

Action Plan – Mr Mohammed Afzal at HMP Leeds – AFI on 04/08/2019

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	<p>The Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> • referrals for learning disability assessments are actioned and followed up promptly; • referrals for mental health assessments are actioned and any followed up promptly; • discussions and decisions made at multidisciplinary meetings on complex cases are accurately recorded in medical records and all actions are followed up; and • staff adhere to the policy on medication refusal. 	Accepted	<p>An audit will be carried out in order to ascertain that all referrals made to the Learning Disabilities (LD) Service in the last six months have been actioned appropriately. Guidance will also be issued to staff in how to make referrals to the LD Service.</p> <p>All Mental Health referrals are recorded on a tracking system, which allows for monitoring of the wait times and outcomes to take place.</p> <p>All Mental Health multi-disciplinary team meeting minutes are recorded in a daily ledger. All actions from the previous day are checked at the beginning of each meeting to ensure they have been completed. At the end of each meeting administration staff will update SystemOne records as appropriate.</p> <p>The missed medication local operating procedure will be reviewed and circulated to all staff, who will be required to sign to confirm receipt. A weekly audit will also be undertaken by the Lead Pharmacist and Lead General Practitioner to identify all missed critical medication, so that appropriate action can then be taken.</p>	Head of Healthcare February 2021
2	<p>The NHS Director of Commissioning for North East and Yorkshire Region should write to the Ombudsman setting out how he intends to improve mental health care provision at Leeds.</p>	Accepted	<p>The Director of Specialised Commissioning for NHS England & Improvement (NHSE&I) formally responded to the PPO via a letter sent on 13 October 2020, regarding Mental Health provision at HMP Leeds and the further developments across Yorkshire & the Humber, which will support Mental Health provision across the region. The letter was followed up by an email from Head of Health & Justice (H&J) (North), to offer to answer any additional queries. The PPO responded by email on 13 October 2020 indicating that they felt the response focused on process improvement and</p>	NHSE&I Director of Commissioning - Specialised Commissioning (North East & Yorkshire) Completed

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			<p>assurance and did not acknowledge some of the key issues identified in the report around 'care and compassion'. Subsequently a meeting was held with representatives from the PPO, NHSE & Head of H&J (North), Head of H&J (Yorkshire & Humber), Senior Commissioning Manager and Senior Quality Manager to discuss this and highlight how the Healthcare staff at HMP Leeds have compassion for patients accommodated at the prison. The PPO requested that a second letter was sent from NHSE&I to the PPO outlining what is being done to address the perceived cultural issues. This was provided on 18 December 2020.</p>	
3	<p>The Head of Healthcare should ensure that where prisoners are unwell, but do not require hospital admission, staff:</p> <ul style="list-style-type: none"> • take a full set of clinical observations and calculate and record the National Early Warning Score (NEWS); • follow the correct procedures for taking blood pressure readings; • take additional observations/interventions where appropriate; and • follow up with documented clinical welfare checks. 	Accepted	<p>An audit of all clinical staff's mandatory learning bookshelf on LMS will take place to ensure NEWS2 training is uploaded.</p> <p>Learning packs on baseline observations will be introduced into the induction packs for all clinical staff. In house training will also be delivered about the correct procedures for taking blood pressure readings.</p> <p>The NEWS2 escalation algorithm will be circulated to all staff and displayed in all clinical areas. There will also be a full staff briefing to ensure all staff fully understand the algorithm and the expectations of staff when escalation is deemed necessary.</p>	Head of Healthcare February 2021

