

Action Plan: HMP Oakwood

Action Plan Submitted 15th September 2021

A Response to the HMIP Inspection 17th – 28th May 2021

Report Published 03/09/2021

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, 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.		

ACTION PLAN: HMIP REPORT

ESTABLISHMENT: HMP OAKWOOD

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner	6. Target Date
	Key concerns and recommendations				
	Directed to the Director				
6.1	Key concern (1.32): Not all force was used proportionately, and staff missed opportunities to de-escalate situations. Senior managers did not sufficiently scrutinise paperwork or camera footage and meetings took place infrequently and were not effective. Key recommendation: There should be regular managerial oversight of the use of force, which should involve routine reviews of all instances. Patterns and trends should be identified and acted on, to ensure that force is always justified and proportionate.	Agreed	A new weekly multidisciplinary Senior Management meeting commenced in August 2021, chaired by the Head of Security. A random 20 percent selection of Use of Force (UoF) incidents and Body Worn Video Camera footage with associated documentation is scrutinised. Areas for learning and good practice are identified, shared and any actions required are assigned to an owner. Minutes and an action log are produced. The UoF quarterly meeting will recommence in October 2021, chaired by the Head of Security with senior managers in attendance. All incidents of UoF will be reviewed providing a forum for more detailed analysis of the data to ensure any trends or patterns are highlighted and given an appropriate action. Minutes and an action log will be produced.	Director	Complete October 2021
	Directed to: The Home Office and Ministry of Justice				
6.2	Key concern (1.33): Provision for foreign national prisoners was poor. Surgeries with immigration officials remained suspended, and unlike those held in immigration removal centres, detainees had no access to free legal advice surgeries. The Home Office had not informed the prison of four	Not Agreed	This recommendation is not agreed. The Home Office is committed to ensuring foreign national offenders are informed at least 30 days in advance of the end of their custodial sentence. However, there are a number of reasons why foreign national offenders are detained		

	vulnerable detainees assessed to be at higher levels of risk in detention. Key recommendation: Prisoners should have access to regular surgeries with immigration officials and should be given at least one month's notice of a decision to detain them. The Home Office should inform the prison promptly of all prisoners assessed to be at risk in detention, so that appropriate arrangements for their care can be made.		longer than the Home Office would wish, including lack of travel documentation, poor engagement with embassies and language barriers. Immigration Prison Teams (IPT) are not currently attending or conducting face to face surgeries as a result of the continued pandemic restrictions on external visitors. When restrictions are lifted IPT's can agree to holding regular immigration surgeries as required, which HMP Oakwood will facilitate. As an interim measure video links between prisoners and IPT's have been facilitated. The Immigration Caseworker will inform the prison of details they have on file of potential risks when they detain the foreign national offender on immigration detention. Risk assessments are reviewed on a regular basis to facilitate the identification of any emerging risks, or changes to known risk factors. If any new risk factors emerge, or any existing risk factors change, there should be a formal review of the case, with a fresh consideration of the balance of risk factors against the decisions to detain.		
	Directed to the Director				
6.3	Key concern (1.34): Managers were unaware of the educational needs of too many prisoners who had arrived at the prison since the start of the pandemic as these men had not had an education induction and had not completed any initial assessments. Key recommendation: Leaders and managers must identify rapidly the starting points and needs of prisoners who have arrived at the prison since the start of the pandemic. They must make sure that all prisoners are fully informed about the education and training	Agreed	Education induction processes resumed in May 2021 on the prison's induction units (Beech and Ash house block) and are scheduled every weekday on Beech and on Wednesdays on Ash. Prisoners receive an induction presentation, speak with the education OLIPs (Offender Learner Improving Performance) and have the opportunity to select courses from a pathway that meets the needs of their sentence plan and is appropriate for their level as reflected in the initial assessments outcomes. The Information Advice and Guidance (IAG) provider now attends induction meetings to support with the initial interview and update a shared spreadsheet to inform the	Director	Complete

