

**PRIVATE & CONFIDENTIAL**

**HM Assistant Coroner Ms Karen Harrold  
Winchester Coroners Court**

Offender Care  
Management Team  
Gordon Hospital  
Bloomburg Street  
London  
SW1V 2RB  
Tel: 0207 504 5100

Dear Madam

**Inquest touching upon the death of Michael Folley**

I write on behalf of Central and North West London NHS Trust (CNWL). I am the Clinical Director for Offender Care (OC) and a Consultant Forensic and Adult Psychiatrist.

Further to the conclusion of the inquest regarding Mr Michael Folley, I seek to address in this letter queries that have arisen in relation to risk management and training for healthcare staff in ACCT, SASH and reception processes at HMP Winchester.

At the outset, I wish to reiterate the health, safety and wellbeing of all patients at HMP Winchester is of paramount importance to the Trust's Offender Care team. We are very sorry for the loss of Mr Folley and offer our condolences.

**Services and Staff**

CNWL are commissioned to provide primary care, substance misuse and mental health services at the prison.

**ACCT and SASH Training**

Full prison training days are scheduled for one day per month to ensure that essential training can be held and operational / patient facing staff can attend. This is planned to continue. Alongside this, subject to the availability of a trainer, ACCT training is held fortnightly on top of planned training days. The ACCT training is one full day face to face which is provided and led by HMPPS. This is usually held in groups of 12-14 with two facilitators using the national modular programme for managing ACCT which includes group work, slides and interactive activities. This training is mandatory for Healthcare staff and completed by each staff member every three years in accordance with statutory requirements. We monitor compliance on this across our prisons.

CNWL Offender Care (OC) also has a mandatory e-learning module which covers Suicide and Self Harm, SASH (for clarity this does not deal with the ACCT document specifically, but there is some overlap). This must be completed annually by staff.

Central and North West London Foundation Trust 350 Euston Road London NW1 3AX  
Telephone: +44(0)20 3214 5700 Fax: +44(0)20 3214 5700

[www.cnwl.nhs.uk](http://www.cnwl.nhs.uk)



*Wellbeing for life*

London | Milton Keynes | Kent | Surrey | Hampshire

In addition to this, there is a half day session provided in relation to mental health awareness. This is again part of the national module SASH programme. Staff are expected to attend this yearly. In terms of co-ordinating training. There is a dedicated training lead in the prison who links with our service manager to provide dates of all available training and to allocate staff to the planned training. A dedicated CNWL administrator organises all local induction for new starters and links with the training lead in the prison.

- *New starters*

All new starters at HMP Winchester have a full induction timetable and completion of both online SASH and face to face ACCT training is both expected and signed off through a process with their line manager. Where possible and where spaces permit, all new arrivals have their ACCT training booked for the next available date. CNWL OC staff are allocated spaces on the ACCT training as mentioned above.

Healthcare in Winchester utilise the Offender Care Trust wide induction package. There is also a local timetable for each individual staff member which outlines the required competencies for their role, these are signed off by the relevant line manager at supervision.

- *Permanent Staff Compliance*

As of March 2019, permanent CNWL staff training compliance was at 100% for ACCT and 94% for SASH. Staff training including ACCT, SASH and statutory and mandatory training is monitored on a monthly basis by the CNWL Offender Care Senior Management Team.

Reminders, are sent to staff through the Learning and Development Zone (LDZ) when staff are about to become non-compliant with their mandatory training. The list of staff members and outstanding training requirements are circulated to the Heads of Healthcare at all of our prisons on a monthly basis and heads of healthcare are expected to follow up any training gaps. Training needs will then be addressed in monthly supervisions with the line manager as appropriate. We will be working with our Heads of Healthcare over the next month to identify any outstanding SASH training and contacting those members of staff directly to ensure that this is addressed.

