

HM Senior Coroner, Mr Darren Salter  
The Oxfordshire Coroner's Office  
Second Floor  
1 Tidmarsh lane  
Oxford  
OX1 1NS

3 July 2019

Dear Sir

**Regulation 28 – Prevention of Future Death Report: Mr Daniel Davey - HMP Bullingdon**

I am writing in response to the Regulation 28 report which you issued following the inquest touching on the death of Mr Daniel Davey, a prisoner at HMP Bullingdon.

Care UK would like to express its sincere condolences to Mr Davey's family and friends.

In your report you raised two issues of concern, both of which are addressed to Care UK, in its capacity as the healthcare provider, our sub-contractor Midland Partnership NHS Foundation Trust, and also to Her Majesty's Prisons and Probation Service who will respond separately to the concerns raised.

**Concern 1:**

**Healthcare attendance at ACCT reviews.**

**It would be helpful if there could be a further level of reassurance provided about, firstly, communications between prison and healthcare staff in the conduct of ACCT reviews and, secondly, a process of auditing ACCT reviews in order to pick up cases where there is no healthcare input.**

**Response**

In your report you highlighted *"Encouragingly, the evidence from prison and healthcare staff was that ACCT reviews no longer take place without healthcare attendance and/or input (perhaps over the telephone)."* This status continues to be supported by Care UK's Local operating procedure ("**LOP**") for "Healthcare attendance at ACCT's". This LOP was reviewed and updated in February 2019 and ensures a member of healthcare staff is detailed daily to attend the day's planned ACCT reviews. This member of staff can be contacted daily via radio from 08.00 until 17.00hrs. Any requests for healthcare attendance at new ACCTs opened throughout the day are communicated from the prison to the Healthcare Coordinator. All ACCT reviews are added to the SystmOne Ledger and appointments closed down on the system to demonstrate and record completion of the ACCT review.

Care UK continues to work closely with the HMP Bullingdon Safer Custody department to improve partnership working throughout the management of the ACCT process. In order to ensure continued healthcare attendance to ACCT reviews a new electronic quality assurance process has been introduced. This is supported by Safer Custody staff spot checking compliance and escalating where necessary.

## **Concern 2:**

### **Reviews of 'in possession' medication risk assessments.**

- a. It would be reassuring if there is a system of audit to ensure compliance, namely, that the in possession risk assessments are reviewed.**
- b. I am concerned that there is a danger in leaving the issue of in possession medication solely to healthcare. There could be a time delay of several hours or even longer between a prisoner having a mental health crisis and healthcare involvement/reassessment. It appears there needs to be joint liaison between the ACCT case manager and healthcare and a plan to intervene and remove medicine if necessary.**

## **Response**

I can confirm that HMP Bullingdon is fully compliant with Care UK's mandatory monthly audit in ensuring all prisoners have an 'in possession status' recorded on their medical notes from reception.

HMP Bullingdon also adheres to the Care UK "In possession policy for Prisons" which reviews 'in possession' status:

1. After any relevant incidents
2. If the prisoner's circumstances change or medication is no longer deemed appropriate
3. Following the opening of an ACCT document. The "CUK Health contribution to ACCT" template also supports and prompts healthcare staff to complete an 'in possession' risk assessment when documenting, an ACCT has been opened and to review when attending an ACCT review.
4. Or otherwise when a member of healthcare staff believes it to be necessary, e.g. concerns are raised that the prisoner is being bullied.

I would like to provide assurance that random spot checks are undertaken to support concordance and reduce the risk of diversion or stockpiling for overdose.

These spot checks are undertaken by a member of the healthcare team supported by prison disciplinary staff. Where there is a discrepancy between the numbers of tablets a patient should have and the number found, the patient is reviewed to see if the medication is still required or if it needs to be moved to not in possession. At any point in time, any member of healthcare staff having concerns regarding patient safety can ask for the In-possession status to be reviewed to 'Not In-possession' by contacting the prescriber. This would be clearly

documented on SystemOne. In-possession status can also be removed, whilst the review is pending.

I have met with the Safer Custody Governor and discussed the need for prison staff to have a joint responsibility when considering 'in possession' medication is a potential risk. The Safer Custody Governor is recommending this awareness is included in case manager training and is taking this action forward.

I trust this provides assurance that Care UK is committed to working in partnership and improving processes to support the safety of men whilst at HMP Bullingdon. If you would like to review copies any of the policies or procedures mentioned in this letter please let me know.

Yours faithfully



  
**Head of Healthcare, HMP Bullingdon**