



HM Prison &
Probation Service

Action Plan: HMP Bronzefield

Action Plan Submitted 26th April 2019

A Response to the HMIP Report on an unannounced inspection of
HMP & YOI Bronzefield

Report Published 25th April 2019

INTRODUCTION

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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, Measurable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress.
Partly Agreed	Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons.	The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There must be an explanation of why we cannot fully agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.
Not Agreed	The recommendation is not agreed and will not be implemented. This might be because of commissioning, policy, operational or affordability reasons.	The response must clearly state the reasons why we have chosen this option. There must be an explanation of why we cannot agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.

	Recommendations to HMPPS				
	Reducing risk, rehabilitation and progression				
5.2	Sufficient BASS accommodation places should be available to support HDC (4.12)	Partly Agreed	<p>The recommendation is <i>Partly Agreed</i> because procurement is subject to housing availability, support from key stakeholders (including Police and Local Authorities), affordability and stock retention.</p> <p>The new BASS (Bail Accommodation and Support Service) contractor is progressing towards achieving its contractual requirement of 550 bed spaces. With the new contract, provision to specify sourcing areas has been returned to the Authority. The number of spaces available to residents at HMP Bronzefield has been insufficient to meet demand and sourcing areas in the South East have been listed as priority. The supplier is progressing with activities to achieve this.</p> <p>The new national contract has some provision to expand further after the 550 milestone has been reached within the current resource level. Should the demand levels continue at current levels this clause will likely be exercised three months from achievement of the 550 target.</p>	<p>Head of Community Interventions Operational Delivery Unit</p> <p>Head of Community Interventions Operational Delivery Unit</p>	<p>June 2019</p> <p>September 2019</p>
	Recommendations to the Director				
	Courts, escort and transfers				
5.3	Female prisoners should not be escorted in the same vans as males. (Error! Reference source not found.)	Not agreed	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 was intended to result in more responsive and efficient scheduling by allowing female prisoners to be carried on scheduled runs, so reducing waiting times at courts. This current arrangement is expected to continue in to the next generation contract, where an improved operational solution will reduce the need for separation of women from males and improve the collection frequency for women and Young People.		
5.4	Women should be transferred from court to the prison as soon as possible following their hearing so they have enough time to	Agreed	Minimising the time prisoners spend waiting in court cells is reflected in the Prisoner Escort and Custody Service (PECS) contract, with the contractor fully aware of the risks posed by late arrivals. Reducing waiting time however, is dependent upon the assistance of other stakeholders, notably HM Courts & Tribunals Service and also on the times that the prisoners' cases have been	PECS	Completed

	settle in at the prison. (Error! Reference source not found., repeated recommendation 1.6)		dealt with by the courts. There may be occasions when the contractor encounters traffic issues, adverse weather, late court sittings and the far larger court catchment area in the women's estate, with subsequently longer journey times, have an impact on arrival times. When late arrivals do occur, the escorts are required to ensure that the receiving establishment is informed of the delay and agreement is sought in advance for the safe receipt of any late arrivals.		
	Early days in custody				
5.5	Additional first night safety checks on those new to the prison should always be undertaken. (1.15)	Agreed	HMP/YOI Bronzefield will undertake and assure additional first night safety checks as follows: <ul style="list-style-type: none"> A minimum of 3 observations will be completed during the first night for all new receptions. These will be recorded in the prisoner's induction booklet. Checks will be assured nightly by the Night Duty Manager and monitored monthly in the Safer Custody meeting. The Early Days in Custody Manager will complete a weekly assurance check. 	Director	May 2019
	Substance Misuse				
5.6	Clinical substance use services should be sufficient to meet demand and have effective managerial oversight. (1.53)	Agreed	HMP/YOI Bronzefield will undertake a gap analysis of substance misuse clinical provision to identify gaps in service against demand. Findings and any potential resource impact will be shared with the National Health Service (NHS) Commissioner. Managerial oversight of the service, effective governance, and service development will be monitored by the Head of Healthcare at the Clinical Governance meeting. This will be informed through monthly Quality Assurance Tools which will include: <ul style="list-style-type: none"> Monthly substance misuse service Health and Justice Indicators of Performance (HJIPs) monitoring Monthly monitoring of substance misuse complaints Exception reporting of missed clinics / medication issues 	Sodexo Corporate Head of Healthcare Sodexo Corporate Head of Healthcare	September 2019 September 2019
	Residential Units				
5.7	Prisoners should have access to clean bedding every week (2.6)	Agreed	HMP/YOI Bronzefield will provide clean bedding every week to prisoners by taking the following actions: <ul style="list-style-type: none"> A weekly spot check of returned clean bedding received from the supplier will be completed by the Stores Team. Any concerns with the quality will be escalated to the supplier by the Business Development Manager. 	Director	July 2019

