

Action Plan-Sam Molyneux. HMP Liverpool. Self – Inflicted. 01/04/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor should ensure that staff manage prisoners at risk of suicide or self-harm in line with national guidelines. In particular:</p> <ul style="list-style-type: none"> ▪ Understanding their responsibilities and the need to share all relevant information about risk; ▪ Considering and recording all the known risk factors of a prisoner when determining their risk of suicide or self-harm; ▪ Assessing the level of risk and recording the reasons for decisions; ▪ Setting and recording appropriate levels of observations which are adjusted as the perceived level of risk changes; ▪ Setting ACCT care-map actions which are specific and meaningful and should review progress against care-maps at each review; ▪ Conducting ACCT reviews as specified in the national instructions; ▪ Conducting ACCT post-closure interviews as specified in the national instructions 	Accepted	<p>The delivery of ACCT Case Manager training has now been increased to bi-monthly to improve staff understanding of their responsibilities in managing prisoners at risk of suicide and self-harm.</p> <p>This training considers the known risk factors and how current circumstances may impact on those risk factors and potentially increase the risk. It also outlines the decision-making process for assessing the level of risk, setting observation levels, recording decisions, and advises staff on how to correctly complete a caremap ensuring that actions are meaningful and specific to the circumstances.</p> <p>All staff are made aware of risk and triggers with regular notices to staff issued and information displayed in relevant areas such as reception and wing offices</p> <p>The Introduction to ACCT training is designed to raise awareness levels of all staff,</p> <p>A revised ACCT review process was introduced in August 2016 which guarantees multi-disciplinary attendance at case reviews consisting of at least mental health and chaplaincy staff, the residential Supervising Officer and often a member of the Safer Custody team.</p> <p>If an ACCT has been opened for more than 21 days, the wing Custodial Manager (CM) will attend the next review to ensure that the appropriate action to address risk is being taken. If unavailable ,the Safer Custody CM or a residential governors will attend instead</p> <p>A system has also been established to ensure that, when an</p>	Completed. Head of Safer Prisons and Heads of Residence.

Action Plan-Sam Molyneux. HMP Liverpool. Self – Inflicted. 01/04/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
			<p>ACCT is closed, the Safer Custody team will record the date for the post-closure review and ensure that the ACCT is made available to the wing on the appropriate day.</p> <p>From [date] a new system will be introduced whereby the day before the review is due, the document will be handed to the Residential Governors by the Safer Custody managers, increasing the awareness of what needs to be done and giving accountability through an identified manager.</p> <p>Any outstanding post-closure reviews will be submitted for immediate completion by the relevant wing managers at the fortnightly meeting chaired jointly between the residential and Safer Custody Managers</p>	
2	<p>The Governor should ensure that all prison staff are made aware of and understand the local violence reduction protocol and their responsibilities after an act of violence which:</p> <ul style="list-style-type: none"> ▪ Ensures staff efficiently and effectively communicate the nature of the act of violence; ▪ Ensures staff support and protect victims; ▪ Ensures staff take appropriate measures against perpetrators to address violent or anti-social behaviour. 	Accepted	<p>The existing Violence Reduction Strategy , currently under review, will clearly set out for all prisoner-facing staff their responsibilities when dealing with acts of violence.</p> <p>A fortnightly multi-disciplinary meeting now takes place with a standing agenda item of 'vulnerable prisoners', where prisoners considered to be susceptible to violent assaults from other prisoners are discussed, and decisions on their management made.</p> <p>If staff are made aware of or it is alleged there has been an incident of violence, the relevant information is reported to the Security Department the opening of a 'DAVE' document for the perpetrator will be considered. DAVE is a model for managing violence in custody. Those subject to a DAVE document are involved in all discussions relating to this: .it is</p>	December 2016 Head of Safer Prisons

