

Care UK Health & Rehabilitation Services Limited

HMP Highpoint South

Inspection report

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Overall summary

We carried out a desk-based review on the healthcare services provided by Care UK Health and Rehabilitation Services Limited at HMP Highpoint in August 2020. Following a joint inspection of HMP Highpoint with Her Majesty's Inspectorate of Prisons (HMIP) in August 2019, we found that the quality of healthcare provided at this location did not meet regulations. We issued a Requirement Notice in relation to Regulation 17: Good governance, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The purpose of this review was to determine if the healthcare services provided by Care UK Health & Rehabilitation Services Limited were now meeting the legal requirements and regulations under Section 60 of the Health and Social Care Act 2008. We found that improvements had been made and the provider was no longer in breach of the regulations.

We do not currently rate services provided prisons.

Background of the service.

HMP Highpoint is a male category C training prison, split across two sites (North and South). Care UK have delivered healthcare services there since 2011.

HMP Highpoint South is a primary healthcare service provided by Care UK Clinical Services Limited. It is one of two locations registered with the Care Quality

Commission within HMP Highpoint. The healthcare teams from both locations (North and South) work together to provide primary care, clinical substance misuse and mental health services to all prisoners.

The service is commissioned to provide health care seven days a week between 07:45am and 6:15pm on week days and 08:00am to 6:00pm at weekends. NHS 111 and emergency services were used out of hours, if required.

We last inspected the service jointly with Her Majesty's Inspectorate of Prisons 12 -23 August 2019. When we judged the service was in breach of regulation 17, Good governance, under The Health and Social Care Act 2008. We issued a Requirement Notice. At the time of our 2019 inspection Care UK subcontracted the dental services to another provider.

The service is registered to provide personal care, diagnostic and screening procedures and treatment for disease, disorder or injury.

The report on the joint inspection carried out with Her Majesty's Inspectorate of Prisons in August 2019 and a report can be found at:

How we carried out this review.

This desk-based review was carried out by a CQC health and justice inspector in discussion with the manager for the health and justice team. We did not visit the prison to

Summary of findings

carry out this inspection because we were able to gain sufficient assurance through the documentary evidence provided and telephone interviews with relevant service managers.

Documents we reviewed included:

- The providers action plan
- Dental tool equipment logs for the North and South site
- Dental audit for the movement of patients
- The out of hours medication stock checks
- A selection of Quality Assurance minutes
- The HR audit
- The staff supervision log

We also inspected the areas where in the joint report we recommended that the provider should make improvements.

At this inspection we found:

- There was an effective system in place for checking dental tools and equipment daily
- Staff had access to up to date Control of Substances Hazardous to Health (COSHH) information
- An effective process had been put in place to ensure out of hours medicine stock levels were sufficient to meet patient needs
- Managers had effective oversight of staff supervision
- Care plans for people with long term conditions had been significantly improved
- A local operating procedure had been developed to manage outstanding dental appointments for patients moving between North and South sites.

Summary of findings

The five questions we ask about services and what we found

Are services safe?

Are services effective?

Are services caring?

Are services responsive to people's needs?

Are services well-led?

Are services safe?

Our findings

We did not inspect this key question in full during this focused follow up inspection. We reviewed areas identified in the Requirement Notice issued to Care UK Health & Rehabilitation Services Limited in January 2020.

At our last inspection we found there were insufficient systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular: The processes for responding to chemical incidents and checking the dental tools and equipment on one site were not adequate. Staff were not checking the stock of out of hours medications against the log book to ensure that stock levels were sufficient to meet patient need.

At this desk-based review we found that the provider had addressed the issues of concern we had identified and was now compliant with the requirements of The Health and Social Care Act 2008.

Safety systems and processes.

- Managers assured us that posters were immediately displayed in the two dental suites, with guidance for chemical eye injuries and spillages. Managers printed up to date Control of Substances Hazardous to Health (COSHH) information sheets on materials and liquids used within the dental surgery, and placed folders in the dental surgeries in the North and South, which were accessible to staff and ensured they had access to current safety advice.
- The head of healthcare and dental manager monitored chemical incidents reported through the sub-contractor's electronic incident dashboard. Managers told us that there had been no such incidents since our 2019 inspection. They advised that dental staff would raise concerns should an incident arise which would then be discussed as part of the local quality and governance meetings.

- A local operating procedure (LOP) was now in place for use by dental staff, for the management of dental tools. The LOP covered, management and security of dental tools and equipment, tool risk assessments, the appropriate storage of tools, record keeping, disposal of damaged and unwanted tools or equipment, management of tool loss and reporting tool loss. Managers ensured all staff understood and followed this guidance. We reviewed a copy of the tool/equipment risk assessment form, and found it adequately outlined the importance of undertaking thorough security risk assessments of all tools and equipment, the environment in which they were used and who individually had access to them. This ensured patients were protected from risk if a tool had been unaccounted for.
- Managers checked that staff had completed the daily tool checks form, for all tools and equipment in the dental suites in the North and South site, which was also sent to the prison security department. We reviewed 36 of these records and found there had been clear adequate check and accounting for all tools, which ensured risks associated with dental tools were monitored.

