

Action Plan in response to the PPO Report into the death of Mr Gordan James Dunn on 31 March 2022 at HMP The Verne

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	HMPPS, working in partnership with Ministry of Justice, ADASS, DHSC and NHS England, should explore options for developing a pathway for prisoners who have been assessed as needing residential social care to access an appropriate care setting. This work should be governed through the National Social Care Partnership Board.	Accepted	<p>Prior to the next National Social Care Partnership Board on 4th October 2023 a Working Group with essential partners will be developed incorporating the appropriate departmental and policy leads to develop and bring forward options, including an assessment of any necessary policy changes and resource requirement.</p> <p>Activity within the existing National Social Care Workplan will also support delivery of this recommendation, (social care funding, continuity of social care on release).</p>	Head of Health & Social Care Team HMPPS	October 2024
2	The Governors and Heads of Healthcare of HMP Dartmoor and HMP The Verne should ensure that they follow PSI 03/2016 when considering transfers for prisoners receiving local authority care and support.	Accepted	In August 2023, a weekly social care multidisciplinary team meeting (MDT) to discuss all referrals to The Verne for those with social care needs. This relates specifically to those with overnight care needs, but any referral can be discussed. As part of the new pathway for social care transfers, once the transfer is agreed in	<p>Head of Healthcare Oxleas NHS Foundation Trust</p> <p>Head of OMU HMPPS</p>	Completed



			principle, the local authority (LA) to LA conversation will then be arranged to take place.		
3	The Governor should share this report with the Director of Adult Social Services for Dorset	Accepted	The Governor has shared this report with the Director of Adult Social Services for Dorset.	Head of Safety HMPPS	Completed
4	<p>The clinical regional manager of Oxleas NHS Trust should:</p> <ul style="list-style-type: none"> • provide assurance to NHS England – South West in relation to the repeated recommendations made at HMP The Verne regarding use of the NEWS2 tool; • provide a timeframe and assurance on when the NEWS2 will be consistently used at HMP The Verne; and • the NSW Commissioner should inform the PPO of the outcome within six months. 	Accepted	<p>NEWS2 is not mandatory training for Oxleas NHS Foundation Trust clinical staff. HMP The Verne recognise that refresher training is required for this clinical assessment and will ensure all clinical staff complete online NEWS2 training twice a year. This will be captured on a locally held database to evidence compliance.</p> <p>Oxleas NHS Foundation Trust has introduced a NEWS2 audit which is completed every quarter. The first audit was completed in July with a score of 89%. This will be shared with clinical staff at the next local quality assurance meeting on 18 August 2023.</p> <p>Please see below from Royal College of General Practitioners (https://www.rcgp.org.uk/representing-you/policy-areas/news2, 2023)</p> <p>NHS England have recommended the National Early Warning Score (NEWS2) as the universal scoring system to use across the NHS within ambulance and secondary care services for the patient at risk of deterioration. This is in order to</p>	<p>Regional Manager</p> <p>Oxleas NHS Foundation Trust</p>	Completed



		<p>standardise practice, stratify risk, and aid communication between services. This was communicated as a Patient Safety Alert and was implemented in March 2019. It did not mandate its use within general practice but noted that work was taking place to identify evidence within the community and primary care.</p> <p>With the aging population at HMP The Verne, NEWS2 is used as part of the clinical assessment of patients where appropriate. However, escalation processes identified for NEWS2 are not always achievable in primary care furthermore, due to co-morbidities may not be appropriate to escalate. Clinical staff have been instructed to document any rationale for not following the NEWS2 escalation process.</p>		
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