

Action Plan – Mr Neville McNair at HMP Lewes on 16/06/2018

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor should ensure that staff manage prisoners identified as at risk of suicide and self-harm in line with national guidelines, including:</p> <ul style="list-style-type: none"> • ACCT caremaps should have specific, meaningful actions aimed at reducing prisoners' risk to themselves and progress should be considered and documented at each review. • All caremap actions have been completed before ACCT monitoring is stopped. • Post-closure reviews are completed within seven days of closure and the outcome documented in the ACCT. 	Accepted	<p>A Notice To Staff has been published encompassing the issues raised which include: varying times of ACCT checks, setting appropriate caremap actions and targets, completing ACCT documentation clearly, making ACCT reviews multi-disciplinary as a mandatory action and ensuring Case Managers only close an ACCT once all objectives written in the caremap have been completed.</p> <p>We will also circulate an ACCT good practice guide to all staff which encompasses all aspects of the document and the management of ACCTs.</p> <p>Changes have been made to the management of ACCTs in the post-closure stage. Rather than ACCTs remaining on the wing until the post-closure review takes place these are now held by Safer Custody who quality assure the closed ACCT and distribute ACCTs back to the wing manager on the day of the post-closure review to ensure that this is held on the same day. This has been in place for a few months and is working well.</p>	Completed Head of Safety
2	<p>The Governor should ensure that staff are reminded of the national and local policies on entering cells during medical emergencies.</p>		<p>A local notice to staff and all staff email was circulated in January 2019 relating to entering a cell in a medical emergency to ensure preservation of life. We continue to drive this message as a Strategic Leadership Team, specifically in the role as Duty Governors where staff are asked at random if they understand what to do in a medical emergency.</p> <p>The Custodial Manager group have all been emailed this as a specific action to ensure it is specifically shared with their staff as first line managers so they can get assurance that everyone understands their role in a medical emergency.</p>	Completed Head of Safety
3	<p>The Executive Director of Performance in HMPPS should ensure that POELT training accurately reflects national policies on entering</p>		<p>The current 12 week POELT training package provides new officers with skills and knowledge to deal with first on scene incidents and emergencies in line with national policies.</p> <p>The POELT course is subject to reviews every 6 months to ensure the content</p>	Completed Learning and Development

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	cells during medical emergencies.		remains up to date and relevant. Learning and Development Group are currently undertaking a review of the current training for new entry officers and once this has been implemented the content review cycle will resume. A Course Improvement Process (CIP) is in place to capture any minor changes to content for any Learning and Development courses.	
4	The Governor should ensure that: • control room staff call an ambulance immediately when a medical emergency is called; and • arrangements are in place to escort ambulance personnel to medical emergencies as quickly as possible.	Accepted	The Head of Operations has issued further reminders to staff via staff email and a notice to staff about the importance of calling an ambulance immediately when a code red or code blue is called. HMP Lewes has worked to embed this system and a prompt (by way of instruction) is placed within the communications room to ensure this takes place. With regards to allowing entrance to the prison, once an ambulance (or other emergency service) is called, it is the communications staff who inform the gate staff of the impending arrival to ensure staff are available to allow swift entrance. Any potential issues highlighted are raised to the Orderly Officer immediately. These instructions are also in a prominent place within the communications room.	Completed Head of Operations
5	The Head of Healthcare should ensure healthcare staff file intelligence reports where they suspect a prisoner is engaging in behaviour relating to substance misuse and/or the diversion of medication.	Accepted	All healthcare staff will be personally emailed by the Head of Healthcare regarding when it is necessary to complete an intelligence report, particularly in the scenario of substance misuse or diversion of medication. Healthcare will work collaboratively with prison staff to ensure that appropriate monitoring of medication dispensing gives the best possible way of monitoring situations like this. This is done by ensuring Prison Officers are present at all times when medication is dispensed.	Completed Head of Healthcare
6	The Chief Executive of HMPPS should provide the Ombudsman with a revised date for issuing detailed national guidance on measures to reduce the supply and demand of drugs		The Prison Drug Strategy was published in April 2019 and provides overarching direction for HMPPS and key partners, while the guidance provides practical advice and examples of good practice and will be embedded across the prison estate.	Completed Chief Executive for HMPPS

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	in prisons, and an assurance that this new date will be met.			