

## REPORT TO ABERDEENSHIRE INTEGRATION JOINT BOARD – 20 DECEMBER 2017

### HMP & YOI GRAMPIAN HEALTH CENTRE

#### 1 Recommendation

It is recommended that the IJB:-

**1.1 Note and comment on the proposed Recovery Action Plan for the prison Health Centre**

**1.2 Note and comment on progress towards achieving key priority actions approved previously by the IJB in October 2017**

**1.3 Note the wider national strategic developments in relation to health care delivery in Scottish Prisons**

**1.4 Agree to receive regular updates on progress with the Action Plan**

**1.5 Instruct the Chief Officer to share the contents of this report with Aberdeen City and Moray Health and Social Care Partnerships**

#### 2 Risk

2.1 IJB 3 Workforce capacity – due to recruitment difficulties, the current nursing workforce in HMP & YOI Grampian remains insufficient to deliver the services as strategically planned; IJB 4 Service capacity – the service is currently not being delivered as planned and so continues to have to prioritise based on clinical need and risk.

2.2 There are ongoing recruitment challenges across Grampian and the particular challenges of the nursing role within the prison environment, which is not for everyone, impacts on recruitment.

#### 3 Introduction

3.1 The purpose of this report is to outline the proposed Recovery Action Plan for HMP & YOI Grampian Health Centre and update on the key priority actions that were approved by the IJB in October 2017, particularly in relation to stabilising the service and the nursing working force.

3.2. As the operation and delivery of HMP & YOI Grampian Health Centre also sits within the national context of prisoner health care in Scotland, and strategic



developments will continue to inform / impact on future service delivery, key areas of activity at a national level are highlighted in this report. It is proposed that such updates are a routine part of future reporting to the IJB in relation to the service.

#### **4 Recovery Action Plan**

- 4.1 The recent review of progress in relation to the Health Centre Improvement Action Plan concluded that whilst some actions had been fully achieved, a number remain outstanding, primarily as a result of ongoing challenges with staffing levels – both within the Health Centre (in particular the nursing team) and also within the SPS workforce.
- 4.2 The themes and outstanding actions in the Health Centre Improvement Action Plan remain relevant and it is important that these are ultimately realised. However, the recent extensive staff engagement and stakeholder consultation, that was part of the review, highlighted that a 'recovery focus' with a phased approach to actions and priorities with realistic and achievable timescales would be more beneficial.
- 4.3 The proposed Recovery Action Plan (attached as Appendix 1) is intended to outline the actions that are being completed; all are key to moving the service forward. The actions have been prioritised for completion in phases and the plan reflects at what points they are 'live' – in general, focus is on the completion of Phase 1 actions first, followed by Phase 2 and so on.
- 4.4 However, there is flexibility in the plan as recovery and improvement work continues to gather momentum and specific timescales for completion of individual actions (and indeed the 'Phase' within which an action may sit in the plan) are suggestions – this phased approach is merely linked to staffing levels and capacity to deliver the actions. The aim is to ensure that expectations are realistic and managed with robust exception reporting.
- 4.5 The actions have been grouped in focus areas for ease of management, reference and future reporting. Actions and updates beyond Phase 1 will expand and become more detailed as service recovery progresses, and some actions may also move forward into an earlier 'Phase' – the intention is for the plan to be dynamic whilst remaining realistic and manageable.

#### **5 Update on Key Priority Actions**

- 5.1 Progress towards completing the key priority actions, that were approved by the IJB in October 2017, is detailed within Phase 1 of the Recovery Action Plan.
- 5.2 One of the main priorities continues to be staff recruitment because staffing levels continue to be low, with the service utilising bank and agency staff as required.



- 5.3 Three Treatment Room Nurses are now in post. Posts have been offered to preferred candidates for one Band 5 Mental Health Nurse vacancy, two Band 5 Substance Use Nurse vacancies and one Band 6 Mental Health nurse vacancy and it is anticipated that start dates will be confirmed upon completion of the relevant recruitment checks. All remaining vacancies are currently advertised or scheduled to be re-advertised.
- 5.4 Despite the staff shortages, a number of training events have been undertaken / arranged in November, December and January. These include Endocrine training, Equality & Diversity, Blood Borne Viruses (HIV, Hepatitis B, Hepatitis C), Professional Boundaries, Courageous Conversations and Datix.
- 5.5 The Lead Nurse and Operational Lead Nurse continue to support the development of personal development action plans for the nursing team within the Health Centre in tandem with the development of an improved career pathway for our nurses. It is anticipated that this input will support staff retention.
- 5.6 The other key priority is the management and administration of controlled drugs, as this is a high impact area in terms of other elements of service delivery and clinical governance. A snapshot of figures taken on 4 December showed that 37.8% of patients in the prison were methadone users and 2.27% were on suboxone.
- 5.7 All prison health centres in Scotland are now required to apply for a Controlled Drugs Licence from the Home Office. Thus far, the Glasgow prisons have obtained this with the rest of the health centres across the estate, including HMP & YOI Grampian Health Centre, preparing to do so. The Home Office will undertake an inspection before they issue a licence so this is a priority focus.

