

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
		Darren Copson	on-going.		
3.18	Custody refresher training should be provided to all staff who works within the custody environment as a matter of course, including topics such as safer custody and child protection.	Sergeant Kevin SWAIN	<p>Criminal Justice trainer appointed in July 2009. New NPIA compliant custody/detention officer course introduced. Refresher training in the form of professional updates (legislation, safer detention and data quality) provided at staff development days.</p> <p>Mandatory refresher training planned every 6 months for all staff to include relevant topics such as child protection issues, mental health, immigration and legislation starting in December 2009.</p> <p>Officer protection and first aid training provided in accordance with Force policy.</p> <p>A structured refresher training programme is in place for all existing custody staff.</p>	Further training needs analysis to be carried out annually.	December 2009 Completed

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3.19	Shift patterns should be reviewed to ensure handovers are factored into all shifts.	Chief Inspector Lloyd WELLS Inspector Darren Copson	See 3.17	See 3.17	April 2010
4.24	Cells adapted for use by detainees with disabilities should be provided.	Chief Inspector Lloyd WELLS Sergeant Phil Hurst	Euston Street is the designated site for detainees with disabilities. It re-opened in October 2009 and has adequate facilities. A walk-through of CU by the Diversity Unit is planned. Diversity Unit contacted waiting for return call from Lesha Smaditch to arrange time and date.	Fresh inspection by the Force Diversity Unit to ensure DDA compliance.	January 2010
4.25	There should be formal policies setting out how staff should deal with juveniles and women held in custody.	Chief Inspector Lloyd WELLS Sergeant	This is largely governed by PACE which CJ Custody staff fully complies with. SOP's and guidance is being developed and will be included	HMIC/HMIP advise an increased level of care and support. A review is required in order to develop a new policy when additional training for all custody staff will be	April 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
		Phil Hurst	<p>in custody refresher training.</p> <p>SOP document being constructed and will be published to custody web as well as retained in hard copy in each suite.</p>	delivered.	
4.26	Closed-circuit television screens should be located in areas that enable easy monitoring.	<p>Inspector Clive THORPE</p> <p>Sergeant Phil Hurst</p>	All analogue CCTV is being replaced by Digital as part of the Safer Detention Programme. CCTV monitors have been placed in positions to enable them to be viewed easily.	Following HMIC/HMIP feedback a review of monitoring stations is required and if necessary modifications will need to be made.	April 2010
4.27	All cells should be fit for purpose and free of ligature points.	Chief Inspector Lloyd WELLS	<p>Following the HMIC/HMIP 'hot' de-brief, remedial works were undertaken at the 5 primary custody suites and NC, NR and SH secondary sites were de-commissioned. Euston Street has now re-opened and the ligature risks identified have been rectified. Further work to CK, SW, NL and CB is on-going.</p> <p>Although not fully complete, remedial work to remove ligature risks at all sites has</p>	<p>As part of Safer Detention Project, plans were in place to refurbish NL and CB cell blocks. Latterly the HMIC Inspection has raised critical multiple ligature points which forms part of the revised refurbishment plan which has been ratified by COG to address the threat, harm and risk issues within the custody estate.</p> <p>Door modifications to be agreed with supplier (Cell</p>	January 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			been undertaken. The upgrades to CB and NL planned in 2010 include a more permanent solution.	Security).	
4.28	Health and safety walk-throughs should take place daily.	Aldona ANDREW MSO	Walk throughs introduced as part of Safer Detention and completed by staff at all sites. The regime needs to be more robust and a system introduced to ensure daily/weekly/monthly and quarterly inspections are carried out. The number of daily inspections has improved significantly and is now included as a priority in CJ APEX.	To be enforced by PACE Inspectors and system to be developed to ensure failures are brought to the attention of appropriate Manager(s) asap.	December 2009
4.29	Use of force should be monitored centrally to identify any issues or trends.	Superintendent Jay BALL	The 'use of force' form was removed from circulation by the Head of PSD a few years ago and records are maintained in pocket books, custody records and on HS3's. However, the current practice does not allow for trends etc to be centrally monitored.	Review Force Policy and re implement central governance.	January 2010

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			PSD are in the process of introducing a new 'use of force' monitoring policy.		
