

Young Offenders Institute HM YOI Wetherby.

Leeds Community Healthcare NHS Trust

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Date of inspection visit: 12 March to 15 March 2018 Date of publication: 21/05/2018

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 in the week commencing 12 March 2018, as part of a joint inspection in partnership with Her Majesty's Inspectorate of Prisons (HMIP). This focused inspection was carried out to follow up on concerns raised during a previous inspection in March 2017 following which we issued a Requirement Notice. This report covers only those aspects detailed in the Requirement Notice dated 7 April 2017. We do not currently rate services provided in prisons.

CQC and HMIP undertake joint inspections under a memorandum of understanding. Further information on this and the joint methodology can be found by accessing the following website:

http://www.cqc.org.uk/content/ health-and-care-criminal-justice-system

CQC inspect under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

CQC inspected healthcare services at the prison in partnership with HMIP in March 2017. This report can be found by accessing the following website:

https://www.justiceinspectorates.gov.uk/.../inspections/ hmyoi-wetherby-and-keppel

During the 2017 inspection we found the provider Leeds Community Healthcare NHS Trust, was in breach of Regulation 16, Health and Social Care Act (RA) Regulations 2014. We identified that the provider did not operate an effective and accessible system for identifying, receiving, recording, handling and responding to complaints and as a result we issued a Requirement Notice on 7 April 2017.

We asked the provider to make improvements and followed up on their progress during a focused inspection in the week commencing 12 March 2018. We also reviewed the provider's action plan outlining how they intended to make the improvements required.

During this focused inspection, we found the provider had made improvements and taken the necessary action to comply with the regulation.

Our findings were:

Are services safe?

We did not inspect the safe domain at this focused inspection.

Are services effective?

We did not inspect the effective domain at this focused inspection.

Are services caring?

We did not inspect the caring domain at this focused inspection.

Are services responsive?

We did not inspect the responsive domain in full at this inspection. We inspected only those aspects detailed in the Requirement Notice issued 7 April 2017, as a result of the joint inspection in March 2017.

- We found that the trust had taken positive action to improve their complaints procedure.
- The trust was operating an effective, accessible complaints process that was clearly displayed around the establishment.
- Patient confidentiality was respected and records stored securely.
- Responses to concerns and complaints were managed in accordance with the trust's complaints policy by the head of healthcare and the trust's Patient Experience Team.
- Trends were monitored and any lessons learnt shared with staff to improve the service provided.

Are services well-led?

We did not inspect the well-led domain at this focused inspection.

Our inspection team

Our Inspection Team:

This focused inspection was completed by two CQC Health and Justice Inspectors.

Background to Young Offenders Institute HM YOI Wetherby

Background to HMYOI Wetherby.

HMYOI Wetherby is a closed youth custody centre housing up to 250 male juvenile offenders between the ages of 15 to 18. All accommodation is single cell occupancy consisting of four wings and a specialist unit called Keppel. Keppel unit is an enhanced needs unit holding up to 48 young people. This is a national resource and looks after young people who find it difficult to manage in normal accommodation due to issues including learning, physical and mental health issues. Leeds Community Healthcare NHS Trust provides a community style, general health service to the prison.

The location is currently registered to provide two regulated activities,

Diagnostic and screening procedures and treatment of disease, disorder or injury.

How we carried out this inspection:

We reviewed the action plan submitted by the provider in response to the Requirement Notice issued on 7 April 2017 and other information received such as from the service commissioners. Before our inspection we reviewed a range of information that we held about the service. We asked the provider to share with us additional information which we reviewed as part of the inspection. During the inspection we spoke with the head of healthcare, GPs, various members of the healthcare staff, and young people.

Evidence reviewed included:

- An updated action plan from the trust.
- The trust's complaints recording and handling system.
- The trust's compliments, concerns and complaints policy.
- A quarterly report by the Patient Involvement and Health Promotion Lead outlining progress made in response to young people's feedback on the service.
- Literature and information available to young people about the complaints procedure.
- Observation of the health care talk delivered to young people during induction, informing them of the complaints procedure.

Are services safe?

We did not inspect the safe domain at this inspection.

Are services effective?

We did not inspect the effective domain at this inspection.

Are services caring?

