



HM Prison &  
Probation Service

Action Plan: HMP Lowdham Grange

Action Plan Submitted: 8 March 2019

A Response to the HMIP Inspection: August 2018

Report Published: 8 January 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.



## ACTION PLAN: HMCIP REPORT

## ESTABLISHMENT: HMP Lowdham Grange

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	<b>Main recommendations</b>				
	<b>To the governor</b>				
5.1	The number of violent incidents should be reduced. The prison should engage with prisoners and other stakeholders to further their understanding of the causes of violence and to implement bespoke strategies to address them. (S36)	Agreed	<p>HMP Lowdham Grange will aim to reduce the number of violent incidents by conducting a full review of the strategic vision and develop a 2019 violence strategy.</p> <p>Focus groups will be facilitated with prisoners and stakeholders to increase input into this strategy. The new strategy will include;</p> <ul style="list-style-type: none"> <li>• The Challenge, Support and Intervention plan (CSIP) will enable individuals to be case managed to address their violent behaviour.</li> <li>• The Safety Diagnostic Tool (SDT) is another tool that is used to identify themes and trends as part of violence management and reduction.</li> <li>• The further development of the Social Responsibility Unit.</li> <li>• The development of a strategy in partnership with Remedi (Restorative Justice Charity) to work with prisoners around debt management and involvement in the illicit economy.</li> </ul>	Director	August 2019



			<ul style="list-style-type: none"> <li>The full implementation of the Key Worker scheme</li> </ul> <p>A local analysis of data will take place and will be reviewed in an action plan at the monthly Safer Prisons meeting and at a weekly intervention meeting (WIM) to continually improve the strategic vision. This will include a focus on reduction, monitoring effectiveness, considering trends analysis and incorporate feedback from key stakeholders, prisoners and staff.</p>		August 2019
5.2	The prison should reduce the number of uses of force. All incidents involving force should be justified and de-escalated as soon as possible. (S37)	Agreed	<p>The establishment will aim to reduce incidents of use of force by improved control and restraint (C&amp;R) governance and advice. Guidance will be issued to any staff where there are concerns in respect of techniques used.</p> <p>The Independent Monitoring Board (IMB) will be invited to attend weekly control and restraint footage scrutiny meetings. This will include the examination of control and restraint footage to ensure appropriateness.</p> <p>The requirements in relation to detail and quality of C&amp;R paperwork will be reiterated on the annual refresher training, and at the Use of Force meeting. At least 10% of the completed paperwork will be quality assured and compared to the footage, in addition to the quality checks conducted by the C&amp;R coordinator. Planned use of force will be recorded using a hand held video camera on all occasions.</p>	Director	<p>August 2019</p> <p>August 2019</p> <p>May 2019</p>



<p>5.3</p>	<p>The level of self-harm should be reduced. ACCT documentation should be completed to a high standard. Prisoners should be represented at key safer custody meetings. All serious incidents of self-harm and near misses should be thoroughly investigated and lessons learnt disseminated to staff. (S38)</p>	<p>Agreed</p>	<p>To reduce levels of self-harm HMP Lowdham Grange, in liaison with Nottinghamshire NHS Foundation Trust, a joint Mental Health/Safeguarding strategy will be developed which will coordinate our approach to dealing with problematic and vulnerable individuals experiencing self-harm crisis.</p> <p>HMP Lowdham Grange will implement a near miss process to investigate any serious act of self-harm that requires hospital treatment or follows a number of prolific self-harm attempts. These forms will be reviewed at the monthly Safer Prisons meeting to review lessons learnt and analysis any trends.</p> <p>Prisoner representatives, key stakeholders and local charities will be invited to the monthly Safer Custody meeting to allow them to be involved in the strategic vision to reduce self-harm in custody at Lowdham Grange.</p> <p>A training plan has been devised to ensure that custodial staff are trained in suicide and self-harm, and the appropriate completion of related documentation. This also incorporates all Case Managers being refresher trained by HMPPS where available training can be sourced.</p> <p>Weekly quality assurance checks will be implemented at Senior Manager level to ensure that Assessment, Care in Custody Teamwork documentation (ACCT) is checked and monitored. This will be discussed at the operational morning briefing and a monthly Safer Custody document</p>	<p>Director/ Nottinghamshire NHS Foundation Trust</p>	<p>September 2019</p> <p>September 2019</p> <p>September 2019</p> <p>September 2019</p>
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			will be shared with all staff grades. This will include lessons learnt and good practice.		
5.4	Prisoners should be able to see health professionals easily and in a timely manner. (S39)	Agreed	Access to the healthcare appointments is via the electronic ATM's on each wing (electronic machines used to make appointments). Urgent Wing Triage is available on a daily basis. Extended waiting lists have been successfully managed by increasing the number of sessions and daily a review of the current waiting list with signposting to the most appropriate professionals. Emergency appointments are available for each day the GP is in the establishment.	Nottinghamshire NHS Foundation Trust	Completed
5.5	Prison and education managers should implement robust quality improvement measures, performance management processes and a programme of staff development to raise the quality of the education, skills and work provision. (S40)	Agreed	<p>The establishment will hold a Quality Improvement Group (QIG). The QIG will be held on a monthly basis and will have documented terms of reference. Terms of reference in relation to attendance will be reviewed and attendance monitored.</p> <p>Assurances discussed at the QIG will include findings from Observations, One to Ones and Student Feedback. Education managers will also ensure that best practice meetings are held monthly. The findings from best practice meetings will also be fed back at the QIG meeting. These will look at various topics such as Individual Learning Plan (ILP) content, classroom design and student forums. This will ensure tutors are updating ILPs with individual successes and students are getting the feedback individually from their tutor.</p> <p>Poor performing tutors will be observed by the education managers quarterly and action plans will be designed</p>	Director	<p>August 2019</p> <p>August 2019</p> <p>August 2019</p>



