

# Action Plan in response to the PPO Report into the death of

Mr Andrew Dean on 26/03/2021 at HMP Lewes

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Governor should share this report with Officer A and arrange for a senior manager to discuss the Ombudsman's findings with him.	Accepted	The Ombudsman's report has been shared with the named member of staff and the findings discussed.	Head of Safety HMPPS	Completed
2	The Governor should ensure that newly arrived prisoners have the opportunity to make telephone calls if there is a delay in them accessing their telephone account, and that staff understand the importance of this in relation to safer custody.	Accepted	<p>A review has commenced to understand the reasons for the delay in prisoners accessing their telephone account.</p> <p>Staff working in the areas where prisoners spend their first night and early days in custody have all received Suicide and Self Harm (SASH) training and reminders for staff are displayed in the reception and first night areas and staff have been reminded about the importance of protective factors, such as calls to family in the early days.</p> <p>The Local Operating Procedures (LOP) that give guidance on care and support for new arrivals is being reviewed. This includes a review of the quality assurance processes around first night and</p>	Head of Safety HMPPS	April 2022



			early days in custody and will address facilitating phone calls to prisoners where there is a delay in accessing their telephone account. Assurance of this will be fed back to the Head of Safety.		
3	The Head of Healthcare should ensure that healthcare staff are trained as a matter of urgency to keep accurate healthcare records.	Accepted	Staff have been given training from the Practice Plus Group (PPG) medical director and the death in custody lead on good record keeping in conjunction with the expectation placed on them by their registering bodies. There is a regular record keeping audit undertaken to ensure that records remain accurate and standards are maintained.	Head of Healthcare PPG	Completed
4	The Head of Healthcare should: <ul style="list-style-type: none"> <li>•ensure that the changes made to reception screening processes are reviewed to check that they have resulted in the required improvement; and</li> <li>•should write to the Ombudsman to confirm this.</li> </ul>	Accepted	The following actions taken in relation to the reception screening process include: <ul style="list-style-type: none"> <li>•This process now falls under Primary Care</li> <li>•All staff have had a subject matter expert come and train them in how to complete quality second screens</li> <li>•Training on accessing digital Prisoner Escort Record (PER) and Summary Care Records (SCR) has been given</li> <li>•Posters are up in reception regarding the accessing SCR and PER</li> <li>•Internet SCR access has been organised and demonstrated to staff</li> </ul> <p>The reception screening process is audited on a regular basis.</p> <p>The Head of Healthcare will respond personally to the Ombudsman setting out the meaningful</p>	Head of Healthcare PPG	March 2022



			actions which have being taken to improve the reception screening processes.		
5	The Head of Healthcare should share this report with Nurse A and the pharmacy technician and discuss the Ombudsman's findings with them.	Accepted	The final report will be shared with either the individual or their agency for onward dissemination. For the individual that remains working at HMP Lewes this will be signed for as receipt.	Head of Healthcare PPG	March 2022
6	The Governor should satisfy herself that there are appropriate procedures in place to ensure that healthcare staff respond immediately to medical emergency codes.	Accepted	<p>The safety team are developing a protocol to review incidents where emergency codes are called in order to identify any learning.</p> <p>A notice to staff (NTS) was published in March 2021 reminding staff of the medical emergency codes to be used and a copy of the NTS has also been emailed to all staff as a further reminder. Staff are briefed regularly on the use of code red and code blue, and the importance of using them correctly to summon the appropriate response, including an ambulance being requested immediately.</p> <p>The Control room will receive a specific briefing surrounding their part in the emergency response process to ensure full understanding of the protocol. To support the briefing there is a written instruction in the control room in large font stating <i>'when you receive a code red / code blue, call an ambulance immediately without delay'</i>.</p> <p>All healthcare staff will sign to say that they have read and understand the expectations on them</p>	Head of Safety HMPPS  Head of Healthcare PPG	March 2022



			<p>when medical emergency codes are called by the control room.</p> <p>Medical emergency response codes will be added as a subject for a training shut down day. Training events will be reintroduced as part of the Covid-19 recovery model.</p>		
7	The Head of Healthcare should request evidence from all agency staff, including those currently employed at Lewes, that their resuscitation training is up to date and should ensure that this is recorded.	Accepted	Agencies engaged with HMP Lewes have been reminded that when a new nurse is engaged their resuscitation certificates are required. The business manager collates and tracks this.	Head of Healthcare PPG	Completed

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