

Action Plan

Responding to Recommendations in the Prison and Probation Ombudsman Investigation Report into the Death of Amir Siman-Tov at Colnbrook Immigration Removal Centre on 17 February 2016.

Recommendation	Person to complete & Timescale	Action to be taken	Action status
<p>The Head of Healthcare should ensure there is a protocol in place with Hillingdon Hospital that covers the proper handover of discharge information and the results of tests undertaken on detainees in hospital.</p>	<p>Head of Healthcare April 2017</p>	<p>A template document is being developed locally to accompany detainees who are taken from the centre to local hospitals for medical treatment/assessment. This template will be provided to the local hospital for completion at point of discharge. This should ensure that, in future, sufficient handover information is passed from the hospital to IRC Healthcare staff for ongoing clinical management. The completed template will be scanned by IRC healthcare on to the detainee's local electronic medical record.</p>	<p>Ongoing</p>
<p>The Head of Healthcare should ensure that all detainees discharged from hospital have a care management plan in place on their return.</p>	<p>Head of Healthcare April 2017</p>	<p>The supplier that operates the centre on behalf of the Home Office (Mitie Care and Custody) notifies the healthcare team when detainees who have been escorted to hospital arrive back in the centre.</p> <p>All detainees returning from hospital are seen in reception by the healthcare nurse before being located back to their rooms.</p> <p>All detainees returning to the centre following discharge from hospital will have a 24 hour care management plan put in place which, using the discharge information from the hospital, will:</p> <p style="margin-left: 40px;">a. Specify the level and frequency of clinical</p>	<p>Completed and Ongoing</p>

		<p>observations to be undertaken.</p> <ul style="list-style-type: none"> b. Identify any further tests which remain outstanding. c. Ensure that referral to the GP has taken place for the following day (or earlier if clinically indicated). d. Specify any medication requirements (e.g. new medication or increase in dose of existing medication) e. Specify any other observations required e.g. under Assessment Care in Detention Teamwork (ACDT) monitoring. <p>A template is additionally being developed for use on SystemOne (electronic clinical record system) to incorporate immediate 24 hour care plan and discharge recommendations from hospital. This will be in place by the end of March 2017 and its implementation monitored</p>	
<p>The Head of Healthcare and the Centre Manager should clarify procedures to ensure that all nursing staff properly check detainees required to take medication under supervision, especially those monitored under ACDT procedures.</p>	<p>Head of Primary Care Immediate</p>	<p>For detainees who are not permitted to keep and administer their own medication “in possession”, clear procedures are in place to manage how their medication should be taken and monitored by healthcare staff.</p> <p>Detainees who are being managed under ACDT procedures are discussed at daily briefings to ensure that all staff are aware.</p> <p>The taking of medication is monitored in line with the recently published (February 2017) Royal Pharmaceutical Society professional standards for optimizing medicines for people in secure environments.</p> <p>Procedures (set out below) ensure that healthcare staff</p>	<p>Completed and Ongoing</p>

		<p>supervise the taking of medication by detainees – including for those detainees being managed under ACDT procedures.</p> <ol style="list-style-type: none">1. All detainees will receive their medication from the medication hatch and will be given approx. 180 ml of water to take their tablets with.2. Detainees must be asked to drink the water and ingest the medication before leaving the medication hatch.3. All detainees to be asked by the healthcare member of staff providing the medication to open their mouth after taking the medication and before leaving the medication hatch to confirm that no medication has been concealed in the mouth and has been swallowed.4. No medication to be given to detainees to take later – all medication which is not suitable for a detainee to have “in possession” must be taken in the presence of and under the observation of healthcare staff at the medication hatch.5. Staff who have concerns that detainees might be concealing medication (despite observing the process) should report this to their manager in healthcare immediately and complete a report a report on the healthcare incident reporting system highlighting their concerns.6. For detainees on an ACDT, non compliance with medication should be noted on the detainee’s individual care map as a risk to ensure that all staff are observant for signs of the detainee displaying signs of medication toxicity. <p>A healthcare management instruction has been issued to</p>	
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		all staff advising them of these procedures.	
<p>The Centre Manager and Head of Healthcare should ensure that staff manage detainees identified as at risk of suicide and self-harm in line with national and local guidelines, including:</p> <ul style="list-style-type: none"> · Holding multi-disciplinary case reviews attended by all relevant people involved in a detainee’s care; · Communicating risk factors to all relevant departments involved in a detainee’s care; · Reviewing detainees on constant supervision daily; · Managers make regular quality control checks. 		<p>Mitie Care & Custody have conducted a full review of the centre’s Safer Detention Policy. The policy has been updated to include the following:</p> <ul style="list-style-type: none"> • What is a Multi-Disciplinary Team Meeting (MDTM)? • Process for inviting stakeholders to MDTMs • Process for reporting and recording ‘no show’ of stakeholders at MDTMs. • Outlining ‘one off’ verbal handover and how this is reported and recorded. • Process for identifying Single Points of Contact within stakeholder groups <p>The revised policy is due for publication on the 31st March 2017. Subsequent training and guidance will be provided to all operational managers on the policy changes. The centre’s healthcare team will be invited to participate in the planned training which is due to be completed by 31st May 2017.</p> <p>Mitie Care & Custody have conducted a review of the Detainee Management System (DMS). From this review development work to improve the internal communication of risk factors is scheduled and due for completion by June 30th 2017. Once this is in place local procedures for sharing risk information will be further reviewed. DMS is available to all stakeholders onsite at Heathrow IRC including healthcare staff.</p>	Completed and Ongoing

		<p>As part of the full review of the centre's Safer Detention Policy the policy has now been amended in respect of the requirements for constant supervision. The policy now reflects Prison Service Instruction (PSI) 64/2011 which states that constant supervision should be reviewed daily for the first 72hrs. Thereafter, the frequency of reviews is determined by the case manager in accordance with the detainee's assessed needs and careplan.</p> <p>The frequency and ownership of quality control checks on ACDT documents has been reviewed and updated to include a daily management check from both a Residential Manager and Duty Shift Manager. A member of the centre's Senior Management Team additionally conducts a weekly quality check on all ACDTs.</p>	
<p>The Centre Manager and Head of Healthcare should ensure that all staff are made aware of and understand the emergency code system and that an ambulance should be called immediately.</p>		<p>Mitie Care & Custody have re-issued guidance to all staff at Heathrow IRC (including healthcare staff) outlining the emergency code procedures as outlined in detention service order (DSO) 09/2014 'Medical emergency response codes'. The guidance has been issued on 4 occasions since Mr Siman-Tov's death.</p> <p>In addition to the re-issue of the guidance it is periodically displayed to staff using screen savers and display screens on the centre's shared intranet computer system which is used by all centre staff (including healthcare staff).</p> <p>Live tests of the emergency codes procedures have been implemented by Mitie Care and Custody under contingency test conditions. These contingency</p>	

		<p>exercises included healthcare staff.</p> <p>Further dates have been scheduled for 28th April, June 30th and 31st October 2017.</p> <p>The Home Office is also undertaking a review of Detention Services Order 09/2014 Emergency Medical Response Codes and the PPO will form part of the routine consultation of external stakeholders.</p>	
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