

**Action Plan – Mr David Sparrow at HMP Norwich – Self Inflicted on 05/06/2019**

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Governor should ensure that recall documents are shared with prisoners in the required timeframe and the date recorded accurately.	Accepted	<p>The Head of the Offender Management Unit (OMU) and the Senior Probation Offender (SPO) lead will ensure that when recall packs are received into the establishment they are passed to the prisoner's allocated Prison Offender Manager (POM). The POM will hand deliver the recall pack and issue it to the prisoner without delay, explaining the outcomes of the recall.</p> <p>A daily rota system will be introduced and operated by the POM that is on duty to ensure that all recall packs are issued without delay. This process will be assurance checked once per month by the Head of Function and/or SPO lead.</p>	Completed Head of Offender Management Unit and the Senior Probation Offender lead
2	The Governor should ensure that all staff undertake ACCT observations as directed, actively engage with prisoners being monitored and record their engagement promptly.	Accepted	<p>HMP Norwich are currently piloting the new improved Assessment, Care in Custody and Teamwork (ACCT) which was implemented in June 2019. The new ACCT process offers clear updated guidance for staff supporting individuals in crisis. This guidance directs the minimum standards of conversations and observations and provides recording space on within the document to enable effective reporting on a daily basis. All handovers are documented to ensure that key information has been passed on between staff when changing shifts.</p> <p>The ACCT documents are quality assured daily through unit supervisor checks which ensures compliance and completeness of the records. Any failings identified during the unit supervisor checks to complete the observations within the required time frame or to document the observations correctly are robustly challenged immediately.</p> <p>The closed ACCT document is also quality assurance checked by the Safer Prison Team where this document is fully reviewed. Outcomes of the</p>	Completed Head of SASH

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			<p>quality assurance check are fed back to individuals and wider staff groups to develop delivery. Where repeat non-compliance issues are highlighted this will be challenged through the HMPPS poor performance management process.</p>	
3	<p>The Governor should ensure that staff understand their responsibilities when completing roll checks and that roll checks are properly carried out in line with local procedures.</p>	Accepted	<p>Quality assurance checks will be carried out monthly by the Head of Residence ensuring that the operational diaries containing the documented roll counts for each day are consistent and correct. Feedback from the quality assurance checks will be discussed with staff during the daily briefing meetings and any issues will be raised. The quality assurance documents will be held locally for audit purposes and the maintenance of the documentation will be managed by the Head of Security.</p> <p>The Head of Security will commission covert testing of roll check compliance, as required by local policy. These tests are to be completed by security staff who must be satisfied that roll check practices are suitable and effective. Poor practice and/or failings will be robustly challenged through the HMPPS poor performance management process.</p> <p>The Prison Officer Entry Level Training (POELT) mentor will provide all new prison officers with local training on the importance and requirements of undertaking roll checks correctly. This includes training specific to each wing in the prison with roll check exercises and instructions. The mentor must be satisfied that the new officers understand the requirements of conducting roll checks correct to procedure and this is signed off during the prison POELT induction, only when full compliance has been proven.</p>	<p>Completed Head of Residence and Head of Security</p> <p>Completed Head of Security Head of Business Assurance</p> <p>Completed Prison POELT mentor</p>