			<ul style="list-style-type: none"> Staff will be responsive to concerns raised by prisoners at the time of issuing new bedding. This will be monitored via the User Voice Prisoner Council Meeting and through the official complaints system. The Head of Residence will monitor the quality of bedding as part of a monthly quality assurance process. 		
5.8	All calls through the in-cell bell should be answered within five minutes (2.7)	Agreed	<p>HMP/YOI Bronzefield will ensure cell bells are answered within expected timescales through the following actions:</p> <ul style="list-style-type: none"> Officers will be refreshed on the expectations in relation to timeliness on answering cell bells through staff briefings and staff information notices. A quality assurance process will be implemented and completed by Residential Departmental Heads. Cell bell responses will be included on the quarterly agenda for the User Voice Prisoner Council Meeting attended by a Senior Manager. A monthly assurance check will be completed by the Performance and Development Unit and findings reviewed at the Senior Manager Meeting 	Director	July 2019
5.9	Staff answering cell bells should ensure they fully address the reason for the call.	Agreed	<p>HMP/YOI Bronzefield will ensure that staff establish the reason for cell bell activation through the following actions:</p> <ul style="list-style-type: none"> Officers will be refreshed on the expectations in relation to the quality of response and the need to establish the reasons for the call through staff briefings and staff information notices. A quality assurance process will be implemented and completed by Residential Departmental Heads. Cell bell responses will be included on the quarterly agenda for the User Voice Prisoner Council Meeting attended by a Senior Manager. A monthly assurance check will be completed by the Performance and Development Unit and findings reviewed at the Senior Manager Meeting 	Director	July 2019
	Equality and diversity				
5.10	The number of female operational staff should be increased.(2.19)	Partly Agreed	<p>The recommendation is partly agreed because although HMP Bronzefield will endeavour to increase the number of female applicants through targeted recruitment, this recommendation will be subject to wider influences, including the local labour market and competing employment opportunities.</p> <p>Over the past 12 months local recruitment campaigns for prison officers show 61% of applicants were male. To increase the number of female applicants HMP/YOI Bronzefield will:</p> <ul style="list-style-type: none"> Develop a recruitment strategy targeted at attracting more female applicants. 	Director	September 2019

