

**Action Plan – Mr Sean Roddy at HMP Altcourse – Natural Cause on 24/11/2020**

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that the summary care record (SCR) is accessed immediately for newly arrived prisoners, and any problems in accessing the record are escalated to senior staff.	Accepted	All Health Care (HC) staff including Doctors have been advised (in June 2021) of the importance of accessing the SCR for all offenders arriving into the establishment however further work is underway to implement an audit to monitor this more closely via system one reports.	Complete  Head of Healthcare
2	The Head of Healthcare should ensure that a contingency plan is in place for medical prescribing for prisoners entering Altcourse over a weekend.	Accepted	There is currently a prescriber (GP) available at weekends within HMP Altcourse; there is a contingency in place, that should there be an unexpected absence of the prescriber, then another GP to arrive on site would be accessed or one that is working remotely to ensure no delays in medication being prescribed. This was reviewed in May 2021.	Complete  Head of Healthcare
3	The Head of Healthcare should ensure that there is comprehensive drug and alcohol scoring and monitoring, and this is recorded in the SystemOne records in line with <i>Drug misuse and dependence: UK guidelines on clinical management</i> (published by the Department of Health and Social Care).	Accepted	Additional monitoring is now in place (May 2021) by way of audits completed regularly by the Clinical Lead within the Substance misuse team; this ensures all expected assessment tools are completed in a timely manner and also expected clinical observations are carried out	Complete  Head of Healthcare/Clinical SMS Lead
4	The Head of Healthcare should ensure that prisoners who are prescribed chlordiazepoxide are monitored in accordance with the standard operating procedure and in accordance with the NICE pathway on assisted alcohol withdrawal.	Accepted	Additional audits have been introduced (May 2021) and are conducted by the Clinical Lead within the Substance Misuse Service. This allows for monitoring and assurance and includes completion of all night checks especially for those prisoners who are prescribed medication for alcohol withdrawal	Complete  Head of Healthcare

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5	The Head of Healthcare should ensure that all staff are trained and competent in the use of NEWS-2 scoring and that this is documented accurately.	Accepted	<p>There has been some training for NEWS2 scoring (May 2021) and there is more training to be booked for new staff. The NEWS2 training has now been included within the new starter induction packs for competency checks and also to ensure staff work within scope of practice.</p> <p>New pocket books have arrived on site for all staff and issued which has NEWS2 scoring tool within it and also has the expected clinical escalation process. In addition there is a monthly audit tool in place to monitor completion and feedback given to staff if any areas of concern is found.</p>	<p>Complete</p> <p>Head of Healthcare/Clinical Lead</p>
6	The Head of Healthcare should ensure that all staff maintain accurate and contemporaneous records in SystmOne.	Accepted	Record Keeping Audits are now in place (May 2021) and staff have been re issued the record keeping policy. Record keeping Training is to be maintained by all HC staff.	<p>Complete</p> <p>Head of Healthcare</p>
7	The Director and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital understand the legal position on the use of restraints and that assessments fully take into account the health of a prisoner and are based on the actual risk the prisoner presents at the time.	Accepted	The Head of Healthcare has worked with the Prison Security Team to ensure HC staff are aware of the importance of the HC contribution. The Security team have also attended HC to discuss with the team. The risk assessment has previously been adapted to allow for HC specific answers to be provided (June 2021).	<p>Complete</p> <p>Head of Healthcare</p>
8	<p>The Director should revise the prison's escort risk assessment form to ensure that it requires:</p> <ul style="list-style-type: none"> <li>healthcare staff to say whether the</li> </ul>	Accepted	Level of mobility and medical objections to cuffs are already on the Risk Assessment (RA) and Healthcare staff are aware as per recommendation 7. The RA Consideration of risk section states Healthcare risks should be taken into account by Duty Directors. All Duty Directors were briefed on the	<p>Complete</p> <p>Head of Security</p>

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	<p>prisoner's current state of health has an impact on his mobility; and</p> <ul style="list-style-type: none"> <li>• prison staff to show that they have taken this information into account in assessing the prisoner's current level of risk; and</li> <li>• prison security staff to show sufficient detail on any security warning marker (including dates and content).</li> </ul>		<p>importance of taking this and recording this in this in their final written reasons and alert markers dates into consideration.</p> <p>All Orderly Officers were briefed in June 2021 to make sure that dates are added next to any alert markers.</p>	
9	The Director should ensure that any changes to the level of restraints are recorded accurately and promptly.	Accepted	All changes to the level of restraints should be recorded on the PER. All Duty Directors were reminded in June 2021 of the need to inform escort staff to record this on that document	Complete  Head of Security
10	The Director should ensure that staff notify a prisoner's next of kin as soon as possible when a prisoner becomes seriously ill.	Accepted	Once the Healthcare or Hospital inform the Prison the prisoner is seriously ill we will appoint a Family Liaison Officer and notify the Next of Kin as soon as possible.	Complete  Head of Safer Custody
11	<p>The Director and Head of Healthcare should ensure that after incidents where staff are exposed to trauma:</p> <ul style="list-style-type: none"> <li>• post incident care and support is provided to all staff involved in the incident in line with PSI</li> </ul>	Accepted	All serious incidents are now reviewed by TRiM practitioners to assess what support staff need and also to look at who was involved or maybe effected. Support is then offered to those staff.	Complete  Head of Security

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	02/2018; and <ul style="list-style-type: none"> <li>• consideration is given to whether any staff not directly involved in the incident, but who provided care, may need support and care.</li> </ul>			
12	The Director should share the report with the Duty Director and discuss the Ombudsman's findings with him.	Accepted	Meeting was held with the Duty Director and the Director in May 2021 to discuss the findings and to take learning from them.	Complete  Director
13	The Head of Healthcare should ensure that this report is shared with the healthcare staff named in it, including the GPs, to ensure they are aware of the Ombudsman's findings.	Accepted	The Head of Healthcare will ensure that this report is shared with the Healthcare staff mentioned within the report and also share with GP providers.	May 2021  Head of Healthcare