

# Review of compliance

## Oxleas NHS Foundation Trust Bracton Centre Medium Secure Unit

<b>Region:</b>	London
<b>Location address:</b>	Bracton Lane Datford Kent DA2 7AF
<b>Type of service:</b>	Hospital services for people with mental health needs, learning disabilities and problems with substance misuse
<b>Date of Publication:</b>	August 2011
<b>Overview of the service:</b>	The Bracton Centre provides a range of specialist forensic mental health services for people aged 18 - 65 living in the boroughs of Bromley, Bexley, Greenwich and Lewisham and other boroughs when requested. The centre offers assessment, treatment and rehabilitation, and has a number of clinics providing 24 hour services.

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Bracton Centre Medium Secure Unit was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 July 2011, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

People who use the service told us during our visit on 6 July 2011 that staff involved them in planning their treatment and care and helped them to become more independent. They said that staff treated them well. They had regular contact with staff and felt able to make comments or complaints about the service to them. People told us their privacy and dignity were respected.

People were given information about the medicines they were taking and were monitored for any possible side effects.

People also told us that they chose what they wanted to eat, and that the premises were cleaned regularly and were well maintained.

### What we found about the standards we reviewed and how well Bracton Centre Medium Secure Unit was meeting them

#### **Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were involved in discussions about their treatment and care and supported to make decisions. Staff respected their privacy and dignity.

#### **Outcome 02: Before people are given any examination, care, treatment or support,**

### **they should be asked if they agree to it**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were supported to make a decision about whether or not to give consent where this was permissible.

### **Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's care was planned to meet their individual needs. There was a strong emphasis on skills building and a wide ranging therapeutic programme to meet people's diverse needs.

### **Outcome 05: Food and drink should meet people's individual dietary needs**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were supported to have adequate nutrition and hydration, and healthy eating was promoted. People were supported to plan and prepare their own meals where possible.

### **Outcome 06: People should get safe and coordinated care when they move between different services**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Staff worked with other services and providers so that people received coordinated treatment and support.

### **Outcome 07: People should be protected from abuse and staff should respect their human rights**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Action was taken to protect people from abuse and staff responded appropriately to reports or allegations of abuse.

### **Outcome 08: People should be cared for in a clean environment and protected from the risk of infection**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Appropriate standards of cleanliness and hygiene were maintained and staff were involved in the process of preventing infection.

### **Outcome 09: People should be given the medicines they need when they need them, and in a safe way**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Medicines were handled safely and people received their medicines at the times they needed them and in a safe way.

### **Outcome 10: People should be cared for in safe and accessible surroundings that**

## **support their health and welfare**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. The design and layout of the premises was suitable for carrying out hospital services for people with mental health needs. The premises and grounds were well maintained. Further measures in relation to the security of the premises were being put in place to bring the unit in line with standards produced by the Royal College of Psychiatrists.

### **Outcome 11: People should be safe from harm from unsafe or unsuitable equipment**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Equipment was properly maintained and staff were trained to use to equipment correctly and safely.

### **Outcome 12: People should be cared for by staff who are properly qualified and able to do their job**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's needs were met by staff who were fit, appropriately qualified, and physically and mentally able to do their job.

### **Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's needs were being met by sufficient numbers of suitably qualified and experienced staff.

### **Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Staff were supported to provide care and treatment to people who use services through training, supervision and appraisals. Staff felt supported by management and were enabled to acquire further skills and qualifications relevant to the work they undertook.

### **Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. The service that people received was monitored and information was used to identify risks and to determine how best to further improve quality and safety.

### **Outcome 17: People should have their complaints listened to and acted on properly**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People felt able to make comments or complaints about the service and these were acted on by staff.

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Individualised records of people's treatment, care and support were maintained and were stored securely.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

##### What people who use the service experienced and told us

People said that they regularly met with their primary nurse and discussed their care plan and, where applicable, any discharge plans. People said that they had copies of their care plans. They said that they felt involved in the development of their care plans that their preferences were listened to and catered for. People felt that they were helped to be more independent and that significant efforts were made to help them if they had been in institutions for a long period of time. People said that they felt that their privacy and dignity was respected.

##### Other evidence

We saw evidence to show that staff had discussed care, treatment and support options with people. We established that people's preferences were taken into account when developing care plans and selecting therapeutic activities. People met with their primary nurse regularly and were able to attend management and Care Programme Approach (CPA) meetings where their care and treatment was discussed. Family members and / or carers were involved in these discussions where appropriate.

