



HM Prison & Probation Service

OFFICIAL - FOR PUBLIC RELEASE

Probation
Service



PPO ACTION PLAN:

PoP/PAP Name	Carl Andrew SHELDON
Approved Premises	Wharflane House
Date of Death	08/03/2021
Date of Action Plan	13/09/2021

Recommendation	National or Local	Owner	Accepted / Rejected	Response	Target date for completion
The Probation Service should ensure that all new residents are told about their reduced drug tolerance and increased overdose on arrival at the AP, in line with the expectations of the Approved Premises' Manual.	National	NAPT	Accepted	Resident induction in all AP includes advice to the resident regarding reduced drug tolerance and potential for increased overdose. This is supported by an AP Instruction for the Induction process.	Completed
The Manager of Wharflane House should ensure that residents suspected of using illicit drugs in the premises are appropriately challenged and that staff search their room in line with current guidelines.	Local	APM	Accepted	Staff have been advised about the need to respond to suspected drug use, in particular by applying Improvement Notices as outlined in the revised Enforcement Process. Related discussions will now be a standing agenda item in team meetings. Room searches have been re-instated in full, including within the constraints of managing Covid. Likewise testing residents due to suspicion of drug use is fully in place, supported by the recent introduction of a urine testing pilot in the Midlands, which identifies an increased range of substances than was the case under the previous oral swab testing regime.	Completed
The Probation Service should ensure that residents receive appropriate supervision and support during the COVID-19 pandemic.	National	NAPT	Accepted	As part of the Approved Premises response to Covid-19, guidance was developed and shared with all staff to support all residents. All staff were instructed to increase the levels of welfare checks on all residents, not just those directly impacted e.g. those isolating. AP have also launched Safety and Support Plans (SASP) which are completed with all residents upon arrival to assess and identify those at risk of self-harm. The second element for those requiring a high level of support or where there is an imminent risk of self-harm – CARE (Collaborative Approach to Risk and Emotion) was launched in AP in April 2021. An assurance audit was completed in Summer	Completed and Ongoing

OFFICIAL - FOR PUBLIC RELEASE

				2021, to assess the implementation of CARE and SaSP. Recommendations identified for improvement are being addressed and monitored.	
--	--	--	--	--	--