

# IRC Colnbrook

## Inspection 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.

# Overall summary

We carried out an announced focused inspection of healthcare services provided by Central and North West London NHS Foundation Trust (CNWL) at IRC Colnbrook (branded as IRC Heathrow) on 19 November 2019.

Following our last joint inspection with Her Majesty's Inspectorate of Prisons (HMIP) in December 2018, we found that the quality of healthcare provided by CNWL at this location required improvement. 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 the inspection was to determine if the healthcare services provided by CNWL were meeting the legal requirements of the above regulations, under Section 60 of the Health and Social Care Act 2008.

We do not currently rate services provided in immigration detention centres.

At this inspection, we found that:

- Staff routinely used formal language translation services and no longer asked detainees to translate during health consultations.
- Detainees could access a wide range of range of translated written information about healthcare services and health promotion information.
- The provision and oversight of managerial and clinical supervision had improved.

## Our inspection team

This inspection was completed by two CQC health and justice inspectors.

Before this inspection, we reviewed a range of information that we held about the service. Following the announcement of the inspection we requested additional information from the provider, including an updated action plan and associated evidence, which we reviewed.

During the inspection we asked the provider to share further information with us. We spoke with healthcare staff and managers, and NHS England Commissioners, and sampled a range of records and documents.

## Background to IRC Colnbrook

IRC Colnbrook is an immigration removal centre in Harmondsworth, West London, adjacent to Heathrow Airport. Colnbrook and the neighbouring Harmondsworth site are run jointly as IRC Heathrow by Mitie Care and Custody. At the time of the inspection, the centre held about 250 detainees.

CNWL is the main health provider at IRC Colnbrook. The trust is registered with CQC to provide the following regulated activities at the location: Treatment of disease, disorder or injury, and Diagnostic and screening procedures.

Our last joint inspection with HMIP was in December 2018. The joint inspection report can be found at:

<https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2019/04/Colnbrook-web-2018.pdf>

## Are services safe?

We did not inspect the safe key question at this focused inspection.

# Are services effective?

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

## Are services caring?

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

# Are services responsive to people's needs?

## Responding to and meeting people's needs

At our last inspection, we found that language translation services were available but not used consistently during healthcare consultations. Detainees were sometimes used as interpreters, which compromised patient confidentiality.

During this focused inspection, we found that staff routinely used formal language translation services and no longer asked detainee peers to translate during patient consultations:

- Monthly reporting showed that healthcare staff frequently used a language translation service for consultations. Between July and October 2019, healthcare staff accessed the service 1,323 times. If staff could not access the service, they reported this through the provider's incident reporting system.
- The provider had developed the initial health screen template on the SystmOne electronic clinical record to prompt staff to routinely record all new detainee's language translation needs on arrival.
- A recent patient record audit showed that detainees' language translation needs were evident in 90% of records reviewed. Five separate patient records that we reviewed all contained evidence of detainees' language translation needs, and evidence of professional language translation services being used during consultations.
- The provider issued periodic instructions to all staff reminding them not to use detainees to translate during consultations. Staff told us that they no longer allowed detainee peers into consultations, and said that managers gave regular reminders by email and during team meetings. We saw evidence during this inspection of communications issued to all staff.

At our last inspection, we found that written information about healthcare services was not available in alternative languages or in accessible, user-friendly formats.

During this focused inspection, we found that the provider had introduced a wide range of translated written information about healthcare services for detainees:

- Patient information posters had been placed across the centre in five commonly-spoken languages informing detainees how to access health services and other translated health information. The posters, which had been produced in consultation with detainees, were displayed in reception, communal waiting areas and the healthcare unit.
- New detainees received a 'Welcome to Healthcare' leaflet which provided an overview of health services available, produced in five commonly-spoken languages. This leaflet was also available in the reception area and the healthcare unit.
- A 'Frequently Asked Questions' document based on detainee feedback gathered at a regular patient forum was available in 18 languages.
- Complaints guidance and detainee feedback forms were available in five commonly-spoken languages in the healthcare waiting area.
- Detainees could access a wide range of translated health promotion information in the healthcare waiting area. This included information around long-term health conditions, sexual health and cancer.
- Female detainees living on a separate residential unit could access health promotion information in 15 languages.
- The mental health team were developing translated written material to support detainees with lower-level mental health needs including sleep hygiene and anxiety.
- Staff told us they could have material for detainees translated into a further 56 languages on request to the trust.

# Are services well-led?

## Governance arrangements

At our last inspection, we found that supervision arrangements were limited, inconsistently applied and were not reviewed as part of CNWL's overall governance systems and processes. Some staff had not attended supervision sessions for a number of months, others did not access regular supervision sessions in line with the trust's policy, and supervision records were not consistently maintained.

During this focused inspection, we found that the provision and monitoring of formal staff supervision had improved:

- Access to regular supervision had improved, supported by clearer line management responsibilities. Compliance with individual managerial supervision across healthcare teams was around 80% in the year to date. This had dropped to 57% in October 2019 owing to staff sickness and leave but had improved again at the time of our inspection.
- Weekly clinical supervision group sessions provided by a trust senior manager were embedded and attended at least monthly by all primary care staff, including bank and agency staff. These sessions focused on areas such as incident learning and attendance at inquests.
- All mental health staff accessed a monthly reflective practice group session facilitated by an independent practitioner.
- The provider had improved the systems to monitor supervision compliance. Compliance rates were regularly monitored by service managers and reviewed monthly at local and provider level meetings. Compliance rates were also published on a local staff noticeboard to promote transparency.
- Most staff gave us positive feedback around the support that they received from service managers and access to supervision. Staff told us that managers were more visible and more regular staff meetings provided additional support, including the opportunity to raise concerns.