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4	The Governor and Head of Healthcare should ensure all staff are aware of how to formally monitor and record food and fluid intake if there are concerns about a prisoner not eating or drinking.	Accepted	<p>A combined review of the existing food refusal policy will be undertaken by the Safety team and Head of Healthcare and the findings used to update the policy. This will be underpinned by an agreed communication strategy to ensure all staff have an awareness of the signs of food refusal and the process to support those in custody who are either overtly or discretely refusing or not consuming food.</p> <p>Whilst the review is being carried out, a Staff Information Notice (SIN) will also be issued to remind staff of this policy, which will include an easy-read flow chart setting out the actions that should be taken if staff have concerns about a prisoner not eating or drinking. This SIN will be issued every six months to ensure new staff are made aware and existing staff are reminded of their responsibilities.</p> <p>A Prisoner Information Notice will also be issued to request support from the prisoner population in raising concerns to staff, Healthcare and the Safety function, to allow for assessment of risk and medical observations to take place.</p>	Head of Safety February 2021
5	The Head of Healthcare should remind all healthcare staff that formal mental health assessments should be completed in private and separately from the ACCT process.	Accepted	<p>The Head of Healthcare will review the current process for documenting Healthcare staff attendance at ACCT reviews and Mental Health (MH) assessments.</p> <p>Healthcare staff will also be reminded of their responsibility to complete the templates on SystemOne following MH assessments and ACCT reviews, and that formal MH assessments must be conducted separately and not as part of the ACCT process.</p>	Head of Healthcare February 2021

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6	The Governor should ensure that staff engage with all the prisoners in their care and make regular entries in their prison record, especially about any concerns.	Accepted	<p>A Governor's Order (GO) will be published to ensure staff are aware that they must record all relevant information from observations and conversations with prisoners on their NOMIS record. The GO will reiterate the importance of recording a prisoner's journey and that all verbal referrals to the Mental Health team must also be accompanied by a NOMIS entry.</p> <p>To confirm compliance, assurance checks of all NOMIS entries will be undertaken by Residential Managers to ensure that there have been a minimum of two non-key worker entries each month. Where required standards have not been met, this will be raised with staff through line management procedures.</p> <p>Any concerns that have been raised via the observation book will also be identified through triangulation and by Residential Managers to ensure they have also been captured through a NOMIS entry. Triangulation is a daily process designed to ensure all incidents are reported across a variety of formats including the Information Reporting System (IRS), NOMIS, adjudications and Mercury. The triangulation staff also check all observations books to ensure daily entries are reported within auditable timescales.</p>	Head of Residence February 2021

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7	<p>The Governor should ensure that:</p> <ul style="list-style-type: none"> • all prisoners are allocated a key worker in line with Prison Service policy; • staff are scheduled adequate time to perform the key worker role; and • key workers understand that their role is to engage, motivate and support the prisoners allocated to them. 	Accepted	<p>The responsibility for ensuring that key workers are allocated for all prisoners now sits within the Offender Management Unit (OMU) function. All prisoners are allocated a key worker on the first working day following their arrival, using the auto-allocation tool. Daily checks are made to ensure all prisoners have been allocated, and this can be corroborated with the key worker compliance tool on NOMIS.</p> <p>The oversight for ensuring that adequate time has been allocated for the delivery of key work is shared between OMU and Residence. Key worker compliance is a performance metric where a target of 80% compliance must be met. The metric is taken from NOMIS and identifies how many prisoners have a recorded key worker session reported on their record. Adjustments to allocation can then be made accordingly.</p> <p>All key workers have undertaken keyworker and Five Minute Intervention (FMI) training before being allocated a caseload. This now forms part of Prison Officer Entry Level Training (POELT) delivered by the Learning and Development team for newly recruited staff. Those staff at Leeds who were already employed have now received the training on site. This training ensures that staff are fully aware of the expectations of the keyworker role in encouraging prisoners to make the best of the opportunities available to them and help them build confidence with a sense of self-awareness, as well as to provide support on an individual basis. A SIN will be also be issued reiterating the importance of effective keyworker delivery.</p> <p>Daily key worker briefings delivered by Prison Offender Managers (POMs) to discuss current themes and trends have been utilised to communicate the</p>	Head of OMU/Head of Residence June 2021