Action Plan-Sam Molyneux. HMP Liverpool. Self – Inflicted. 01/04/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
			<p>explained to the prisoner why the document was opened and what restrictions if any may be implemented. This could include a wing move for the protection of the alleged victim.</p> <p>Staff will consider additional support that needs to be offered to victims of violence or bullying, including initiating ACCT processes where necessary.</p>	
3	<p>The Governor should ensure there is an effective supply reduction strategy to help eradicate the availability of new psychoactive substances, and that staff are vigilant to signs of its use and know how to respond when a prisoner appears to be under the influence of such substances</p>	Accepted	<p>A Drug Strategy is in place for which contains a comprehensive supply reduction strategy co-ordinated by the Heads of Residence and Security. The strategy sets out the framework which mirrors the Government's National Recovery Agenda. w</p> <p>Included in this is mandatory drug testing (MDT) effective searching of prisoners, property, mail, cell locations; searching by North West Area Drugs Dogs Team; gathering and dissemination of drug related intelligence; screening visitors to the prison; offering amnesty bins for visitors; careful management and selection of prescribed medication; proactive observation and supervision by prison staff throughout the prison; staff training; promoting drug strategy to all and adherence to local security strategies; joint work with the police and corruption prevention.</p> <p>The above work is supported by the rigorous supply demand reduction protocol which includes Lifeline assessments and support; effective screening of new receptions; timely adjudications and engagement in a full regime with activities. All of the above is monitored through an action plan at the monthly meetings.</p> <p>In April 2016 a Notice to Staff was issued regarding the</p>	December 2016 Drug Strategy Lead and Head of Safer Prisons

Action Plan-Sam Molyneux. HMP Liverpool. Self – Inflicted. 01/04/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
			<p>dangers of NPS, its effects on the prisoners and the protocol to follow when a prisoner is suspected of being under the influence. This will be re-issued and include clear instructions on what staff should do when a prisoner declares he uses NPS; this will include a referral to Lifeline, an update to their NOMIS case notes, an entry in the wing observation book and the submission of an Information Report to Security. The support package may include the opening of an ACCT document where deemed appropriate.</p> <p>Learning bulletins and literature from a range of sources including NOMS headquarters and the PPO are routinely cascaded to all staff. The Drug Strategy Lead has attended a recent lessons learned day which focussed on the aspects of managing prisoners under the influence of NPS.</p> <p>We are in the process of compiling a clearly defined pathway in partnership with our healthcare colleagues to ensure continuity of treatment and care when presented with prisoners suspected to be under the influence of NPS.</p>	
4	The Head of Healthcare should ensure all health care providers record all interventions in a prisoner's primary medical records so all information is documented, enabling appropriate continuity of care for each prisoner.	Accepted	<p>All health care staff now have access to the medical records through SystemOne, the electronic records system, and training is provided to ensure staff are aware of the need to record all medical interventions that take place for each individual patient.</p> <p>This allows for an integrated approach to care and ensures up to date information is available to all clinicians.</p>	Head of healthcare Completed
5	The Governor should ensure that all prison staff are	Accepted	A governor's notice to staff "Medical Emergency Response	Head of Safer

Action Plan-Sam Molyneux. HMP Liverpool. Self – Inflicted. 01/04/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
	<p>made aware of and understand PSI 03/2013 and their responsibilities during medical emergencies which:</p> <ul style="list-style-type: none"> ▪ Ensures staff efficiently and effectively communicate the nature of a medical emergency; ▪ Ensures staff call for an ambulance immediately after an emergency code message is radioed. 		<p>Codes” is reissued every six months to ensure that all staff are aware of this instruction and are confident in following this procedure should they face a medical emergency. A copy of this notice is also on display in the control room in a visible position close to the operator.</p> <p>This is also covered in the Introduction to Safer Custody training.</p> <p>All control room staff have been issued with individual letters to ensure they fully understand the protocol for managing medical emergencies.</p>	<p>Prisons Completed</p>