

# Action Plan in response to the PPO Report into the death of John Taylor on 16/08/2020 at HMP Doncaster

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Director and Head of Healthcare should ensure that information about suspected substance misuse is shared between prison and healthcare staff and intelligence reports are submitted where appropriate.	Accepted	<p>The Practice Plus Group (PPG) Substance Misuse Standard Operating Procedure (SOP) has been updated to reiterate the importance of sharing information about suspected substance misuse. The SOP sets out the actions that must be taken, including the need for intelligence reports to be submitted, should healthcare staff suspect prisoners are misusing illicit substances.</p> <p>Prison security and intelligence staff will continue to provide copies of intelligence reports to PPG senior managers, to ensure they are aware of reported incidents of suspected substance misuse.</p>	<p>Head of Healthcare/Clinical Substance Misuse Lead PPG</p> <p>Head of Security Serco</p>	Completed
2	The Director should ensure that managers encourage officers to identify and record signs of possible drug taking and bullying.	Accepted	The Director has tasked the Head of Residence responsible for suicide and self-harm, in conjunction with the Head of Healthcare, to review the process for referring prisoners to the Substance Misuse Service and to ensure staff are	Head of Residence Serco	October 2021

			<p>aware of the behaviours to look for to assist in identifying prisoners who may be taking illicit substances. The findings will be used to develop a new process, which will be communicated to staff through an Notice to Staff (NTS).</p> <p>A Toolbox Talk will also be developed to raise awareness amongst staff of the signs to look for in regards to bullying. This will include how to signpost to the relevant departments.</p>		
3	The Director should ensure that all serious incidents, including code blues, are recorded in a prisoner's NOMIS record.	Accepted	An NTS will be issued to remind staff that all serious incidents, including those that result in the calling of a medical code must be recorded on a prisoner's NOMIS record. The Head of Regime Delivery has also introduced a weekly quality assurance process overseen by the Orderly Officer to ensure record keeping is being maintained.	Head of Regime Delivery Serco	October 2021
4	The Director should ensure that key workers: <ul style="list-style-type: none"> <li>• consult NOMIS notes before key worker sessions so that they have up-to-date information on the prisoner;</li> <li>• update NOMIS with the key issues following key worker sessions; and</li> <li>• provide meaningful support to prisoners.</li> </ul>	Accepted	<p>Refresher training will be scheduled for all staff that conduct key worker roles to ensure they are aware of the required expectations when undertaking key work sessions and the need to provide meaningful support to prisoners.</p> <p>A Toolbox Talk will also be developed to remind staff of the importance of consulting relevant documents prior to completing key worker sessions and of the need to record any issues on NOMIS.</p>	Head of Residence Serco	October 2021



			A dedicated Custodial Operations Manager (COM) with responsibility for the key worker scheme will also develop an internal quality assurance process to ensure that key worker quality and processes are improved.		
5	The Director should share this report with PCO A and arrange for a senior manager to discuss the Ombudsman's findings with her.	Accepted	A member of the Senior Management Team will share and discuss the findings of the Ombudsman's report with the member of staff.	Head of Residence Serco	October 2021
6	The Director and Head of Healthcare should ensure that: <ul style="list-style-type: none"> <li>• all prison and healthcare staff involved in a fatal incident are invited to a hot debrief and are offered support; and</li> <li>• all prison and healthcare staff involved in traumatic non-fatal incidents, such as serious code blue incidents, are offered support.</li> </ul>	Accepted	Death in Custody contingency plans have been reviewed to ensure that the need to invite all staff involved in any fatal incident, including healthcare, to the hot debrief is clear. A further review is scheduled for 2022. The Duty Director in charge of the incident is responsible for leading the debrief and ensuring all staff are invited, as well as making contact with those that are unable to attend.  The Duty Director also maintains the record of the debrief so that follow up support can be offered to those involved through the Care Team, Healthcare Shift Lead/Duty Manager and through TRIM practitioners as appropriate. Additional support is also offered through Reflective Practice Groups, Clinical Supervision and if required Employee Assist Programme.	Director, Serco Head of Healthcare and all Healthcare Leads PPG	Completed



			<p>For non-fatal incidents, the provision of staff support is jointly led by the Orderly Officer and Duty Director.</p> <p>The importance of ensuring staff are fully supported following fatal/serious incidents will also be reiterated during the morning operations meetings.</p>		
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