	options available, and that prisoners undertake learning that will benefit them.		planning for the education provider (Novus) and the learners. Initial assessments have resumed for prisoners arriving into the prison and there is a schedule in place to address the backlog of prisoners who have not yet completed their initial assessments.	Director	October 2021
6.4	Key concern (1.35): At the time of our inspection, 12% of prisoners did not have an initial assessment of their risks or needs, and a further 27% did not have an updated assessment, reviewed in the previous 12 months, to inform sentence planning and progression. Contact with prison offender managers was too infrequent and did not drive sentence progression. Caseloads were too high, which affected prison and probation offender mangers' ability to complete assessments and have meaningful contact with prisoners. Key recommendation: All prisoners should have an up-to-date assessment of their risks and needs, and prisoners should have regular meaningful contact with a prison offender manager that challenges their offending behaviour and drives sentence progression.	Agreed	The Offender Management in Custody (OMiC) introduced a change to the yearly review requirement. All determinate sentence prisoners, with 10 months or more left to serve at point of sentence, will have their OASys reviewed every two years and three years for those on indeterminate sentences or following a significant event between these times. It has been recognised and agreed there is a significant backlog in OASys assessments at HMP Oakwood. A Notice of Change (NOC) has been completed and is currently awaiting sign off from both G4S and HMPPS in order for overtime to be used to address the backlog and ongoing demand for assessments to be completed. Once agreed, funding will be released immediately and it is anticipated it would take a maximum of six months to address the backlog. It has been recognised by HMPPS that HMP Oakwood require an uplift in their Prison Offender Manager (POM) resourcing before improvements can be seen in POM and prisoner contact. An implementation plan has been invited by HMPPS to increase the POM resource, which HMP Oakwood will submit in September 2021 with a view to the immediate release of funds.	Director	March 2022 December 2021

6.5	Key concern (1.36): The interdepartmental risk management meeting was not sufficiently focused on prisoners' risks and any action set was not always followed up. There was an inadequate escalation process to make sure that prisoners' MAPPA levels were confirmed six months before their release, which meant that some high-risk prisoners could be released without a robust risk management plan. Key recommendation: Public protection procedures should ensure that there is a robust risk management plan in place well in advance of the prisoner's release.	Agreed	A screening tracker and log will be used to identify MAPPA prisoners at eight months prior to their release date. The POM will work with the Community Offender Manager (COM) to complete release planning and confirm MAPPA arrangements. If there are delays in the COM confirming the MAPPA Level, a MAPPA S form will be submitted to the MAPPA Coordinator as per the escalation process. The Interdepartmental Risk Management Meeting (IRMM) will retain oversight of these prisoners, reviewing the arrangements made for their release. POM's will provide suitable levels of resettlement support and engage with COM's to ensure that suitable release plans are in place. The meeting will be chaired by the Head of Offender Management Delivery with minutes and an action log kept, which will be reviewed on a monthly basis.	Director	October 2021
6.6	Key concern (1.37): HMP Oakwood was not commissioned to deliver accredited programmes or a programme needs assessment (PNA) for prisoners convicted of a sexual offence. Prisons delivering suitable interventions would not always accept prisoners without a PNA, which prevented them from progressing. The prison's most recent needs assessment showed that 90% of prisoners convicted of a sexual offence with an offender assessment system report, had not completed any intervention or was awaiting an assessment. There was a significant gap in provision for prisoners convicted of a sexual offence. Key recommendation: A strategy should be developed for delivering specific offence-focused work to sex offenders, including improved access to accredited programmes and the provision of alternative opportunities for those assessed as unsuitable. (Repeated recommendation 4.33.)	Partly Agreed	This recommendation is partly agreed. Prisoners Convicted of Sexual Offending (PCOSO) arriving at HMP Oakwood are expected to arrive having completed Sex Offender focused work. It is not in the remit of HMP Oakwood's contract to carry out assessments of suitability for offence focused work for PCOSO's. The establishment will take reasonable steps to transfer any prisoners to suitable alternative establishments that provide appropriate interventions not available at HMP Oakwood. A business case will be submitted requesting additional funding for a Forensic Psychologist and a Trainee Psychologist to undertake programme needs assessments and one-to-one work.	Director	Complete September 2021
	General Recommendations				

