

Action Plan – Mr Stephen Browning at HMP Leeds – Unclassified on 03/08/2018

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Governor should ensure that when a prisoner is suspected to be under the influence of PS, all staff follow the instructions in Leeds' PS policy.	Accepted	<p>HMP Leeds's Psychoactive Substance (PS) policy provides clear direction as to the actions staff must take when a prisoner is suspected of being under the influence of PS. The PS policy in its entirety will be recirculated to all staff.</p> <p>Additionally, the 'Staff Actions for Prisoners Under the Influence (UTI)' section of the PS policy will be extracted to formulate a Governor's Order. The Governor's Order will be published to all staff, to ensure they are aware of their responsibilities when managing a prisoner suspected of being under the influence. This will include details of how such incidents should be reported and to whom and will reiterate the importance of recording actions taken, within the prisoner's record.</p>	Head of Safety June 2019
2	The Governor should ensure that the key drug issues at Leeds are identified and that the prison's local drugs strategy is revised to ensure that these key issues are being addressed, and published by September 2019, in accordance with HMPPS's objective.	Accepted	<p>HMP Leeds has invested in a new post of Drug Strategy manager. This post is set at Governor Grade level and provides the operational link with healthcare providers in identifying key drug issues at HMP Leeds.</p> <p>Key issues already identified surrounding supply include prisoners' mail being infused with psychoactive substances, drugs thrown over the perimeter wall, prisoners coming through reception with internally secreted substances and drone technology being used to smuggle illicit substances through cell windows. In an effort to minimise supply and demand several initiatives have been implemented and will form part of the establishment's revised drug strategy: Prisoner's mail is now photocopied to ensure any substance-infused paper is removed and only the copied version of their mail reaches them. This has been complemented by a drug itemiser which, when scanning paper, is able to analyse and identify the components and indicate the presence of</p>	Head of Drug Strategy September 2019

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			<p>concealed drugs.</p> <p>Wing exercise yards have been netted, meaning that any illicit item thrown over the perimeter wall, are caught in the netting, and then retrieved by staff.</p> <p>A body scanning device has now been installed in Reception for use where prisoners are suspected of internally concealing illicit items. Any prisoner identified as potentially having an item secreted is located in the Segregation Unit in a specialised 'secreted items' cell and monitored appropriately.</p> <p>Grills have been attached to the outside of cell windows to eliminate opportunities for illicit items to be smuggled into the cell via drones or other prisoners, whilst still allowing light and air inside.</p> <p>HMP Leeds has introduced an Incentivised Substance Free Living wing (ISFL). Whilst still in its infancy, the ISFL wing encourages desistance from drugs through the incentives available.</p> <p>Prisoners identified as prolific users of PS are now discussed weekly at the Safety Intervention Meeting (SIM). This meeting is multi-disciplinary involving mental and other healthcare colleagues alongside wing managers, prison education staff and psychological services.</p> <p>These initiatives will be incorporated into the revised Drug Strategy in accordance with HMPPS's objectives.</p>	

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3	The Head of Healthcare must ensure that staff record decisions about prisoners' care in accordance with the NMC code of conduct for record keeping.	Accepted	Record keeping and documentation was added as a team meeting agenda item for discussion in December 2018. An email originally sent in January 2017 reminding staff of the NMC code of conduct in relation to record keeping and documentation was reissued in January 2019. Record keeping audits are documented regularly and the results discussed in 1:1 managerial supervision. Staff supervision records have also been audited and demonstrate that the need to include a record of all significant interactions has been discussed and patient records have been interrogated to support the findings. Audit results have improved in relation to record keeping from 67% compliance in August 18 to 100% compliance in September 2018.	Head of Healthcare Completed