

# Action Plan in response to the PPO Report into the death of Mr Daniel Weighman on 06 January 2023 at HMP Chelmsford

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	<p>The Governor and Head of Healthcare should ensure that:</p> <ul style="list-style-type: none"> <li>staff know when and how to start ACCT monitoring procedures, including when a prisoner threatens self-harm.</li> <li>staff record why they did not start ACCT procedures if they are not considered necessary; and</li> <li>healthcare staff receive ACCT training.</li> </ul>	Accepted	<p>ACCT awareness sessions have been delivered to operational staff during training shut down days to ensure knowledge is refreshed. These sessions cover when and how to start ACCT monitoring procedures, the setting of support actions and the need for staff to complete all sections of the ACCT document and to ensure it is regularly updated. Going forward, monthly training shut down days will be facilitated.</p> <p>In addition to this, one-to-one refresher sessions are being delivered by the Safer Custody department with the intention that all members of staff receive at least one session.</p> <p>Defensible decision forms have been introduced for staff to complete if they do not think it is necessary to open an ACCT document. An entry will also be made on NOMIS. The defensible decision forms are logged within the Safer Custody Department.</p> <p>All staff, including healthcare staff, receive ACCT training as outlined above. Additionally, a new</p>	Safer Custody HMPPS	Ongoing



			<p>ACCT upskilling package has been produced specifically for healthcare staff with training and refresher sessions being delivered on a rolling basis.</p> <p>Healthcare currently sit at 59% compliance for sash whilst awaiting training sessions. As a mitigation, we discuss sash in team meetings, we sent the slides from another prison on how to open an ACCT (this was amended to fit Chelmsford with the correct Comms number etc) and there are posters with the process up in the offices for staff to refer to.</p>		
2	The Head of Healthcare must ensure that staff access prisoners' SystemOne medical record before undertaking their initial health screen.	Accepted	<p>New ACCT forms are in situ that are completed at the beginning of the day when the ACCTs are assigned from the senior officers meeting at 08.30. These forms go through appointments, history and issues that are then used to attend the ACCTs. The forms are given to the Head of Mental health on a daily basis and then each month there is an audit to ensure that they were used for all ACCTs that mental health attend. Any issues found within this are then raised in the staff members supervision.</p> <p>In reception when the initial health screen is taking place, staff are not able to come out of the template. To mitigate risk, the nurses ask the questions based on what information is available at the time such as what the prisoner is saying, the PER and any court warnings. Once this is completed, there are a set of questions that must be answered from checking the system one notes for assurance that the risks have been identified.</p>	Head of Healthcare CRG	Ongoing process



			<p>These questions are displayed on a poster in reception so that staff do not miss any and include such things as * Are there any self harm or suicide events on S1, * Is there any previous drug or alcohol dependence and is the offence related to any family/friends of the prisoner as this could mean that their support network is no longer available. The HOHC had a meeting with the national team for system one to see if GMS registration can be accessed within the notes immediately but was informed that this can not be done as an extra assurance. Staff can however access any notes on system one from previous prison stays and any medication from the NHS SPINE during the initial screening</p>		
3	<p>The Head of Healthcare should write to the Ombudsman to set out how she has assured herself that the new referral system to the mental health team is robust and responsive and that there are timely mental health assessments following referrals to the mental health team.</p>	Accepted	<p>The Head of Healthcare has completed this action.</p>	<p>Head of Healthcare CRG</p>	<p>Completed 10.1.24</p>

