



**Please ensure that this bulletin is circulated to ALL STAFF.**

**Please print out copies of this bulletin for distribution around your establishment.  
You may also wish to distribute it to Managers at your morning meeting.**

# Quick-Time Learning Bulletin

## Improving Self Harm outcomes by working effectively with Approved Premises

This QTLB aims to raise awareness of the importance of sharing information between prisons and Approved Premises in order to improve safer custody outcomes for prisoners.

Approved Premises (APs) are a distinct, non-custodial element of the NOMS estate providing accommodation with an enhanced level of supervision; they exist to protect the public and reduce reoffending. As such, APs provide a key element of the Probation Service's offender management arrangements. They have their legal basis in Section 13 of the Offender Management Act (2007).

A jointly commissioned NOMS and Department of Health (DH) report called 'A Review of Healthcare in Approved Premises (December 2012)' echoed previous reports (Joint Inspection of Approved Premises in England and Wales (2008) and The Bradley Report (2009) in criticising procedures around self-harm and suicide prevention. The key issues highlighted for prisons were:

- Most APs did not reliably receive information from prisons in relation to a resident's risk of suicide and self-harm;
- Gaining access to ACCT information was AP staff's main area of difficulty;
- AP staff did not attend pre-release ACCT Case Reviews;
- There was no mutual appreciation of the roles of AP and prison staff in assessing and managing risk. This affected the level of detail shared;
- AP staff were not always aware of who to contact in prisons in order to gather risk, wellbeing and/or disability information;
- Prisoners did not leave custody with an appropriate amount of medication or with medication information.

## Prompts For Action:

- Do you know how to contact the APs in your area and have they been provided with your details?
- Sharing ACCT information with AP staff does not breach data protection or clinical confidentiality rules and should be done as a matter of course;
- What are your local processes for sharing information about prisoners who are to be released into an Approved Premises?
- Who is responsible for gathering and communicating the relevant risk, wellbeing or disability information for those prisoners who:
  - > Have an Offender Supervisor (OS);
  - > Have an OS but are only assessed and signposted in the early days of custody;
  - > Do not have an OS.
- Does this person collect and communicate all relevant and current information including details of any open, post closure phase or recently closed ACCT documents? It is not necessary to provide a copy of the ACCT however, details that should be shared are (but not limited to):
  - > Details of the self harming behaviour (how often, the method and when they last harmed themselves);
  - > Any identified 'Triggers';
  - > Relevant information from the 'Case Reviews';
- > Relevant issues from the 'Ongoing Record' section;
- > A copy of the CAREMAP or any relevant outstanding actions.
- Do you invite AP staff or Offender Managers to pre-release ACCT Case Reviews?
- Where risk, wellbeing and/or disability information has been shared in advance of a prisoner's release, what follow up processes are in place to ensure this information is updated? i.e. how is up to date information about an open ACCT communicated to the AP on the day the prisoner is released?
- Communication and skills could be improved by inviting AP staff to take part in joint training sessions such as:
  - > Risk management;
  - > ACCT;
  - > Mental Health;
  - > Safer Custody.
- What processes are in place to ensure that a prisoner is released into an AP with enough prescribed medication? This is particularly pertinent when prisoners are released prior to the weekends or bank holidays. Paragraph 3.22 of PSO 2300 (Resettlement) states that, where a prisoner is receiving medical care which needs to continue after discharge, prisons must supply medication appropriate to clinical need until a GP prescription can be obtained.

## Contacts

### OSRR

**Tom Wilson** 0300 047 5713  
**Jon Vellacott** 0300 047 5712  
**Sharon Shergill** 0300 047 6422  
**Natasha Thompson** 0300 047 6228

thomas.wilson02@noms.gsi.gov.uk  
jon.vellacott@noms.gsi.gov.uk  
sharon.shergill@hmpr.gsi.gov.uk  
natasha.thompson@noms.gsi.gov.uk

### Approved Premises

**Sean Langley** 0300 047 4486

sean.langley@noms.gsi.gov.uk