## **6 National Strategic Developments – SPS and NHS Partnership Work**

- 6.1 Following the publication of the Health and Sport Committee report on Prison Health Care and the subsequent establishment of the Health and Justice Collaboration Improvement Board by the Scottish Government, there is focus on improving collaboration between the Health and Social Care and Justice Directorates, and the remit includes improving health and social care in prisons.
- 6.2 It is anticipated that HMP & YOI Grampian will host a visit from the SPS Health and Wellbeing Lead and Divisional Head of Operations Directorate in January 2018, and this will provide an opportunity to discuss good practice, local challenges and opportunities, and key policy drivers with the governor/prison management team and AHSCP Managers.



## **7 Equalities, Staffing and Financial Implications**

- 7.1 An equality impact assessment is not required because this report is to update on service performance.
- 7.2 There are no negative implications for staffing.
- 7.3 There are no financial implications.

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15 November 2017



## HMP & YOI GRAMPIAN HEALTH CENTRE

### RECOVERY ACTION PLAN

- Notes:**
- Actions are prioritised for completion in phases.
  - Focus on completion of Phase 1 actions first, followed by Phase 2 and so forth.
  - Specific timescales for completion of individual actions are suggestions - phased approach linked to staffing levels and capacity to deliver.
  - Actions grouped in focus areas for ease of reference and future reporting.
  - Actions beyond Phase 1 are likely to be expanded / more detailed as recovery action plan progresses.

Phase	Focus Area	Action	Progress	Target date for completion
1	<b>Workforce capacity - nursing</b>	Undertake bespoke high profile recruitment drive for all vacant posts	All current vacancies with workflow / at advert with interview dates scheduled. Recruitment roadshows being planned for January 2018 with publicity. SPS supportive of an open day with tour of the establishment for potential applicants - being arranged in conjunction with roadshow planning. Recruitment video being made - working title ' a day in the life of prison nursing'.	31/03/2018 (to account for process timescales including PVG and OHS clearance)
	Establish working group to progress workforce planning, skill mix review and fit-for purpose nursing rota.	Underway - representatives identified from Nursing, HR, Finance, Management, Partnership, Primary Care and Workforce Planning. Proposed skill-mix from Head of Nursing being costed. Health Centre Senior Charge Nurses meeting with Workforce Planning on 12 December to look at rota issues - fit-for-purpose rota can only be established when vacant posts are recruited to.	31/01/2018 (workforce planning & skill mix review) ; 31/03/2018 (fit-for-purpose rota)	
	<b>Workforce development - nursing</b>	Implement programme of training and team-building so staff have improved understanding of roles and responsibilities and each individual has up-to-date eKSF.	Focus continues on core / mandatory training due to ongoing recruitment drive and use of bank / agency staff and multi-disciplinary / multi-agency trianing. Lead Nurse & Operational Lead Nurse are overseeing the development of individual personal development action plans and a defined career pathway for the nursing team - 1:1 sessions are being held with individual nurses / Health Care Support Workers as a part of training needs analysis, workforce planning and preparation for staff appraisal.	31/01/2018

