

HMP Channings Wood

Inspection report

Channings Wood
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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.

Overall summary

We carried out an announced focused inspection of healthcare services provided by Care UK Health and Rehabilitation Services Limited (Care UK) at HMP Channings Wood from 1 to 3 July 2019. This was carried out alongside a visit from Her Majesty's Inspectorate of Prisons (HMIP) to follow up progress on previous inspection recommendations.

Following our last joint inspection with Her Majesty's Inspectorate of Prisons (HMIP) in September 2018, we found that the quality of healthcare provided by Care UK at this location required improvement. We issued Requirement Notices in relation to Regulation 9 (Person-centred care), Regulation 12 (Safe care and treatment), Regulation 17 (Good governance) and Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The purpose of the focused inspection was to determine if the healthcare services provided by Care UK were meeting the legal requirements of the above regulations, under Section 60 of the Health and Social Care Act 2008.

At this inspection we found that improvements had been made and the provider was no longer in breach of the regulations.

We do not currently rate services provided in prisons.

At this inspection we found:

- Prisoners with social care needs received appropriate support in accordance with their care plans.
- All prisoners were given the opportunity to receive a secondary health screening.
- Translation services were available during the reception screening process.
- Patients very rarely experienced delays in receiving their prescribed medicines.
- Patients received appropriate prescribed medicines on release and transfer.
- Robust governance systems enabled effective monitoring of the quality of service delivery.
- Staff felt supported. A new system had been implemented to encourage better documentation to evidence when supervision had taken place.

The areas where the provider **should** make improvements are:

Ensure that all patients with a diagnosed long-term condition have personalised care plans in place.

Our inspection team

Our inspection was conducted by one CQC health and justice inspector and one health and social care inspector from HMIP.

Before this inspection we reviewed a range of information that we held. This included action plans, audits and quality assurance documents we had received from the provider in response to the Requirement Notices issued in September 2018.

During the inspection we asked the provider to share further information with us. We spoke with healthcare staff, prison staff, commissioners, people who used the service, and sampled a range of records.

Background to HMP Channings Wood

HMP Channings Wood is a Category C training and resettlement prison in Devon which houses prisoners serving a wide range of sentence lengths, predominantly transferred from prisons across the South West. It has an operational capacity of 724.

Care UK is the main health provider at HMP Channings Wood. Care UK is registered with the CQC to provide the following regulated activities at the location: Treatment of disease, disorder or injury, Diagnostic and screening procedures, and Personal care.

Our last joint inspection with HMIP was in September 2018. The joint inspection report can be found at: <https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2019/02/Channings-Wood-Web-2018.pdf>

Are services safe?

Medicines management

At our last inspection, we found that some patients had experienced delays in receiving their prescribed medicines, posing a risk of interruptions in their treatment.

During this focused inspection, we found that medicines were supplied promptly, helping to ensure the safety of patients and meet their needs:

- The pharmacy team had taken over full responsibility for ensuring patients received their prescribed medicines in a timely manner.
- Only one incident had been recorded that related to a person experiencing a delay in receiving their medicines over the three months prior to the inspection.
- Patients had their appropriate prescribed medicines on release and transfer, which prevented delays in treatment.

Person-centred care

At our last inspection, we found that people who required support with their social care needs had not received care in accordance with their care plans. Staff had not completed secondary health screening in line with NHS England guidance, which meant patients' health and social care needs may not have been promptly identified, assessed and met. Translation services were not available during reception screening, which meant patients may not have been able to express their needs, leaving them at risk.

During this focused inspection, we found social care was delivered appropriately to meet need, all patients had the opportunity express their needs during a secondary health screen and translation services were available during reception screening. This helped keep people safe.

- Prisoners had received care in accordance with their social care assessments.
- There was good weekly oversight and monitoring of the delivery of social care by senior management.
- Care plans were well documented for people receiving social care. Detailed notes also included where staff had identified potential healthcare concerns, which had led to referrals to other services, and clearly stated the reasons if a person had declined their care.
- Prisoners receiving social care confirmed their needs had been met and they were happy with the support they received.
- No gaps in records were found. Staff were flexible to reflect people's needs and preferences with regards the delivery of social care. For example, if a person wished to have a shower on a Wednesday as opposed to a Tuesday, as stated on their care plan.
- While rates of non-attendance for secondary health care screening remained high at an average of 31% over the last six months, everybody was offered and booked into an appointment to have their screening conducted.
- Prisoners were given a second opportunity to attend a secondary screen if they had not attended their first appointment.
- Prisoners were encouraged to attend their secondary health screen and informed of the importance of this screening process.
- The health care team were looking into ways of increasing the attendance rates, which included the potential of moving the clinics to the induction unit to make them more accessible.
- A phone had been installed in the new dedicated health care room in reception, which enabled staff to use translation services when required.

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?

We did not inspect the responsive domain at this inspection.

Are services well-led?

Governance arrangements

At our last inspection, we found a lack of oversight of long-term health conditions. We were not assured that governance systems were sufficient to assess, monitor and improve the quality and safety of the service. It could not be evidenced that staff had received supervision in line with Care UK's policy.

During this focused inspection, we found that regular clinics addressed the needs of patients with long-term conditions, governance of the service had significantly improved, and systems had been implemented to help ensure staff were appropriately supervised:

- Regular nurse-led clinics were routinely scheduled which met the needs of patients with long term conditions.
- Patient applications were now clinically screened prior to an appointment to see the GP or nurse, ensuring patients were prioritised according to their healthcare needs.
- Audits were conducted in line with Care UK's national programme. These helped ensure the quality and safety of service delivery and led to improvements.
- A member of staff had been assigned the lead role of obtaining the views of patients, in order to improve service delivery. Bi-monthly forums had been scheduled to help ensure the patient's voice was heard and improvements could be made. "You said, we did" display posters were placed on all the living blocks, and informed patients what changes had been made in response to the forums
- All complaints were now responded to in a timely manner, and the back log identified at the previous inspection had been addressed. Responses fully addressed the nature of the complaint and contained information on how the complaint could be escalated if the patient was unhappy with the reply they received.
- Staff had each been issued a supervision pack, which enabled them to effectively record when supervision had taken place. All staff now had a scheduled plan of both managerial and clinical supervision in place in line with Care UK's policy. Staff told us they felt supported and welcomed the changes.