



National Offender
Management Service

**Annex to Kent and Sussex
Service Level Agreement
for Prison Services Commissioned
by the National Offender
Management Service from the
Public Sector Provider**

Between

**The National Offender Management
Service as Commissioner and**

Her Majesty's Prison Service

for

Rochester

Local Establishment Annex 2014-15

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This document is the Local Establishment Annex 2014-15 to the Kent & Sussex Regional SLA 2014-17. The Regional SLA, including this Annex, has been agreed between NOMS commissioners and the Deputy Director of Custody and signed by both parties confirming the agreement.

Section 1: Service Overview

From the **Commencement Date**, **HMPS** will deliver offender services as set out in this **SLA** and applicable **NOMS service specifications**. Additional commissioning arrangements with the YJB will be described within the National YJB SLA.

1. Establishment Details

Table 1: Establishment Details	
Establishment name	HMP & YOI Rochester
Establishment type	Trainer resettlement & YOI
Specialist function	
Security Category/ Categories:	Category C or lower/ Young Adults suitable for closed conditions or lower (not restricted status)
Annual Operating Price	12,772,560

2. Establishment Population

HMPS shall provide the Operational Capacity and Certified Normal Accommodation (CNA) at the **Establishment**, as recorded in the table below. There is a legal requirement for any variations to Operational Capacity or CNA to be approved through the cell certification process set out in PSI 17/2012 Certified Prisoner Accommodation. Where there is a material difference between the commissioned Operational Capacity and CNA recorded in the table below and the certified levels, the **Notice of Change** process must be followed.

Table 2a: Capacity Specification	
Certified Normal Accommodation	742
Operational Capacity	802

Any restrictions in the establishment's allocation criteria must be recorded in the Population Specification in the table below. Material changes to the Population Specification must be agreed between the **Commissioner** and **HMPS** in advance of the change in population, using the **Notice of Change** process.

Table 2b: Population Allocation Specification

Gender:	Male prisoners only
Age:	Adults (21 and over) and Young Adults (18-21)
Security Category:	Category C or lower/ Young Adults suitable for closed conditions or lower (not restricted status)
Sentence Status:	Sentenced prisoners
Sentence Length / Type:	No restrictions 38% Resettlement
Offence Type:	No restrictions
Nationality:	No restrictions

The assumptions of the **Commissioner** regarding the origins of the **Establishment's** population, the estimated numbers comprising each population segment and any specialist function are as recorded in the tables below. Some variance is always to be expected in the Population Assumptions, but where there is a material change between the assumptions recorded in the table below and the actual population held at the **Establishment**, the **Notice of Change** process must be followed.

Table 2c: Population Assumptions – Origin of the Population

HMP & YOI Rochester is a Young Offender Institution holding male young adults aged 18 and over. The population is mainly comprised of longer sentenced determinate young adults. This establishment mostly holds young adults sentenced at courts in the London and the South East regions and receives most of its population from other YOIs, particularly Elmley.

Table 2d: Population Assumptions – Estimated Background of the Population

Table 2d: Population Assumptions – Estimated Background of the Population							
OCTOBER 2014							
	Cat A	Cat B	Cat C	Cat D	Male YO	Other	Total
Prisoners on remand, convicted unsentenced, or sentenced uncategorised	N/A	N/A	N/A	N/A	N/A	N/A	0
Prisoners sentenced to less than 12 months	N/A	N/A	N/A	N/A	10	N/A	10
Determinate prisoners serving 12 months or more but less than 4 years	N/A	N/A	349	N/A	40	N/A	389
Determinate prisoners serving more than 4 years	N/A	N/A	30	N/A	N/A	N/A	30
Indeterminate prisoners	N/A	N/A	3	N/A	N/A	N/A	3
Determinate and indeterminate Recallees	N/A	N/A	40	N/A	N/A	N/A	40
Non-criminals	N/A	N/A	N/A	N/A	N/A	N/A	0
Resettlement	N/A	N/A	197	N/A	53	N/A	250
Discretionary	N/A	N/A	80	N/A	N/A	N/A	80
Total	0	0	699	0	103	0	802
Resettlement	Yes	Reset %		30+8%	Reset No.		197+53 YO
Specialist Function							

SECTION 2: ESTABLISHMENT DELIVERY

Table 3: Local Response to Commissioning Intentions	
CI Title & No.	Response to Commissioning Intention
1 <u>Enhance public protection and ensure a safe, decent environment and rehabilitative culture</u>	<p><i>1a) There is a sense of purpose in relation to rehabilitation, desistance, and progression through a sentence which is shared and understood by all who work with offenders.</i></p> <p>Rochester has a clear purpose and takes responsibility to protect the public and reduce reoffending. The implementation of both the population reconfiguration and the TTG model will ensure that there are effective offender flows throughout the system and that progression is optimised where appropriate. This will be supported by effective risk assessment systems and ongoing needs analysis and built within a reducing re-offending strategy.</p> <p>Rehabilitation, desistance and progressions will be implemented into the culture at Rochester and future TTG providers, to ensure the needs analysis, risk assessment and enabling environment is build into sentence progression.</p> <p>This is core work of the Chaplaincy. Through our modelling of behaviour, through our corporate acts of worship and meditation, and through our classes, we are aiming at deep transformation of people's lives, which leads to desistance, amongst other things.</p> <p>The Chaplaincy also works on developing contacts in places where people are being resettled, sometimes being able to arrange some of the following: mentoring contacts in the area of the person being released; contacts with local faith communities; employment opportunities; and housing. In all of these, we work with other parts of the prison, strengthening the work of the whole prison.</p> <p>Health services will enhance public protection and the creation of a safe, decent and rehabilitative ethos by delivering the health services specification commissioned for primary care and mental health services and substance misuse services .These will include ;</p> <ul style="list-style-type: none"> • Primary care nursing services. • Pharmacy services to all Kent prisons. • General practitioner services. • Dental services. • Optical services.

- Chronic disease services.
- Access to specialist referral.
- Health promotion services including smoking cessation.
- Assistance in preparation for discharge.
- Mental health practitioner led primary care mental health services and secondary mental healthcare services.
- Improved Access to Psychological services (IAP) including group and one to one based mental health promotion interventions.
- Clinical substance misuse services including opiate substitution and detoxification

Health services will contribute to risk management including MAPPA risk management and to the safer custody risk management of offenders. Health services will work in cooperation with prison services sharing security risk information within the constraints of patient confidentiality balanced with the need to prevent harm to self and others. Health services will attend the safer custody meeting and the resettlement meeting and will seek to have that group take the lead in developing a whole prison approach to health promotion. The Dickens Therapy Centre (Part of the Mental Health Inreach Team will promote and create awareness of their service through ROADSHOWS and this is done quarterly on each wings. Inreach Mental Health staffs also provide mental health awareness training to prison officers.

Health provider teams, pharmacy, primary care, general practice, substance misuse services and mental health services will attend the bi monthly joint services Clinical Governance meeting and the quarterly Kent wide Management Group, being Kent wide to ensure a whole provider approach to clinical quality and clinical safety.

1b) All who work with offenders consistently demonstrate behaviours and attitudes that support rehabilitation and desistance

HMP/YOI Rochester will seek to promote, amongst staff of all grades, a sense of personal responsibility and opportunity to interact with offenders in a way which both models appropriate social behaviour and sets positive expectations regarding offenders capacity to change and desist from offending. Staff within all prisons have a critical role and are empowered to ensure that offenders become and remain motivated to engage whilst in prison through interventions, behaviour, employment and links with family. Offenders who feel a sense of personal investment from staff and receive positive interactions are more likely to experience the environment as safer and may be more responsive to attempts to reduce reoffending. The introduction of the revised IEP arrangements within prison specifically requires both engagement by prisoners in their sentence and positive contribution to the prison community. HMP/YOI Rochester will ensure effective implementation of this policy and will require staff of all grades to acknowledge the progress of offenders through their sentence and create the opportunity for personal support and challenge to be given to prisoners whose risk and social behaviour requires improvement.

The further development of the every contact matters agenda within HMP/YOI Rochester also gives staff the opportunity to enhance their role and purpose at work during a time of ongoing change and challenge. All governors will seek to proactively communicate the message of what matters to staff in their daily engagement, through the development of their strategic objectives and listen to improve exercises. Ongoing monitoring of MQPL and SQL scores will be used to assess the impact of this agenda.

