

DAY 3 BUNDLE 3 TAB 8

First Witness Statement
Her Majesty's Prison Service
Gareth Davies
4 April 2007
Exhibits GD1-GD7

Prisons and Probation Ombudsman

Investigation no 01/2007

**INVESTIGATION INTO THE ATTEMPTED SUICIDE OF 'D' WHILST IN
CUSTODY AT HMP PENTONVILLE ON 27 DECEMBER 2001**

EXHIBIT GD7

Actual Plan of Two DIC
around same time as "M.F.D"

Action Plan arising from the attempted suicide of D 27/12/2001

Subject	Action required	Action Taken
PER Forms	Nursing staff in reception to check all PER forms re comments on prisoners being at risk	This is now standard practise within Reception as part of the first night procedures.
Medication	Review of 'in possession' medication	Completed, policy issued.
Training	<ul style="list-style-type: none"> To incorporate behaviours of recent deaths in custody inmates into future training Better quality of information in F2052SH Training packages for agency nurses 	<ul style="list-style-type: none"> Not incorporated. Will be reviewed as part of the Safer Establishment review in November 2006. HMP Pentonville moved to the ACCT system on the 1st October 2005. This replaced the old F2052SH system. ACCT training throughout the establishment has been undertaken and quality checks are in place to ensure that the level of information in ACCTs is of a good standard Not incorporated. Will be reviewed as part of the Safer Establishment review in November 2006.
Hot and critical incident debriefs	Duty governors to carry out hot and critical debriefs after a death in custody	Now standard practise.
Staff Support	To have a named Care Team Co-ordinator for a particular incident	Care Team have a daily rota. The head of care team co-ordinates a dedicated named person for the incident
Inmate support	To have a policy in place to meet the	No current policy in place – to be included

	needs of prisoners and particularly cell mates emotional and property needs	in the Safer Establishment Policy Review by end of November 2006
Case Conferences	To ensure the following: <ul style="list-style-type: none"> F2052SH for quality of information Regular and on time reviews of prisoners on F2052SH 	Quality assessments of ACCT documents are carried out weekly and reviews are held in accordance with the case managers stipulated review dates, which are also quality assessed.
Handover & recording of information	<ul style="list-style-type: none"> All incidents of self harm to be noted in F2052SH Written records of staff handing/taking over F2052SHs 	All incidents of self harm are recorded in the prisoners ACCT document as per local instructions. Handovers and briefings are recorded in the wing observation book. Staff briefings are held in reception for prisoners being taken out on escort/court.
Weekend Governor Grade cover	To have a system in place for 'on call' cover for Governor Grades at the weekend.	Rota in place, IC and Duty governor 'on call' cover for the weekend period.
Establishment Liaison Officer	Establish Liaison Officer for Deaths in custody	There are 4 trained Family Liaison officers, 3 Governor grades and a Senior Officer to take on the role if a Death in Custody occurs
Attendance at monthly meetings	To appoint sufficient staff representing different areas at the Suicide Prevention Meeting	All areas have a Safer Custody rep and each area provides representation to the Suicide & Self Harm monthly meeting.