			<p>around the individual's needs. The actions will form part of their Personal Development Review (PDR). If improvement does not come from the managers extra support the capability process for the individuals will trigger. This process has a three tiered approach which includes line managers, Head of Learning &amp; Skills and the Deputy Director. The Deputy Director will have the final say on potential outcomes at the stage three meeting taking into account all the evidence.</p> <p>Staff development requirements will come from observation findings and manager discussions. A plan for 2019 will be developed for each tutor on the opening of the 2019 PDR. This will include target dates which will allow the individual to have ownership of their development.</p>		
5.6	Managers should formulate and implement a strategy which ensures that all departments work together to reduce risk and encourage progression. (S41)	Agreed	<p>The Manage the Custodial Sentence (MTCS) Framework outlines that under the Offender Management in Custody (OMiC) model, custodial sentences are co-ordinated and prisoners are helped to progress throughout the sentence.</p> <p>The MCTS Framework underpinning OMiC outlines all prisoners who are in scope of Offender Assessment System (OASys) must be provided the opportunity to participate in their sentence planning.</p> <p>The implementation of key workers will provide all prisoners with a dedicated member of staff. Training will</p>	Director	<p>September 2019</p> <p>September 2019</p>



			<p>be provided for key workers to signpost opportunities to meet sentence plan objectives.</p> <p>HMP Lowdham Grange will publish and deliver a strategy which is aligned to OMiC implementation, with explicit terms of reference and processes to demonstrate collaboration across the establishment. This will include the passage of security information to the Offender Management Unit to ensure collaborative working.</p>		September 2019
	Recommendations				
	Early days in custody				
5.7	Prisoners should be given comfort breaks at least every two and a half hours on journeys to and from the establishment. (1.14, repeated recommendation 1.5)	Agreed	<p>The contractors are required to schedule comfort breaks into journeys every two and a half hours. The Person Escort Record (PER) must be noted when comfort stops are offered and also if declined by the prisoner. Prison Escort Contracts (PECS) Contract Delivery Managers conduct regular checks of PERs, including monitoring for the provision of comfort stops. Where these have not been offered and recorded on the PER, Contract Delivery Managers will challenge the Escort Contractor directly. Any problem trends would be challenged at the Monthly Contractor's Operational Meeting.</p>	Executive Director Custodial Contracted Services	Completed and ongoing
5.8	Subject to evidence of security considerations,	Agreed	<p>The Security department will send a letter to prisoners prior to the day of transfer to enable them to contact their</p>	Director	April 2019





	prisoners should be given enough notice of planned transfers to be able to inform their family. (1.15, repeated recommendation 1.6)		families. The only exception to this will be prisoners who are being transferred due to matters of security.		
5.9	Reception holding cells should contain reading materials, televisions or similar activities to occupy new arrivals. (1.16, repeated recommendation 1.15)	Agreed	Magazines and reading materials will be made available in Reception for new arrivals.  Media/monitors will be installed in holding cells to occupy new arrivals.	Director	March 2019  April 2019
5.10	First night safety interviews should always be completed in private and wherever possible on the day of arrival. (1.17)	Agreed	A room will be made available to facilitate a first night safety interview in private, and wherever possible this will be conducted on the day of arrival. A monthly sample check of at least 10% of first night safety interviews will be conducted.  A notice to colleagues will be issued to remind them of the requirement to conduct these privately and confidentially.  The prison will implement a system to ensure that prisoners who arrive outside of the normal operating hours will have a basic screen to ensure safety for the night, with a meeting held at the earliest opportunity the following morning.	Director	March 2019  March 2019  March 2019