We observed staff interactions with people and found that they were respectful. We were satisfied with the explanations staff gave on how they ensured that people's privacy and dignity was respected.



We saw evidence of people being able to influence their care and the running of the establishment. This included being involved in community meetings and user groups, activities of their choosing, choosing the colour scheme and decoration of the multi-faith room and choosing where to go on day-trips.

People using the service were helped to become more independent. This included enabling them to cook meals for themselves, go shopping for food, manage how they use their own money and develop skills useful in the community, such as food preparation, office skills, and picture framing.

People had access to independent advocacy services and we saw posters displaying information about how to contact an advocate. People were also given leaflets on advocacy services.

There was a multi-faith room and this catered for people's diverse faiths.

### **Our judgement**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were involved in discussions about their treatment and care and supported to make decisions. Staff respected their privacy and dignity.

## Outcome 02: Consent to care and treatment

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Where they are able, give valid consent to the examination, care, treatment and support they receive.
- \* Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- \* Can be confident that their human rights are respected and taken into account.

### What we found

#### Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said that they had their rights read to them and had regular discussions with their primary nurse to discuss their care.

##### Other evidence

Staff explained that everyone had had their rights under the Mental Health Act read to them and their capacity to consent assessed. There was a system in place to record whether this had been done and this was audited on a monthly basis. Where the audit identified discrepancies, these were fed back to individuals and teams where appropriate.

With permission, we reviewed a person's care plan and saw that on a number of occasions the person had had his rights read to him and that his understanding of this and consent had been recorded.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were supported to make a decision about whether or not to give consent where this was permissible.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

People said that staff were caring and treated them well. They felt broadly satisfied with the care they were receiving. They said that they were involved in developing their care plans and had their own copies of these plans. They were able to express their preferences and said that staff took these into account. People said that they participated in a range of activities, some of which were of their own choosing. They said that their health was monitored on a weekly basis to check if any health concerns were emerging or they were developing any side-effects to medication. They also said that they were involved in developing their plans for being discharged from the service.

##### Other evidence

We found that people were involved in developing their care plans. Staff explained that, on admission, they discussed with people what their preferences and abilities were, what they wanted achieve, and how they could go about this. Staff said that this was reviewed on an ongoing basis at regular meetings. We saw evidence of care plans being reviewed on an ongoing basis and discussions were held about people's care when needs changed.

Staff confirmed that risks to people were assessed on an ongoing basis, such as on admission, when they planned to undertake a new activity, or when they were to be moved to a less secure setting. We found that, where possible, people were enabled to participate in therapeutic activities which were beneficial, often equipping people with skills useful in the community.

We saw evidence that Bracton Centre maintained people's welfare and promoted their well-being by providing a range of daytime therapeutic activities, treating their mental health needs, monitoring physical health and providing healthcare where required, and providing opportunities for people to engage with others and create a sense of community.

We saw evidence to show that people were encouraged to pursue healthy lifestyles. This included providing healthy food options, giving advice to people on healthy eating, putting in place nutrition plans where required and developing individual plans for those people who used the gym.

The people we spoke with knew the names of their primary nurse and other staff, and all of the staff we saw wore visible name badges. Photographs and names of staff were displayed on each ward we visited.

Staff explained that discharge planning began a long way in advance and involved people using the service. The therapies programme was designed to equip people with skills that they could use on leaving Bracton Centre which would enable them to be independent. The skills people were encouraged to develop included preparing meals, personal care, budgeting, community awareness, literacy and numeracy, IT skills and work experience (for example car wash and horticultural projects). If a patient was particularly institutionalised, then the multi disciplinary team worked on gradually exposing the patient to the outside world. We observed people participating in these activities.

Table tennis, television, games and novels were available on the wards.

People were housed in single-sex accommodation.

### **Our judgement**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's care was planned to meet their individual needs. There was a strong emphasis on skills building and a wide ranging therapeutic programme to meet people's diverse needs.

## Outcome 05: Meeting nutritional needs

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are supported to have adequate nutrition and hydration.

### What we found

#### Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said food and drink was available all day and that they had a choice of food. People said that if an assessment of their capabilities showed that they were able to prepare food for themselves, then they were helped by staff to do this.

