

# HMP Peterborough

## Inspection report

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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 Sodexo Limited at HMP Peterborough between 10 and 12 December 2018.

During our last joint inspection with Her Majesty's Inspectorate of Prisons in July 2018, we found that the quality of healthcare provided by Sodexo Limited at this location required significant improvement, and we issued a Warning Notice to the provider under section 29 of the Health and Social Care Act 2008.

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

We do not currently rate services provided in prisons.

At this inspection we found:

- Sodexo Limited had taken action to address the concerns identified at the last inspection and were now compliant with the Warning Notice issued on 15 August 2018.
- Medicines management had significantly improved, however medicines reconciliation procedures and emergency medicines were under developed.
- Sodexo Limited had undertaken a significant review of their structures and governance arrangements; however some work remained in progress at the time of this inspection and we were unable to test its impact.

## Our inspection team

Our inspection team was led by a CQC health and justice inspector, accompanied by the manager of the health and justice team, a GP Specialist Advisor to the CQC, and a CQC pharmacist specialist.

Before this inspection we reviewed a range of information that we held about the service. During the inspection we

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

## Background to HMP Peterborough

HMP Peterborough is a local Category B prison. It is England's only dual purpose-built prison for men and women, who are kept separate at all times. The prison is located in the city of Peterborough, Cambridgeshire, and accommodates up to 360 female adult prisoners and young offenders, and 868 adult male prisoners. The prison is operated by Sodexo Justice Services.

Sodexo Limited provide primary health care and clinical substance misuse services at the prison. Sodexo Limited is registered with CQC to provide the regulated activity of Treatment of disease, disorder or injury at the location HMP Peterborough.

Our last joint inspection with Her Majesty's Inspectorate of Prisons (HMIP) was of the male side of the prison in July 2018. We found breaches of Regulation 12, Safe care and treatment, and Regulation 17, Good governance at this inspection. The joint inspection report can be found at:

<https://www.justiceinspectorates.gov.uk/hmiprisons/inspections/hmp-peterborough-male/>

We carried out a focused inspection of the female side of the prison alongside the above joint inspection in July 2018. The purpose of this focused inspection was to follow up on breaches of regulations identified during the last joint inspection of the female side of the prison with HMIP in September 2017. During our focused inspection in July 2018 we found that there had been insufficient improvement on the female side of the prison and found ongoing breaches of regulations 12 and 17 and we took enforcement action. The report can be found at:

<https://www.cqc.org.uk/location/1-1320997589>

# Are services safe?

## Risks to patients

At our last inspection in July 2018 we found that risks to the health and safety of patients receiving care or treatment had not been adequately assessed:

- Not all clinical observations were recorded in line with recommended NICE guidelines for patients receiving treatment from the Integrated Substance Misuse Service during their first five days at the prison.

At this inspection we found that Sodexo Limited had taken action to assess the risks to patients receiving treatment from the Integrated Substance Misuse Service (ISMS) during their first five days at the prison. Actions taken included:

- Implementation of an induction plan for patients receiving treatment from the ISMS during their first five days at the prison.
- Observations were now carried out four times a day and recorded in the patient's individual induction plan.
- A nurse was allocated to complete the daily observations for these patients during daily management meetings.

## Appropriate and safe use of medicines

At our last inspection in July 2018 we found that medicines were not managed properly or safely, and there were insufficient arrangements for the storage and security of medicines:

- In possession risk assessments (to determine whether or not patients could safely manage their own medicines and hold them 'in possession' (IP)) were not readily available to prescribers at the point of prescribing, and these risk assessments were not routinely reviewed.
- Pharmacy technicians did not routinely check that in possession medicines delivered to house blocks reflected the current prescription for the patient.
- Stock supplied through patient group directions (a written instruction for the supply and/or administration of medicines to groups of patients who may not be individually identified before presentation for treatment) was not labelled in line with legal requirements.
- Stock and patient named medication were mixed together and medicines cabinets were left unlocked.
- Access to the pharmacy room was open to any staff who carried healthcare keys.

- Access to the controlled drugs (CD) cabinet was not robust.
- Two CD cabinets were not locked or secured appropriately.

At this inspection we found that Sodexo Limited had taken action to address the concerns raised in the previous inspection and medicines management had improved significantly:

- IP risk assessments were clearly visible to prescribers within the electronic patient record and when the prescriber signed the prescription. We reviewed a sample of risk assessments during our inspection, all of which were current.
- There was a system in place to send messages to patients asking them to collect their IP medicines. Staff checked again at the point of collection that all medicines were still current.
- Patient Group Directions were in place to allow the treatment of conditions such as asthma but were currently not being used.
- Medicines were supplied mainly as named patient items but stock was also available. Storage of both was appropriate and they were clearly separated within the pharmacy. Training of nursing staff had taken place to ensure named patient items were only used for that specified patient.
- Medicines including controlled drugs were stored securely and access to the pharmacy room was restricted.
- Systems were in place to monitor the amount of stock being sent to the wings. Controlled drugs cabinet keys were adequately controlled through a signing out process which was auditable.

