Overall summary

This inspection was an announced focused inspection on 26-27 June 2018, under Section 60 of the Health and Social Care Act 2008. The purpose of the inspection was to follow up on Requirement Notices that we issued following a joint inspection with Her Majesty’s Inspectorate of Prisons (HMIP) in March 2017, and to check that the provider was meeting the legal requirements and regulations associated with the Act.

This report covers our findings in relation to those aspects detailed in the Requirement Notice dated 25 July 2017 in the joint HMIP/CQC report, in respect of Regulation 9 Person Centred Care.

Our inspection team

This inspection was completed by two CQC health and justice inspectors.

During the focused inspection, we reviewed the action plan submitted by Bristol Community Health CIC which demonstrated how they had worked to achieve meeting compliance with the requirements. We spoke with staff and looked at a range of documents and records relating to clinical practice and governance.

Background

Bristol Community Health CIC provides a range of primary healthcare services to prisoners at HMP Bristol, comparable to those found in the wider community. The location is registered to provide the regulated activities: Treatment of disease, disorder or injury, Personal care, and Diagnostic and screening procedures.

CQC inspected this location with HMIP between 13 and 16 March 2017. We found evidence that fundamental standards were not being met and issued a Requirement Notice in relation to Regulation 9, Person centred care, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The joint report published following the March 2017 inspection can be found by accessing the following website:


We subsequently asked Bristol Community Health CIC to make improvements regarding this breach. We checked these areas during this focused inspection and found that the provider had addressed the previous regulatory breach identified.
The five questions we ask about services and what we found

We always ask the following five questions of services. We asked the following question(s).

**Are services safe?**
We did not inspect the safe key question in full at this inspection. We inspected only those aspects detailed in the Requirement Notice issued in July 2017 as a result of the joint inspection with HMIP in March 2017.

At this focused inspection, we found the provider had taken adequate action to address the risks identified in March 2017. Patients received good care and support, their health needs were promptly identified by staff and appropriately met. There were no excessive waits to see health care professionals and staff completed personalised care plans for patients with long term conditions and complex needs.

**Are services effective?**
We did not inspect the effective key question at this inspection.

**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?**
We did not inspect the well-led key question at this inspection.
Our findings

At our previous inspection in March 2017, we found that the provider did not have processes in place to help ensure patients' individual needs were identified and met.

These included:

• Secondary health screens were not routinely completed, meaning there could be a risk that patients' health needs may not be identified.
• There were excessive waiting times for patients with long-term conditions to see health care professionals, resulting in delays with having their conditions monitored or reviewed.
• There were no personalised care plans in place for patients with long-term conditions or complex healthcare needs.

At this focused inspection, we found that Bristol Community Health CIC had taken appropriate action to address these risks and helped to ensure patients received personalised care and treatment that met their needs.

Staff ensured secondary health screens were now all undertaken within the recommended time frame of seven days, often taking place within 72 hours of a prisoner entering HMP Bristol. This meant prisoners’ health needs were promptly identified, assessed and met.

There were no excessive waiting times for any health clinics which included those for patients with long term conditions and complex needs. The provider had established plans for long term conditions management to be fully nurse led. This had already been achieved in areas such as diabetes and chronic obstructive pulmonary disease where specialised clinics had started to take place. Other long term conditions such as epilepsy continued to be overseen by the GP who liaised with nursing staff, whilst staff completed the relevant training required to take on the oversight and management themselves in the near future.

A new comprehensive complex case care pathway had been embedded in practice. This helped ensure that once a patient had been identified as having complex health care needs, they would be regularly monitored and discussed at a complex case multi-disciplinary team meeting on a weekly basis. Staff then formulated a personalised care plan with the patient to help ensure their views about how they wished to be treated were respected. This detailed clearly how their condition would be appropriately managed and reviewed.

We found that all patients with long term conditions had received appropriate care and treatment based on their identified need. They all had individualised care plans in place that took account of their personal wishes and needs.
Are services effective?
(for example, treatment is effective)

Our findings
We did not inspect the effective key question at this inspection.
Are services caring?

Our findings

We did not inspect the caring key question at this inspection.
Are services responsive to people’s needs?
(for example, to feedback?)

Our findings

We did not inspect the responsive key question at this inspection.
Are services well-led?

Our findings

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