

# Bridgewater CHCFT HMP/YOI Hindley

## 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.

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## Overall summary

This inspection was an announced focused inspection carried out on 4 May 2017. The purpose of the inspection was to confirm that the service provider, Bridgewater Community Healthcare NHS Foundation Trust had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified

in our previous joint inspection with Her Majesty's Inspectorate of Prisons (HMIP) between 11 and 14 July 2016 and in the Requirement Notice that we issued on the 12 December 2016. This report covers our findings in relation to those requirements.

### Our key findings were as follows:

# Summary of findings

- The management of controlled drugs had significantly improved.
- Patients received their medicines on time or within an agreed time frame.
- We found that the trust was operating an effective and accessible complaints process that upheld patient confidentiality.

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services safe?**

We did not inspect the safe key question in full at this inspection. We inspected only those aspects mentioned in the Requirement Notices issued on 12 December 2016.

- The management of controlled drugs had significantly improved.
- Patients received their medicines on time or within an agreed time frame.
- Quarterly audits of controlled drugs registers were undertaken and records of non-attendance at medication administration times were maintained.
- Healthcare assistants were now able to act as the second signatory for the administration of controlled drugs following competency training. This ensured that staff were always available to administer medicines to patients.
- Patients had access to a good range of information on how to access advice from a pharmacist.

### **Are services effective?**

We did not inspect the effective key question at this inspection.

### **Are services caring?**

We did not inspect the caring key question at this inspection.

### **Are services responsive to people's needs?**

We did not inspect the responsive key question in full at this inspection. We inspected only those aspects mentioned in the Requirement Notices issued on 12 December 2016.

- We found that the trust was operating an effective and accessible complaints process that upheld patient confidentiality.
- Responses to complaints were reviewed by the head of healthcare.

### **Are services well-led?**

We did not inspect the well-led key question at this inspection.

## Summary of findings

# Bridgewater CHCFT HMP/YOI Hindley

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection team was led by a CQC health and justice inspector, accompanied by a second health and justice inspector.

## Background to Bridgewater CHCFT HMP/YOI Hindley

HMP Hindley is a category C prison holding adult males sentenced up to four years and young males, aged 18 - 21, serving sentences of over 12 months and up to four years. The operational capacity of the prison is 608 prisoners. Bridgewater Community Healthcare NHS Foundation Trust provide the majority of health care services at the prison including, primary health care, dental services and GP services. The location, Bridgewater CHCFT HMP/YOI Hindley is registered to provide the regulated activities of, diagnostic and screening procedures, surgical procedures and treatment of disease, disorder or injury.

CQC inspected healthcare services at the prison in partnership with Her Majesty's Inspectorate of Prisons from 11 to 14 July 2016. We found the provider, Bridgewater Community Healthcare NHS Foundation Trust was in breach of the regulations and we issued two Requirement Notices. We asked the provider to make improvements and we followed up on their progress during a focused inspection on 4 May 2017.

During this focused inspection, we found the provider had made significant improvements and had taken necessary action to meet the notices and was now fully compliant.

## Why we carried out this inspection

We undertook a focused inspection of Bridgewater CHCFT HMP/YOI Hindley on 4 May 2017. This inspection was carried out to review in detail the actions taken by the provider to improve the quality of care and to confirm that the provider was now meeting legal requirements.

## How we carried out this inspection

The inspection was led by a CQC health and justice inspector who was accompanied by a CQC health and justice inspector. Before our inspection we reviewed a range of information that we held about the service. We asked the provider to share with us a range of information which we reviewed as part of the inspection. During the inspection we spoke with a range of healthcare staff, and the deputy governor.

- Evidence reviewed included:
- An updated action plan from Bridgewater Community Healthcare NHS Foundation Trust
- A report on a quality visit to HMP Hindley carried out by NHS England on 30 January 2017
- Medication risk assessments.
- Evidence in clinical records of medicine use reviews.
- Controlled drugs registers.

