

9/3/18

██████████  
Head Of Healthcare  
Bridgewater Community Healthcare  
HMP Wymott  
Ulmes Walton Lane,  
Leyland, PR26 8LW

Dear Mr Rheinberg,

Telephone: 01772 442286  
Email: [k.██████████@nhs.uk](mailto:k.██████████@nhs.uk)

Thank you for your Regulation 28 report dated 11th January 2018.

I note the concern expressed in your report that information relevant to an assessment of Mr Chapman's risk of self harm was not communicated by prison officers to the nurse carrying out the reception health screen. Consequently, potentially important information was not known to the reception nurse at the time that she assessed Mr Chapman.

The concern that you have addressed to healthcare is this: "There does not appear to be a mechanism at reception whereby information relevant to self-harm...is routinely shared by prison staff with medical staff carrying out a reception medical screen including alerts on the CNomis system. As a result there appears to be a danger that significant alerts concerning a prisoner might not come to the attention of the reception nurse"

It is, of course, recognised that it is important to share relevant information and the reception nurse would expect prison officers always to communicate any significant information regarding risk or welfare of which they were aware – whether this be contained in a PER document, on CNomis, or otherwise. As you were made aware during the inquest, it was not the practice, at the time, for the PER document to be passed by prison officers to the reception nurse and, as regards CNomis, this is not a system managed by healthcare and nurses are not routinely granted access to it.

As you note in your report, you were advised during the inquest that the prison and healthcare intended to hold a meeting to discuss ways in which the sharing of information during the reception process might be improved. I can advise you that this meeting took place recently on March 1st.

As a result of the meeting between the prison and healthcare it has been agreed that henceforth PER forms will be passed to the reception nurse as a matter of routine and the nurse must then document within the SystemOne record that the form has been received and considered. It is hoped that this "check" may be incorporated into the record system, as part of the existing reception health screen template, and this possibility is currently being explored.

Thank you once again for bringing your concern to my attention.

Many Thanks

Head of Healthcare  
HMP Wymott

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