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	<p><i>1c) Efforts are made to ensure offenders experience the environment as safe</i></p> <p>All offenders regardless of their risk of reconviction are likely to benefit from positive relationships with staff, which promote well-being and are consistently constructive. Helping offenders to develop new pro-social identities, to desist from criminal behaviours and to develop hope that they can change, in a safe environment is crucial.</p> <p>HMP Rochester will continue to deliver developmental and role specific training packages for staff to encourage structured and effective communication with offenders.</p> <p>HMP/YOI Rochester will review the prisons MQPL reports completed in 2013 in order to capture the feelings of perceived safety by prisoners. This will enable the sharing of good practice or the targeting of resources where appropriate to assist in establishing a rehabilitative culture.</p> <p>Offenders that regularly have ROTL will continue to have the staff support that a category C regime allows. Personal officer contacts and intelligence is communicated effectively to ensure the safety of all.</p> <p><i>1d – 1g</i></p> <p>See Regional SLA</p>
<p><u>2 Strengthen integration of service delivery between directly funded, co-commissioned providers and wider partners</u></p>	<p><i>2a) Evidence of effective coordination of delivery of services and integration of providers locally, regionally and nationally to maximise outcomes for offenders.</i></p> <p>HMP/YOI Rochester will ensure that all offenders' experience an integrated approach during their sentence where services are combined holistically to ensure the best possible outcomes. Having clear governance structures inter and intra-agency and sharing information appropriately will be placed throughout all of our partnership working arrangements within the prison.</p> <p>HMP/YOI Rochester ensure attendance and participation in all Cluster partnership meetings regarding OLASS and Substance Misuse. Inclusion of all available partners in the development of resettlement services, engagement with De Paul UK Trust, Trail Blazers, St Giles, Serco, TMC, Tribal, CAB and others to ensure as wide a range of experience is applied to developing services for offenders.</p> <p>HMP/YOI Rochester will work with our existing partners and future 'Through the Gate' service partners to support and maximise the delivery of services that reduce re-offending. The integration of service providers is vital to ensure seamless offender management provision. Partnership governance arrangements will be formally agreed to align services so that they can all effectively deliver.</p> <p>Delivery of services will be co-ordinated and integrated via multi-agency forums (e.g. Reducing Reoffending strategy meeting) with data and information being appropriately shared and owned to ensure quality provision.</p> <p>We will work with our partners in developing a shared vision and defined purpose for HMP/YOI Rochester. Providers will continue to be invited to engage in local staff engagement forums and attend weekly management briefings.</p>

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Particular focus will be given in year 1 to Health due to the newly commissioned services transferring to Oxleas NHS Trust from 01 April 2014. As a result of this Health services will strengthen service integration with directly funded and commissioned providers by;

- Participating in the review and refresh of the current health needs assessment.
- Holding a multi agency clinical governance meeting bi monthly including pharmacy, primary care, general practice, substance misuse and mental health services.
- Holding a multi provider complex case review monthly.
- Mental health, primary care and substance misuse services will contribute to safer custody process and attend the safer custody meeting.
- Health services will work in cooperation with prison services sharing security risk information within the constraints of patient confidentiality and primary care and substance misuse services will attend the security meeting.
- Health services will keep "In Possession" policy and practice and medicines management practice under constant review as new information is received to counter prescription medication misuse.
- Pharmacy, primary care, general practice, substance misuse and mental health providers will work together to promote safe prescribing and resist abuse based demands for medication.
- Health services attend the resettlement meeting and will seek to have that group take the lead in developing a whole prison approach to health promotion.
- Health services will work with the arrangements made to enable health services provider input into HMP Rochester Senior Management team.

2b) Facilitate the ongoing operation of mandating day one entry of prison leavers onto the DWP Work Programme and any future changes through the introduction of Universal Credit.

Rochester will continue to support offenders in their reintegration; this will happen regardless of locality and more emphasis will be placed on the transition into the community.

DWP staff (Employment Benefit Advisers) are located within the library facility. They are provided with space for private interviews and have a standalone broadband and telephone line for each member of staff. The EBAs will participate in the regular discharge boards and are provided with data on releases and also have access to P Nomis. EBAs provide a report for the Reducing Re-offending meeting and are able to express any concerns about non attendance for interviews.

The establishment understands that the resources needed by DWP are likely to increase as Universal Credit is rolled out. The need for additional accommodation, telephony and broadband will be considered as part of the move to resettlement prisons.

2c) Work together with NHS England and Public Health England in line with the National Partnership and Co-commissioning Agreement to ensure that NHS commissioned health services (including clinical and non-clinical substance misuse services) in custody support both health and justice outcomes

- Are informed by an up to date HNA taking account of reconfiguration of the custodial estate including the creation of Resettlement prisons
- Support sustainable recovery from addiction to drugs and alcohol and improved mental health dual diagnosis
- Promote continuity of care from the community to custody, between establishments and through the prison gate in partnership with new providers of probation services
- Are implemented alongside efforts to reduce the supply of drugs and alcohol and the diversion of prescribed medication

Health and Substance misuse services are fundamental to the effectiveness of most other intentions that we deliver, therefore the needs-led provision within Kent and Sussex will be embedded, effective and equitable.

HMP/YOI Rochester will continue to actively participate and contribute to the local Health Boards that consider and set the wider health strategic issues along with specific tender information, current provider performance and managing risk. We will continue with this good practice model to ensure that our health partners are fully engaged in the outcomes (health and justice) for offenders. The Health Board specifically tasks the 'prescribing forum' where GPs are included in information, intelligence and decision making regarding prescribing in custody.

HMP/YOI Rochester will continue to develop our drug and phone reduction policy and use the services provided by Kent Police through Operation Shield. We will continue to improve physical security through netting of exercise yards and additional cameras and through further bids to strengthen the security of existing fences.

2d) Work together with local authorities to ensure that the adult offenders and defendants with care and support needs are appropriately identified, their needs are assessed and they are supported to live with decency and as independently as possible; and that arrangements are made for continuity of care when an individual moves

HMP/YOI Rochester will assist and support Kent & Sussex Region in strengthening and embedding relationships with local authorities responsible for adult social care and will engage with Commissioners to procure the new services from 2015 to enable continuity of care between establishments and those who are released from custody.

We will work towards a specific set of aims which will include:

Sharing of information when a person is committed to custody
 Assessing need when in custody
 Procuring appropriate equipment
 Ensuring care transfers between establishments
 Planning for release