	Managing behaviour				
5.11	Perpetrators should be challenged and victims supported through concern files that contain meaningful and individualised targets. (1.24)	Agreed	<p>The establishment will implement CSIP which will be included in the revised Violence Reduction strategy 2019. This will enable individuals to be case managed to address their violent behaviour.</p> <p>Concerns files will remain in place to monitor and support low level violence and antisocial behaviour that does not require individualised case management. These will be discussed at the Security Intervention Meeting (SIM). This process will ensure that those who are at heightened risk of being a victim of a violent incident are also supported.</p>	Director	October 2019
5.12	A senior manager should regularly quality assure adjudication records and processes. The number of adjudications dismissed because of procedural or administrative errors or the transfer of prisoners should be reduced. Adjudicators should thoroughly explore the evidence before	Agreed	<p>The monthly Adjudication Standardisation Meeting will be reviewed and an action plan will be developed to improve the quality of adjudications. On a monthly basis a senior manager will complete a quality assurance process on at least 5% of adjudication records and processes.</p> <p>HMP Lowdham Grange will implement a standalone Adjudication Liaison Officer post. This will ensure that there is consistency and a robust administration process in place.</p> <p>A quality assurance check list will be devised, and an active learning group will be implemented to test that evidence has been thoroughly explored.</p>	Director	<p>April 2019</p> <p>April 2019</p> <p>April 2019</p>



	finding a prisoner guilty. (1.27)				
5.13	The adjudication holding rooms should be clean and free of graffiti and with a screened toilet. (1.28)	Agreed	A system will be implemented where a daily fabric check will be conducted after every adjudication session to ensure holding rooms are clean and graffiti free. The toilet area in holding rooms will also be screened.	Director	March 2019
	Use of force				
5.14	Planned use of force should be video recorded and body-worn cameras routinely turned on during spontaneous incidents. (1.34)	Agreed	<p>Planned use of force will be recorded using a hand held video camera on all occasions and supervisors will be issued with guidance sheet to outline the expectations in respect of planned interventions. This will be quality assured at the monthly Control and Restraint scrutiny panel, chaired by the Director and Deputy.</p> <p>The requirement to activate Body Worn Video Cameras (BWVC) will be taken forward by staff briefings, reminders by the Main Control Room staff to activate BWVC to first response staff and the Control and Restraint Coordinator challenging Prison Custody Officers (PCOs) who do not collect BWVC on entry to the prison.</p>	Director	<p>June 2019</p> <p>June 2019</p>
5.15	Special accommodation should only be used in very exceptional circumstances and never for punishment. (1.35)	Agreed	HMP Lowdham Grange will develop briefing notes for Duty Directors in respect of the appropriate use of special accommodation. This will include the requirement for authority to be gained from the Director or Deputy Director if practical. Should it not be practical then ongoing authority should be gained at the earliest possible opportunity. All written justifications for special	Director	April 2019



			accommodation use will be countersigned by the Director or Deputy.		
	Segregation				
5.16	Prisoners on an ACCT should only be segregated in exceptional circumstances and these should be well documented. Protective measures should be put in place to support segregated prisoners in crisis. (1.45)	Agreed	<p>A training package will be delivered to the Senior Management Team in relation to Defensible Decision making when the need to locate a prisoner on Open ACCT in segregation conditions arises. A revised template for the recording of defensible decisions will be formulated and implemented.</p> <p>Each prisoner on ACCT will be subject to an assessment around which protective measures can be implemented to support their period of segregation.</p> <p>A system will be implemented where ACCT documents will be the subject of a Senior Management quality check every month.</p>	Director	<p>May 2019</p> <p>June 2019</p> <p>June 2019</p>
5.17	Segregated prisoners confined to their own cells should receive all their daily entitlements, including mandatory visits from managers and health care staff. (1.46)	Agreed	The management of prisoners segregated in their own cells will be changed so that they are the responsibility of the segregation unit team who will implement a system to ensure that all mandatory entitlements and visits are conducted in line with the Prison Service Order (PSO). The regime will be of a comparable standard to those segregated in the Reintegration Unit.	Director	April 2019
5.18	The showers in the segregation unit	Agreed	A refurbishment of the showers within the segregation unit will be undertaken to ensure they are well maintained.	Director	October 2019



	should be refurbished and well maintained. Cell toilets should be clean. Segregated prisoners should have access to in-cell work and a gym. (1.47)		<p>The toilets will be cleaned and a system will be implemented to deep clean them every six months.</p> <p>Appropriate risk assessed work will be sourced and issued to prisoners in segregation to ensure a purposeful regime.</p> <p>Gym equipment will also be made available to those in segregation.</p> <p>Those prisoners on a reintegration plan may, if risk assessed suitable to do so, access activity off the unit.</p>		<p>March 2019</p> <p>March 2019</p> <p>July 2019</p> <p>March 2019</p>
5.19	There should be effective governance and oversight of the segregation unit. Good order or discipline reviews should be multidisciplinary, address prisoners' needs and assist their reintegration into the prison. (1.48)	Agreed	The Head of Residential Safety will review attendance to Rule 45 reviews within the segregation unit to ensure improved attendance at reviews. All prisoners will be provided with an individual care/reintegration plan which will be reviewed weekly at the Reintegration Meeting. The segregation reviews will be chaired by an assistant director on a rota basis to ensure compliance with the relevant Prison Service Orders.	Director	July 2019
	Security				
5.20	Security intelligence should be shared	Agreed	Security intelligence will be shared with staff via a television display in the gate area. In addition to this, a	Director	March 2019