# Are services safe?

## Our findings

### Overview of safety systems and process

- At our previous joint inspection with HMI Prisons in July 2016 we found some medicines were not managed safely in relation to their administration and monitoring. Patients did not always receive their prescribed controlled drug medicines or they did not always receive them at an appropriate time. Deficiencies in the availability of nursing staff to provide a second safety check by way of a second signature meant that when a second nurse was not available prisoners did not get their medicines. We undertook a follow up inspection on 4 May 2017 at HMP Hindley and found the management of controlled drugs had significantly improved.
  - At our previous joint inspection with HMI Prisons in July 2016 patients told us that they sometimes received their medicines several hours late. They told us that occasionally they refused to take their medicines when they were given late, because one of the side effects of their medicine was that they were unable to sleep. They told us that not receiving medicine affected their ability to concentrate particularly when they attended education. We observed from medicines records several incidents of when a controlled drug had been offered to a prisoner several hours late. We undertook a follow up inspection on 4 May 2017 and found that patients received their medicines on time or within an agreed time frame. We found that Bridgewater Community Healthcare NHS Foundation Trust had taken a number of actions to ensure that medicines were administered correctly and in accordance with a prescriber's instruction and at suitable times.
  - The actions that the trust had developed since our last joint inspection in May 2016, included a review of clinical guidelines to establish safe administration times for specific medicines, for example, Concerta XL.
- Concerta XL is a drug used to treat attention deficit hyperactivity disorder (ADHD) in children and young adults. Quarterly audits of controlled drugs registers were undertaken and records of non-attendance at medicine administration times were maintained. Collectively these actions meant that patients received safe care and treatment.
- The trust had produced a 'quick reference guide' which instructed staff on how to record medicines administration of controlled drugs. We found that staff had access to a range of standard operation procedures to support their practice. This ensured accurate prescription validation and preparation of the dose of controlled medicines prior to administration to the patient and the entry into the controlled drug register.
  - Healthcare assistants were now able to act as the second signatory for the administration of controlled drugs. Healthcare assistants had completed competency training and assessment to enable them to be the second signatory on medicine records including controlled drug registers. This ensured that staff were always available to administer medicines to patients.
  - Since our joint inspection with HMI Prisons in July 2016 the trust had produced a range of patient information, including an information leaflet advising patients of times to collect their controlled drug medicines and where to collect them. Information about pharmacy services had also been produced, which informed patients about seeking advice about getting the best out of their medicines. This ensured that patients were aware of what services were available and how they could get help with their medicines. During our follow up inspection on 4 May 2017 we found that patients received their medicines on time or within an agreed time frame. We found the trust had taken a number of actions to ensure that medicines were administered correctly and in accordance with a prescribers instruction and at suitable times.

# Are services effective?

(for example, treatment is effective)

## Our findings

The effective key question was not looked at on this inspection.

# Are services caring?

## Our findings

The caring key question was not looked at on this inspection.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

### Listening and learning from concerns and complaints

- At our previous joint inspection with HMI Prisons in July 2016 we found that the registered person was not operating an effective and accessible system for identifying, receiving, recording, handling and responding to complaints. Complaints specific to healthcare providers were received through the main prison services complaint system. This meant that patient details and the reason for their complaint were not kept private and confidential. We found patients had limited access to information about the options available to them when making a complaint, should they not be satisfied with the outcome of the complaint investigation. We had further concerns about some of the responses we sampled, which did not fully address the issues highlighted or offer an appropriate resolution when things went wrong, nor did any response inform a prisoner how to escalate their complaint if they remained dissatisfied. We undertook a follow up inspection on 4 May 2017 and found that the trust was operating an effective and accessible complaints process.
- Since our joint inspection with HMI Prisons in May 2016 we found that Bridgewater Community Healthcare NHS Foundation Trust had reviewed its complaints process and this now included details of how a complainant could escalate their complaint if they remained dissatisfied with the response to their complaint. We found that despite the trust having a confidential complaints process, which was advertised across the prison, the majority of prisoners chose to complain through the prison complaints system. The trust always responded to the prisoner through its own confidential complaint system.
- Responses to complaints were reviewed by the head of healthcare. We saw evidence of a quarterly review of complaints for 2016/2017 and a more recent review of complaints raised in April 2017. The trust told us that the review would now include a review of the quality of responses to ensure there was a consistent approach to complaints.

# Are services well-led?

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

## Our findings

The well-led key question was not looked at on this inspection.