

Action Plan- Graham Gilbert. HMP Haverigg. Unclassified .30/06/2016

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare should ensure that prison and healthcare staff work together effectively, through regular multi-disciplinary team meetings and appropriate record keeping to ensure accurate and up to date information is available.</p>	Accepted	<p>Procedures have been reviewed and a number of systems have been put in place to address this issue.</p> <p>Daily prison operational meetings are chaired by the governor-in-charge, which have multi-agency and discipline attendance including primary and mental health alongside operational managers. Concerns or issues of note are raised at this meeting, which is recorded and minutes made available to all staff via the intranet, this is a long standing meeting which takes place every morning with the exception of training mornings.</p> <p>A multi-disciplinary team meeting takes place weekly prior to the psychiatrist visiting patients. The membership of this meeting consists of the GP, psychiatrist and Mental Health In-reach and Substance Misuse team managers. The purpose of this meeting is to ensure that appropriate patient information is shared between agencies. Introduced February 2017</p> <p>The Mental-Health In-reach team review all patient records prior to the psychiatrist assessing those patients and brief the psychiatrist accordingly.</p> <p>A multi-agency case management meeting takes place weekly between Mental Health In-reach, Substance Misuse Team alongside representative from the Primary Care Trust and Operational Manager from Safer Custody. The purpose of this meeting is to ensure that appropriate information is shared between agencies relating specifically to challenging and complex cases within the establishment to inform the decision making processes in the management of these individual cases. Introduced February 2017</p> <p>A monthly multi-agency Clinical Governance meeting is chaired by the Governing Governor, attended by Primary Care, Mental Health and Substance Misuse providers alongside CPFT Safeguarding team. Concerns regarding particular patients can be discussed in this forum and actions agreed.</p>	<p>Completed</p> <p>Governor</p> <p>Greater Manchester Mental Health Trust(GMMHT)</p> <p>Head of Healthcare</p> <p>Head of Safety</p>

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W2	The Governor should ensure that significant incidents are logged and shared, and that prisoners are appropriately monitored when they return from hospital after having been seriously unwell	Accepted	<p>A process will be put in place which encompasses the following:</p> <ul style="list-style-type: none"> • A protocol will be developed to ensure that information regarding a prisoner will be shared appropriately with those staff responsible for his care. This will be in the form of a Notice to Staff and staff briefings. • The Safer Custody Department will work alongside healthcare providers to ensure appropriate monitoring and observation procedures are in place on a prisoner's return from hospital after having been seriously unwell. • An accompanying letter will be forwarded with the patient of all unexpected or unplanned hospital appointments, outlining the current healthcare provision at the establishment and requesting that any discharge planning document be forwarded to the prison with the patient. 	<p>July 2017</p> <p>Head of Healthcare</p> <p>Head of Safety</p>
3	The Governor and Head of Healthcare should ensure that the strategy to reduce the supply of and demand for new psychoactive substances is consistently implemented, and that staff are vigilant for signs of their use and are briefed how to respond when prisoners appear to be under the influence of such substances	Accepted	<p>The local NPS policy contains information regarding the signs that may indicate a prisoner is under the influence of a Psychoactive Substance and the actions required to provide clarification of this, however this policy will be reviewed to ensure it reflects current guidelines and health care information.</p> <p>The Substance Misuse Strategy meeting take place on a monthly basis and is attended by the GP, substance misuse and mental health team managers alongside representative from Primary Health Care providers. This meeting is chaired by the Deputy Governor and attended by the Security Department.</p> <p>Supply reduction and NPS form part of the standing agenda for the Substance Misuse Strategy meeting. The drug supply and reduction are also discussed as part of the security committee meeting, attended by representatives from primary health care providers alongside the substance misuse team manager and operational managers from all areas of the establishment.</p>	<p>July 2017</p> <p>Head of Safety</p> <p>GMMHT</p> <p>Head of Security</p>
4	The Governor should ensure that the drug supply reduction strategy includes intelligence led searching.	Accepted	The local Psychoactive Substance policy will be reviewed to ensure that it contains the guidance that, on the discovery of a prisoner whom staff believe to be under the influence of a Psychoactive Substance, staff are to ensure, as soon as is reasonably practicable, that all reasonable precautions have been taken to ensure the prisoner does not have access to Psychoactive Substances this include the	<p>Completed</p> <p>Head of Safety</p> <p>Head of</p>

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			<p>searching of the individual and his cell.</p> <p>It is now possible to test for a number of Psychoactive Substances through Mandatory Drug Testing, this includes the intelligence led urine testing of prisoners suspected of being under the influence of a psychoactive substance.</p>	Security
5	The Governor should ensure that all prison staff are made aware of and understand PSI 03/2013 and their responsibilities during medical emergencies, and ensures there are no delays in calling ambulances	Accepted	<p>The following action has been taken in respect of this recommendation:</p> <ul style="list-style-type: none"> • A Notice to Staff has been issued referring to PSI 03/2013 – Medical Emergency Response Codes and reiterating the need to call an ambulance when a medical emergency code is received. • A training package has been developed by NHS England entitled Emergency Response in Custody, to address the issues surrounding the emergency response including the codes used. • Head of Healthcare has presented to the full staff meeting, reminding staff of their responsibilities during a medical emergencies • Pocket sized aide memoirs have also been issued to all existing employees • All new employees attend an Induction with Safer Custody where the process is explained and the aide memoir issued • All staff working in the communications room will be briefed and reminded of expected actions to be taken when Code Blue/Red called. 	<p>Completed</p> <p>Head of Safety</p> <p>Head of Healthcare</p>
6	The Governor should ensure that all prison staff are made aware of PSI 24/2011 and Local Security Strategy 2.77 and that they understand that, subject to a personal risk assessment, they should enter a cell at night when there is potentially a risk to life.	Accepted	<p>To ensure that all staff are fully aware of the LSS requirements a Notice to Staff has been issued. The following action will be taken to provide assurance:</p> <ul style="list-style-type: none"> • Night managers will ensure staff are fully aware of the requirements through staff briefings • Duty Governors will carry out assurance checks whilst completing Night Visits 	Completed Head of Security