	effectively to enable all departments to meet their objectives and goals. (1.59)		security intelligence report will be presented at the daily operations meeting and the minutes of this meeting will be published to staff on the intranet.		
5.21	Actions should be carried out promptly following the receipt of intelligence reports, including suspicion drug testing. (1.60)	Agreed	A review will be carried out around the allocation of resources to allow additional staff to be available in the Security department to action the intelligence objectives promptly. These resources will be available following a re-profiling exercise in 2019.	Director	August 2019
5.22	Security arrangements, including strip-searching on escorts and closed visits, should only be imposed when supported by intelligence. Restrictions should be lifted if they are no longer supported by intelligence. (1.61)	Partly agreed	<p>The decommissioning of full searching prior to prisoners going out on external escorts is not accepted by the establishment. The nature of the long term, high risk population within the establishment requires a security arrangement to ensure that prisoners do not have any items upon their person that can be used to aid escape or have contraband which may undermine the security of the establishment or escort. Prison Service Instruction (PSI) 07/2016 outlines that there are circumstances in which prisoners are required to be routinely full-searched as a matter of routine. Prisoners on closed visits are not full searched, rather a level b rub-down search is conducted both in and out of their closed visit.</p> <p>The closed visits policy will be reviewed to ensure that prisoners will not be placed on closed visits routinely if found with contraband. Prisoners will only be placed on closed visits if intelligence supports that they have received items or are suspected of attempting to receive items through visits.</p>	Director	



					April 2019
	Safeguarding				
5.23	All staff should be able to easily identify which prisoners are buddies. (1.74)	Agreed	A system will be implemented where buddies will be easily identifiable and they will be issued a uniform. Buddies will be located in cells that are clearly labelled and this will be advertised in all residential areas.	Director	April 2019
	Staff-prisoner relationships				
5.24	Relationships between staff and prisoners should be fair and courteous. All staff should be confident in challenging poor behaviour. (2.5)	Agreed	<p>An improvement project will be delivered called 'Creating a positive custodial culture'. As part of this work the project will deliver two sessions of training to all front line staff around appropriate behaviour, standards and how to support colleagues in challenging poor behaviour from prisoners.</p> <p>All front line PCO staff will receive 'Five Minute Intervention training' as part of the OMiC roll out. This will equip staff with the skills they require to manage the challenging population in an appropriately fair and courteous way.</p>	Director	<p>July 2019</p> <p>April 2019</p>
	Daily life				
5.25	Residential units should be deep cleaned and redecorated. (2.14)	Agreed	<p>Funding has been sourced to enable a redecoration programme to be implemented for all residential areas. This will be completed by April 2019.</p> <p>A programme of in cell decoration will be implemented utilising a prisoner work force.</p>	Director	<p>April 2019</p> <p>April 2019</p>



			A contractor will be commissioned to deep clean all food servery areas and communal showers.		July 2019
5.26	Cells designated for single occupancy should not accommodate two prisoners. (2.15)	Not agreed	<p>HMPPS recognises the concerns raised in relation to crowding at HMP Lowdham Grange. While these places meet HMPPS standards for crowded accommodation, holding two men in a single cell in order to accommodate national population pressures is not desirable.</p> <p>The wider problem of crowding in prisons is a longstanding national issue that can only be addressed through sustained additional investment in the estate over the long term. Crowding is the result of population levels that exceed the system's total certified normal accommodation (CNA). Holding two prisoners in a single cell is facilitated to accommodate national population pressures and although this does not breach HMPPS standards for crowded accommodation, it is not a desirable practice.</p> <p>HMPPS's strategy for reducing prison crowding entails the incremental replacement, as resources allow, of older, crowded prisons with new accommodation that is safe, decent, and uncrowded. As plans to transform the prison estate gather pace and more new prisons are delivered while existing crowded unsuitable capacity is closed, a steady reduction in crowding is achievable.</p> <p>The facility to accommodate two prisoners in a cell designed for one is stipulated in the prisons operating contract between HMPPS and Serco. This is a contractual requirement for the operator to deliver and therefore it is not possible to fully agree this recommendation.</p>	Prison Estate Transformation Programme (PETP)	





5.27	All prisoners should have kettles and televisions subject to disciplinary considerations. (2.16)	Agreed	A working group will be formed to provide a central store for all prisoner items such as kettles, telephones and televisions. This will enable stock control, appropriate purchasing and enable any items required after weekly cell decency checks have been completed to be available.	Director	May 2019
5.28	In-cell emergency call bells should be responded to within five minutes. (2.17, repeated recommendation 2.9)	Agreed	HMP Lowdham Grange will endeavour to normally meet a five minute response time to cell bells.	Director	March 2019
5.29	Prisoners serving food on the wings should wear proper clothing. (2.25)	Agreed	All wing servery workers are required to wear protective clothing during the serving of meals. This requirement will be enforced by staff supervising the serving of meals and this will be subject to a weekly assurance check by the Custodial Operations Manager.	Director	May 2019
5.30	Prisoners should receive timely responses to their applications which address the issues raised. (2.37)	Agreed	A new application distribution will be developed that will ensure applications are responded to in a timely manner. Functional heads will quality check 10% of responses to ensure these address the issues raised and highlight best practice.	Director	July 2019
5.31	Managers should thoroughly investigate complaints about staff and interview	Agreed	HMP Lowdham Grange will ensure that complaints about staff will be sent to the next management grade up for a response.	Director	March 2019