			<ul style="list-style-type: none"> Monitor gender ratios of operational staff and the effectiveness of the strategy at the monthly Senior Managers Meeting. 		
5.11	All Personal Emergency Evacuation Plans (PEEPs) should contain sufficient detail and staff based on the house blocks should always be familiar with them. (2.32)	Agreed	<p>HMP/YOI Bronzefield will implement the following to assure that all PEEP's provide sufficient detail</p> <ul style="list-style-type: none"> The PEEP's need assessment process will be reviewed to include the residential Senior Prison Custody Officer (SPCO) from the house block on which the resident resides. All PEEP's will be quality assured and approved by a Residential Department Head. <p>HMP/ YOI Bronzefield will ensure that staff are familiar with the contents of PEEPs by;</p> <ul style="list-style-type: none"> Residents with a PEEP are now highlighted on the resident's individual local Custodial Management System (CMS) record, available to all staff with access to the Sodexo IT network. An alert on NOMIS will be made for all residents with a PEEP. An assurance check will be completed monthly as part of the Duty Managers night check. The daily briefing sheet will continue to be used to highlight key information, including in relation to PEEPs <p>PEEPs will be added as a standard agenda item at the weekly Safety Intervention Meeting (SIM) to provide governance and assurance of both quality and staff awareness.</p>	Director	June 2019
				Director	April 2019
				Director	April 2019
5.12	The Mother and Baby Unit (MBU) should not be supervised overnight by a lone male member of staff. (2.33)	Not Agreed	This recommendation is not agreed because all staff, including males, are trained to an equal professional standard. This includes trauma informed approaches and working with female offenders. Further support from the appropriate healthcare is available on call when the MBU is supervised by lone male officers.		
	Health services				
5.13	All clinical areas should comply with national standards for infection prevention and control. (2.55)	Agreed	<p>HMP/YOI Bronzefield will ensure all clinical areas are cleaned in line with NHS infection prevention and control standards. This will be achieved by:</p> <ul style="list-style-type: none"> Upskilling of cleaning operatives through appropriate training Contracting a twice yearly deep clean of all clinical areas. <p>The Head of Healthcare will monitor the standard of cleanliness through weekly and Quarterly Quality Assurance Tools which will include:</p> <ul style="list-style-type: none"> A daily cleaning checklist 	Sodexo Corporate Head of Healthcare	September 2019
				Sodexo Corporate Head of Healthcare	September 2019

			<ul style="list-style-type: none"> • Monthly infection control clinical audits and monthly exception reporting. • Quarterly Infection Control Audits 		
5.14	Barrier protection should be well advertised and widely available. (2.56)	Agreed	<p>HMP/YOI Bronzefield will review the availability of barrier protection with the commissioned Sexual Health Service contract provider. We will work with the NHS Commissioning Team to ensure appropriate barrier protection is widely available and well-advertised in support of service provision.</p> <p>HMP/YOI Bronzefield will promote the availability of barrier protection in Healthcare Clinics and Resident Healthcare Booklets. Uptake will be monitored through monthly reporting at the Clinical Governance meeting.</p>	Sodexo Corporate Head of Healthcare	September 2019
				Sodexo Corporate Head of Healthcare	September 2019
5.15	Stock medicines should be stored appropriately and audited regularly so that supplied stock can be reconciled against prescriptions issued (2.76)	Agreed	<p>HMP/YOI Bronzefield will ensure stock medicines are stored appropriately and reconciled against prescriptions issues by:</p> <ul style="list-style-type: none"> • Completing and recording a weekly Pharmacy audit of stock medication in all clinical areas reconciled against prescriptions • Completing and recording a weekly Pharmacy check of medication packaging to ensure they remain in original boxes • Exception Reporting will be provided weekly to the Head of Healthcare <p>Compliance will be reviewed at the monthly medications management meeting.</p>	Sodexo Corporate Head of Healthcare	June 2019
				Sodexo Corporate Head of Healthcare	June 2019
5.16	Prisoners referred to primary mental health care services should be assessed within two weeks. (2.89)	Agreed	<p>HMP/YOI Bronzefield will ensure that residents requiring a primary mental health assessment are seen within two weeks. Local Primary Mental Health pathways will be revised to avoid delays in assessment following referral and duplication of referrals to the Mental Health In Reach Team / Primary Mental Health Therapies.</p> <p>Referral timeframes will be monitored by the Head of Healthcare at the monthly Clinical Governance meeting.</p>	Sodexo Corporate Head of Healthcare	September 2019
				Sodexo Corporate Head of Healthcare	September 2019
5.17	Patients requiring a transfer under the Mental Health Act should be transferred within the current transfer time guidelines (2.90, repeated recommendation 2.106)	Partly Agreed	<p>This recommendation is partly agreed, because whilst every effort is made to meet the current transfer time guidelines, timeliness of transfers under The Mental Health Act is reliant on national resource being available for assessment, hospital bed availability and other external factors.</p> <p>The Head of Healthcare will monitor waiting times by reviewing transfer timeframes as part of the Clinical Governance Meeting and Quarterly Contract Review Meeting (QCRM) with the NHS Commissioner. Ongoing issues will be raised with the HMPPS QCRM in order to escalate concerns.</p>	Director, Sodexo Sodexo Corporate Head of Healthcare and NHS commissioner.	July 2019

