

Death in Prison Learning, Audit & Review: DIPLAR Report – Part 1

This template should be downloaded prior to inserting any information

This DIPLAR report should be completed following all deaths in prison. All sections of this form must be completed. Where there is no relevant information to record, this should be clearly indicated on the form. A draft should be prepared in advance of the meeting and emailed to HQDIPLAR@prisons.gov.scot

1. Personal Details				
Name:	SPIN:			
Establishment:	CHI Number:			
Date of Birth:	NHS Board:			
Date of Death:	Date of Review:			
What was the individual's legal status?	Choose an item.			
Was this their first time in custody?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
How long were they in custody?	Choose an item.			
Had the individual been relocated within the establishment or transferred within the last 3 months?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, please give details and timescales				
For under 18s only				
The individual's Lead Professional/Named Person must be in attendance and an assessment made of whether the rights of children have been adhered to. Please confirm that this has been done, providing relevant information below. If not please provide reasons below.	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

2. Apparent Cause of Death	Choose an item.			
2.1 Medical Certificate Cause of Death (MCCD) Details:				
2.2 Was the death considered to be from a natural cause?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, please give details of why this death is considered natural causes If no, proceed to Section 3. Family Contact				
2.3 Was an application made for compassionate release?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Guidance Note: Provide details of the compassionate release application or decision not to progress the application				
2.4 Was a Do Not Attempt Cardio Pulmonary Resuscitation in place?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, were there any issues noted in relation to this i.e. were staff aware and was it adhered to?				

3. Family Contact				
3.1 Location of Death	Choose an item.			
If not hospital or hospice, proceed to Section 3.4 Escort Information				
3.2 If Hospital/Hospice, were Next of Kin informed of their admission?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
3.3 Were Next of Kin present at time of death?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Guidance Notes: Please confirm who contacted the Next of Kin regarding admission and when this was Provide details of any visits or issues that prevented these. Who was with the individual at time of death?				
3.4 Escort Information				
Was the individual under escort at time of death?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, include details from Escort Contractor of any relevant occurrences including handcuffing and return of property, visits or contact with family and friends during the escort period				
3.5 Who notified Next of Kin of death?				
If not Police Scotland, provide details Confirm whether or not the family were provided with the Duty Manager's contact details				
3.6 Did GIC/Deputy GIC contact family within 24 hours of family being advised of the death?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If no, please provide details for the reason for delay Provide summary of the contact				
3.7 Was the family support booklet provided?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If no, please provide details If yes, who provided this and when?				

3.8 Were the family informed of relevant points of contact?					
Provide details of who for each person					
	Name				
SPOC		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Chaplaincy		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
NHS		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Provide details if any not provided					

3.9 Did the family raise any questions or concerns to be discussed at the DIPLAR?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, please detail below These should be considered throughout the DIPLAR at the relevant points and the responses recorded in Section 12.				

3.10 Was Chaplaincy/Pastoral Support provided to the family?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Guidance Notes: Provide details of the contact e.g. how many times and the nature of the contact. Detail support provided in relation to funeral, emotional support and receipt of property etc				

3.11 Was there NHS contact with the family?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, please summarise any direct contact between NHS and family				

4. Incident Details

4.1 Record the specific incident

Guidance Notes:

Include the immediate actions taken and details of any external services e.g. Scottish Ambulance Service and Police Scotland

Where apparent suicide by hanging, include details of the ligature used and fixture point

Accurate times should be included e.g. time of call to ambulance, time of arrival

Details of all personnel involved should be recorded including their role in the incident

4.2 Significant Events or Contributory Factors

Guidance Notes:

Include details of any significant events or contributory factors that may possibly relate to the death

5. Suicide Prevention

5.1 Was the person on Talk to Me at the time of death?

YES

NO

5.2 If previous history, when were they last on Talk to Me?

Choose an item.

