



HM Prison &
Probation Service

Action Plan: HMP & YOI Bronzefield

Action Plan Submitted: 2nd December 2025

A Response to the HMIP Inspection: 4th – 14th August 2025

Report Published: 3rd November 2025

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, and youth offending services across England and Wales to Ministry of Justice (MoJ) and His 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 priority and key concerns. Action plans provide specific steps and actions to address the priority and key concerns, that are clear, outcome focussed, measurable, achievable, and relevant with the owner and timescale of each step clearly identified. Action plans are sent to HMIP and published on the GOV.UK website. Progress against the implementation and delivery of the action plans will also be monitored and reported on.

ACTION PLAN: HMCIP REPORT

ESTABLISHMENT: HMP & YOI BRONZEFIELD

1. Rec No	2. Concerns	3. Response Action Taken/Planned	4. Responsible Owner	5. Target Date
	Priority concerns			
1	Leaders were not using data systematically to help them achieve and sustain improved outcomes. For example, there was no monitoring of allocation to education, skills and work, and there was no oversight of the effectiveness of the prisoner application system.	To strengthen data-driven decision-making and improve outcomes, the following actions are being taken: • The Director has commissioned a review of the Contract Delivery Unit (CDU) to explore the introduction of dedicated administrative and data analyst support. This will enhance the prison's capacity to collect, interpret, and act on key performance data. • Power BI dashboards will be embedded into governance structures, allowing leaders to assess progress, identify gaps, and adjust strategies accordingly. Initially will be introduced across Safer Custody datasets, enabling the identification of trends and themes to inform operational responses. • A new monitoring framework is being developed to track allocation and attendance across education, skills, and work (ES&W), ensuring equitable access and identifying barriers to engagement. This will be monitored within the Quality Improvement Group (QIG) Meeting. • The prisoner application system is under review, with a focus on improving oversight, responsiveness, and ownership. Applications will be subject to a weekly completion quality assurance by Department Heads, and	Director	March 2026 March 2026 March 2026 March 2026

		overall delivery will be tracked at the Performance & Assurance monthly meeting.		
2	Some mentally unwell women had been held at the prison due to the scarcity of services in the community, including limited places in secure mental health hospitals.	Work continues with the Bronzefield Mental Health Partnership to ensure that patients are transferred as swiftly as possible. A transfer and remissions coordinator for HMP Bronzefield will be implemented Regionally, NHS England have stood up a task and finish group which includes adult secure Provider Collaboratives, the 4 adult Psychiatric Intensive Care Units (PICUs) and prison healthcare to increase the efficiency and effectiveness of the system. Areas of focus that has been identified (but not limited to) are: • Develop clear escalation process for the South East region to overcome delays to the Mental Health Act assessment & transfer process • Facilitate adult secure Provider Collaboratives and the 4 adult PICU providers in the South East region to agree a standardised referral form to simplify the referral process and enable quicker referral of prisoners • Facilitate prison healthcare, adult secure Provider Collaboratives and the 4 adult PICU providers in the South East region to develop a referral checklist to enable referrers to provide sufficient information to enable timely Mental Health Act assessments of prisoners The national team (NHSE Mental Health/ Strategic commissioning and Health and Justice) have completed the	Central and North West London NHS England NHS England NHS England	On-going January 2026 October 2026 Complete

		scoping work to ensure clinical leadership throughout the clinical pathway from and to prison and Mental Health hospital. The Mental Health and Justice Strategic Advisory Group has now launched to assure the 28-day transfer process.		
3	Care and treatment for women withdrawing from substance misuse was not good enough and, in some cases, potentially risky. Some received too little medication to alleviate withdrawal symptoms, care plans were not tailored to the individual, and the time between the administration of controlled drugs was too short.	Methadone and buprenorphine to be prescribed and dispensed before midnight or prescribed clearly as a split dose, accompanied by an explicit written prescribing and nursing plan on System One that takes into account the morning dose scheduled between 8:00am and 11:00am. Regular assurance meetings have been established between Central and North West London (Healthcare Provider) and Forward Trust (Substance Misuse Services) to strengthen collaboration and ensure alignment on key priorities. Weekly audits are now in place to monitor prescribing and dispensing activities. This process ensures compliance and supports continuous improvement in medication management. A dedicated weekly audit of 'Day 5' and 'Week 13' reviews has been implemented.	Central and North West London & Forward Trust	Completed Completed Completed Completed
4	Leaders' and managers' quality assurance of teaching was not thorough. It did not evaluate outcomes and targets for improvement were too broad to be of benefit.	HMP Bronzefield has undertaken a review of its quality assurance processes for teaching and learning. With the recent appointment of new team leaders, streamlining and standardising these processes to ensure greater consistency and rigour across the department.	Director	April 2026

