

Action Plan – Ms Karen Williamson, at HMP Peterborough – Self-Inflicted Death on 08/04/2019

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Director should ensure that staff appropriately escalate important information relating to prisoners under ACCT management.	Accepted	<p>Immediate action was taken to ensure all operational staff managing residents on open ACCT documents are aware of a clear escalation process to ensure that appropriate action is taken in response to changing risk.</p> <p>A Director's Order was formulated requesting staff to record all risk entries ensuring these are clearly visible to all.</p> <p>A process has also been developed requiring Senior Officers to conduct checks twice a day of all open ACCT documents to ensure any risks are identified and managed appropriately.</p>	Director Completed
2	The Director should ensure that staff manage prisoners at risk of suicide and self-harm in line with national guidelines, in particular that evidence of risk is fully considered and balanced against how the prisoner presents herself.	Accepted	<p>All staff directly involved in the case management of residents on open ACCT documents will have completed the national case managers training by December 2019. Staff will continue to receive annual refresher training to ensure that they are trained to consider both dynamic and static risk factors when undertaking reviews. This programme is underway and is being led by Learning and Development (L&D).</p> <p>The local suicide and self-harm policy which includes the management of ACCT has been reviewed and has been re issued to all staff. This will be followed up with a further notice to staff summarising the salient points.</p>	Head of Resident Safety December 2019
3	The Director should ensure that case managers familiarise themselves with recent events before holding ACCT reviews.	Accepted	A written briefing will be given to all case managers to remind them of the need to familiarise themselves with recent events prior to holding ACCT reviews, ensuring the ACCT document is read since the last review. This must then be demonstrated within the text of the ACCT review.	Head of Resident Safety December 2019
4	The Head of Healthcare should ensure that healthcare	Accepted	All clinical staff will be instructed in writing that, as part of their professional responsibilities, they must read recent information from SystemOne prior to	Head of Healthcare

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	staff familiarise themselves with recent events before attending ACCT reviews.		attending an ACCT review.	December 2019
5	The Director should ensure that access to craft and hobby materials is risk assessed for prisoners on an ACCT.	Accepted	As part of the Immediate Action Plan Case Managers will be instructed to check whether any craft and hobby materials have been issued by staff and, if so, to assess whether it should remain on issue to the resident. Part of this briefing will include that removal of items should not be automatic and must be related to risk.	Director December 2019
6	The Director should share this report with PCO A, PCO B, PCO C, SPCO A and the senior manager involved.	Accepted	The Separation and Care Manager (SCU) will provide a copy of the PPO report to be read, and then have a reflective session with each staff member named in the PPO report.	SCU Manager/ Deputy Director December 2019