	<p><i>2e) Work with local authorities to promote inclusion of, and maximise benefits to, offenders' families</i></p> <p>HMP/YOI Rochester will actively engage with third sector provision and future TTG providers to offer specific family intentions that are needed and enable these services within our prison.</p> <p><i>2f) Continue to improve access to a pathway of new and existing services for offenders with severe personality disorders. Services are primarily targeted at men who present a high risk of serious harm to others and women who present a high risk of committing further violent, sexual or serious criminal damage offences. Services are co-commissioned with NHS England Specialised Commissioning to support health and justice outcomes.</i></p> <p>Not applicable</p> <p><i>2g) Align Services with the Offender Learning and Skills Service (OLASS 4) providers in prisons. Put in place local partnership working arrangements and determine what learning opportunities will be offered in each prison. Support initiatives to make prisons places of work and strengthen the focus on employability. Enhance access to mainstream learning and employment services for offenders on return to the community.</i></p> <p>OLASS 4 partnership arrangements are well embedded at HMP/YOI Rochester with clear governance procedures. Curriculum reviews are regular and ongoing to ensure that needs are met with a changing population but also with changing employment opportunities upon release.</p> <p>Effective local partnerships with employment focused charity Changing Paths giving a transition from custody to gainful employment in construction and catering is in place. Stone Masonry apprenticeships and further opportunities for offenders to continue this unique training following release.</p> <p>Employer engagement events have been successful in the last year delivered in partnership With The Manchester College and a fairer chance charity. Links to national employers such as Sainsbury, Timpson's and London based construction companies have been secured through these events. Events are planned twice a year.</p> <p>All Local and national LMI data is discussed with The Manchester college and NCS providers to ensure the curriculum meets the local opportunities for employment. This is published on the resettlement wing and in education and training environments.</p> <p>Identification of basic skills needs and addressing those needs, for those who require support is a priority of OLASS4. with all offenders being subject to BSA testing within the first week at Rochester so that all prisoners can fully engage with a prison's rehabilitative regime and the increased focus on vocational skills development set out in <i>Making Prisons Work</i>.</p> <p>The Activities Hub manager collates and scrutinises the attendance and allocations data weekly to ensure all activity spaces are as full as possible. Regime planning meeting happen weekly with TMC manager, HOLS and Hub manager to align the needs of offenders with the offer of education. This data is presented to SMT and DDC through the hub.</p>
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	<p>Rochester has strong relationship with SFA and funding OESS discussing funding and options for delivery. We have been innovative in our approach to learning and employment opportunities with Youth work and music through IT being developed in the last year.</p> <p><i>2h) Strengthen partnership working to ensure that offenders have access to support and services to both prepare for and enable access to employment.</i></p> <p>We will ensure that our regional model of commercial work is supportive of accessing employment through the gate and will construct better contracts to support the justice outcomes required. HMP/YOI Rochester's industry growth plans will determine the increase that we aspire to achieve 'working prison' status, delivering the employment ethic that is needed for release.</p>
<p>3 <u>Deliver an efficient, quality service</u></p>	<p><i>3a) Target resources on evidence-informed interventions and services which are likely to deliver the best outcomes for the investment. This includes targeting factors shown to be related to NOMS intended outcomes and using a service design which will be effective with the groups which receive it.</i></p> <p>HMP/YOI Rochester is committed to focussing resources on the delivery of evidence informed interventions and services.</p> <p>HMP/YOI Rochester will work closely with Kent & Sussex region to deliver a number of accredited interventions, in order to target instrumental violence, alcohol related violence, domestic abuse, emotional management, general offending behaviour and resettlement needs. The service delivery requirements for accredited interventions have been based on a regional needs analysis (see Commissioning Intentions 4 response). HMP/YOI Rochester will work closely with BDG to implement the optimum delivery model for all accredited interventions delivered.</p> <p>Staff at HMP/YOI Rochester involved in the delivery of interventions and specialist services are competent to deliver the specific work strand and this has been achieved through specific programme training or professional qualification. Ongoing support is provided through on-site individual and group supervision, as well as counselling.</p> <p>The OLASS4 provider will provide skills training, in support of prison work that is available where that work represents real employment opportunities on release, strengthen employer links, and ensure strong links with the DWP's Work Programme.</p> <p>Health services will contribute to the delivery of efficient services by;</p> <ul style="list-style-type: none"> • Delivering the services specified by the commissioner. • Exploring methodologies for enabling patient access to services including making use of the "In cell" telephony and IT capabilities installed at HMP Rochester . • Exploring other modalities for the delivery of specialist and secondary services that reduce the hospital/ health escort requirement. • Promoting personal responsibility for own health. • By developing work force skilled to meet the needs of the population held here. • Health provider teams, pharmacy, primary care, general practice, substance misuse services and mental health services will attend

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	<p>the bi monthly joint services Clinical Governance meeting and the quarterly Kent wide Management Group, being Kent wide to ensure a whole provider approach to clinical quality and clinical safety.</p> <p><i>3b) Have robust quality assurance processes in place to ensure offender services are (i) delivered as they are intended (i.e. with integrity and as planned and designed) and (ii) that they are effective.</i></p> <p>HMP/YOI Rochester has a number of robust quality assurance processes in place across a range of work streams.</p> <p>For accredited interventions there are Compliance (capturing the operational elements) and Clinical audits, as well as on site treatment management oversight to ensure clinical integrity. Data regarding the performance of accredited programme delivery sites is collated on a monthly basis in order to mitigate against risks associated with non delivery. In accordance with Region a review cycle is established to ensure that across the year each prison's proposed non accredited interventions are reviewed.</p> <p>Quality assurance of learning and skills for offenders in custody is continually developed and reviewed at HMP/YOI Rochester. The OLASS4 Governance framework and the Cluster partnership Boards represent the commissioning arrangements of the OLASS4 contract with partner SFA.</p>
<p>4 <u>Ensure delivery is matched to population, purpose and NOMS outcomes</u></p>	<p><i>4a) Use segmentation and local data sources to target resources for rehabilitation services, case management and risk management where they will deliver the greatest outcomes for investment.</i></p> <p>Segmentation data and local data sources will be used to best target resources within HMP/YOI Rochester. The completion of a Regional offender needs analysis for accredited interventions has enabled an evidence-informed approach to setting service delivery requirements. The delivery site will select offenders whom meet each programme's risk and need criteria, based on; likelihood of any reconviction, risk of serious harm, risk of violent reconviction, risk of sexual reconviction, and priority access for indeterminate sentenced prisoners.</p> <p>Action plans are in place to ensure OASys backlogs are addressed in order to ensure that risks and needs are being assessed to inform rehabilitation services need but much of this requires additional support from sending establishments.</p> <p>The Sycamore Tree (victim awareness) Programme is only available to people who have committed certain sorts of crimes. For example, it is not suitable for sex offenders or perpetrators of domestic violence. However there is sufficient needs based evidence that the programme is suitable for the offender population at Rochester.</p> <p>Health services will ensure that delivery is matched to the population by:</p> <ul style="list-style-type: none"> • Carrying out a review of the current health needs assessment and developing services to match the age profile of the population. • Developing services to meet the needs of older offenders. • Develop services to meet the prevalence of chronic diseases within the offender population held at HMP Rochester. • Ensure that the health needs of the under 21 years old population are met.

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	<ul style="list-style-type: none"> By developing a work force skilled to meet the needs of the population held here
<p>5 <u>Ensure that delivery of services is responsive to individual needs and characteristics to maximise outcomes</u></p>	<p><i>5a) Individual needs and characteristics are effectively identified, assessed for significance and monitored.</i></p> <p>HMP/YOI Rochester is committed to ensuring that an individual offenders needs and characteristics are initially recorded appropriately using P-NOMIS from their first night in custody.</p> <p>We have a number of standard processes for identification and assessment of individual needs within first days in custody which include healthcare screening, education assessments, equalities questionnaires, safer custody and cell sharing risk assessments. In addition we recognise that a number of offenders may have possible unidentified learning disabilities and mental health problems. To meet this need we have additional screening and assessment arrangements in place for these areas of need and strategies for sharing assessment information across partners. These processes are monitored to ensure they are of a good standard and delivered as expected. The results are used to develop individual plans where offender needs are identified.</p> <p>Individual needs are monitored through a range of tools such as the OASys sentence plans, ACCT plans, Care plans and Individual learner plans. In addition we monitor the needs of our populations against the services and activities received in order to ensure that appropriate services and interventions are in place and adapted to meet needs, and to ensure that groups with particular characteristics are not discriminated against.</p> <p>Individual needs may arise from enduring characteristics such as age, ethnicity or disabilities or could be more temporary, for example bereavement or depression. We ensure that our staff have adequate training so that they are able to identify offenders who may need additional support and can take appropriate action.</p> <p>Health services will ensure that delivery is responsive to the needs of the individual by:</p> <ul style="list-style-type: none"> Conducting an interview at the point of reception recorded into the medical notes. Maintaining clear and concise and accurate medical records completed as part of each encounter. Listening to what patients tell us. Listening to patients via a confidential complaints process. Holding consultative meetings with health care representatives as part of the offender council Asking for the completion of an exit survey prior to release. Developing a work force skilled to meet the needs of the population held. Service providers identifying and mapping care pathways for offenders related to specific conditions and needs. Service providers working together to integrated the care pathways identified and ensuring cooperative joint working to ensure integrated care.