		Key measures, intended to ensure that quality assurance is both thorough and outcome-focused, with clearly defined areas for improvement, include: • Targeted CPD for Managers: A structured programme of continuing professional development (CPD) will be delivered to all managers involved in quality assurance from October 2025 to January 2026. This will ensure a shared understanding of expectations and consistency in evaluation practices. • Quality Assurance Tracker: A centralised tracker will be developed by January 2026 to record all quality assurance reviews. This will summarise priority themes and allow for the identification of emerging issues through ad-hoc reviews. • Standardised Observation Templates: By December 2025, we will implement agreed templates for lesson observations, learning walks, and learner work scrutiny. These will focus on evaluating learner progress and identifying areas for improvement. This template will include learner feedback. • Teaching Team CPD: In January 2026, all teaching staff will receive CPD to ensure clarity around the revised quality assurance framework and the criteria against which their practice will be assessed. • Independent Moderation of new teaching quality assurance will be undertaken between January to March 2026 and feedback provided on any continuing areas of focus.		
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5	Many women were not released to sustainable accommodation.	The HMPPS Strategic Housing Specialist (SHS) at HMP Bronzefield, works closely with the London, Kent, Surrey and Sussex, and South Central Probation regions, where most of the women are released to. SHS engages with the pre-release panels within these areas and chairs a pre-release meeting internally to support women returning to suitable accommodation.	Community Accommodation Services (CAS)	Completed
		The future Commissioned Rehabilitative Services (CRS) Women's Services contracts are currently being re-commissioned and will go live in Spring 2028. HMPPS have strengthened the expectations in relation to taking activity on reception to secure existing accommodation, avoid housing-related debt and, where necessary, relinquish tenancies. We also include an expectation that CRS providers undertake a Duty to Refer in custody and support women at any point when a housing related need is identified.	Commissioned Rehabilitative Services (CRS)	Spring 2028
		Given the lack of suitable housing for women on release, Sodexo has been driving initiatives to improve this, including: • Departure Lounge: This area has been reinvigorated and has a substantive base in the community café area. Staff from the Pre-Release Team (PRT) are based in this area daily to meet women upon their release and provide them with a signposting service. Additionally, a visiting chaplain is provided who will meet women at the gate and provide a 'footsteps' approach in taking women to the station, via the Salvation Army, should they receive any additional support. There is also engagement with CRS providers to utilise this space for 'Through the Gate' meetings.	Sodexo, HMPPS and MOPAC	Completed

		Strategic Housing Workshop: On 29 September 2025 HMP Bronzefield hosted a Strategic Housing Workshop, inviting key partners from HMPPS, KSS, London Probation and policy stakeholders to collectively discuss the accommodation issues facing women leaving the prison. An action plan was devised from this meeting and stakeholders asked to feedback on progress against these actions. Resettlement Governance Forum: Following the strategic workshop a ‘Bronzefield Resettlement Governance forum’ has been established which will be co-chaired by the Director and HMPPS Contract Management Team. This forum will bring together the three key regions women are released into (London, KSS and South Central) and ensure collective ownership of issues facing prison leavers with the aim of improving housing outcomes. London Operational Monthly Meeting: To reflect that most women are released into London, a monthly forum has been set up with the Head of Service in London who has strategic responsibility for women, providing a monthly touchpoint to discuss working practices, accommodation outcomes and improving partnership working with London Community Offender Managers around CRS referrals. The first meeting was held in November 2025. Top 5 London boroughs project – In October 2025 the ‘Top 5 London boroughs’ project was launched with the Mayor’s Office for Policing and Crime (MOPAC), designed to improve the release experience for women into these areas. The MOPAC team is co-ordinating a		
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		meeting with the Heads of Service in each of these London councils, scheduled for December 2025. • Community Accommodation Service Tier 3 (CAS3) – In November 2025, with the support of London Probation, HMP Bronzefield facilitated some of its Prison Offender Managers (POM) visiting CAS3 properties. This internal advocacy and partnership provided POMs with the ability to credibly persuade and influence prison leavers at Bronzefield to take up the offers of safe and suitable CAS3 accommodation.		
6	Women had too little time out of cell. The planned regime was often reduced with little notice.	A full review of the core day is currently underway to ensure that women have consistent and equitable access to time out of cell. This includes: • Strengthening regime delivery by improving staff deployment and contingency planning to reduce unplanned regime curtailments. • Enhancing communication with prisoners when changes are unavoidable, ensuring they are informed in advance and understand the reasons. • Reviewing unit workspaces to increase opportunities for off-unit work, supporting purposeful activity and reducing time spent in cells. • Allocating clear time on the core day to key regime activities, such as time out in fresh air and medication administration, so there is no regime 'creep' which impacts the activity timetable for women. Any impact to the core day and regime will be monitored in the daily briefing, and weekly Time Out of Cell monitoring will additionally highlight any areas for improvement.	Director	January 2026
	Key Concerns			