4.30	The reasons for the deployment of incapacitants sprays in custody should be recorded in custody records and centrally. Managers should quality assure such usage and satisfy themselves as to appropriateness, proportionality and any health and safety issues.	Aldona ANDREW MSO	The current Force policy is to record the use of force, including the use of incapacitants on the custody record, in pocket books and HS3's. See 4.29 regarding a review of 'use of force' recording. See 4.29	HS3 completion policy to be reinforced.	January 2010
4.31	The physical conditions of suites at Beaumont Leys and Coalville should be clean and in a good state of repair.	Chief Inspector Lloyd WELLS	Coalville has been de-commissioned. Beaumont Leys is to be refurbished as part of the Force Safer Detention Project. Plans to up-grade Beaumont have been agreed with a view to starting work spring 2010. Currently a secondary site and is maintained fit for purpose (clean and tidy).	See 4.27	April 2010
4.32	Booking in desks should not be too high and should afford privacy to detainees.	Chief Inspector	The size of the booking in area at all suites is governed by the	Review the counter design and make modifications if	April 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
		Lloyd WELLS	<p>existing layout.</p> <p>An H&S and Estate review of the custody counters has been undertaken. No recommendation for change, the height of the custody desks controls risk associated with violent detainees. The H&S risk to staff working behind the high counters is very low.</p> <p>Comments taken into account in up-grades to Beaumont and Loughborough.</p>	required/able.	Completed
4.33	On an individual assessed basis, nicotine replacement should be available to smokers.	<p>Chief Inspector Lloyd WELLS</p> <p>Sergeant Phil Hurst</p>	<p>As part of Safer Detention, nicotine replacements were explored with GMC and the Force's Forensic Healthcare provider and it was agreed that they were unsuitable, given the length of time they take to take effect.</p> <p>Await further medical advice.</p> <p>The treatment does not take effect until a great period of time has elapsed.</p>	Revisit guidance	January 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
4.34	Mattresses should be cleaned between uses and kept clean	Aldona ANDREW MSO Sergeant Phil Hurst	Mattresses are supplied to every detainee but there is not currently a strict cleaning regime. SOP developed. Dan Cooper/Christina Ashmore looking into provision of sterile wipes for staff to wipe down mattresses after use.	Guidance to be provided to all custody staff	December 2009 Completed
4.35	Pillows should be provided routinely to all detainees	Aldona ANDREW MSO	The Force historically was unable to locate a 'safe pillow' and a policy decision was made to supply detainees with an extra safe blanket, so one could be used as a pillow. On going review – no change recommended.	Review of suppliers to see if a safe pillow is currently on the market	January 2010 Completed
4.36	Views of toilets in cells covered by closed-circuit television should be obscured.	Inspector Clive THORPE Dan Cooper	A single monitor at NL, CK, CU and SW enables pixilation to be by passed when a detainee is classed as high risk. Decision taken to disable	Review and re-issue guidance to custody staff.	January 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			facility – work to be carried out.		
4.37	All female detainees should be offered a hygiene pack.	Aldona ANDREW MSO	<p>Female hygiene products are readily available at all custody suites particularly Euston Street which is the designated site for female detainees. A review is ongoing regarding the need to supply single products or a pack to female detainees.</p> <p>Decision - continue to supply single products on a needs basis. Information regarding availability contained in 'new' custody leaflet.</p> <p>Paper disposable under garments currently being purchased.</p>	An internal and external review to be completed to ascertain the appropriate products for a hygiene pack/single item. Once completed necessary purchases and policies to be communicated.	December 2009 Completed
4.38	Detainees held overnight and those who are dirty should be offered a shower and shower areas should afford sufficient privacy, particularly for female detainees.	Chief Inspector Lloyd WELLS Sergeant Phil Hurst	<p>Shower facilities are available at all designated and non designated custody suites</p> <p>SOP drawn up with the intention of this becoming standard practice.</p>	<p>Review of modesty screening</p> <p>Guidance to be given to custody staff</p> <p>Staffing model to be agreed to enable showers to be supervised</p>	April 2010 Completed

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			SOP document being constructed and will be published to custody web as well as retained in hard copy in each suite.		
