



HM Prison &  
Probation Service

Action Plan: HMP Altcourse

Action Plan Submitted 18 May 2018

A Response to the HMIP Inspection 13 – 23 November 2017

Report Published 20 March 2018

## INTRODUCTION

HM Inspectorate of Prisons (HMIP) is an independent inspectorate which provide scrutiny of the conditions for and treatment of prisoners. They report their findings for prisons and Young Offender Institutions across England and Wales to Ministry of Justice (MOJ) and Her Majesty's Prison and Probation Service (HMPPS). In response to the report HMPPS / MOJ are required to draft a robust and timely action plan to address the recommendations. The action plan confirms whether recommendations are agreed, partly agreed or not agreed (see categorisations below). Where a recommendation is agreed or partly agreed, the action plans provides specific steps and actions to address these. Actions are clear, measurable, achievable and relevant with the owner and timescale of each step clearly identified. Action plans are sent to HMIP and published on the HMPPS web based Prison Finder. Progress against the implementation and delivery of the action plans will also be monitored and reported on.

Term	Definition	Additional comment
Agreed	All of the recommendation is agreed with, can be achieved and is affordable.	The response should clearly explain how the recommendation will be achieved along with timescales. Actions should be as SMART (Specific, Measureable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress.
Partly Agreed	Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons.	The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There <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 ALTCOURSE

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 to the Director</b>				
5.1	Use of force should be proportionate and de-escalation techniques and body-worn video cameras used. (S43)	Agreed	<p>HMP Altcourse review every incident of force used in the prison.</p> <p>A scrutiny panel has been set up, which provides assurance that all use of force is used in line with policy and concerns or areas of good practice are shared with those involved. In all instances the use of de-escalation techniques are considered by the panel and any learning passed to Supervising Officers.</p> <p>Where there are repeated concerns further training will be considered. All planned removals will have video evidence; staff will continue to be advised to use Body Worn Video Cameras (BWVC) when involved in an incident.</p>	Director	Complete and ongoing
5.2	Prisoners should receive their prescribed medications promptly. (S44)	Agreed	<p>The prisoners are now receiving their prescription medication as required.</p> <p>The prison has also implemented the Summary Care Record to identify any medication issued in the community, providing their GP updates this record.</p>	Director of G4S Health Services UK	Completed
5.3	Offender managers should ensure that high risk of harm prisoners have an up-to-date assessment and a regularly reviewed sentence plan and that all public protection and MAPPA arrangements are robust. (S45)	Partly Agreed	<p>This recommendation is partly agreed because the Community Offender Manager (COM) has responsibility for the completion of an up-to date Offender Assessment System (OASys) assessment. HMP Altcourse has a duty to monitor the assessment completion and reviews are done. If not the concerns should be escalated to the community Senior Probation Officer (SPO).</p> <p>The Establishment recognised that the systems were not robust enough in the escalation of local concerns when an OASys had not been completed. Following the identification of a High Risk of Harm prisoner and the correct ownership of the assessment the Establishment has now put in place an escalation process to inform the COM that an</p>	HMPPS / Director	June 2018



			<p>assessment needs to be completed. A notification is sent out to the COM copying in the Senior Probation Officer (SPO) whose responsibility it is to ensure that the COM completes the assessment. The Establishment will diary the target date of completion and identify if it has been completed, if not the concerns will be escalated to the next stage of Probation Management, which is the North West District Manager.</p> <p>Through this process the prison has already achieved a 75% reduction in the number of identified OASys assessments allocated to the COM for completion at the time of the inspection.</p> <p>The identification of Multi-Agency Public Protection Arrangements (MAPPA) prisoners was poor and pre-release communication to the COM was not completed as per the MAPPA Guidance Version 5. The prison now communicates release dates to both the Police and COM and this action is completed by the Public Protection case administrator. Further assurance is undertaken by the department managers who sample copies of notifications and are copied in to any e-mail communications when sent.</p> <p>The Establishment Offender Supervisors (OS) will remove any existing historical MAPPA alerts on PNOMIS at the point of the completion of the initial risk assessment following reception. At this point any current identified MAPPA eligible prisoners will have a new alert put on PNOMIS with the appropriate MAPPA level.</p> <p>To ensure that this process is completed appropriately local management Quality Assurance (QA) process has been put in place. This piece of work is carried out by Department Managers who retain records for evidence and assurance purposes.</p>		<p>July 2018</p> <p>Completed</p> <p>Completed</p>
	<b>Recommendations</b>				
	<b>Early days in custody</b>				
5.4	Prisoners should be escorted to the prison promptly after they have been dealt with by the courts. (1.8, repeated recommendation 1.5)	Agreed	<p>The contractors are fully aware of their obligations to escort prisoners from court at the earliest opportunity and of the risks posed by late arrivals, with every effort being made to ensure that vehicles arrive within the latest reception time. The current contract established the use of escort vehicles with a separation capability, which allows different types of prisoners (male/female, adult/young people) to be carried on the same vehicle. The change results in more efficient scheduling, with a reduction in prisoner waiting times in addition to significant savings to the Service. However, reducing waiting time is also dependent upon the assistance of other stakeholders, notably HM Courts &amp; Tribunals</p>	Prisoner Escort and Custody Service (PECS)	Completed and ongoing



