

# Safety Recovery – CSIP: Key Messages for Governors

## AS WE MOVE INTO RECOVERY, CSIP REMAINS AN IMPORTANT PRIORITY IN ACHIEVING SAFETY OUTCOMES

As the regime starts to open and we see more interactions amongst prisoners, CSIP has a valuable role to play in helping to manage and prevent violence. The attached annex should help you assess where you are at in your prison with CSIP.

### Things to consider as you move forward with CSIP implementation in your prison:

The following serve as **prompts** for you to think about and **take action** on to help implement and embed CSIP effectively in your prison, as you move into recovery. You will have considered these things when first introducing CSIP into your prison, however, recent challenges will most likely have had an impact on things so now would be a **good time to review** to help you prepare for the easing of regime restrictions.

- ✓ **Be clear about where to set the bar for raised risk in your prison**
  - Re-evaluate this in light of current circumstances, taking into account your population and violence levels. As violence levels are lower than what they have been, **now is a good time to use CSIP proactively** to help prevent levels from returning to what they were prior to the pandemic.
  - **Communicate this** to staff so that they are aware.
  - **Review this regularly** as your population and violence levels change.
- ✓ **Set clear roles and responsibilities for your staffing group to achieve a whole prison approach**
  - Ensure that staff across all groups **are clear on their role and responsibility** in relation to CSIP. This will help you to embed and implement CSIP effectively in your prison if everyone works together.
  - **Encourage and foster multi-disciplinary working** both **inside** and **outside** the SIM – consider how your heads of function and other key groups within your prison can help to achieve this.
- ✓ **Take stock of the skills and capabilities across your staffing group**
  - Do you have newer members of staff who do not have experience of using CSIP and may need some upskilling?
  - Would it be beneficial to do something for existing staff to **refresh their knowledge and skills on CSIP**?
  - A range of recently developed materials from the National Safety Team can help you with this.
- ✓ **Create the right culture to embed CSIP**
  - Consider what you can do to ensure that staff understand that **CSIP is a supportive measure** not a punitive one, and what this means in practice when implementing CSIP.
  - Understanding ‘why’ something has happened is just as important as understanding ‘what’ has happened, to ensure that an individual’s risks and triggers can be properly managed and reduced.
  - The [CSIP video](#) developed by the National Safety Team featuring positive experiences from both staff and prisoners can help you to demonstrate how this approach can achieve positive outcomes.
- ✓ **Have an effective Quality Assurance (QA) process in place**
  - QA should be conducted **frequently**.
  - Feedback should be provided to members of staff where appropriate.
  - The learning and trends identified from your QA should inform your broader safety strategy and identify areas for continuous improvement.
  - A QA template developed by the National Safety Team can be used.

**1. Is your establishment running CSIP to pre-COVID levels?**

Yes

No

**2. Have the programmes available to you as interventions been affected by COVID-19?**

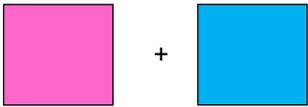
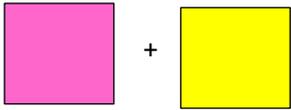
**3. Has activity on CSIP slowed down significantly?**

Yes

No

Yes

No



+

**Please answer question 2**

Yes

No

**4. Is your establishment only offering support to those who had already been placed on a CSIP?**

**5. Are you still conducting referrals, both proactive and reactive?**

Yes

No

**6. Are you still conducting investigations?**

**7. Just reactive?**

Yes

No

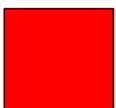


**Please answer question 2**

Yes

No

**Please answer question 2**



**Please answer question 6**



**Please answer question 6**

**This guidance has been constructed to aid establishments in the process of moving through the various stages of unlock. Using the flow chart below, establishments should determine what scenario they have been in during lockdown regarding implementation of CSIP. The guidance below sets out various actions and advice relating to each of these possible scenarios, as well as advice relevant to all prisons in the adult estate.**

### All establishments

While some establishments have been more affected by the impact of COVID-19 than others, the pandemic has impacted on all establishments' ability to deliver a 'normal' regime. With this in mind, certain steps should be taken by all prisons to ensure that delivery of CSIP may continue, or restart, effectively:

