will be underpinned by best practice around the prison estate. Documentation will be defined and presented in a format which supports defensible decision making by the Duty Governor and considers and mitigates risks for staff and prisoners.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>May 2019</p> <p>Completed</p> <p>May 2019</p>
5.10	Prisoners in the segregation unit should have a constructive daily regime and be able to participate in some purposeful activity. (1.35)	Agreed	<p>HMP Durham will design and introduce an induction process for prisoners to the Separation and Care Unit (SACU) which will include information about the published daily regime, opportunities to access activity and a compact on expected standards of behaviour.</p> <p>The Learning and Skills manager (L&amp;S) and SACU manager will undertake a review of current activity options available to prisoners in the SACU and determine the scope for further opportunities to be introduced. A report with a proposed spectrum of new activity in the SACU and the limitations of its provision to prisoners will be submitted to the Governor for consideration and approval. This will include risk assessments and Safe Systems of Work arrangements for those prisoners who would potentially access the new activity and for the benefit of staff supervision. Activity for the purposes of the review will consider access to domestic arrangements such as telephones, showers, meals and exercise. It should also consider the expansion of Mental Health support, psychosocial and drug and alcohol recovery services, education and where possible employment and access to gymnasium facilities or staff.</p>	<p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p>



			The revised regime and improved activity access will be introduced following consultation and communication with the SACU team and managers. The purpose will be to support prisoners whilst in segregation, improve behaviour whilst on the unit, prevent psychological deterioration and assist reintegration to the main prison.	Governor	September 2019?
	<b>Safeguarding</b>				
5.11	Prisoners on an ACCT should only be located in the segregation unit or in special accommodation as a last resort and when there are exceptional circumstances, which should be recorded clearly. (1.49)	Agreed	<p>All members of the Senior Management Team (SMT) who carry out the role of Duty Governor and have responsibility for critical decisions about prisoner care in the SACU have attended defensible decision-making training. Any new member of the SMT will be required to complete this training before they make decisions about the care of prisoners in the segregation unit.</p> <p>Prisoners on an open ACCT document or where an ACCT is opened whilst on the SACU will only remain there if they present an unmanageable risk to others such that no other suitable location is appropriate and where all other options have been exhausted. In this instance the duty governor/authorising operational manager will record the reasons for location to the SACU in the ACCT document and consideration of alternative options and why these have been discounted. The duty governor/authorising operational manager will ensure a multi-disciplinary ACCT case review is held before the prisoner is in the SACU or immediately afterwards.</p> <p>During the week the functional head with responsibility for the SACU will review the risks, mood and behaviour of those prisoners on an open ACCT document resident on SACU. At weekends and when the functional head is not available this role will be completed by the duty governor or adjudicating governor completing rounds of the unit. The review will confirm defensible decisions have been made and recorded a relocation or reintegration plan is in place and appropriate ACCT processes are being adhered to. The functional head or duty governor will record the outcome of their review in the ACCT document along with a record of any dialogue they have had with the prisoner. They will also state if it is appropriate for the prisoner to remain in segregation or if relocation is to take place and record the reasons why.</p> <p>Only the duty governor or an operational manager of equitable or senior status will authorise a prisoner to be placed into special accommodation. The Duty</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Complete &amp; Ongoing</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p>



			<p>Governor will record their decision on form OT013 'Authority for Location in Special Accommodation,' Where a prisoner is also on an ACCT document the decision will also be recorded in this and a multi-disciplinary case review will be held within two hours of the prisoner being in special accommodation. During the core weekday the duty governor will inform the Governor in charge of the decision to place the prisoner in special accommodation, the reasons for doing so and alternatives considered and rejected. The status and continuing confinement in special accommodation will be reviewed by the duty governor or designated manager every hour. Should it be necessary a full case review will be held every 24 hours, however it is desirable to remove a prisoner from special accommodation at the earliest opportunity and where continued confinement is no longer necessary.</p> <p>All decisions and subsequent logs of a prisoner subject to an open ACCT, being in the SACU or in special accommodation, will be reviewed by the safer prisons multi-disciplinary committee, with feedback to the SMARG, and individual managers and line managers where required.</p> <p>A report of those prisoners on ACCT in the segregation unit and where applicable those in special accommodation will be reported to the governor in charge at the daily operations meeting.</p> <p>Documentation including the OT103 Authorisation for location in special accommodation, ACCT and decisions log will be reviewed by the governor in charge or deputy governor at the earliest available time after a prisoner on ACCT is located into special accommodation. Any lessons learned, points of issue or good practice will be communicated to individual managers and the SMT to ensure the most effective, appropriate and responsibly risk based approach to the use of special accommodation is being adhered to.</p>	Governor	May 2019
				Governor	May 2019
				Governor	May 2019
5.12	The prison should have a coherent strategy to reduce self-harm, informed by the specific characteristics of the population at HMP Durham. It should include a meaningful analysis of	Agreed	HMP Durham Safer Prisons Committee will undertake a review of the local safety policy to ensuring that it acknowledges the unique characteristics of Durham as a reception prison. The review will also consider the unique or critical needs of prisoners with Mental Health issues and those new to custody. The policy will strengthen links between safer custody, security and drug strategy with a specific emphasis on the use of illicit substances and the safety issues for those prisoners. The policy will focus on identified need, risk management and reduction, service delivery and outcomes. It will be	Governor	July 2019



	data and an action plan. (1.50)		<p>underpinned by a safer custody combined action plan which will be flexible to the changing needs of HMP Durham's population and new risks and will be reviewed and updated by the safer custody committee annually or where an unmet need is detected.</p> <p>The data analyst will collate information for the safer custody committee meeting particularly in the key areas of Mental health, drugs and early days in custody and provide a trends analysis for the preceding period. This will be introduced as a standing agenda item and trends will be reviewed by the committee at each meeting. The minutes will reflect trend analysis discussion by the committee and where adjustments have been made or new items have been introduced into the safer custody combined action plan.</p> <p>Senior leaders from the Mental Health Team and Drug and Alcohol Recovery Team (DART) will be introduced as mandatory members of the Safer Prisons Committee.</p> <p>The Deputy Governor will assume the chair of the safer custody committee providing clear strategic guidance and governance ensuring the aims of the safer custody policy and the outputs of the combined action plan are delivered.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p> <p>May 2019</p>
5.13	All staff should be trained in safeguarding procedures and be aware of their responsibilities. (1.52)	Partly Agreed	<p>This recommendation is partly agreed. HMP Durham will work collaboratively with the TWPG safety lead and the Safeguarding adults board to develop and launch a whole prison adult safeguarding policy and referral process. The policy will include clear operating procedures and referral processes for staff where they have concerns about a safeguarding issue and will also state their responsibilities.</p> <p>HMP Durham will also discuss with the TWPG Safety lead and Safeguarding Adult Board the most effective method of training HMP Durham staff in safeguarding procedures, responsibilities and referral to services. A training programme will be developed and delivered for all HMP Durham staff working directly with prisoners, however it will not be possible due to training resources, budget and competing training requirements to deliver this training to all staff irrespective of their involvement with prisoners.</p>	<p>Governor</p> <p>Governor</p>	<p>August 2019</p> <p>September 2019</p>