			<p>Service (HMCTS) and also on the times that their cases have been dealt with by the courts. There may be occasions when traffic conditions, adverse weather or redirections have a detrimental impact on arrival times. In such instances, where a late arrival is unavoidable, the escorts are required to ensure that receiving prisons are informed of delays and agreement is sought in advance for the safe receipt of any late arrivals. Prisoner Escort and Custody Services (PECS) continue to monitor all aspects of the contractors' performance and, where it fails to meet the agreed levels, it is raised with the contractor for improvement.</p> <p>At HMP Altcourse, the latest reception time is 20.00hrs and the prisoners could be finished in court at 13.00hrs</p>	Director	
5.5	First night cells should be clean, free of graffiti and properly equipped. (1.9)	Agreed	A new checklist has been introduced to ensure higher levels of decency, which will ensure all the appropriate equipment is in the cell. This new process now means cells are clean, free from graffiti and properly equipped. Unit Managers also assure themselves that cells are kept to acceptable standards of cleanliness and that they are free from graffiti. The Head of Residence will monitor this monthly by undertaking assurance checks.	Director	Completed and ongoing
5.6	Time out of cell for prisoners in the first night centre should be improved and should include evening and weekend association. (1.10)	Partly Agreed	A review has been undertaken and time out of cell on the First Night Centre now includes weekend association. This recommendation is partly agreed as evening association is for mentors only on the First Night Centre, so that new receptions feel supported, safe and not overwhelmed.	Director	Completed
<b>Managing behaviour</b>					
5.7	The regime in the Brook unit should be improved and include a full programme of purposeful activity. (1.20)	Agreed	<p>The Brook Unit has a regime in place that includes physical activity, association and a programme of interventions based on individual need however the prison accepts a review of the Unit is required to ensure the effectiveness is maintained.</p> <p>A full review of the Brook Unit is currently being undertaken by the Residential Team. A revised programme for purposeful activity and interventions will be produced and implemented.</p>	Director	August 2018
5.8	Officers should wear identity badges during removals involving force, and balaclavas should not be worn. (1.29)	Partly Agreed	<p>Name badges would not be visible during any removal and as they are secured by pins on the back therefore they are not safe to be worn during Control and Restraint (C&amp;R).</p> <p>Staff will identify themselves, on camera prior to any planned removal. All Supervising Officers and Staff have been advised that balaclavas are no longer allowed. This will aid identification and will be monitored as part of the use of force scrutiny panel.</p>	Director	June 2018



