One Navigation Walk

Inspection report

1 Navigation Walk
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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 summary

We carried out an announced focused inspection of healthcare services provided by Spectrum Community Health CIC (Spectrum) at HMP and YOI Low Newton on 26 February 2019.

Following our last joint inspection with Her Majesty's Inspectorate of Prisons (HMIP) in February 2018, we found that the quality of healthcare provided by Spectrum at this location did not meet regulations. We issued one Requirement Notice in relation to Regulation 12, Safe Care and Treatment, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The purpose of this inspection was to determine if the healthcare services provided by Spectrum were now meeting the legal requirements and regulations under Section 60 of the Health and Social Care Act 2008 and that patients were receiving safe care and treatment.

We do not currently rate services provided in prisons.

At this focused inspection we found:

- The provider had worked effectively with other health providers to ensure that medicines were prescribed and administered safely.
- The provider had made improvements to the management of medicines including ensuring patients were appropriately risk assessed when prescribed medicines.
- Prescribers clearly recorded risk assessments in patient records when they were prescribing medicines.
- Managers conducted audits of patient records to ensure that policies and procedures were being followed.

Our inspection team

This focused inspection was carried out by two CQC health and justice inspectors.

Before this inspection we reviewed the action plan submitted by Spectrum to demonstrate how they would achieve compliance. We also spoke with NHS England commissioners prior to the inspection. Evidence we reviewed included:

- Operating procedures, policies and audits relating to the use of medicines.
- Minutes of partnership meetings to improve the safety for patients who were issued medicines in possession.

During the inspection, we spoke with clinical managers, a GP and pharmacy staff as well as three patients. We also reviewed patient clinical records.

Background to One Navigation Walk

HMP YOI Low Newton is a female closed prison, located in Durham. At the time of our inspection the population was around 320 prisoners, including a mix of adults and young women aged 18-21.

Health care services at HMP YOI Low Newton are commissioned by NHS England. The contract for the provision of GP and pharmacy services is held by Spectrum. Spectrum is registered with CQC to provide the regulated activities of Diagnostic and Screening procedures, Treatment of disease, disorder or injury (family planning?) .

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

https://www.justiceinspectorates.gov.uk/hmiprisons/inspections/hmp-yoi-low-newton-2/

Are services safe?

We did not inspect this key question in full during this focused inspection. We reviewed areas identified in the Requirement Notice issued to Spectrum on 6 June 2018 and areas where we previously made further recommendations for improvements.

Appropriate and safe use of medicines

At our last inspection we found that:

- The provider was not working effectively with other providers around safe prescribing and administration of medicines to patients.
- Assessments of the risks to the health and safety of service users of receiving care or treatment were not carried out consistently.

During this inspection we found that the provider had improved the safety of care provided for patients:

Where patients were prescribed medicines, an appropriate risk assessment was carried out, a medicines in-possession risk assessment. This ensured that patients who might be placed at risk if they were allowed to manage their own medicines were identified and appropriately supported.

- The provider had worked with other healthcare providers to provide additional training for prescribers in the completion of individual medicines in-possession risk assessments.
- Managers worked closely with other healthcare providers to review and improve the medicines administration process. This included holding a workshop on prescribing, completing in-possession risk assessments and administering medicines to identify and address issues with the joint working over medicines safety.
- Managers carried out audits of patient records to demonstrate improvement. Audits were not carried out jointly between providers which was an opportunity to further improve this monitoring.

We checked a sample of 30 patient records and found that patients who had recently arrived at the prison all had completed risk assessments, and any changes to this were clearly documented by GPs when prescribing new medicines.