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	<p><i>5b) Information on individual need and characteristics is used to sequence and adapt service to individual need.</i></p> <p>At HMP/YOI Rochester we will adopt a standardised approach to sequencing which incorporates individuals' needs and characteristics as part of their Offender Management Journey. We recognise that many offenders will require access to specific services before part or all of their risk factors can be effectively tackled.</p> <p>Protected Characteristics have historically been more difficult to capture and data has been sporadic depending on the openness of the offender, however we do know that the use of peer support is particularly effective when declaration of such information is given. Alongside our staff, we will better up-skill our peer mentors to allow them to gain a fuller understanding of Protective Characteristics and how this information can be particularly sensitive to each individual.</p> <p>The information gathered can then ensure a 'tailoring' of services via sequencing, resulting in the most effective intervention type and style being delivered to each offender.</p> <p>Information gained is then used to develop an individualised plan which adapts and sequences services to maximise the benefit to the offender using OASys which is monitored annually or when a significant change occurs. Additional reviews will occur if necessary.</p> <p>Staff receive information and training to support them in recognising barriers to engagement that may arise owing to factors such as age, sexuality, disability, intellectual function, etc.</p> <p>Within accredited programmes, responsivity interviews are utilised, in order to enable the treatment manager to focus on ways to make inclusion possible. Areas considered include; intellectual ability, language, literacy, dyslexia, mental and physical health, psychopathic traits and disability. Within the higher intensity programmes, an assessment of cognitive functioning is completed where there are concerns that the offender's level of intellectual functioning may prevent meaningful engagement with the material or may cause difficulty coping in the group setting.</p> <p>We will work with partners to recognise any additional needs of the population and with them plan the provision accordingly, maximising any external funding opportunities to support the additional need.</p> <p>The Chaplaincy will shape its programmes around the religious needs of the population at any particular time. We have a strong core team that represents the core of the population, and we draw on Chaplains of all the faiths recognised by the Prison Service as the need arises.</p>
<p>6 <u><i>Deliver priority national and specialist services</i></u></p>	<p>6a) In relation to NOMS' approach to the identification, assessment and management of extremist offenders, HMP/YOI Rochester will ensure delivery in the key thematic areas of Intelligence Gathering & Management; Offender Management and Public Protection; and Interventions & Resettlement, as assessed by NOMS HQ.</p> <p>HMP/YOI Rochester will also ensure that any recommendations related to the identification, assessment and management of extremist</p>

offenders which are identified in year through the NOMS assessment process are implemented within reasonable timescale.

6b) Deliver victim-offender conferences (Restorative Justice) where capacity exists, and develop partnerships and a supportive environment to enable delivery where in-house capacity does not exist.

In-house delivery of Restorative Justice will exist in Rochester and we are committed to embedding delivery over the coming years. We have trained facilitators which will be in place to react to a referral generated by the Kent approach to RJ (Multi-agency referral system). We recognise the importance of face to face RJ where appropriate. We have a local policy in place which formalises our partnerships with Kent Probation, Kent Police, Victim Support and Project Salus and an Information Sharing Agreement to ensure the safe and appropriate movement of data between and amongst appropriate agencies.

6c) Ensure the efficient use of prison places through the development and implementation of local bail strategies and use of HDC for appropriate offenders , including making full use of Bail Accommodation and Support Service.

Rochester will, through continually improving risk assessment processes and continuation of HDC and ROTL boards, ensure that offenders suitable for HDC, BASS and community services will be identified and assessed at the earliest opportunity. The need to prioritise rehabilitation and effective use of the custodial estate will be balanced in all cases with public protection concerns and the need to maintain public confidence. HDC referrals and approvals will be made within the guidance of the existing PSO.

Prisons will contribute where appropriate to case reviews of further offending whilst on HDC and will share results and lessons learnt, incorporating inter-departmental working as best practice

Rochester will ensure the implementation of the Bail Services specification. Rochester will promote the availability of Bail Accommodation and support services and will ensure that staff and offenders are aware of the process for access to this provision. Utilisation of these services will be monitored and reasons for declining or increasing levels will be explored.

Rochester is committed, where appropriate, to fully utilise the services of Stoneham BASS for release on HDC.

HMP/YOI Rochester will ensure HDC releases are reviewed to record the completion of the HDC period.

6d) Increase the amount of commercial and economically beneficial work in prisons undertaken by prisoners.

As part of the implementation of New Ways of Working HMP & YOI Rochester will deliver their agreed revised core day regime, which supports the development of a 'working week' for offenders. In addition to this we will enhance the current workshop capacities whilst exploring the opportunities to expand workshops where appropriate on a cost neutral basis.

For this to be effective we will work in partnership with ONE3ONE solutions and will endeavour to source additional commercial work by actively engaging local businesses to increase the work/workspaces available to offenders within the establishment. To ensure compliance with State Aid requirements the work will be appropriately priced for the individual contract agreed. All additional commercial work and

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	<p>contracts will support a regional model of business development as well as being subject to the terms of the Code of Practice.</p> <p>Rochester will conduct effective needs analysis to enable appropriate employment engagement events in partnership with external agencies, stakeholders, national recognised employers as well as local employers. Employment events will promote good practice, training and skills options and sustainable employment opportunities.</p> <p>Rochester will maximise the allocation of education and workshop places and improve the attendance by monitoring closely the attendance rate of the offenders in both the classroom and workshop areas. We will provide a 'working prison' model and increase the retention and success rates.</p> <p><i>6e) Support the delivery of efficiencies across the criminal justice system by increasing the use of prison video links.</i></p> <p>The use of video link has a number of mutual benefits for prisons, courts and other CJS Partners including improved security through reduced escorts, more efficient court sittings and Justice hearing, reduced escort costs and improved offender welfare.</p> <p>Custodial Manager Pete Walker is the establishment lead for the NOMS video action plan and has established and maintains relationships with the relevant stakeholders. HMP/YOI Rochester is one of the sites that are identified as carrying out oral parole hearing via this medium.</p> <p>HMP/YOI Rochester will continue a strategy for extending use of video conference facilities by November 2014 consistent with the NOMS Video Action Plan, ensuring that use is consistent with type of establishment and makes maximum usage of existing/planned facilities.</p>
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Table 4a: Rehabilitation Services

This table should reflect all NOMS Commissioned and NOMS Co-Commissioned services delivered as part of the Core Rehabilitation Offer. It is assumed all the services described below are available to all prisoners with an identified need: therefore targeting information is not applicable to this section. It is understood that these services may change in year as a result of the Through The Gate competition and tendering process.
Changes to this table will be managed through existing NoC mechanisms.

Rehabilitation Services in Custody	Name of Service Service Description	Commissioning Arrangements (NOMS Locally, Regionally or Co-Commissioned)
Staff support and encourage prisoners to participate fully in rehabilitation services	<ul style="list-style-type: none"> HMP/YOI Rochester have a clear strategic vision including a shared understanding of outcomes and priorities to create a truly rehabilitative culture enabling prisoners to effectively engage with the regime and associated rehabilitative services. Outstanding rehabilitative need is identified and discussed with prisoners incorporating inter-departmental services. Information on this is shared with all who work with the prisoner so that they can be encouraged and supported to engage with appropriate services. Risk management – all staff will make effective use of information sharing (such as the observation book, handover / daily briefing sheets) and monitoring mechanisms as part of their core tasks that contribute to a safe and secure, decent rehabilitative environment. This will also include ensuring use of the structured communication tool within HMP/YOI Rochester At HMP/YOI Rochester we operate an integrated IEP system that ensures all staff and prisoners have the ability to influence attainment levels through engagement with rehabilitative activity. We will work with our regional HRBP to explore how we might embed coaching principles into every day staff interactions. Health services will work to promote self care and personal responsibility. The Dickens Therapy Centre (Part of the Mental Health Inreach Team will promote and create awareness of their service through ROADSHOWS and this is done quarterly on each wing. In reach Mental Health staffs also provide mental health awareness training to prison officers. 	Commissioned in partnership with region

<p>Prisoners are made aware of their responsibilities in engaging with and accessing services</p>	<ul style="list-style-type: none"> • Health services will deliver an induction to all new receptions detailing the services on offer. Primary care services will offer a Wellman clinic and bespoke chronic disease clinics to promote well being and personal responsibility for own health. This will include smoking cessation. The Dickens Therapy Centre (Part of the Mental Health Inreach Team) will promote and create awareness of their service through ROADSHOWS and this is done quarterly on each wing. Inreach Mental Health staffs also provide mental health awareness training to prison officers. • All staff will be made aware of the prison's Statement of Purpose and of our rehabilitative ethos. This is reflected in their contracts, job descriptions and via the SPDR process. • Through our Every Contact Matters agenda we will aim to ensure prisoners receive consistent messages. • The Chaplaincy plays a full part in the induction process for new receptions, encouraging them to take part in the full range of activities available in the prison for their welfare and rehabilitation. 	
<p>Prisoners anti social attitudes, thinking and behaviours are addressed by staff through pro social interaction and engagement</p>	<ul style="list-style-type: none"> • We will take active measures to promote and improve understanding of the importance of demonstrating pro-social behaviours and attitudes at all levels, and use existing internal communication and line management arrangements to help embed effective practice and encourage a culture of continuous improvement • We have ensured there are clear links between the new Competency Framework incorporating this ethos into the SPDR review process. • We will measure the impact we are having through assessing trends in adjudications, violence management and MDT data via the performance hub data available. • We will embed a Structured Communication tool throughout the establishment to ensure more consistent and meaningful engagement between staff and prisoners. • At Rochester, a prisoner council exists, encouraging good practice and aiding unity across different units/departments within the prison – this enables us to identify where we may need to develop further, positive staff interaction with prisoners. • Health services staff will challenge anti social behaviour as it is exhibited by offenders accessing health services and during the process of delivering health services. Health services personnel will use the IEP, VR and governors report processes available to them. • Health services staff's will model appropriate behaviour and will treat patients with respect and will take time to listen, treat prisoners fairly, avoid labelling, and encourage motivation and hope 	

