HMP Frankland

Inspection report

Brasside
Durham
DH1 5YD
Tel: 01913765126

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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.

Ratings

Overall rating for this location	Inspected but not rated
Are services responsive to people's needs?	**Inspected but not rated**
Are services well-led?	**Inspected but not rated**

Overall summary

We carried out an announced focused desk top inspection of healthcare services provided by Spectrum Community Interest Company at HMP Frankland on 23 November 2022.

Following our last joint inspection with HM Inspectorate of Prisons (HMIP) in January 2020, we found that the quality of healthcare provided by Spectrum at this location required improvement. We issued a Requirement Notice in relation to Regulation 16, Receiving and Acting on Complaints, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The purpose of this focused desk top inspection was to determine if the healthcare services provided were meeting the legal requirements of the Requirement Notice that we issued in May 2020.

At this inspection we found that some improvements had been made, however the provider continued to be in breach of Regulation 16, Receiving and Acting on Complaints.

We do not currently rate services provided in prisons.

At this inspection we found:

- Complaints were not responded to in line with the providers complaints policy
- Informal complaint numbers were high
- Repeat complaints resulted from the lack of an initial response to patients
- Quality of responses and investigations did not always reflect the nature of the complaint or indicate if it had been upheld or not
- Staff had not received training in responding to complaints
- Systems and processes were not effective in monitoring and managing responses to complaints

However;

- Most complaints reviewed included an apology and clear information on how patients could escalate their concerns.

The areas where the provider must make improvements as they are in breach of regulations are:

Managers must establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users.

Our inspection team

One CQC health and justice inspector completed this inspection.

Before this inspection we reviewed a range of information provided by the service including complaints data, policies and procedures and management information.

During the inspection we asked the provider to share further information with us. We spoke with several healthcare staff; including managers and staff from the complaints and quality team. We also sampled a range of complaint records and responses.

Background to HMP Frankland

HMP Frankland, near Durham, is a Category A high security prison, accommodating approximately 840 adult men. The prison is operated by HM Prison and Probation Service.

Spectrum is the health provider at HMP Frankland. The provider is registered with the 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 January 2020. The joint inspection report can be found at: https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2020/05/Frankland-web-2020.pdf

Inspected but not rated

Are services responsive to people's needs?

Listening to and learning from concerns and complaints

Patients had access to a dedicated healthcare complaints system; however, this did not operate effectively. The service did not always investigate and respond to complaints quickly enough. The quality of responses to patient complaints was variable.

At this inspection we found the service had an established system for recording and responding to complaints. However, this did not operate effectively; as staff did not always keep the database up to date with the progress of complaints or resolution dates. For example, of the 45 recorded formal complaints, 15 of these had no recorded outcome or progress note.

Informal complaint numbers were high, between 01 November 2021 and 31 October 2022; Spectrum received 520 informal complaints from patients, an average of 43 per month. The majority of all complaints (76%) received by Spectrum related to access to medicines or treatment and 17% related to communication.

Of these, 188 were not responded to within the expected timeframes detailed within Spectrums' complaints policy. For example, one complaint made in May 2022 remained unresolved until October 2022. An initial lack of response from Spectrum has resulted in repeated complaints from patients, of the 45 current formal complaints received between January 2022 and October 2022, 20 were repeat complaints from five different patients.

During this inspection we reviewed a number of complaints, we found some were not investigated adequately or responded to appropriately. For example, some were poorly written and did not always address the nature of the complaint. Comments such as 'I hope this has now been resolved,' 'Can I please remind you that, repeat medication is not automatically renewed, this must be ordered by yourself' and one patient was advised to contact the local hospital directly for medical test results. Responses did not always indicate if the complaint had been upheld or not.

Responses demonstrated that not all staff had the appropriate skills and knowledge of current national guidance in order to appropriately investigate and manage complaints. Most staff had not received relevant training to support them in their role to manage and respond to complaints. This deficit has been recognised by Spectrum and training on the early resolution of complaints is scheduled for the end of November 2022.This is to be complemented by additional training which is to be delivered as part of the national pilot programme by the Parliamentary and Health Service Ombudsman (PHSO).

There was minimal quality assurance of the complaints process. Managers had started to scrutinise complaints data more closely to inform learning and service development; however; this was in its infancy.

However, most complaints we reviewed included an apology and clear information on how patients could escalate their concerns; either formally to Spectrum or externally to the PHSO.

Inspected but not rated

Are services well-led?

Good Governance

Governance processes did not operate effectively at team level and were not sufficiently optimised to progress issues relating to complaints and service improvements.

Spectrum had an established framework of regular governance meetings; these include site specific meetings at HMP Frankland, regional and organisation wide meetings. Key meetings such as medicines management, the local delivery board and integrated clinical governance board all included discussion of complaints data. However, Spectrum have been slow to respond to the requirement notice issued in May 2020 in relation to complaints. In September 2022 Spectrum approved the appointment of an interim complaints manager, added complaints to the risk register and produced a service improvement plan in November 2022.

The service had an interim complaints manager in post, and we identified some initial signs of improvement. For example, a weekly review meeting had been established to review all open formal complaints and track progress. Complaints submitted in May and June 2022 remained unresolved or awaiting sign off by managers.

The high numbers of complaints and minimal analysis of themes and trends, limited how managers identified patient safety concerns, gaps in service provision and opportunities for service improvement. However, managers had recently established an overarching service improvement plan; which provided clear actions on how to strengthen the complaints process and incorporate the PHSO complaints standards framework.

It is encouraging that managers had taken steps more recently to address the required improvements relating to complaints. Managers were clear there was a need to understand the challenges faced on site at HMP Frankland in relation to the complexity of complaints generated in a Category A prison and the promotion of early resolution. Early indications were positive with a more co-ordinated approach but systems and processes, alongside staff training and support needed further development and embedding into practice.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Treatment of disease, disorder or injury Diagnostic and screening procedures	Regulation 16 HSCA (RA) Regulations 2014 Receiving and acting on complaints The registered person had failed to establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of the regulated activity. In particular: • Informal complaint numbers were high, between November 2021 and October 2022; 520 complaints had been received. • Complaints were not responded to in a timely way. Between January 2022 and October 2022, 34 out of 45 formal complaints had not been responded to within the required 45 days. • Some complaints were not investigated thoroughly or responded to appropriately. Not all responses indicated if the complaint had been upheld. • Responses demonstrated that not all staff had the appropriate skills and knowledge of current guidance in order to appropriately investigate and manage complaints. • Systems and processes were not effective in monitoring and managing responses to complaints. • Managers had not analysed data sufficiently to identify patient safety concerns, gaps in service provision and opportunities for service improvement.