			<p>HMP Durham will identify staff to act as safeguarding champions to promote a point of contact and advice and spread awareness in the prison about adult safeguarding and staff responsibilities.</p> <p>A safeguarding easy guide will be developed and issued to all staff on the HMP Durham strategy to support awareness and action on safeguarding matters.</p>	Governor	July 2019
				Governor	July 2019
	<b>Staff-prisoner relationships</b>				
5.14	Staff's interactions with prisoners should be monitored and feedback should be offered to ensure they respond confidently and immediately to poor behaviour. (2.4)	Agreed	<p>HMP Durham will explore options to improve manager visibility, such as introducing a separate adjudicating governor or a schedule of operational managerial visits, and a Custodial Manager Oscar 2 or an agreed tour of duty process. This will enable greater visibility and the opportunity for Managers Band 5 (B5) and above to provide feedback and coaching to staff.</p> <p>The Activities Custodial Manager (CM) will undertake routine daily observations of staff interactions in education classrooms and provide positive feedback or advice to staff as appropriate.</p> <p>A quality Assurance (QA) process will be developed to monitor the recording of key worker entries of prisoner contact and interactions and provide constructive feedback to individuals this will be copied to line managers for Staff Performance and Development Record (SPDR) purposes, to support appropriate interaction with prisoners or indicate where improvement may be required.</p>	Governor	May 2019
				Governor	September 2019
				Governor	September 2019
5.15	PID workers should be monitored and supervised to ensure they do not undertake work that staff should be doing or have access to personal information about other prisoners. (2.5)	Agreed	<p>HMP Durham will establish a monthly Prisoner Information Desk (PIDS) meetings, chaired by a Residential CM, with standing items and include agenda item for the levels of support they are receiving, (a minute of meetings will record and share with prisoners the discussion and actions agreed).</p> <p>A prisoner Information Desk (PID) worker strategy, including a job specification and code of conduct document will be produced which will be agreed with all PID workers. This will include clear limitations of scope, data access restrictions and maximum time in post before rotation to another activity or PID position.</p>	Governor	May 2019
				Governor	May 2019





			<p>The policy will not prejudice prisoners undertaking the role of PID worker where is necessary for them to transfer to meet a sentence planning target.</p> <p>HMP Durham will introduce a process of staff supervision, and a minimum 10% random weekly managers check, to ensure PID workers are not operating outside their job specifications or the PID worker strategy and are appropriately supported.</p>	Governor	May 2019
	<b>Daily life</b>				
5.16	Cells should be decorated and equipped to a good standard and provide a decent environment with sufficient space for the prisoners accommodated there. (2.10, repeated recommendation 2.11)	Partly Agreed	<p>This recommendation is partly accepted as for the foreseeable future, and in common with other prisons, it will be necessary for HMP Durham to operate with an Operational Capacity that involves a level of crowding above its Certified Normal Accommodation.</p> <p>As part of prison reforms, the long-term goal is to reduce crowding, while maintaining sufficient capacity in the prison estate to manage the demands of the courts and the sentenced population as efficiently as possible. This level is kept under constant review, considering fluctuations in the prison population and useable capacity across the estate. The prison ensures that this level of operational capacity is set to reflect the provision of safe and decent accommodation and the operation of suitable regimes and that levels of crowding in prisons are carefully managed.</p> <p>The occupancy of prison cells is determined by the Governor of each prison and, where cells are proposed for sharing when they were originally designed for single occupancy, this is certified by the relevant Prison Group Director in accordance with Prison Service Instruction (PSI) 17/2012, which provides clear guidelines for determining cell capacities.</p> <p>A system of decency checks will be introduced to compliment the Accommodation Fabric Check (AFC). This will include a full prison clothing, bedding and towel kit check, a graffiti check of the cell and a check for excess of prison kit inclusive of cell furniture. Cell furniture will be reviewed to include the provision of a lockable cabinet, with a programme of installation to be confirmed, subject to costs and availability.</p> <p>HMP Durham will introduce supervised prisoner painting teams which will work to a programme and specification of cell and communal area decoration standards. The work of the painting teams will be monitored against the</p>	<p>Director Prison Estate Transformation Programme (PETP)</p> <p>Governor</p> <p>Governor</p>	<p>July 2019</p> <p>May 2019</p>



			<p>programme and Quality Assured (QA) by wing managers during decency checks.</p> <p>The establishment will continue to identify areas requiring major maintenance, and will submit bids accordingly. Presently, a bid for the replacement for A wing flooring has been submitted and approved, subject to delivery by contractor within the financial year.</p> <p>Introduction of a cleaning officer role and recruitment from existing wing staff who will be provided with additional training in their role to support decency throughout the living units. The cleaning officer role will be supported by new cleaning schedules, job descriptions and Safe Systems of Work (SSOW).</p> <p>HMP Durham Decency Policy is being finalised before approval after which it will be published and communicated to all prisoners and staff. The policy will provide information on acceptable and expected standards of cleanliness and standard operating procedures.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>June 2019</p> <p>May 2019</p> <p>May 2019</p>
5.17	Regular checks should be made to ensure that cell call bells are answered within five minutes. (2.11)	Partly Agreed	<p>This recommendation is partially agreed as policy within PSI 75/2011 – Residential Services does not state a set time within which cell bells should be responded to and there is no single electronic system to measure response times across all units. HMP Durham will however endeavour to normally meet a five-minute response time to cell bells and a new system will be implemented to achieve this on the three wings with existing monitoring systems which can be analysed and delays challenged and acted upon. Four more wings do not have monitoring systems and therefore HMP Durham will develop systems in those areas to improve assurance of cell call response times.</p> <p>A quote for £54K has been received for the installation of cell call bell monitoring systems in the areas of the prison currently without them. HMP Durham will submit a bid for these funds to be centrally provided and prioritise high risk areas such as segregation and early days units.</p> <p>A system will be put in place for Supervising officers (SO) and Custodial Managers (CM) to covertly check response times to cell bells each week on an unannounced basis which will be documented. Persistent issues around response times may be escalated through performance management processes.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>Completed and ongoing</p> <p>May 2019</p>



