

Full Sutton HMPI

Quality Report

Spectrum Community Health CIC
Moor Lane, Stamford Bridge,
York, North Yorkshire,
YO41 1PS
Tel: 01924 330500
Website: www.wisms.org.uk

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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.

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Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

We did not inspect the safe domain in full at this desk based focused inspection. We inspected only those aspects mentioned in the Requirement Notices issued on 10 May 2016. We found that all the required improvements had been made.

- The updated action plan provided by Spectrum Community Health on the 18 August 2016 and subsequent documental evidence, indicated a dedicated room on G wing was made available exclusively for pharmacy staff to administer supervised medication and weekly in possession medication.
- A cupboard had been ordered for the new Pharmacy room on G wing which minimised the time required to restock the cupboard. Staff were now required to transport safely in line with Standard Operating Procedure 23.
- The updated action plan stated there was an improved arrangement around the transportation of medication. Movement of the locked box only takes place when the prisoners are locked up. Staff also carried a radio. On any occasion where this was not possible, a prison officer escorted the member staff.

Are services effective?

We did not inspect the effective domain in full at this desk based focused inspection. We inspected only those aspects mentioned in the Requirement Notice issued on 10 May 2016. We found that all the required improvements had been made.

- A full record of mandatory training was provided on 18 August 2016 and all training for staff was up to date.
- Management & Clinical Supervision was taking place and documented, and a lead band 7 clinician post was dedicated to ensure full engagement with supervision and training.
- Documentary evidence showed a quarterly audit on clinical supervision was now in place as was group supervision. All sessions were formally recorded and dates for each session were provided.

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.

Summary of findings

Are services well-led?

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

Full Sutton HMPI

Detailed findings

Our inspection team

Our inspection team was led by:

This desk based focussed inspection was led by a CQC inspector who had access to remote advice from a specialist advisor. The inspector reviewed and analysed the documentary evidence submitted.

Background to Full Sutton HMPI

Full Sutton is located near York and is one of only five high security dispersal prisons in the country, holding just under 600 adult men. Nearly all its prisoners present significant risks to both security and to the public at large. Almost half are serving life sentences, with a similar number doing in excess of 10 years or other indeterminate sentences. At the time of the inspection, 154 men were designated category A, these are prisoners who represent the highest risk to the public should they escape.

A range of integrated health services were provided by Spectrum Community Health CIC to prisoners comparable to those found in the wider community. This includes GP, pharmacy and nurse-led clinics. The location is registered to provide the regulated activities: diagnostic and screening procedures, and treatment of disease, disorder or injury.

CQC inspected the services in partnership with Her Majesty's Inspectorate of Prisons on 18-21 January 2016 and issued a requirement notice requesting the provider make improvements regarding :

- Staffing
- Safe care and treatment

- Premises and equipment

These constituted breaches of Regulation 12, 15 and 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We checked these areas as part of this desk based focussed inspection and found they had been resolved.

Why we carried out this inspection

We carried out a focussed desk based inspection on 10 October 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We inspected to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, specifically whether they had satisfied one requirement notice issued on 10 May 2016.

During this inspection we inspected the provider against two of the five questions we ask about services:

* is the service safe ?

* is the service effective ?

These questions therefore formed the framework for the areas we looked at during the focussed desk based inspection.

How we carried out this inspection

Before our inspection we reviewed a range of information that we held about the service and asked other organisations to share what intelligence they could. During

Detailed findings

the desk based inspection we looked at a range of documentation including mandatory training logs, quarterly audits of clinical supervision and the action plan provided by Spectrum Community Health CIC.

Are services safe?

Our findings

Medicines management

- Spectrum Community Health CIC had taken steps in collaboration with HMP Full Sutton to ensure a dedicated room was available on G Wing for pharmacy staff to administer medication. This outcome had improved confidentiality for prisoners.
- Spectrum Community Health CIC had ensured proper and safe storage of medication on G wing.
- Spectrum Community Health CQC had ensured that the risk associated with transportation of medications was significantly reduced by only doing so when prisoners were locked up.

Are services effective?

(for example, treatment is effective)

Our findings

Effective staffing

- Spectrum Community Health CIC had ensured that all staff mandatory training had been completed as required, in addition to the provision of regular supervision to all staff. Staff were reported to feel more supported to carry out their daily tasks.
- The CIC had introduced a system for completing audits of clinical supervision on a quarterly basis. The results of which had been used for planning and learning.

Are services caring?

Our findings

We did not inspect the caring domain at this inspection.

Are services responsive to people's needs? (for example, to feedback?)

Our findings

We did not inspect the responsive domain at this inspection.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

We did not inspect the well-led domain at this inspection.