

Action Plan – Mr Esam Dawood at HMP Bristol – SID on 04/03/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor should ensure that staff manage prisoners at risk of suicide and self-harm in line with national guidelines, including that staff:</p> <ul style="list-style-type: none"> •identify the prisoner's risk factors for suicide and self-harm rather than focussing solely on how he presents or what he says; •hold multidisciplinary case reviews where possible and ensure healthcare staff attend the first case review; •set meaningful, tailored care map actions at the first case review, aimed at reducing the prisoner's risk of suicide and self-harm, and complete all care map actions before closing an ACCT; and •complete ACCT paperwork fully and accurately. 	Accepted	<p>All ACCT Case Managers have completed national ACCT case manager training and receive refresher training every three years. The national safety team delivered risk management and defensible decision making training to all case managers in February 2020, and in n June 2020 guidance was sent to all Case Managers on identifying risks and triggers. This is a national document which includes information on risks, triggers and protective factors that can help support prisoners. Guidance was also sent on defensible decision making for ACCT case management to reinforce the training sessions.</p> <p>Bristol and Avon and Wiltshire Partnership managers (AWP) have a protocol in place for attending ACCT first case reviews in line with national guidelines. A representative from the mental health team attends all first case reviews to provide a multi-agency contribution to the ACCT process, be a single point of contact for initial healthcare concerns, and to assist in the development of the care map. Healthcare staff also help to determine if a duty or routine mental health screening is indicated and attempt to resolve any issues that may be contributing to risk, such as medication issues.</p> <p>Each day the duty practitioner allocates members of the mental health team to attend reviews scheduled for that day. The ACCT Case Manager contacts the mental health team to schedule the time and location of the review. Mental health staff attending a first ACCT case review check the details of the prisoner in advance, put an entry on SystemOne, and ensure that their attendance at the review is documented within the ACCT record.</p> <p>Electronic quality assurance checks were introduced in May 2020. The Safer Custody Custodial Manager carries out checks on 50% of all ACCTs opened</p>	Head of Safer Custody Completed

Action Plan – Mr Esam Dawood at HMP Bristol – SID on 04/03/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
			<p>within a calendar month, checking that multi-disciplinary reviews are taking place and that a member of healthcare attended the first case review. This check also includes ensuring that care map actions have been completed appropriately and that paperwork is clearly signed. Feedback and guidance is given to Case Managers as necessary and quality assurance themes are shared monthly at the safety strategy meeting.</p> <p>PPO action plans are reviewed monthly and a twelve month rolling communications strategy has been developed to capture identified risks and actions within this plan.</p>	
2	The Governor and Head of Healthcare should ensure that staff understand the escalation procedures to be followed when healthcare staff disagree with a decision to close an ACCT.	Accepted	<p>An agreed escalation process is in place to ensure that any concerns in relation to the closure of an ACCT can be considered by the Duty Governor, who will determine whether the action taken was appropriate.</p> <p>A Notice To Staff (NTS) was issued in October 2020 informing all staff of the escalation process and the Local Operating Procedure (LOP) for managing ACCTs has also been updated to include the process for escalating concerns.</p> <p>If healthcare staff remained concerned about the actions taken following a review by the Duty Governor they will raise this with the Head of Healthcare who will consult with the Deputy Governor directly.</p>	Head of Safer Custody and Head of Healthcare Completed
3	The Governor and Head of Healthcare should ensure that	Accepted	A NTS was issued in August 2020 and an email was sent to all Case Managers reminding them to make use of 'The Big Word' interpretation service	Head of Equalities and

Action Plan – Mr Esam Dawood at HMP Bristol – SID on 04/03/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
	<p>staff consider using an interpretation service for prisoners whose first language is not English, particularly for in depth conversations such as ACCT reviews, mental health assessments and key worker sessions, and where they decide not to do so, record the reasons.</p>		<p>in instances where they feel that a prisoner may struggle to understand or contribute to reviews or discussions.</p> <p>Case Managers have also been reminded at staff briefings to make use of interpretation services when necessary and the LOP for ACCT has been updated to include consideration of interpretation services.</p> <p>Posters advertising 'The Big Word' are displayed in reception, the first night centre and on all residential units as a visual reminder.</p>	<p>Head of Healthcare Completed</p>
4	<p>The Governor should ensure that:</p> <ul style="list-style-type: none"> •staff are allocated adequate time to perform the key worker role; and •key worker sessions take place in line with the national policy framework. 	Accepted	<p>At the time of Mr Dawood's death, the key worker scheme had not been fully implemented at Bristol and work was ongoing in order to enable a consistent level of key work sessions to be delivered in line with the national policy framework.</p> <p>Due to the current COVID-19 restrictions and working within the Exceptional Delivery Model (EDM), key worker sessions are currently being carried out with prisoners identified as high risk. This includes those on an ACCT, those at risk of committing violence or being managed on a Challenge, Support and Intervention plan (CSIP), and young adults with a maturity screening of 10+.</p> <p>Prior to COVID-19 restrictions, 70% of prisoners were receiving a weekly key worker session and as soon as restrictions allow, key work will commence with a focus on prioritising the number of sessions delivered in order to achieve the level required to obtain official HMPPS sign off of the scheme.</p>	<p>Head of OMU Ongoing</p>

Action Plan – Mr Esam Dawood at HMP Bristol – SID on 04/03/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
5	The Governor should ensure that staff are aware that they may enter a cell alone, subject to an immediate risk assessment, where there is immediate danger to life.	Accepted	<p>A quick time learning email was sent to all staff in September 2020 and a NTS was issued in October 2020 setting out that staff can enter a cell on their own if there is an immediate danger to life, subject to a dynamic risk assessment. This information will continue to be circulated to all staff through the safety communication strategy.</p> <p>The staff mentor and apprenticeship coach will ensure that all new staff are aware of the policy for unlocking cells at night or alone in a medical emergency.</p>	Head of Operations Completed
6	The Governor should ensure that establishment clocks are accurate.	Accepted	<p>CCTV is set on a veracity time net device which should adjust the times automatically. BAC Security who installed the system have been tasked to attend the establishment to rectify the time concerns.</p> <p>The Head of Residence has put in place an assurance check to ensure that CCTV timings are accurate. Custodial Managers will give assurance to the Head of Residence each month that the CCTV timings in their areas are correct.</p>	Head of Residence Ongoing
7	The Governor should ensure that the family liaison officer (FLO) opens a FLO log as soon as they are appointed and stores it securely.	Accepted	The recommendation has been shared in writing with all Family Liaison Officers (FLO) and the FLO Coordinator has met with all FLOs to ensure that they understand the importance of retaining and storing records securely. FLOs have also been reminded to use electronic logs as the preferred method of practice to ensure that records are safely held in one place and cannot be lost.	Head of Safer Custody Completed

Action Plan – Mr Esam Dawood at HMP Bristol – SID on 04/03/2020

No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
			The FLO Coordinator will continue to monitor the use of electronic logs in conjunction with the Head of Safer Custody.	
8	The Governor should share this report with SO A, OSG A and OSG B, and arrange for a senior manager to discuss the Ombudsman's findings with them.	Accepted	The report was shared with named members of staff in September 2020. Senior Managers to their specific grade have discussed the report with them.	Head of Safer Custody Completed
9	The Governor should ensure that SO A receives further ACCT training before SO A chairs another ACCT review or delivers any ACCT training himself.	Accepted	The Supervising Officer attended ACCT refresher training in October 2020. All ACCT Case Managers are performance managed in line with the LOP for ACCT.	Head of Safer Custody Completed