			An annual Staff information notice will be published to remind all staff of the requirement for prompt answering of cell call bells and the new and existing monitoring systems which prison managers will be using to test and assure response rates.	Governor	Complete & Ongoing
5.18	Prisoners should be able to buy items from the shop within 24 hours of arrival. (2.16, repeated recommendation 2.113)	Not Agreed	<p>This recommendation is not agreed as the current national retail contract does not allow prisons to open their own canteen prison shops or provide shopping services to prisoners outside of those contractual arrangements.</p> <p>Each establishment has one set ordering day in the week for retail purchases, and one corresponding delivery day. To provide extra deliveries outside of this for new prison arrivals would be cost prohibitive. Prisoners are offered a reception pack to purchase on arrival with different packs containing a variety of differing goods. A prisoner is then able to place their first full order on the next usual ordering day.</p> <p>Until and if there is a change in the national contract arrangements there is no capacity to offer this service. Additionally, HMP Durham neither has the staff, financial resources or built environment to offer this service outside National arrangements.</p>	Head of Prison Retail Directorate of Safety and Rehabilitation Governor	
5.19	Responses to prisoners' complaints should demonstrate sufficient enquiry and address all issues raised. (2.22)	Agreed	<p>HMP Durham will implement a 5% monthly quality assurance process check conducted by the Head of Residence and Safety, with written anonymised feedback to all managers, encouraging an overall improvement in the quality of responses, and specific feedback to individuals where required.</p> <p>Implementation of a 100% monthly check of all complaints against staff, to be conducted by the Deputy Governor, with feedback to individual managers provided where required and copied to line managers for performance improvement purposes.</p> <p>The complaint response template will be revised and a new guidance sheet will be developed and included with each complaint issued to respondents to provide clear information on how the response should be structured. This will include how to address the complainant, tone, substance of the response and covering all points of complaint and timeliness.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p> <p>May 2019</p>



	<b>Equality, diversity and faith</b>				
5.20	Equality and diversity should be given a high priority and senior staff should actively promote this area of work. (2.29)	Agreed	<p>The Terms of reference for the Equality Action Team (EAT) meeting will be reviewed to ensure the correct managers, staff and prisoner representatives from the mandatory committee which will be chaired by the Deputy Governor, or Head of Equalities in their absence. The standing agenda will be revised to include a record of attendance which will be included with records of minutes. Where a mandatory member of the committee is unable to attend they will ensure they deputise to a colleague who is able to report on their area and actions and contribute to the meeting and the minutes will reflect this.</p> <p>HMP Durham work with the TWPG lead to refresh the equalities and inclusion policy to ensure changes in respect of new focus groups and prisoners access and availability to attend them is included. The policy will include a combined action plan which will be updated annually and as required by the EAT committee when responding to identified inequality for any Protected Characteristics (PC) group because of monthly meeting analysis. The meeting will review Equality and Diversity data and provide a record of the discussions, comments on analysis, trends and desired outcomes in the minutes of the meeting. Where analysis identifies inequality in the treatment of any PC group in the prison the committee will ensure further investigation and analysis is undertaken and where appropriate actions to resolve the inequality are recorded and monitored on the EAT combined action plan.</p> <p>HMP Durham will identify staff to become representatives for the following groups DAWN (Disability, Advocacy, Wellbeing Network), PiPP (Pride in Prison and Probation), RISE (Racial Inclusion &amp; Striving for Equality). This will promote greater awareness and inclusion for PC groups throughout the prison.</p> <p>Identified Senior Management Team (SMT) members will take responsibility for the support and promotion of protected characteristics groups. These SMT members will be mandatory EAT committee members and will provide monthly updates on work for their strand including engagement with offenders, and areas of good practise.</p>	Governor	July 2019
				Governor	June 2019
				Governor	May 2019
5.21	The needs of individuals from all minority groups should be identified and	Agreed	A needs analysis of minority groups will be conducted, to include internal communications, access to services and regimes, canteen facilities, and visitor	Governor	July 2019



	reliable arrangements introduced to provide the support they require. (2.30)		<p>information, with outcomes and recommendations to be reviewed and monitored through the EAT.</p> <p>Establishments with identified areas of good practice will be contacted by the Equalities Manager to enable a wider development of services and process at Durham. The equalities manager will establish a monthly focus group with support from an identified SMT strand lead.</p>	Governor	July 2019
5.22	Prisoners should have free access to DIRFs and an independent method of checking responses should be introduced. (2.31)	Agreed	<p>Discrimination Incident Report Forms (DIRF) will be provided on all residential areas. Prisoners will have unrestricted user access to forms. Business hub staff will undertake a daily check on residential units to ensure DIRF's are available and can be accessed by prisoners at the complaints boxes. They will replenish the supply of DIRF's to maintain consistent availability to prisoners.</p> <p>The induction programme will be updated to ensure DIRF awareness is addressed with prisoners on arrival at HMP Durham. This will include information on where to find DIRF's on residential units, what they should be used for and where to submit them.</p> <p>An independent assessor for Quality Assurance (QA) of DIRF's is being sourced, with current discussions taking place with Durham University to increase scrutiny and legitimacy of independent checks. A 20% random sample of DIRFs per quarter will be reviewed by the Independent assessor. Responses from Independent Assessors are to be reviewed by the Equalities lead and Deputy Governor and provided to the EAT for a strategy update and feedback to authors.</p> <p>The EAT will review trends data of DIRFs, identifying areas for further work and improvement as well as areas of good practice.</p> <p>A 100% quality check of DIRFs relating to staff behaviours will be conducted by the Deputy Governor.</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>Completed</p> <p>June 2019</p> <p>June 2019</p> <p>May 2019</p> <p>May 2019</p>
5.23	All staff in contact with prisoners should be familiar with PEEP procedures and aware of	Agreed	The Personal Emergency Evacuation Plan (PEEP) system will be reviewed in conjunction with Health & Safety, the Safer Prisons/Equalities team, the Residential Function, and the primary nursing care provider G4S. A refreshed strategy will be produced and communicated to staff and prisoners providing	Governor	May 2019



