

Pinewood House

Inspection report

Pinewood Place
Dartford
DA2 7WG
Tel: 01322625759

Date of inspection visit: 27 February 2024
Date of publication: 26/03/2024

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.

Ratings

Overall rating for this location

Not inspected

Are services responsive to people's needs?

Inspected but not rated



Overall summary

We carried out an announced focused inspection of the healthcare services provided by Oxleas NHS Foundation Trust at HMP &YOI Rochester on 27 February 2024.

Following our previous inspection on 11 July 2023, we found that the provider's management of patients' complaints required improvement. We issued a requirement notice in relation to Regulation 16 of the Health and Social Care Act- Receiving and acting on complaints.

The purpose of this focused inspection was to determine if the provider was now meeting the legal requirement of the Notice we issued in July 2023.

We do not rate providers of health and social care services who operate in prisons.

OUR FINDINGS

Overall, we found the provider had implemented satisfactory measures to address many of the issues we had identified during our previous inspection. The management of patients' complaints had improved, and most patients now received a more timely, empathetic and comprehensive response to their concerns. However, there continued to be, sometimes considerable, delays between the date patients submitted their complaint, and the date healthcare staff received it.

We also found that 2 prisoners who had been granted with a greater degree of trust and autonomy had been tasked with collecting prisoners' healthcare applications and complaints. This meant they had access to personal and sensitive information which compromised patient confidentiality

Our inspection team

This inspection was conducted by 2 CQC Health and Justice Inspectors.

During the inspection we spoke with the head of health care services, the quality and governance manager and two administrative support staff. We reviewed policies and procedures in relation to complaints' management and reviewed a total of 21 patient complaints to assess if they had been managed within the provider's policy.

Background to Pinewood House

HMP & YOI Rochester is a category C training and resettlement prison for adult men and young offenders in Kent and accommodates up to 695 adult prisoners and young offenders. The prison is operated by His Majesty's Prison and Probation Service. Oxleas NHS Foundation Trust is the health provider at HMP & YOI Rochester.

The provider is registered with the CQC to provide the following regulated activities at the location: Treatment of Disease, Disorder or Injury, and Diagnostic and Screening procedures.

Our last focused inspection of HMP & YOI Rochester was in on 11 July 2023. The inspection report can be found at: [Pinewood House - Care Quality Commission \(cqc.org.uk\)](#)

Are services responsive to people's needs?

At our previous inspection in July 2023, we found that the provider's systems and processes for managing patients' complaints were not effective. Complaints were not always responded to within stated timescales and the quality of the responses was poor.

During this inspection we found the following improvements had been made to comply with the regulation:

- On 8 August 2023, 7 senior healthcare staff had completed training in the management of complaints, delivered by the provider's quality assurance and governance team. The head of healthcare informed us that this training covered the provider's complaints procedures, its associated timescales, and the issues we had raised at the previous inspection.
- We noted significant improvement in the use of the provider's complaints spreadsheet. Each patient complaint received had been logged appropriately, along with the timescales for its response. Administrative staff informed us they now checked the spreadsheet every day and sent reminders to the relevant complaint investigator if the response deadline date was approaching. This had significantly reduced delays in responding to patients.
- At the time of our inspection, there was no back log of complaints and all patients had received a written acknowledgement of their complaint within 3 days.
- We reviewed a total of 21 complaints received by the provider between September 2023 and January 2024. All complaints had been responded to within the timescale of 30 working days. Every patient had received a typed letter in response.
- We noted an improvement in the quality of complaint responses. Most we reviewed clearly outlined the complainant's concerns, who had investigated them, and the outcome of the investigation. The responses showed empathy and an apology was provided where appropriate. However, we noted two responses which did not systematically answer the concerns raised and the language used lacked professionalism.
- All complaint responses now clearly outlined to patients how they could escalate their concerns if they were unhappy with the provider's response, either by requesting an independent person to review it or directing them to the Parliamentary and Health Service Ombudsman.
- The head of healthcare, or another senior manager in their absence, reviewed and approved all complaints responses before they were sent to the patient to ensure they were of suitable quality.
- The quality and governance manager undertook a deep dive analysis of 5 patient complaints every month. This assessed if the correct template had been used, if the complaints had been answered in a systematic way and if the responses were empathetic. Each complaint response reviewed was given a pass or fail score. We viewed deep dive analyses that had been completed for the months of October, November and December 2023. This showed that all responses had complied with the stated requirements.
- Figures provided to us by the quality and governance manager demonstrated a 50% decrease in the numbers of complaints received from patients between October 2023 and December 2023.

However, we noted the following shortfalls that needed to be addressed:

Are services responsive to people's needs?

- To ensure that patients' complaints were received by healthcare staff more swiftly, the provider had enlisted the support of two trusted prisoners to collect healthcare applications and complaints from the healthcare boxes on the wings. This was not appropriate and meant that sensitive and personal health information was not kept confidential. Following our inspection, we received written confirmation from the provider's regional services manager that this practice would stop immediately and only healthcare staff would undertake this task each day.
- There continued to be delays between the patient submitting their complaint, and healthcare staff receiving it. For example, in December 2023, there was a delay of 20 days for one patient complaint, a delay of 19 days for 3 complaints and a delay of 10 days for one complaint. We had raised this issue at our previous inspection.