



Mr Andy Smith Lead Investigator Health and Justice NHS England Skipton House 80 London Road London SE1 6LU

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Dear Mr Smith

Re: Report of an Independent Investigation into the Case of Mr Adakite commissioned by the Secretary of State for Justice in accordance with Article 2 of the European Convention on Human Rights

I am writing to you in response to the report of the independent investigation into the serious assault that took place at HMP Birmingham on 16 June 2011 which was shared with NHS England on 28 June 2017. In your investigation report you have made three recommendations addressed to Birmingham and Solihull Mental Health NHS Foundation Trust (BSMHFT) who will provide a separate response. NHS England, as responsible commissioner of healthcare services across the English prisons estate, would like to provide the response below.

Introduction

I thought it would be helpful to begin this response by providing an overview of the role played by NHS England (North Midlands) Health and Justice Commissioning Team ("NHS England (North Midlands)") in the provision of healthcare at HMP Birmingham. In its role as the responsible Commissioner with a statutory duty to arrange for the provision of healthcare services, Birmingham and Solihull Mental Health NHS Foundation Trust is the lead provider of healthcare services at HMP Birmingham and they have a sub-contracting agreement in place with Birmingham Community Healthcare NHS Trust to provide primary care health services.

As part of its commissioning responsibility NHS England (North Midlands) twice yearly Clinical Quality Review Meetings (CQRM), chaired by the Deputy Director of Nursing and Quality which are attended by Birmingham and Solihull Mental Health NHS Foundation Trust. A standing item on the agenda includes the review of any investigation reports along with the healthcare provider's action plans to ensure the relevant concerns raised through these investigations are being adequately addressed and mitigated against.

Oversight of the action plans is also monitored through the quarterly Contract and Performance Meetings held between the Trust and NHS England (North Midlands) and chaired by the Lead Health and Justice Commissioner. Any concerns regarding the progress being made against the action plan will be escalated to the Deputy Director of Nursing and Quality who chairs the CQRM and via the contracting route to the Assistance Director of Operation for the healthcare provider for immediate action.

In addition to the above, NHS England (North Midlands) operates an annual clinical quality visit process which supports Commissioners to obtain assurance that recommendations from independent investigations and other action plans have been adhered to and that, where required, practice has changed/improved. This will be evidenced by reviewing policies, procedures, reviewing practice and service delivery.

Investigation response

I would now like to provide information in support of recommendation 1 asking that a brief review of the available SystmOne medical record should be made by staff prior to performing initial health-screening to validate the answers made to the template-driven questions. This supports finding 4 (page 76) which concludes that there were shortcomings with the health screening process which included insufficient scrutiny of existing records.

Continuity of care for people who move across the criminal justice system is a key area of improvement work for NHS England. To support this NHS England has procured a new clinical IT system which will include GP to GP transfer of care records. This will allow the transfer of the patient's full community GP records both into and out of the secure setting. NHS England signed a contract in October 2017, implementation of this new functionality will commence in October 2018 and the ability to share patient data between community and residential estate settings is planned to be rolled-out by February 2020. As a result of an initial programme of work, healthcare services in the residential estate can already access the Summary Care Record via a secure web link, which allows essential clinical information to be made available

I hope the information above addresses the concerns you raised within your report and provide assurance that NHS England is working with our healthcare providers to make improvements to the provision of healthcare in HMP Birmingham, and the wider prison estate.

Yours sincerely,

Professor Stephen Powis National Medical Director

NHS England