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			<p>purpose of the Safety Interventions Meeting (SIM) and to ensure staff are aware how prisoners can be referred as part of the key worker role, when concerns about a prisoner's welfare have been identified, including isolation, violence or withdrawal from the regime.</p> <p>A daily SIM will be introduced to align with the key worker briefing and allow immediate concerns to be addressed and key worker sessions and additional welfare checks targeted appropriately to ensure the prison is proactive in providing support.</p> <p>Key work was suspended on 24 March 2020 as extensive restrictions were introduced to manage the impact of COVID 19 in prisons. Prisons have since been working to an Exceptional Delivery Module seeking to deliver key work to identified groups of priority prisoners where it is safe and possible to do so and weekly wellbeing checks where it is not.</p> <p>Throughout the recovery period of key work delivery and in line with national guidelines, progress is expected to be cautious and incremental but HMPPS is committed to ensuring that key work is reinstated fully across the estate when safe to do so.</p>	
8	The Governor should write to the Ombudsman setting out what he is doing to address the uncaring culture displayed by some officers and managers in their dealings with Mr Afzal.	Accepted	<p>In 2021 the Governor of HMP Leeds will be initiating a programme of work to provide a focus on leadership and the importance of establishing a culture of respect and care amongst all staff. This work will seek to challenge those small numbers of staff whose behaviour and approach to prisoners currently falls below expectations.</p> <p>The Governor will ensure that the Ombudsman is informed of the details of</p>	Governing Governor February 2022

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			this programme, and kept updated on progress.	
9	The Governor should ensure staff adhere to local policy on the management of those prisoners on the basic IEP regime, including the involvement of key workers, to support prisoners to achieve their targets.	Accepted	<p>In January 2020, a new national Incentives Policy Framework (IPF) was introduced across the prison estate. This was communicated across the intranet and through briefings provided by Heads of Residence to Residential Managers and wing staff. To ensure adherence to policy, Residential Governors assurance check IPF paperwork for all prisoners that have been supported on basic IPF for more than a month.</p> <p>Residential managers are responsible for ensuring prisoners are made aware of the appeal process at the time of being placed on basic level IPF.</p> <p>A SIN will be issued to ensure wing managers are aware of the need to contact a prisoner's key worker to advise that a prisoner on their case load has been placed on basic IPF and outline the behavioural targets that have been set, so that they can provide support to the prisoner in achieving those targets.</p>	Head of Residence February 2021
10	The Governor and Head of Healthcare should commission a joint review, with senior prison and healthcare managers, into the circumstances surrounding Mr Afzal's death with specific regard to: <ul style="list-style-type: none"> • improving communication between prison and healthcare staff; and 	Accepted	<p>A joint review into the circumstances of Mr Afzal's death will take place as part of a monthly Senior Management Team (SMT) meeting, which includes the Head of Healthcare.</p> <p>All SMT and Healthcare managers have received a copy of the report and will discuss how to improve communication and identify a clear escalation process for prison staff, should they have concerns about a prisoner's physical or mental health.</p> <p>This will be recorded on the SMT minutes and any identified actions will be documented and reviewed going forward to ensure effective processes have</p>	Governing Governor February 2021

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	<ul style="list-style-type: none"> developing a clear escalation process when prison staff have concerns about the mental or physical health of a prisoner. 		been put in place and that the prison is complaint.	
11	The Head of Healthcare should ensure that a programme of regular clinical supervision and support is agreed for the nurses involved in Mr Afzal's care: Nurses A, B, C, D and E.	Accepted	<p>A reflection session to discuss the finding of the report will be held with all identified Healthcare staff.</p> <p>A clinical supervision plan will also be implemented that covers all the key areas of reflective practice required, to address learning concerns.</p> <p>A national lead nurse will support the clinical and reflective learning process.</p>	Head of Healthcare February 2021
12	The Governor should share this report with Officers C, D and E, SO Band, CM A, and arrange for a senior manager to discuss the Ombudsman's findings with them.	Accepted	<p>The Head of Safety has arranged for all identified staff to come together to complete a full review of the report and allow for analysis of the Ombudsman's findings.</p> <p>Staff have been allowed time to reflect on the role they played and identify where improvement in communication, documentation and escalation can be made.</p>	Head of Safety Completed