

Action Plan – Mr Wyndham Thomas at HMP Nottingham – Self-Inflicted Death on 06/11/2018

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare should ensure that staff manage prisoners at risk of suicide or self-harm in line with national guidelines, including in particular that:</p> <ul style="list-style-type: none"> • such prisoners are only segregated in exceptional circumstances and that alternatives to segregation are always considered and documented in line with PSO 1700; • all known risk factors are considered when assessing the level of risk of suicide and self-harm; • ACCT caremap actions are specific and meaningful, aimed at reducing a prisoner’s risk and identify who is responsible for them; • ACCT reviews are held whenever an event occurs that could mean a prisoner is at increased risk; and • all relevant information regarding risk is documented in the ACCT document. 	Accepted	<p>Defensible decision logs are completed whenever someone is placed in segregation whilst on an ACCT document or if an ACCT document is opened when someone is in the segregation unit, this form demonstrates alternatives that have been considered and why they cannot be used. An up-skilling session has been held with operational managers in regarding to completion of the forms and what they need to consider when making the decision.</p> <p>All case managers are receiving up-skilling sessions being led by the regional safety analyst, looking at risk factors, triggers and protective factors. Reminders to all case managers will be produced explaining that ACCT caremap actions are specific and meaningful, aimed at reducing a prisoner’s risk and identify who is responsible for them.</p> <p>The ACCT log now includes all those in post closure and post closure interviews are monitored through this. We will also implement a proactive reminder for due post closure reviews in the morning operation meeting.</p> <p>Guidance will be issued explaining that ACCT reviews must be held whenever an event occurs that could mean a prisoner is at increased risk; and that all relevant information regarding risk is documented in the ACCT.</p>	<p>September 2019</p> <p>Safety Function</p>

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2	<p>The Prison Group Director for the North Midlands should:</p> <ul style="list-style-type: none"> • satisfy himself that processes are in place at Nottingham to ensure that the PPO's recommendations are being implemented and embedded; and • report his findings to the Ombudsman. 	Accepted	<p>All recommendations and actions will be entered on to the group's central consolidated action plan INSIGHT. The prison's progression against action plans will be monitored through Safer Custody meetings, the bilat process and the Group Quarterly Performance and Assurance Review. Once actions have been closed, the establishment's Performance and Assurance Manager will test processes to ensure that they are embedded and remain so. The Safer Custody Manager will review progress and ensure meaningful action has taken place.</p>	<p>September 2019</p> <p>Business Assurance function</p>
3	<p>The Head of Healthcare should ensure that, in the case of prisoners subject to ACCT procedures, clinical staff who assess fitness for segregation should record in the ACCT document that they have read the document and have spoken to the prisoner concerned (or the reasons why they were not able to do so).</p>	Accepted	<p>All clinical staff who assess fitness for segregation have been informed of the requirement to record in the ACCT document that they have read the document and have spoken to the prisoner concerned (or the reasons why they were not able to do so).</p>	<p>September 2019</p> <p>Healthcare</p>
4	<p>The Governor should:</p> <ul style="list-style-type: none"> • ensure that staff are vigilant to signs of drug use and take appropriate action, including submitting intelligence reports as required; and • consider the most effective way of communicating and embedding 	Accepted	<p>Staff have been reminded of the need to maintain vigilance for signs of drugs use and the appropriate action to be taken where necessary. Wing Custodial Managers are now required to check the wing observation books and report any omissions to the weekly operational meeting. Triangulation of data is completed to ensure that all relevant departments are aware of incidents.</p> <p>A weekly Under The Influence meeting is held by Healthcare to assess any incidents that have taken place with the Substance misuse staff. Due to other</p>	<p>September 2019</p> <p>Residential function</p>

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	this message (as previous notices to staff do not appear to have been effective).		initiatives to reduce drug supply including Body Scanner and Rapi-Scan machines the ingress of illicit substances has significantly reduced.	
5	The Governor should ensure that the key drug issues at Nottingham continue to be identified and that the prison's local drugs strategy is revised to ensure that these key issues are being addressed.	Accepted	<p>The drug strategy is currently being reviewed to ensure it is in line with the national strategy. This strategy will ensure that key drug issues for the prison are identified and addressed.</p> <p>A body scanner has been installed in reception and Intensified Substance Free Living (ISFL) wing has been introduced which includes compact based drug testing.</p>	September 2019 Complex Health, Wellbeing and Drug Strategy Function
6	The Governor should ensure that all information indicating bullying and intimidation is fully coordinated and investigated in line with national and local policies.	Accepted	<p>The Challenge, Support, Intervention Plan (CSIP) has been introduced at HMP Nottingham, providing a system by which violence and bullying issues are identified, investigated and recorded.</p> <p>The completion of investigation and management plans under CSIP are monitored through the morning operational briefing.</p>	September 2019 Safety function
7	The Governor should ensure that staff manage prisoners held in the segregation unit in line with national guidelines, including that: <ul style="list-style-type: none"> all staff working in the segregation unit understand and follow the mandatory procedures for safeguarding segregated prisoners set out in PSO 1700, and PSI 64/2011, and are aware of their personal responsibilities for 	Accepted	<p>All staff working in the segregation unit are selected by interview after they express an interest in working in this area. We will ensure that all staff working in the segregation unit are conversant with both PSO 1700 and PSI 64/2011. The Custodial Manager responsible for the segregation unit will hold regular bilateral meetings with the staff to ensure they are appropriately knowledgeable in identification of those at risk of suicide and self-harm.</p> <p>As prisoners subject to ACCT procedures must have a mental health assessment within 24 hours of being segregated; the Mental Health Nurse will complete their assessment as part of that ACCT review. If the person at risk is on an ACCT, Mental Health will already be sighted prior to him going to segregation unit. The</p>	September 2019 Safety function Healthcare

