

Action Plan – Arthur Carroll HMP Wymott NC 28/07/2017

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that all abnormal blood tests are identified, recorded on SystmOne and appropriately reviewed by a clinician to allow effective continuity of care.	Accepted	There have been issues in the past with accessing regular Doctors. There are now Doctors in attendance Mondays to Fridays, and processes are in place where all blood reports are recorded and reviewed timely by the duty Doctor to permit effective continuity of care.	Completed Head of Healthcare
2	The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital understand the legal position on 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>A notice from the Governor was sent to all Managers within the prison regarding the use of restraints on prisoners at outside hospital or on hospital appointments. It was also issued as a notice to staff (NTS-218/15).</p> <p>The notice to staff is due to been re-issued to remind staff of its contents. This note reminds staff that they must ensure that the decision to apply restraints to a prisoner during a stay at outside hospital, or on escort to hospital, is risk assessed on a case by case basis. The risk assessment must take account of the likelihood of the prisoner escaping from the custody of the escorting officers, either independently or with the assistance of outside contacts. It also must consider the risk of harm to the general public, hospital staff or others. The likelihood of escape and/or the ability to cause harm may be impacted by the prisoner's physical condition at the time of the risk assessment. A distinction must be made between the risks posed by a prisoner when fit and those posed by the same prisoner when suffering from a serious and physically debilitating medical condition. Medical opinion on the prisoner's physical condition and ability to escape must be considered as part of the risk assessment process.</p>	Completed January 2018 Governor & Head of Healthcare

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			<p>Whilst the overriding duty on prisons is to ensure that those who may pose a danger to the public or staff do not escape, the application of restraints must at all times be proportionate to the assessed security risks and balanced by considerations of care and decency for the prisoner. Using handcuffs or other restraints on a terminally or seriously ill prisoner must be justified by credible security considerations, clearly recorded on the risk assessment form and reviewed regularly taking account of input from healthcare staff. The level of restraint necessary during a prisoner's stay at hospital must be assessed separately from the level of restraint required for the escort to hospital. The risk assessment must be kept under regular review to take account of the prisoner's changing clinical condition, treatment being received and any input from healthcare professionals. Any deterioration in the prisoner's clinical condition or the intensity of the treatment that they are receiving must trigger an automatic review of the level of restraint necessary. In the event of a patient's health deteriorating while at outside hospital, staff must contact the prison without delay and seek advice on the level of restraint required in such circumstances.</p> <p>All healthcare staff undertaking risk assessment for prisoners taken to hospital, may make recommendations as to physical condition of a prisoner, but the ultimate decision as to whether to handcuff or not will be made by the discipline staff.</p>	