

Action Plan – Ms Christine McDonald at HMP Styal – Self-Inflicted Death on 03/03/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare should ensure that reception staff:</p> <ul style="list-style-type: none"> • have a clear understanding of their responsibilities and the need to share all relevant information about risk; • do not rely solely on what a prisoner says or how they appear but consider and record all the known risk factors of a newly arrived prisoner when determining the risk of suicide and self-harm; and • open ACCT procedures when indicated. 	Accepted	<p>Training will be delivered to all staff involved in Early Days processes including Reception, First Night and Healthcare Staff. This will cover defensible decision making, including the importance of considering all evidenced risk and the importance of not relying solely on what a prisoner says. Recording of decisions / risk assessments, Information sharing processes and Risk factors for suicide and self-harm will also be included.</p> <p>Staff involved in Early Days processes will also complete the national Suicide and Self-Harm training (SASH) by December 2020 as part of the training.</p> <p>All staff newly recruited to the Safety Team or Healthcare who will be involved in Early Days will be required to complete the above described training within three months of starting these roles.</p> <p>A new Safety Strategy will be implemented in March and April 2020, this will require all Early Days staff to review all available evidence/information available to them and not solely rely on what a prisoner says. It will make clear procedures for sharing of relevant information linked to risk including documentation such as the Prisoner Escort Record (PER). Where Early days staff identify risk factors linked to suicide and self-harm, but having reviewed all available evidence they assess and take the decision that an ACCT is not required, staff will be required to record their decision on the relevant NOMIS IT system.</p> <p>Compliance of the requirements within the Safety Strategy will be monitored by the Safety Team through assurance checks of NOMIS entries and observations of Early Days processes.</p>	<p>Safer Prisons & Equality / Healthcare/ Business Assurance</p> <p>December 2020</p>

Action Plan – Ms Christine McDonald at HMP Styal – Self-Inflicted Death on 03/03/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
2	The Governor and Head of Healthcare should ensure that nurses conducting reception health screenings always have access to the PER.	Accepted	<p>Reception staff will be required to take all appropriate documentation, including the PER, to the First Night Centre when they escort prisoners from Reception to the First Night Centre. The Health screening will take place in the First Night Centre.</p> <p>Reception staff will pass the documentation, including the PER to the First Night Officer who will be responsible for ensuring this is passed to Healthcare staff conducting First Night Health screening.</p> <p>Face to face briefing sessions will take place with Reception, First Night and Healthcare staff to make them aware of the above requirements. This will be reinforced with a Notice to Staff.</p> <p>The First Night Centre diary will be adapted to include a tracking sheet to evidence documentation has been passed between Reception, First Night and Healthcare staff. The Custodial Manager with responsibility for First Night Centre will conduct weekly integrity checks of the diary to ensure documentation is passed appropriately between staff.</p>	Safer Prisons & Equality/ Operations/ Healthcare April 2020
3	The Head of Healthcare should ensure that the clinical record is an accurate reflection of significant interactions between staff and prisoners.	Accepted	<p>All Healthcare staff have been made aware that they must update clinical records to show all significant interactions between staff and prisoners. Healthcare Managers will conduct monthly audit checks to ensure that this process is being followed correctly. In cases where areas of concern have been identified this is being addressed through staff supervision.</p> <p>Staff have been briefed at daily handovers on what accurate record keeping involves. Regular reminders will continue at daily handover. SystemOne specific training for staff has been delivered and will continue to be delivered for new starters within three months of joining Healthcare.</p>	Healthcare April 2020