1. Assess incidents of violence that took place during lockdown to determine if any trends may need addressing. Consider if any individuals involved in these incidents may benefit from a subsequent referral to CSIP.
2. Consider what stage of implementation your establishment was in prior to lockdown, and how embedding of CSIP may have been affected by the restriction of the regime.
  - If CSIP has been negatively affected and your establishment was at an early stage of embedding CSIP, is this an opportunity to relaunch?
3. Is there a renewed need for staff training/ new comms. on CSIP?
4. Monitor individuals whose CSIPs were closed prior to lockdown; this could be as simple as a conversation to check in with them and see how they are coping.
5. As the regime begins to relax, risk levels will increase in certain areas. These may be identified through referral to Local Safety Threat Assessments. For example, access to contraband may become more possible as establishments return to something like normal, violence may increase due to unpaid debts built up over lockdown and vulnerable prisoners may become more exposed as interactions outside of a wing increase. Establishments should consider ways to mitigate these risks, including specific actions in their RRP (Regime Recovery Plan).
  - When engaging with prisoners, try to make every interaction, however short, meaningful. Use the principles of FMI (Five Minute Intervention) to inform these conversations. Use tasks such as delivering food or medication to a prisoner as an opportunity to check in and ask how they are doing and what they might need.
6. For as long as we continue to live with COVID-19, the risk of reduced staffing levels in establishments will exist. When reintroducing CSIP in the 'new normal', establishments should consider the critical areas of the model that are in need of further resource, as well as those that may be able to operate with limited staffing levels.
7. Is a working SIM meeting still in place? Please see information below on suggested agenda items and suggested attendance list.
8. Conduct quality assurance checks against all CSIP activity from lockdown to ensure that quality hasn't slipped. Take action to remedy any variations.

### **SIM Meeting**

The Safety Intervention Meeting (SIM) is a weekly multi-disciplinary safety risk management meeting, chaired by SMT. It focusses on those who are classed as posing a significant risk to harming themselves or others, and to ensure and provide assurance that individuals are managed and supported appropriately.

It brings together staff and experience from across the prison so that they can work together to identify, manage and mitigate the risks posed by individuals within their establishment who are at a particularly higher risk of causing harm. This can include complex or individuals with particularly challenging behaviours.

#### **The purpose of the SIM is to:**

- Reduce the risk to the establishment posed by the behaviour of those in custody.
- Identify who within the establishment requires active engagement and support.
- Provide a forum for key multi-disciplinary discussions, focussed on the individual's needs.
- Improve information sharing between the relevant departments.
- Identify those who require additional supportive case management.

#### **Suggested agenda items include:**

- Introductions and apologies
- Previous minutes and actions
- Overview of those on open ACCT/exceptional circumstance cases
- Overview of those on CSIP
- Cell Sharing Risk Assessment Reviews (CSRA)
- Segregation Referrals
- Re-cap of actions
- Date and time of next meeting

#### **Membership should include:**

- Head of Residence
- Head of Safer Custody
- Security and Intelligence representative
- OMU representative
- Healthcare representative (mental health, substance misuse, psychology)
- Chaplaincy/Pastoral care representative
- Learning and Skills/Industries representative

### Scenario 1 – Activity on CSIP has slowed down significantly due to COVID-19

At this level, it is necessary for establishments to review activity at each level of the CSIP process.

