Care Quality Commission

Birmingham and Solihull Mental Health NHS Foundation Trust

HMP Prison Winson Green

Inspection Report

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Overall summary

We carried out this announced inspection on 28 February 2018 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Our inspection team was led by a CQC health and justice inspector, accompanied by a second CQC health and justice inspector.

The purpose of the inspection was to follow up on a Requirement Notice that we issued following a joint inspection with Her Majesty's Inspectorate of Prisons in February 2017 and to check that the provider was meeting the legal requirements and regulations associated with the Act.

This focused inspection report covers our findings in relations to those aspects detailed in the Requirement Notice dated 4 July 2017. We issued one Requirement Notices under Regulations 12 of the Health and Social Care Act to the trust.

We do not currently rate services provided in prisons.

Summary of findings

The five questions we ask about services 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 Notice issued on 4 July 2017.

- Since our last inspection we found the provider had taken sufficient measures to ensure that appropriate levels of observations were completed for prisoners undergoing withdrawal from substances and/or alcohol during the first five days in prison.

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 at this inspection.

Are services well-led?
We did not inspect the well-led key question in full at this inspection.

- Monitoring arrangements provided some oversight of clinic waiting times, but ongoing action was needed to ensure that prisoners had timely access to healthcare services.

HMP Prison Winson Green

Detailed findings

Background to this inspection

HMP Birmingham is a category B local prison in the Winson Green area of Birmingham and accommodates up to 1,450 adult male prisoners. The prison is operated by G4S Custodial Services and is characterised by a very high throughput, with around 500 new prisoners each month and an average stay of only six weeks.

Birmingham and Solihull Mental Health NHS Foundation Trust are the lead healthcare provider at the prison and are registered to provide the regulated activities, Diagnostic and screening and Treatment of disease, disorder or injury. The trust subcontracts healthcare services and dental services to another registered provider.

CQC inspected healthcare services at the prison in partnership with Her Majesty's Inspectorate of Prisons in February 2017. We found Birmingham and Solihull Mental Health NHS Foundation Trust was in breach of the regulations and we issued a Requirement Notice. We asked the provider to make improvements and we followed up on their progress during a focused inspection on 28 February 2018.

During this focused inspection, we found the provider had made improvements in previously identified areas of concern since the joint inspection in February 2017.

Our key findings were as follows:

- Since our last inspection we found the provider had taken sufficient measures to ensure that appropriate levels of observations were completed for prisoners undergoing withdrawal from substances and/or alcohol during the first five days in prison.

The areas where the provider should make improvements are:

- The provider should continue to work with partners to address ongoing issues with regard to waiting times for well man clinics and dental treatment.

Before our inspection we reviewed a range of information that we held about the service. During the inspection we asked the provider to share with us a range of information which we reviewed. We spoke with healthcare staff, prison staff, people who use the service and sampled a range of records.

Evidence reviewed included:

- We spoke with commissioners from NHS England
- We spoke with operational prison staff and the prison director.
- NHS England Health and Justice Clinical Quality Visit HMP Birmingham – 20 September 2018

Following our inspection the trust provided further evidence, including;

- Action Plan to Address Concerns regarding Wellman
- Incidents reported at HMP Birmingham that capture when the well-man clinic was not facilitated
- Risk assessment for carrying medicines
- Information on the use of security seals
- Primary Care – Transportation of Controlled Drugs between wings.
- Draft procedure for controlled drugs procedure

Are services safe?

Our findings

At our previous inspection in February 2017 we were concerned that the care and treatment provided to newly arrived prisoners with substance dependency issues and those at risk of alcohol withdrawal did not always protect their safety and welfare.

Of particular concern was that observations of these prisoners in the first five days in prison did not consistently take place across all wings. Records of both daytime and nigh time observations for the first five days in custody were not kept.

We observed that some cell doors did not allow easy observation and communication with a prisoner who was being observed. This was due to the poor quality of the observation panels fitted to cell doors. We were concerned that if such observations could not be facilitated to sufficiently assure the prisoner's wellbeing then nursing staff may need to consider rousing the prisoner.

