

Action Plan William Crome HMP Woodhill NC 31/10/2017

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Head of Healthcare should ensure that staff are proactive in ensuring clinical information is up to date, that information about referrals and appointments is tracked and actioned, and that expected notifications of appointments are pursued with external health providers</p>	Accepted	<p>Prisoners attending hospital are now seen on the same day of their return to custody by the unit nurse. Appointments are noted and communicated to the administrative team who log appointments and track them through the system using local spreadsheet, cNomis and SystmOne (S1).</p> <p>Confirmed appointments are added to the S1 ledger accessible to all Healthcare staff.</p> <p>External hospital appointment dates are added to the patients S1 notes on the day of receipt and should the appointment be cancelled a note is added by the administrative team on S1 to identify the reason for cancellation.</p> <p>Appointments are checked daily via cNomis to evidence attendance and non-attendance is followed up with the prison to identify the reason which is added to S1 patient record. Any prisoner who refuses, fills in a refusal of treatment form with a member of healthcare to demonstrate that they are aware of the risks involved in not attending. Appointments which fail due to prisoners refusing to attend or the prison being unable to escort are rebooked within 2 working days of the DNA being noted.</p> <p>Where prisoners have GP's, contact is made with patient's consent to notify the GP surgery that their patient is in custody and to open lines of communication to ensure continuity of care. This includes a specific request for information on medication and recent or outstanding hospital appointments.</p>	<p>April 2018</p> <p>Head of Healthcare</p>

Action Plan William Crome HMP Woodhill NC 31/10/2017

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
2	The Governor should ensure that decisions on escort arrangements are fully documented, based on correct information, effectively recorded and securely stored	Accepted	All escort paperwork is now collated, quality checked and filed in date order. The risk assessment is a standard template that requires the Healthcare to provide information that would affect someone's cuffing arrangements for a decision to be made.	Complete Head of Security
3	The Governor should ensure that, in line with PSI 58/2010, the Prison and Probation Ombudsman is promptly provided with all requested documents following a death in custody	Accepted	The Safer Custody Manager emailed all Heads of Function in November 2017 to remind them of their responsibility to provide information for the PPO in a timely manner. There is a check list in place which gives clear guidance regarding the information which should be collated immediately where a Death in Custody (DIC) has taken place. A copy of this has also been made available to all the Custodial Managers in order that there is no delay in initiating the collation of all the information regarding the DIC. As above there are new processes in place for collating and auditing escort paperwork.	Complete Safer Custody Manager
4	The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital are appropriately qualified and understand the legal position and that risk assessments show clear justification for the use of restraints.	Accepted	All staff completing risk assessments have been reminded of the Graham judgement. Managers who complete management checks have also been reminded so they can adjust any cuffing decisions if required due to medical or decency reasons. Risk assessments will record clear justification for the use of restraints. Only registered healthcare professionals complete and sign the risk assessments.	Complete Head of Security