

Action Plan – Mr Alan Housley at HMP Rye Hill – Natural Cause on 02/02/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Head of Healthcare should ensure that there is a multi-disciplinary team approach to diabetes management and that all diabetic prisoners have their HbA1c blood levels tested at least every six months, in accordance with NICE guidelines.	Accepted	<p>1. All patient records, from June 2020 will be accurately READ coded on S1.</p> <p>2. From June 2020, all diabetic prisoners will be placed on a caseload on S1 that all members of the multi-disciplinary Team have access to.</p> <p>3. Diabetic templates and care plans will be underpinned by NICE guidance from April 2020.</p> <p>4. Read coding and recall system is in place from May 2020 on S1 to ensure diabetic prisoners are called for their HbA1c blood tests in line with NICE guidance.</p>	<p>Complete June Clinical Lead</p> <p>Complete June Clinical Lead</p> <p>Complete June Clinical Lead</p> <p>Complete Practice Nurse</p>
2	The Head of Healthcare should ensure that all prisoners with long-term conditions are seen at least yearly for a follow up review and that a recall system is fully implemented and recorded in the appropriate section of SystmOne.	Accepted	<p>1. From June 2020, patients with a long-term condition/s will be placed on appropriate caseload on S1.</p> <p>2. Recall system was implemented on S1 in May 2020.</p> <p>3. Staff were trained in S1 recall and READ coding in June 2020.</p> <p>3. A “live” complex case register has been developed by the Clinical Lead.</p>	<p>Complete Clinical Lead</p> <p>Complete Practice Nurse</p> <p>Complete Head of Healthcare</p> <p>Complete Clinical Lead</p>

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3	The Head of Healthcare should ensure that prisoners who regularly do not attend appointments are spoken to by a senior member of healthcare staff about the health implications of non-attendance and that this is documented in their SystemOne records.	Accepted	1. Prisoners that do not attend (DNA) Healthcare/Hospital appointments will be identified at the daily multi-disciplinary meeting and followed up by a clinician (from April 2020). 2. The Practice nurse will apply local DNA follow up processes from June 2020.	Complete Clinical Lead Complete – Clinical Lead
4	The Head of Healthcare should ensure that when a prisoner is unwell on the wing there is consistent follow up and communication between members of the multi - disciplinary team.	Accepted	1. Daily multi-disciplinary meeting to identify patients that are acutely unwell. 2. Patient Acuity Tool to be developed.	Clinical Lead July 2020 Completed in June 2020
5	The Head of Healthcare should ensure that staff use the NEWS2 assessment tool and follow the recommended clinical escalation procedures.	Accepted	1. NEWS2 Template have been embedded into all S1 templates from April 2020. 2. NEWS2 Webinar and clinical escalation training was completed by all staff in June 2020.	Complete Clinical Lead Complete Head of Healthcare
6	The Head of Healthcare should share this report with the prison nurse and Dr and discuss the Ombudsman's findings with them.	Accepted	The Ombudsman's report has been shared and discussed with the nurse and Dr	Complete Head of Healthcare
7	The Head of Healthcare should ensure that the other recommendations made in the clinical	Accepted	An Internal case review of prisoner's records was completed by the Medical Director in March 2020. A Multi-disciplinary meeting to review the internal case review – e.g. what	Complete Medical Director Complete

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	review are addressed urgently.		<p>happened, why it happened and what has been learnt was undertaken in March 2020.</p> <p>As a result of the above actions an action plan has been developed to respond to lessons learnt and is subject to ongoing review.</p>	<p>Head of Healthcare</p> <p>Head of Healthcare</p>
8	The Director should ensure that staff are aware of the legal requirements when completing an escort risk assessment, and that all relevant sections of a risk assessment are properly completed. Healthcare staff must provide information on the prisoner's current state of health and mobility. The risk assessment should fully take into account the medical condition of the prisoner and his/her physical capacity at the time of the escort.	Accepted	The Graham Judgement is now included in the paperwork for all escort and bedwatch risk assessments. In addition, there is now a cuffing form that all Duty Directors complete as a part of the bedwatch pack during checks on a daily basis to assess any change in circumstances. Notices to staff were issued in order to remind staff that any change in circumstances should immediately be reported to the Duty Director via the Duty Security Manager. Prisoners who are vulnerable are discussed in the Vulnerable Adults meeting fortnightly, these prisoners are those that have been pre assessed by Security for cuffing that is less than the standard B Cat Cuffing arrangements.	Complete Head of Safer Custody and Head of Security