1. Review all CSIPs that were open prior to lockdown. Have a conversation with the individuals on Plans to hear how they are doing and try to establish whether they have any concerns themselves. Speak to members of staff previously involved in Plans for information on progress made and review any targets or actions that had previously been included and may now need amending. **Record all decisions on NOMIS.**
2. Review any outstanding referrals and investigations (if applicable) and take the appropriate action (refer to CSIP, refer for outside support, no further action etc.)
3. Consider resourcing capacity for CSIP:
  - Are existing Case Managers available to support individuals on CSIP? If staffing is limited, open CSIPs should be prioritised alongside individuals not yet on CSIP plans but who have been identified as at greater risk following lockdown. If existing Case Managers are not available, establishments should consider reallocating CSIP plans on a temporary basis.
  - Does the establishment's Safety team have sufficient staffing levels to function? Ensure that arrangements are in place for referrals to be screened and that appropriate members of staff are able to take decisions around actions and next steps following any referrals and investigations
  - Is there capacity and access for multi-disciplinary input into CSIP plans? If attendance cannot be guaranteed in person, establishments should make it feasible for departments to feed in virtually or in advance of Reviews.
4. Consider how access to external providers, for example, those who provide intervention programmes included in individual Support & Intervention Plans, been affected?
  - a. If access is feasible, an establishment may need to prioritise according to greatest risk and need as access may be limited.
  - b. If access is not feasible, what alternative support may be provided? E.g. written materials, infographics etc.
5. Restart assessment of new arrivals and establish whether they would benefit from a CSIP referral.

### **Scenario 2a – Support only offered for those already on CSIP**

1. Review any outstanding referrals and investigations (if applicable) and take the appropriate action (refer to CSIP, refer for outside support, no further action etc.)
2. Monitor individuals whose CSIPs were closed prior to lockdown; this could be as simple as a conversation to check in with them and see how they are coping.
3. Consider resourcing capacity for CSIP:
  - Are existing Case Managers available to support individuals on CSIP? As well as continuing to support individuals already on CSIP, establishments should also aim to prioritise opening new CSIPs where a need has been identified. If existing Case Managers are not available, establishments should consider reallocating CSIP plans on a temporary basis.
  - Does the establishment's Safety team have sufficient staffing levels to function? Ensure that arrangements are in place for referrals to be screened and that appropriate members of staff are able to take decisions around actions and next steps following any referrals and investigations
  - Is there capacity and access for multi-disciplinary input into CSIP plans? If attendance cannot be guaranteed in person, establishments should make it feasible for departments to feed virtually or in advance of Reviews.
4. Consider how access to external providers, for example, those who provide intervention programmes included in individual Support & Intervention Plans, been affected?
  - If access is feasible, an establishment may need to prioritise according to greatest risk and need as access may be limited.
  - If access is not feasible, what alternative support may be provided? E.g. written materials, infographics etc.
5. Consider how access to interventions run within an establishment have been affected by COVID-19.
  - To what extent can prisoners engage in work? Can shift patterns be edited so that work is still available, even at a decreased level?
  - To what extent can VR reps continue their duties? Are outdoor spaces available for VR reps to conduct conversations?
  - Can video calling be made available for family contact?
6. Restart assessment of new arrivals and establish whether they would benefit from a CSIP referral.

### **Scenario 2b – Establishments only conducting proactive referrals during lockdown**

1. Assess incidents of violence that took place during lockdown to determine if any trends may need addressing. Consider if any individuals involved in these incidents may benefit from a subsequent referral to CSIP.

### **Scenario 2c – Establishments only conducting reactive referrals during lockdown**

1. Restart assessments of new arrivals on Reception and in Early Days to establish whether any would benefit from a CSIP referral.
2. Consider the conversations you have had with individuals during lockdown. Have any of those individuals displayed risk factors which may benefit from a CSIP Plan?

### **Scenario 2d – Paused investigations**

1. Review any outstanding referrals and investigations (if applicable) and take the appropriate action (refer to CSIP, refer for outside support, no further action etc.)
  - Where a backlog is significant, an establishment should prioritise the investigations, ensuring that those that potentially represent a higher or imminent risk (based on the information already available) are conducted first.

### **Scenario 3 – CSIP activity has not been paused at any stage, but certain elements have been affected by COVID-19**

- Consider how access to external providers, for example, those who provide intervention programmes included in individual Support & Intervention Plans, been affected?
  - If access is feasible, an establishment may need to prioritise according to greatest risk and need as access may be limited.
  - If access is not feasible, what alternative support may be provided? E.g. written materials, infographics etc.
- Consider how access to interventions run within an establishment have been affected by COVID-19.
  - To what extent can prisoners engage in work? Can shift patterns be edited so that work is still available, even at a decreased level?
  - To what extent can VR reps continue their duties? Are outdoor spaces available for VR reps to conduct conversations?
  - Can video calling be made available for family contact?