Monitoring risks to patients

- At our previous inspection in February 2017 we reported that whilst nursing staff assured us that they were undertaking appropriate observations of prisoners withdrawing from drugs and alcohol, records of such observations were not kept. Observations of prisoners in the first five days in custody who are withdrawing from substances including alcohol are intended to identify early signs of any significant withdrawal that may require additional clinical interventions, including over-sedation, which may relate to prescribed medication or taking additional medications/illicit drugs on top of those prescribed.
- At the time of this focused inspection in February 2018 we found that prisoners who were withdrawing from substances, including alcohol were first identified when they arrived at the prison when a comprehensive and detailed healthcare reception screen was completed. This was a new development following the joint inspection in February 2017. If a prisoner was identified as withdrawing from substances, including alcohol, their location within the prison was carefully considered and a log of five day observations, for day and night time, was immediately put into the prisoner's patient record. We saw examples of completed records which confirmed observations were undertaken both daytime and night time by nursing staff. This meant that sufficient measures were now in place to ensure that an appropriate level of observations was completed thus ensuring that prisoners received safe and appropriate care during this crucial period of their care.
- At our previous inspection we reported that prisoners who required observations were located on the first night centre, (D wing) prior to moving to the stabilisation unit (B wing). We observed that cells doors in this area did not have hatches that enabled prisoners to be observed effectively. The majority of cells doors within the prison had a had a hard plastic panel fitted that did not open fully. Many of the panels were damaged which impaired the quality of observations that could be made.
- At our focused inspection in February 2018, we observed that whilst there had been no changes to observation panels and there were no plans to change cell doors or observation panels, the trust had put measures in place to increase patient safety, including rousing a prisoner. If a nurse had concerns about a prisoner, or they did not get a response from them to sufficiently assure them they were well nurses could request that officers open a cell door in order for them make a full assessment of the prisoner. Nurses could request this to happen any time of the day. If nurses were not satisfied they could safely observe a prisoner in their cell and if the risk was considered to be too high, nurses had the option to transfer the prisoner to a 24 hour healthcare ward.

Are services effective?

(for example, treatment is effective)

Our findings

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

Are services caring?

Our findings

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

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

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

Are services well-led?

Our findings

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

Governance arrangements

- Birmingham and Solihull Mental Health NHS Foundation Trust is commissioned by NHS England to provide healthcare services within HMP Birmingham. The trust subcontracts primary healthcare services and dental services to another registered provider, however they retain overall responsibility for the quality of and the governance of the services provided.
- During our inspection we found there were 393 prisoners waiting to have a secondary health assessment since their admission to the prison. An initial health assessment was completed when a prisoner was brought to the prison and a more detailed and comprehensive health assessment was completed within a week of their arrival. We were concerned there was a risk that unidentified health care concerns may not be picked up at the reception screen stage and not followed up at a secondary assessment, leaving patients untreated and unsupported. Good quality health care assessments are crucial in the first few days in custody and assist in identifying health care needs.
- We asked the trust to review the list of prisoners waiting for a health assessment and to provide evidence of how they intended to manage the high demand. Following the inspection the trust confirmed what measures they intended to take to ensure prisoners received a second health assessment. On the 8 March 2018 we were told that the number of prisoners waiting for a second health assessment had reduced to 149. We were unable to assess the effectiveness and sustainability of the actions the trust took in response to our concerns as they were yet to be implemented.
- We reviewed the dental waiting list and found that 266 prisoners were waiting to see a dentist, the longest wait being 22 weeks. Dental waiting lists were reviewed weekly by dental staff and shared with the trust. We were concerned that patients did not have timely access to dental treatment particularly urgent care. The ongoing risk being that if patients are left in pain their oral health would continue to deteriorate. We asked the trust to review the list of patients waiting for an emergency dental appointment. Following our inspection the trust told us all patients requiring an emergency dental appointment had been seen. We asked the trust to provide evidence of how they intended to manage the high demand for dental services. The trust provided an action plan detailing how this would be managed. However we were unable to assess the effectiveness of the actions the trust proposed to take in response to our concerns as they were yet to be implemented.
- Following our inspection the trust provided additional evidence with demonstrated that monitoring arrangements were in place, along with an action plan of how they intended to improve access to services for prisoners. Despite these reassurances further work was needed to engage with stakeholders and prison partners to address delays in prisoners accessing care and treatment.