

PPO Action Plan-Colin Davis. Isle Of Wight. NC. 29/09/2017

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should conduct a root cause analysis to establish why the haematology referral was not made in line with NHS pathways and should take appropriate action to ensure it does not happen again.	Accepted	<p>The Head of Healthcare undertook an investigation in June 2018 why the haematology referral was not made in line with NHS pathways.</p> <p>The GP involved did not have time to make the referral on the same day and scheduled it for his next administration session which was 6 days after he has seen the patient. He did not consider it to be an urgent same day/next day matter as Mr Davis had already been referred urgently for investigation at his previous prison some months previously and had declined to attend any appointments for investigations.</p> <p>Human Factors have been identified as the cause of the referral delay.</p> <p>Outcome and Action: The GP involved with this referral is the GP Lead of HMP Isle of Wight. He has been consulted and recognises that according to the guidelines this should have been referred the same day despite the fact that Mr Davis had already delayed treatment by several months. He will ensure his learning is shared with the other GPs. The administration team fax on same day when urgent referral given as instructed by the GPs to do so.</p>	Completed Manager-Care UK
2	The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital understand the legal position and that risk assessments show clear justification for the use of restraints.	Accepted	<p>The Head of Healthcare and clinical leadership team have held several meetings with the Head of Operations to discuss the Healthcare PER risk assessments and process. The most recent meetings were held on the 2 May and the 18 June 2018. The healthcare PER risk assessment has been reviewed on several occasions and has been updated following the meetings to support informed decision making.</p> <p>A Death in Custody lessons learned action plan will be reviewed each month, from 4 June 2108, at the monthly Safety and Security meeting, by the Chair Head of Residence</p> <p>The current medical risk assessment is constantly under review, the first review was undertaken in May 2018.</p>	Completed Complete Head Of Residence

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			<p>Written advice and guidance that sets out the legal position was sent to all Senior Operational Managers and Custodial Managers in May 2018. The guidance also instructs that risk assessments must record clear justification for the use of restraints by either attending the scene if not dealing with another incident or by visiting the hospital in person. All Senior managers and Custodial managers were briefed on this by the Deputy Governor in May 2018 with a follow up e mail.</p> <p>Written advice and guidance has been given to Healthcare staff at the end of May 2018, to ensure they understand the importance of medical input in the decision making process when prisoners are taken to outside hospital.</p>	<p>Complete Deputy Governor</p> <p>Complete Head of Safety</p>
3	The Executive Director of the Long-term and High Security Estate, should satisfy himself that the Governor takes effective action to address the inappropriate use of restraints at HMP Isle of Wight.	Accepted	<p>As of the 31 May 2018, the Governor has directed periodic testing of restraints applied for outside hospital visits and bed watches. This will be done at least quarterly, carrying out full reviews of PERs and supporting documentation, including Risk Assessments.</p> <p>The Executive Director is satisfied that appropriate actions are being taken to address the areas of concern.</p>	<p>Complete Executive Director</p>
4	The Governor and Head of Healthcare should ensure that all prisoners who are terminally ill are given the opportunity to apply for compassionate release.	Accepted	<p>The Head of Healthcare will ensure that prisoners are given the opportunity to apply for compassionate release. The GP will liaise with allocated Governor Grade Inquest Investigation & Liaison Officer (IILO) to commence the process as soon as a terminal diagnosis is given and the required limited life expectancy is agreed.</p> <p>The IILO will initiate the paperwork with the Offender Management Unit (OMU) to start the compassionate release application process.</p>	<p>Completed Manager Care UK</p> <p>Complete IILO & Head of OMU</p>