We did not inspect the caring domain at this inspection.

Are services responsive to people's needs?

At our previous joint inspection with HMIP in March 2017, we found the trust did not operate an effective and accessible system for identifying, receiving, recording, handling and responding to complaints. Complaints specific to healthcare were received through the main prison complaints system. This meant that a young person's details and the reason for their complaint, were not kept private and confidential and the process was used infrequently by young people making healthcare complaints.

We also found that complaints were mostly reported verbally by young people to the healthcare team. Information displayed in healthcare advised them to speak to a member of staff if they had a concern or complaint, however these verbal complaints were not logged in order to identify and address trends or themes. This meant the complaints system was not effective in ensuring that complainants received appropriate responses, or that proportionate action was taken in response to complaints.

Following our joint inspection with HMIP in March 2017 the provider had reviewed its complaints process and had taken positive action to improve how complaints were recorded and handled. We found the complaints process was advertised widely throughout the prison. A new leaflet entitled "Healthcare is listening" informed young people how they could raise questions, concerns or complaints regarding their experience by completing forms which were widely available on the wings and in the healthcare waiting and treatment rooms.

Posters advertising the leaflets were on display in all areas of the prison. These had been devised by a graphic designer with input from prison and education staff to ensure information was easy to read and clear for young people. During the implementation of the new process staff working with young people

were informed so they could signpost the service during contact meetings with young people. In addition each young person had the new leaflet posted into their cell to ensure each had received the information.

Awareness of the new system was raised with each young person seen by the healthcare team during their reception to the prison where they were provided with a leaflet. Young people were also informed of the complaints procedure in their induction programme during a healthcare talk from the patient involvement and health promotion lead. We observed the process explained in detail and a copy of the leaflet and an information pack provided.

Awareness of the system appeared to be good amongst the young people we spoke to during our inspection visit and most could tell us where to find the leaflets if they wanted to raise a concern or make a complaint. Prison staff we spoke to were also well informed of the healthcare complaints procedure and how to direct young people where to find the relevant form.

At our previous inspection we had identified that some verbal complaints made to healthcare staff were not being documented. At this inspection we spoke to several staff and asked them how they would now respond if a young person approached them with a concern. All staff we spoke to told us they would tell the young person to complete the 'Healthcare is listening' form but would also ask if they required any assistance to complete it.

In line with the trust's compliments, concerns and complaints policy, any concern received from a young person that could not be resolved to their satisfaction would them become a complaint. The head of healthcare provided us with a flow chart which clearly outlined the procedures to be followed.

When a concern was received, a member of the healthcare team would visit the young person within 24 hours to discuss their comments further. A written response, or verbal feedback, was provided to the young person following conclusion of the initial investigation. At this point if the young person was not satisfied with the response given they were supported to escalate their concern to a formal complaint. Any complaints would then be overseen by the trusts' Patient Experience Team with a response provided to the young person within 28 days.

Since March 2017 there had been nine concerns received, all of which had been managed within the trust's policy guidelines. We identified one that still required further investigation regarding a request to see a member of the healthcare team; however the head of healthcare was addressing this during our inspection visit. Complaints received via the prison complaint system had reduced since the implementation of the new system. All information was stored securely, and confidentiality about the young person and their concern maintained.

Are services responsive to people's needs?

All recorded concerns were monitored by the head of healthcare to ensure appropriate actions were taken to address the young person's concern and the outcome of the investigation recorded. Concerns and complaints were monitored to identify trends or themes and any lessons learnt discussed at staff meetings and individual supervision sessions.

In addition, to further gather service users' comments about the care they received, the patient involvement and health promotion lead regularly sampled young people by way of a 'Friends and family' form. This used pictorial images to assist users in expressing their views about the service provided. Some comments had been made about the length of waiting times to see healthcare professionals. To address this, the trust displayed information in the healthcare waiting area, advising young people on current waiting times and how this compared with the service provided in the community. Further information was also provided on how the trust was addressing the "Did not attend rate" to healthcare appointments which impacted on waiting times. This was being addressed in partnership with prison staff, and a trial was underway to award a merit (a reward for good behaviour) to young people when they attended their healthcare appointment. This information was also provided to young people in the trust's healthcare newsletter.

Are services well-led?

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