

Action Plan – Mr Lee Thrumble at HMP Rochester – Self Inflicted on 18/04/2018

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare at Elmley should ensure that, for prisoners transferring to another prison, staff should:</p> <ul style="list-style-type: none"> • Set out all relevant information about the prisoner's risk of suicide and self-harm in the PER, including recent ACCT closure, in accordance with the guidance contained in PSO 1025; and • Pass on relevant information about the prisoner to the receiving prison, especially for those with mental health issues who may be at risk of suicide and self-harm. 	Accepted	<p>Prisoner Escort Records are now generated electronically allowing all areas to collate relevant information and risks. The information is taken from NOMIS (which contains information about ACCT) and Mercury and has improved the process. The Safer Custody department are working with house block managers to ensure that ACCT information is recorded and updated correctly on NOMIS.</p> <p>Where any resident who is being transferred is on an ACCT, or has had any recent or significant self-harm issues, information regarding this individual is communicated by Elmley's Safer Custody team to the receiving Safer Custody department. The Safer Custody team are liaising more closely with the Observation, Categorisation and Allocation department to ensure that they are aware of transfers to other establishments which will make sure that relevant ACCT information is passed on.</p> <p>Oxleas Mental Health In Reach Team ensure that any relevant mental health information is passed on to receiving mental health teams, including those with self-harm concerns or engaging in psychological input.</p>	Head of Safer Custody and Oxleas MHIRT Completed
2	<p>The Governor and Head of Healthcare at Rochester should ensure that reception staff are aware of the guidance in PSO 3050 and that newly arrived prisoners</p>	Accepted	<p>A review of reception and first night processes took place in May 2019 following implementation of the new core day. A dedicated Custodial Manager has also been appointed to oversee improvements and to ensure that staff use all relevant documentation to assess and record a prisoner's risk of self-harm.</p>	Head Of Residence and Oxleas NHS Foundation Trust

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	<p>are managed in accordance with PSI 07/2015: <i>Early Days in Custody</i>, in particular that:</p> <ul style="list-style-type: none"> •Reception staff examine all available documentation on the prisoner and consider and record all known risk factors for suicide and self-harm; •Reception staff are appropriately trained on the ACCT process and how to spot signs of risk of suicide and self-harm; •Prisoners are not moved onto a general residential wing until they have had an initial healthcare screening, other than for exceptional operational reasons which must be clearly documented; and •Every prisoner is offered a general health assessment 		<p>All staff have received safer prisons training including Suicide and Self Harm (SASH) training to improve awareness of risk factors for suicide and self-harm. Face to face interviews are carried out by operational staff in a private area where sensitive matters can be discussed in a safe environment and shared with the relevant agency.</p> <p>Since May 2019 no prisoner is relocated to a residential unit until they have been assessed by Healthcare, who are now available in the establishment until 19:30hrs on weekdays.</p> <p>Follow up assessments are arranged by Oxleas NHS Foundation Trust. The reception screening nurse ensures that the details of each new arrival is entered onto SystmOne during initial screening and they are given a secondary screening appointment within the next seven days. Follow up clinics are scheduled every Monday, Wednesday and Friday.</p> <p>Healthcare managers receive weekly reception screening compliance data which enables oversight of the primary and secondary screening processes. Additionally, implementation of the new national screening template now provides staff with details of previously recorded risks.</p> <p>ACCT training is an ongoing process for all members of the Healthcare team and mental health awareness training has also been organised.</p>	Completed

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	in the week following first reception.			
3	<p>The Governor at Elmley should ensure that prison staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including that they:</p> <ul style="list-style-type: none"> • Complete all assessments and relevant paperwork, fully, accurately, and in accordance with the agreed timescales, at all stages of the ACCT process; • Hold multidisciplinary case reviews with relevant healthcare staff and other keyworkers providing detailed input if they are unable to attend; • Ensure agreed actions are recorded on the caremap and the ACCT is not closed until all caremap actions have been fully completed; and 	Accepted	<p>SASH training for all staff is ongoing, ensuring staff have the relevant knowledge of ACCT documents and feel confident opening them. ACCT Case Manager training has now been attended by most operational Band 4 and Band 5 staff as well as healthcare managers, giving them the knowledge and understanding of how to manage the ACCT documents and the relevant timescales and requirements. Any staff not trained are supported by those that have already received training.</p> <p>Work is ongoing to improve reviews being multi-disciplinary by engaging with partner agencies and improving awareness with case managers of the need to proactively manage ACCTs and request attendance or information prior to reviews. This includes discussions with the Head of Healthcare and Oxleas managers to ensure that healthcare staff attend or contribute to reviews.</p> <p>Safer Custody have also provided information and short refresher sessions to support case managers in managing the documents and caremaps more effectively, with more planned as needed.</p> <p>Improved ACCT quality assurance (QA) processes have been put in place with daily checks and weekly QA by Custodial Managers and the Duty Governor to highlight issues and focus areas of support.</p> <p>Safer Custody send out reminders to ensure that post-closure interviews take place within seven days of the ACCT being closed and liaise with house block</p>	Head of Safer Custody Completed