5.9	The regime in the segregation unit should allow prisoners access to constructive activity. (1.36)	Agreed	<p>A review of activity in the Care and Separation Unit (CSU) will be undertaken this year. Prisoners will be given more access to Education that is engaging, easy access to more reading books, magazines and quizzes etc. All prisoners who remain in CSU for 14 days or more will have a reintegration plan, where access to work, gym and other activities are considered. The Head of Security is currently working with the Gym Staff to try and provide prisoners with a gym regime in CSU.</p> <p>Prisoners currently have access to Education on a daily basis. Access to the gym is based on a risk assessment. Books are available on request.</p>	Director	September 2018
<b>Safeguarding</b>					
5.10	The quality of ACCT documents should be consistently high. Care maps should be completed in full and reflect prisoners' needs. Staff observations should provide evidence of interactions. (1.52)	Agreed	<p>A new quality assurance tool has been developed and is now being utilised across all Assessment, Care in Custody and Teamwork (ACCT) books. This highlights any deficits and also includes assuring the content of care maps, which now include action points for individual Managers that will consist of further training where required.</p> <p>The QA tool includes a check to ensure that care maps are linked to identify triggers and any issues raised through reviews. Care maps are also covered as part of the training package being rolled out to all staff to increase knowledge and skills in this area. Any concerns are dealt with on an individual basis with Case Managers. ACCT refresher training is also timetabled to take place during 2018 with all establishment staff.</p>	Director  Director	Completed  December 2018
5.11	The governor should initiate contact with the local director of adult social services and the local safeguarding adults board to develop local safeguarding processes. There should be a coordinated approach to ensuring prisoners' safeguarding needs are met. This should include prompt referral, care planning and ongoing monitoring. (1.55)	Agreed	<p>Contact has been made with the local Safeguarding Board and the Head of Safer Custody (or representative) now attends each meeting to develop prison-community processes and improve relationships.</p> <p>Safeguarding action plans are made on an individual basis within a multi-disciplinary group including Offender Supervisors, Probation / Community Rehabilitation Companies (CRCs) and any local authorities (dependant on issues raised). The Safeguarding policy is in line with Prison Service Instructions (PSI).</p>	Director	Completed
<b>Staff-prisoner relationships</b>					
5.12	Better oversight and governance of peer supporters and mentors should be introduced. (2.5)	Agreed	The prison will review the procedures around the selection, training and monitoring of the peer mentor scheme to ensure the coordination, governance and evaluation is further improved. Once completed a Policy will be produced.	Director	September 2018



			The overall coordination of Peer Mentors will be managed by the Safer Custody team. A review has taken place, which has resulted in a reduction of mentor numbers, movement of location to a support unit and more clearly defined roles being put in place. Job descriptions and training schedules alongside tighter restrictions around mentor roles have also been introduced to ensure greater governance.		
	<b>Daily life</b>				
5.13	Managers should improve the standard of the food. (2.17)	Agreed	A new Kitchen Manager has been recruited. They will bring a fresh approach to the menu cycles, quality and consistency of foods on offer.  The role includes reviewing the portion sizes, costings, menu mix to optimise the quality of all foods served and to have a 4 week menu cycle for all special diets. The food is now an agenda item on the Prison Council meeting.	Director	June 2018
	<b>Equality, diversity and faith</b>				
5.14	The prison should consult prisoners from all protected characteristic groups regularly. (2.28)	Agreed	A timetable for prisoner consultation for all protected characteristic groups has been agreed for the year, along with the agenda for the meetings. The minutes will be made available to staff / prisoners.	Director	July 2018
5.15	Equality peer workers should be representative of the population and their role should be reviewed to ensure it is meaningful and the work visible. (2.29)	Agreed	The prison will review the procedures around the selection, training and monitoring of the peer mentor scheme to ensure the coordination, governance and evaluation is further improved. Once completed a Policy will be produced.  New job descriptions have been introduced for Equality Mentors and the prison is advertising for new mentors, which will be more representative of the population. The role of Equality Mentors, when all are in place, will be advertised throughout the establishment including induction.	Director	September 2018
5.16	Foreign national prisoners should receive information about organisations that can provide them with immigration advice and support. (2.37)	Agreed	The prison hosts regular visits from the Immigration Enforcement Unit, this provides valuable information direct to those prisoners part of this group.  All Foreign National (FN) prisoners are seen on induction by both the Equalities Officer and the FN Mentor, who will both follow up on a regular basis. An Immigration Officer is now based in the prison one day per week to see FN prisoners and keep them updated on individual cases. FN focus meetings also take place with Safer Custody Staff and Mentors to gain feedback. The Big Word (translation services) are used throughout the prison where required and information is in the process of being translated into the most common languages where possible.	Director	June 2018



