Last year we put in place specific regime mitigations for women due to the disproportionately negative impact COVID regimes were having upon them. Due to our move back to stage three we have relooked at regime mitigations for the women’s estate and we expect the following to be put into place:

**Pin Credit**: We are maintaining the additional £10 which has now been in place for 12 months. It was due to start reducing by £2.50 per month from January but the intention is that this reduction will be put on hold. We are waiting for approval from Phil Copple and I will communicate this as soon as we have it to enable you to communicate with the women.

**Video Calling**: We should be offering at least 2 video calls per month to all women. There is no upper cap and this facility should be made available as appropriate when meeting the needs of individuals.

**OMiC**: Last year we used well being checks to ensure the well being of all of our women. We now have OMiC in place across our Estate. We are not returning to well being checks but asking that you have in place at least fortnightly keywork sessions for all women and weekly equivalent engagement sessions for those of high complexity. (To note that we are working with the OMiC team at the centre to look at this position for stage 4).

**Care for our Most Vulnerable Women**: Unlike last year we are not asking for separate wellbeing checks but instead that you assure that your usual systems are in place to ensure that daily interactions take place for the following women:

* Women in Segregation
* Women on ACCTs
* Those women in early days of custody (this period of daily interaction will need to be longer (we suggest 28  days) for those women for whom it is their first time in custody and also for those  who have received a particularly long sentence).

**Care for Women where there is a change in Circumstances**: OMU staff should be alert to women who have a change in circumstances and a Prison or Probation POM must see all women when they are made aware of these changes. These changes will include (not an exhaustive list):

* After a Court Video Link
* Following a decision at court (delay in process, sentencing or refusal of bail etc)
* After receiving a Parole Outcome
* Changes in Foreign National decisions/ timings

**Pregnant Women**: It is essential that the fortnightly care plan meetings take place for all pregnant women and that individual care plans must take into account the circumstances relating to the restricted regimes.

**£10 Per Prisoner Well Being Fund:** As referenced in the updated regime mitigations notice, we are reintroducing the £10 wellbeing fund per prisoner for Governors to put towards resources and materials for prisoners’ mental health and wellbeing over the festive and new year period, which can be a particularly difficult time in prison.  The wellbeing fund is only available for the rest of this financial year.  There is no approvals process, instead prisons should purchase the items as an approved overspend. It is important that you gain feedback directly from the women in your care regarding how this money is spent. The following link [Wellbeing Fund](https://pogp.hmppsintranet.org.uk/2020/04/15/phone-access/) contains the key information regarding this fund.

**Regime:** Focus groups with women regarding the impact of COVID have taken place in various forms over the last 12 months and we provide the following guidance based upon this learning:

* Listeners and Peer Support should be enabled to provide daily conversations at the door for women; this was well received in prisons where this took place. Maximising the use of listeners and peer support workers is critical during restricted regimes and there contact with women should routinely be used to gain feedback from women about what is helping and what more could be done to help with their wellbeing during this time.
* There must be a concentration upon contact with families and friends – providing women with cards to send out to family and friends was well received. Within this those without significant contact in the outside world should not be forgotten. Last year Listeners, in some prisons, sent Christmas Cards to all women to ensure that no one was left without a Card. This was well received.
* Activities which women can participate in together from within their rooms were seen to be beneficial – bingo and sing-alongs are two examples.
* Providing women with in cell exercise and mindfulness activities to enable them to maintain some fitness whilst within such small spaces for protracted periods.
* PEI’s should facilitate and support time in the open air to also support women in maintaining personal wellbeing and fitness.
* Distraction packs have a role to play but must be appropriate; there was mixed feedback from previous lockdowns. We will provide you with a link to this material as soon as it becomes available.

**Key Work and Well Being Checks for Women:**

* Outside of Stage 4 all Women’s prisons must ensure that key work (and the additional POM time for the complex women) must be provided weekly for all women with daily checks for those women in the priority groups. As a PGD office we will provide regular assurance checks due to the increased risk associated with lack of such interaction during restricted regimes. It is essential that the additional POM time is provided and recorded as this group is the most complex group that we care for.

* At Stage 4 Governor’s should consult with the PGD Office if they are unable to achieve key work and need to move to the well-being check model. A robust assurance structure will need to be agreed with the prison. Those women identified as a priority group will still require daily checks.

It is worth noting that the model that we are requiring differs from the ask in the male estate at stage 4 which does not require the weekly key work for the whole population. As we know the evidence relating to the more negative impact of the restricted regimes upon women require us to respond differently.

**Therapeutic Interventions:**

In light of the ongoing Covid situation, and the need to curtail certain activities and services, we request that you ask your Heads of Healthcare / Mental Health In-Reach Team Leads and WEPS Establishment Lead Psychologists (ELP) / Cluster Lead Psychologists to arrange to review their current ongoing therapeutic or clinical caseloads, with a view to putting contingency plans in place which guard against the potential that individual residents currently accessing the services might be unable to continue to do so.

Learning from previous Covid lockdowns and restricted regimes tells us that it is crucial that we are able to continue to provide the clinical and therapeutic services for the most vulnerable residents in our care, even if this is achieved remotely / virtually. Where existing clinical or therapeutic services cannot continue in the usual way, you should seek assurance from the service providers that they have made alternative arrangements to maintain a level of support / contact with the residents at a frequency which meets clinical need even if it is not the therapist / psychologist who is ordinarily working with them who is maintaining the contact. The overall goal of this approach is to attempt to guard against individual residents suddenly having no access to the services with which they have been engaging, and from which they gain support and stability. Where other service providers / agencies are working at your prisons providing therapeutic input with residents (for example, voluntary counselling services, or as part of a different service under contract with the prison) the prison manager with responsibility for overseeing that service provision or contract should speak to the service provider to establish their contingency arrangements. If prison managers require assistance with this, please suggest that they liaise with the WEPS ELP / Band 9 for your establishment. Clearly to enable this approach to have the desired supporting impact upon the women in our care Governors will need to support the plans by enabling and facilitating access to interview rooms/ video links/ in cell telephony etc.