



**Collated Action Plan in Response to the Recommendations made in the
Report of a Review in Respect of Mr I and the Provision of Mental Health Services,
Following a Homicide Committed in June 2009**

Recommendation		
Communication		
3.1 All agencies and individuals involved in the care and support of an individual subject to a licence should be made aware at the earliest opportunity of the expiry date of a licence.		
Response From Abertawe Bro Morgannwg University Health Board		
Response	Lead	Timetable
For all sentenced prisoners admitted to ABMU Health Board for inpatient mental health treatment, the Clinical Team will liaise with Probation Services and the Ministry of Justice to confirm sentence and licence expiry dates and record the same in the CPA documentation.	Clinical Director of Mental Health Services	Completed
Response from Cardiff & Vale University Health Board		
Response	Lead	Timetable
The UHB now has staff linking in with the Public Protection Unit (PPU) which has strengthened communication amongst agencies in relation to arrests involving clients with links to mental health services. It is	Divisional Nurse Mental Health Services	Completed

therefore more likely that communication relating to this recommendation is more robust.		
Response from Wales Probation Trust		
Response	Lead	Timetable
a) MAPPA Document set adopted by all agencies in South Wales Area and dates are included in referral MAPPA Form A	a) MAPPA SMB	a) Done
b) Web based referral to MAPPA system (Probation) will have relevant dates as mandatory fields	b) WPT	b) March 2012
c) MAPPA meeting minutes are circulated to all those attending meetings and those invited who send apologies. This process of sending confidential (RESTRICTED) documents is significantly supported by secure email and the lack of secure email addresses in the health service (.pnn, .gsi, .cjsm) acts to slow and disrupt effective communication.	c) MAPPA SMB	c) Ongoing
Recommendation		
Communication		
3.2 Processes for ensuring that all agencies and individuals involved in the care, treatment and support of an individual who absconds should be kept up to date. All agencies should ensure that they are informed of an individual's arrest and the prison to which they are returned to.		
Response from Abertawe Bro Morgannwg University Health Board		
Response	Lead	Timetable
ABMU Health Board will liaise with National Offender Management Service to agree a	Clinical Director of Mental Health Services	31 January 2012

communication protocol for sharing information on Section 117 aftercare patients who abscond from community placements and/or are arrested and returned to prison.		
Response From Cardiff & Vale University Health Board		
Response	Lead	Timetable
As Recommendation 3.1, strengthening the UHB input to the PPU supports a more coordinated response to individuals arrested and who are known to services which are part of the PPU. This includes Health, Probation, Local Authority, Housing providers including authorised premises.	Divisional Nurse Mental Health Services	Completed
Response From Wales Probation Trust		
Response	Lead	Timetable
<p>a) Cases managed at MAPPA level 2 or 3 and all MAPPA Category 1 cases are recorded on ViSOR and now flagged as 'ViSOR nominal' on PNC. This flag remains after the end of statutory supervision and guidance has been issued to ensure that issues arising involving ViSOR nominals are referred to Public Protection Departments of police.</p> <p>b) MAPPA notifications from mental health hospitals have been overhauled to ensure that national notification forms are used and that there is effective communication between hospitals and BCU PP units.</p> <p>c) An information sharing protocol in respect of potentially dangerous persons and</p>	<p>a) ViSOR MAPPA Unit / Public Protection Dept SWP</p> <p>b) MAPPA SMB</p>	<p>a) Done</p> <p>b) Done</p>

mentally disordered offenders is in discussion and would act to support prompt and effective information sharing between agencies.	c) MAPPA SMB	c) For approval by SMB Nov 2012
Recommendation		
In Relation to HMP Parc		
<p>3.3 With regards to HMP Parc and consent issues being a potential barrier to making a referral to health and social care agencies, HIW believes that a clear protocol should be put in place whereby consent can be overridden when appropriate. This should also be made clear on the consent forms to remind staff and patient of the possibility that consent to share records with other agencies, for example GPs, NHS providers or social care agencies may not be necessary when an individual is considered to lack capacity or insight in relation to their mental health issues. Where necessary, staff should be trained in relation to consent issues so that they are clear in relation to implementing this guidance¹.</p> <p>3.4 HMP Parc should review its compliment of Registered Mental Health Nurses (RMNs) and ensure that levels are appropriate to enable timely and appropriate screening assessments to taking place at the prison mental health clinics.</p> <p>3.5 HMP Parc should ensure that staff are trained in the CPA arrangements for Wales and aware of the forthcoming legal duties under the Mental Health (Wales) Measure 2010.</p> <p>3.6 HMP Parc Healthcare Services should ensure that medical note-taking processes are robust. This practice should be reinforced in order to ensure that all stages of care pathways are fully documented.</p> <p>3.7 As per the Prison Mental Health Pathway² guidance and PSO 3500³, HMP Parc should ensure that robust and effective multi-disciplinary discharge planning processes are in place. Consideration given to the CPA status of the prisoner. A copy of the CPA plan should be given to the prisoner upon release and transfer of care agreed with the care co-ordinator. Where relevant the prisoner should also receive a copy of their Section 117 after-care plan.</p>		
Response from HMP Parc Prison / G4S		

¹ PSI 2002/25 – The Protection and use of Confidential Health Information in Prisons – Section 5.