5.17	There should be a strategy for working with young men that takes account of their developmental needs. (2.38)	Agreed	<p>Consultations with prisoners have taken place and a Young Adult (YA) Strategy is currently being developed with their input. The Young Adult (YA) Strategy, when complete, will contain the processes to assess, develop and support this section of the population including detailed advice on supporting those exiting the care system.</p> <p>Specific mentors to work with YA's have been trained and now see everyone in this group on induction and will act as a 'buddy' support where required. More relevant work, training and education opportunities are being reviewed to see what can be offered to YAs. Care leavers are now being identified on admissions paperwork and checked again by mentors on induction. Safer Custody are currently consulting with the Local Authority and third sector organisations to develop services and support in this area.</p>	Director	July 2018
<b>Health, well-being and social care</b>					
5.18	There should be sufficient treatment rooms all of which should comply with national infection control standards. (2.52)	Not Agreed	A new cleaning schedule is in place and all areas are cleaned daily however due to affordability reasons the refurbishment of these areas will not be undertaken. As the refurbishment is required for the treatment rooms to be up to national infection control standards, the prison cannot use all the treatment rooms available. Overall HMP Altcourse have enough treatment rooms and the ones in use are cleaned daily.	Director of G4S Custodial and Detention Services	September 2018
5.19	The health care department should be refurbished and particular attention paid to the waiting room for vulnerable prisoners. (2.53)	Partly Agreed	<p>This recommendation is partly agreed as the Special Purpose Vehicle (SPV), Fazakerley Prison Services Ltd. and the Ministry of Justice (MoJ) are currently in discussion regarding the extent of refurbishment works planned for the healthcare facility and who needs to fund it. There is no guarantee that there is funding available, HMP Altcourse are not able to accept this part of the recommendation due to affordability.</p> <p>The prison accept that the VP waiting room is not fit for purpose and will be removed (1 June 2018). The prison has introduced clinics and GP appointments on the VP Units, so there is no need to use the waiting room in Healthcare. Set days for other VP healthcare needs will be separate from other prisoners so VPs can then use the main waiting room.</p>	Director of G4S Custodial and Detention Services / Director / Ministry of Justice (MoJ)	June 2018
5.20	Care plans for patients with long-term conditions should be reviewed routinely to ensure patients receive appropriate treatment. (2.61)	Agreed	The Clinical Lead now completes monthly care plan audits and this is to provide assurance on quality. All care plans will be reviewed after each clinic.	Director of G4S Health Services UK and Primecare	Completed and ongoing
5.21	The prison should develop an operational policy that describes the criteria for admission and discharge	Agreed	A local policy for the Inpatients facility has now been drawn up between the prison and Healthcare with a focus on ensuring the clinical role is central to any admissions and discharges from the unit.	Director	Completed



	and articulates the clinical role of the unit. (2.62)				
5.22	The inpatient unit should be refurbished; individual rooms should be clean and have all basic amenities. (2.63)	Partly Agreed	<p>This recommendation is partly agreed as the Special Purpose Vehicle (SPV), Fazakerley Prison Services Ltd. and MoJ are currently in discussion regarding the extent of refurbishment works planned for the healthcare facility and who needs to fund it. There is no guarantee that there is funding available, HMP Altcourse are not able to accept this part of the recommendation due to affordability.</p> <p>The prison accept the cells should be clean and have basic amenities and as a result HMP Altcourse now have an agreement with a contractor to undertake a deep clean of all clinical areas including cells. A cleaning schedule is now in place which includes cells. All cells are cleaned on a daily basis and now have a chair and TV.</p>	Director of G4S Custodial and Detention Services	Completed
5.23	A programme of therapeutic activities and proactive daily support for men with mental health needs should be established. (2.64)	Agreed	<p>The establishment has now changed the Inpatient Unit to a stand-alone Unit with dedicated staff offering greater consistency with the view to build positive staff patient relationships.</p> <p>The Mental Health pathway has been reviewed and agreed with National Health Service England (NHSE) commissioners. The Mental Health Team have introduced specific group work based on the national calendar of events, for example Time to Talk, Autism Awareness, self-injury awareness and other topics. In addition the regime has been reviewed and regular association and daily activities are available to patients.</p>	Director of G4S Health Services UK and Primecare / NHSE commissioners	Completed
5.24	Patients should have access to a range of individual and group psychological interventions in line with the IAPT programme. (2.72)	Not Agreed	HMP Altcourse do not provide any Psychological interventions and are not funded for this work as it does not form part of the contract.	Director of G4S Health Services UK and Primecare / MoJ	
5.25	Patients should receive prompt support from specialist medical and psychology professionals that is appropriate for their level of need and clinical risk. (2.73)	Partly Agreed	This recommendation is partly agreed as whilst funding from the NHSE has been agreed to improve the Consultant Psychiatrist cover, this is insufficient to enable any increase in psychological intervention provision. The funding will however enable the prison to ensure patients receive prompt support and improve the use of the care programme approach.	Director of G4S Health Services UK and Primecare	November 2018
5.26	Prisoners needing treatment under the Mental Health Act should be transferred to hospital promptly. (2.74)	Partly Agreed	<p>The control on the use of community secure mental health beds is not within the remit of the HMP Altcourse.</p> <p>This recommendation is partly agreed as although every effort is made to expedite transfers and assess patients promptly, transfers are dependent on a number of factors such as the completion of appropriate assessments, administrative processes within the NHS and the availability of accommodation in mental health hospitals.</p>	Director of G4S Health Services UK and Primecare	July 2018