	Directed to the Director				
6.7	Recommendation (2.10): Language assistance should be provided to non-English-speaking prisoners to make sure they understand reception and induction processes.	Agreed	Language assistance will be provided to non-English- speaking prisoners to assist in their understanding of reception and induction processes. This will be facilitated by staff using BIG WORD. A Staff Notice has been sent out to remind staff of the need to use BIG Word when necessary. Where required BIG WORD will be used to translate reception and induction material documents. A Notice for prisoners has been displayed across the establishment promoting the use of interpreting services.	Director	Complete
6.8	Recommendation (2.29): The justification for segregating prisoners should be clearly documented and should include individual behaviour targets to allow prisoners to return to normal location at the earliest opportunity.	Agreed	The justification for segregating prisoners will be clearly documented on the Good Order or Discipline (GOOD) initial paperwork and on all following reviews; any change of circumstance will also be recorded in full. Individual behaviour targets to allow prisoners to return to normal location will be set at the earliest opportunity and reviewed at each GOOD Review Board. Monthly Governance checks will be completed by the Head of Safer Custody.	Director	September 2021
6.9	Recommendation (2.36): Security arrangements should be proportionate, and prisoners should not routinely be strip-searched.	Agreed	HMP Oakwood only conducts intelligence led searches which are triggered through a Mercury Intelligence Report (MIR), routine searches do not take place. All searches must be approved by a security manager as an 'action' with an individual assessment outlining the perceived threat recorded in the workbox history of each MIR report. All intelligent led searches are carried out as per the Local Security Strategy (LSS) which states that a prisoner will	Director	Complete

			be subject to a full search. This complies with Prison Service Instruction (PSI) 09/2016 section 2.25. A record of the full search is contained within the cell search certificate and submitted to the authority on a monthly basis as part of a Contractual Delivery Indicator (CDI). The BOSS Chair (Body Orifice Security Scanner) and Body Scanner will be utilised when locating men into the Care and Separation Unit (CSU) to reduce the need for full searches.		
6.10	Recommendation (3.12): Prisoners should not be held in multi-occupancy cells that are too small to allow for sufficient personal space, furniture or privacy.	Not Agreed	This recommendation is not agreed. Prison cell occupancy is determined by establishments and certified by the HMPPS Head of Custodial Contracts in accordance with PSI 17/2012, which provides clear guidelines for determining cell capacities. Cells will only be shared where the Head of Custodial Contracts has assessed them to be of an adequate size and condition. All accommodation is compliant with the certified cell certificate. For the foreseeable future, and in common with other prisons, it will be necessary for HMP Oakwood to operate with an operational capacity that involves a level of crowding above its Certified Normal Accommodation.	HMPPS	
6.11	Recommendation (3.20): Lunch should not be served before noon, and the evening meal not before 5pm. (Repeated recommendation 2.17.)	Partly Agreed	This recommendation is partly agreed on the basis the current core day does not have the scope for serving of the lunch time meal before 12:00, therefore lunch is served at 11:45. The evening meal is served at 17:00.	Director	Complete
6.12	Recommendation (3.32): HMPPS data collected locally on the treatment of prisoners with protected characteristics should be analysed and investigated to identify disproportion and, if necessary, acted on.	Agreed	HMPPS data collected locally on the treatment of residents with protected characteristics will be analysed and where required will be investigated to identify disproportion. If any concerns or areas of improvement are identified this will be acted upon and recorded within the Equalities Action Plan and monitored as part of the re-	Director	December 2021

			established quarterly Equality meeting, which recommenced in March 2021, chaired by the Head of Safer Custody.		
6.13	Recommendation (3.45): Professional interpretation should be used where necessary to support accurate and confidential communication.	Agreed	Language assistance will be provided to non-English-speaking prisoners to make sure they understand processes, to support accurate and confidential communication. This will be facilitated by staff using the BIG WORD translating service.	Director	Complete
	Directed to the Home Office and Ministry of Justice				
6.14	Recommendation (3.46): Detainees should not be held in Oakwood, unless they can be given access to free independent legal advice surgeries.	Not Agreed	This recommendation is not agreed. The Foreign National Offender Returns Command cannot agree to independent legal firms being willing to offer detainees at HMP Oakwood or any prison free legal advice. Prisoners in all prisons can seek independent legal advice.		
	Directed to the Director				
6.15	Recommendation (3.47): The prison should maintain appropriate arrangements for the evacuation of prisoners with disabilities.	Agreed	A Notice to Staff has been issued on the use of equipment to assist with prisoners with disabilities in the event of a building evacuation. The daily Front Line Managers (FML) meetings now reference evacuation procedures and Personal Emergency Evacuation Plans (PEEPs) to remind wing staff of their responsibilities.	Director	Complete
			Residential Custodial Managers will undertake monthly assurance checks and wing inspections to make sure the	Director	October 2021