4.39	Detainees should be offered access to an outdoor exercise area.	Chief Inspector Lloyd WELLS Sergeant Phil Hurst	All primary custody suites have exercise yards. SOP drawn up with the intention of this becoming standard practice. SOP document being constructed and will be published to custody web as well as retained in hard copy in each suite.	Guidance to be given to custody staff Staffing model to be agreed to enable showers to be supervised	April 2010 Completed
4.40	Detainees held over 24 hours, and young people, should be allowed visits	Chief Inspector Lloyd WELLS Sergeant Phil Hurst	Visits are allowed for all detainees held over 24 hours when it will not interfere with the investigation and staff are available to supervise. SOP drawn up with the intention of this becoming standard practice. SOP document being constructed and will be published to custody web as	Guidance to be given to custody staff Staffing model to be agreed to enable showers to be supervised	December 2009 Completed

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			well as retained in hard copy in each suite.		
4.41	Detainees should be offered suitable reading material at all sites.	Chief Inspector Lloyd WELLS	Reading material at all sites has been reviewed and a replacement system is in place.	Nil	November 2009 Completed
5.15	Managers should liaise with the UK Border Agency to ensure that immigration detainees are held in police custody for the shortest possible time	Superintendent Steve HARROD	Immigration detainees are regularly held in Leicestershire cells and occasionally due to lack of space elsewhere remain in custody for more than 24 hours. On-going.	A regional SLA is being compiled for sign off by Chief Officers.	January 2010
5.16	More posters should be displayed in languages other than English.	Aldona ANDREW MSO	A number of posters are displayed in custody but not all are translated into other languages. Interpreter services both telephone and face to face are readily available. On-going.	This forms part of the ongoing confidence project and is under review. CJ to work with the diversity unit to agree what important information should be displayed	March 2010
5.17	Formal pre-release risk management planning should be implemented consistently and any actions taken recorded	Sergeant Phil Hurst	Pre released risk assessments have been introduced as part of Safer Detention.	Further guidance to be issued	March 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
	on NSPIS.		<p>On-going.</p> <p>Handout sheet being developed listing various agencies available to assist the detainee.</p>		
5.18	Juveniles should be able to receive the services of an appropriate adult when required	Chief Inspector Lloyd WELLS	<p>All juveniles are given access to an appropriate adult following arrest in order to ensure they fully understand their rights and are not interviewed without one being present. There is an issue regarding the availability of appropriate social workers, parents and guardians.</p> <p>On-going.</p>	A review of current position including liaising with other forces to identify good practice	March 2010
5.19	Detainees aged 17 years should be provided with an appropriate adult	Inspector Clive THORPE	<p>The Force is aware that this is likely to be included in the next PACE amendment and is working to close the gap in its current provision.</p> <p>- <i>Appropriate adults provided by Social Services for all under 17's and some vulnerable under 18's. The Force with the support of other agencies provides appropriate adults for vulnerable over 18's.</i></p>	<p>Fresh guidance to be given to custody officers regarding the vulnerability of 17 yr olds and consideration given to provision of an appropriate adult whether it be a family member or a trained professional.</p> <p>Consultation with Social</p>	January 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			TAAS (force/social services contractor) able to supply. Negotiations regarding responsibility/funding required.	Services regarding the provision of appropriate adults to all under 18 year olds and/or consideration given to an amendment to the force adult contract with TAAS to include 17 year olds (subject to funding).	
5.20	The issues surrounding the lack of quality control systems and processes for taking, storing and submission of DNA and forensic samples should be addressed as an urgent priority, including a referral to the forensic science regulator.	Inspector Clive THORPE	Immediately following the force inspection an extensive review was undertaken and recommendations for improvements submitted to Chief Officers New process introduced with on-going monitoring.	A new policy has been developed including intrusive supervision of compliance.	December 2009 Completed
5.21	Detainees' property should be stored securely.	Aldona ANDREW MSO	There are detainee property lockers at all custody suites but not all are suitable/lockable. These issues were identified as part of the Safer Detention Project Key operated padlocks being obtained for all suites in order to secure detainee property lockers	To be checked and new/modified storage facilities introduced.	February 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
5.22	Information about how to make a complaint should be given to all detainees during the booking in process in a format they understand and clearly displayed in the custody suites.	Inspector Darren COPSON	Information readily available in custody suites and it is policy to provide all detainees with a leaflet.	Information regarding making a complaint is to be added to the “Simple Guide to what happens in Police Custody” that is currently passed to prisoners upon arrival in custody.	November 2009 Completed
5.23	Detainees should be able to make a formal complaint about treatment during arrest or detention while still in custody and all such complaints should be promptly and fully investigated.	Superintendent Jay BALL	Procedures for investigating complaints by detainee’s procedures are in place and are largely followed by custody staff.	Fresh guidance to be issued.	December 2009 Completed
5.24	The number and nature of complaints with a racial element should be monitored by managers and any trends identified acted on.	Superintendent Jay BALL	Complaints trends are monitored at the centre and performance information is circulated to areas and departments PSD are in the process of introducing a new ‘use of force’ monitoring policy.	Review of existing procedures to ensure information is circulated appropriately and PSD being invited to CJ SMT’s periodically	January 2010
6.37	The police should monitor all healthcare contracts to ensure response times and performance indicators are met.	Aldona ANDREW MSO	CJ currently have monthly operational meetings and quarterly contract meetings with their service provider.	PACE Inspectors to monitor response times in real time in order to corroborate performance	March 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			<p>Response times are closely monitored against the agreed PI's and complaints investigated. Contract being transferred to another supplier in April 2010</p> <p>Monitored closely with existing supplier – to embed in new contract.</p>	information supplied by contractor.	
