

**Action Plan- Paul Thompson. HMP Liverpool /NC. 11/11/2018.**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Head of Healthcare should ensure that</p> <ul style="list-style-type: none"> <li>• prisoners consistently receive a first night reception screen, and that healthcare staff chase up any outstanding appointments; and</li> <li>• healthcare staff offer all new prisoners a second health screen, and that this is recorded.</li> </ul>	Accepted	<p>All prisoners are now receiving a secondary health screen within the agreed 7 day time frame; a room has also been acquired in the prisons welcome centre where all new receptions from the previous day are available to complete screens and this data will be captured on SystmOne. This was introduced in May 2018.</p> <p>There are currently no prisoners on a waiting list to be seen, and maintaining this standard is being driven by the new service manager lead (Mersey care) for Mental Health.</p> <p>Further to this process, the reception pathway is being improved, with a second day reception process for prisoners is planned to improve access to new receptions for the purpose of secondary health screening and well-being interventions taking place in a timely manner and recorded immediately on to SystmOne medical notes. This will be dependent on the introduction of a new staffing model and will be progressed over the next 2-3 months (August 2018).</p> <p>The Clinical Operations Lead from April 2018 has been charged with contributing to a new Business Assurance Framework; this includes making improvements in the quality of health services.</p>	<p>Completed</p> <p>Head of Healthcare</p>
2	<p>The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital understand the legal position on</p>	Accepted	<p>HMP Liverpool's Hospital Escort/Bed Watch risk assessment form includes a section for medical information. Prior to any escort being despatched, this risk assessment must be completed. Page two of the form will be</p>	Completed

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	<p>the use of restraints and that assessments fully take into account the health of a prisoner and are based on the actual risk the prisoner presents at the time.</p>		<p>completed by healthcare staff prior to being assessed by security and then signed off by Security Governor, Duty Governor or Deputy Governor. The medical assessment on page two of the form will consider any medical issues that may be of issue if restraints were to be applied.</p> <p>The full risk assessment will consider the risk the prisoner presents at the time and this will determine the strength of the escort and the cuffing arrangements.</p> <p>This is subject to review to be considered following any changes of conditions in health, behaviour or any other information. Any prisoner in outside hospital and under guard conditions will be visited on a daily basis by a custodial manager who will check on the guard to ensure everything is in order and to determine if any changes are required. Guard staff will also have the option to contact the duty Governor if they consider a change of circumstances has occurred.</p> <p>An email was issued in May 2018 by HMP Liverpool's Head of Safer Prisons to all appropriate operational staff, including healthcare, to ensure that all staff involved in the risk assessment completion and checks understand the legal implications.</p>	<p>Head of Safer Prisons</p> <p>Head of Healthcare</p>
3	<p>The Governor should ensure that a family liaison officer is appointed when a prisoner is assessed as seriously ill and that appropriate and timely arrangements</p>	Accepted	<p>In liaison with the healthcare providers Mersey care and Spectrum, it has been agreed that the Prison Safer Custody Team must be informed of any prisoner assessed as having a life threatening condition. A family liaison officer will be appointed immediately to inform and support the family</p>	<p>Complete</p> <p>Head of Healthcare</p>

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	are made for early contact with families.		accordingly.  This arrangement was written into an end of life pathway which was delivered via PowerPoint to all healthcare staff in May 2018.	