

Action Plan – Mr Jason Birch at HMP Whitemoor – SID on 26/09/2019

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and the Head of Healthcare should ensure that prison staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including:</p> <ul style="list-style-type: none"> • reviewing and update the prisoner's caremap at every case review; • involving the prisoner's family in the ACCT process when appropriate, and including family contact issues in the caremap; • recording all relevant ACCT information in the prisoner's medical record, including the outcome of all case reviews; • communicating all known risk factors and incidents of self-harm to all those involved in the prisoner's care; 	Accepted	<p>In August 2020 an email was sent to all ACCT Case Managers to remind them that caremaps must be updated at every case review. The Safer Custody team carry out weekly quality assurance checks on all ACCT documents to ensure that caremap actions are being updated and completed appropriately. The Duty Governor also carries out spot checks on ACCT documents and if any issues are identified this is raised with the Head of Safer Custody and advice is given to the Case Manager.</p> <p>There is now a sticker on the first case review page of the ACCT document which serves as a visual reminder to staff to ask prisoners if they wish to have family involvement in the ACCT process. If a prisoner does want their family to be involved then this is added as a caremap action to be completed.</p> <p>Following an ACCT review healthcare staff now complete a template on SystmOne which includes space to document an overview of the conversation, any change in observations, and the names of those in attendance at the review.</p> <p>There is now a designated member of healthcare staff who is briefed each day by Oscar 1 on any relevant issues and incidents of self-harm that have occurred within and outside the establishment to ensure that healthcare are aware of any changes to a prisoner's risk.</p> <p>Guidance on risk levels was issued to all ACCT Case Managers via email in August 2020 along with a reminder to staff to gather risk information prior to a review taking place and to ensure that the risk factor information they have from ACCT reviews matches the guidance on risk levels. The Safer Custody</p>	Head of Safer Prisons Completed

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	• considering all known risk factors when determining the prisoner's level of risk.		team, as part of their weekly ACCT checks ensure that risk levels appropriately reflect prisoners' risk factors and needs.	
2	The Governor should ensure that when managers authorise segregation of a prisoner under ACCT management, they record what alternative locations have been considered.	Accepted	In August 2020 the Head of Safer Prisons briefed the Senior Management Team and Orderly Officers that in accordance with policy they must complete a 'considerations for prisoners located in the segregation unit on an open ACCT or post closure' form when approving a decision for a prisoner to remain in the segregation unit. This form is a written record of the decision making process and is kept in the prisoner's individual segregation folder which is checked daily as part of the segregation review.	Head of Safer Prisons and SMT Completed
3	The Head of Healthcare should ensure that segregation algorithms are completed for all segregated prisoners, and that medical records reflect an assessment of the prisoner's mental wellbeing.	Accepted	<p>When a prisoner is segregated discipline staff raise the segregation paperwork, including the algorithm which must be completed and signed within four hours by healthcare and the Governor. Segregation staff were reminded at staff briefings in August 2020 of the joint requirement to ensure that algorithms are completed and signed within the appropriate timeframe.</p> <p>A member of the healthcare team now emails the segregation unit each day to check if there are any algorithms to be completed and healthcare staff were reminded via staff briefings in August 2020 that they must document any assessments made during their daily rounds of the segregation unit.</p> <p>Each prisoner located in the segregation unit has a folder which contains all relevant documents. During the daily segregation review, folders are checked providing an opportunity to pick up and rectify any issues identified.</p>	Head of Healthcare, Mental Health Manager, and Segregation Manager Completed

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4	The Governor should ensure that the correct procedures for the use of body belts are followed and their use is recorded in line with PSO 1700.	Accepted	<p>Work has commenced to hold training and refresher sessions for all those involved in the management and authorisation of the use of body belts. Advice has also been sought from policy leads to ensure that staff fully understand the procedures to be followed when a body belt is used.</p> <p>As body belts are not regularly used a local review of PSO 1700 is being undertaken and an easy to follow guide will be produced for staff to follow in the event that a body belt is used. This guide will include reminders to document use and decisions clearly and will also include timescales such as the four-hour review.</p>	SMT and Segregation Manager December 2020
5	The Head of Healthcare should ensure that physical observations are recorded for all prisoners on arrival at Whitemoor.	Accepted	All prisoners that arrive at Whitemoor are required to be seen by healthcare within 24 hours for a physical screening. Healthcare staff were reminded via staff briefings in August 2020 that if a prisoner refuses to engage with healthcare for reception and secondary screenings this should be documented on SystmOne with the reasons for refusal.	Head of Healthcare. Completed