<p>Prisoners can access appropriate services that enable them to seek suitable employment and/or training for release.</p>	<ul style="list-style-type: none"> • Employment and Benefit advisors – All offenders are assessed on induction and again prior to release regarding their need for employment advocacy or benefit advice through NCA and JCP contractors. • OLASS provision of Key and Basic skills are a priority to engage with those assessed below level 2. Those offenders will be directed to education to discuss options for meeting their needs. • Toe by Toe peer mentoring reading scheme to support low level readers in custody. • TMC education employability classes run throughout the year dependant on need to ensure all offenders identified have understanding of disclosure and law pertaining to offenders. • Virtual Campus ~ all offenders have access to virtual campus to explore job market and opportunities in their release area. 	
<p>Prisoners can access services that enable them to manage housing needs created as a result of their custody.</p>	<ul style="list-style-type: none"> • Access to De Paul Trust UK Peer Worker (housing advocacy) on induction to highlight needs either in sustaining housing or closing tenancy. Follow up prior to resettlement to ensure housing is in place. • Stonham – housing benefit advice; maintaining tenancy agreements • Housing advice information in resettlement pack • The Chaplaincy is sometimes able to access housing provision in special circumstances, and it coordinates this through working with De Paul. 	<p>National commissioned Contract Co-commissioned local Authority</p>
<p>Prisoners can access services that enable them to seek settled and suitable housing for release.</p>	<ul style="list-style-type: none"> • NACRO – Housing Information and Advice Service - including maintaining tenancy agreements as well as support for securing settled accommodation • Stonham – If required can provide services enabling prisoners manage their accommodation needs in preparation for release • Provision of a housing advice leaflet • Prisoners have access to the contact details for existing community based housing services 	<p>Regional contract co-commissioned National contract commissioned</p>

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<p>Prisoners can access services to enable them to address personal financial management issues created as a result of their custody.</p>	<ul style="list-style-type: none"> • CAB advisors enable prisoners to address any outstanding financial debts. • JCP access all offenders on induction and prior to release in regard to benefits. • DWP - Assistance to close down and reinstate benefit claims • CAB and DePaul Trust UK advisors enable prisoners to make contact and arrangements with creditors or dependents where payment schedules are likely to be affected. • All offenders have access to advise from CAB weekly surgery with support from DePaul Trust worker for low level interventions • Basic bank accounts are available through HSBC prior to resettlement • Complex cases are taken on by CAB and seen through to closure. 	<p>National contract with CAB</p> <p>Local commissioning arrangements /agreements</p> <p>Banking partnership with HSBC</p> <p>Locally Commissioned provider</p>
<p>Prisoners can access available services which enable them to address their family welfare and family support needs.</p>	<ul style="list-style-type: none"> • Domestic Visits • Prisoners are signposted to community based services that support prisoners' families through CAB and social services advisors to ensure assistance is provided to families whilst in custody. • All offenders have access to family worker and peer worker on induction to highlight any need. This worker is the contact for social services. • Family events are planned throughout the year and separate family visits are held weekly. • Various interventions with partners are planned such as Bumps to babies, Family sports events in the summer and creative projects in partnership with Create (Story books for children from Dad) throughout the year. 	<p>Locally commissioned services</p> <p>CAB Family worker Resettlement</p>

<p>Prisoners have equivalence of access to health services in custody as in the community.</p>	<ul style="list-style-type: none"> • On reception, prisoners current health needs assessment is reviewed, prisoners are subsequently signposted and supported in tackling any additionally identified needs <p>Health services will ensure patient have equivalent access to health services by delivering ;</p> <ul style="list-style-type: none"> • An initial assessment on reception • An induction process to explain the health services on offer • Timely access to primary care nursing services. • Timely access to access to general practice consultation • Timely access to dental and optical services • Prescribing from an agreed formulary based on national guidance. • Secondary care referral will be made to specialist external services based on the same clinical criteria that would guide the referral were the patient at liberty. • Patients referred to external specialist services will be referred within the same two week and eighteen week referral pathways that would apply if the patient was at liberty. • Mental health services provider will deliver services as commissioned including access to a gate keeper primary care mental health practitioner and onward referral as need identifies to a secondary care mental health practitioner, consultant psychiatrist and to psychological services. • Access waiting times will be maintained within the time frames set out by the commissioned specification. • The specified substance misuse services. • Prior to discharge patients will be assisted to make contact with services in their home area. • Upon request prisoners are provided the contact details for existing community health related services • Prisoners have access to Primary and Secondary health services, including mental health services, commissioned through Health including: Doctor-GP service, Dentist, Nursing care, Optician, Physiotherapy 	<p>National commissioned England Co-NHS</p> <p>Local Authority Director Public Health Co-commissioned</p> <p>Locally Co-commissioned</p>
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Prisoners can access treatment, services, advice and support around drug and alcohol needs.	<ul style="list-style-type: none"> On reception, all prisoners have an individual health assessment. Essential immediate clinical needs are met. Stabilisation, detoxification and observation are undertaken as appropriate. The prison is engaged with NHS England in order to ensure that prisoner needs are understood and the commissioning strategy is suitable. Prisoners have access to the contact details for services that can support them with their drug and alcohol needs RAPT substance misuse contractor will interview all inductions to gauge level of interventions needed, various interventions in place including short substance awareness programmes up to 12 step programme. The generation of a substance recovery wing will polarise this provision to encourage community support from peers and ensure support is available easily. NA, AA, CA meetings are available for all those wishing to engage. Access to all support services are given to those prior to resettlement 	<p>National Co-commissioned NHS England</p> <p>Local Authority Director Public Health Co-commissioned</p> <p>Co-commissioned as appropriate</p> <p>local Commissioned / Co-commissioned</p>
Prisoners who have experienced domestic violence, rape or abuse can access services that offer them advice and support.	<ul style="list-style-type: none"> Health services will provide access to counselling and to psychological services including one to one work. Health services will provide access to advice, consultation, testing and treatment for sexually transmitted infections including access to local GUM services. 	Local Authority Co-commissioned
Prisoners who have been sex workers can access services that offer them advice and support.	<ul style="list-style-type: none"> Health services provide access to BBV testing and to advice, consultation testing and treatment for sexually transmitted infections including access to local GUM services 	Local Authority Co-commissioned

Table 4b: Rehabilitation Services - Additional Services Offer

Using segmentation and local data sources to target resources where they will deliver the greatest outcomes for investment - this table should reflect the case management activity, risk management activity and rehabilitative services and interventions, delivered within the establishment which are **additional** to the core offer

Segment	Total no. of Prisoners within Segment <ul style="list-style-type: none"> Use the segmentation data tool on the NOMS Performance HUB to get the numerical data you need to populate this column 	Strategic approach to meeting the needs of the segment Title and description of rehabilitative services/interventions and case management activities <ul style="list-style-type: none"> Give the title and a brief description of the case management activities offered to offenders in each segment Give a brief description of the range of rehabilitative services and interventions offered to offenders by segment. Include any accredited programmes on offer. Use the guidance on targeting in Commissioning Intention 4a If a service or intervention is available across more than one segment (for example – TSP may be available to both sex offenders and violent offenders) then state in each applicable box, making clear in the next column the number of completions relating to each segment. 	Indicate whether the service or intervention is commissioned or co-commissioned and the number of offenders who will be able to access the intervention or service annually <ul style="list-style-type: none"> For accredited programmes give the number of completions It is not necessary to record volumes for case management activities
All Offenders – where service targeted by need rather than risk	802	<ul style="list-style-type: none"> All prison residents have the opportunity to take part in one hour of corporate worship or meditation each week for their registered faith, subject to security assessment. Those who are registered as 'Nil' are allowed to register for the worship event of a particular faith or religion, subject to security assessment. Introductory and Intermediate faith-based courses are available for the religions with major representation in the prison, typically led by employed chaplains. These courses are being re-shaped to have a fixed length, to enable people to be allocated to them for their full duration, and then be able to move on to other activities in the prison. A combined worship session and class is available for religions with a minority representation in the prison, typically led by a sessional chaplain, provided when there is demand for it The Chaplaincy runs a faith-based anger management course, which complements the work of TSP, and is often able to take people who would not be suitable for TSP. It runs for six sessions over six weeks, and we run it 3-6 times a year. We are currently seeking accreditation for this course. 	

