

# Action Plan in response to the PPO Report into the death of Mohammed Sayeef Uddin on 28 December 2022 at HMP Highpoint

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Governor should review Assessment, Care in Custody and Teamwork (ACCT) processes at Highpoint, to ensure oversight of individual risks and meaningful actions taken to address them	Accepted	<p>All ACCT case coordinators have now received specific training on risks, triggers and protective factors for self-harm and suicide. Training was delivered to support case coordinators in ensuring that support actions are appropriate for each individual to reduce the risk of harm. A further training session will be delivered by the group safety lead.</p> <p>It is planned that all Supervising Officers (SO) and Custodial Managers (CM) will attend ACCT case review training which will be delivered by the national team. Staff have been reminded to add themselves to the waiting list for training sessions in 2024.</p> <p>Management checks are carried out on ACCT documents, including care plans, support actions and targets. If any ACCTs are discovered to be missing individual risks and meaningful actions, this is discussed with the case coordinator to</p>	Head of Safety HMPPS	April 2024



			<p>ensure that improvements are made and the ACCT is updated accordingly.</p> <p>The overall quality of ACCT documents is checked during mandatory quality assurance checks. Support and training is available to case coordinators and they are regularly reminded of the importance of the ACCT document being tailored to individual needs.</p>		
2	The Head of Healthcare should review the current process for mental health assessments to ensure future assessments are prioritised according to need.	Accepted	<p>Existing mental health staff will all complete the PPG Mental Health Training, this covers the process and assessment of patients with mental health needs.</p> <p>New staff will have this incorporated within their induction and attend the first available course.</p> <p>When the patient is not on the mental health caseload an assessment will take place outside of the ACCT process. Discussion has taken place with mental health staff and at the Mental Health Meeting, so learning is shared, and the need understood.</p> <p>The DIC report and action plan will be shared with staff to further understand the context and reason for this.</p> <p>The Mental Health Clinical Lead and Head of Healthcare review practice and monitor change through mental health meetings, MDT and our MPCCC. We will continue to educate staff and share learning also through this forum.</p>	Head of Healthcare PPG	February 2024



			<p>The PPG audit cycle for mental health will enable monitoring of this. As it includes reviewing patients on ACCT and their assessments.</p> <p>This audit is shared with NHSE as part of the Quality Schedule.</p>		
3	<p>The Head of Healthcare should ensure there is a system in place to identify and prioritise those on the waiting list who are most in need of talking therapies, to ensure resources are used effectively.</p>	Accepted	<p>At the time of Mr Uddin's death our waiting lists were reviewed only at a time that a space became available for a practitioner. However, since, our CBT therapist reviews the waiting lists weekly. She attends the SIM and CSIPs and records and identifies any needs to those referred into service. Although our operating policy suggests that we see clients based on referral time, veteran status and release date, we acknowledged a need for this to be assessed by a CBT therapist for each individual, especially those raised during SIMs and CSIPs. As for those on an ACCT, we can, and do often work with those on an ACCT, however, this is reviewed on a case by case basis, depending on the ability for the client to engage with the therapy.</p> <p>Our team liaise effectively with the mental health team and healthcare weekly to discuss, referrals in, discharges and any complex cases.</p> <p>When staff receive the daily briefing, we cross reference whether a client of ours is on any ACCTs and would email the safer custody/</p>	<p>Team Leader IAPT Services</p> <p>The Forward Trust</p>	Completed



			mental health team/ POM to inform them of the clients stage in treatment.		
4	The Governor should ensure staff are aware of their responsibility to identify and support prisoners who self-isolate, to reduce the associated risks.	Accepted	<p>The local self-isolating policy was reviewed and published in May 2023 and is based on regional best practice. The policy focuses on identifying, supporting and reintegrating prisoners who self-isolate.</p> <p>Individuals who are self-isolating are noted on the daily briefing and are discussed at the morning operational meeting. Regular checks are conducted to ensure all individuals who are self-isolating are identified and that action is taken by managers following the meeting.</p> <p>Staff are regularly reminded to inform the unit manager and Oscar 1 when someone begins to isolate. Reminders are issued verbally by unit managers and the safer prisons team as well as through staff briefings and communications to colleagues (CTC). A CTC was published in October 2023 as a further reminder.</p> <p>Officers in the safer prisons team conduct a weekly reintegration meeting with self-isolating individuals to support hem towards reintegration into the regime and to reduce associated risks. Officers record a case note on NOMIS following the meeting each week.</p>	Head of Safety and Heads of Residence  HMPPS	Completed

