RESPONSE TO 'MT' INDEPENDENT INVESTIGATION

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
R1	We ask the Governor of HMP Bristol to explain how ACCT practice there now complies with the current requirements about engaging with family members of prisoners identified as being at risk of suicide or self-harm.	Accepted	HMP Bristol has introduced a fortnightly quality assurance process for all open ACCT documents. This enables the safety department to ensure that all ACCT documents are managed in line with policy and that relevant stakeholders are present and actively engaging in reviews. It also provides assurance that case co-ordinators manage individual risk based on information and behaviours that can be evidenced. In addition, safer custody floorwalkers conduct daily ACCT quality assurance checks and challenge any shortcomings or weaknesses in the process. They also carry out daily checks of care plans, ensuring interventions are identified, appropriate and are achievable. They have been tasked with checking that family involvement has been considered and documented in the review and care plan if applicable. Quick Time Learning has been sent to all case managers to ensure they make reasonable efforts to contact family and significant others when a prisoner has consented to involving them. Where contact may not be appropriate due to safeguarding or security reasons, this decision must be recorded in the case review form. Complex cases are referred to the Safety Intervention meeting for discussion amongst a multi-disciplinary	Head of Safety, HMPPS	Completed

			committee. Family engagement will again be considered, along with any previous engagement the family has had with other services that may help contact and engagement.		
R2	We invite HMPPS to comment, and to tell us whether they have in train any plans to streamline the ACCT system with greater use of technological solutions.	Accepted	We acknowledge the concerns identified in the investigation and the potential administrative burden of case management processes which can impact on the time staff have available to engage directly with people in our care, and we remain committed to ensuring that ACCT processes support, rather than detract from, effective support for people at risk of suicide or self-harm. There are no current plans to digitalise the ACCT document. Digitisation was explored during the development of ACCT version 6 (the current version), and while it is recognised that a fully digital system could offer benefits—such as enabling staff to update records on the move and facilitating real-time access by different departments, significant cost implications and associated risks were identified. These included challenges relating to system integration, access controls, data security, and the high level of confidentiality required when managing individuals at risk of suicide and self-harm. A decision was made to introduce electronically completable forms, for those documents which did not require a wet signature. These can be typed, printed and inserted into the ACCT plans. This approach supports staff in reducing duplication and allows information to be copied into other systems, such as case notes, where appropriate. We recognise the feedback about the potential role of technology in streamlining ACCT and HMPPS is actively	Head of Safety Group, HMPPS	Completed

			exploring the potential use of technology, including Artificial Intelligence in case management processes. However, this work remains exploratory, and it would be essential that any technological advancement would enhance, and not replace, human judgement, relationships, and the person-centred foundations of the ACCT process. We will continue to review opportunities for greater use of technological solutions to support the ACCT process.		
R3	We ask the Governor and HMPPS to take note of what happened in this case and to say what systems are in place to prevent this happening again. If despite the prison's best efforts, a prisoner insists on refusing an official visit there should be an auditable record of the circumstances.	Accepted	Prisoners will be made aware of who they are scheduled to meet on an official visit and the reason for the visit. This information will be communicated to the prisoner in person. This will allow staff to be confident that the prisoner has been fully informed of the visit and its purpose before being unlocked, where appropriate. When a prisoner refuses to attend an official visit, staff will be instructed to ensure that there is a clear and auditable record of the circumstances. In such cases, staff will be required to enter a comprehensive case note on NOMIS setting out the prisoner's refusal and any relevant context. They will also be required to notify the prisoner's Prison Offender Manager (POM) of the decision to decline the visit.	Head of Operations, HMPPS	Completed
R4	We ask the Governor of HMP Bristol to confirm that post-closure monitoring is in place and to comment on any evaluation of how it works in practice.	Accepted	When an ACCT is closed, the document remains on the wing where the prisoner is located, and the individual continues to be monitored for a minimum of seven days. During this period, staff complete daily entries and record them on a post-closure monitoring form. A post-closure review is then held with the case manager, or covering manager, on the date set and the case coordinator will raise any issues in relation to any missing daily entries with the safety team. Following the review, the case co-	Head of Safety, HMPPS	Completed

			ordinator and the case review team determine whether further post-closure reviews are needed, whether the ACCT should be reopened or whether it can be closed. This decision must be recorded on the post-closure review form. The closed ACCT will be taken to the safer custody department where it will be stored until the six-week period in which the ACCT can be re-opened has ended. Following this, the ACCT will be stored in the prisoner's core record. The Safety Custodial Manager quality assures 40% of closed ACCTs each month, ensuring they have been closed appropriately and in line with policy.		
R5	We remind the Governor of the problems accessing MT's cell and would like to be assured that these lessons have been learned and are the subject of regular checks.	Accepted	The Use of Force Coordinator has completed checks confirming that all units hold anti-barricade keys. To ensure ongoing compliance, the coordinator will conduct monthly assurance checks to verify that keys remain in place, as well as spot checks on cells to confirm that anti-barricade plates are functioning correctly. In addition, Government Facility Services Limited undertake six-monthly inspections of all anti-barricade plates, providing a further layer of assurance that the equipment remains in good working order.	Head of Safety, HMPPS	Completed