

Action Plan – Georgina Wendy Henshaw at HMP Foston Hall – AFI on 31/08/2018

No	Recommendation	Accepted/Not Accepted	Response	Target date for completion and function responsible
1	The Governor and the Head of Healthcare should ensure that healthcare staff attend ACCT reviews in line with PSI 64/2011.	Accepted	<p>Healthcare have an Assessment, Care in Custody and Teamwork (ACCT) Local Operating Policy in place which was reviewed on 7th May 2019 and is due for further review on 7th May 2020 (or prior to this date if deemed necessary).</p> <p>The number of open ACCTs and the number for review is discussed during the morning meeting which is chaired by the Governor. The number of reviews undertaken where Healthcare have been requested to attend or provide a written contribution is discussed during the daily staff meeting (Buzz Meeting) in Healthcare. ACCT reviews are documented on the Healthcare system (SystemOne) on the day of review.</p> <p>The Mental Health team are contacted every morning prior to 8.45am by the orderly officer if they are required to attend for an ACCT review or provide a written contribution. The Mental Health team will attend or provide written contributions as required. They will always prioritise first reviews and final reviews before closure.</p> <p>There is a dedicated ACCT review nurse who attends or contributes to all scheduled ACCT reviews.</p> <p>All ACCT case managers have been trained in ACCT case management. We are reviewing our ACCT assurance processes which will highlight when this is not happening so that the ACCT case manager in question can be challenged.</p>	<p>Head of Safety Head of Healthcare</p> <p>September 2019</p>

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2	The Head of Healthcare should ensure that a robust policy is in place to ensure that prisoners are followed up for clinical reviews and missed appointments.	Accepted.	A DNA (non-attendance for appointments) Local Operating Procedure is in place for missed appointments, with a defined process in place for Primary Care and Mental Health. The LOP covers appropriate actions to be taken for a variety of reasons when a patient has DNA'd, e.g. if the treatment was deemed low level clinical intervention, the patient is reviewed and offered two more appointments before being discharged. They will then have to go through the appointments process again. However, if a patient has DNA'd their appointment but there are concerns regarding mental capacity/mental well-being, and or physical health deterioration, this is communicated to the appropriate clinical team for review. These type of issues are to be escalated and raised at the daily Buzz meetings or Head of healthcare made aware in order to triage the level of risk associated to the patient.	Head of Healthcare Completed
3	The Head of Healthcare should ensure that all healthcare staff are up to date with their training and that their training is appropriate to the role they are performing.	Accepted	<p>All staff are BLS compliant; all clinicians are required to undergo ILS training and compliance is managed through the Learning Management System (LMS). This is monitored via regular reporting undertaken every month to ensure non-compliance is identified. Following this death all staff have been retrained in ILS.</p> <p>All clinical staff have access have access to training via the Learning Management System (LMS) and through their Personal Development Reviews. Appropriate training can be identified to meet the needs of the individual, and/or the needs of the service.</p> <p>Examples include: spirometry training for COPD, a rolling programme for meds management training, diabetes awareness training with pharmacy techs and HCAs, etc.</p>	Head of Healthcare Completed

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			All clinical staff need to ensure they maintain their professional standards to retain their professional registration. This is monitored on a regular basis.	
4	The Governor should ensure that a member of Prison Service staff informs a prisoner's family of her death in person, in line with Prison Service Instruction 64/2011.	Accepted	The Governor has reminded the SMT and all of the trained Family Liaison Officers of this requirement, and this was followed up by an email from the Deputy Governor in September 2019.	Governor Completed