

Action Plan
Responding to Recommendations in the Prison and Probation Ombudsman Investigation Report into the Death of Mr Branko Zdravkovic at The Verne Immigration Removal Centre on 9 April 2017.

Recommendation	Person to complete & Timescale	Action to be taken	Action status
<p>The Centre Manager and Head of Healthcare should ensure that staff manage detainees at risk of suicide and self-harm in line with national guidelines. In particular, they need to ensure that staff:</p> <ul style="list-style-type: none"> • Have a clear understanding of their responsibilities and the need to consider all known risk factors of detainees when determining their risk of suicide or self-harm, including information from previous suicide and self-harm procedures and records. • Set a frequency of ACDT observations, which relates directly to the detainee's level of risk. • Properly complete and update ACDT care maps with realistic and achievable goals and clear actions to address all risk factors. • Consider involving the detainee's family in the ACDT process when appropriate and 	<p>Centre manager & Head of Healthcare</p>	<ul style="list-style-type: none"> • All healthcare staff will use previous known risk factors when considering the risk of suicide and self harm that detainees pose to themselves. All staff have been reminded to ensure that they check all risk factors available to them as part of this process. • Both Healthcare and HMPPS staff will be included in the discussions with and contribute to the ACDT process; this discussion will include the level of observations to be set. • All staff undergo ACDT training and are aware of the process to be followed, including the care map. • Because of the transient population of the 	<p>Complete</p> <p>Complete</p> <p>Complete</p> <p>Ongoing</p>

<p>record this in the ACDT plan.</p> <ul style="list-style-type: none"> • Undertake ACDT and Mental Health awareness training. 		<p>centre, it is sometimes very difficult to identify and contact members of a detainee's family as it would be in a prison setting with a more static population. This will be discussed at the next Healthcare and safer detention meetings being held in December 2017.</p> <ul style="list-style-type: none"> • Healthcare to confirm that their staff have completed ACDT training and have had the required refresher training when necessary. Any that haven't will be identified and trained as soon as is practically possible. • The Centre Manager and Head of Healthcare are developing a mental health awareness training programme for all staff. The Verne IRC is being returned to HMPPS by the end of 2017 and during this period the majority of staff will be on detached duty working across other sites. For this reason any training will not be able to start until the middle of 2018 when The Verne reopens as a prison. • The Safer Custody Team is developing a training schedule to deliver ACDT training to all staff including health care staff. The expectation is that the first session will be held on 16/11/2017 but it is unlikely that all staff will be trained until 2018 due to the 	<p>Healthcare /Centre manager to update 12/12/</p> <p>For completion in 2018</p> <p>For completion in 2018</p>
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		closure of The Verne as an IRC.	
The Centre Manager should ensure that detainees assessed as at risk of suicide, self-harm, or with mental health issues, are only held in the care and separation unit when all other options have been considered and the reasons for their unsuitability fully documented.	Centre Manager	Defensible Decisions sheets are in place for Duty Governors to make informed decisions regarding an individual's risk of suicide and self harm. These are used when detainees are placed into the Care and Separation Unit. They are individual to each detainee and are dip sampled for quality weekly by Head of Residency and Safety.	Completed
The Centre Manager should ensure there are effective supply and demand reduction strategies to reduce the availability of New Psychoactive Substances, and that staff are vigilant for signs of their use and are briefed about how to respond when a detainee appears to be under the influence of such substances.	Centre Manager	Regular tasking meetings take place between the Security Department and the SMS recovery lead. The supply and reduction strategies in place at the centre are discussed at the local monthly security meetings, the last one taking place on the 8 th November. Staff are aware of procedures to follow when someone is suspected of being under the influence of an illicit substance. A toolkit written by Public Health England specifically for prison staff to refer to has been issued to all staff at The Verne. The toolkit provides details about NPS and the effect they might have on an individual. This was issued to staff in February 2017.	Completed and ongoing Completed
The Centre Manager should ensure that all staff are made aware of and understand DSO 09/2014 and their responsibilities during medical emergencies as outlined in the local Medical	Centre Manager	The medical response codes as detailed in DSO 09/2014 are circulated to all staff as a Staff Information Notice every 6 months. The last circulation took place in June 2017.	Completed

Emergency Response Code Protocol so that staff efficiently communicate the nature of a medical emergency, and there is no delay in calling, directing or discharging ambulances.		Emergency medical response cue cards have been developed and have been circulated to staff as reminders. These were last sent in May 2017.	Completed
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