

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

Mr Francis Chadwick on 10/08/2021 at HMP Altcourse

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	<p>The Director should ensure that prison staff manage prisoners at risk of suicide and self-harm in line with national guidance, including that:</p> <ul style="list-style-type: none"> ACCT Care Plans are completed with actions that are specific and meaningful, identify all of the issues identified during the assessment interview and at case reviews, and that ACCT monitoring does not stop until all care plan actions have been completed. Where relevant, a multidisciplinary approach should be taken to ACCT reviews, particularly in 	Accepted	<p>The roll-out of ACCT version 6 across the male prison estate began in July 2021. As part of the roll out staff awareness sessions have been held highlighting the importance of good quality assessments and care plans.</p> <p>To ensure ACCT Care Plans are meaningful and all actions are completed, assurance checks are undertaken by the Safer Custody function on a regular basis. Feedback from these checks is shared with the ACCT Case Managers in order to encourage continuous improvement and ensure that reviews are in line with mandatory national guidelines.</p> <p>Since the implementation of ACCT Version 6, a healthcare representative always attends the first ACCT case review and will be invited to attend any subsequent reviews when there is an identified need for their attendance. Where they are unable to attend, a written contribution is</p>	<p>Head of Safer Custody</p> <p>G4S</p>	Completed



	regard to mental health input.		obtained. All ACCT Case Managers have received training and are aware that case reviews should be multi-disciplinary, where relevant.		
2	<p>The Director and Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> prisoners identified as at risk of suicide and self-harm are provided with support prior to, and following, attending court; and prisoner's requests for mental health support are followed up. 	Accepted	<p>At the point of admission to HMP Altcourse prisoners with a history of mental health or any concerns are signposted immediately. Prisoners who are flagged as requiring mental health support are discussed the following day by the mental health team and listed for a mental health assessment. The assessment takes into account any upcoming court dates and apprehensions surrounding them and a plan of care tailored around this. If a patient is on an ACCT and the court date is a point of concern it is discussed and listed as a trigger. ACCT reviews are also arranged around court dates to offer additional support if required.</p> <p>Prisoners can request mental health support at any time during their sentence and self-refer to the team or ask an officer to refer them. Each referral is added to a list and triaged to determine whether it needs to be dealt with as routine or crisis. Crisis referrals or referrals for those subject to an ACCT are seen within 24 hours. Any remaining routine referrals are added to an initial assessment waiting list and seen as soon as possible, usually within 48 hours.</p>	<p>Head of Healthcare/Mental Health Lead</p> <p>G4S</p>	Completed



			Documentation and record keeping relating to mental health support is audited on a monthly basis.		
3	<p>The Director and the Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> • there is a procedure in place to review prisoners when they go to and from court, to aid continuity of care and ensure concerns are actioned. • prison general practitioners are aware of the need to consider titration of antidepressant medication that was prescribed in the community if there is no confirmation of compliance prior to coming into prison custody. • information forwarded from the community should be reviewed by a clinician to highlight if there are areas that have not been addressed in the reception screening and substance misuse screening. 	Accepted	<p>All prisoners are seen by Healthcare staff prior to court and reviewed by a nurse when they return. This review includes a discussion about how they are coping and how their experience of court may be affecting them. It also records any changes to a prisoner's sentence or status which may require immediate management. If it is thought additional support is required prisoners are provided with information on what is available, and if necessary an ACCT is opened should there be concerns regarding a prisoner maintaining their own safety.</p> <p>The Head of Medicines Management has had a meeting with the Lead GP to reiterate the importance of considering compliance history prior to prescribing antidepressant medication with consideration of titration being explored. This will then be cascaded to all other GPs and the prescribing formulary documents will be re-issued and any other policy documents to support this. The Mental Health (MH) Lead and pharmacist have reviewed the prescribing pathway and the management of medications. This has resulted in audits and actions plans to monitor progress with feedback then given to GPs. In addition the GP now attends the weekly</p>	<p>Head of Healthcare</p> <p>G4S</p> <p>Head of Medicines Management and Head of Healthcare</p> <p>G4S</p>	<p>Completed</p> <p>Completed</p>



		<p>remain under the care of the initial assessing nurse to guarantee a continuity of care. Depending on a prisoners needs and the teams workload, mental health follow-ups are conducted on a daily basis. The mental health team leader regularly reviews individual nurses caseloads and ACCT review attendance as part of their monthly supervision sessions. If it is discovered regular follow-ups are not being conducted and ACCT attendance is inadequate then this is raised with the nurse.</p>	G4S	
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