			PEEPs continue to be identified, are up to date and of a good quality.		
	Directed to the Ministry of Justice				
6.16	Recommendation (3.81): The transfer of patients to hospital under the Mental Health Act should take place within Department of Health guidance timescales.	Partly Agreed	This recommendation is partly agreed as waiting times are subject to factors outside of the direct control of HMP Oakwood, such as the availability of bed space in appropriate facilities.		
			Since April 2021 the NHS England and NHS Improvement (NHSE/I) Health and Justice national team has developed a portal to report all completed transfers to hospital in order to monitor referral rates, response times for access to assessments by mental health secure hospitals and timescales for assessments and transfers.	NHSE/I	Complete
			A Midlands regional fortnightly meeting with the mental health provider collaboratives, NHSE/I specialised commissioning case managers, prison mental health providers and HMPPS has been established. This forum is co-ordinated and chaired by the NHSE/I health and justice commissioning quality leads and aims to support the transition of those who are at risk of extended waiting times beyond the current transfer and remission guidance timescales.	NHSE/I	Complete
6.17	Recommendation (3.94): Pharmacy services should be configured so that safe dispensing arrangements are in place and medicine management processes ensure medicines are prescribed and, wherever possible, administered in line with recommended dosage schedules. Arrangements should include direct pharmacy oversight of prescribing practices to mitigate risks and support patient care.	Agreed	Pharmacy Services delivered at HMP Oakwood transitioned from Lloyds Pharmacy to Practice Plus Group (PPG) on 1st July 2021. As part of this transition, PPG have reviewed the workforce, skills and processes required to deliver this service effectively and efficiently. The prescribing provision at HMP Oakwood has increased by 0.7 to provide additional prescribing resilience.	PPG Head of Healthcare / Director	Complete

			An additional Pharmacy Assistant has been recruited to work alongside the existing Assistant to support increased monitoring of the storage and movement of medications A review of prescribing practices is planned to look at increasing the number of patients able to have 'In Possession' medication enabling a more patient focused prescribing regime.		October 2021
			Pharmacist sessions to conduct Medicine reviews of patients will be reintroduced (paused due to the pandemic).		January 2022
			PPG are currently recruiting a Regional Pharmacist to provide senior strategic leadership regarding medication management. This role will also support the PPG West Midland sites with prescribing and medicines optimisation. The Regional Pharmacist will work with sites to ensure that the medicines optimisation dashboard data informs patient prescribing and is considered within monthly safer prescriber meetings.		January 2022
6.18	Recommendation (4.8): The prison should make sure that access to the limited gym provision is equitable to all.	Agreed	Additional gym equipment has been purchased to allow for more users on the main houseblocks and to replace damaged equipment. There are gym orderlies on each exercise yard who run circuits and provide support for training. Physical Education Instructors (PEI's) are ensuring that all residents receive a gym induction following their isolation on the Reverse Cohort Unit (RCU).	Director	Complete
			There has been further investment in equipment for industries and enhanced workers. There are timetabled slots where these workers are given access to the equipment to train and be supported by a Physical Education mentors. This accommodates daily access to 350 workers five days a week.	Director	Complete

6.19	Recommendation (4.23): Leaders and managers must ensure that information, advice and guidance are available for all prisoners and that prisoners receive support to identify and follow appropriate skills action plans to help them decide on their education, skills and work	Agreed	IAG staff now attend the Induction process. All residents are sent a Self-Assessment Skills Action Plan (SASAP). This is to ensure that residents who are unable to attend Induction are not missed whilst there is mitigated service delivery and small Induction group numbers.	Director	September 2021
	choices.		IAG or Aspire mentors deliver presentations to prisoners and outline their service to inform future pathway planning.	Director	Complete
			IAG Advisers will arrange interviews with residents and complete a skills action plan. IAG Advisers review resident progress via a telephone or face-to-face visit and further IAG support is given if needed depending on the outcome. An action plan is updated to reflect changes, or a review document is placed on the file.	Director	Complete
6.20	Recommendation (4.24): Leaders and managers must make sure that prisoners are supported to retain and reinforce their knowledge while they wait to return to face-to-face classes. They must ensure that vocational training for prisoners is safely reintroduced as soon as possible.	Agreed	Face to face vocational training for prisoners has been reintroduced in accordance with health and safety protocols and risk assessments for prisoners residing on Cedar and Beech House Blocks in rotation. All Vocational courses have now recommenced.	Director	Complete
	salely reinflocuced as soon as possible.		Learners who are awaiting assignment to face to face learning have the opportunity to access supporting functional skills booklets, covering all units across Entry 1, 2 & 3 and Level 1 and 2. Support for English for Speakers of Other Languages (ESOL) across these levels is also available. All accredited, non-vocational courses, with the exception of Drama, are now face to face.	Director	Complete
	Directed to HM Prison and Probation Service.				
6.21	Recommendation (5.9): National restrictions on social visits, such as the prohibition on physical	Partly Agreed	This recommendation is partly agreed due to having tighter restrictions in place in prisons, which are seen as high risk environments, due to the high number of people		