- *Agency and bank staff compliance*

Where there are staff vacancies we have to rely upon temporary staff. We are contacting the agencies supplying staff to inform them that staff will need to complete ACCT and SASH training and will no longer be able to work at HMP Winchester after the end of May 2019 if they have not undertaken this training. The Head of Healthcare will approach the agencies to obtain training logs for all temporary staff working at Winchester.

OC has revised its temporary staff induction booklet to contain a section in which temporary staff have to confirm the level of their training and that it is up to date. This booklet is being rolled out to all prisons.

### ***PSO 64/2011***

Within the next 7 days we will be circulating PSO 64/2011 'Management of Prisoners at Risk of Harm to Self or Others' to all staff by way of email to ensure that staff are aware of and understand its contents.

### ***Suicide Prevention Strategy***

Offender Care has reviewed learning from relevant national guidance including from the Prison & Probation Ombudsman, Clinical Reviews and Regulation 28 notices received in relation to Prevention of Future Deaths within the prisons in which we work to formulate a strategic approach toward suicide prevention through which we have implemented policies across our prison services.

The strategy confirms that the identification and management of prisoners at risk of suicide and/or self-harm is everyone's responsibility. It serves to highlight that any member of staff who receives information, including from family members or external agencies, or observes behaviour which may indicate risk of suicide/ self-harm must open an ACCT.

For completeness, I confirm that the Trust has also developed its own ACCT Policy which provides guidance to healthcare staff regarding what is expected before, during and after planned and unscheduled ACCT reviews. Healthcare staff are expected to attend all ACCT reviews for patients on the mental health team caseload, make appropriate entries in the book and if this is not possible, use ACCT contribution forms.

### ***Reception Screening***

As part of suicide prevention, clear expectations on reception screening have been circulated to staff including:

- a. In the event that a patient on the 'Care Plan Approach' (i.e. they arrive with an existing care plan for their illness) is received from another custodial/hospital establishment, a comprehensive handover is requested from the service.
- b. Reception staff review all documentation that a prisoner arrives with, and ensure that all relevant information is then passed onto the health professional responsible for the reception health screen. The screening nurse ensures that all information received is considered when making an assessment including that gleaned from the Person Escort Record and existing records on SystemOne.
- c. Appropriate risk screening takes place using validated tools.
- d. Where possible, Early Days in Custody Screening will take place within 24 hours of reception into the establishment.

Staff use the Local Operating Procedure in relation to reception screening. Further, as part of the performance monitoring, primary and secondary reception screens are monitored on a monthly basis to ensure they have been completed in a timely fashion. Training in reception screening also forms part of the staff induction and the Trust have developed a Reception Screening guide for all staff across Offender Care.

The Trust is currently rolling out standardised training and competencies for reception screening. Reception screening is not allowed to be undertaken if the appropriate training has not been completed and the staff member deemed competent enough to carry out the reception screen.

### ***Monitoring***

Offender Care conducts a twice-yearly care records audit, which is a comprehensive review of the records, including care plans and risk assessments and the outcome is reported to the Quality Governance team. The team manager is responsible for addressing any areas of deficiency within the team.

This audit programme includes audit of ACCT documentation.

### ***Staff Supervision***

A briefing note concerning the Trust's Clinical and Managerial Supervision Policy was sent to all clinical staff within the Offender Care Directorate outlining expectations in relation to supervision,

including expectation that within a clinical supervision session there should be discussion of patients on the supervisee's caseload and to look at record keeping including care plans and risk assessments. It has been made clear that it is the responsibility of each clinician to ensure they receive clinical supervision at least every 6 weeks and for this to be recorded using a supervision record form which is signed by the supervisor and supervisee. A local recording log is kept and monitored by the Service Manager to ensure supervision is being facilitated and undertaken.

The Trust takes all deaths in custody extremely seriously. I hope that the above supplies sufficient reassurance of the efforts and resources being directed to continue to improve the services received by our patients.

Should you require any further details, please do not hesitate to contact me.

Yours sincerely

A handwritten signature in black ink, appearing to be a stylized name with a large initial letter.

**██████████**  
**Clinical Director and Consultant in Forensic & Adult**