Appropriate and safe use of medicines.

- The provider had developed a process to ensure stock levels were sufficient. Managers stated that the process for auditing the out of hours stock was now undertaken by the senior pharmacy technician on a monthly basis. This provided head of healthcare with assurance that staff were all compliant with the process. We reviewed the monthly audits and found checks for each medicine had been completed and any actions needed were recorded, such as medication stock rotation and changes.

Are services effective?

(for example, treatment is effective)

Our findings

We did not inspect the effective domain at this desk based review.

Are services caring?

Our findings

We did not inspect the caring domain at this desk based review.

Are services responsive to people's needs?

Our findings

We did not inspect the responsive domain at this desk based review.

Are services well-led?

Our findings

We did not inspect this key question in full during this desk-based review. We reviewed areas identified in the Requirement Notice issued to Care UK Health & Rehabilitation Services Limited in January 2020.

At our last inspection we found there were insufficient systems or processes that enabled the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular: The dental waiting list arrangements did not ensure continuity of treatment for patients who moved between Highpoint locations. There was no accurate record or log of staff supervisions undertaken.

At this desk-based inspection we found that the provider had addressed the issues of concern we had identified and was now compliant with the requirements of The Health and Social Care Act 2008.

The 2019 joint report also recommended several areas for improvement:

- The dental flooring should meet infection prevention control standards.
- Sedating medications should be given at a clinically appropriate time.
- Prisoners should have access to naloxone upon release.
- The long-term condition care plans should be more person centered.

At this desk-based review we found that the provider had addressed most of the areas where we identified they should make some improvements.

Governance arrangements.

- Following our last inspection managers had created a log for evidencing staff supervision. We reviewed the Health and In Justice (HIJ) "Action Log", which was automatically updated from staff dashboards to record attendance. Staff had been issued with Care UK supervision log books as a tool to guide and record clinical supervision. Staff had access to both individual and group supervisions. Managers alerted staff to the dates and times of the group supervisions via email and a list of trained clinical supervision staff was displayed in the healthcare offices. The supervision dashboard showed that all staff had engaged in both clinical and

managerial supervisions from November 2019 until August 2020, including bank staff carrying out clinical duties. This meant managers had effective oversight of supervision, and assurance that staff complied with supervision requirements.

- In August 2019, we recommended that the dental flooring in the South dental suite was improved to meet infection prevention control standards. At the time of this desk-based review, we were informed that the dental suite floor was being replaced to ensure that the dental suite complied with infection prevention standards. The managers have agreed to send us photographic evidence to confirm these improvements.
- During this desk-based review we found that improvements had been made to ensure that sedating medicines were prescribed and administered at clinically appropriate times. Managers reviewed and adjusted prescriptions to ensure that the minority of patients who could not have medicines in possession, were given a prescribed dose at the latest opportunity in the working day. Staff reflected this in their clinical records. Such patients' prescribed medicines were discussed regularly at the multidisciplinary meeting. This ensured that the provider was doing all that was possible to effectively manage the timings for sedating medications within the times during which the service operated.
- The 2019 joint inspection report recommended that where appropriate, prisoners should have access to naloxone upon release, which could prevent overdose. This had not been actioned but there were ongoing discussions between team managers and commissioners to facilitate access to naloxone.
- In response to our 2019 recommendation clinical leads had developed more specific person centered care plans for patients with long-term conditions and these were audited by managers. We reviewed the 2020/21 quarter 1 audit which demonstrated the progress that had been made in developing and reviewing care plans for all the main long-term conditions. The lead nurse carried out quality checks of these care plans and fed back development points to staff to ensure that plans were individualised.

Managing risks, issues and improvements.

- At our last inspection we found the dental waiting list arrangements did not ensure continuity of treatment for patients who moved between Highpoint North and

Are services well-led?

South locations. Since the last inspection, the dental manager had developed a local operating procedure used by the subcontracted dental services team to support effective management of the waiting list and movement of patients between North and South sites.

- Managers had developed an effective system for tracking patient movements between the two sites daily, ensuring that appointments were kept. This included emailing a list of patient names daily to the dental team and carrying out monthly audits of the management of patient movements to ensure that no patients were missed.
- We were assured that dental managers at HMP Highpoint now engaged with Care UK Health and

Rehabilitation Services' local quality and governance meetings, where all healthcare staff discuss and review the effectiveness of the movement waiting list. However, the COVID-19 pandemic had impacted on face to face appointments between February and August 2020, with the exception of when emergency treatment was required. The dentist had continued to carry out remote triage and offered patients pain relief when needed. Managers had sent out a letter to patients explaining what services and processes were available during this time. Meeting minutes showed dental staff were visible throughout the pandemic and urgent referrals were being monitored. There were no missed appointments.