	the prisoners needing assistance in an emergency. (2.41)		advice on when a prisoner should be considered for a PEEP, what adjustments should be made, residential location and procedures and duties for identification, supervision and support.		
	<b>Health, well-being and social care</b>				
5.24	Effective governance processes should be in place to ensure good oversight of the whole service and provide clear lines of accountability and responsibility. (2.55)	Agreed	<p>The governance process has been strengthened via the Integrated Clinical Governance Board (ICGB). All providers are in attendance. Spectrum has three nominated individuals that attend at senior level. We have also strengthened the ICGB process and the reporting arrangements. There is now a standard agenda which covers the following: Complaints, Incidents, Serious Incident/Death in Custody (SI/DIC), Quality Improvement plans, Care Quality Commission (CQC) reports and action plans, Safeguarding, Policy statement and approval, Quality updates from each provider, Risk Register.</p> <p>Drug and Alcohol Recovery Team (DART) governance Board and medicines management report to ICGB. The Serious incident (SI) process has been reviewed and agreed. Operational issues are overseen by the Local Delivery Board (LDB). The SI/DIC panel has membership from all partners, including Public Health England (PHE) and HMPPS to ensure lessons learned are shared across the partnership. The ICGB feeds into the Cumbria and North-East Prison Health Partnership Board which the Governor attends.</p> <p>Current local governance is supported by the daily healthcare operational meeting which all healthcare providers are invited to. Senior healthcare managers also attend the daily operational meeting at Durham. Monthly partnership meetings which include agenda items in relation to governance including incidents, complaints, action plans from DIC and risk registers are also in place.</p> <p>The procurement of a new contract expected to commence in April 2020 will likely seek a prime provider and will be based upon the NHS standard contract. It is anticipated this will remove significant barriers and issues by having a lead provider.</p>	<p>Director G4S Primary care services Director of Spectrum GP and pharmacy services Director Tees Esk and Wear Valley NHS Foundation Trust Director G4S Substance misuse provider service Director of Spectrum and Change, Grow, Live Governor</p>	June 2019



			<p>Review TOR and agenda of the local delivery board to meet good Governance practice as set out by Executive Director North.</p> <p>Head of Healthcare to start attending the prison SMT meeting to support linkages with other prison managers.</p>	<p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>Completed</p>
5.25	The prison should introduce a regular health service user forum to inform service delivery and development. (2.56)	Agreed	<p>HMP Durham will explore and implement new local pathways to receive regular service user feedback on health care services to inform future delivery and development. The review will consider the introduction of a prisoner service user forum of those in waiting rooms prior to or after clinic appointments, Information Technology (IT) kiosk questionnaires and developing a Prisoner Information Desk (PID) healthcare champion role.</p> <p>National Health Service England (NHSE) has commissioned an organisation called ABL to deliver Patient Health Councils across the North. HMP Durham will enable the work of ABL when this service is ready for delivery. These services are currently being mobilised and will provide independent feedback from patients across all prisons.</p>	<p>Director G4S Primary Care Services Director of Spectrum GP and pharmacy services Director Tees Esk and Wear Valley NHS Foundation Trust Director G4S Substance misuse provider service Director of Spectrum and Change, Grow, Live Governor</p> <p>Director G4S Primary Care Services Governor</p>	<p>July 2019</p> <p>September 2019</p>
5.26	A systematic, prison-wide strategy should be established to promote prisoner well-being. (2.60)	Agreed	<p>HMP Durham will establish a programme of health promotion campaigns to match the timing of national health promotion/awareness raising campaigns and events.</p> <p>HMP Durham will undertake a programme of activity including healthy living and health promotion through engagement with gymnasium, education and other partnerships. To deliver a programme of well-being promotion activities (such as</p>	<p>Director G4S Primary Care Services Director of Spectrum GP and pharmacy services Director Tees Esk and Wear Valley NHS Foundation Trust</p>	<p>July 2019</p> <p>September 2019</p>



			a marketplace interactive event, Body MOT's, Healthy eating and smoking cessation) for prisoners.	Director G4S Substance misuse provider service Director of Spectrum and Change, Grow, Live Governor	
5.27	All prisoners should receive a secondary health screening within seven days of their arrival at the prison. (2.70)	Partly agreed	<p>This recommendation is partly agreed as whilst secondary health screening is a requirement the impact of the reconfiguration of HMP Durham to a Reception prison has had a negative impact upon the ability to deliver assessments particularly within the seven-day window. The rate of churn from Durham makes it incredibly challenging to ensure completion as new receptions arrive and prisoners transfer out sometimes in seven days or less. The primary focus for NHSE providers is to ensure that appropriate initial screening is carried out on the day of reception so that appropriate steps can be taken to ensure the clinical safety of individuals at that point. Where possible assessments will be completed within the seven-day window and steps will be taken to improve these outcomes.</p> <p>A process will be developed to offer a consensual led approach to secondary screening ensuring priority of need and identifying those patients who are keen to engage in the assessment process.</p> <p>Appointments for secondary screening will be added to the kiosks to improve appointment attendance.</p> <p>The Head of Healthcare will contribute to the review of the induction programme and sequencing of early day's assessments and interventions to identify opportunities to improve the rate and timing of secondary health screen assessments.</p> <p>A prisoner forum will be held on the Induction wing to identify why there is a lack of engagement toward secondary health screen. The outcomes of the forum will be feedback to the healthcare team to identify options for increasing Secondary Healthcare screen engagement.</p>	<p>Director G4S Primary Care Services Governor</p> <p>Director G4S Primary Care Services</p> <p>Director G4S Primary Care Services</p> <p>Director G4S Primary Care Services</p> <p>Director G4S Primary Care Services</p>	<p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p>