			<p>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.</p> <p>Locally, a clinical pathway will be reviewed to ensure clear processes are in place to assess patients transferred to secure mental health settings.</p> <p>A process will be put in place which documents that all referrals are completed in a timely manner and those prisoners who have been identified as suitable for a bed are sectioned under the mental health act. Regular updates will be requested and this will be audited in order to help progress the move for the prisoner.</p>		
5.27	Appropriate observation and monitoring arrangements should be in place during stabilisation, and drug- and alcohol-dependent prisoners should receive treatment that is prompt, flexible and reviewed on a regular basis. (2.80)	Agreed	<p>All new Clinical Substance Misuse patients are reviewed daily for the first 5 days following admission. The prisoners receive twice daily clinical observations and twice nightly checks as required by national guidelines.</p> <p>They are to be seen on the first night of admission by the specialist clinical substance misuse Doctor and can have further reviews as required. There are set 5 day and 28 day reviews and also routine reviews by the Doctor every 13 weeks, however the prisoners also have daily access to clinical and non-clinical substance misuse workers.</p> <p>A monthly audit is now in place to provide assurance that these reviews are being undertaken.</p>	Director of G4S Health Services UK and G4S Custodial Detention Services	Completed and ongoing
5.28	Pharmacy staff should be appropriately trained for the duties they carry out. (2.86)	Agreed	Following a Pharmacy review the prison is currently recruiting a qualified Pharmacy Dispenser and a Senior Pharmacy Technician. Only qualified Pharmacy Staff will be involved in the dispensing of medication.	Director of G4S Health Services	August 2018
5.29	The timing of the administration of supervised medication should be reviewed to ensure that patients receive optimum treatment. (2.87)	Partly Agreed	Healthcare will ensure those prisoners on night time medications receive their medication as late as possible. This recommendation is partly agreed as due to operational reasons HMP Altcourse cannot dispense after 1730 hours	Director of G4S Health Services	
5.30	In-possession risk assessments should be carried out in line with the policy. Prison officers should increase the level of support during administration of in-possession medication and secure storage should be provided in cells. (2.88)	Partly Agreed	<p>This recommendation is partly agreed as the prison are not able to provide secure storage due to affordability reasons.</p> <p>There is one Officer present at the issuing of In possession medication. One officer is enough to supervise this process and they are briefed on the task. The Healthcare in-possession risk assessments are now</p>	Director of G4S Health Services UK and G4S Custodial Detention Services	June 2018