	Catering				
5.18	The quality and quantity of the food provided should be improved and better consultation with prisoners should inform improvements. (2.95)	Agreed	<p>HMP Bronzefield will use the following approaches to consult with residents:</p> <ul style="list-style-type: none"> • Consultation through monthly focus groups. • Completion of an annual food survey. • Monitoring of food related complaint trends • Food will be a standard agenda item at the User Voice Prisoner Council Meeting attended by a Senior Manager, which will be provide feedback to a suitable representative from the catering team. <p>HMP Bronzefield will improve the quality and quantity of the food provided by:</p> <ul style="list-style-type: none"> • Use of above consultation to inform menu choice and other improvements. • A review of portion size has been completed in line with PSI 44/2010. New portion size utensils have been introduced and guidance provided to servery workers and wing staff. • Daily food quality assurance checks will be undertaken and recorded by the Duty Manager. • Review of the menu cycle will be completed twice a year for Autumn/Winter and Spring/Summer menus. 	Director Director	September 2019 September 2019
	Purchases				
5.19	The range and prices of goods sold in the shop should be reviewed and improved. (2.99)	Agreed	<p>HMP/YOI Bronzefield will review and improve the range and prices of goods sold in the shop by:</p> <ul style="list-style-type: none"> • Continue advanced consultation with Dalsey, Hillblom and Lynn (DHL) to outsource facilities provision. This will enable comparative pricing and increased option availability in line with those provided at HMPPS female establishments. The change of provision will require a change to the contract agreed with the Ministry of Justice. • Undertake a price review twice a year with the Director and the Controllers Team. 	Director	December 2019
5.20	Prisoners should be able to buy items from catalogues. (2.100)	Partly Agreed	<p>This recommendation is partly agreed as it will not be possible to offer all residents the opportunity to buy items from catalogues, particularly those serving short-sentences or subject to imminent transfer.</p> <p>HMP/YOI Bronzefield has an in-house clothing store, 'The Booteek' providing women access to an extensive array of new and donated clothing and footwear. Items can be purchased or provided dependant on a woman's finances and external support network.</p>	Director	Completed

			HMP/YOI Bronzefield are in consultation with DHL to outsource our facilities list, which would provide a further option for women to purchase clothing and footwear.	Director	December 2019
			For long-term prisoners, locally agreed arrangements will be implemented to facilitate purchase of clothing.	Director	June 2019
	Learning and skills and work activities				
5.21	Tutors should share information on prisoners' preferences and progress from individual learning plans when they move to other courses. (3.13)	Agreed	HMP/YOI Bronzefield will ensure that all individual learning plans (ILP's) follow the residents throughout their journey at HMP/YOI Bronzefield by: <ul style="list-style-type: none"> Placing them in their Personal Learning Portfolio at the end of each course. Completing quality checks as part of the Quarterly Improvement Group (QIG) meeting Tutors will have individual quality checks through one-to-one meetings with their managers. 	Director	August 2019
5.22	Those with limited or no English language skills should have prompt access to English language classes. (3.28)	Agreed	HMP/YOI Bronzefield will ensure that those with limited or no English language skills have prompt access to English language classes by: <ul style="list-style-type: none"> All English for Speakers of Other Languages (ESOL) residents will be allocated to a Basic Phrase Course within 5 days of the completion of induction. Residents will be allocated to the main ESOL class once a space becomes available. <p>Quality checks will be completed in the quarterly QIG meeting with separate monitoring of progression out of ESOL classes.</p>	Director Director	September 2019 September 2019
5.23	Library staff should collect data on women's use of the service to identify under-represented groups and ensure the provision is meeting all women's needs. (3.44, repeated recommendation 3.36)	Agreed	HMP/YOI Bronzefield will enhance the existing data collected to identify underrepresented groups, ensuring that all protected characteristics are captured. These will be monitored through the quarterly QIG to inform provision and ensure it continues to meet the women's needs. This will also be included in the Quality Improvement Plan.	Director	September 2019
	Strategic management of resettlement				
5.24	The needs analysis should be more comprehensive by	Agreed	HMP/YOI Bronzefield will plan an annual internal needs analysis cycle. This will be supplemented by a more comprehensive, externally commissioned	Director	September 2019

