

**Action Plan – Mr Adam Peterson. HMP Humber. 24/07/2017**

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and head of healthcare 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>• managing complex cases under the enhanced case management process</li> <li>• managing all prisoners in alternative clothing under the enhanced case management process</li> <li>• ensuring that the ACCT documentation accompanies prisoners to all medical and psychiatric appointments</li> <li>• consider involving the family in the ACCT process</li> <li>• setting effective ACCT care map objectives which are specific and meaningful, aimed at reducing a prisoner's risk and which identify who is responsible for them</li> <li>• observations are carried out</li> </ul>		<p>A single case manager system for enhanced complex cases is now embedded at Humber. When a complex case is identified, the Safer Custody team allocate a single complex case manager of Custodial Manager (CM) grade, who is supported by a Band 4 case manager to ensure continuity. Advice and guidance has been issued to all case managers identifying the criteria for enhanced/complex cases to ensure understanding around the management of individuals on an open ACCT. The Safer Custody team aim as far as possible to allocate wing CMs to the prisoners on their wings.</p> <p>In August 2018 an email was sent from the Head of Safer Custody to all CM and Band 4 case managers, providing guidance with regards to the use of anti-ligature clothing and reminding them of the requirement for an enhanced/complex review to take place should a prisoner be placed into alternative clothing.</p> <p>A Notice to Staff 180/2018 was issued in June 2018, detailing the requirement for ACCT documents to follow prisoners to places of work, education and appointments. This notice will be repeated every three months to ensure the information remains high priority and also captures all new staff starting work at Humber.</p> <p>The Safer Custody team hold a weekly Safety Intervention Meeting (SIM) and all enhanced support cases are discussed within this meeting. The meeting is attended by Safer Custody, Residential Representatives, Mental Health, Security, Offender Management</p>	<p>Head of Safer Custody Completed</p>

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	as directed		<p>Representative and Violence Reduction. During the SIM the benefits of family involvement in individual cases are discussed. If it is agreed that family involvement would provide additional support, this is actioned through the SIM meeting and a dedicated member of staff allocated.</p> <p>Case managers have been provided with one-to-one coaching from the Group Safer Custody team, to offer support and guidance when setting care map objectives, including the need to identify who is responsible for them. This will ensure that actions are specific and meaningful and focus on the reduction of risk.</p> <p>The Safer Custody team issue a monthly key message to all staff. The August key message centred on adherence to observations and ensuring accurate recording of these observations in “real time”. The key message also included the importance of recording quality conversations</p> <p>To ensure consistency, all 72 hour ACCT quality assurance checks, which includes care map entries, are now completed by the Safer Custody CM. Feedback is then provided to individual case managers by the Safer Custody team to highlight any areas which could be improved in future documents. Monthly QA feedback is given to all case managers highlighting common areas which require improvement, this is also highlighted to SASH trainers so areas of</p>	

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			improvement can be included in training. Additionally the Safer Custody officer has been tasked to tour all wings providing guidance to staff and completing QAs on open ACCTs. Any non-compliance with documents by staff is highlighted to the individual's line manager.	
2	<p>The Governor and the Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> <li>Prisoners with dual diagnosis receive appropriate integrated treatment.</li> <li>New prisoners with complex mental health issues that have been on the caseload of a specific nurse at a previous prison are assessed in person.</li> </ul>		<p>A service review has recently been undertaken looking at ways to provide an improved and more integrated Healthcare approach for prisoners with dual diagnosis and complex mental health needs, creating shared roles in order to coordinate prisoner contact. As a result of this review, the need for a shared caseload to ensure joint care for dual diagnosis prisoners has been identified. Prisoners will be managed by the DART nurse working closely with the mental health team, alongside the recovery practitioner social worker for patients meeting that need.</p> <p>In order to facilitate this need, a business case for additional resources in the Mental Health and DART services was submitted in August 2018. This will enable an increase in interventions on offer and allow further working with secondary care mental health prisoners and those with complex needs. Additionally a health promotion worker role has been recruited, in order to improve mental health and substance misuse awareness.</p> <p>There is also further ongoing work surrounding the development of links with psychology and the introduction of a pathway with community mental health providers to improve the release process</p>	<p>Head of Healthcare January 2019</p>

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			<p>from custody to community and provide consistent positive care through the gate</p> <p>The previous system for assessing new prisoners with complex mental needs is no longer used at HMP Humber. All prisoners transferring into the prison that have previously been on the caseload of a specific nurse are now placed directly onto a caseload of a specific nurse on reception at HMP Humber.</p>	