Action Plan in response to the PPO Report into the death of

Mr Marc Skelly on 22/06/2022 at HMP Lindholme

Rec No	Recommendation	Accepted / Not accepted	Response Action Taken / Planned	Responsible Owner and Organisation	Target Date
1	The Governor should ensure that staff manage prisoners at risk of suicide and self-harm in line with national instructions. In particular, staff should: • hold multidisciplinary ACCT reviews; and • set effective caremap objectives which are specific, time-bound, meaningful, aimed at reducing risk and updated at each case review.	Accepted	In Autumn 2022, the prison commenced a complete refresh of the Suicide and Self-Harm (SASH) training that is provided to all directly employed staff who interact with prisoners. This training is dedicated to raising awareness of the risks and triggers of suicide and self-harm and includes an introduction to mental health. There are also additional modules for managers around case management, which outline the requirements for undertaking multi-disciplinary reviews and the need to set individualised, time bound objectives, aimed at reducing risk. Staff are also reminded that these objectives must be updated at each review. This is a two year training programme that is set to conclude in 2024 with Band 4 staff who are ACCT case managers prioritised for training. All newly recruited officers complete SASH training at college. All other new recruits who	Governing Governor HMPPS	Autumn 2024

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			may be required to complete an ACCT document receive this training on induction. In January 2023, the prison asked the national ACCT team to review ACCT processes at the prison as part of the local continual improvement plan. Feedback from the review has been disseminated to staff for further learning and has been used to strengthen processes. The ACCT process is also quality assured (QA) across three stages to ensure compliance. This process has been reviewed recently as part of an internal audit with feedback leading to improvements in the quality of ACCT documents across the establishment. The analysis of the data from the QA process also feeds into the monthly strategic meeting for scrutiny by the Senior Management Team (SMT). Individuals identified as requiring additional support are provided with extra training as deemed necessary.		
2	The Governor should ensure that ACCT post-closure reviews are conducted in line with Prison Service instructions and should be held to check the prisoner's progress and to decide whether further monitoring is needed.	Accepted	The current refresh of the SASH training also includes modules on ACCT post closure reviews. ACCT case managers have been reminded of the need to carry out reviews in line with PSI 64/2011. All post closure reviews are tracked by the Safer Custody team who issue reminders to ensure	Governing Governor HMPPS	Completed

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			they are carried out in a timely fashion. They are also scrutinised as part of the updated QA process with feedback provided to individuals where required. The analysis of this data also feeds into the monthly strategic meeting for scrutiny by SMT members.		
3	The Head of Healthcare should ensure that prisoners who need mental health support receive a full mental health assessment to determine if they need individual therapeutic intervention.	Accepted	All prisoners who require mental health support are identified through reception screening, self-referral or referred by other agencies within the prison. They are seen and assessed by mental health team within 5 days if routine and within 48 hours if urgent. Where prisoners require therapeutic interventions, these are provided by the mental health/psychology team through one to one or group sessions. Self-help material is also available when required.	Head of Healthcare PPG	Completed
4	The Head of Healthcare should ensure that the substance misuse team considers a prisoner's substance misuse history and custodial behaviour when assessing the required level of substance misuse support.	Accepted	The Substance Misuse team responds to the intelligence held by prison staff subject to the information being shared. They also work closely with the Safer Custody team to widen sources of illicit use information. The daily briefing sheet remains the most consistent and comprehensive source of information about prisoners under the influence and we continue to speak to all those identified, along with any other sources such as emails or IR reports. All prisoners reported to be using illicit substances or with a history of doing so are assessed by the Substance Misuse team for support where this is accepted by the prisoner.	Head of Healthcare PPG	Completed

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Prisoners are provided with information to self-refer where required.	
The Substance misuse team have been reminded to consider both substance misuse history and current behaviour when assessing the level of support required.	