

Rainsbrook Secure Training Centre

Quality Report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Key findings of this inspection

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Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8 2017, which did not relate to the safe key question.

The findings from a recent joint inspection with Ofsted and Her Majesty's Inspectorate of Prisons are detailed in a separate inspection report published by Ofsted.

Are services effective?

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8 2017. At that time, we found that staff were not in receipt of regular formal clinical supervision and appraisals. Mandatory training had not been completed by all staff, and some did not have up-to-date fire safety, infection control and safeguarding training.

We found that the provider had not fully addressed all the issues of concern we had identified in the Requirement Notice, and was not yet compliant with the requirements of the Health and Social Care Act 2008 in relation to the effective key question.

- Training was now monitored electronically, and staff were reminded when training was due. However, most staff were still not fully compliant with mandatory training.
- Staffing shortages meant while essential services were being provided, wider wellbeing work had been put on hold, and the suspension of the Named Nurse system meant that important information on patient records could be missed.
- All staff in the core healthcare team had received appraisals in the preceding 12 months, and received clinical and managerial supervision regularly.

Are services caring?

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8 2017, which did not relate to the caring key question.

The findings from a recent joint inspection with Ofsted and Her Majesty's Inspectorate of Prisons are detailed in a separate inspection report published by Ofsted.

Summary of findings

Are services responsive to people's needs?

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8 2017, which did not relate to the responsive key question.

The findings from a recent joint inspection with Ofsted and Her Majesty's Inspectorate of Prisons are detailed in a separate inspection report published by Ofsted.

Are services well-led?

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8 2017, which did not relate to the well-led key question.

The findings from a recent joint inspection with Ofsted and Her Majesty's Inspectorate of Prisons are detailed in a separate inspection report published by Ofsted.

Key findings

Areas for improvement

Action the service **MUST** take to improve

We found that the provider must undertake the following improvements:

- The provider must ensure that staff complete their mandatory training requirements.
- The healthcare provider must continue making every effort to fill staffing vacancies, to ensure young people receive a robust service which can effectively and confidently address all their physical and mental healthcare needs.

Rainsbrook Secure Training Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC health and justice inspector inspected health services at Rainsbrook Secure Training Centre (STC) from October 8 to 11, 2018, as part of a full inspection of the centre led by Ofsted that took place during the same week.

We do not currently rate services provided in secure training centres.

Background to Rainsbrook Secure Training Centre

Rainsbrook STC is one of three purpose-built STCs designed to accommodate young people between the ages of 12 and 18. The STC is located in the village of Willoughby in Warwickshire. At the time of the inspection, there were 65 young people living at the STC. The STC is operated by MTCnovo.

Northamptonshire Healthcare NHS Foundation Trust (NHFT) is commissioned by NHS England to provide primary and mental healthcare at the STC. NHFT is registered with CQC to provide the regulated activities of Diagnostic and screening procedures, Surgical procedures and Treatment of disease, disorder or injury at Rainsbrook STC.

Why we carried out this inspection

We attended a joint inspection of Rainsbrook STC with Ofsted between October 8 and 11 2018. STCs are inspected annually. During the inspection, we determined if the registered provider, NHFT, was meeting the legal requirements and regulations under Section 60 of the Health and Social Care Act 2008, and that young people at the centre were receiving safe care and treatment. This included following up on concerns identified in the Requirement Notice issued on August 8 2017.

How we carried out this inspection

Before this inspection we reviewed a range of information we held about the service, including action plans and associated documentary evidence of NHFT's response to the Requirement Notice issued in August 2017. For the inspection, we asked the provider to share with us a range of information which we reviewed. We spoke with healthcare staff, STC staff and young people who used the service, and sampled a range of records. We also requested additional information following the visit to enable us to fully assess NHFT's compliance with Regulation 18 (Staffing), based on concerns set out in the 2017 Requirement Notice.

Are services safe?

Our findings

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8, 2017.

Are services effective?

(for example, treatment is effective)

Our findings

Effective staffing

When we inspected Rainsbrook STC in June 2017, we found that healthcare staff were not in receipt of regular formal clinical supervision and appraisals, and felt unsupported and deskilled. Mandatory training had not been completed by all staff and some did not have up-to-date fire safety, infection control and safeguarding training.

During this inspection, we found that all eligible staff from the core physical and mental healthcare team had received appraisals within the preceding 12 months.

A revised clinical and managerial supervision template had been implemented in line with NHFT policy in August 2017, and the supervision structure had been clarified. Supervision monitoring records showed that staff were now receiving supervision with appropriate regularity. During the inspection, staff members confirmed they felt better supported.

Training compliance was now fully monitored via the NHS electronic staff record system (ESR) and discussed with staff during supervision. Some of the training concerns identified in 2017 had been addressed, and all relevant staff had in-date safeguarding and infection control training.

However, as of November 8 2018, most staff were not fully compliant with all mandatory training. Four out of seven relevant staff had below 90% compliance, and only one had achieved 100% compliance. Two out of seven relevant staff members did not have in-date immediate life support (ILS) training, and two out of seven did not have in-date fire

safety training. This could put patients at risk, if staff were unable to respond appropriately to an emergency. NHFT confirmed that all relevant staff would be compliant with ILS training by the end of December 2018.

During this inspection, we found that the healthcare team at Rainsbrook carried a large number of vacancies, including three out of five registered general nurse posts. Management sickness and the absence of on-site administration staff had increased the nursing workload, which had led to the need to prioritise tasks. The Named Nurse system was not functioning to enable fully effective record monitoring, meaning that information could be missed, putting young people at risk of not receiving required assessment or treatment.

Essential daily tasks were being undertaken to support young people with long-term conditions and acute physical health needs, but additional projects to support young people's wellbeing had been suspended.

Staffing shortages in the physical healthcare team had also impacted on the mental health and learning disability nurses, who were undertaking general nursing tasks and therefore unable to undertake groupwork to support young people with emotional issues such as anxiety or self-harm. The mental health team also carried a vacancy, as there was currently no occupational therapist in post.

NHFT had identified staffing gaps as a risk, and was continuing with recruitment efforts. A second learning disability nurse had been recruited but was not yet in post, and since the inspection an administrator had joined the team.

Are services caring?

Our findings

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8, 2017.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8, 2017.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

This report focusses only on concerns mentioned in the Requirement Notice we issued on August 8, 2017.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>How the regulation is not being met:</p> <p>The healthcare team carried a large number of vacancies, including three out of five registered general nurse posts. This meant that nurses could not consistently monitor young people, which put them at risk of not receiving required assessment or treatment.</p> <p>Additional wellbeing projects run by the physical healthcare team had been suspended. Specialist nurses were undertaking general nursing tasks and were therefore unable to undertake groupwork to support young people with emotional issues.</p> <p>Most staff were not fully compliant with all mandatory training. Two out of seven relevant staff members did not have in-date immediate life support training, and two out of seven did not have in-date fire safety training. This could put patients at risk, if staff were unable to respond appropriately to an emergency.</p>