	the complainant. Complaint responses should fully answer the issues raised. (2.38)		Guidance will be developed and sent with the complaint instructing the responder to interview the complainant and give a full response to the issues raised.		May 2019
5.32	Legal correspondence should only be opened in the prisoner's presence. (2.39, repeated recommendation 2.10)	Agreed	HMP Lowdham Grange will review the process to ensure that Legal correspondence is only opened in a prisoner's presence, with the exception of mail authorised to be opened by a Director.	Director	March 2019
	Equality, diversity and faith				
5.33	Consultation with men in all protected characteristic groups should be effective. Managers responsible for equality work should routinely attend diversity and equality action team meetings. (2.47)	Agreed	<p>All responsible managers will have an objective to consult with prisoners on their protective characteristics strand included in their Performance Development Review. Effectiveness will be monitored in the Diversity Equality Action Team (DEAT) meeting.</p> <p>The terms of reference in relation to attendance at the DEAT meeting will be reviewed to ensure a full attendance. Manager's attendance will also be monitored within the DEAT meeting terms of reference.</p>	Director	<p>April 2019</p> <p>April 2019</p>



5.34	Equality monitoring data should be analysed promptly and data of concern should be investigated without delay. The outcome of analysis and investigations should be shared with prisoners. (2.48)	Agreed	The monitoring of equality data will be reviewed at least monthly at the DEAT meeting or when a concern is raised if this is sooner than the monthly meeting. Outcomes will be shared with prisoners at the DEAT meeting and more generally with newsletter.	Director	June 2019
5.35	Prisoners' protected characteristics should be systematically identified on arrival. (2.59)	Agreed	The establishment will review the process and barriers around identifying and recording protected characteristics upon arrival. Once a review has been conducted and recommendations implemented, an independent party will be invited to test the new procedures and offer feedback around appropriateness of environment and sensitivity of the new procedures.	Director	September 2019
5.36	The negative perceptions of black and minority ethnic and Muslim prisoners should be investigated and addressed. (2.60)	Agreed	The establishment will develop focus groups of black and minority ethnic and Muslim prisoners which will be led through the DEAT meetings involving the equality representatives. These groups will enable the establishment to explore the negative perceptions and develop an action plan to address these perceptions. Oversight of the action plan will be by the Director.	Director	June 2019



5.37	Professional telephone interpreting and translated materials should be used to communicate with prisoners who do not speak English. (2.61)	Agreed	The establishment has access to Big Word a telephone translating service. The use of this will be publicised to staff with reminders being placed in key areas such as Reception, the First Night wing and the adjudication room.	Director	May 2019
	Health, well-being and social care				
5.38	Information sharing and storage should comply with professional standards and current legislation. (2.77)	Agreed	<p>The clinical records are in SystmOne and therefore electronic. They are audited annually to ensure adherence to professional standards and current legislation.</p> <p>The ATM messages are accessed via biometric control and are therefore confidential to the individual patient. The software system that supports the ATM's is the Prison owned Custodial Management System. This has historically been provided by the prison as the method of communication with individual prisoners on a variety of prison issues. Healthcare will review with the patients and the prison the type of information that is provided via this method to promote confidentiality and ensure that Governance is in place to support this.</p>	Nottinghamshire NHS Foundation Trust	March 2019
5.39	Temperatures in all clinical areas should be below 25 degrees. (2.78)	Partly agreed	This recommendation is partly agreed as NHS England's understanding is that non refrigerated medications are unlikely to be affected if the temperature of 25 oC is exceeded for a short period of time. In addition, there are no maximum temperature requirements pertaining to the overall clinic space outside that of medicine management.	NHS England /Nottinghamshire NHS Foundation Trust /HMPPS	



			NHS England will however work closely with the estate to ensure HMPPS deliver improvements to the overall healthcare suite, recognising that the overall temperature and the environment of the clinic space remains the responsibility of the prison estate.		December 2019
5.40	The waiting area in health care should be urgently refurbished. (2.79, repeated recommendation 2.63)	Agreed	A healthcare centre improvement project will be commissioned to deliver improvements to the waiting areas including; <ul style="list-style-type: none"> <li>- Fixed seating</li> <li>- Additional waiting room to be facilitated</li> <li>- Information screen to be installed</li> <li>- Regular painting regime to be introduced</li> </ul>	Director	August 2019
5.41	There should be an overarching health promotion strategy which informs practice. (2.83)	Agreed	A Band 4 Health & Wellbeing Practitioner has recently joined HMP Lowdham Grange. Once fully operational they will develop and deliver health promotion by targeting patients and aligning delivery to national campaigns.  An Involvement/Engagement Champion seeks the views of prisoners and conducts co-production of activity with patient representatives at the monthly Healthcare Forum.	Nottinghamshire NHS Foundation Trust	April 2019
5.42	The health care facilities and staffing model should reflect patient need and	Partly agreed	This recommendation is partly agreed as Health Needs Analysis findings have been reflected upon and a Business Case submitted to regional NHSE for additional staffing to reflect the current population needs.	Nottinghamshire NHS Foundation Trust	December 2019