			<p>completed during initial reception screening and reviewed regularly. The completion of in-possession risk assessments will be monitored.</p> <p>The prison does follow the National Institute for Health and Care Excellence (NICE) guidelines.</p>	/ Director	
	<b>Time out of cell</b>				
5.31	All men, including those who had to be escorted to the library, should be able to visit the library at least once a week. (3.11)	Agreed	Each unit is provided with two library sessions per week as part of the Library timetable. The prison will ensure all prisoners have the opportunity to access the library at least once per week.	Director	Completed
	<b>Education, skills and work activities</b>				
5.32	All prisoners should have equal access to vocational training and suitable teaching accommodation. (3.20)	Partly Agreed	<p>HMP Altcourse have now introduced NVQ's into some of the Vulnerable Prisoner workshops.</p> <p>This recommendation is partly agreed as HMP Altcourse are unable to offer any further additional vocational training to Vulnerable Prisoners at present.</p> <p>The teaching accommodation for the VP's is unit based as this is the only space available to ensure the safety of those prisoners.</p>	Director	Completed
5.33	The prison should ensure that post-release outcomes data are available to inform service provision and development. (3.21)	Not Agreed	<p>The responsibility to provide post release data sits with the CRC Contract provider. Purple Futures are contracted MoJ to provide this service and Shelter is contracted by Purple Futures to deliver the Establishment specific service. HMP Altcourse will continue to request this information.</p> <p>The CRC which provides TTG services to HMP Altcourse, submits a bi-monthly report to the Service Integration Group meeting. This includes accommodation outcomes, and Employment, Education and Training outcomes. This information can be made freely available to HMP Altcourse so that it can be used to inform service provision and development.</p>	Director / Community Rehabilitation Contract (CRC) Purple Futures	
5.34	The prison pay policy should be fair and encourage prisoners to participate in education and training. (3.22)	Agreed	<p>The prison pay policy has been reviewed. A new pay scale has been developed, showing prisoners in education and industrial work, receive the same hourly rate.</p> <p>The pay review has been communicated to prisoners and agreed by the Controller. This has now been implemented. (</p>	Director	Completed
5.35	Tutors and trainers should produce and update personal development targets in learning plans to show prisoners' progress over time. (3.29)	Agreed	Learning plans which include development targets are provide to all learners at induction. NOVUS will monitor teachers and tutors through the appraisal system and Continuous Professional Development meetings with staff.	Director	August 2018



5.36	Tutors and trainers should ensure lessons contain challenging activities that benefit all prisoners, including the most able, and provide useful feedback on how they can improve. (3.30)	Agreed	A Quality Assurance process will be put in place to monitor classroom delivery. Director – can you say more about this – e.g. frequency and what action will be taken to ensure prisoners progress and are focused on activities?  NOVUS will monitor this as part of their Appraisal system and Continuous Professional Development meetings with staff and will address any training need identified from the reviews.	Director	August 2018
5.37	Supervisors in the prison workshops should enforce high standards of health and safety and plan suitable contingency activities to keep all prisoners occupied. (3.36)	Agreed	The procedures have been reinforced regarding Personal Protective Equipment and HMP Altcourse has introduced supervisor checks prior to commencing shifts.  HMP Altcourse have implemented plans to move prisoners between the workshops or move work if a temporary downtime in production is experienced. In addition these times will be used for housekeeping and maintenance activities.	Director	Completed
5.38	Trainers should help prisoners develop technical vocabulary relevant to the vocational training course. (3.37)	Agreed	Novus have appointed a Learner Support Tutor that provides additional support to learners on Vocational Training in functional skills to embed technical vocabulary, relevant to the Vocational Training Course.	Director	Completed
5.39	Prison managers should ensure that prisoners receive a record of their ongoing achievements on courses and in work when leaving the prison. (3.42)	Agreed	The Head of Activities will review what process can be put in place to allow prisoners to maintain a record of achievement on courses or in the workplace.	Director	November 2018
5.40	Novus managers should systematically monitor the performance of prisoners with additional support needs to ensure their achievements are as good as their peers across all courses. (3.43)	Agreed	NOVUS's self-assessment will monitor performance of all groups and share this information with the Prison Equality Manager. Bi-annual reviews will take place to ensure prisoners are not disadvantaged and progressive attainment of all groups is equal.	Director	August 2018
	<b>Reducing risk, rehabilitation and progression</b>				
5.41	Offender supervisors should have regular and meaningful contact with the men on their caseloads. (4.21)	Agreed	Once a prisoner is allocated to the Offender Supervisor they will make initial contact through an introduction within 14 working days and update PNOMIS accordingly. Within the next 8 week period an OASys assessment will be completed and any frequency of further contact will take place dependent on level of identified risk and sentence length. Conversations will take place that will cover any specific areas of concern and give value that both parties will see as worthwhile. The Offender Supervisor will update PNOMIS with the agreed frequency of contact and keep their own diary of events and update PNOMIS when a meeting has taken place. The monthly quality assurance checks will be	Director	July 2018



