

Action Plan in response to the PPO Report into the death of Mr Alan Gale on 12 May 2023 at HMP Stafford

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Head of Healthcare should ensure that all patients who are at risk of or experiencing opioid induced constipation are discussed and documented within MPCCC meetings, referencing, and acting upon the national and local palliative care treatment guidance.	Accepted	National and Local Palliative care treatment guidance will be jointly reviewed by the Clinical Services Manager – Specialist Care Unit and the Palliative care Advanced Clinical Practitioner from the local hospice to ensure this is implemented into the management of the palliative care patient and reflected within the personalised care plan.	Clinical Services Manager Practice Plus Group	April 2024
2	The Head of Healthcare should implement an improved system of prescribing anticipatory medication with the community palliative care team so that there are no delays, as per national and local guidance.	Accepted	A new Local Operating Procedure (LOP) to be devised and implemented jointly by the Clinical Services Manager – Specialist Care Unit and the Palliative Care Advanced Clinical Practitioner to ensure anticipatory medication is prescribed and administered without delay providing continuation of therapeutic treatment and care	Clinical Services Manager Practice Plus Group	April 2024
3	The Governor and Head of Healthcare should ensure that all staff undertaking risk assessments for prisoners taken to hospital understand the legal position on the use of restraints	Accepted	The Heads of Security, Safety and Healthcare jointly reviewed the legal framework relating to hospital escorts to ensure that healthcare and authorising officers understand the distinction between the risk of escape when someone is fit,	Head of Healthcare Practice Plus Group The Governor HMPPS	Completed



	<p>and that assessments fully take into account the health of a prisoner and are based on the actual risk he presents at the time.</p>	<p>and those risks posed by someone suffering with a serious medical condition.</p> <p>As a result, all risk assessments for hospital escorts are firstly completed by healthcare staff to identify health-based considerations and to identify those with significant life-threatening illnesses and undergoing debilitating treatment. The risk assessment document remains dynamic and as circumstances change, they are reviewed. A fresh risk assessment will be completed for each escort to hospital.</p> <p>The local risk assessment document has also been adapted to provide more guidance for managers endorsing the risk assessment in relation the “Graham” judgement and what should be considered for prisoners undergoing life debilitating treatment. Assurance checks are to be introduced over the next three months to ensure this is embedded across authorising staff. Authorising managers have been briefed on this.</p>		
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