

Action Plan – Mr David Bassett at HMP Swansea – Self-Inflicted death on 01/12/2019				
No	Recommendation	Accepted/ Not Accepted	Response	Target date for completion and function responsible
1	<p>The Governor and Head of Healthcare should ensure that staff manage prisoners at risk of suicide and self-harm in line with national guidelines, in particular that reception staff should:</p> <ul style="list-style-type: none"> • Have a clear understanding of their responsibilities to identify prisoners at risk of suicide and self-harm; • Examine all relevant information that arrives with the prisoner, in particular the PER and SASH form; • Identify risk factors and assess a prisoner's risk based on their risk factors and not just personal presentation; and • Document the risk information considered and the reasons for not starting ACCT procedures. 	Accepted	<p>Suicide and Self-Harm (SASH) training is delivered on a rolling basis to all staff and the training is due to recommence, following the completion of the Covid-19 recovery period, in October 2020. In the interim, senior managers will liaise directly with the staff that have not received training to provide support. The SASH training provides guidance on identifying risk and the importance of documenting all risk information, including the reasons for not starting ACCT procedures.</p> <p>In July 2020 all reception staff were reminded during staff meetings of the reception protocol and the importance of reviewing all documentation including the PER and SASH forms. Reception staff will be prioritised to receive SASH training and the current target for completion for all reception staff is December 2020.</p> <p>Since May 2020, all new receptions that arrive with risk factors identified on the PER or SASH forms have been reviewed in reception by the mental health nurses from the CRISIS team. The CRISIS team also hold reviews with any prisoners that appear to be at risk through their presentation during the reception process.</p> <p>The early days in custody policy will be reviewed in September 2020 and reissued in October 2020. The review will involve an in-depth assessment of the reception procedures and all reception staff will be briefed in October 2020 on the updated policy. This will include instructions to staff to ensure that all risk information is documented on C-Nomis when the decision is made not to open an ACCT, including the considerations for this decision.</p>	<p>December 2020 Head of Safer Custody</p> <p>Completed Head of Healthcare</p>

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2	The Head of Healthcare should share a copy of this report with the reception nurse and discuss the Ombudsman's findings with her.	Accepted	The report will be shared with the Reception Nurse and the findings will be discussed with her in September 2020.	September 2020 Head of Healthcare
3	The Governor should share a copy of this report with Duty Governor and discuss the Ombudsman's findings with him.	Accepted	The report will be shared with the Duty Governor and the findings will be discussed with him in September 2020.	September 2020 Governor
4	The Governor should share a copy of this report with the reception officer and arrange for a senior manager to discuss the Ombudsman's findings with her.	Accepted	The report will be shared with the Reception Officers and the findings will be discussed with them in September 2020.	September 2020 Head of Safer Custody