7	Support for newly arrived women was not good enough. Many women had little or no time to settle in before being locked up for their first night, and the induction programme was limited in content and delivery.	A full review of the early days service has been commissioned to ensure it reflects the needs of the population. This will create a dynamic, individualised and trauma informed Early Days Service Programme (including induction), supporting multiple pathways, such as remand and recall specific programmes. A scoping exercise will be undertaken to assess the possibility of extended opening hours of the first night unit. Key deliverables will include: • By 31 December 2025, The Early Days Service review project team will report back to the Senior Leadership Team with their proposal for a revised induction programme which caters to those who are first time in prison; recalled to prison or a recent returner to HMP Bronzefield. • By 31 March 2026, first night support arrangements will be reviewed and embedded, with additional peers in place to offer better support to those prisoners arriving at Bronzefield. • By 30 April 2026, we will have commissioned User Voice to gather feedback from new receptions to assess how well new arrangements are meeting needs. • By 31 May 2026, any further adjustments to support and induction arrangements will be embedded.	Director	May 2026
8	Women experienced delays in receiving their medication.	More timely distribution of medication will be achieved through: • Audit of Missed Medications and Non-Attendance An audit has been implemented to identify the underlying causes and barriers preventing patients from receiving their prescribed medications.	Director & Central and North West London	February 2026

		• Patient Forum and Thematic Review A patient forum has been scheduled to discuss medication administration. Feedback will undergo thematic analysis to inform improvements and integrate changes into the core day structure. • Risk Assessment Training for Self-Administration In-possession risk assessment training is being rolled out to increase the proportion of individuals safely managing their own medications. • Monthly Reception Audits Monthly reception audits are conducted, and findings are shared during weekly subcontracted meetings with the GP provider to ensure continuous improvement and collaborative action. In addition, • Medication times will be clearly embedded within the core day, which is currently being reviewed, providing a consistent and predictable structure for both staff and women. This will ensure that medication administration is prioritised and not disrupted by other regime activities. • Controlled drug administration times have been standardised, with clear protocols in place to support safe and timely delivery. • An audit of medication administration times has been introduced to identify any recurring barriers or delays. Findings are reviewed by healthcare to inform continuous improvement. • Enhancing communication with prisoners when delays are unavoidable, ensuring they are informed in advance and understand the reasons.		
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9	Women who spoke little English struggled to access support. Most written information, including that on the electronic kiosk system, was only available in English, and professional telephone interpreting services were not always used when needed.	• Translation of key materials: The Early Days booklet and other essential information will be translated into the top 10 most spoken languages. Where an individual speaks a language outside of this list, bespoke support will be arranged by the Early Days Team, through designated translation services (such as Big Word), or via designated staff and peers. • Interpreter use: Staff will be reminded through notices to staff and Director's Brief of the importance of using professional telephone interpreting services when needed, and compliance will be monitored through case reviews and staff feedback.	Director Director	January 2026 January 2026
10	Leaders had not prioritised attendance at education, skills and work sessions. Where women did not attend, this was mainly because of visits, doctor appointments and, more recently, the inclusion of faith activities in the core day.	To address low attendance at education, skills, and work (ES&W) sessions, a multi-pronged approach is being implemented: • Daily attendance reporting has been introduced in morning briefings to ensure visibility and accountability across departments. • The core day is under review to better balance competing demands such as healthcare, visits, and faith activities, with the aim of minimising clashes and maximising participation in ES&W. • The allocations policy and way in which activities are timetabled within ES&W are being revised to reduce interruptions and improve continuity, supported by the Meaningful Activities project, which promotes purposeful engagement. • A cross-functional working group has been established to coordinate scheduling and prioritise attendance, ensuring that operational decisions support rehabilitative outcomes.	Director	March 2026

		The findings from the User Voice consultation into attendance at ES&W will be implemented and impact tracked through further qualitative feedback from the prisoners through User Voice.		
11	Despite a very high level of need, there was little support for victims of domestic abuse.	HMP Bronzefield have requested funding to recruit and train an Independent Domestic Violence Advisor to be based within the OMU / pre-release function to provide resettlement support, safety plans and release navigation to reduce the risk of domestic abuse on release from custody. Approval from HMPPS is awaited to progress this post By 31 December 2025, a meeting will be arranged with Womens Estate Psychology Services to discuss what Domestic Violence support is available to be delivered in the interim.	Director	May 2026
12	Some women who presented a high risk of serious harm to others had been refused a place at approved probation hostels on release.	Managers will employ professional judgement in consultation with sentence management colleagues, where necessary, in the event of a lack of suitable Approved Premises (AP) placement options. CAS have developed a digitalised approach to AP referrals, through a National Central Referral Unit that oversees assessment for suitability and eligibility, match individuals to placements, whilst maximising occupancy and use of national capacity. This approach will enable HMPPS to improve timeliness and allow greater consistency and responsiveness, underpinned by the department's demand analysis.	Community Accommodation Services (CAS) Community Accommodation Services (CAS)	Completed Completed