

Action Plan in response to the PPO Report into the death of Mr Adam Clark on 1 December 2024 at HMP Hewell

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Governor should review the provision of training to non-operational staff to ensure that they are competent in identifying increased risk of suicide and self-harm and understand how to start ACCT procedures when required.	Accepted	The provision of ACCT upskilling has been reviewed by the Head of Safety in collaboration with the training department. A custodial manager within the safety team is now responsible for overseeing the delivery to non-operational and non-directly employed staff. To ensure consistent and appropriate training, the safety team custodial manager has engaged with all relevant departments across the establishment to identify non-operational staff requiring ACCT upskilling. Training is scheduled responsively to suit the needs of the department. Safety staff deliver an ACCT upskilling package that is focused on the identification of risk of suicide and self-harm, how to start ACCT procedures and how that applies within HMP Hewell. Scheduled and completed training is reviewed at the local training	Head of Safety, HMPPS	Completed

			committee meeting for assurance of ongoing delivery.		
2	The Governor should amend local policy to provide staff with clear instructions about the actions they should take when they discover a blocked observation panel and follow this up with a clear quality assurance process to ensure that staff understand their responsibilities.	Accepted	Guidance has been circulated to all staff as a notice to staff reinforcing what to do when an observation panel is blocked. This notice is supported by the safety learning bulletin distributed in July 2025. The Head of Residence will update the local Clean and Decent policy with the expectations for staff around blocked observation panels. A daily decency tracker has been implemented to assure that all staff are visiting each cell, highlighting decency concerns and completing remedial actions overseen by residence managers. A monthly night assurance visit is completed by Duty Governors with specific questions asked around observation panels for night staff understanding and for Duty Governor assurance. Immediate actions will be completed during the visit with further actions required followed up in the day state.	Head of Residence, HMPPS Head of Residence, HMPPS Head of Residence, HMPPS Deputy Governor, HMPPS	Completed December 2025 Completed Completed
3	The Head of Healthcare should ensure that mental health staff understand the circumstances in which they should request a prisoner's history from community mental health services and that	Accepted	Through the EDIC process the RMN nurse will access the NHS record to review any previous mental health involvement, medication needs or any diagnosis that would indicate that further support or assessment from the mental health team is required.	HOH PPG Team Manager MPFT	Completed

	there are clear roles and responsibilities for requesting this information.		If no access to the NHS records, the RMN Nurse would check S1 records. Where a history of community treatment is noted, the RMN would make contact with the local community team to request further treatment information and handover.		
4	The Head of Healthcare should ensure that patients with a complex history of substance misuse, including those prescribed opiate substitution medication before their arrival in prison, are referred to the clinical substance misuse team for an assessment of their needs.	Accepted	On arrival in to prison the patient will be screened by the reception nurse and any substance misuse will be identified and an appointment is booked on the ISMS (Integrated Substance Misuse Services) Clinical ledger for further assessment. ISMS Clinical nurses will confirm any script via contacting the pharmacy they were collecting from so that the clinical treatment can continue. All new receptions are booked on to the First Night GP/Prescriber Ledger by the reception nurse so their first night medication needs can be assessed. An ISMS Nurse will check the new arrivals the morning after to ensure everyone is being picked up by the team correctly. In May 2025 we introduced an integrated EDIC New arrivals meeting where all patients from the day before are reviewed by the whole team to ensure nothing has been missed.	HOH PPG Team Manager MPFT	Completed