

Action Plan – Mr Trevor Smith at HMP Risley – Natural Cause on 27/08/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that all staff are fully aware of the process, policy and risk assessments in place for prescription, administration and safe storage of controlled/opiate medication, including the process for assessing in-possession status of prisoners and the procedure following an overdose of opiate medication in line with the relevant guidelines.	Accepted	<p>There is a Standard Operating Procedure within Greater Manchester Mental Health Medicine Management, and all clinical staff are aware of this policy and requirements with medication administration including Controlled drugs.</p> <p>This has been added to the Clinical Supervision (in April 2021) to ensure all staff including agency staff understand policy and procedure; this includes the Pharmacist with HMP Risley.</p> <p>All newly arrived prisoners have an In possession risk assessment completed on arrival at HMP Risley and this is also part of a monthly Health and Justice Indicators of Performance report (HJIPS). This reports on the number of completed assessments on arrival and within total population.</p> <p>New prescriptions will require an updated Medicines Risk Assessment.</p> <p>The Healthcare team will review opiate overdose and the current use of Nasal Naloxone. This is stored in ALL Emergency bags to use when required. Training in this use is provided.</p>	<p>Complete</p> <p>Head of Healthcare</p>
2	The Governor and Head of Healthcare should ensure that risk information about a prisoner is shared with staff appropriately in a structured and formal way to enable those staff involved in the care of a prisoner to make risk informed decisions about their management and care.	Accepted	<p>The Healthcare link Governor and Head of Healthcare share information and both attend prison wide meetings. Risk Information is shared within the healthcare team and also within the Mental health team. Security department also share information that is cascaded to the nursing team. Healthcare Manager attend a weekly Safety Intervention Meeting with other departments within HMP Risley.</p>	<p>Complete</p> <p>Head of Healthcare</p>

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3	The Head of Healthcare should ensure that all communications in the SystemOne record are clearly documented and that specific times are recorded. All recordings should be timely and accurate in accordance with the NMC (2018) Code.	Accepted	<p>Record keeping audits are completed by the Healthcare Manager. From April 2021, this will identify any individual concerns or areas to improve with documentation. This will include agency staff.</p> <p>Monthly Group Clinical Supervision sessions will include record keeping as per NMC 2018 code of practice.</p>	<p>Complete</p> <p>Head of Healthcare</p>
4	The Head of Healthcare should ensure that a falls risk assessment is promptly completed by the healthcare team, if the patient is known to be at risk of falls and should be recorded in SystemOne and be readily accessible for all professionals.	Accepted	<p>There is a FRAT (Falls Risk Assessment form) with the System one electronic record that is read coded.</p> <p>The healthcare team liase with Warrington Council services if further support/resources are required to support patients at risk of falls. This include Occupational Therapy support/Equipment.</p> <p>Health staff including agency staff will be asked to ensure this is completed and the Healthcare team will identify if this is age specific. A report will identify, who currently within HMP Risley will need a FRAT assessment completed. This has been discussed at Team meetings and Clinical Supervision sessions (April 2021).</p>	<p>Complete</p> <p>Head of Healthcare</p>