	service delivery. (2.88)		<p>Agreement of financial allocation for additional funds nationally is required before business cases can be agreed in their entirety.</p> <p>Changes to the Healthcare department have been highlighted to the Prison and NHSE. The Pharmacy will be relocated to allow for the creation of more clinical rooms in the healthcare building to aid service delivery.</p>	Director	October 2019
5.43	All prisoners with social care needs should be identified, referred and assessed, and receive the required support promptly, within a robust governance framework. (2.90)	Agreed	<p>A new Social Care Practitioner is in post with Nottinghamshire County Council (Social Care Provider) who will develop closer partnership working and ensure timely assessment and interventions are provided for patients in need of social care.</p> <p>Healthcare will continue to invite Nottinghamshire County Council to regular meetings to discuss the social care pathway and specific patients. The fulfilment of the social care assessment will be implemented by April 2019.</p>	Nottingham County Council/ Nottinghamshire NHS Foundation Trust	April 2019
5.44	Patients should have timely access to psychology and counselling services. (2.97)	Agreed	In September 2018 the waiting times for NHS Clinical Psychology were 17.6 weeks on average and waiting times are currently within the 18 weeks acceptable national standard. Monthly monitoring is completed by the NHS Clinical Psychologist to ensure they are within the acceptable target times.	Nottinghamshire NHS Foundation Trust	Completed and ongoing
5.45	Transfers to hospital under the Mental Health Act should take place within	Partly agreed	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,		



	Department of Health transfer target timescales. (2.98)		<p>administrative processes within the National Health Service (NHS), and the availability of accommodation in the mental health estate.</p> <p>NHS England (NHSE) has developed a plan to improve services for prisoners with mental health issues, and includes specific reference to timely transfer and remission of patients and information about how this will be implemented and sustained. The Prison Transfer and Remission Guidance published by the Department of Health in 2011 has not been agreed by NHS England (NHSE). NHSE will be consulting on refreshed guidance in relation to transfer and remissions with timescales that consider clinical urgency and need.</p> <p>Locally, Nottinghamshire Healthcare NHS Foundation Trust reports monthly on all patients waiting for transfer. Cases that require escalation are then reviewed through regular interface between NHSE Commissioners and Specialised Commissioning.</p>	National Director NHSE	2019-2020
5.46	Medicines should be collected from the community and stored on the wings safely and securely. (2.115)	Agreed	<p>Nottinghamshire Healthcare NHS Foundation Trust accept this action insofar that it can work with a third party supplier to agree delivery processes as a local measure.</p> <p>Collection of medication complies with standards comparable to the community. The transportation of them through the prison is during lock down. The medication deliveries are now received in the Gatehouse and transferred to staff via the gate lock. Controlled drug deliveries are escorted through the establishment.</p>	Head of Healthcare / NHSE Commissioning Manager	Completed
				Nottinghamshire NHS Foundation Trust	Completed



			<p>Healthcare have reviewed the security elements and new key safes have been ordered for Pharmacy and Dental rooms to ensure that only authorised staff can access the keys.</p> <p>The medications are stored safely on the Houseblock in locked cupboards but the dispensing rooms on the wings require grill gates fitting. Funding has been agreed for this and grill gates will be fitted by September 2019.</p>	Director	<p>Completed</p> <p>September 2019</p>
5.47	Patients should be able to discuss their medicines with a pharmacist. (2.116)	Agreed	Patients can request information via the ATM. The plan is to introduce Pharmacy clinics for patients to have a face to face medicines review by the Pharmacist. This will be completed by November 2019 in line with the relocation of the pharmacy as currently face to face medication reviews are restricted by availability of rooms.	Nottinghamshire NHS Foundation Trust	November 2019
5.48	Patients should receive all their medication, including in-possession medication, promptly without any gaps in treatment. (2.117)	Agreed	<p>Nottinghamshire Healthcare NHS Foundation Trust accept this action insofar as it can work with third party suppliers to provide ordered medications and some being available for example, increasing medications are delayed due to unavailability in the current national medicines provisions.</p> <p>New and changed prescriptions involving non stock items are requested from an external supplier who provides a delivery service by the next working day, or by 11am on a Saturday for all medications except where issues have been identified specific to the availability of the prescribed medications.</p>	Nottinghamshire NHS Foundation Trust	





