

Action Plan – Tyrone Givans, HMP Pentonville. Self- Inflicted. 26/02/2018

No	Recommendation	Accepted/Not Accepted	Response	
1	<p>The Governor and Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> • reception staff have a clear understanding of their responsibilities and the need to share all relevant information about risk • they consider and record all the known risk factors of a newly arrived prisoner when determining the risk of suicide and self-harm; and • they open ACCT procedures when indicated. 	Accepted	<p>The Governor will ensure that all reception staff are reminded through updated local guidance of the need to consider known risk factors when considering potential risk of self-harm/suicide, and that all known risk factors must be recorded. This updated guidance will also remind staff that they must open ACCT procedures when consideration of all the information available to them indicates this is appropriate.</p> <p>The Head of Healthcare will ensure all healthcare staff are booked on to and complete SASH training to ensure they are aware of the ACCT process, as part of the rollout of this training to operational staff.</p> <p>All Healthcare reception staff will in addition attend a three-day training course in December 2018 provided by the 'reducing deaths in custody team' around managing risk in reception. The Governor and Head of Healthcare are exploring the potential for this training to be extended to all prison reception staff.</p>	Governor December 2018
2	<p>The Governor and Head of Healthcare should ensure that all staff are aware of the need to refer any prisoner with a disability to the Equalities Officer to ensure that reasonable adjustments are made in line with PSI 2011/32.</p>	Accepted	<p>Notices have been provided in reception to prompt staff to make a referral to the Equalities Officer if they become aware of a prisoner with a disability being received into custody so that reasonable adjustments can be made. A Staff Information Notice will also be published to remind all staff of this requirement and all Healthcare staff will be advised of the requirements and correct pathway for referral to the Equalities Officer.</p>	Head of Equalities December 2018
3	<p>The Governor should review the operation and management of F wing, and, in</p>	Accepted	<p>A review of F wing will be conducted in order to ensure that Officers understand the importance of meaningful contact</p>	Head of Safer Custody

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	particular ensure that: <ul style="list-style-type: none"> • officers have meaningful contact with prisoners during their first weeks in custody, including individual conversations that allow them to get to know prisoners and identify their needs; • all significant information, especially that which could reflect a prisoner’s risk to themselves or others, is accurately recorded and acted on and intelligence reports are submitted when necessary; and • effective measures are in place to reduce the supply of illicit substances 		with prisoners – this message is supported by the current Five Minute Intervention (FMI) training; and will also be supported by the future roll out of Offender Management in Custody (OMiC) and Key Worker training in late 2018 and in 2019. The Governor for F wing will ensure that staff briefings reinforce this message. Information will be circulated via the Daily Report regularly reminding all staff of the importance of accurately recording information relating to the risk a prisoner poses to themselves or others and that intelligence reports are submitted appropriately. A review of the Drug Strategy and development of a Substance Misuse Committee will take place to best ensure that we have robust and intelligent data enabling us to put effective measures in place. This work will be carried out in partnership with key agencies and prison departments to best ensure a strategic and cohesive approach is adopted.	March 2019
4	The Head of Healthcare should ensure that staff attempt to obtain a prisoner’s community GP records, where relevant, on arrival at the prison.	Accepted	A new ‘Medicines Reconciliation and Collateral’ pathway was implemented in May 2018. The pathway has enabled a more structured and safer approach to managing medical records for new patients and is now reported to NHS England via the CQUIN target. This, in addition, to quarterly audits will offer the assurance around the required improvements.	Completed Head of Healthcare
5	The Head of Healthcare should ensure that there is a robust system to ensure that a prisoner’s clinical records are accurate and not duplicated.	Accepted	Local changes have been made to the frequency with which data is shared between NOMIS and SystemOne to reduce the risk of this occurring again.	Completed Head of Healthcare
6	The Head of Healthcare should ensure that	Accepted	The Local Operating Policy for the management of	Head of

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	clinical care, the level of observations and review for prisoners detoxifying from drugs and alcohol adhere to the local policies.		<p>substance misuse was re-issued to all senior members of staff in March 2018. The policy is currently under review due to prospective changes in the management of booked appointments from reception and regime changes.</p> <p>The review of policy will be in line with the 'Orange Handbook Guidelines' and be available by December 2018.</p>	Healthcare December 2018
7	The Head of Healthcare should ensure that staff make timely referrals for prisoners to the mental health team where appropriate.	Accepted	<p>A new Health and Well Being pathway has been in place since May 2018. This has improved the speed of patients' accessing Mental Health services and is managed by a team from Care UK & Building Futures to ensure maximum efficiency.</p> <p>The service will be audited in November 2018 after 6 months of being active.</p>	Completed Head of Healthcare
8	The Head of Healthcare should ensure that assessment for, prescription of and review of a prisoner's progress on medication follows NICE guidelines, including the associated record keeping.	Accepted	<p>Documentation audits will continue as per CareUK audit cycle. Records that demonstrate substandard documentation will follow pathway of more detailed audit and discussion in 1:1 with clinical supervisor.</p> <p>Lessons learned to be shared regarding assessment and follow up of Depression as per NICE guideline</p> <p>Depression medication review and interim review remain part of Quality and Outcomes Framework (QOF) points and are subject to monitoring through report generation through SystemOne.</p> <p>The introduction of Primary Care Mood review in March 2018</p>	On-going Head of Healthcare

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			has increased capacity for mental health reviews, and this pathway means that patients who are initiated on antidepressants or who need medication monitoring are seen by the NMP and any concerns escalated to the GP.	