		<ul style="list-style-type: none"> The Sycamore Tree (victim awareness) Programme is available to all except sex offenders and people with a record of domestic violence. People are referred by OMU, and some self-refer. We enable the celebration of religious festivals, which helps give a rhythm to the life of offenders, and lifts them out of the daily routine of prison. <p>Alcoholics Anonymous Narcotics Anonymous Cocaine anonymous</p> <p>Independent living module - education course to assist with living skills following release targeted at those with less than 3 months</p> <p>FBD – CAB complex case DePaul UK simple case work with finance issues</p> <p>Family interventions – Bumps to babies, parenting course, first contact visit. Liaison with Social services</p>	<p>Weekly fellowship meetings accessible to all offenders.</p> <p>OLASS TMC ongoing courses throughout the year to cover</p> <p>All those with identified need 1 day per week surgery CAB.</p> <p>All those with identified need 4 courses per year,</p>
Sexual Offenders	0		
Violent offenders	194	<p>Where OASys has not been completed we will prioritise this.</p> <p>TSP for those with OGRs 25-49% as this address their offending behaviour.</p> <p>Resolve will be targeted at those with 50 -74 OGRs.</p> <p>DV offenders will be assessed and if suitable moved to Swaleside for BBR programme.</p>	<p>TSP 27 completions</p> <p>Resolve 36 completions</p>

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Indeterminate Sentenced Prisoners (ISPs)	4	Rochester will increase the number of IPPs requiring category C conditions. Case management of these offenders will require additional training which has been scheduled.	
Low likelihood of any reconviction OGRS 0-24%	83	Core offer plus resettlement options dependant on need identified in assessment.	
Medium likelihood of any reconviction OGRS 25-49%	146	Low intensity Case management will be made available to as many offenders as resources allow. Accommodation, FBD services. Offenders will be assessed for TSP and Resolve although priority will be given to higher OGRs scoring offenders.	Completions TSP ~27 Resolve ~36
High likelihood of any reconviction OGRS 50- 74%	264	Medium intensity case management Priority to be given to those in the last 12 months of sentence in regard to programmes and resettlement needs. Acquisitive offenders in this area with drug treatment needs will be referred to RAPt services. Accommodation partner DePaul support with housing needs. Employment services NCS contract and OLASS to provide employment skills, CV and disclosure training Family contact to be maintained and where appropriate support for family visits.	FOR ~36 for those with under 4 yrs sentence who meet the criteria. 4 courses per year in partnership with TMC and NCS linked to JCP and Job Deal partners. Weekly visit available with support in case work.
Very high likelihood of any reconviction OGRS 75-89%	136	Any drug use needs referred to RAPt services Prioritised resettlement services as core offer. Assessed for all available programmes with priority to release date. Priority for employment and accommodation services.	Resolve 36, ARV 27, FOR 27 and TSP 27 where non acquisitive, suitably assessed for programme.
Extremely high likelihood of any reconviction (prolific) OGRS 90-100%	15	High intensity case management through OS. Priority for all services.	

Table 5: Accredited Programmes provided in the establishment		
Does this establishment deliver NOMs Commissioned accredited programmes?		Yes
Name of accredited programme	Number of agreed starts (expected for 2014-15)	Number of agreed completions (planned total for 2014-15)
Living Skills Programmes		
Thinking Skills Programme (TSP)	30	27
Focus on Resettlement (FOR)	20	18
RESOLVE	60	54
Total	110	99

Table 6: Development Objective

CI Title & No.	Objective: Describe a SMART objective including what you want to achieve how you will measure your success and key milestones	Does this contribute to a regional objective (yes/no)
1 Enhance public protection and ensure a safe, decent environment and rehabilitative culture	HMP Rochester recognises the importance of dynamic security to maintaining a positive community and also appreciates the risk that reductions in staffing levels could adversely impact on the "presence" of staff. This will be mitigated by encouraging strong positive relationships (both between staff and prisoners and between staff and their managers) 2014/15 HMP Rochester will implement and embed the "Structured Communication Toolkit" which will support the development of positive prisoner-staff relationships and promote the concept of "Every Contact Matters". This will support dynamic security and the fostering of a safe and decent environment	No
1 Enhance public protection and ensure a safe, decent environment and rehabilitative culture 2 Strengthen integration of service delivery between directly funded, co commissioned providers and wider partners	In order to reduce the levels of drug use within the prison HMP & YOI Rochester will pursue a zero tolerance approach to drug use incorporating the following: <ol style="list-style-type: none"> 1. a drug recovery wing, (embed recovery culture throughout 14/15) 2. a clearly published zero tolerance commitment, (published with effect from 01 April 2014) 3. more punitive sanctions via adjudications, (commenced during Q4 13/14 and ongoing through 14/15) 4. a supportive multi disciplinary board chaired by the Governor involving offenders who provide positive MDT test results, Head of Security and RAPT/CNWL workers. (To commence in April 14 and reviewed in October 14) Success will be measured by achieving the MDT target and by regular monitoring of intelligence relating to drug availability within the prison. An anticipated MQPL survey during 14/15 will also provide an independent measure.	No
1 Enhance public protection and ensure a safe, decent environment and rehabilitative culture	HMP & YOI Rochester will seek to input into the national strategy regarding the management of legal highs and will introduce and share best practice across the region. We will seek to become Pilot Sites for testing arrangements as soon as these become available. Timescales to be agreed based on developments of national strategy.	Yes
1 Enhance public protection and ensure a safe, decent environment and rehabilitative culture	First applications for ROTL will have completed a full ROTL 4 and each subsequent request for town visits, overnights and work progression will have an updated report and sit the risk management board. (by October 1014)	
2 Strengthen integration of service delivery between directly funded, co commissioned providers and wider partners	On completion of the commissioning of primary health and pharmacy services HMP & YOI Rochester will support the new providers in developing and embedding their approach to the delivery of these services from April 2014. Progress will be monitored via the clinical governance and partnership board arrangements as agreed with NHS England as part of the commissioning process	No