	making use of information from OASys and other systems. (4.7)		needs analysis every 2 years, ensuring that information from OASys and other systems is utilised. An updated needs analysis has been externally recommissioned for 2019. This has involved more comprehensive information sources including risk assessments, OASys, case notes and interviews with residents who have different risk profiles and sentence lengths. The needs analysis will inform and guide the interventions and services offered to residents.		
	Offender management and planning				
5.25	Information exchange and risk management planning with community offender managers should be comprehensive and take place regularly in the months leading up to release. It should include confirmation of the MAPPAs management level where relevant. (4.18)	Agreed	<p>Implementation of the Offender Management in Custody (OMiC) model will begin in September 2019 with a three-month transition period. This will introduce the role of Prison Offender Managers (POMs) into establishments and introduces new processes tailored to individual prisoner risk and need to support the delivery and management for long-term cases into prisons and to deliver better quality assessments and sentence planning coordination.</p> <ul style="list-style-type: none"> • POMs will liaise with Community Offender Managers (COMs) to oversee prisoner's transition into the community, including communication regarding risk and proposed Multi Agency Public Protection Arrangements (MAPPAs) in the months leading up to release. Where a timely response in relation to the MAPPAs management level is not provided to HMP Bronzefield, this will be escalated to the MAPPAs chair. • A bespoke model of delivery for women takes account of complexity of need, risk of harm and reoffending and builds on differences in women's prisons. The model includes POMs managing long-term cases in prisons and supporting COMs for shorter term prisoners, with the same handover timings as in the male model to ensure a consistent approach for probation to deliver in the community. • All new processes are supported by EQuIP (Excellence and Quality in Probation Practice process mapping tool), to set out the agreed national processes and provide instant access to policies and templates for staff working in the Offender Management Unit. • The small number of prisoners, who, due to their risk and need profile, require an earlier allocation to the COM, will be subject to an early allocation process. Responsibility will be transferred to the COM fifteen months before the individual's conditional release date, to provide the COM adequate time to meet with the individual, liaise with the POM and other agencies to make a timely MAPPAs referral at least twelve months prior to release to ensure necessary release plans are in place, if required. <p>Information exchange and risk management planning will be further supported through multi-disciplinary liaison with embedded Community Rehabilitation Company (CRC) teams 12 weeks prior to release for all non MAPPAs nominals and weekly team meetings with caseworkers.</p>	<p>Executive Director, Safety and Rehabilitation and Director</p> <p>Director</p>	<p>December 2019</p> <p>June 2019.</p>

	Reintegration planning				
5.26	The number of prisoners being released without accommodation should be monitored and should include those going to temporary accommodation that cannot be sustained. (4.47)	Agreed	<p>HMPPS collect data on prisoners' accommodation circumstance on release and during community supervision. CRCs are subject to an assurance metric for assessing settled accommodation on release using this data. In addition, a measure for accommodation on release has been added to the prison performance framework from April 2019. New CRC measures are under consideration for future contracts within the Probation Programme. Prisons and probation providers are encouraged to work together and with the local community to meet offender housing needs.</p> <p>Provision of accommodation upon release and tenancy sustainment continues to form part of monthly meetings with CRC providers. HMP/YOI Bronzefield will:</p> <ul style="list-style-type: none"> • Complete local monitoring of women released without accommodation and review findings with local CRC providers for rationale and follow up. • In addition to attendance at the female tripartite meetings, HMP/YOI Bronzefield will introduce monthly meetings with Tier 2 providers to monitor those who are released to No Fixed Abode and where temporary accommodation cannot be sustained. 	Head of Performance Analytics and Contract Management	Completed
				Director	September 2019

Recommendations	
Agreed	20
Partly Agreed	4
Not Agreed	2
Total	26