

Action Plan – Mr Christopher Jones at HMP Parc on 18/11/2018

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	The Director should ensure that the key drug issues at Parc are identified and that the prison's local drugs strategy is revised by September 2019 to address these issues.	Accepted	<p>We have completed the HMPPS 'Drug Diagnostic Self-assessment Tool' to identify actions and priorities for us to take across drug strategy services. We have also fully reviewed our substance misuse recovery provision including our Psychoactive Substances (PS) approach, and subsequently implemented a 'Psychoactive Substance Rapid Response Service (PSRRS). Both feedback from the self-assessment and our review of recovery services will be incorporated into our revised drug strategy policy, which will be in place by September 2019.</p> <p>In addition a review of the Searching strategy for prisoners, staff and visitors will be conducted by January 2020 to consider the use of additional technical aids such as Body scanners and mobile X ray devices.</p>	<p>September 2019 Functional Head Drug Strategy</p> <p>January 2020 Head of Security</p>
2	The Director should ensure that ACCT case managers complete caremaps, setting specific and meaningful caremap actions, identifying who is responsible for them and reviewing and recording progress at each review.	Accepted	<p>Additional training was provided to all ACCT Case Managers in August 2019 via a written briefing pack which included detailed examples of triggers, known risks and examples of Care Maps.</p> <p>Attendance at Case Reviews is under review by the Senior Management to ensure Multi-disciplinary attendance at reviews. This was initiated in July 2019.</p> <p>ACCT Case Manager supervision has now been implemented with effect from January 2019 which gives feedback and supervision in ensuring all elements of risk are covering when Case managing those on open ACCTS.</p> <p>ACCT guidelines were issued to all staff in the form of a written guidance booklet in February 2019 which sets out clear roles and responsibilities in</p>	Complete Head of Safety

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			<p>assessing risk and conducting and recording ACCT observations.</p> <p>Quality Assurance of ACCT documents have been reviewed. A full audit of all ACCT documents was conducted in May 2019 and findings shared with Senior Management and ACCT Case Managers via written communication.</p> <p>ACCT quality assurance procedures will be increased with effect from July 2019 with the Safer Custody department quality assuring an additional 5% of open ACCTS.</p>	
3	The Director should ensure that all prison staff are made aware of and understand PSI 03/2013 and their responsibilities during medical emergencies so that there is no delay in calling a medical emergency code or calling an ambulance.	Accepted	The requirements and responsibilities for staff during medical emergencies was reinforced via a written Directors order in August 2019.	Complete Head of Safety
4	The Director and Head of Healthcare should ensure that all staff know where defibrillators are kept, that these locations are clearly labelled and that staff check	Accepted	<p>A quarterly inspection is conducted by the Health and Safety Manager to ensure that all defibrillators are in working order, are in place in the designated locations and are clearly labelled and this is recorded in the Health and Safety records.</p> <p>In addition from August 2019 daily checks were implemented by the Residential</p>	Complete Head of Residence

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	that defibrillators are kept in their usual locations.		teams to ensure defibrillators are in the correct location and is recorded in the daily compliance records	
5	The Director should ensure that a copy of this report is shared with the members of staff so that they are aware of the Ombudsman's findings.	Accepted	Meetings were held with the named staff in August 2019 to discuss individually the findings of the PPO report. These meetings were chaired by the Head of Safety and included the individual's line manager. A written record of the meetings was maintained.	Complete Head of Safety