

**Death of a Prisoner at HMP Highpoint - Action Plan**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible	Progress (to be updated after 6 months)
1	<p>The Head of Healthcare should ensure that mental health team fully assess the needs of newly-arrived prisoners subject to mental health care, including:</p> <ul style="list-style-type: none"> <li>• Applying appropriate acceptance and discharge criteria;</li> <li>• Contacting the prisoner's previous prison for a handover of care; and</li> <li>• Discussing the prisoner's referral at a mental health meeting.</li> </ul>	Accepted	<p>As of the 01.05.14, Care UK no longer sub-contract the mental health services at HMP Highpoint and employ all Mental Health Staff directly to lead on the service.</p> <ul style="list-style-type: none"> <li>• A Mental Health Pathway has been devised which will see a Mental Health Nurse working in reception and screening all newly received prisoners who present or have a history of mental health issues.</li> <li>• When a prisoner has been on an active caseload from a sending prison, they will be contacted for a handover to ensure continuity of care. System One ensure that all records follow with a prisoner allowing an immediate overview; the sending prison will be contacted based on the need of the prisoner but no longer than 5 working days of their arrival.</li> <li>• A written protocol on assessing the mental health needs of newly arrived prisoners was completed March 2014, and ratified by the Prison Health Partnership Board. The protocol was widely circulated to healthcare staff in August through e-mail, and will be published through a Notice to Staff (NTS) to all disciplined staff by 7 October.</li> <li>• A workshop in August was held with all mental health staff, which included an in-depth review of the reception processes and the mental health needs of newly arrived prisoners.</li> </ul>	<p>Target date for completion: 31.10.14</p> <p>Head of Healthcare.</p>	

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			<ul style="list-style-type: none"> <li>A Mental Health Referral meeting is held weekly and chaired by the Head of Healthcare. The meeting is attended by all members of the mental health team and the Consultant Psychiatrist.</li> </ul>		
2	<p>The Governor should ensure that prison staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including:</p> <ul style="list-style-type: none"> <li>Continuity of management of ACCT case reviews;</li> <li>Holding multidisciplinary case reviews which include all relevant people involved in a prisoner's care;</li> <li>Completing ACCT documents fully and accurately;</li> <li>Considering all known risk factors when determining the level of risk of self-harm or closing an ACCT plan; and</li> <li>Holding a case review when significant new information about risk becomes known.</li> </ul>	Accepted	<ul style="list-style-type: none"> <li>Current Supervising Officer duties and deployment are being reviewed with a view to the case management of ACCT being taken over by the Offender Supervisors which will improve continuity.</li> <li>All ACCT case reviews are now co-ordinated by the safer custody team who inform all required participants of the venue and time of the review which ensures reviews are not double booked and enables a multidisciplinary team to attend each review.</li> <li>Monthly Quality checks of ACCT documentation, focusing on the decision making, case review records and care plans are now in place which is overseen by the Safer Custody Department. Where deficiencies or training needs are identified these are followed up and addressed by the Safer Custody Custodial Manager.</li> <li>New written guidance will be issued to all case managers via email in October 2014 to remind them of the need to consider, and record that they have considered, all known risk factors when conducting reviews. Examples of risk factors will be included in the guidance. This guidance will also remind staff about holding case reviews when new significant information about potential risk becomes known. Additional support for case managers will be available in the form of one to one</li> </ul>	Target date for completion: 1/11/14	



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	<p>when there are no healthcare staff present, there are sufficient staff on duty with up to date first aid and CPR training and confident about using a defibrillator.</p>		<p>trained staff at HMP Highpoint is provided by Band 2 Night Patrol, Physical Education Instructors (PEI's), and a small number of night officers and custodial managers. Staff provide 24 hour cover. The current level of provision has been appropriately risk assessed as part of HMP Highpoints First Aid Risk Assessment Policy in April 2014.</p> <ul style="list-style-type: none"> <li>• The First Aid Risk Assessment Policy is reviewed on an annual basis. An assessment of additional first aid training needs for staff at HMP Highpoint will be reviewed once further national guidance is re-issued from NOMS Headquarters.</li> <li>• The defibrillator machine issues appropriate instructions when deployed and to assist staff, a Notice to Staff (NTS) will be issued in September to provide additional guidance.</li> </ul>	<p>30/09/14  Head of Corporate Services</p>	