

**Action Plan – Sean Jarvis at HMP Dovegate on 09/11/2017**

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that when there appears to be an ongoing issue with a prisoner's medication, a member of staff should explore this with him in person.	Accepted	<p>The new local In Possession (IP) policy for medication and the Do Not Attend (DNA) Medication policy was launched in January 2018 to improve how medication is issued to prisoners. The new DNA policy in particular outlines a clearer process for healthcare staff when a prisoner is not attending the medication hatch for prescribed medication. All healthcare staff were made aware of these policies through a staff notice in January 2018.</p> <p>To ensure improved ways of working, the DNA medication report is now produced every 72 hours for discussion and is escalated through the local healthcare briefing meetings. These meetings are attended by healthcare staff and any concerns identified are actioned by a designated member of staff. If there are patients who are not attending for their medication these patients will be discussed and then seen in person by a member of healthcare.</p> <p>There is also a process in place for prisoners to discuss any medication concerns through the house block nurse, via walk ins or during medication rounds. All concerns raised will be documented by the nurse and referred to the pharmacy team. CARE UK, the healthcare provider at the prison also has a concerns process which is managed by the CARE UK administration team. Any medication issues are picked up through this route and managed by the pharmacy team and addressed. This recommendation will be monitored by the lead pharmacist.</p>	Head of Healthcare Completed
2	The Head of Healthcare should ensure that when a prisoner reports significant health concerns via the electronic application system, he should be seen in person	Accepted	When a prisoner reports a significant health concern via the electronic application the application will be picked up the CARE UK admin team within 24 hours, and escalated to the Healthcare team leader who will also ensure the prisoner is seen urgently in person. All healthcare staff were reminded via a staff notice in June 2018 about the importance of dealing with any applications as soon as they are received.	Head of Healthcare Completed.

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			Daily healthcare walk in clinics are also available on all house blocks, as an alternative method for prisoners to raise any health concerns and be signposted. These clinics are facilitated by a member of healthcare.	
3	The Head of Healthcare should ensure that when a prisoner reports mental health concerns, healthcare staff should make wing staff aware.	Accepted	<p>Any significant issues in relation to a prisoner having mental health concerns are discussed at the weekly safer custody meetings, which has a multidisciplinary attendance, at which a representative from each wing is also required to attend. Wing staff are made aware at these meetings about any prisoner on their wing with mental health concerns, which is then communicated by them to all wing staff in the daily morning briefing meetings to ensure all staff are made aware so the prisoner can be appropriately supported.</p> <p>Any key communication from the weekly safer custody meetings is also cascaded to healthcare staff via the daily staff briefings. Healthcare staff are required to document any health concerns about a prisoner on their SystemOne medical records, and were reminded via a staff notice in June 2018, that if they have any concerns about a prisoner's mental health, then they must inform wing staff and the safer custody department so all relevant staff dealing directly with prisoners are made aware.</p>	Head of Healthcare Assistant Director for Safer Custody Completed
4	The Director and the Head of Healthcare should review radio coverage and ensure that there are adequate arrangements in place for staff who may be required in an emergency to be contacted without delay.	Accepted	<p>A review of the quality of radio coverage across the establishment took place in November 2017. A second review will take place in June 2018, and be considered at the local delivery board meeting with any further areas for improvement identified and acted upon.</p> <p>Staff required in an emergency, such as control room staff and those carrying radios, were reminded in March 2018 via a staff notice about what to do in the</p>	Director Head of Healthcare Completed

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			<p>event of a radio not working and of general emergency response procedures. In the event of radio failure, staff are required to raise a general alarm and shout for assistance stating that there is a medical emergency. Control room staff are then responsible for radioing first responder staff, including healthcare, to alert them to the need to attend the scene immediately.</p> <p>Staff carrying radios were also reminded at this time of the importance of logging a charged radio battery onto the radio net to check the signal of the radio so they can be contacted without delay should an emergency arise, as well as the importance of logging out when they are not using a radio so the control room are aware of which radios are active in an emergency situation.</p> <p>Following a review of arrangements for calling on staff in emergency situations in November 2017, additional staff have now been issued with radios so there are more staff available in emergency situations that can be radioed. Within the Healthcare Department, the number of radios issued to the team have increased from 3 to 7.</p>	