



Ministry of JUSTICE

National Offender
Management Service

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Mr Thomas Osborne
Senior Coroner
The Coroner's Office
Civic Offices
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8 February 2016

Dear Mr Osborne

Thank you for your Regulation 28 report dated 15 December 2015 addressed to Andrew Selous, Minister for Prisons, Probation and Rehabilitation and Michael Spurr, Chief Executive of the National Offender Management Service (NOMS), concerning the recent inquest into the death of Daniel Byrne at HMP Woodhill on 27 February 2015. Your report has been passed to the Equality, Rights and Decency (ERD) Group at NOMS headquarters, as we have responsibility for the policy on suicide prevention and self-harm management and for sharing learning from deaths in custody. I have consulted with the Governor of HMP Woodhill in formulating this response.

You have identified that the PPO has made repeat recommendations and that there is need for a comprehensive review of the safer custody procedures.

In response to the recent deaths in custody at HMP Woodhill, reviews of all aspects of safer custody, and of healthcare services have been commissioned. These reviews are being conducted by staff who are not based in the prison, and the results will inform future developments.

A review by a team of NOMS staff will focus on all areas within the prison and the work of partner agencies which have an impact on the wellbeing of prisoners. The healthcare provider, Central North West London Trust, will undertake a review of healthcare services in conjunction with this, and the findings of the two reviews will be brought together in one final report.

Any findings will be communicated to the relevant service provider, and consultation will take place in order to agree an approach to remedy any weaknesses and improve services.

The reviews will evaluate existing procedures which relate to all aspects of safer custody including suicide prevention and self-harm management and violence reduction. The reviews will look to explore the following issues;

- Early days in custody – Transfer from court/ reception timings, reception interview and assessment, first night interview and induction package, healthcare screening and mental health referrals;

- Assessment, Care in Custody and Teamwork – compliance and delivery, quality assurance, training and case management;
- Sharing of Information - how risk pertinent information is obtained, shared and used to make informed decisions including medical in confidence information and family involvement;
- Healthcare provision including mental health and substance misuse services;
- Rehabilitative Culture - staff/ prisoner relationships – personal officer scheme/ key worker; decency policy;
- Violence reduction strategy – understanding the underlying reason for violence and subsequent management
- Stakeholder consultation – staff, prisoners and other stakeholders including family and friends;
- Social isolation - use of IEP, access to regime, lack of activity or income, restrictions on family contact (PPU);
- Peer support systems – access to Listeners and Insiders, listener suites;
- Safer cell accommodation and constant supervision;
- Local learning lessons, PPO, HMIP and HM Coroners recommendations, safer custody meetings and membership;
- Staffing resources and Regime Management Plan;
- Discharge procedures – reducing re-offending pathways, family involvement, and reintegration into the community.

The reviews will take into consideration various sources of information including;

- Her Majesty's Inspectorate reports (including thematic reports) and recommendations;
- HM Coroner's rule 28 recommendations;
- Audit and Assurance report and recommendations;
- Prison and Probation Ombudsman's investigations and recommendations;
- Measuring the Quality of Prisoner Life;
- Local analysis and lessons learned;
- Independent analysis of self-harm and suicide trends in prisons;
- Stakeholder perceptions;

Recommendations will be aligned to the following;

- Prison Service Instruction 64/2011 Management of Prisoners at Risk of Harm to Self, to Others and from Others;
- NOMS national suicide prevention strategy and action plan;
- Violence Reduction – Record, Respond and Reduce (a new initiative that has been introduced to tackle violence which is now a performance measure)

HM Coroner will be provided with updates on all future developments resulting from the review.

You may be interested to know that in order to address the issues with reception screening that were identified in the case of Daniel Byrne a new tool is being introduced.

Reception Screening

The Entry to Custody Risk Assessment (ECRA) record is being introduced in a staged implementation plan commencing in January 2016. The plan includes multi-agency reviews at a number of stages to ensure that the new process is fit for purpose. The new process will then be included in local policy.

The new steps in the ECRA process are as outlined below:-

1. All documents received in reception will be date stamped as proof of receipt. This will take place at the front desk by the Supervising Officer in charge. This is the first stage of Entry to Custody.
2. The Supervising Officer will then complete the 'Received Documents' form. This form is a tick box template that has the most common accompanying documentation listed but also provides room for the Supervising Officer to record any additional documents received. At the bottom of this template there are spaces for designated staff members to print, sign and date as acknowledgment of these documents being present and having read the contents. The Supervising Officer signs this after initial recording.
3. The interviewing officer will receive the core record and the ECRA record for all prisoners requiring entry to custody assessment. The officer will be required to read all the documents listed as present and sign for these to confirm they are present and have been read.

The ECRA will include a list of self-harm risk factors. The interviewing officer will tick all factors present and note the source; document, self-disclosure or officer observations. Beside each risk factor identified the officer will print, sign and date. A comments section is to be used under each category of factors.

The interview officer will complete all current elements of their role updating any further risk factors that emerge during interview.

4. The core record and the ECRA will then be passed to the nurse conducting healthcare screening. The nurse will be expected to review all information contained within the ECRA prior to prisoner interview. They will then be expected to sign the document list to acknowledge presence and that they have read the information. The healthcare screening tool will then be completed.

Any additional risk factors identified are to be added to the risk factors document.

5. The ECRA will then accompany the prisoner to the First Night Centre (FNC). The FNC Supervising Officer will review the contents of the ECRA and complete the documents enclosed form to confirm they are present and have been read. This information will then assist in the FNC interview process.
6. A dedicated mental health team member is now in place on the FNC Monday to Friday with plans to extend across weekends. All new prisoners will be interviewed by a member of this team. They will review the contents of the ECRA prior to prisoner interview and will also sign for the documents enclosed being present and having been read.

This member of staff will also be required to update any risk factors.

7. The ECRA will remain on the Induction Unit while the prisoner goes through the Induction/Early Days in Custody process before returning to the main core record.

The new ECRA process is designed to ensure that risk factors are considered during the reception and first night screening process and to provide evidence that this consideration has taken place. It is also designed to improve the sharing of information between organisations and departments.

The next phase of the ECRA will commence when a review of the ECRA through reception and on to First Night has taken place and is considered fit for purpose.

I hope this provides you with assurance that the matters of concern that you have identified are being fully addressed.

Yours sincerely

