

Action Plan- Sean McCann. HMP Peterborough. Self -Inflicted 13/03/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Director should ensure that staff manage prisoners at risk of suicide or self harm in line with national guidelines, including ensuring that:</p> <ul style="list-style-type: none"> • Prisoners at risk are not held in the segregation unit unless all other options have been considered and excluded and there are fully documented reasons to explain the exceptional circumstances. • Case reviews are multidisciplinary and include all relevant people involved in a prisoner's care, including mental health staff where appropriate and healthcare staff attend all first case reviews. • Staff review the risk of suicide and self-harm whenever an event occurs which indicates an increase in risk. • Staff set ACCT caremap actions which are aimed at reducing prisoners' risks to themselves and review them at each case review. • Staff use enhanced case management procedures for prisoners held in unfurnished accommodation and in other more complex cases. 	Accepted	<p>The Director briefed operational managers on 5 October 2016, reminding them of the need to ensure that residents are not located in the Separation and Care Unit unless there are exceptional circumstances, and to ensure that those reasons are documented, including that all other locations have been considered.</p> <p>Case Managers will be briefed in November 2016 to remind them of the requirement that all reviews have multidisciplinary input, and that healthcare must attend the first case review.</p> <p>Staff will be reminded by Director's Brief and verbal briefings of the need to raise any event that indicates increased risk, that they are to report such an event to a case manager to establish if a review is required, and that this is to be documented in the ACCT book.</p> <p>Case Managers briefing sessions will be held to provide guidance on the need to ensure that caremap actions are aimed at reducing a resident's risk to themselves, and these will be reviewed at each ACCT review.</p> <p>Anyone subject to ACCT procedures who are in unfurnished accommodation or are a more complex case, will be case managed by the most appropriate operational manager.</p>	<p>Director Head of Safer Prisons</p> <p>November 2016</p>
2	<p>The Head of Healthcare should ensure that prisoners referred to the mental health teams have timely, appropriate, face- to-face assessments in private and mental health management plans are drawn up when necessary.</p>	Accepted	<p>All referrals to the mental health team from a GP or a community team are seen within 24hrs to 7 days depending on severity, and routine referrals are seen within 2-3 weeks.</p> <p>Assessments will take place in clinics or in suitable rooms and are face-to-face.</p>	<p>Healthcare Manager</p> <p>November 2016</p>

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			<p>Following these assessments care plans are formulated and treatment options explored with an escalation process available if needed.</p> <p>A briefing will take place to remind staff of this process in November 2016.</p>	
3	The Director should ensure that all staff understand their responsibilities under the local security strategy when they find a prisoner has obscured his observation panel.	Accepted	<p>Information will be distributed to staff and covered in both an information notice and the Director's weekly brief, setting out staff responsibilities when a prisoner has obscured his observation panel.</p> <p>The responsibilities will also be discussed in team meetings</p>	Director November 2016
4	The Healthcare Manager should ensure that staff check emergency response equipment regularly and after each use and that the checks are recorded.	Accepted	Emergency response equipment is to be reviewed in order to ensure it is checked regularly and after each use. This is to be recorded and a quality assurance process by the clinical leads will take place on a monthly basis.	Healthcare Manager November 2016
5	The Director should ensure that staff consistently follow a clear pathway for managing prisoners suspected of using NPS and other illegal substances, and that security intelligence information is acted on quickly and investigated where necessary	Accepted	<p>A Substance Misuse Pathway is in place which allows anyone to refer any resident to recovery at any time. There are additional points to trigger consideration for a referral such as if an information security report is submitted, the resident is subject to an adjudication for drug related finds, or they have a positive mandatory drug testing (MDT) result.</p> <p>Security Information regarding drugs or the location of drugs is investigated and actioned, and searching is conducted where appropriate.</p>	Director November 2016