5.28	All patients with long-term conditions should receive personalised care planning. (2.71)	Partly agreed	<p>This recommendation is partly accepted as the ability to provide care plans is impacted upon by the length of time prisoners are at HMP Durham prior to transfer and is outside the control of the healthcare provider. This reduction in time affects the ability to request and receive information from community General practitioners (GP's) to inform the plan. The provider will work to ensure prisoners who remain at Durham for 10 days or more with long term conditions will be clinically prioritised and have a care plan in place. For those who transfer before this time it would be the responsibility of the receiving prison to undertake the development of the care plan.</p> <p>A policy will be developed to define the parameters under which a personalised care plan for long term conditions is appropriate and the identification of those prisoners who would benefit from one. This will enable prioritisation based on clinical need and high priority.</p> <p>A regular review of care plans to be monitored by the inpatient manager/complex case co-ordinator.</p>	<p>Director G4S Primary Care Services</p> <p>Director G4S Primary Care Services</p> <p>Director G4S Primary Care Services</p>	<p>October 2019</p> <p>October 2019</p>
5.29	Hand-washing and laundry facilities should meet the requirements of the inpatient unit. (2.72)	Agreed	An Additional Work Request (AWR) will be submitted to the facilities management team for the installation of a sink in the laundry room and the plumbing and supply of a dishwasher in the kitchen to enable hand washing and appropriate clothes washing to take place in sinks promoting effective infection control.	Governor	July 2019
5.30	Providers should undertake timely assessments and deliver an appropriate range of interventions. (2.84)	Agreed	<p>The operational Mental Health In-Reach Team (MHIT) ensure urgent assessments are completed within 24 hours and routine referrals within seven working days. Nursing staff provide dedicated good support for prisoners with diagnosed mental health conditions and those with complex needs through the care programme approach. Additionally, those prisoners with serious mental health conditions receive support from I wing therapeutic regime.</p> <p>Reconfiguration at HMP Durham has affected the length of stay of prisoners and impacted upon the demands on some current mental health service providers and existing provision. Assessments and interventions provided for identified low level mental health needs by the Rethink provider will be reviewed through an assessment of need by Tees, Esk and Wear Valley NHS Foundation to ensure the provision is commensurate with demand for the service. If it is determined this cannot be achieved through the existing resources then a</p>	<p>Director Tees Esk and Wear Valley NHS Foundation Trust</p> <p>Director Tees Esk and Wear Valley NHS Foundation Trust</p>	July 2019



			business case will be submitted to the contract and performance meeting. National Health Service England (NHSE) will then consider the business case for approval.		
5.31	Practitioners should be able to access appropriate safe spaces to provide individual and group activities. (2.85)	Agreed	A full review will be undertaken of all current and proposed spaces, areas and rooms identified as safe spaces for individual or group activities. The review will ensure the areas are properly maintained are clean and compliant with risk assessments and Safe Systems of Work (SSOW). The review must ensure compliance with fire safety, health and safety legislation, disability access and matters of supervision, support and personal staff safety. HMP Durham will monitor attendance rates through the monthly governance meeting to ensure efficient use of space and address issues as they arise.	Governor	May 2019
5.32	Prisoners sectioned under the Mental Health Act should be transferred within the transfer timescale guidelines. (2.86, repeated recommendation 2.101)	Partly Agreed	<p>This recommendation is partly agreed as although every effort is made to expedite transfers and assess patients promptly, transfers are dependent on several factors such as the completion of appropriate assessments, administrative processes within the National Health Service (NHS), and the availability of accommodation in the mental health estate. Tees Esk and Wear Valley NHS Foundation Trust and HMP Durham will continue to work collaboratively to expedite the transfer of patients requiring mental health inpatient care. Tees Esk and Wear Valley NHS Foundation Trust will ensure paperwork is sent to the Home Office promptly on receipt of a movement order and at the earliest opportunity once a bed becomes available HMP Durham will arrange transport.</p> <p>NHS England is working with partners in HMPPS and Public Health England (PHE) to improve and redesign services for people in prison with mental health needs. This includes revising approaches to secure hospital transfers under sections 47 and 48 of the Mental Health Act 1983 when a person needs to be in a hospital for their mental health.</p> <p>HMPPS and NHS England have collected evidence and have increased understanding of where transfers work well and how delays arise, identifying areas for improvement. NHS England has committed to action across policy, commissioning and operation, and will be consulting in Autumn 2019 on revised guidance on transfer and remissions to and from prison to mental health settings. This will include the definition of new expectations for achieving timely transfer with greater priority being given to urgent cases.</p>	<p>Director Tees Esk and Wear Valley NHS Foundation Trust Governor</p> <p>NHS (England)</p>	<p>Completed</p> <p>October 2019</p>



5.33	All operational staff should have regular mental health awareness training. (2.87, repeated recommendation 2.100)	Agreed	<p>Healthcare providers will work with Durham prison to identify all operational staff who require one-day mental health awareness training and develop a programme for delivery.</p> <p>Records will be maintained of all staff who complete mental health awareness training.</p> <p>There will be a review of Suicide and Self Harm (SASH) module 6 training to check mental health knowledge and understanding is incorporated into the training.</p>	<p>Director Tees Esk and Wear Valley NHS Foundation Trust Governor</p> <p>Governor</p> <p>Governor</p>	<p>October 2019</p> <p>July 2019</p> <p>May 2019</p>
5.34	A process should be in place to ensure prison staff promptly refer prisoners considered to be under the influence of illicit substances to DART services. (2.97)	Agreed	<p>HMP Durham will develop a standardised referral form and implement a standard operating procedure to simplify prisoner referrals to the Drug and Alcohol Recovery Team (DART) from anyone working within the prison.</p> <p>The intoxication template will be adapted, which records a clinical assessment of a prisoner's level of intoxication so it can be automatically sent to the non-clinical DART through the IT healthcare platform System one. This will enable a prompt referral and ensure that a non-clinical support service can be offered to those considered at risk of substance misuse.</p> <p>Intelligence reports (IR) submitted to the security department which relate to prisoners use of illicit substance misuse will include a referral to the DART as an action and redacted information will be copied to the DART functional mailbox for them to engage with prisoners as necessary and provide support.</p> <p>The DART will provide data on the number of referrals from staff and IR outside of prisoner self-referral and reception screening each month at the Drug Strategy Meeting. The report will also indicate what engagement or follow up action the DART has taken.</p>	<p>Governor</p> <p>Director G4S Clinical Care Services Director of Spectrum and Change, Grow Live (CGL)</p> <p>Governor</p> <p>Directors G4S, Director of Spectrum and Change Grow Live</p>	<p>July 2019</p> <p>Completed</p> <p>Completed</p> <p>May 2019</p>
5.35	Prisoners should have easy access to advice and	Agreed	A regular pharmacist clinic is now in place and will continue to be held each week. Its continued delivery and progress will be monitored through the local delivery board.	Director SPECTRUM	May 2019