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3 Deliver and Efficient Quality Service	By November the prison will review <u>the type</u> of strategies it employs, and the services and interventions it offers to ensure that the approaches being used are ones which are effective with the type of offenders that receive them, and that <u>the factors</u> being targeted for change are related to desistance, reduced reoffending and public protection, or a reduction in harmful institutional behaviour. It will draw on local data and evidence, including that provided within the NOMS Evidence and Segmentation Companion Document (available at www.justice.gov.uk/about/noms/commissioning .) when completing these reviews and have in place a strategy for developing its use of evidence to inform practice to maximise outcomes.	No
3 Deliver and Efficient Quality Service	By November the prison will develop and implement effective quality assurance processes which indicate whether the services, activity and interventions it provides are of an acceptable standard of quality and are having the impact they are intended to deliver. Information from these processes will be regularly reviewed by the senior management team and specific members of staff will be given responsibility for the QA processes and following through on actions identified in the reviews.	No
4 Ensure delivery is matched to population, purpose and NOMS outcomes	To ensure the effective transition of the population in line with the reconfiguration estate review recommendations during 2014 to support the introduction of TTG arrangements. The effectiveness of population allocations (including high priority groups such as IPPs) will be reviewed quarterly in order to ensure progress and take corrective action where required	Yes
4 Ensure delivery is matched to population, purpose and NOMS outcomes	HMP/YOI Rochester will continuously review its staffing levels throughout the recruitment process for programme facilitators with the view to increasing its commitment on delivery of TSP throughout 14/15.	No
6 Deliver priority national and specialist services	HMP/YOI Rochester will commit to maintain delivery of existing activity hours and will seek to optimise further growth, sourcing additional contracts in 2014/15 and ensuring ongoing growth in 2015/16 until optimal levels of delivery are reached. HMP/YOI Rochester has an agreed growth plan to demonstrate realistic increases in delivery over the next three years, identifying core markets for growth and investment required. The target for 14/15 is to increase activity spaces by 100 full time spaces. The Governor of HMP/YOI Rochester will ensure effective allocation arrangements, ensure regular quality assurance checks are maintained and monitor regime take up in work areas to ensure that offenders attend work. This will be supported by the use of IEP at HMP/YOI Rochester.	No
6 Deliver priority national or specialist services.	HMP Rochester will develop and implement a plan by 31 March 2015 for the creation of a supportive environment which will enable delivery of victim-offender conferencing (RJ). The plan will focus on developing; <ul style="list-style-type: none"> • Awareness of RJ amongst relevant staff groups • Partnerships with organisations and local commissioners to support delivery of RJ • Infrastructure to support delivery, including development of; • A single point of contact for RJ • Agreed referral processes with partners • Processes which contribute to suitability and risk assessments • Appropriate gate procedures for entry into the prison of victims and other participants 	No

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	<ul style="list-style-type: none">• Appropriate rooms are available for the conference to take place• Integration of RJ into sentence planning	
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Table 7a: Mandatory Service specifications applicable under this Local Annex

The following specifications are mandatory for all establishments.
 For the full list of NOMS Service Specifications, please refer to the Ministry of Justice website:
<http://www.justice.gov.uk/about/noms/noms-directory-of-services-and-specifications.htm>

	Service Specification	Implementation detail	Notes
1	Early Days & Discharge – First Night in Custody	Existing service specification which remains in force	
2	Early Days & Discharge – Induction to Custody	Existing service specification which remains in force	
3	Early Days & Discharge – Reception In	Existing service specification which remains in force	
4	Early Days & Discharge – Discharge	Existing service specification which remains in force	
5	Cell and Area Searching	Existing service specification which remains in force	
6	Catering	Existing service specification which remains in force	
7	Visits – Services for Visitors	Existing service specification which remains in force	
8	Visits – Visits Booking	Existing service specification which remains in force	
9	Visits – Conduct Visits	Existing service specification which remains in force	
10	Prisoner Property Services	Existing service specification which remains in force	
11	POSOE – Communication & Control Rooms	Existing service specification which remains in force	
12	POSOE – Gate Services	Existing service specification which remains in force	
13	POSOE – Internal Prisoner Movements	Existing service specification which remains in force	
14	Residential Services	Existing service specification which remains in force	
15	Nights	Existing service specification which remains in force	
16	Prisoner Discipline and Segregation – Prisoner Discipline Procedures	Existing service specification which remains in force	
17	Prisoner Discipline and Segregation – Segregation of Prisoners	Existing service specification which remains in force	
18	Immigration, Repatriation and Removal Services	Existing service specification which remains in force	
19	Faith and Pastoral Care for Prisoners	Existing service specification which remains in force	
20	Physical Education	Existing service specification which remains in force	
21	Mandatory Drug Testing	Existing service specification which remains in force	
22	Prisoner Communications Services	Existing service specification which remains in force	
23	Management of Prisoners at Risk of Harm to Self or Others	Existing service specification which remains in force	
24	Security Management	Existing service specification which remains in force	
25	Activity Allocation	Existing service specification which remains in force	
26	External Movements and Appearances	Existing service specification which remains in force	
27	Manage Prisoner Finance	Existing service specification which remains in force	

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28	Prisoner Retail	Existing service specification which remains in force	
29	Enablers of national co-commissioned services in prisons	Existing service specification which remains in force	
30	Processing and Resolution of Prisoner Complaints	Existing service specification which remains in force	
31	Manage the Custodial Sentence - Categorisation & Allocation for Custody	Existing service specification which remains in force	
32	Manage the Custodial Sentence - Manage the Sentence Pre & Post Release from Custody	Remains in force until all outputs in new specification (Manage the Custodial and Post Release Periods) go live	
33	Manage the Custodial & Post Release Periods ⁺	Some provisions go live April/May 2014, others from contract award	Outputs 22, 22a and 23 (relating to the new risk escalation process), output 8 (which covers the resettlement needs screening of prisoners and for remand prisoners was previously an output in the Rehabilitation in Custody Specification) and outputs 53/54 (jurisdiction is transferred in/out) will go live April/May 2014. The remainder of the specification will go live at the date of CRC contract award.
34	Rehabilitation Services - In custody	Go live April/May 2014	
35	Bail Accommodation Services (BASS)	Go live April/May 2014	
36	Prisoner Employment, Training & Skills	Existing service specification which remains in force	

⁺ Note: 'Manage the Custodial & Post Release Periods' will replace 'Manage the custodial sentence - Manage the sentence pre & post release from custody', once new legislation in force and CRC contracts awarded.

Table 7b: Service specifications applicable under this Local Annex			
For the following specifications, indicate which are applicable to the establishment by confirming Yes or No			
37	Specialist Units (HSE)	No	Existing service specification which remains in force
38	Bail Services	No	Go live April/May 2014
39	Deliver Accredited Programmes	Yes	Go live April/May 2014
40	Mother & Baby Unit	No	Existing service specification which remains in force
41	Deliver Victim Offender Conferencing (Restorative Justice)	No	Go live April/May 2014

Table 7c: Service Options, above the national minimum		
(which are commissioned under this SLA)		
Service specification	Output(s) commissioned	Service Option Commissioned [YES / NO]
Cell & Area Searching	A risk assessed programme of routine area searching is agreed, documented and completed correctly. HSE only	No
Cell & Area Searching	Assurance is sought through a risk assessed programme of covert testing. Non HSE	Yes
Early Days & Discharge - First Night in Custody	One-to-one welfare support is provided within courts/custody suites to address immediate needs of the prisoner.	Yes
Visits - Conduct Visits	There are facilities for children to participate in supervised play whilst visiting a prisoner	Yes
Visits - Services for Visitors	Visitors are able to purchase snacks and hot/cold drinks prior to the visits period.	Yes
Visits - Services for Visitors	Visitors are able to purchase a meal and hot/cold drinks prior to the visits period.	Yes
Visits - Services for Visitors	Private meetings can be facilitated between visitors and Partner Agencies.	Yes
Visits - Services for Visitors	There are facilities for children to play whilst waiting to visit a prisoner.	Yes
Visits - Services for Visitors	Visitors receive information through a variety of media regarding relevant support services.	Yes
Visits - Services for Visitors	A Family Support Worker is available to support families.	Yes
Faith and Pastoral Care	Prisoners have access to a Resettlement Chaplaincy Scheme.	No
Mandatory Drug Testing	Prisoners found guilty of misuse of Class B and/or Class C drugs or who frequently refuse to comply with MDT testing may be subject to a Frequent Testing Programme.	Yes
Mandatory Drug Testing	Prisoners may be subject to Reception testing.	No
Prisoner Employment, Training & Skills	Prisoners have the opportunity to gain industry recognised and accredited qualifications through employment, training and skills according to risk and need.	Yes
Prisoner Employment, Training & Skills	Qualifications gained are aligned with market needs and within the Qualifications and Credit Framework	Yes
Deliver Accredited Programmes	Competent staff are contributed to the national training provision as agreed by the commissioner. Output wording subject to revision	Yes

Table 7d: Agreed delivery hours for specified services			
Service Specification	Output	Agreed hours	Rationale (where hours are agreed above the minimum set within specifications)
Residential Services	Daily time in open air [minimum 30 minutes] (row 21 of the specification)	(0.5] hours daily	N/A
Physical Education	Minimum number of PE Hours [per week] (row 1 of the specification) (as calculated using the SBC published spreadsheet product)	[2.5] hours weekly	N/A

8. Activity Places (Work and Prison Services)

Table 8a: Agreed Activity Allocation places

Table 8a: CU095a (Hours Worked in Industry) activity places allocation

The content of this table 8a removes the need for an establishment to complete a separate Annual Capacity Forecast (ACF) by documenting the workshop activity details and predicted outputs.