Action Plan – Ms Christine McDonald at HMP Styal – Self-Inflicted Death on 03/03/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
4	<p>The Governor and Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> healthcare staff assess prisoners in reception when they return from hospital; and there is effective written communication of clinical risks and health needs of prisoners returning from hospital and a formal discharge summary informs their care. 	Accepted	<p>Escorting staff will be required to notify the Duty Nurse (Hotel 1) when a prisoner returns from hospital. Escorting staff will agree with Hotel 1 where they will assess the prisoner and escort them to the agreed location.</p> <p>Escorting staff will ensure any written documentation/discharge summary is passed to healthcare staff at time of return to prison.</p> <p>Hotel 1 will ensure the prisoner is seen and reviewed upon their return to the prison from hospital. They will record this on SystmOne. If there is no discharge summary available from escorting staff, Healthcare staff must document the efforts they make to seek this information.</p> <p>A written protocol outlining the above requirements will be issued to escorting staff with their escort bag to ensure they are fully aware of their responsibilities.</p> <p>On weekdays, administration staff will make a daily check of SystmOne for all prisoners who have attended hospital and check whether a formal discharge summary has been received. If one hasn't been received the administration staff will be responsible to seek this and document their efforts to do so.</p> <p>Adherence to these processes will be monitored by Healthcare managers through compliance checks of SystmOne entries.</p>	<p>Head of Healthcare/Operations</p> <p>June 2020</p>
5	<p>The Governor and Head of Healthcare should ensure that all prisoners arriving with or developing signs of drug or alcohol withdrawal are</p>	Accepted	<p>The First Night Centre will be relocated to Waite Wing, where the rooms enable more effective monitoring of prisoners. Prisoners identified as withdrawing from alcohol or drugs will remain on Waite Wing for at least their first five days in custody in line with the requirements of 'Drug Misuse and dependence – UK Guidelines on Clinical Management'.</p>	<p>Safer Prisons & Equality/Healthcare/Recovery Services</p>

Action Plan – Ms Christine McDonald at HMP Styal – Self-Inflicted Death on 03/03/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
	regularly monitored, including clinical observations overnight and during the day, until they are stable.		<p>During Reception screening, any prisoner displaying signs of drug or alcohol withdrawal is reviewed for appropriate medication. A record is made on SystemOne and a handover takes place with the night staff to ensure night-time observations take place for the prisoner.</p> <p>Compliance with these requirements are monitored by Recovery Services managers and relevant data will be cascaded at HMP & YOI Styal's Drug Strategy meeting and Healthcare Local Delivery Board.</p> <p>Early Days and Night staff will be issued a guidance booklet making them aware of signs of distress linked to drug or alcohol withdrawal. This includes guidance on what action they should take if they observe these signs.</p>	June 2020
6	The Prison Group Director for women's prisons should write to the Ombudsman setting out what he has done to satisfy himself that there is sufficient healthcare presence in the first night centre; that prison staff working in the first night centre have been adequately trained in the management of prisoners withdrawing from drugs and alcohol; and that steps are being taken to ensure that staff do not become desensitised to residents' distress.	Accepted	The Prison Group Director for Women's prisons will write the Ombudsman with the requested information by April 2020.	The Prison Group Director for Women's Estate April 2020

Action Plan – Ms Christine McDonald at HMP Styal – Self-Inflicted Death on 03/03/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
7	The Governor should ensure that all prison staff are made aware of and understand their responsibilities during medical emergencies, in particular that staff efficiently communicate the nature of a medical emergency using the appropriate code.	Accepted	<p>Responsibilities during medical emergencies will be stipulated within a new Safety Strategy, including the need to use the appropriate code in line with requirements of national policy.</p> <p>By April 2020 all staff will have been briefed and made aware of what actions they must undertake during medical emergencies. Sessions with staff will also include toolbox talks at the morning operational briefings.</p> <p>Integrity checks of the application of medical codes will be undertaken to ensure staff fulfil their responsibilities during medical emergencies.</p>	Safer Prisons & Equality June 2020
8	The Head of Healthcare should share this report with healthcare staff named in it and discuss its findings with them.	Accepted	The report will be shared with the healthcare staff named. Their line managers will discuss the findings and learning with the identified staff and record this discussion during supervision.	Healthcare March 2020
9	The Governor should ensure that this report is shared with a CM and a OSG and that a senior manager discusses our findings with them.	Accepted	The report will be shared with the named individuals. Their line managers will discuss the findings with them and record this discussion within their Staff Performance and Development Records (SPDRs).	Safer Prisons & Equality March 2020