	support from the pharmacy team. (2.106)				
5.36	Prisoners should receive in-possession medication following a consistent recorded risk assessment that is regularly reviewed and underpinned by current joint policy. (2.107, repeated recommendation 2.91)	Agreed	<p>In-possession risk assessments are completed as part of the reception screening process.</p> <p>All General Practitioners (GP) and Advanced Nurse Practitioners have confirmed that they have read and understood their professional responsibilities when conducting medication reviews and prescribing new medications in accordance with the Joint in Possession Risk assessment policy. This also includes documenting prescribing decisions which may be outside of the agreed In Possession (IP) status such as prescribing and issuing inhalers in possession whereby the risk assessment may indicate Not in Possession for other medications.</p> <p>All pharmacy staff have also read and confirmed their understanding of the joint in possession risk assessment policy and have added steps into the dispensing and administration process to check an in-possession risk assessment is in place, up to date and that the prescription reflects the recorded status or if there is a variation the prescriber has documented why there is a change.</p> <p>Medical in Possession Risk Assessment (MIPRA) will become a mandatory section of the reception screening to ensure all new receptions have been assessed.</p> <p>Develop a “transfer-in” template that also includes a mandatory MIPRA.</p> <p>Complete a Quality Assurance (QA) review of MIPRAs which will be monitored in the future by the Local Delivery Board (LDB) to assure compliance with MIPRA reviews following any change in prisoner’s circumstance including the opening of an ACCT or change in prescription.</p> <p>A monthly check is undertaken recording the number of MIPRAs not in place from System One, this will be reported to NHS England.</p>	<p>Director G4S Primary Care Services &amp; Director SPECTRUM</p> <p>Director G4S Primary Care Services &amp; Director SPECTRUM</p> <p>Director G4S Primary Care Services &amp; Director SPECTRUM</p> <p>Director G4S Primary Care Services &amp; Director SPECTRUM</p> <p>Director G4S Primary Care Services &amp; Director SPECTRUM</p>	<p>Complete &amp; Ongoing</p> <p>May 2019</p> <p>May 2019</p> <p>August 2019</p> <p>Completed</p>



5.37	Prison officers should consistently monitor and manage medication administration queues to reduce the opportunities for bullying and diversion and maintain patient confidentiality at the hatch. (2.108, repeated recommendation 2.92)	Agreed	<p>The Wing Landing Duty Role job description will be published to prison officers with responsibility for management of medication queues. The job description will include specific information about responsibilities when monitoring medication queues.</p> <p>Healthcare colleagues responsible for dispensing and issuing medicines from hatches will not commence dispensing until a prison officer detailed for the task of supervision is present. An escalation process will be agreed between HMP Durham and G4S and Spectrum on what action should be taken by healthcare staff in the event of a failure of staff to attend. Compliance will be monitored through joint partnership boards.</p> <p>A project will be undertaken to review the current location and distribution of medication dispensing points and to consider options to reduce these or centralise the service to improve staff supervision and prevent diversion of medication and bullying. A report will be produced and submitted to the LDB for consideration and approval.</p>	<p>Governor</p> <p>Director G4S Primary Care Services Director of Spectrum Governor</p> <p>Director G4S Primary Care Services Director of Spectrum Governor</p>	<p>May 2019</p> <p>May 2019</p> <p>September 2019</p>
5.38	There should be cohesive governance arrangements between the service providers. (2.109)	Agreed	<p>There is a daily healthcare operational meeting attended by all healthcare providers where possible.</p> <p>Senior healthcare managers attend the daily operational meeting with the wider establishment.</p>	<p>Director G4S Primary Care Services Director of Spectrum GP and pharmacy services Director Tees Esk and Wear Valley NHS Foundation Trust Director G4S Substance misuse provider service Director of Spectrum and Change, Grow, Live</p> <p>Governor</p>	<p>Complete &amp; Ongoing</p> <p>Complete &amp; Ongoing</p>



			The Monthly partnership meeting is chaired by the Governor and is attended by all healthcare providers, which includes agenda items in relation to governance including, incidents, complaints, action plans from DIC and risk registers. Contractual arrangement will be revised following the awarding of a new standard NHS contract which is expected to commence in April 2020. It is anticipated this will remove significant barriers and issues and will seek to appoint a prime provider.	Governor	Complete & Ongoing
	<b>Time out of cell</b>				
5.39	Prisoners in the first night and induction unit should have sufficient time out of their cells so they can settle into a normal prison routine. (3.6)	Agreed	A new core day regime will be designed for E Wing First Night Centre (FNC). This will provide improved time out of cell and sufficient time to engage in routines, domestic activity such as phone calls and showers and other purposeful activity. The new regime will enable prisoners to engage with staff and peers and settle into HMP Durham.	Governor	May 2019
	<b>Education, skills and work activities</b>				
5.40	The system for measuring prisoners' progress should be extended across all activities. (3.15)	Agreed	Novus will support prison industries to develop to ensure that vocational learning is recorded and progress measured.  All prisoners engaging in activities will have Independent Learning Plans and support from Peripatetic input from NOVUS.  We will extend workplace portfolios to include wing based roles. This will measure competence and progression in that role, both in the development of practical skills and behaviour and social engagement. Governance of this will be developed by the Learning and skills (L&S) Manager and will be monitored through the Quality Improvement Group (QIG).	Director NOVUS  Director NOVUS  Director NOVUS Governor	July 2019  May 2019  November 2019
5.41	Arrangements for monitoring the targets tutors and instructors set to measure prisoners' progress should be improved to ensure that	Agreed	We will further embed our governance processes with our education provider and reducing re-offending function through the QIG and education governance forum to ensure that offender activities are monitored, progress is tracked and recorded and that data is transparent.	Director NOVUS Governor	September 2019



	achievement data are more credible. (3.16)				
5.42	Leaders and managers should have a more evaluative and self-critical approach when they make judgements about the quality of teaching, learning and assessment so that they can address areas requiring improvement more effectively. (3.17)	Agreed	<p>An establishment Self-Assessment Report (SAR) will be produced. This will draw on the experience of teaching staff, instructors and managers and that of learners. It will identify weakness, strengths and how learners' progress is challenged and monitored. It will drive a quality cycle forward and deliver effective improvements in teaching, support and learner enrichment and opportunity. This will be formalised following a challenge meeting and critical peer review.</p> <p>The SAR will become a standard agenda item at the Quality Improvement Group (QIG) meeting QIG and will be discussed to ensure teaching outputs are evaluated effectively by managers and are critical and providing improvement for learners.</p> <p>A monthly SAR will also be required from secondary education and vocational training providers as part of governance arrangements following the award of contracts.</p> <p>Areas for improvements which are identified from the SAR process will be escalated to actions and included on the Quality Improvement Plan which will also be a standing agenda item and monitored for delivery at the bi-monthly QIG meetings.</p>	<p>Director NOVUS</p> <p>Director NOVUS</p> <p>Director NOVUS</p> <p>Director NOVUS</p>	<p>July 2019</p> <p>September 2019</p> <p>Completed</p> <p>July 2019</p>
5.43	Learning support staff, tutors and instructors should better identify and record prisoners' starting points and use the information more skilfully to measure their progress. (3.23)	Agreed	<p>Learner Support Plans will be shared between all learning environments identifying any learner issues and support strategies. These will also clearly demonstrate starting points in the learning journey.</p> <p>A Prisoner forum will be held to ascertain why prisoners do not attend the CHOICES programme. These are sessions where prisoners are provided with the activity and regime opportunities, including qualifications and work placements that are available at Durham. This programme also allows the opportunity to identify learners who require educational support.</p> <p>Quality assurance checks, and team leader audits, will be completed by NOVUS and Industry managers on Individuals Learning Plans and with feedback to the instructors via bilateral meetings.</p>	<p>Director NOVUS Governor</p> <p>Director NOVUS</p> <p>Director NOVUS</p>	<p>May 2019</p> <p>Completed and ongoing</p> <p>June 2019</p>



