

**Action Plan – Robert Chapman. HMP Northumberland. Self- Inflicted. 01/07/2016**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor of Durham should ensure, in line with PSI 64/2010, that measures are in place for identifying prisoners at risk of suicide and self-harm and for managing and supporting them. In particular, this should ensure that reception staff:</p> <ul style="list-style-type: none"> <li>• Have a clear understanding of their responsibilities and the need to share all relevant information about risk;</li> <li>• Consider and record all the known risk factors of a prisoner when determining their risk of suicide or self-harm, including information from PERs and other sources;</li> <li>• Open an ACCT whenever a prisoner has recently self-harmed or expressed suicidal intent</li> </ul>	Accepted	<p>Reception staff are to be prioritised for the new Suicide and Self-Harm training package (SASH) with the 'Risk and Triggers' module at a minimum to be delivered to all reception staff within the next three months.</p> <p>Reception staff were reminded through manager briefings in May 2017 of their responsibilities regarding assessing a prisoner's risk of self-harm on reception, particularly around considering the effect of any change of status and using and sharing information received on self-harm warning forms, and other sources. Staff were also reminded that in cases where prisoners have recently self-harmed or expressed suicidal ideation then an ACCT must be opened.</p>	September 2017 Safer Custody and Operations
2	<p>The Director of Northumberland should ensure that prison staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including:</p> <ul style="list-style-type: none"> <li>• Understanding their responsibilities and the need to share all relevant information about risk;</li> <li>• Considering and recording all the known risk factors of a prisoner when determining their risk of suicide or self-harm;</li> <li>• Assessing the level of risk and</li> </ul>	Accepted	<p>All newly recruited staff are required to complete suicide and self-harm training as part of their initial training course. In order to capture established staff a training plan has been devised, which projects that all staff will have received at least part of the course by January 2019. The new Suicide and Self-Harm (SASH) training package will be prioritised for critical groups (including safer custody staff, reception, healthcare, care and separation unit and managers) so it is rolled out effectively.</p> <p>Consistent delivery of multi-disciplinary ACCT case reviews to ensure effective information sharing will be monitored through the weekly self-harm improvement meetings, as part of the quality assurance of ACCT documents undertaken by attendees including the Safer Custody SPCO and Deputy Director. From August this matter will also be monitored by the Deputy Director</p>	<p>January 2019 Training Manager</p> <p>August 2017 Head of Safer Custody/Head of Healthcare</p>

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	<p>recording the reasons for decisions;</p> <ul style="list-style-type: none"> <li>• Conducting ACCT reviews as specified in the national instructions.</li> </ul>		<p>through the weekly and monthly Safer Prisons meeting.</p> <p>A staff information notice will be circulated in highlighting the factors referred to in the PPO's thematic review of self-inflicted deaths, which was published in April 2014. This notice will also reflect the recommendation of the report.</p> <p>Local guides outlining the same information will also be devised and will be provided to all trained case managers. Newly trained case managers will be provided with this guide on completion of the training course. These steps will ensure case managers are aware of the requirement to identify whether any of the risk factors are relevant when carrying out each case review. For each identified risk factor the case manager is then required to assess the level of risk and identify support to reduce its impact. This information is recorded in the summary of the case review and the support element reflected in the caremap. Adherence to this approach will be monitored through ACCT quality assurance tests and through the self-harm improvement meetings.</p>	
3	<p>The Governor of Durham and the Director of Northumberland should ensure there is an effective supply and demand reduction strategy to help eradicate the availability of New Psychoactive Substances and other drugs, and that staff are vigilant to signs of their use and know how to respond when a prisoner appears to be under the influence of such substances.</p>	Accepted	<p><b>HMP Durham</b> HMP Durham have introduced additional security measures which have been successful in reducing supply of illicit items into the establishment. This has included support from the area search and dogs teams at the beginning of the financial year and they regularly deploy prior to and during exercise periods to deter throw-overs at the most vulnerable points around the perimeter. A large number of packages have been recovered since this deployment.</p> <p>The drug strategy document is currently under review and will be completed by September 2017. This document will deal with both supply and demand reduction.</p> <p>HMP Durham have a system in place for reporting prisoners who appear to be under the influence to healthcare and substance misuse team. This guidance was re-issued in July 2017.</p> <p><b>HMP Northumberland</b> A regional Psychoactive Substances (PS) strategy has been developed in</p>	<p>Head of Security September 2017</p> <p>Head of Residence &amp; Head of</p>

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			<p>conjunction with the healthcare provider and drug and alcohol recovery team. The strategy was finalised in December 2016 and is now being embedded within the prison. It includes as one of its key aims supply reduction.</p> <p>The Heads of Residence and Programmes are considering ways to improve staff awareness of PS and other drugs. In addition, guidance was issued to staff in mid-May, through the line management chain, on the action to be taken if a prisoner is believed to be under the influence.</p> <p>The security department oversee and manage actions within the Drug Supply Reduction strategic threat assessment, which first came into publication was first published in April 2016. Many of the actions in this assessment have been successful in reducing supply of illicit items into the establishment. A further review of the strategic threat assessment was agreed at the May Security Committee Meeting and will be undertaken to identify further activities to focus on supply reduction issues.</p>	<p>Programmes July 2017</p> <p>July 2017 Head of Security</p>
4	<p>The Director of Northumberland should ensure that all prison staff are made aware of and understand PSI 03/2013, Medical Emergency Response Codes and their responsibilities during medical emergencies which:</p> <ul style="list-style-type: none"> <li>• Ensures staff immediately call for an emergency ambulance when a medical emergency code is used;</li> <li>• Ensures that an emergency response protocol is in place with the ambulance service;</li> </ul>	Accepted	<p>PSI 03/2013 will be recirculated as a Director's Order. Arrangements have been put in place to ensure this particular notice is reissued on an annual basis in order to refresh staff and capture new recruits. Those staff deployed to work in the communications room have been reminded of the need to ensure there is no delay in contacting the ambulance service in the event of a code red of code blue being initiated.</p> <p>An emergency response protocol is in place with the local ambulance service and is reviewed at regular intervals.</p>	Completed Head of Security & Operations
5	<p>The Director at Northumberland should ensure that when a prisoner dies, the next of kin is informed</p>	Accepted	<p>The Director will ensure national processes are followed in relation to contacting the next of kin. This will include using a prison closer to the address of the next of kin if it is not feasible for a family liaison officer from Northumberland to do</p>	Completed Head of Safer Custody

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	without undue delay in accordance with national instructions		so. Those performing the role of Duty Director and Family Liaison Officer have been reminded of this arrangement in May 2017.	