During this focused inspection we observed some areas of concern in relation to medicines management which were brought to the attention of Sodexo Limited:

- Patients' own medicines that were brought into the prison were used where appropriate and assessed for suitability by pharmacy staff. However, we found 14 opened and unlabelled insulin pens stored within the pharmacy refrigerator. It was not clear whether these had been assessed for continued use or required destruction, and it was unclear whether the permission

## Are services safe?

of prisoners had been sought to allow the destruction of their medicines if necessary. The unlabelled insulin pens were destroyed when this was brought to the attention of managers during the inspection.

- There was no clear medicines reconciliation procedure documenting staff responsibilities including timeframes for this process, and there was no data to monitor how many prisoners received a completed medicines reconciliation to ensure that medicines were continued appropriately on admission to the prison. One record we looked at for a recent admission had incorrect allergy information on his electronic patient record.
- Emergency medicines were available within the pharmacy and checked regularly. However, the list had not been reviewed for five years and therefore medicines available may not be in line with current guidance.

# Are services effective?

## **Effective needs assessment, care and treatment**

At our July 2018 inspection we found that the effective management of long term conditions was reliant on one nurse which created a risk to continuity of care and treatment. Care planning for patients with long term conditions was not sufficient to ensure that patients received care and treatment appropriate to their needs:

- A template had been added to the electronic patient record system for staff to complete; however, care plans had not yet been completed which meant that it was not possible to evidence the care required for patients with long term conditions.

During this focused inspection we found that the management of long term conditions had improved with additional resources allocated to ensure that patients' needs were monitored and met in a timely manner. Actions taken included:

- Two new agency staff with specialisms in long term condition management had been recruited on a short-term basis.
- Long term condition clinics were held weekly by appropriately trained nursing staff to monitor and treat patients with long term conditions.
- Personalised care plans were in place for patients with a long-term condition and available to all healthcare staff.

Whilst improvements had been made to the management of long term conditions, and patients' needs were being met, specialist staff were temporary and the sustainability of this element of the service was dependent on the recruitment of permanent specialist staff.

# 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?

## Governance arrangements

During our last inspection in July 2018, we found that whilst some action had been taken in response to our September 2017 inspection of the female side of the prison, we found similar concerns about the male side of the prison. This meant that Sodexo Limited's governance arrangements had not applied the learning from previous inspections.

At this focused inspection, we found that Sodexo Limited had undertaken a significant review of their structures and governance arrangements; however, some work remained in progress

- Regular clinical governance and medicines management meetings had been established and were well attended.
- New senior posts had been developed and were being recruited to and clinical service contracts were under review. Initial improvements were promising but some key senior posts were yet to be filled.
- A range of action plans was in place, which were being effectively managed and monitored; however, it was recognised that further work was needed to consolidate these plans.
- The proportion of permanent clinical staff remained low, at around 50% overall. However, the provider had changed their approach to agency staff use to support better consistency of care and the senior team was considering how to improve staff retention in the longer term.
- Contracts for the GP and pharmacy services had been reviewed and were awaiting sign off. The review process had improved engagement and some improvements were already evident. For example, the availability of GPs had improved, as confirmed by rotas.
- Audit programmes were in place and being carried out. Record keeping audits had recently focused on the areas of concern highlighted by our previous inspections, and all demonstrated improvements.
- A programme of prescribing audits was in progress, including an audit of antibiotic use at the time of this inspection.

## Managing risks, issues and performance

At our last inspection we found that senior clinical nurse managers did not systematically oversee nursing duties and as a result a number of risks which we identified during

the inspection had not been identified or acted upon. These included risks to cleanliness of clinical areas, availability of emergency equipment, the timeliness of health screening and medicines management.

At this focused inspection we found that clinical oversight of services was much improved:

- Senior nurses were no longer routinely providing clinics or other clinical activity, enabling them to oversee nursing practice. Their roles and responsibilities were clear and staff told us that they felt well supported.
- Clinical nurse managers carried out daily audits to ensure that nurses completed daily checks of clinical areas and equipment.
- The checking of emergency equipment was now robust, with very few gaps noted. This provided assurance that the integrity and suitability of such equipment could be relied on in an emergency.
- The Controlled Drug licence had been renewed and was now in date. This information was displayed in the pharmacy area.
- The previous backlog of patients awaiting a secondary health screening had been addressed and patients now received their secondary health screen within 48 hours of arriving at the prison. There were no outstanding screenings at the time of this inspection, and this was being monitored daily to ensure all patients were seen in a timely manner.
- Secondary dispensing of medicines had ceased and a local operating procedure governed how medicines were transferred within inpatient units and to the separation and care unit.

## Engagement with patients, the public, staff and external partners

At our last inspection we found that Sodexo Limited did not have effective systems and processes in place to seek and act on feedback from people using the service across the prison:

- Whilst a patient survey had been carried out, the results of this were yet to be analysed.
- There was no system in place to seek patient feedback, and no evidence that patient feedback informed service delivery.

At this focused inspection we found that significant work was in progress to establish effective arrangements for patient engagement:

## Are services well-led?

- Survey reports (2018) demonstrated learning from patient feedback.
- Meetings and focus groups provided valuable opportunities to consult with prison residents about their experience of healthcare services, including some facilitated by a third sector organisation.
- Actions taken included promoting awareness of healthcare services and the healthcare complaints process.
- Further work was planned to enhance patient engagement, including the development of a prisoner council.