² Prison Mental Health Pathway for Wales (2006)

³ PSO 3500 – Chapter 7 Release/Discharge – Paragraph 7.6

Response	Lead	Timetable
<p>3.3 Protocol to be drawn up to ensure where appropriate consent can be overridden. Procedures to be put in place to ensure accurate recording of information given to prisoners to gain consent. Learning Disability Nurses and RMN's to take the lead with individuals who have either a mental health issue or learning disability. Training to be provided to all staff on issues of consent, in particular how to escalate a situation where consent is not being granted in line with the policy.</p>		All actions completed
<p>3.4 Staffing levels have increased from the point that Primecare were removed as the Contractor. Half our staff is now registered RMN's. Appropriate mental health clinics and waiting times for assessment to be monitored.</p>		All actions completed
<p>3.5 All staff to be trained in CPA awareness to enable them to support the In-Reach teams through this process.</p>		Completed
<p>3.6 An audit process to be put in place to ensure medical-note taking by all agencies is appropriate.</p>		Complete Quarterly audit now occurs
<p>3.7 All staff work with the In-Reach team to support the processes for effective discharge planning. HMP Staff to attend 117 meetings when prisoner being discharged back into custody.</p>		HMP staff are now being invited to participate in discharge planning for prisoners resulting in a more effective multi-disciplinary approach.
<p>Recommendation</p>		
<p>Arrangements between HMP Parc and In Reach Services</p>		

3.8 In line with the Prison Mental Health Pathway⁴, HMP Parc healthcare services and the Abertawe Bro Morgannwg University Health Board in-reach service should ensure that relevant prison nurses attend clinical and MDT meetings in order to strengthen relationships.

3.9 The protocols in place should be reviewed to ensure appropriate referrals are made to the in-reach team. We note this may be strengthened by the in-reach team now being located at HMP Parc.

Response from HMP Parc Prison / G4S		
Response	Lead	Timetable
<p>3.8 HMP/YOI Parc to have regular meetings with the Mental Health In-Reach Team and Caswell Clinic to ensure the sharing of information meets the needs of the prison population. The current process of holding spate records to be joined to have one shared record for the prisoner (System 1), which will improve information sharing. Regular reviews of the single referral pathway to also happen.</p> <p>3.9 Several meetings have been held with the Mental Health In-Reach Team. These have been really constructive. Communication has improved and System 1 is now in place (October 2011) so we are working towards a single record for prisoners.</p> <p>Further meetings to review and update referral pathway will be on going. Communication pathways to be regularly reviewed.</p>		<p>On Going</p> <p>On Going</p> <p>On Going</p>
Response from Abertawe Bro Morgannwg University Health Board		
Response	Lead	Timetable

⁴ As per Prison Mental Health Pathway for Wales (2006)

<p>3.8 The ABMU Health Board has designed a single referral pathway in consultation with HMP Parc to help patients access secondary care Mental Health Services delivered by the In-Reach Team.</p> <p>Members of the In-Reach Team attend the MDT meetings in the Prison. These are referenced in the Single Referral pathway and called by the Primary Care staff working for HMP Parc.</p>	<p>Clinical Director of Mental Health Services</p>	<p>Completed</p>
<p>3.9 The above pathway requires primary healthcare staff working for the Prison to complete a Care Programme Approach assessment for all patients who, they understand, are subject to Section 117 aftercare and the Care Programme Approach.</p>	<p>Clinical Director of Mental Health Services</p>	<p>Completed</p>
<p>Recommendation</p>		
<p>Arrangements between HMP Parc and Caswell Clinic</p>		
<p>3.10 Arrangements should be put in place⁵ to ensure more robust and formalised communication arrangements between the Caswell Clinic and HMP Parc. Prison healthcare staff should advise the Caswell Clinic of any new prisoner that is under the care of a Responsible Clinician based at the Caswell Clinic.</p>		
<p>Response from Abertawe Bro Morgannwg University Health Board</p>		
<p>Response</p>	<p>Lead</p>	<p>Timetable</p>
<p>As above, the Health Board has generated a single referral pathway which requires HMP Parc's Primary Care staff to notify the Secondary Care Mental Health In-Reach</p>	<p>Clinical Director of Mental Health Services</p>	<p>Completed</p>

⁵ In line with the Prison Mental Health Pathway for Wales (2006).