Guidance Notes:

Detail any recent relevant history of being supported on Talk to Me

Include any recent incidents of self-harm or attempted suicide

6. Substance Use			
6.1 Was the person on MORS at the time of death?	YES	<input type="checkbox"/>	NO
6.2 If previous history, when were they last on MORS?	Choose an item.		
Guidance Note: Detail any recent relevant history of being managed on MORS			

7. Relevant Information and Intelligence
<p>Guidance Notes:</p> <p>Include details of number of visits taken, phone calls and contact with solicitors and partner agencies etc</p> <p>Include any recent relevant intelligence</p>

8. Summary of Background
8.1 SPS to provide a brief overview. (Part 2 will capture the details of any significant events in the months leading up to the death)
<p>Guidance Notes:</p> <p>Include details of the last engagement with the individual (who was this with and what was the nature of interaction)</p> <p>This should include recent stressors/triggers and informal comments to staff, prisoners or family</p> <p>Include information regarding the deceased including family background</p> <p>Provide a summary of relevant recent custodial history including any internal prison moves or transfers</p> <p>Describe the prisoner's behaviour and mood in the months prior to death. (Including participation in programmes, work parties, any breaches of discipline)</p> <p>Where appropriate, a personal officer update should be included</p> <p>Where the individual is under the age of 18, include any relevant information from their Lead Professional/Named Person. For 18-24 year olds seek expert guidance re young people's rights</p>
8.2 NHS to provide a brief overview. (Part 3 will capture the details of any significant events in the months leading up to the death)
Guidance Notes:

This should include details of recent and relevant contact with healthcare including any contact with mental health service etc.

9. Impact on Staff, the Establishment and other People in Custody

9.1 Impact on the staff and the establishment overall. Include any specific action taken to support those affected.

Guidance Notes:
 What was the immediate support available post incident? Who provided this?
 What further support was provided in the following days/weeks? Who provided this?
 How was the death communicated to staff involved?

9.2 Impact on other people in custody and action taken to support them.

Guidance Notes:
 What was the immediate support available post incident? Who provided this?
 What further support was provided in the following days/weeks? Who provided this?
 How was the death communicated to other people in custody?

10. Funeral, Memorial Service and Tributes

Guidance Notes:
Please include details of any memorial service or tributes organised by the establishment
Did any SPS staff attend or participate in the funeral?

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11. Additional New Information

Guidance Note: This should include any information that became known during the DIPLAR meeting that was not documented previously

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12. Feedback for the Family

Guidance Note: This should include agreed responses to questions or concerns raised by the family as recorded in Section 3.9 along with any other relevant information as directed by the Chair.
Details of who will provide the feedback to the family and the timescales for doing so will be recorded in the Action Plan.

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13. Attendance

Please record the details of all those in attendance

NAME	DESIGNATION

For DIPLAR in relation to Self Inflicted Death or Death by Undetermined Intent:

This section should be signed by the Independent Chair and NHS Chair to confirm this is an accurate record of the DIPLAR meeting

SPS Independent Chair	Signed:	Date:
NHS Lead	Signed:	Date:

Or

For DIPLAR in relation to Natural Cause

This section should be signed by the Independent Chair and NHS Chair to confirm this is an accurate record of the DIPLAR meeting

Governor	Signed:	Date:
NHS Lead	Signed:	Date:

- This should not be signed until the draft is reviewed by the Independent Chair and HQ Health and any suggested feedback considered.*

Part 3 – NHS Timeline of Significant Events

Guidance Notes: NHS to provide a summary of any relevant contact with health care services including community health & acute health services

Date	Service	Summary of Contact

Part 4 - DIPLAR Learning & Action Plan

The Learning & Action Plan should be completed jointly by SPS and NHS

1. Identified Good Practice

2. Learning Points/Recommendations

3. Action Points		
Guidance Note: Action Points must read independently of the report as these will be transferred onto the National Action Plan All actions should be SMART: Specific, Measureable, Achievable, Relevant and Timebound		
Action Point	Responsibility	By When

Was your establishment section in the National DIPLAR Learning & Action Plan checked for recurring actions?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Were any recurring actions identified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
If yes, please provide details				

This section should be signed by the Governor/Deputy Governor and NHS Lead to confirm they are content and responsible for progress against actions.

Governor/Deputy Governor or Director Private Prison	Signed:	Date:
NHS Lead	Signed:	Date:

This should not be signed until the draft is reviewed by HQ Health and any suggested feedback considered.

A draft copy of the DIPLAR should be uploaded to the establishment's [DIPLAR Working Area](#) on SharePoint for review by HQ within 4 weeks of the meeting.

Where possible, HQ will review the draft within 2 weeks, arrange for review by the Independent Chair and return any suggested amendments to be considered locally.

A copy of the final signed version must be uploaded as a pdf to the [HQ DIPLAR Working Area](#) on SharePoint within 8 weeks. The draft Word version should also be retained to evidence the feedback provided if required for FAI purposes.

Local Suicide Prevention Co-ordinators must record actions from the DIPLAR meeting in the [DIPLAR Learning & Action Plan](#) and update progress by the 7th of each month. Where no actions are identified, this should be noted.