

**Action Plan – Edwin Gallienne. HMP Swaleside NC 14/01/2018**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> <li>• Prisoners with shortness of breath are urgently referred for chest x-rays and that the results are promptly investigated.</li> <li>• Arrangements are in place to respond to urgent requests to review prisoners.</li> <li>• Prisoners with abnormal physical observations are more closely monitored and urgent medical opinion is sought if the observations do not improve.</li> </ul>	Accepted	<p>The existing process for prisoners with shortness of breath is they receive an urgent referral to our resident GP who would assess / investigate and refer the prisoner to external hospital if required.</p> <p>When an urgent referral is made it is entered into the Healthcare Appointment ledger which escalates any issue and ensures the prisoner is seen by the GP. If out-of-hour, the duty medical staff would call 111 services for triage advice which results in a blue light ambulance or using the established call-in GP Protocol.</p> <p>If a prisoner has abnormal physical observations I/C24 staff follow the National Early Warning System [NEWS]; this system requires the taking of observations and is scored against the NEWS criteria. This system will advise to monitoring at which frequencies for the healthcare team, including accessing urgent medical opinion if the observations do not improve.</p> <p>Staff were reminded of all the above explained processes via a notification in March 2018. A full staff meeting discussed the process in March 2018 and the notes were minuted.</p> <p>Medical records were audited of prisoners complaining of breathlessness in January and May 2018.</p>	<p>Complete</p> <p>Head of Healthcare</p>
2	<p>The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital</p>	Accepted	<p>HMP Swaleside has moved to a new and more thorough Risk Assessment in July 2018, which includes additional Medical</p>	<p>Completed</p>

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	<p>understand the legal position on the use of restraints and that assessments fully take into account the health of a prisoner and are based on the actual risk the prisoner presents at the time.</p>		<p>information. Importantly it also includes the below guidance for ALL members of staff. In addition to this guidance the Local Security Strategy (LSS) has been amended to the effect that ALL external Bed watches must now receive a management check by an Operational Manager (Band 7 and above) within the first 24 hours following admission. This check is designed to review the current Risk Assessment and consider what if any use of restraints are appropriate in light of the prisoner’s current health at the time. Subsequent management checks will then carried out every 24 hours by a Custodial Manager who will report to the Head of Security or Duty Governor and change in circumstances or concerns that they may have.</p> <p>This was issued on a notice to staff and the LSS was updated to reflect the changes.</p>	Governor
3	<p>The Executive Director, Long-Term and High Security prisons, should provide this office with an update, within four weeks of receipt of this report, on what has been done to address the prison’s continuing failure to comply with case law on the use of restraints.</p>	Accepted	<p>Discussion took place at a meeting between the Prisons and Probation Ombudsman (PPO) and the Executive Director (ED) of the Long Term and High Security Prisons Group in July 2018 where the issue of failure to comply was discussed. The ED now has a Group Safety Team who liaise with the prison regularly and test the compliance of PPO recommendations. They provide assurance to the ED and Deputy Director who address failure to comply with the Governor.</p>	<p>Complete</p> <p>Group Safety Team</p>