

**Action Plan – Leslie Twite HMP Doncaster NC. 23/05/2018**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that the first and second stage reception screenings are undertaken in line with NICE Guideline 57.	Accepted	<p>The first and second stage reception screenings were reviewed and updated in December 2018 to ensure compliance with NICE Guideline 57.</p> <p>The uptake of second reception screen is historically poor with limited completion but there has been extensive work around this and dedicated staff undertake various strands of work to mitigate against this. The second reception screening is in line with Guideline 57 and was implemented at the time of Mr T's death. The procedure to engage patients in this process has been reviewed to encourage attendance; if patients however choose not to attend this cannot be enforced. Patients receive advance notification of the appointment and if they do not attend a letter is sent asking them to reconsider the opportunity and another appointment is then scheduled.</p>	Complete Head of Healthcare
2	The Head of Healthcare should ensure that high blood pressure is promptly and appropriately investigated and treated in line with NICE guidelines.	Accepted	<p>Hypertension is monitored through Quality of Framework (QoF) expectations. This process is overseen by the Advanced Nurse Practitioner. Missing patients on the Hypertension QoF register are routinely recalled in line with community practice expectations. The QoF arrangements are also closely monitored by Care UK compliance and performance analyst and exception reporting forms part of the compliance reports to ensure all patients receive appropriate and timely clinical interventions.</p> <p>The above process is reiterated to staff through regular training, extended training is planned for March 2019.</p>	Complete Head of Healthcare
3	The Director should ensure that all staff undertaking and reviewing risk assessments for prisoners taken to hospital understand the legal position and that medical opinion about a prisoner's ability to escape must be considered as part of the assessment process and reviewed as circumstances change	Accepted	This is a decision for the Duty Director and must be taken on an individual basis. Consideration should be given to previous behaviour whilst on escort and also what is stated in the LSS. The existing practice is for escort staff to be fully briefed about the prisoner's risks including medical input as to the prisoner's ability to escape. The management check on the assessment document also includes a section for any medical information to be taken into consideration.	Complete Security

**Action Plan – Leslie Twite HMP Doncaster NC. 23/05/2018**

<b>No</b>	<b>Recommendation</b>	<b>Accepted/Not Accepted</b>	<b>Response</b>	<b>Target date for completion and function responsible</b>
			<p>Further, medical updates are obtained about the prisoner’s condition during hospital stays every 24 hours during routine management checks. This means that the use of restraints is reviewed during hospital stays and medical opinion is therefore taken into account as a matter of course in reviewing the use of restraints.</p> <p>Escort Staff were reminded in July 2018 of the legal position and the requirement to include the medical opinion about a prisoner’s ability to escape as part of the assessment process and will be subject to review as circumstances change. This continues to be part of the brief to escort staff and the new risk assessment document includes the medical assessment on cuffing arrangements and the prisoner’s ability to escape.</p> <p>There is also handover guidance for escort staff on what to do should there be any changes in behaviour and/or condition/medical circumstances change.</p>	