##### Other evidence

We found that people had a choice of food and were encouraged to eat healthily. People were either provided with meals, able to eat at the on-site café or, where appropriate, prepared meals for themselves. People were encouraged to pursue a healthy lifestyle and this was adapted to fit into their individual programme of care. People were able to access food and drink throughout much of the day. For those people on more supported areas, there was a kitchen open at specific times of the day and a servery for drinks and snacks open for the majority of the day and night. (The servery was temporarily closed on one unit because it had been misused). People on pre-discharge areas were able to make meals and drinks whenever they wanted. On pre-discharge areas we found that people were helped to buy their own food and plan their meals to increase their independence. There was a system in place to monitor whether people were buying healthy food. Advice and support was provided to people who were not buying healthy food.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People were supported to have adequate nutrition and hydration, and healthy eating was promoted. People were supported to plan and prepare their own meals where possible.

## Outcome 06: Cooperating with other providers

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

### What we found

#### Our judgement

The provider is compliant with Outcome 06: Cooperating with other providers

#### Our findings

##### What people who use the service experienced and told us

People said that they had a key worker or primary nurse who was responsible for their care plan, including discharge arrangements, with whom they had regular meetings. They also said that they were able to see a dentist, general practitioner and optician whenever they wished, and that staff arranged appointments for them.

##### Other evidence

Staff confirmed that they worked closely with other organisations in planning a person's discharge from Bracton Centre and re-integration into the wider community. This included multi-disciplinary meetings with external organisations. Staff also worked with external providers to give people useful skills and to arrange hostel places and other accommodation for people leaving Bracton Centre.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Staff worked with other services and providers so that people received coordinated treatment and support.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

People said that they felt able to raise concerns with their primary nurse and other staff, as well as at community meetings. They said that there was an open culture where issues and concerns were discussed. They said they felt they knew what would be inappropriate behaviour. They said that they had not seen any staff acting in an inappropriate way towards people.

##### Other evidence

The staff we spoke with said that they had received safeguarding adults and children training and said that they would be able to identify abuse or behaviour that might indicate abuse. Staff were able to explain the process that should be followed if they had identified a safeguarding issue. Staff said that they had discussed safeguarding with people. They said that they tried to create a safe environment to do this, such as community meetings, where they discussed what was and was not acceptable behaviour, such as bullying. We saw posters about safeguarding displayed and these provided information for staff on what action to take and who to contact in the event of suspecting a safeguarding issue.

We were provided with an example of the Bracton Centre acting on safeguarding information provided by people who use the service. The Bracton Centre had worked collaboratively with other agencies on this issue.

Staff said that they regularly reviewed incidents at team and supervision meetings and attempted to learn from previous incidents or errors.

Staff said that they had had challenging behaviour training and that they felt able to deal with such behaviour safely and effectively. Staff said that restraint was rarely used as they used de-escalation techniques as much as possible.

**Our judgement**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Action was taken to protect people from abuse and staff responded appropriately to reports or allegations of abuse.



## Outcome 08: Cleanliness and infection control

### What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

### What we found

#### Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said that the premises were always clean. They said that domestic staff cleaned the premises on a regular basis.

##### Other evidence

We established that appropriate steps had been taken to ensure that there were systems in place to prevent, detect and control the spread of infection. During the visit we observed that the premises were clean. There were infection control notices displayed at strategic points throughout Bracton Centre. There was alcohol handwash at the entrance to each ward and at various points throughout the buildings. All staff had alcohol hand-gel dispensers on their person. Bathrooms contained dispensers for handwash and paper towels or hand dryers. On inspecting domestics' rooms, we found appropriate measures were in place to ensure that cleaning equipment was kept clean and cross-contamination did not occur.

Staff confirmed that infection control audits took place on a monthly basis, including mattress integrity checks and whether people were following hand hygiene requirements. We also saw evidence of equipment being decontaminated on a regular basis.

Staff said they had received infection control training and each ward had an infection control lead who had received additional training and was a source of advice to staff.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Appropriate standards of cleanliness and hygiene were maintained and staff

were involved in the process of preventing infection.

