

**Action Plan – David Forbister at HMP Lowdham Grange on 08/12/2017**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Director should ensure that:</p> <ul style="list-style-type: none"> <li>• effective supply and demand reduction strategies are properly implemented to help reduce the availability and abuse of drugs, including the trafficking of prescription medications;</li> <li>• and staff are vigilant to signs of drug use and take appropriate action.</li> </ul>	Accepted	<p>A full review of the local drug and alcohol strategy took place in February 2018. As a result of the review, a monthly drug and alcohol strategy meeting now takes place, led by the Director, where the establishment's supply and reduction strategies are discussed and closely monitored, including intelligence reviews of those suspected of supplying drugs or trafficking prescribed medications.</p> <p>In January 2018, the establishment replaced its cell searching strategy from a routine cell searching model to a more intelligence-led model. This ensures that cell searching is now prioritised based on risk and security information. All staff were made aware of this at this time through a Director's Notice.</p> <p>Since January 2018, incidents of psychoactive substance (PS) use are reported at the daily operational meeting so all relevant staff are made aware of the issues. A multi-disciplinary PS task team were also appointed in January 2018 to interview prisoners suspected of drug use, to offer them support and signpost them to support services within the establishment, including a violence reduction team of eight staff to assist in identifying intelligence issues, and to support the establishment with the reduction of substance misuse.</p> <p>All staff were reminded by a Director's Notice in December 2017, of what to do in the event that a prisoner is found to be using or suspected of using psychoactive substances, and reminded how to document these concerns on the PS log form The PS log form</p>	Director Completed

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			<p>is monitored daily by the security manager.</p> <p>As part of its strategy to improve the reduction of drugs in prison, between January to April 2018, two additional patrol dogs and four drug detection dogs have been utilised by the prison, and a PS detecting mail device purchased. All incoming mail is now tested daily for any substances.</p>	
2	<p>The Director should ensure that all prison staff are made aware of and understand PSI 03/2013, Medical Emergency Response and their responsibilities during medical emergencies, in line with the local Medical Emergency Response Code protocol staff: a) are provided with guidance on identifying and correctly communicating the nature of a medical emergency; and b) ensure there are no delays in calling for healthcare assistance, directing or discharging ambulances.</p>	Accepted	<p>All staff were reminded in February 2018 through a Director's Notice about PSI 03/2013, Medical Emergency Response, and about the local policy on response codes, so they are fully aware of their responsibilities during medical emergencies. All staff were also reminded at this time that there must be no delays in calling for healthcare assistance, and control room staff reminded that there must be no delay in directing or discharging ambulances. Staff in the main control room are routinely audited by duty senior managers to ensure there is a timely response in calling for an ambulance.</p> <p>At a strategic management meeting held in June 2018, it was agreed that custodial managers will brief custody officers during daily briefings and at handover periods about emergency response codes so they are kept regularly updated and alert to this.</p>	Assistant Directors of; Security and Operations Residential Safety Completed
3	<p>The Director should ensure that the local policy on roll checks is reviewed and updated and that staff properly check on a prisoner's wellbeing during relevant roll checks so that if they identify signs</p>	Accepted	<p>A full review of the local policy on roll counts and the locking and unlocking of prisoners took place in July 2018. Following the review, all staff were provided with clearer instruction on the correct procedure for locking and unlocking prisoners and conducting roll counts in July 2018, via a Director's Notice, and</p>	Assistant Directors of; Security and Operations Residential

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	<p>of a prisoner's not breathing they request urgent medical assistance accordingly.</p>		<p>during Security Awareness Week, where refresher training was offered to staff about the updated roll count procedures.                      In April 2018, a Director's Notice was also issued to staff reminding them that they must check a prisoner's wellbeing during roll checks so that if they identify signs of a prisoner's not breathing, then they must request urgent medical assistance accordingly</p> <p>As the strategic management meeting mentioned above, in June 2018, it was agreed that custodial managers will brief staff at daily staff briefings about any updates to the local security policy, including refreshers of how to perform a roll check and a welfare check correctly. These briefings will be monitored in the presence of Assistant Directors from Residential to ensure they are completed to a good standard.</p>	<p>Safety Completed</p>
4	<p>The Director should ensure that, when necessary, prison staff request the assistance of a family liaison officer from another prison to break the news of a prisoner's death.</p>	<p>Accepted</p>	<p>The Director notified all family liaison officers and the Deputy Director via e-mail in July 2018, that where necessary, they must request the assistance of a family liaison officer from another local establishment to break the news of a prisoner's death.</p>	<p>Director Deputy Director Completed</p>