			undertaken by the Department Managers by viewing a random selection of the Offender Supervisors cases and checking PNOMIS entries.		
5.42	Casework and professional supervision and personal development should be provided to all offender supervisors, whatever their professional background. (4.22, repeated recommendation 4.19)	Agreed	The Department Managers will complete bi-monthly one-to-one supervision sessions with the Offender Supervisor, which will identify any areas of concern or good practice. This is a two way process and minutes of the session will be completed and kept on file. This process will also be completed with the seconded probation staff. This will complement the current day to day interaction in the department.	Director	July 2018
5.43	Sentence plan targets should be specific and relate to reducing the prisoners' risks. (4.23)	Agreed	It is recognised that the at least 50% of the current Offender Supervisor staffing group are relatively new in post and as such the prison has identified an additional training need in regards to risk management. This will be addressed by having additional supervision sessions with line managers and with the input of seconded probation staff. This will look at specific areas of concern around the identifying of risk and how it can be reduced and improve sentence plan targets.	Director	August 2018
5.44	The prison should develop a specific strategy to manage the sex offender population. (4.24, repeated recommendation 4.51)	Not Agreed	HMP Altcourse is a Category B Local Prison with a High Number of sentenced Sex Offenders. The prison is not able to influence the National Population Strategy surrounding this type of prisoner and the lack of available Sex Offender spaces to facilitate progressive moves for both admitters and deniers of their offence. This is a wider problem and the prison is not resourced to facilitate any interventions that may support a focus on a reduction of the High Risk of Harm that this cohort represents.  In line with the prison's population specification and the agreed allocation flows, HMP Altcourse should transfer prisoners convicted of sexual offences sentenced to over 12 months to an establishment of the right security category commissioned to hold prisoners convicted of sexual offences. There are however recognised issues with the available number of places for some segments of this population. This is being addressed through the Prison Estate Transformation Programme (PETP). Work is already underway to ensure that estate capacity is realigned to cater for demand for places, including those convicted of sexual offences.	Director / Prison Estate Transformation Programme (PETP)	
	<b>Interventions</b>				
5.45	A suitable range and number of offending behaviour programmes should be available to meet the needs of the prison's population. (4.29)	Not Agreed	HMP Altcourse is not commissioned to deliver this service and the cost implications are restrictive.	Director	
	<b>Release planning</b>				
5.46	The prison should clarify how liaison between the prison and responsible officer in the community should be	Agreed	A minuted meeting with the Offender Supervisor group has taken place and it has been reiterated to all that a handover to the Community Offender Manager for those prisoners in scope of OASys must	Director	July 2018



	undertaken to ensure all relevant information about a prisoner's progress and ongoing needs is shared. (4.35)		commence no later than 6 months prior to release. This will cover all relevant information to support either the completion of a Risk Management plan or Licence Conditions.		
5.47	Mentoring and 'meet at the gate' support services should be developed to meet all prisoners' needs. (4.36)	Agreed	<p>The provision of a Through the Gate (TTG) service sits with the CRC Contract provider, Purple Futures who are contracted by the MoJ to provide this service.</p> <p>Currently in place is a TTG Service and Mentor Support for Welsh prisoners who are referred to PACT (Prison Advice and Care Trust). Further TTG support for High Risk CRC cases is also provided by P3 (Purple Futures). There are further plans to develop a TTG service for those who will be released in to the Cheshire and Merseyside areas.</p> <p>When the Service User is released, the individual will meet the TTG Mentor at the Visitors Centre outside of the Gate or at a pre-arranged place convenient to them. They will support with appointments on the day of release and then plan when support will be required and for how long. There is no time limit on the service and the service will be available to the Service User as long as they need.</p> <p>Shelter has applied for funds to provide Discharge Packs to service users on release and if the application is successful, providing the packs will commence (July 2018). These will contain a number of items that would benefit those who are released with no fixed address (NFA), who are waiting for assessments or have no access to funds. The packs will include:</p> <ul style="list-style-type: none"> <li>• Mobile Phones / SIMS / Chargers</li> <li>• Food Vouchers</li> <li>• Toiletries</li> <li>• Dry foods (tea / coffee / Cuppa Soup etc.)</li> <li>• Contact number, information regarding Drop in Centres and Food Banks / Diary.</li> </ul>	Community Rehabilitation Contract (CRC) Purple Futures / MoJ	July 2018

<i>Recommendations</i>	
Agreed	32
Partly agreed	10
Not agreed	5
<b>Total</b>	<b>47</b>