5.44	The delivery of teaching, learning and assessment should be better planned to meet prisoners' different needs and varying abilities and to ensure men make good progress. (3.24)	Agreed	<p>Governance will be improved to monitor Observation Teaching &amp; Learning (OTL) assessments and ensure they include effective quality improvement measures to address issues. Deficiencies will be discussed with tutors and corrections made to focus teaching on the spectrum of learners needs.</p> <p>Continued Professional Development (CPD) will be given to staff to improve understanding of Learning Disabilities and Difficulties.</p> <p>Failure from education partners and providers to address poor delivery of teaching and planning of class sessions will be escalated through QIG.</p>	<p>Director NOVUS</p> <p>Director NOVUS</p> <p>Director NOVUS</p>	<p>June 2019</p> <p>May 2019</p> <p>June 2019</p>
5.45	Managers should strengthen tutors' and instructors' understanding of effective strategies to assist prisoners who need additional support. (3.25)	Agreed	<p>Specific training will be developed for tutors and new staff to improve and implement better learner support and the strategies necessary to respond and support individual learner needs.</p> <p>Structured observational assessment will be introduced by NOVUS and industry managers to ensure tutors are supporting learners through defined strategies appropriate to individual and group needs. Feedback will be provided to tutors during monthly bilateral meetings.</p>	<p>Director NOVUS</p> <p>Director NOVUS</p>	<p>August 2019</p> <p>August 2019</p>
	<b>Children and families and contact with the outside world</b>				
5.46	Visits should start on time. (4.6, repeated recommendation 4.43)	Agreed	<p>HMP Durham will ensure the published regime is adhered to and the start and finish times of the previous days visits sessions will be reported at the morning operations meeting. Any delays will be stated and the reasons presented so measures can be put in place to prevent recurrence.</p> <p>A review of afternoon regimes and commencement activities will be undertaken to identify any points at which the regime is contributing to the delay of visits sessions. Conclusions will be presented in a report to the governor with suggested resolution options to bring about the required output changes.</p> <p>The profile of the Operational Support Group (OSG) staff has been changed permitting visitors to be received into the visits hall prior to visits commencing at</p>	<p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p> <p>Completed</p>





			<p>13:30pm. This is a change from the previous process where visitors were not permitted to enter the hall and start their visits until prisoners were seated.</p> <p>Visits commencement and conclusion will be monitored by and recorded in the visits accountability book and governance will be overseen by Custodial Managers (CM) checks.</p>	Governor	Completed & Ongoing
5.47	The visits booking telephone system should be capable of accommodating the number of visitors calling. (4.6, repeated recommendation 4.43)	Partly Agreed	<p>This recommendation is partly agreed as adjustments to the time when the telephone booking line can be accessed are currently being pursued as a contract review. The provider is also publicising and maximising website bookings. However, to guarantee consistently meeting the volume of telephone calls to book visits would require additional resource to staff the service to meet demand. Due to resource and financial limitations it is not currently possible to increase the service beyond its current capacity.</p> <p>HMP Durham will arrange a contract meeting with North East Prison After Care Society (NEPACS) to re-assess the current framework and contract outputs to ensure it delivers at the times needed.</p> <p>HMP Durham will draft and submit a new specification for this service for procurement.</p>	Governor  Governor	May 2019  June 2019
	<b>Reducing risk, rehabilitation and progression</b>				
5.48	A full needs analysis should be undertaken and updated regularly to identify the needs of the prison's diverse population. The analysis should inform the development of detailed policies to meet these needs. (4.19)	Agreed	<p>HMP Durham will review the Reducing Reoffending and Offender Management Policies in conjunction with the TWPG Reducing Reoffending Strategy. This will ensure they reference and are responsive in their outputs to the needs of HMP Durham's prisoner population.</p> <p>A needs analysis will be produced in conjunction with North East and Yorkshire's Psychology services, taking into consideration information from prisoner focus groups, to identify the specific needs of HMP Durham's reception prison population.</p> <p>HMP Durham will undertake a full and detailed analysis of prisoners needs through Basic Custody Screening Tool (BSCT) and identify the diverse needs of</p>	Governor  Governor  Governor	July 2019  September 2019  August 2019



			<p>prisoners and those of groups with protected characteristics and other unique groups such as care leavers and veterans. This information will inform strategies and be integrated into the development of local Reducing Reoffending and Offender management policies.</p> <p>A policy library and review schedule will be developed with policy leads for reviews to be undertaken promptly and ensure consideration of the conclusions of the needs analysis is embedded in policies and support the needs of HMP Durham's population.</p>	Governor	August 2019
5.49	Offender supervision should be consistent and reflect the level of need presented by prisoners. (4.20, repeated recommendation 4.19)	Agreed	<p>A review of the Offender Supervisor (OS) case allocation processes will be carried out to ensure suitably trained and skilled staff are responsible for cases particularly those of high risk prisoners.</p> <p>A staff Training Needs Analysis (TNA) will be completed for OS staff to identify gaps in experience or appropriate training needs. Identified needs will be met through individual or group supervision, mentoring and training and supported through the Staff Performance and Development Record (SPDR).</p> <p>Provide prisoner and staff forums and questionnaires to extract practitioner and user voice feedback about the experience of supervision and communication across sentence planning at HMP Durham.</p> <p>HMP Durham will analyse and use the results of the OS case review, staff TNA and staff and prisoner forums and questionnaires to identify priorities and improvements for prisoner and OS engagement and future work.</p> <p>Offender Management Unit (OMU) managers will monitor communication and engagement with prisoners on OS caseloads and assure equity of delivery across all OS staff is being maintained addressing this with OS staff during bilateral meetings, SPDR reviews and supervision sessions.</p>	Governor Governor Governor Governor Governor	May 2019 October 2019 June 2019 June 2019 June 2019
5.50	Quality assurance, professional and casework supervision should be available for all offender supervisors to support	Agreed	HMP Durham will formulate a more structured approach to the identification and delivery of training for prison officer OS staff following a Training Needs Analysis (TNA).	Governor	October 2019