6.38	FME's and other healthcare professionals should receive ongoing training, supervision and support to maintain their professional registration and development.	Aldona ANDREW MSO	<p>The current forensic medical supplier provides ongoing professional training to their staff on a regular basis as part of the contract. The new supplier will do likewise and provide written evidence of this on a regular basis.</p> <p>On-going</p>	Format to be agreed with new supplier	April 2010
6.39	All health services staff should be encouraged to engage in clinical supervision.	Aldona ANDREW MSO	<p>The current forensic medical suppliers encourage staff to engage in clinical supervision. The new supplier will do likewise and provide written evidence regarding this.</p>	Format to be agreed with new supplier	April 2010
6.40	The clinical (medical examination) rooms should be clinically clean, appropriately	Aldona ANDREW MSO	Medical examination rooms are cleaned daily by the Force	Ensure continued compliance with new	April 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
	equipped and fit for purpose at all times.		contracted cleaners and on each occasion they are used thereafter, by the relevant Nurse/Doctor using the facility and recorded. Regular checks of equipment are undertaken by forensic medical supplier.	supplier.	
6.41	All medications on site should be stored safely and securely.	Aldona ANDREW MSO	Medication currently stored and locked away in detainee property locker. Current practice to be reviewed in line with Safer Detention guidance.	Review current practice and liaise with new supplier.	April 2010
6.42	Safe and effective medicines management should be supported by appropriate access to reference information by healthcare staff.	Aldona ANDREW MSO	Current forensic medical providers undertake effective management of medicines. Current practice to be reviewed in conjunction with new supplier.	Review current practice and liaise with new supplier.	April 2010
6.43	All equipment, including resuscitation kit, should be ready for use and regularly checked and maintained and all staff (healthcare and custody staff) should understand how to access and use it effectively.	Aldona ANDREW MSO	Equipment is regularly checked. Training is currently being delivered and includes existing forensic medical provider staff and will be extended to new supplier.	Ensure staff of new supplier are included on training courses	April 2010
6.44	Female detainees should be able to see a female doctor on request.	Aldona ANDREW MSO	The current rota provides sufficient females Nurses should a female detainee request to see one. However, the existing supplier agrees	Check with new supplier to ensure that the number of female Nurses and Doctors are sufficient.	April 2010

Page N° & WIP/AFI	WORK IN PROGRESS / AREA FOR IMPROVEMENT	Delivery Lead	Force Position 'Where we are now'	Development Required? 'What we need to do in order to be compliant with WIP or AFI – plus any cost or business planning implications'	Target Date Completed YES / No
			that more female Doctors need to be recruited.		
6.45	Clinical record systems should be consistent in terms of accessibility, scope and quality and kept confidential at all times.	Aldona ANDREW MSO	Current details of examinations are recorded on NSPIS Custody and only those with authorised access can view them. The new supplier has a stand alone system, 'Clinic Office' which they are hoping to develop and allows access to all medical records by their staff at any custody suite.	Further detailed work to be undertaken with new supplier to ensure consistent approach, accessibility and confidentiality.	April 2010
6.46	Arrangements for detainees with mental health problems should be reviewed and the police should have robust arrangements that are known and agreed by all parties involved, including services for juveniles.	Aldona ANDREW MSO	Detainees with mental health issues should be taken to the bespoke facilities within the Glenfield Hospital. On-going	Review existing arrangements.	February 2010
			END		