



# HM Prison & Probation Service

**Director General Prisons**  
**HM Prison and Probation Service**  
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Mrs Rachel C Griffin  
Senior Coroner for Dorset  
Bournemouth Town Hall  
Bournemouth  
BH2 6DY

2 February 2022

Dear Ms Griffin

Thank you for your Regulation 28 report of 22 October 2021 following the inquest into the death of Anthony Clacher at HMP Guys Marsh on 21 March 2018. I am responding on behalf of Her Majesty's Prison and Probation Service (HMPPS) as the Director General of Prisons. I apologise for the late return of this response.

I know that you will share a copy of this response with the family of Mr Clacher and I would like to express my condolences for their loss. Every death in custody is a tragedy and the safety of those in our care is my absolute priority.

Following evidence heard at the inquest, you have raised several concerns and I will address those which relate to the prison service. I understand that NHS England and NHS Improvement (NHSE/I) are responding separately on healthcare related matters for which they have responsibility. I thank you for bringing your concerns to my attention.

The first concern you raise is that there could be future deaths across the prison estate due to a lack of observations and welfare checks on prisoners who are found under the influence of illicit psychoactive substances, and you have requested that consideration be given to a national roll out of some of the local initiatives which have been implemented at HMP Guys Marsh. The national Drug Strategy Team have been in touch with regional prison safety groups to gather information on the local initiatives which have been implemented around the country, including those in place at HMP Guys Marsh, and are in talks with NHSE/I national team about rolling out some of these initiatives on a national scale. We are committed to learning from local practices and to use these to inform the development of national policies to drive improvement and work to save lives and keep people safe.

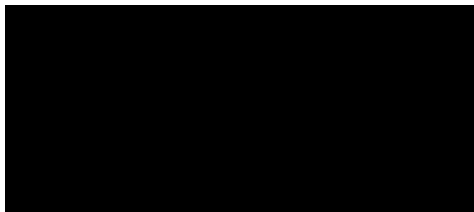
The second concern you raise is in relation to healthcare attendance at ACCT reviews. I understand that evidence was heard at the inquest about the new version of ACCT (ACCT v6) which was rolled out nationally in July 2021. The ACCT v6 guidance is clear that case reviews must be multi-disciplinary and that healthcare staff must be invited to attend the first ACCT case review, as well any subsequent reviews where healthcare involvement is relevant to supporting an individual. Attendance at case reviews must be driven by the individual's specific needs and support required to ensure consistency and continuity of care as the case review team work together to drive meaningful outcomes and take ownership for their assigned Support Actions. Team members should try to attend case

reviews in person, however, where this is not possible they can still contribute through the written contribution form which is included in the ACCT documentation. ACCT user guidance was issued to all establishments in advance of the roll out of ACCT v6 to ensure that staff were familiar with the new version and confident with the key changes made to the document. All establishments were provided with bite size awareness training packages to deliver to staff and upskilling materials to equip staff with the necessary skills to complete ACCT V6, and revised training modules are being rolled out nationally for all staff involved in the delivery of ACCT.

The third concern you have raised is that, as a result of the pandemic, prisoners have been arriving into prisons in large cohorts and this has put additional pressure on the reception procedures for prison and healthcare staff. While I recognise that this added to the pressures on staff assessing prisoners coming into prison, this has been necessary in order to keep prisoners safe, manage infection rates in line with public health advice, and to ensure that prisoners are receiving as full a regime as possible. This has only been possible through a cohort of prisoners arriving into prisons at the same time to begin a period of reverse cohorting together. As we begin to move away from the exceptional delivery measures, efforts are being made to transfer prisoners in smaller numbers and the aim is to return to standard delivery as was in place pre-pandemic.

Thank you again for bringing your concerns to my attention. I trust that this response provides assurance that action is being taken to address the matters that you have raised.

Yours sincerely



Director General of Prisons