

Action Plan – Mr Kazaar McKenzie at HMP Brixton – Self-Inflicted on 05/06/2019

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and the Head of Healthcare should ensure that staff manage prisoners at risk of suicide and self-harm in line with national guidelines, in particular, that:</p> <ul style="list-style-type: none"> • All staff know they should open an ACCT if they are concerned that a prisoner may be at risk; • ACCT assessments are completed promptly, at least within the required timescales; • healthcare staff are notified when a prisoner is made subject to ACCT monitoring; • staff review the prisoner's risk following events or behaviour that suggest risk may have increased. 	Accepted	<p>National Suicide and Self Harm (SASH) training is being incorporated into the induction programme for all new staff. Training covering the specific modules of opening an ACCT and risks and triggers awareness will be delivered to all staff within three months of starting a role at Brixton. The training department will arrange for all new starters to be booked onto a session and this will also be monitored at the Safer Custody meeting to ensure that training has been received. Additionally, healthcare staff will receive SASH training or refresher training in all modules.</p> <p>All newly opened ACCT documents are discussed each morning at the daily briefing to ensure that an assessment is carried out within 24 hours. A Band 5 manager now checks all ACCTs at the 24hr point to confirm that an assessment has taken place. If it is identified that any ACCT assessments have not been held within the required timeframe the manager will arrange for an assessment to be held immediately or escalate the matter to the Duty Governor if they are unable to facilitate an ACCT assessment. This process is reviewed at the weekly safety meeting where any identified issues and themes are discussed.</p> <p>To ensure that healthcare colleagues are aware when a prisoner is made subject to ACCT monitoring the Safer Custody team now emails the Heads of Healthcare and Mental Health teams each day with a list of new ACCTs opened; these prisoners are discussed at the morning briefing and are also added to a list of all open ACCTs to be discussed at the weekly clinical meeting.</p>	Head of Safer Custody and Head of Healthcare August 2021

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			<p>The Safer Custody team regularly brief staff on being alert to a change in a prisoner's risk and hold weekly Supervising Officer meeting sessions to discuss incidents that have taken place and whether this could indicate an escalation in risk. These one to one meetings provide an opportunity for feedback of ACCT management overall, including caremaps and setting appropriate actions to manage and reduce risk.</p> <p>As part of the ACCT quality assurance process, checks are made to ensure that risk levels and observations have been set appropriately.</p>	
2	The Governor and Head of Healthcare should ensure that staff are aware of how to report allegations of bullying by staff and that all such allegations are investigated.	Accepted	A Notice To Staff (NTS) was published in November 2020 reminding staff how to submit intelligence reports following any allegations of bullying. All complaints are logged and kept on file and a response is always given to the prisoner following a decision on how to proceed with the matter.	Head of Business Assurance Completed
3	The Governor should remind staff of the importance of using a medical emergency code as soon as possible in an emergency, and the potential consequences of not doing so.	Accepted	<p>A NTS was published in September 2020 on emergency codes and the importance of using the codes immediately to summon assistance and alert the control room to call for an ambulance.</p> <p>Every six months there is a campaign run to highlight and remind staff of the proper use of emergency codes. This includes staff notices and guides on when to call a code red or blue and how to do this. Staff have previously been issued with wallet sized reminders on card and by January 2021 staff will be issued with emergency code pens as another visual reminder.</p>	Head of Safer Custody January 2021

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			<p>The Safer Custody team will be carrying out a monthly review of emergency codes and general alarms to understand when codes are not being used correctly and why. This will enable actions to be taken, such as training, to tackle the issue of calling for assistance when an emergency code should be used. The monthly review will be added to the safety meeting as an agenda item so that any issues identified can be addressed.</p>	
4	<p>The Governor and the Head of Healthcare should ensure that prisoners are examined by a doctor or nurse in line with PSO 1600 after any use of force.</p>	Accepted	<p>The process in place for notifying healthcare following a use of force incident was reviewed in August 2019 and there is now a three stage quality assurance process to ensure that all actions have been completed. This includes a check by the Orderly Officer, the Duty Governor and the Safer Custody team.</p> <p>The Supervising Officer (SO) is responsible for notifying healthcare following any use of force incident. The SO has responsibility for completing the whole incident pack, including the F213 form, which is filled out and passed to healthcare to complete their part before being returned to the pack. The pack is taken to the Orderly Officer who checks all the paperwork has been completed to the required standard, this is then checked by the Duty Governor before being passed to the Safer Custody team who check the pack a final time and file it.</p>	Head of Safer Custody Completed