

Action Plan in response to the PPO Report into the death of Dennis White on 17/12/2020 at HMP Moorland

| Rec No | Recommendation | Accepted / Not accepted | Response Action Taken / Planned | Responsible Owner and Organisation | Target Date |
|--------|---|-------------------------|---|------------------------------------|----------------------------------|
| 1 | The Head of Healthcare should ensure that there is a robust management plan for actioning care instructions from hospital consultants and an immediate audit of long-term patients is undertaken. | Accepted | <p>There is now a new Local Operating Process (LOP), which denotes the actions required on receipt of care instructions received from the consultant. This process was implemented in March 2021.</p> <p>A care plan audit template has been devised for the auditing of consultant care letters, in order to check compliance of the implementation of the LOP and care instructions received from the hospital.</p> | Head of Healthcare | <p>Complete</p> <p>June 2022</p> |
| 2 | The Head of Healthcare should ensure that all events relating to contact with a Prisoner are fully and accurately recorded in the SystemOne record. | Accepted | Staff will be issued with the record keeping standards Local Operating Process and reminded of their obligation, as per record keeping standards, to ensure that all events related to contact with a prisoner are documented as per required record keeping standards in the medical records | Head of Healthcare | June 2022 |
| 3 | The Governor should ensure that all evidence relevant to a death in custody is retained and that evidence is made available to the PPO, in line with PSI 58/2010. | Accepted | The filing and processing system for escorting paperwork for prisoners who have been admitted to hospital overnight (also known as a 'bedwatch) has been altered to | Security Governor | Complete |



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| | | | <p>include making a fully bound document negating the likelihood of losing loose pages. (March 2022)</p> <p>Also, an electronic database was set up that logs assurance checks on the document and also monitors the documents location and provides the capacity to log who has moved the document and where/when this has happened, to allow the whereabouts of evidence to always be known in order to ensure they are available to the PPO and any other relevant party. (March 2022)</p> | | |
| 4 | <p>The Head of Healthcare at HMP Moorland should share this report with all healthcare staff named in it, including GPs, so that they are aware of the Ombudsman's and the clinical reviewer's findings.</p> | Accepted | <p>This report and clinical review will be circulated to the named staff and evidence retained by the Head of Healthcare</p> <p>This report will be subject to a reflective practice sessions with staff named in the report. The reflective practice session and minutes will be retained as evidence that this session has been completed.</p> | Head of Healthcare | June 2022 |