INDUSTRIES (ONE3ONE)										
INDUSTRY SERVICE CODE	WORKSHOP NAME	Maximum number of prisoner places per activity (planned per week total for 2014-15)	TOTAL STAFF NUMBERS	CORE HOURS PER WEEK	Annual Internal Soft Charged Sales Predictions	Annual Internal Hard Charged Sales Predictions	Annual External Sales Predictions	Annual Internal Soft Charged Materials Predictions	Annual Internal Hard Charged Materials Predictions	Annual External Materials Predictions
Enterprise/ contracts services	MNH Headphones	20	1	28	£0	0	£30,250	£0	£0	£0
Industries – Land based activities	Market Gardens	20	5	28	£0	£0	£5,000	£0	£0	£2,000
Enterprise/ contracts services	Plastic recycling	8	2	28	£0	£0	£5,000	£0	£0	£0
Total		48	8	84	£0	£0	£40,250	£0	£0	£2,000

Table 8b: Services (not industries)

Table 8b CU095b (Hours Worked in Services) – this should contain services that are measured under this specific metric			
Activity Service Code	Service Description	Maximum number of prisoner places per activity (planned per week total for 2014-15)	CORE HOURS PER WEEK
HU1 Wing Activities	N/A	0	0
HU2 Wing Activities	N/A	0	0
HU3 Wing Activities	N/A	0	0
HU4 Wing Activities	N/A	0	0
HU5 Wing Activities	N/A	0	0
HU6 Wing Activities	N/A	0	0
Kitchen	Kitchens, Kitchen Admin	18	37.50
Orderly Cleaners	Various departments – library, chapel, IAG, Gyms, Reception etc	27	28.25
Recycling Activity	Waste Management	20	30.25
Weekend Activity	N/A	0	0
Works Department	N/A	0	0
Wing Cleaning	All Wings – Cleaners, Served, Laundry & Painter	108	37.50
Other Occupations	CES, Red Bands, Peer Workers, Mentors, Messengers & Visits	36	28.25
Sub total		209	161.75

Table 8c- other permanent activity places

This will include other permanent weekly activities including OLASS activity places, ROTL places

Table 8c: Other Activities			
This should contain activities that are not in scope of either CU095a (Hours Worked in Industry) or CU095b (Hours Worked in Services) metrics.			
Activity Service Code	Activity Description	Maximum number of FTE prisoner places per activity (planned per week total for 2014-15)	CORE HOURS PER WEEK
Basic Key Skills up to level 2	Numeracy and Literacy classes from E1 –L2 to include Cambridge	40 spaces to be run 9 sessions per week	28.25
Core Education Classes			
Education Induction Assessment	BSA test to be done in conjunction with learning plan linked to NCS assessment	36 spaces in 4 session AM Mon- Thurs.	13
Education leading to accreditation	Employability award Radio production Creative IT General IT IT Practical IT Web Design Book Keeping award Business enterprise Health and Safety Mentoring award Customer Services Virtual Campus IT	120 Full time spaces to be available throughout the year. This will be on a spiky profile with not all courses running concurrently	28.25
PE Leading to QCA Qualifications	Not supported in bench marking profile although we will where possible continue to deliver Football coaching and first aid delivery	Potential to deliver 3 courses per year to 12 per cohort. Dependant on staffing.	28.25

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Skills training leading to Accreditation	All vocational training leading to qualifications through OLASS Brickwork Carpentry Plumbing Industrial Cleaning Painting and Decorating Stone Masonry	62 Full time places in Vocational training leading to level 1 and 2 Qualifications	28.25
ROTL	Michelle Beck	10 x per day Level 1 (Projects) 10 x Tues / Weds/ Thurs – Level 2 (Outside gardens and Works Assist) 3 x Level 2 (Changing Paths) (1 x Stonemasonry, 1 x CP, 1 x Visits Tea Bar) 10 x Level 3 (Timpson's Academy , College and third sector Voluntary) 5 x Level 4 Placements through 2014 (paid travel or wages)	
Prison Induction Courses/Interviews	Pathway driven assessment with all offenders on arrival. Covering family contact, FBD, drug treatment services, ATB, Health and ETE.	Open access to approx 10 per session 9 sessions per week. All peer delivered with support from outside agencies and support workers.	28.25
Other			
Sub total			154.25
Table 8 Total			

Section 3: Regime Outline

The master record of the establishment's regime is on the NOMS Performance Hub and is subject to appropriate governance and change control. This table will document a "snapshot" of the agreed regime set following negotiations between HMPS and the Commissioner and effective at the commencement date of the SLA.

Guidance and Technical Notes relating to the Commissioned Regime Return will be available on the NOMS Performance Hub.

Out of cell session time summary by day

Day	Activity	Association	Domestics	Meal	Movement	Total Time Out of Cell
Mon	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m
Tue	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m
Wed	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m
Thu	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m
Fri	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m
Sat	0h 00m	6h 37m	0h 00m	1h 15m	0h 00m	7h 52m
Sun	0h 00m	6h 37m	0h 00m	1h 15m	0h 00m	7h 52m

5 day average time out of cell

Type	Activity	Association	Domestics	Meal	Movement	Total Time Out of Cell
5-day	6h 03m	0h 00m	1h 15m	0h 45m	0h 52m	8h 56m

7 day average time out of cell

Type	Activity	Association	Domestics	Meal	Movement	Total Time Out of Cell
7-day	4h 19m	1h 53m	0h 53m	0h 53m	0h 37m	8h 37m

Section 4: SLA Delivery Requirements and Levels at Commencement Date –

The master record of the Delivery Requirements and Levels for this SLA is on the NOMS Performance Hub and is subject to appropriate governance and change control. This template will document a “snapshot” of the SLA Delivery Requirements and Levels set following negotiations between HMPS and the Commissioner and effective at the commencement date of the SLA.

Guidance and Technical Notes relating to the SLA Delivery Requirements will be available on the NOMS Performance Hub.

Secure and Decent Custody

		Apr 14	May 14	Jun 14	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Total	Q1	Q2	Q3	Q4	National
CU001	Discharge to Court	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	100.00 %
CU003	Absconds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CU006	CAT A Escapes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CU007	Escapes	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CU016	Mandatory Drug Testing (MDT)	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	9.30 %	
CU031	Control & Restraint (C&R) Training	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	80.00 %	
CU060	Tornado Commitment																		17.00
CU074	MQPL BME Score	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50	16.50
CU056a	Security Audit - Audit & Corporate Assurance (A&CA)	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.56
CU057a	Self Harm Audit (A&CA)	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.40
CU067	HMIP Resettlement	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	2.95
CU075	HMIP Respect	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.79

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		3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
CU077	HMIP Safety	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.92
		3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
CU078	HMIP Purposeful Activity	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.58
		3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
CU076	MQPL Safety	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.84
		3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
CU079	MQPL Decency	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	2.81
		3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
CU088	Violence Management																		

Offender Management

		Apr 14	May 14	Jun 14	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Total	Q1	Q2	Q3	Q4	National
CU002	Release on Temporary Licence (ROTL)	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	100.00 %
CU043	Generic Process (GPP) Parole	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %
CU083	OASys Quality	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %
CU086A	Return of MAPPA F Forms	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %
CU089	ViSOR Effectiveness (Prison)	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %

Interventions

		Apr 14	May 14	Jun 14	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Total	Q1	Q2	Q3	Q4	National
CU019	Sex Offender Treatment Programme (SOTP) Completions																		942
CU021	Offending Behaviour Programme (OBP) Completions													99.00	99.00			99.00	6,456.00

Regimes

		Apr 14	May 14	Jun 14	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Total	Q1	Q2	Q3	Q4	National
CU013	Settled																		

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	Accommodation on Discharge	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %	90.00 %
CU014	Training / Education on Discharge	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %	19.50 %
CU015	Employment on Discharge	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %	26.50 %
CU095a	Hours Worked In Industry																		

General

		Apr 14	May 14	Jun 14	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Total	Q1	Q2	Q3	Q4	National
CR003	Staff Absence Sickness																		
CU036	Correspondence Response Times	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	95.00 %	94.44 %
CU063	Water Consumption																		
CU094	Energy (CO2e) Efficiency																		
CU081	Prison Cost Analysis (PCA)	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3