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	<ul style="list-style-type: none"> Complete a post-closure interview within seven days of the ACCT being closed. 		managers to ensure they are completed and returned to Safer Custody for checking. Any issues or poor practice are highlighted in the monthly safer custody meeting.	
4	The Governor and Head of Reducing Reoffending at Rochester should ensure that there is a clear, written protocol and coordinated oversight of prisoner work placements and that staff record all work-related decisions, warnings and sanctions.	Accepted	Weekly employment boards are held by the reducing reoffending department. A Notice to Staff (NTS) was published in May 2018 to remind staff that all work placements must be approved by the Activities Hub, this includes the removal of prisoners from their work placements. Additionally, a further NTS was issued in October 2018 stating that prisoners will be issued activity notifications for their places of work and start date. Prisoners can only start work once Activities have confirmed they are allocated on NOMIS.	Head of Reducing Reoffending Completed
5	<p>The Governor at Rochester should ensure that:</p> <ul style="list-style-type: none"> Staff record and share relevant information about a prisoner's wellbeing, along with any information that might affect a prisoner's risk of suicide and self-harm; and The personal officer policy is effective in providing meaningful support to prisoners, and that contacts 	Accepted	<p>The Offender Management in Custody (OMIC) key worker scheme has been implemented in line with national guidance, providing support to residents, giving them hope and responsibility for their own development through one-to-one key work sessions. Each prison officer undertakes key work sessions of 45 minutes per week. All civil, remand and sentenced people in prison will have a dedicated prison key worker.</p> <p>Before a session keyworkers check NOMIS for details of any scheduled meetings individuals may have had or any that are upcoming. This will include meetings with Offender Supervisors, Forward Trust, Mental Health In-Reach Teams, Healthcare and Community Rehabilitation Companies (CRCs).</p>	Head of Residence Completed

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	take place at a frequency in line with the policy.		<p>Meetings are also held between keyworkers, Offender Supervisors, CRCs etc. to ensure that information is shared face to face across agencies.</p> <p>Keyworkers are required to update NOMIS following a session. A quality assurance check is then completed by the relevant manager to ensure that updates have been made and that information has been appropriately shared with relevant agencies.</p>	
6	<p>The Governor and Head of Healthcare at Rochester should ensure that:</p> <ul style="list-style-type: none"> • A suitably qualified member of healthcare staff is appointed as first medical responder; and • Staff in the healthcare unit are able to hear medical emergency codes and calls for healthcare assistance over the radio network. 	Accepted	<p>A qualified member of the Healthcare team is appointed HOTEL 1 each day. Part of their role is to respond to all code blue incidents. In order to ensure they have received the relevant radio transmission, the control room staff request an acknowledgement from them. Evidence of this is captured on the master radio system.</p> <p>A Notice to Staff (NTS) was published in June 2018 reminding staff of the procedure following an emergency code being called. The NTS highlights the importance of Healthcare acknowledging the code.</p> <p>At the time of this incident Healthcare were in the process of further recruitment due to low levels of trained staff. Recruitment has now increased staffing to the following levels – 1 x Band 7, 7 x Band 6 and 2 x Band 5 (all trained) 3 x Band 4 HCAs and 1 x Band 3 HCA plus one post currently being recruited. 1 x Band 5 Pharmacy Technician.</p> <p>The Hotel 1 post is detailed on a daily basis to a Band 6 member of staff.</p>	Head of Healthcare and Head of Residence Completed

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7	The Governor at Rochester should ensure that staff adhere to the prison's Substance Misuse Policy when prisoners are found under the influence of an illicit substance, in particular that they call healthcare staff to assess the prisoner and submit an intelligence report.	Accepted	<p>Staff are made aware of the Substance Misuse Policy through staff briefings, the Governor's full staff meeting, drug strategy meetings and manager training days.</p> <p>When a prisoner is believed to be under the influence this is recorded on the Governor's morning operational meeting sheet. All incidents are discussed during his morning meeting and follow up action is taken by way of a referral to the relevant agency. Managers are also required to give assurance to the Governor that the information has been recorded on the relevant system such as Mercury and NOMIS and that partner agencies have been made aware and a record placed in the unit observation log.</p> <p>In addition to the above, the daily incident sheet is circulated to all staff, allowing security to ensure that all incidents are recorded on Mercury and actioned accordingly.</p> <p>A Notice to Staff (NTS) was issued in October 2018 to remind staff that they must submit an intelligence report for all drug related incidents</p> <p>A further NTS was issued in June 2019 to inform staff that any member of staff can now refer a resident directly for consideration for a suspicion MDT test and instructions on how to do so.</p> <p>All information is discussed at the monthly drug strategy meeting.</p>	Head of Drug Strategy Completed