

Action Plan in response to the PPO Report into the death of Baby C on 16 October 2023 at HMP Foston Hall

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	NHS England should commission an independent review of the standard of midwifery care provided at HMP Foston Hall. The review should include the standard of midwifery documentation; the nature and content of clinical contacts; referral, communication and escalation pathways; and supervision of midwifery care at HMP Foston Hall.	Accepted	The maternity pathway review has been commissioned and the outcome of this review is due in the Autumn 2025.	NHSE	Review is ongoing and the findings due Autumn 2025
2	The Head of Healthcare should review the prison medical record to ensure that information regarding a pregnancy and any associated care plans are easily accessible to all healthcare staff.	Accepted	The SystmOne medical record is not the midwifery services primary platform for record keeping and therefore does not currently include easily identifiable notes or care plans in relation to pregnancy. NHS England have commissioned an independent review of the standard of midwifery care provided at HMP Foston Hall, this will encompass a review of midwifery documentation.		

			In the interim, a local operating procedure is in development to ensure all healthcare staff have access, through SystmOne, to easily identifiable information regarding a pregnancy and any associated care plans. Progress will be tracked through the Datix risk register and reviewed monthly at the Local Delivery Board. An audit measuring pregnancy related documentation will be completed and repeated every six months; lessons learnt from audits will be shared with midwifery partners and where appropriate the wider healthcare team, outcomes will be tracked through Datix. Consultation with Heads of Healthcare across Practice Plus Group (PPG) is taking place to establish if access to pregnancy related documentation is a risk across the wider female estate or localised only to HMP Foston Hall. The outcome will be discussed at the next PPG female estate senior leaders meeting on 19th May 2025.	PPG Head of Healthcare PPG Head of Healthcare PPG Head of Healthcare	May 2025 Initial audit April 2025 May 2025
3	NHS England should ensure that all relevant community records are provided for the purpose of a PPO investigation following the death of a baby.	Accepted	NHSE have reviewed and strengthened their standard operating procedure/processes and communications to ensure all relevant maternity/community records are available following the death of a baby to support the PPO investigation in appropriate timeframes.	NHSE	Completed-processes in place if this were to happen again.

			This learning was discussed at the partnership learning event in September 2024 and the maternity provider recognised this was delayed and have learnt for future investigations these are required at the start of the PPO investigation/clinical review and have acknowledged this.		
4	The Head of Healthcare should ensure that nurse prescribers are adequately informed regarding antidepressant medication, including what is safe to use in pregnancy, and the risks associated with immediately stopping prescribed medication.	Accepted	Nurse non-medical prescribers, General Practitioners (GP) and Psychiatrists collectively provide the prescribing provision to meet the needs of the population in HMP Foston Hall. Albeit unpredictable, the maximum number of pregnant people in the establishment (at one time) over the past 5 years has not exceeded 3.3 % of the operational capacity. Given the relatively small patient cohort, achieving and maintaining relevant competencies for nurse prescribing in pregnancy is limited. In response to national recruitment difficulties with GP's, nurse prescribers support the reception process. To ensure continuity of prescribed medications and to address any presenting concern that sits outside of a nurse prescriber's competencies, a PPG reception specialist GP on call service has been launched. This service, guidance and contact details will be shared with all healthcare staff that support the reception pathway.	PPG Head of Healthcare	Completed April 2025

			The practice of accessing the reception specialist GP on call service will be embedded into the role of the nurse prescriber in reception; this will apply to all prescribing or clinical presentation that sits outside of the nurse prescriber's competencies and/or scope of practice.	PPG Head of Healthcare	May 2025
5	The Head of Healthcare should ensure that all bereaved prisoners who request antidepressant medication are seen by a GP and/or nurse prescriber in a timely manner.	Accepted	A senior mental health nurse with a specialist interest in perinatal mental health works in collaboration with the prison perinatal team and the midwifery services to ensure succinct access to appropriate assessment and treatment pathways. A Birth Companions practitioner is based on site each week, any bereaved person in the perinatal period has access to this specialist support. An escalation pathway has been developed to support the practitioner with timely escalation of outstanding patient need. The HMIP & CQC inspection report for January 2025 recognised that the mental health provision in HMP Foston Hall does not meet the needs of the population. A business case will be submitted to NHS England commissioners to increase the mental health team staffing resource.	PPG Head of Healthcare PPG Head of Healthcare	Completed April 2025 May 2025

6	The Governor should ensure that all required observations, comments and summaries are recorded in a prisoner's Pregnancy Support Plan, in line with national and local guidelines.		Pregnancy support plans will be quality assured to ensure that they meet the required standards. All pregnant prisoners are discussed in the morning briefing where all relevant information can be shared. Routine perinatal meetings are chaired by the establishments Head of Health and Perinatal.	Governor	May 2025
7	The Prison Group Director for the Women's Estate should review the current training package for staff working directly with pregnant prisoners, to ensure they receive training to equip them with the required skills and knowledge to care for pregnant prisoners safely. This training should include the importance of fetal movements and escalation pathways if a prisoner reports reduced fetal movements.	Accepted	The HMPPS e-learning package on Pregnancy and Perinatal Care in Prisons was launched in March 2023 and a review of this will be commenced by the HMPPS Women's Group in March 2025. As part of this review, in addition to the signs and symptoms of early labour which are already included further information to reinforce the message that all pregnancies in prison are clinically high risk will be included. It will also be reviewed to further highlight that all pregnancy related health concerns including reduced fetal movements should be immediately reported to healthcare professionals.	Women's Operational Policy and Strategy Team, HMPPS Women's Group	March 2025
8	The Governor should ensure that local policy regarding Hospital Escorts – Prisoners Under Escort to Give Birth is revised to include guidance to staff following a birth, including that: Prisoners who have given birth are not restrained in hospital	Accepted	National Guidance has now been issued for prisoner escorts for those prisoners that are pregnant. Only in exceptional circumstances are restraints to be used, these risk assessments need to be approved by the Deputy or Governing Governor.	Womens Policy Team Governor	Complete

	unless there are significant indicators of high risk of escape or to the public; and • The escort risk assessment is reviewed and revised before the prisoner returns from hospital, giving consideration to information about their current health and mobility.		Prior to all prisoners being released from hospital handovers are received with local healthcare and onsite Midwife. Management checks are in place for all escorts that require a hospital stay.		
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