

**Action Plan – Amir Faizi. HMP Pentonville. Self- Inflicted. 27/04/2017**

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 and self-harm in line with national guidelines, including that:</p> <ul style="list-style-type: none"> <li>• ACCT case reviews are multidisciplinary and include all relevant people involved in the prisoner’s care, including healthcare staff, where relevant.</li> <li>• ACCT care map actions are specific and meaningful, and identify all of the issues identified at assessment interviews and case reviews.</li> <li>• Case reviews consider all relevant information that affects risk, and staff review the risk of suicide and self-harm and frequency of observations whenever an event occurs which indicates an increase in risk.</li> <li>• Conversations are carried out as directed and documented in the ongoing record.</li> <li>• All staff in contact with prisoners are trained in ACCT procedures.</li> </ul>	Accepted	<p>In 2017 the Head of Healthcare initiated a new Local Operating Procedure to ensure that healthcare staff attend all first reviews.</p> <p>All ACCT Case Managers have now received Case Manager training, an element of which focusses on the production of the care map, ensuring that actions identified are appropriate and reflect issues raised during assessments and case reviews. This training also provided Case Managers with further skills and knowledge to ensure that case reviews capture all available risk information and that this then informs the setting of appropriate observation levels.</p> <p>In addition a new Quality Assurance process for ACCTs was implemented in August 2017, which includes consideration of the quality and efficacy of care maps.</p> <p>Immediately following Mr Faizi’s death a system was introduced to ensure that the embedded Immigration Team were alerted to any foreign national prisoner who was on an ACCT.</p> <p>The rollout of Suicide and Self-Harm (SASH) training is ongoing, and all staff will have received this by Spring 2019.</p>	<p>Head of Safer Custody Head of Healthcare Completed</p>
2	<p>The Head of Healthcare should ensure that the mental health team is adequately</p>	Accepted	<p>The mental health services review their staffing numbers on a regular basis to ensure the delivery of mental health</p>	<p>Head of Healthcare</p>

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	<p>resourced to provide a level of service equivalent to that which prisoners could expect to receive in the community, including that:</p> <ul style="list-style-type: none"> <li>• Staff understand the zoning system and its requirements, including that they review prisoners in the red zone daily, share decisions to move prisoners into or out of the red zone with the service manager, and obtain psychiatric input, when necessary.</li> <li>• Staff from different clinical backgrounds are competent to deliver a basic level of service.</li> <li>• The allocation of keyworkers reflects the needs of the prisoner and the skills and experience of the member of staff.</li> </ul>		<p>services can continue and be maintained. Should there be any shortfall, this is to be highlighted to the Head of Healthcare where appropriate cover can be sourced.</p> <p>All mental health staff will undertake a training update on the zoning system to ensure that appropriate pathways and escalation plans can be implemented.</p> <p>Staff will attend regular training updates to ensure they are competent to deliver the care provided.</p> <p>Rota planning looks at the skill mix of staff to enable for full service delivery to be maintained</p>	December 2017
3	The Governor should ensure that staff respond to complaints in line with national guidelines, including that they address all of the issues raised in the complaint.	Accepted	The failure of the relevant member of staff to properly address Mr Faizi's complaint is being addressed through internal performance management.	Governor April 2018
4	<p>The Governor should ensure that all prison staff are made aware of and understand their responsibilities during medical emergencies, including that:</p> <ul style="list-style-type: none"> <li>• Night staff enter cells as quickly as possible in a life-threatening situation.</li> </ul>	Accepted	<p>All staff have been provided with a small type credit card to carry round with them to remind them of the correct Code Red/Code Blue calling system.</p> <p>Guidance relating to the need to call an ambulance immediately when a Code Red or Code Blue is called was re-issued to control room staff in October 2017.</p>	Head of Safer Custody Completed

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	<ul style="list-style-type: none"><li>• Control room staff request an ambulance as soon as an emergency is called.</li></ul>			