## Outcome 09: Management of medicines

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Will have their medicines at the times they need them, and in a safe way.
- \* Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

### What we found

#### Our judgement

The provider is compliant with Outcome 09: Management of medicines

#### Our findings

##### What people who use the service experienced and told us

People said that they had been given information on the medication they were taking and the possible side-effects. People said that they had a medical assessment each week to ensure that any medication they were taking was not having a detrimental impact on their health.

##### Other evidence

The medication arrangements for two wards were reviewed and found to be satisfactory. Appropriate systems were in place for obtaining, recording, handling, safe keeping, dispensing and disposal of medication. We also found that controlled drugs were being handled appropriately.

There were systems in place to ensure that people get the right medication at the right time. There were systems in place for people who could not self-administer and also for those who were assessed as being capable of self-administering medications. If possible, medicines were prescribed that did not have to be taken in the afternoon to help people develop a workable routine for taking their medicines.

Staff confirmed, and we saw evidence of, monitoring people's health on a regular basis in order to identify at an early stage any health issues and reactions to anti-psychotic medication.

#### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Medicines were handled safely and people received their medicines at the times they needed them and in a safe way.

## Outcome 10: Safety and suitability of premises

### What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

\* Are in safe, accessible surroundings that promote their wellbeing.

### What we found

#### Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said that the premises were well-maintained. On some wards, they also said that they were able to lock their rooms to ensure that their personal possessions were safe.

##### Other evidence

During our visit, we found Bracton Centre's buildings and grounds to be well-maintained and of a suitable design and layout. Security measures to control access to the Bracton Centre were in place. A 5.2 metre high fence around the entire site was being built to bring the premises in line with security standards for medium secure units. The fence is due to be completed in August 2011.

We found that the safety needs of people visiting the Bracton Centre, including children, had been taken into account.

We found that space had been allocated for the range of social, therapeutic, cultural, educational and leisure activities available to people. This included a therapies centre, gym and multi-faith room, as well as communal areas on wards where people could play games such as table tennis. We found that people had access to outside space.

We saw that people had access to either en suite bathrooms, or to shared bathrooms which were near to living areas and so enabled people to maintain privacy and dignity.

We saw that fixtures, fittings and furniture were designed to avoid ligature points. Staff confirmed that the modern matron undertook audits of the ward environment in order to

identify any ligature points. We also saw that wards were laid out in such a way as to enable observations of people. This included a nurses station positioned so that corridors could be observed and windows on doors enabling staff to observe people in their rooms if required.

Staff confirmed that an annual health and safety audit was carried out. They also confirmed that fire alarm tests were carried out weekly. Fire signage and extinguishers were seen throughout the building.

**Our judgement**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. The design and layout of the premises was suitable for carrying out hospital services for people with mental health needs. The premises and grounds were well maintained. Further measures in relation to the security of the premises were being put in place to bring the unit in line with standards produced by the Royal College of Psychiatrists.

## Outcome 11: Safety, availability and suitability of equipment

### What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- \* Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- \* Benefit from equipment that is comfortable and meets their needs.

### What we found

#### Our judgement

The provider is compliant with Outcome 11: Safety, availability and suitability of equipment

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

We saw evidence that equipment was being maintained correctly. This included the periodic testing of electrical equipment and fire extinguishers. Staff confirmed that equipment was registered and serviced at trust level and that all equipment on the wards had been serviced and calibrated.

We saw that resuscitation equipment was readily available and had been checked weekly. Staff said that they had been trained to use the equipment in an emergency and carried out regular drills.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Equipment was properly maintained and staff were trained to use to equipment correctly and safely.

## Outcome 12: Requirements relating to workers

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

### What we found

#### Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

The trust had robust recruitment and selection procedures in place and carried out relevant checks when they employed staff. External verification was provided by the NHS Litigation Authority which assessed the trust at level 2.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's needs were met by staff who were fit, appropriately qualified, and physically and mentally able to do their job.



## Outcome 13: Staffing

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

People said that they had a primary nurse or key worker with whom they could discuss their care plans. They said that they met with their care workers on a regular basis.

##### Other evidence

We found that sufficient numbers of appropriately qualified and trained staff were on duty.

Staff confirmed that everyone had a key worker or primary nurse to ensure continuity of care. We saw evidence of key workers meeting with the people they were responsible for on a regular basis to discuss care plans and any issues.

