

Action Plan – Mr Brett Oelrich – Self- Inflicted – HMP Woodhill. 11/05/18

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Governor and Head of Healthcare should ensure that all staff, regardless of grade or discipline, understand that they have a responsibility to open (or reopen) an ACCT if they consider it necessary.	Accepted	<p>Governors Order No 01/2019 was issued in January 2019 to remind all staff of their responsibility to open or re-open an ACCT if they consider it necessary and that this should not be delegated to another person. This information is also provided as part of the ongoing programme of Suicide and Self-harm (SASH) training which is mandatory for all staff and is managed by the Training Department as part of their annual plan.</p> <p>In addition to the mandatory HMPPS training, Central North West London (CNWL) Offender Care, the prison health provider, has developed two on line learning packages, for both SASH and ACCT procedures. All clinical staff employed within a custodial setting are required to complete both these e-learning courses annually, including a post course test. Currently all staff within the healthcare team at HMP Woodhill have completed this learning and are within date.</p>	<p>Head of Safety Completed</p> <p>Head of Healthcare Completed</p>
2	<p>The Governor and Head of Healthcare should ensure that prison staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including that staff:</p> <ul style="list-style-type: none"> • hold multidisciplinary ACCT reviews, with healthcare staff in 	Accepted	<p>Governors Order No 01/2019 was issued in January 2019 to remind staff of their responsibilities when managing prisoners at risk of suicide and self-harm in line with national guidelines. This includes the need for ACCT reviews to be multi-disciplinary and that Healthcare staff must be in attendance at the first review, to set effective caremap actions that are specific and aimed at reducing risk and which must be updated at each review. Staff are also reminded that ACCT documents must be located in the same area as the prisoner and that they must transfer with the prisoner until the post closure review has been completed.</p> <p>All Band 4 and Band 5 case managers have completed their case manager training, and those identified to be temporary promoted will complete their training in advance of taking up post. Guidance was also</p>	Head of Safety Completed

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	<p>attendance at the first case review;</p> <ul style="list-style-type: none"> • set effective caremap actions that are specific and meaningful, aimed at reducing risk, and update them at each case review; and • Keep the ACCT document with the prisoner until the post-closure review has been completed. 		<p>issued to all Band 4 and Band 5 case managers in November and December 2018 reminding them of their responsibilities.</p> <p>Additionally, during 2018, awareness sessions were provided by the National Safety Team to all Band 4 case managers, which included guidance for writing effective care maps. These sessions were repeated in January 2019 and the guidance sent to those not able to attend.</p> <p>There is also a local operating policy (LOP) in place agreed with the Safer Custody Team, and ratified through the Integrated Clinical Governance Committee chaired by Governing Governor, to optimise the attendance of an appropriate member of healthcare staff at ACCT reviews. The CNWL (Central North West London) Prison Health Provider ACCT LOP will be reviewed and re-issued by April 2019.</p>	<p>Head of Healthcare April 2019</p>
3	<p>The Governor should ensure that:</p> <ul style="list-style-type: none"> • all information about bullying and intimidation is fully coordinated and investigated; • those suspected of involvement are appropriately challenged and monitored; • staff consider whether victims are at increased risk of 	Accepted	<p>The establishment's Violence Reduction (VR) policy was updated and published in December 2018. This reiterates the need for staff to submit an intelligence report for all incidents of bullying and violence. The policy outlines the way in which those suspected of involvement in bullying or violence should be managed and monitored. The policy also sets out how victims of violence should be supported and that the potential increased risk of suicide and self-harm should be considered. A link to the document was included in the weekly newsletter which is sent to all staff. A copy is also available on the local computer shared drive that can also be accessed by all staff.</p> <p>All suspected perpetrators of violence or bullying are interviewed as part of the investigation and a decision made on whether to monitor or map</p>	<p>Head of Safer Custody Completed</p>

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	<p>suicide or self-harm; and</p> <ul style="list-style-type: none"> Apparent victims are effectively supported and protected with meaningful, long term solutions, which address their individual situation. 		<p>the prisoner based on the evidence available.</p> <p>Each victim of violence is also interviewed by a member of the Safety Team and a letter offering support is sent advising that they are able to engage with the Safety Team on a one to one basis. The letter also advises that there are interventions and ongoing support available for those who wish to participate.</p> <p>Care plans for victims are monitored by the Safer Custody team to ensure that they meet individual needs and offer meaningful solutions. NOMIS is updated with a record of the interview and a database kept.</p>	
4	<p>The Head of Healthcare should ensure that prisoners with a dual diagnosis receive appropriate integrated treatment.</p>	Accepted	<p>A Dual Diagnosis policy has been jointly developed by CNWL and Westminster Drug Project (WDP) who currently provide substance misuse services within HMP Woodhill. A representative from Mental Health attends the weekly clinical review meeting with WDP to discuss individuals that come under the care of both teams and are considered to have a dual diagnosis.</p> <p>From April 2019, CNWL have been contracted to provide integrated healthcare which includes substance misuse services and the service pathway and policies are in the process of being reviewed.</p>	<p>Head of Healthcare June 2019</p>