	professional development and to ensure consistency of service to prisoners. The role of offender supervisors should be clarified and sufficient time allocated to undertake their work. (4.21, repeated recommendation 4.17)		<p>The Senior Probation Officer (SPO) will review the system of case allocation and produce a framework document for approval by the governor on how sentence cases will be allocated in the future to prison and probation OS staff. This will indicate the level of training and experience required to supervise high risk cases and will be based on individual risk and need.</p> <p>There will be direct mentoring from co-located Probation Officers for all Offender Supervisors through the completion of Offender Management in Custody (OMiC) training package.</p> <p>Bi-monthly supervision sessions will be introduced for prison officer OS staff with the SPO producing equity of QA with probation officer OS colleagues.</p> <p>The activity hours of prison officer OS staff will be monitored by OMU management and this will be presented, appraised and discussed at bilateral meetings with the Deputy Governor. Where possible actions will be taken to reduce or prevent prison officer OS staff being redeployed and preventing them from carrying out their duties.</p> <p>HMP Durham will provide sufficient staffing to meet the effective demands and quality delivery of case management of prisoners under the OMiC model.</p>	<p>Governor</p> <p>Directorate of Safety and Rehabilitation</p> <p>Governor</p> <p>Governor</p> <p>Governor</p>	<p>October 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>Completed</p>
	<b>Public protection</b>				
5.51	MAPPA management levels should be confirmed with the community-based offender manager at least six months to release. (4.25)	Agreed	<p>Case administrators in OMU will contact community Offender Managers (OM) to confirm prisoners MAPPA levels 6 months prior to release. On confirmation case administrators will update the prisoner's record on the National Offender Management Information System (NOMIS), send a notification to the Inter Departmental Risk Management Team (IDRMT) meeting and confirm the response on a tracker system.</p> <p>The Head of Offender Management will complete a monthly check of the OMU tracker to ensure MAPPA levels are being requested and updated 6 months before discharge. This will be discussed at bilateral meetings with the Deputy Governor.</p>	<p>Governor</p> <p>Governor</p>	<p>May 2019</p> <p>May 2019</p>



5.52	The IDRMT should review all high and very high risk of harm cases prior to release to ensure appropriate action and restrictions are in place. (4.25)	Agreed	<p>The Terms of Reference (ToR) and standing agenda items including data analysis and reports presented to the IDRMT will be updated to ensure they include a review of all high and very high risk of harm cases before release.</p> <p>Head of Security or their representative will be added to the IDRMT meeting as a mandatory member and will fully engage and contribute to the meeting.</p> <p>The Head of OMU will undertake a monthly check of the OMU tracker identifying high and very high risk of harm prisoner cases who are within 7 months of release date. This information will be submitted to the Public Protection Unit (PPU) based at HMPPS HQ, 1 month prior to the next IDRMT meeting when these cases and the arrangements for their release will be fully considered by the IDRMT meeting.</p> <p>HMP Durham will Invite relevant prisoner community Offender Managers (OM) to attend or join by teleconference the IDRMT pre-release conference for cases where prisoners for whom they are responsible on release are being discussed.</p>	Governor	May 2019
	<b>Categorisation and transfers</b>				
5.53	Prisoners, especially those assessed as presenting a high risk of harm, should be moved to an appropriate prison promptly enough for them to access appropriate offending behaviour interventions. (4.30)	Partly Agreed	<p>This recommendation is partly accepted as whilst HMP Durham will fulfil all available opportunities to transfer high risk prisoners requiring offending behaviour programmes to appropriate prisons this is often dependent upon prison and course places being allocated and available and prisoners being accepted. These matters are not always within the full control of Durham prison. Whilst retained in the establishment we will continue to allocate these prisoners to available work placements and to expedite their transfers at the earliest opportunities.</p> <p>HMP Durham will undergo a thorough risk assessment for each offender retained at the prison for their suitability to undertake key employment roles, where possible these roles will be allocated to those presenting low risk of harm and not requiring offending behaviour interventions.</p>	Governor	June 2019
	<b>Interventions</b>				



5.54	Short interventions such as in-cell work or one-to-one modules should be provided to address the offending behaviour of prisoners remaining at Durham for extended periods. (4.37, repeated recommendation 4.46)	Agreed	All prisoners who have been at HMP Durham for over 6 Months will be given access to one to one modular work according to risk and need to address the specific aspects of their offending behaviour. These will be in the form of resource packs.	Governor	September 2019
			All OS staff will be provided with time to familiarise themselves with the content of the resource packs for one to one prisoner interventions and their implementation which will be supported through development sessions with National Probation service (NPS) and partner agencies.	Governor	October 2019
			A review of the packs, content and desired aims and outcomes will be undertaken by the regional psychology team prior to proposed introduction to ensure they are fit for purpose.	Governor	May 2019
			An agreed criterion will be developed to identify prisoners and their suitability to be offered short term interventions due to their extended period at HMP Durham.	Governor	August 2019
<b>Release planning</b>					
5.55	Quality assurance of resettlement provision should be developed in conjunction with the Northumbria and Durham Tees Valley community rehabilitation companies to ensure consistency and effectiveness of service provision. Data on the outcomes should be monitored to evaluate the provision. (4.42, repeated recommendation 4.29)	Agreed	HMP Durham currently has a tripartite approach in place with the two CRC's Durham Tees Valley (DTV) the lead host and Northumbria. There are strong working relationships in place between the prison and the CRCs. CRC's are working towards sharing internal Quality assurance (QA) Frameworks, Outcomes and Performance Monitoring which gathers relevant information, with the Prison. This joint approach ensures consistency and monitors effectiveness as well as encouraging additional approaches if any gaps are identified. All parties are working together currently on the implementation of Enhanced Through the Gate Services, and Monitoring of Outcomes is being discussed as part of this.	Directorate of Community Interventions Governor	September 2019
			The Basic Custody Screening Tool (BCST) data will be used to identify areas of need on release and this data will be employed to inform and shape the delivery of services.	Governor	May 2019
			Partnership meetings will continue to enable delivery and findings and outcomes will be used to form further improvements.	Governor	Complete & Ongoing



		Local Governance of CRC contracts and assurance processes will form part of Service Improvement Group meetings.	Governor	June 2019
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Recommendations	
Agreed	45
Partly Agreed	9
Not Agreed	1
<b>Total</b>	<b>55</b>