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	<p>protecting prisoners, particularly those identified as at risk of suicide and self-harm;</p> <ul style="list-style-type: none"> • prisoners subject to ACCT procedures have a mental health assessment within 24 hours of being segregated; • prisoners are provided with the means to occupy themselves, at the minimum, reading material and a radio; • prisoners have a designated officer who makes three quality entries on a daily history sheet; and • prisoners have access to Listeners in line with individual risk assessments. 		<p>assessment is a review of what the team already know and a revisit in terms of risk factors. If the person at risk is already located in the segregation unit when the ACCT is opened Mental Health will attend the first ACCT review and complete the required assessment at that point.</p> <p>Distraction packs containing material for prisoners to occupy themselves are available and will be issued to prisoners in segregation when they are on ACCT as a matter of course. Reading material is available on the unit and further books can be requested from the library. Radios will be provided for those prisoners on ACCT in the segregation unit.</p> <p>A designated officer will be identified for each prisoner daily and they will be required to make three quality entries on a daily history sheet. Prisoners have access to Listeners in line with individual risk assessments whilst in the segregation unit.</p>	
8	<p>The Governor should ensure that all prison staff are aware of and understand PSI 03/2013 and their responsibilities during a medical emergency, including efficient communication of the nature of the emergency and ensuring there are no delays in calling an emergency ambulance.</p>	Accepted	<p>The previous Governor's notice to remind staff about PSI 03/2013 and their responsibilities during a medical emergency, including the importance of efficient communication of the nature of the emergency to ensure there are no delays in calling an emergency ambulance will be re-issued.</p> <p>In addition, we have issued staff with laminated cards (business card size), as useful aids of when it is appropriate to call an emergency response code and the action that must then be taken.</p> <p>Adherence to this procedure is monitored by the Senior Management Team and</p>	<p>September 2019</p> <p>Safety function</p>

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			custodial managers are tasked with identifying and challenging the safer custody team staff when they have not adhered to this correctly.	
9	The Governor and Head of Healthcare should ensure that emergency equipment and a defibrillator are located on every wing.	Accepted	<p>Defibrillators are located in areas that are easily accessible in the establishment, for example one in the centre core area for A, B and C wing which is easily accessible for all these wings. There is also a defibrillator in F wing office which is adjacent to the segregation unit. When a code blue is called two nurses respond one goes straight to the scene the other goes to the closest defibrillator to collect it.</p> <p>A review of the locations and number of defibrillators within the establishment will be determined to determine if more are required or if the locations need to be changed.</p>	September 2019 Healthcare
10	The Executive Director of Prisons in HMPPS should ensure that individualised plans are put in place centrally for prisoners serving indeterminate sentences who are significantly over tariff to help them progress towards release.	Accepted	<p>All those serving indeterminate sentences have a sentence plan which sets individual targets for prisoners, with the intention of addressing and reducing their identified risks. Those managing indeterminate sentence prisoners (ISPs) ensure that sentence plans remain current and appropriate and revisit the plan regularly to take into account any change in circumstances or risk level. Sentence plans will contain targets for completion of assessments for various interventions such as accredited and non-accredited programmes, and for other interventions like work, or training and education.</p> <p>The strategic management of those serving indeterminate sentences is managed centrally by the Indeterminate Sentence Prisoners' Progression board (ISPPB). The Board provides strategic oversight and co-ordination for the management of all prisoners serving indeterminate sentences. The Board's purpose is to develop and promote the most effective means of managing ISPs and to ensure that resources are directed effectively.</p> <p>Individual case reviews, undertaken by HMPPS Psychology Services, develop appropriate and realistic pathways to progression for prisoners serving IPP</p>	

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			<p>sentences, where there has been no progression to open conditions or release despite two or more parole reviews following tariff expiry. To date, over 1,300 case reviews have been completed, and we have expanded eligibility to include all those who were given tariffs of less than 2 years.</p> <p>HMPPS has also established IPP Progression Panels, led by the NPS, whose focus is on a multi-disciplinary approach to progressing individuals, driven by those managing the case in the community. These panels require the use of the Psychology case reviews and other supporting information to track and consult on cases struggling to progress.</p>	