			<p>Out of hours and critical medications are sourced from neighbouring establishments or pharmacies, with the Out of Hours GP service able to provide new/changed prescriptions if required. Transferred in patients should be arriving with 7 days' supply of their medication – and although this is not directly controllable – medications and prescriptions are actively chased.</p> <p>Healthcare pharmacy will audit the next working day contracted expectation from the provider to ensure timely receipt and the frequency in which access to critical medicines outside of hours is required.</p>		March 2019
5.49	Stock reconciliation procedures should apply for all pharmacy stocks and medication should be stored at the appropriate temperature. (2.118)	Agreed	<p>The main pharmacy stock management local operating procedure is being implemented – with improved labelling for medications affected by temperature with revised expiry dates. Daily fridge temperatures audits are also carried out.</p> <p>The issue regarding the temperature of the Pharmacy room has been raised with the Prison and will be addressed as part of the Pharmacy relocation.</p>	<p>Nottinghamshire NHS Foundation Trust</p> <p>Nottinghamshire NHS Foundation Trust/ Director</p>	<p>March 2019</p> <p>November 2019</p>
5.50	Pharmacy policies and procedures should be updated and governance meetings should be held regularly. (2.119)	Agreed	There is a local Drugs & Therapeutics (D&T) meeting held in the prison every 2 months with stakeholders invited. Assurance from the local D&T meeting is then fed into the Offender Health D&T meeting which reports into the Trust's Medicines Optimisation Group thus demonstrating a full governance framework is in place.	Nottinghamshire NHS Foundation Trust	Completed
5.51	Waiting times for routine dental services should be comparable to those	Agreed	Dental waiting times at HMP Lowdham Grange are already within the Community agreed NHS timeframes of 48 hours for an urgent referral and 6 weeks for a routine appointment.	Nottinghamshire NHS Foundation Trust	Completed



	in the community. (2.123)				
	Time out of cell				
5.52	The library should organise activities to promote literacy. (3.13)	Agreed	The library activity calendar will be implemented with monthly activities organised that promote and incorporate literacy skills.	Director	March 2019
5.53	Data on library and gym use should be analysed and acted on to ensure equitable access for all prisoners. (3.14)	Agreed	Data on library and gym use will be collected and analysed using the short term monitoring tool and included as an agenda item in the Senior Management Team and Equality meetings.	Director	July 2019
5.54	Urgent refurbishment of recreational gym facilities and equipment should be carried out, and they should be maintained in a good and safe condition. (3.15)	Agreed	Asset renewal has been approved to allow the gym to be redecorated throughout. The flooring and equipment will be replaced in all three training rooms giving it a fresh new professional look.	Director	May 2019
	Education, skills and work activities				
5.55	Prison leaders should provide sufficient and stimulating education and work activity to meet the needs of all prisoners. Prisoners	Agreed	The establishment will complete two Needs Analysis questionnaires per year. These will be distributed in December and June to the population to identify the needs of prisoners. Industry recognised qualifications will be sourced dependent on the needs of the	Director	September 2019



	should be able to obtain industry-recognised qualifications in the workplace. (3.28)		establishment's population. This information will be derived from the Needs Analysis findings.		
5.56	The education provision should be staffed adequately, with appropriately qualified trainers and teachers. (3.29)	Agreed	<p>The Senior Management Team will ring fence the cross deployment of education PCO trained tutors/instructors to ensure adequate staffing to education provision.</p> <p>The establishment will endeavour to recruit qualified specialist tutors and Instructors in a timely manner, minimising the disruption vacancies cause to the curriculum.</p>	Director	<p>March 2019</p> <p>July 2019</p>
5.57	Pay rates should not deter prisoners from attending education. (3.30, repeated recommendation 3.10)	Agreed	<p>The Senior Management team will review prisoner wages to ensure that pay does not deter prisoners from attending education and achieving qualifications.</p> <p>The establishment will also incorporate a split working week into the regime. This will enable learners to complete their existing course whilst attending their new job role and being paid at their new rate of pay (day release).</p>	Director	<p>June 2019</p> <p>June 2019</p>
5.58	Prison and education managers should implement effective recording and monitoring	Agreed	The education department will oversee individuals' progress with retention and achievement records. Tutors will document constructive conversations with learners to highlight slow progress and offer extra support. This will be documented on the Individual Learning Plans.	Director	June 2019



	arrangements to identify the progress and achievements of all prisoners and to improve progress rapidly when necessary. (3.31)		The education management team will oversee the quality assurance process in the department through the monthly Quality Improvement Group (QIG) meeting. The assurances discussed at the QIG will include findings from Observations, One to Ones and Student Feedback. Education managers will also ensure that best practice meetings are held monthly. The findings from best practice meetings will also be feedback at the QIG meeting. These will look at various topics such as Individual Learning Plan (ILP) content, classroom design and student forums. This will ensure tutors are updating ILPs with individual successes and students are getting the feedback individually from their tutor		
5.59	Trainers and teachers should use prisoners' starting points to plan teaching and learning activities effectively. Learning and development targets should be specific and meaningful enough to help the prisoner progress. (3.42)	Agreed	<p>The education department will review the induction process to ensure a more detailed finding of student information. The quality assurance process will check all learners have a quality ILP. All goals set on the ILP will be realistic and achievable at the learners learning level. Findings will be discussed at the monthly QIG meeting.</p> <p>Education Managers will manage the quality checks through observations, one to one tutor discussions and learner feedback.</p> <p>The Education managers will also ensure tutors are returning contributions to the Offender Management Unit mapping out the progress made by the individual.</p>	Director	<p>June 2019</p> <p>June 2019</p> <p>June 2019</p>





