

The Priory Hospital Bristol





Quality Report

Heath House Lane
Stapleton
Bristol
BS16 1EQ
Tel: 0117 952 5255
Website: www.priorygroup.com

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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Ratings

Overall rating for this location	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Mental Health Act responsibilities and Mental Capacity Act and Deprivation of Liberty Safeguards

We include our assessment of the provider's compliance with the Mental Capacity Act and, where relevant, Mental Health Act in our overall inspection of the service.

We do not give a rating for Mental Capacity Act or Mental Health Act, however we do use our findings to determine the overall rating for the service.

Further information about findings in relation to the Mental Capacity Act and Mental Health Act can be found later in this report.

Summary of findings

Overall summary

At the comprehensive inspection of The Priory Hospital Bristol on the 18 – 21 April 2016 we rated the service as 'good' overall. During comprehensive inspections we always ask the following key questions; are services safe, effective, caring, responsive and well-led. We rated the key questions, are services effective, caring, responsive and well led as good.

However, we rated 'safe' as 'requires improvement', because of the poor management of ligature point (a ligature point is anything that a person could use to attach a cord, rope or other material for the purpose of hanging or strangulation) risks on Lower court and Upper Court wards; the fire doors on Lower Court weren't alarmed so could be used by patients to easily abscond and there was inadequate cleaning in bathrooms and of mats used to cushion patient falls from bed in Garden View ward.

Following the inspection we served a warning notice against Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014 – safe care and treatment which required the hospital to:

- Ensure the appropriate management of ligature risks, including having adequate governance processes and systems in place that identify ligature points and risks.
- Ensure that fire doors were adequately controlled to manage patients absconding from the ward.

We also served a requirement notice that required the hospital to:

- Ensure all areas of the ward follow appropriate infection control procedures.

On the 16 May 2016 the hospital sent us an action plan that detailed how it would meet the warning notice and requirement notice. This action plan included reviewing the ligature audits of the wards to ensure that all ligature points were noted and risks mitigated. It identified the changes the hospital would make to the environment to reduce the ligature risks, and it identified that it would introduce an audit tool to look at any blind spots on the wards (places that could not easily be observed by staff where patients may harm themselves or others). The plan also included stated that the hospital would review the systems around the fire doors to ensure they opened

when the fire alarm was triggered, to help reduce the risk of people who were detained under the Mental Health Act from leaving the ward without an escort. The hospital also said it would review the facilities on Garden View and make changes to allow proper cleaning.

On 4 May 2017 we undertook an unannounced, focussed inspection to check that the hospital had addressed all of the concerns identified in the warning notice and requirement notice. Since our last inspection (April 2016) we have received no information that would cause us to re-inspect other aspects of the key question, are services safe.

We found that multiple changes to the environment had been made, including the removal of ligature points and changes to reduce the likelihood of patients tying a ligature. For example, they had mitigated the risks by putting boxes around items such as extractor fans and fire alarms. The hospital had re-furnished the rooms on Upper Court to provide purpose built furniture to reduce the chance of a patient tying a ligature; it had replaced the doors of ensuite bathroom across Brunel, Redcliffe and Upper Court to reduce the risk of ligatures. In addition, bedroom doors on these wards had been replaced to ensure that patients could not barricade themselves in their room. Mirrors had also been installed to reduce blind spots (places on the ward not easily visible by staff on the ward).

The hospital had taken steps to address the poor infection control procedures on Garden view. The mats used to minimise injury to patients who were at risk of falling out of bed were clean and well maintained. Night staff had responsibility for cleaning these and the cleaning rotas recorded staff had cleaned the mats. The hoists in the communal bathroom had been repaired and the damaged area near the sink in the communal bathroom had been repaired, allowing it to be easily cleaned.

As a result of the improvements made by the hospital, we judged that it had met the requirements of both the warning notice and requirement notice. As such we lifted the warning notice and requirement notice and rated the safe as 'good'.

Summary of findings

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Good



The Priory Hospital Bristol

Services we looked at

Acute wards for adults of working age and psychiatric intensive care units

Summary of this inspection

Background to The Priory Hospital Bristol

The Priory Hospital Bristol is an independent hospital registered to provide care and treatment for up to 71 adults with mental health conditions. The hospital admits patients detained under the Mental Health Act and is split into two main care areas: i. long stay/rehabilitation wards and ii. acute mental health inpatient units, which also includes the eating disorder service. The hospital also provided a range of outpatient based therapy services.

Long stay/rehabilitation services for working age adults are delivered from:

Garden View: a 10 bed female ward for people with complex mental health care needs that would accept referrals for adult females of any age.

