

Action Plan					
No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible	Progress (to be updated after 6 months)
1	<p>The Governor should ensure that there are effective operating procedures in reception and that all staff understand the procedures for identifying prisoners at risk of suicide and self-harm and for managing and supporting them. In particular, staff should:</p> <ul style="list-style-type: none"> <li>▪ Have a clear understanding of their responsibilities and the need to record relevant information about risk in an appropriate manner.</li> <li>▪ Consider and record all the known risk factors of newly arrived prisoners when determining their risk of suicide or self-harm, including information from suicide and self-harm warning forms, PERs and medical records.</li> <li>▪ Open an ACCT whenever a prisoner has recently self-harmed, expressed suicidal intent or has other significant risk factors.</li> </ul>	Accepted	<p>All Band 4 Supervising Officers who manage the reception process have been briefed and advised of expectations and the appropriate actions in dealing with anyone identified as having increased risk of self. This exercise will be repeated again this year. This will help inform those who conduct reception procedures and increase awareness about risk particularly in relation to first time in custody, offence related risk and information identified within signposted information.</p> <p>All staff in reception undergo ACCT training once every 3 years. We have met the target of 80% staff trained/ refreshed and of the regular reception staff 90% are in date for this training. We will continue to prioritise refresher training for this group.</p> <p>The Band 4 Officer is responsible for supervising the department throughout the day and as such is responsible for ensuring staff are briefed of any at risk prisoners that are received.</p> <p>Staff in reception include a band 4 supervisor, band 3 officers, Band 2 operational support grades and nursing staff.</p>	31.11.15 Operations and Safer Custody	

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			All staff within this area have received advice and support to ensure they open an ACCT whenever a prisoner has recently self-harmed, expressed suicidal intent or has other significant factors. This is monitored monthly by the Safer Custody Manager.		
2	<p>The Governor should ensure that staff manage prisoners at risk of suicide or self-harm in line with national guidelines. In particular:</p> <p>ACCT documents should include all information about a prisoner's risk and case reviews should assess the level of risk taking into account all risk factors. The level of observations should reflect this risk;</p> <p>Case managers should ensure that caremap actions are tailored to meet the individual needs of the prisoner, are time bound and given to a named member of staff as necessary.</p> <p>Staff should perform checks as instructed on the ACCT front cover, at random intervals, and record observations in the</p>	Accepted	<p>The Night Orderly Officer carries out assurance checks on ACCT documents every 24 hours, supplementing the ACCT management process established by appointing two Band 4 ACCT Case managers to carry out the ACCT Case load within the establishment. The highly trained and competent case managers give continuity to each and every case as well as ensuring high quality care maps and case review notes.</p> <p>The Safer Custody Custodial Manager has been freed up from regular Orderly Officer and Nights commitment providing more resource to the Safer Custody department. This allows additional random sample management checks of all ACCT processes and documents.</p>	Completed	

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	ongoing record as close to the time of the check as possible.		<p>The standard of completed caremaps have now significantly improved following repeated criticism. The focus on caremaps has been supported through consistency in ACCT Case management by the two designated Band 4 Officers.</p> <p>Staff have been reminded via a notice to staff to conduct appropriate checks as per the ACCT and case managers directions. In addition the local refresher training includes a briefing on individual responsibility to conduct observations and interaction and recorded of them timely</p> <p>Information is issued to staff and management checks are supported through the Functional Head appraisal process</p> <p>All staff information notices and guidance will be re-issued before the end of November</p>		

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3	The Head of Healthcare should ensure that nurses assessing new prisoners consult all available sources of information and make appropriate referrals based on the prisoner's individual needs. All patient contact and referrals should be documented in the clinical record.	Accepted	<p>All nurses have been briefed and made aware of the importance of consulting all available information whilst assessing prisoners. Advice has been reissued to all nursing staff so as to check all paperwork such as re-call paperwork, Prisoner Escort Records (PER's) and any highlighted clinical notes during the reception screening process. All patient contact is recorded in the clinical record and all nursing staff have been reminded of their responsibility to do this. Management checks are now conducted to ensure compliance.</p> <p>This recommendation and subsequent response will be discussed/ monitored in the SLUG (Service Level User Group). Primary Care Team Meeting and Mental Health Team Meeting all which is minuted.</p> <p>A Criminal Justice functional mailbox is also being developed to further assist the sharing of information.</p>	Completed	
4	The Governor should ensure that night staff who have concerns about the behaviour of a prisoner identified as at	Accepted	This requirement will be specifically included in the Local Security Strategy and the information shared with all staff who may be required to attend for	31.08.15	

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	risk of suicide or self-harm, request immediate assistance, clearly stating the nature of the risk, and keep the prisoner under observation until help arrives.		night duties. This will be included in the night operating procedures that are given to night staff every night.	Security and Intelligence	
5	The Governor should ensure that all staff understand the need to use emergency medical codes in line with PSI 03/2013 and that control room staff call an ambulance immediately an emergency medical code is received, without waiting for further information.	Accepted	The procedure for medical emergency codes has been revisited and staff who are not fully compliant with the requirements are challenged and offered guidance by the duty Governor, Orderly Officer or attending manager.	31.11.16 Operations and Healthcare	
6	The Governor should ensure, in line with PSI 08/2010, that all staff, including healthcare staff, are included in a hot debrief after a potentially traumatic incident or death and are offered support.	Accepted	All the Senior Management Team who carry out the duties of Duty Governor are aware of the requirement for a local or "hot" debrief after a potentially traumatic incident or death. Further information will be issued as a periodic reminder of the requirements of post incident debriefs	Completed Safer Prisons and Equality	