	contact and on the provision of food, should be brought into line with those in the community.		living and working together, making the spread of infection more difficult to control and the risk of outbreaks more acute. Visits at HMP Oakwood have recommenced, with physical contact allowed at the start and end of the session if face masks are worn. HMP Oakwood were early adopters of allowing physical contact having taken part in the 'Test and Hug' pilot from 14 th July 2021. As part of the Stage 2 regime HMP Oakwood are reviewing their social visits workplace risk assessment and local operating procedure (LOP) in consultation with Trade Unions and the Family Services provider to begin to resume refreshment services in the visit's hall.	HMPPS	September 2021
	Directed to the Director				
6.22	Recommendation (5.18): A comprehensive reducing reoffending strategy should be developed, supported by a detailed action plan that is monitored and updated regularly.	Agreed	The Reducing Reoffending Strategy will be reviewed and updated in October 2021 to reflect COVID-19 and subsequent impacts. A term of reference and a detailed action plan will be produced and updated quarterly, informed by a needs assessment of the establishment.	Director	October 2021
			The Reducing Re-offending meetings recommenced in June 2021 and are held monthly, chaired by the Head of Rehabilitation and representatives from all departments are in attendance.	Director	Complete
6.23	Recommendation (5.28): Re-categorisation should be completed with a full understanding of the prisoner's offending behaviour risk and include a review of an up-to-date OASys assessment.	Agreed	It has been recognised and agreed there is a significant backlog in OASys assessments at HMP Oakwood. A Notice of Change (NOC) has been completed and is currently awaiting sign off from both G4S and HMPPS in order for overtime to be used to complete the backlog and ongoing demand for assessments to be completed. Once agreed, funding will be released immediately and it is	Director	March 2022

			anticipated it would take a maximum of six months to clear the backlog.	Director	December 2021
			It has been recognised by HMPPS that HMP Oakwood require an uplift in their Prison Offender Manager (POM) resourcing. An implementation plan has been invited by HMPPS to increase the POM resource, which HMP Oakwood will submit in September 2021 with a view to the immediate release of funds. Once the incomplete OASys backlog has been addressed and the POM resource has increased all re-categorisation reviews will be informed by a current OASys assessment.	Director	March 2022
6.24	Recommendation (5.41): All prisoners should have their resettlement needs identified 12 weeks prior to their release.	Agreed	There is now a dedicated handover period from prisons to the community to ensure relationships are developed between the COM, POM and the prisoner but also to ensure that crucial public protection and resettlement tasks are completed in a timely manner.	Director	Complete
			HMP Oakwood will complete handover reports for CRC cases twelve weeks prior to the earliest release date. National Probation Service (NPS) cases have a COM assigned at 7.5 months prior to the earliest release date which will include a comprehensive handover meeting prior to responsibility being transferred at 4.5 months. For those subject to parole, there are different arrangements dependent upon the parole journey.	Director	Complete
			Following the unification of NPS and CRC into the new Probation Service on the 26 th June 2021, the majority of CRC staff delivering through the gate pre-release activities moved into the Probation Service to continue to deliver pre-release activities. This includes identification of immediate resettlement needs via the Basic Custody Screening tools. Resettlement staff continue to deliver pre-release activities that are not available via Commissioned Rehabilitation Services (CRS) including finance, benefit and debt, working with COM's and POM's. CRS is now available to support pre-release resettlement	Director	April 2022

	needs in relation to accommodation and social inclusion (a pre and post-release mentoring scheme to assist an individual make a successful transition from custody to community). Referrals will be undertaken by the COM once allocated to ensure that the necessary interventions are delivered in the 12 weeks prior to release.	
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Recommendations	
Agreed	17
Partly Agreed	4
Not Agreed	3
Total	24