Hillside: a nine bed mixed gender ward for people who required mental health rehabilitative care.

Oak Lodge: a 10-bed male ward for people with dementia. This ward would accept admissions for men of working age as well as older people if the patient was appropriate for the care environment.

The acute mental health inpatient services are delivered from:

Brunel ward: an 11 bed acute ward for men and women, who required care and treatment for mental health issues.

Redcliffe ward: a 13 bed acute ward for men and women, who required care and treatment for mental health issues. Both Brunel and Redcliffe wards are primarily for National Health Service (NHS) patients.

Upper Court: an eight bed acute ward for men and women who required care and treatment for mental health issues that could have been complicated by alcohol or drug use. Upper Court is primarily reserved for private paying patients.

The eating disorder service is delivered from :

Lotus ward: a 10-bed ward for men and women who required treatment for eating disorders.

The hospital is registered to provide the following regulated activities:

- Diagnostic and screening procedures
- Assessment or medical treatment for persons detained under the Mental Health Act 1983
- Treatment of disease, disorder or injury

Accommodation for persons who require treatment for substance misuse

Our inspection team

Team leader: Luke Allinson, CQC inspector

The team that inspected the service comprised a CQC inspector and a CQC inspection manager.

Why we carried out this inspection

We undertook this inspection to find out whether The Priory Hospital Bristol had made the improvements required and detailed in both the warning notice and requirement notice that we service at the comprehensive inspection in April 2016.

The warning notice and requirement notice identified breaches against Regulation 12 (safe care and treatment) of the Health and Social Care Act (Regulated Activities) Regulations 2014.

Summary of this inspection

How we carried out this inspection

Prior to this inspection we reviewed the action plan the service had submitted. We also reviewed information submitted to us by the service as well as members of the public.

During the inspection visit, the inspection team:

- visited four of the seven wards and looked at the ward environment.
- spoke with the hospital director.
- looked at a range of policies, procedures and other documents relating to the running of the service.

Summary of this inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

Following this inspection on 4 May 2017 we have now rated safe as good. The hospital had made the improvements required in the warning notice and requirement notice that we served after the inspection on the 18-21 April 2016.

The hospital had:

- Introduced a new policy on how to identify and mitigate areas of the wards that had limited visibility (blind spots) as well as ligature points (a ligature point is anything that a person could use to attach a cord, rope or other material for the purpose of hanging or strangulation). This included an audit tool to help staff ensure they followed the policy.
- Undertaken maintenance work, such as replacing bathroom doors and other furnishings in patient rooms as well as replacing furnishings in the communal areas of the ward to reduce the risk of people using them as points to fix a cord or such device to use for strangulation or hanging. Mirrors had also been put in place to ensure better visibility for staff and patients on the ward.
- Reviewed the systems around the fire doors to ensure that they opened when an alarm sounds and reduce the chance of detained patients absconding from the site.
- Made appropriate changes to facilities on Garden View so they could be properly cleaned to control the risk of infection.

Good



Are services effective?

At the last inspection on 18-21 April 2016 we rated effective as good. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Are services caring?

At the last inspection on 18-21 April 2016 we rated caring as good. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Are services responsive?

At the last inspection on 18-21 April 2016 we rated responsive as good. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Summary of this inspection

Are services well-led?

At the last inspection on 18-21 April 2016 we rated well-led as good. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Detailed findings from this inspection






Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Acute wards for adults of working age and psychiatric intensive care units	Good	Good	Good	Good	Good	Good
Overall	Good	Good	Good	Good	Good	Good

Acute wards for adults of working age and psychiatric intensive care units

Good 

Safe	Good 
Effective	Good 
Caring	Good 
Responsive	Good 
Well-led	Good 

Are acute wards for adults of working age and psychiatric intensive care unit services safe?

Good 

Following this inspection on 4 May 2017 we have rated safe as **good**. The service had made the improvements required that were detailed in the requirement notice that we served on the 18-21 April 2016.

Are acute wards for adults of working age and psychiatric intensive care unit services caring?

Good 

At the last inspection in April 2016 we rated caring as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Are acute wards for adults of working age and psychiatric intensive care unit services effective? (for example, treatment is effective)

Good 

At the last inspection in April 2016 we rated effective as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Are acute wards for adults of working age and psychiatric intensive care unit services responsive to people's needs? (for example, to feedback?)

Good 

At the last inspection in April 2016 we rated responsive as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Acute wards for adults of working age and psychiatric intensive care units

Good 

Are acute wards for adults of working age and psychiatric intensive care unit services well-led?

Good 

At the last inspection in April 2016 we rated well-led as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.