	sessions regularly. (3.51)		<p>This will minimise cancelled classes. The establishment will challenge attendance through residential administration support on a daily basis. Repeated non-attendance will be dealt with through the Incentives and Earned Privilege (IEP) process.</p> <p>The establishment will also commit to recruit qualified specialist tutors and instructors in a timely manner minimising the disruption vacancies cause to the curriculum and learning.</p>		May 2019
5.64	Education managers should provide progression opportunities within subjects so that prisoners can achieve their full potential in subjects that interest them. (3.56)	Agreed	The education management team will incorporate end of course meetings with the tutor and learner to discuss next steps. Learners will be signposted to the correct course or work area to complement their aspirations. This process will form part of the education manager's quality assurance checks.	Director	March 2019
5.65	Prison and education managers should ensure that significantly more prisoners who start education courses complete their studies and achieve their qualifications. (3.57)	Agreed	The establishment will review the inclusion of a split working week into the regime when a student is offered work within the establishment. This will enable learners to complete their existing course and achieve their qualifications while attending their new job role. This process will be monitored through Retention and Achievement data collected by the education management team.	Director	March 2019



5.66	Prison and education managers should provide opportunities for prisoners to gain suitable qualifications. (3.58)	Agreed	The establishment will complete two Needs Analysis questionnaires per year. These will be distributed in December and June to the population. Industry recognised qualifications as well as academic qualifications will form part of the establishment's curriculum. This will include embedding functional skills into the Vocational Training areas. All courses will be sourced dependent on the needs of the establishment's population.	Director	July 2019
	Children and families and contact with the outside world				
5.67	The family links worker should be given formal specialist training and supervision. (4.7)	Agreed	HMP Lowdham Grange will recruit a dedicated Families at the Centre of Throughcare (FACT) co-ordinator to act as the liaison between the prisoner, their family and the prison. The post holder will be given formal training and will be managed and supported as part of the Reducing Reoffending function.	Director	October 2019
5.68	Visits should start on time. (4.8)	Agreed	HMP Lowdham Grange will review the procedures and timings for the movements of prisoners to visits to enable prisoners to be brought up to visits on time. The start times of visits will be monitored and reported on in the daily operational meeting.	Director	March 2019
	Reducing risk, rehabilitation and progression				



5.69	Managers should have a clear policy about the frequency of OASys and sentence plan reviews for different groups of prisoners and should routinely collect data to demonstrate that the policy is being met. (4.21)	Agreed	<p>HMP Lowdham Grange will issue a clear policy which reflects the current PSI requirements with regard to the frequency of sentence plan and OASys reviews. Managers will be issued instructions to adhere to the national guidance.</p> <p>A system will be implemented to monitor the completion and review of OASys documentation and Sentence Plans and assessments to ensure they are up to date. Where this is not the case actions will be formulated to resolve any issues.</p>	Director	June 2019
5.70	Offender supervisors should have routine and effective case management supervision in high risk cases. (4.22)	Partly Agreed	<p>This recommendation is partly agreed as currently routine case management oversight of high risk of harm cases is carried out by Senior Managers within the Offender Management Unit due to pending appointment of a Senior Probation Officer (SPO).</p> <p>The establishment will progress the appointment of a Senior Probation Officer (SPO) as part of the OMiC phase 2 roll out. The Divisional Implementation Board (DIB) have confirmed the agreed baseline date for all Midlands prisons for SPO's to be in post is the 16/09/2019.</p>	Director/DIB (Divisional Implementation Board)	September 2019
5.71	Offender supervisors should have appropriate access to security intelligence so that they can make balanced and	Agreed	HMP Lowdham Grange will enable access for its Offender Supervisors to security intelligence relevant to their case management. This will be accessed via a dedicated folder on the computer system.	Director	July 2019





	complete recommendations about the men in their care. (4.23)				
	Release planning				
5.72	Prisoners should be transferred to a resettlement prison close to their release area three months before release to facilitate reintegration planning. (4.34)	Agreed	<p>Alongside the creation of new purpose-built establishments, the Reconfiguration Project will address these issues by adding sufficient training and resettlement spaces to ensure that men can progress to the right establishment at the right point in their sentence. HMP Lowdham Grange will retain, under the vision for 2021, its function as a training prison. The addition of resettlement spaces elsewhere in the adult male estate will ensure that men can move to a prison with a resettlement function to prepare for their release. Closeness to home was a primary modelling principle for locating resettlement places. The point at which men will move is underpinned by the Offender Management in Custody Model, but most men will spend much longer in resettlement prisons, closest to home.</p> <p>Reconfiguration has already started with much needed resettlement and training places being added in the North East through the reconfiguration of HMPs Durham and Holme House, adding much needed training and resettlement places in the North East. Reconfiguration of the remainder of the adult male estate will continue in carefully planned phases between now and 2021.</p>	Prison Estate Transformation Programme (PETP)	March 2021



<b>Recommendations</b>	
Agreed	66
Partly Agreed	5
Not Agreed	1
<b>Total</b>	<b>72</b>