Team if the Prison has a patient formerly under the care of a Responsible Clinician from the Caswell Clinic.		
Response from HMP Parc		
Response	Lead	Timetable
Meetings to be held with In-Reach team, Caswell and HMP Parc staff to develop protocols.		Completed In-Reach team, Caswell and Parc now ensure information is shared in relation to any prisoner who has been or is under the care of a responsible clinician based at Caswell Clinic.
Recommendation		
In Relation to Caswell Clinic		
3.11 The Caswell Clinic should formalise the weekly meetings held to discuss patients, including those currently in the community or in prison, for whom the Caswell Clinic still formally retains section 117 after-care responsibility, on behalf of mental health services. Actions should be appropriately recorded and communicated to the relevant prison. A senior member of HMP Parc healthcare staff and a prison in-reach team member should attend this meeting.		
Response from Abertawe Bro Morgannwg University Health Board		
Response	Lead	Timetable
The weekly planning meetings held to discuss patients pathways including those currently in the community or in Prison, are routinely minuted. At the weekly planning meeting, care pathways for patients who have returned into Prison custody from the Clinic or the community will be reviewed to ensure that appropriate actions are taken and recorded. A record of patients for whom the Caswell	Clinical Director of Mental Health Services	Completed

<p>Clinic formally retain Section 117 aftercare responsibility, either in the community or in Prison, will be kept by the Caswell Clinic.</p> <p>A representative from the HMP Parc Prison Primary Healthcare Team and the Secondary Care Mental Health In-Reach Team will be invited to attend each Monday morning meeting at the Caswell Clinic.</p>		
<p>Recommendation</p>		
<p>In Relation to MAPPA and It's Members</p>		
<p>3.12 When it is felt appropriate and necessary to convene a MAPPA meeting the agencies responsible for the arrangements must ensure that every effort is made to identify and ensure that the appropriate parties are invited to the meeting. If those invited cannot attend, they should be included on any relevant circulation list to ensure that the most up-to-date and relevant information is made available for the MAPPA meeting.</p>		
<p>Response from Wales Probation Trust</p>		
<p>Response</p>	<p>Lead</p>	<p>Timetable</p>
<p>MAPPA Screening meetings have established a format and national recording process that ensures attendance of appropriate parties at Level 2 and 3 meetings as well as allowing the referral and decision process to be auditable.</p> <p>The Cardiff co located MAPPU does not have Social Services representation and would benefit from this, ensuring that the full range of information held by responsible authority and duty to co-operate agencies was available to inform the decision making process.</p> <p>An Introduction to MAPPA training package</p>	<p>MAPPA SMB</p> <p>MAPPA Responsible Authority and CCC SSD</p> <p>MAPPA SMB</p>	<p>Done</p> <p>Ongoing</p> <p>Done</p>

Response	Lead	Timetable
<p>3.13 Work has already commenced on improving procedures for the receiving and dissemination of PPD1 forms received from the Public Protection Unit, including the screening of PPD1s by the PPU and distribution to secure e-mail boxes.</p> <p>Along with Health and Police partners we are developing shared understanding and expectations of the PPD1 procedure, including a clear set of criteria and thresholds for CMHT response. Audit procedures for these arrangements will be developed by Mid December.</p>		Mid December
<p>3.14 We will review the use of these procedures within Mental Health Services by January 2012 looking at frequency of use and outcomes and identifying areas of development that need to take place for the processing of carers' assessments within Adult Mental Health Services</p>		January 2012
Response from Abertawe Bro Morgannwg University Health Board		
Response	Lead	Timetable
<p>3.14 Social Work staff at the Caswell Clinic liaise with the inpatients host Local Authority about the preparation of a carer's assessment. This process will be reviewed at the Local Authority Liaison Group which is a regular meeting involving representatives from the Caswell Clinic and each of the</p>	Clinical Director of Mental Health Services	28 February 2012

sixteen Social Services Departments within its South Wales catchment area.		
Recommendation		
In Relation to Cardiff & Vale University Health Board		
3.15 Cardiff and Vale Health Board should review the arrangements that it has in place for sharing information across its mental health teams and services and with other agencies.		
Response from Cardiff & Vale University Health Board		
Response	Lead	Timetable
<p>In 2010, the UHB re-signed the Wales Accord on the Sharing of Personal Information (WASPI) agreement - joining 13 local authorities and 24 other organisations, including Police and Probation. The WASPI provides a framework for service providing organisations to share information between them in a lawful and intelligent way.</p> <p>Arrangements for health and local authority staff to access PARIS (Patient information system) in the PPU have also been implemented.</p>	<p>IM&T Project Officer Mental Health</p> <p>Divisional Nurse Mental Health Services</p>	<p>Completed</p>