We established that the Bracton Centre carried out needs analyses and risk assessments which determined staffing levels. For example, more staff were on duty when people had appointments outside of the Bracton Centre and needed to be accompanied. Staff confirmed that the rotas were reviewed regularly to ensure that there were enough staff on duty at all times. Where a staffing shortage had been identified, it was confirmed that the establishment accessed bank staff.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People's needs were being met by sufficient numbers of suitably qualified and experienced staff.

## Outcome 14: Supporting staff

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by competent staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

We established that all staff received an induction at the start of their employment at Oxleas Foundation NHS Trust.

Staff at the Bracton Centre said that they had been provided with a range of training by the trust. They said that they attended mandatory training courses on a regular basis and that this included safeguarding, resuscitation and infection control. Staff also said that they were supported to undertake further qualifications to enhance their skill set and increase their chances of career progression.

Staff said that they regularly attended supervision, and team and performance development meetings. We saw evidence of these meetings taking place during our visit.

Staff comments demonstrated that there was an open culture within the organisation where people felt able to raise issues and concerns and were treated with respect. They felt that management was supportive.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Staff were supported to provide care and treatment to people who use services through training, supervision and appraisals. Staff felt supported by

management and were enabled to acquire further skills and qualifications relevant to the work they undertook.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

We saw evidence of Bracton Centre gathering information about the safety and quality of their service. There was a systematic gathering of information via a ward assurance audit programme (WAND). The programme looked at, amongst other things, care plans, risk assessments, nursing content in care plans (using a random selection of five care plans), nursing progress notes, infection control, drug charts, supervision and whether people got annual health checks. A manager from another ward also did a spot check audit every month on various issues, such as the ward environment, people's records and people's views on the care they were receiving on the ward.

There was also a system in place to record details about a person's sectioning under the Mental Health Act and this was audited on a regular basis. Staff confirmed that audit outcomes were fed back to staff through staff meetings and clinical supervision.

There was a system in place for recording incidents and errors and staff said that they got feedback on incidents reported in team meetings and in briefings. They said that they discussed how to learn from incidents, such as patient aggression. If there was an incident on the ward, staff confirmed that they had a de-briefing and if there was a mistake, they tried to learn from it.

The trust had gathered a wide range of information about the safety and quality of the

service being provided at Bracton Centre Medium Secure Unit. There was ongoing monitoring of the processes of delivering safe quality care, treatment and support. For example, the trust had a firm grip on ensuring that all nursing staff had supervision ten times a year (by November 2011) and an annual performance development review (by September 2011).

The trust had also identified a number of areas where improvements would be made in order to: enhance communication between staff and patients (to be achieved by October 2011); ensure that safeguarding adult investigations were conducted in line with Kent and Medway protocols (to be achieved by April 2012); to bring up the proportion of the nursing workforce trained and updated in the prevention and management of violence and aggression to 80% (this stood at 76% in July 2011); and to standardise the management and storage of records so that there is a coordinated and consistent approach throughout (to be achieved by October 2011).

### **Our judgement**

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. The service that people received was monitored and information was used to identify risks and to determine how best to further improve quality and safety.

## Outcome 17: Complaints

### What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- \* Are sure that their comments and complaints are listened to and acted on effectively.
- \* Know that they will not be discriminated against for making a complaint.

### What we found

#### Our judgement

The provider is compliant with Outcome 17: Complaints

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said that they had no concerns about the Bracton Centre or the staff treating them. They said that if they had a concern or complaint, they would feel able to raise the matter with their primary nurse or another member of staff, or at a community meeting. They said that they knew how to make a complaint.

##### Other evidence

The Bracton Centre had a system in place to deal with concerns and complaints. We saw notices on how to make a complaint and who to contact on wards and at strategic points throughout the Bracton Centre.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. People felt able to make comments or complaints about the service and these were acted on by staff.

## Outcome 21: Records

### What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

\* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

\* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

### What we found

#### Our judgement

The provider is compliant with Outcome 21: Records

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

We found that there were appropriate arrangements in place to ensure that people's records were stored securely. Electronic records were only accessible to staff by using a hospital pass in a reader and entering a password. We saw that paper records were kept in fireproof, lockable cabinets in either a locked and/or staffed office. On reviewing people's records, we found them to be up to date.

##### Our judgement

Overall we found that Bracton Centre Medium Secure Unit was meeting this essential standard. Individualised records of people's treatment, care and support were maintained and were stored securely.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.



## Information for the reader

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