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4	The Governor should commission a fact finding investigation into the Night Duty Officer's actions on the night of 4 June with a view to considering whether any further action is appropriate.	Accepted	The establishment will be undertaking a full investigation in to the events of June 4 <sup>th</sup> 2019.	Head of Safer Custody March 2020
5	The Governor should ensure that our report is shared with Assistant Night Duty Officer so he is aware of our findings.	Accepted	The report has been shared with the Officer.	Completed Head of SASH
6	The Governor should ensure that all prison staff: <ul style="list-style-type: none"> <li>•Know what action to take if a prisoner being monitored under ACCT covers his observation panel and does not respond;</li> <li>•Are made aware of and understand PSI 03/2013 and their responsibilities during medical emergencies so that there is no delay in calling a medical emergency code or calling an ambulance;</li> <li>•Go into cells as quickly as possible in a potentially life-threatening situation subject to a risk assessment;</li> </ul>	Accepted	<p>The Head of the Suicide and Self-Harm (SASH) has implemented guidance for all staff on what actions they must take in the event that a prisoner on ACCT has blocked their observation panel and is not responding. This guidance has been sent to all staff through safer custody bulletins and has been discussed with staff in weekly residential briefings.</p> <p>The Governor re-issued a notice to staff in July 2019 reiterating the importance of using the emergency codes immediately and correctly in line with PSI 03/2013.</p> <p>Information relating to the correct use of emergency response codes has been placed on display in the control room and individual training with all of the control room operators has been completed to ensure that ambulances are being called in a timely and appropriate manner.</p> <p>Staff training on ACCT observations and the correct procedures to take during an emergency situation were provided during a speed training event</p>	<p>Completed Head of SASH</p> <p>Completed Governor</p> <p>Completed Head of Operations</p>

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	<ul style="list-style-type: none"> <li>•an inundation point key is readily available on every wing and staff know where to find it.</li> <li>•The Prison Group Director for Bedfordshire, Cambridgeshire and Norfolk should satisfy himself that Norwich has put effective measures in place to implement this recommendation.</li> </ul>		<p>in November 2019. This training will be given again at the next staff training event in February 2020.</p> <p>Guidance has been given to staff on the appropriate actions to take in a potentially life-threatening situation to ensure that cells are entered as quickly as possible. The local security strategy states that staff must complete a dynamic risk assessment of the situation and local guidance on conducting a dynamic risk assessment was sent out in July 2019 and training was also given during the staff training event in November 2019.</p> <p>All emergency access night pouches for night patrol officers now have an inundation key within the pouch for quick access during a potential emergency situation. The health and safety team have also reviewed the location of all inundation keys using national guidance of the prison's fire equipment as part of their required assurance checks.</p> <p>The PGD's Group Safety Team will undertake unannounced testing of these recommendations before March 2020. This assurance check will be by verbal questioning across areas of the prison to test staff responses to the issues raised along with physical checks of the keys for the inundation points. Where there is no assurance, this will be brought immediately to the Governor's attention, and reported to the PGD for his monthly meeting with the Governor.</p>	<p>Head of Safer Custody February 2020</p> <p>Completed Head of SASH</p> <p>Completed Health and Safety</p> <p>Group Safety Lead March 2020</p>
8	<p>The Governor and Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> <li>•All newly arrived prisoners receive an initial health screen in line with PSI 07/2015 and</li> </ul>	Accepted	<p>The commissioned healthcare supplier Virgin Healthcare will ensure that prisoners arriving in to custody will be seen by a qualified nurse and an initial healthcare screen will be completed in line with current guidelines and standards. The Night Nurse must complete the initial screening, if it has not taken place within reception. This will be monitored daily by the</p>	<p>Completed Healthcare Manager</p>

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	<p>National Institute for Health and Care Excellence (NICE) guidelines; and</p> <ul style="list-style-type: none"> <li>•Staff conduct detailed assessments and prioritise prisoners who have not had an initial health screen and induction.</li> </ul>		<p>reception management. Any shortcomings will be immediately flagged to the Prison management to ensure that every opportunity for the initial screen completion has been explored with the aim to complete within the first four hours of arrival at the prison. Quality assurance checks will be completed by the Virgin Care Reception Management to ensure precise delivery.</p> <p>Guidance was issued to all duty managers in November 2019 to ensure that they monitor full compliance of detailed assessments. This reiterated that the duty manager should raise any issues with the NHS commissioner of the healthcare practice if an initial health screen has not taken place. Guidance also stated that the duty manager must ensure that an assessment is completed during the first night with a full assessment the following day.</p>	<p>Completed Head of Healthcare</p> <p>Completed Head of Operations</p>