

Action Plan- Ashley Warren Austin. HMP Chelmsford. Self-Inflicted. 16/10/2017

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare should ensure that staff manage prisoners at risk of suicide and self-harm in line with national guidelines, in particular:</p> <ul style="list-style-type: none"> • All staff should have adequate ACCT training and refresher training. • All staff should be reminded of their responsibility to start (or re-open) suicide and self-harm prevention measures for prisoners at risk and ensure all relevant information is recorded. • Staff should set actions on the immediate action plan or care map that are specific, meaningful and tailored to the individual to reduce their risk. • A prisoner's family should be involved where it would be beneficial 	Accepted	<p>HMP Chelmsford continues to adhere to the national training requirements and is currently on target with its nationally agreed weekly training programme for the roll out of the updated Suicide and Self Harm training package (SASH). This agreed programme started in May 2018 and is ongoing until March 2019.</p> <p>In addition to this mandatory training there will be a training event in June which will include reminding staff of the importance of opening/re-opening ACCTs, recording of risk information and encouraging family involvement in ACCTs. Staff will also be given a small written guide at the event to take away, which covers these areas. Similar training events will be held annually.</p> <p>Individualised and targeted training sessions will be attended by Case Managers on the use of the CAREMAP and Immediate Action Plan, setting SMART targets and defensible decision making. Staff new to case managing will be prioritised primarily however all case managers will attend.</p> <p>Staff have been reminded through the monthly newsletter to encourage family involvement in the ACCT process, where this would be beneficial. This was issued both electronically to staff and in hard copy for all departments, and advertised in communal staff areas. The local ACCT assurance check has been updated to include family involvement.</p>	Head of Safer Custody March 2019
2	The Governor should ensure a system is developed so staff can easily and quickly identify when a	Accepted	When an ACCT document is shut, a post closure alert will now be placed on the prisoner's NOMIS record to identify to all staff that this prisoner is in post closure. The group of adjudication liaisons officers have been	Head of Safer Custody Completed

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	prisoner is in post-closure and a that prisoner's ACCT status should be checked before adjudication papers are issued, and wing staff should be notified accordingly		briefed in a wing briefing that on putting together the adjudication paperwork, they ensure the prisoner's record is checked to identify if the prisoner is on an ACCT or in post closure and mark the paperwork accordingly. Where either of these occur, the issuing member of staff will notify the wing staff of their actions to ensure staff are aware of the potential increased risk.	
3	The Head of Healthcare should ensure urgent mental health referrals are actioned urgently, including those made at weekends and in the evenings.	Accepted	Mental Health services are provided by Essex Partnership University Trust (EPUT). All mental health referrals are made via a referral form and threshold assessment grid (TAG) score is used in order to triage referrals. Since April 2018 the daily Mental Health team now includes one mental health nurse for each residential end of the prison and this is including evenings and weekends. It is their responsibility to co-ordinate and ensure the referrals are assessment based on the triage system. The Mental Health manager now co-ordinates the staffing rota to ensure that there is sufficient nursing cover to carry out assessments.	Head of Healthcare Completed
3	The Head of Healthcare should ensure that lead pharmacists and IDTS at Chelmsford: <ul style="list-style-type: none"> • review the prescribing of pregabalin, audit the number of prisoners on this medication and review prescriptions in discussion with GPs and/or psychiatrists; • review the prescribing of hyoscine (Buscopan) to ensure 	Accepted	<p>Essex Partnership University Trust has recently appointed a new Chief Pharmacist who is currently reviewing the prescribing of pregabalin and hyoscine and drafting a protocol on the prescribing and auditing of these medications at HMP Chelmsford.</p> <p>Essex Partnership University Trust (EPUT) has ensured that a reminder via email has been be sent to all prescribers around the risks of prescribing multiple opiates. Safer Prescribing in Prisons and Pregabalin/Gabapentin guidance has also been sent to all GPs reminding them of the risk of multiple opiate prescribing in substance</p>	Head of Healthcare September 2018

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	<p>prescribers are aware of the clinical guidance about potential abuse;</p> <ul style="list-style-type: none"> • remind prescribers of the risk of multiple opiate prescribing in substance misuse patients • ensure IDTS discuss and document reasons for ongoing opiate prescribing for long-term prisoners. 		<p>misuse patients and a printed laminated copy is available in each treatment room in the prison.</p> <p>The New Drug Misuse and Dependence Guidelines (Orange Guidelines) has changed and now no longer states that those serving sentences of 26 weeks or more must have their medication reduced. All prisoner who are clients of the Integrated Drug Treatment Service (IDTS) are reviewed by the clinical IDTS team at 5, and 9 and 28 days as per policy and procedure. These reviews are documented within the record on SystemOne notes.</p>	
4	<p>The Governor should ensure that all staff understand that when life is in danger, they should enter the cell as quickly as possible, especially when there is a history of attempted suicide and self-harm.</p>	Accepted	<p>Staff were reminded of the dynamic risk assessment surrounding entering a cell and the preservation of life in a full staff briefing that took place in November 2017. There is a further training event scheduled in June which will give guidance to staff on entering a cell and the dynamic risk assessment needed to do this. Staff will also be given a small written guide containing this guidance.</p>	Head of Safer Custody June 2018
5	<p>The Governor and Head of Healthcare should ensure that staff are given clear guidance and check their understanding about the circumstances in which resuscitation is inappropriate in accordance with European Resuscitation Council Guidelines.</p>	Accepted	<p>All staff have been reminded in a notice to staff sent out in December 2017 on appropriate circumstances to start CPR. In the training event in June this guidance will be revisited and a written (take home) guide given to staff.</p> <p>EPUT reminded their staff in a full staff meeting in January 2018 [about the circumstances in which resuscitation is inappropriate] and the European Resuscitation Guidelines are available electronically. All new staff have an induction booklet to complete and as part of this they are</p>	Head of Safer Custody June 2018

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			required to read all memos and guidelines prior to their start date.	