1	<p><b>Workforce development - nursing</b></p>	<p>Staff appraisals undertaken by the appropriate person</p>	<p>Preparation for appraisals underway with Lead Nurse and Operational Lead Nurse undertaking 1:1 sessions with registered nurses and Health Care Support Workers - discussions centred around key skills, competencies, training (undertaken and required) and gaps to be addressed. Health Centre Management Team and Professional Leads to finalise staff appraisal plan (matching appraiser to appraisee and setting date for appraisal)</p>	<p>28/02/2018</p>
	<p><b>Service standards of delivery</b></p>	<p>Review of all Standard Operating Procedures (SOPs) for the Health Centre to ensure that they are current and a system is implemented to ensure staff understand and adhere to these</p>	<p>Current focus is SOP for management and administration of controlled drugs. Action plan that resulted from inspection by Controlled Drugs Team is being progressed. Staff have received refresher training. Input / support being requested from Business &amp; Strategy Team.</p>	<p>31/01/2018</p>
	<p><b>Clinical Governance - compliance with legislation</b></p>	<p>Apply to Home Office for Controlled Drugs Licence for the Health Centre</p>	<p>Input and support being provided by Lead Pharmacists and Controlled Drugs Team. Controlled Drugs inspection and action plan - inspection complete and actions being progressed; reporting to Clinical and Adult Social Work Governance Group. Controlled Drugs SOP being revised with staff refresher / re-training in preparation for application and Home Office inspection required for issuing of licence. English Capita disclosure required for Home Office Licence so clarity being sought on appropriate named person for licence from operational management side.</p>	<p>31/01/2018</p>
	<p><b>Health and Safety</b></p>	<p>Complete review of all service risk assessments</p>	<p>Ongoing review of effective risk management / risk enablement to ensure continued service improvement and development within the prison regime. Input and support from NHSG Risk Management Advisor for key areas of review and development is being arranged</p>	<p>28/02/2018</p>

	<p><b>Service delivery</b></p>	<p>Improve the range and availability of clinics with identified staff champions that have undertaken relevant certified training, e.g. BBV, sexual health, asthma, diabetes</p>	<p>Advanced Practice Nurses included / to be explored in skill mix review (see above). Treatment room nurses x 3 have been appointed and will commence NES modules in Asthma, Chronic Obstructive Pulmonary Disease and Cardiovascular Disease. Nursing team have received training and input from BBV &amp; Sexual Health Training. Lead Nurse and Operational Lead Nurse assisting with the identification / training of 'champions' as a part of their 1:1 sessions and professional support to team. Will be developed as staffing levels continue to improve.</p>	<p>31/03/2018 and ongoing</p>
<p><b>1</b></p>	<p><b>Patient outcomes - health improvement</b></p>	<p>Increased self-care and health promotion for prisoners</p>	<p>Staff undertake health promotion sessions, e.g. smoking cessation, health and wellbeing checks. Health promotion activities are also planned to coincide with health campaigns. Key focus is preparing for smoke-free prison in 2018 - service representatives are attending an engagement event at SPS college on 18 December for this purpose. Health and Wellbeing Lead and Location Manager are reviewing further work required on holistic health improvement action plan and activities. Rapid review of health promotion information for patients taking place in January 2018.</p>	<p>31/03/2018 and ongoing</p>
<p><b>Patient experience / involvement</b></p>	<p>Revise service induction information for prisoners and establish a patient forum</p>	<p>Revision of patient induction information underway. Input from Primary Care Development Managers being arranged to help implement a patient forum and link with SPS processes already in place (SPS have confirmed support).</p>	<p>Revision of patient induction information underway. Input from Primary Care Development Managers being arranged to help implement a patient forum and link with SPS processes already in place (SPS have confirmed support).</p>	<p>28/02/2018</p>

1	<p><b>Measuring performance</b></p>	<p>Underake audit of Datix (both complaints and adverse events) and provide additional training to ensure optimum use of this tool within service parameters and requirements.</p>	<p>Input from NHSG Quality Informatics Facilitator arranges - Health Centre Management Team on 13 December 2017; wider staff team on 18 January 2018. Review of current permissions and reporting levels undersay. Dashboard being set up for Location Manager and link with Operational Lead Nurse and Lead Nurse to assist with identification of key trends / themes to inform service development and improvement activity.</p>	<p>31/01/2018</p>
	<p><b>Professional relationships / collaborative working</b></p>	<p>Develop staff information booklet with SPS that details relevant posts, roles and remits within the establishment</p>	<p>Underway - information on posts and structures collated.</p>	<p>31/01/2018</p>
	<p><b>Service development and improvement</b></p>	<p>Establish links with other prison health centres (Scotland) to take and share learning to develop and improve service delivery to patients who are prisoners</p>	<p>Health Centre Management team links with National Prisoner Health Care Network. Managers have accepted invitations to visit two prisons in the central belt and these are being arranged. Service has received requests from colleagues from two prison health centres to visit HMP &amp; YOI Grampian Health Centre and these will be hosted.</p>	<p>31/03/2018</p>
2	<p><b>Workforce Development</b></p>	<p>Individuals identified and trained as mentors</p>	<p>Staff had been identified previously but not all had undertaken the relevant training and some have now left. To be revisited once the service is fully staffed.</p>	<p>Tbc</p>
	<p>Undertake training needs analysis for whole service team (all functions) and identify realistic, relevant and efficient service development plan - to include shared opportunities with partners.</p>	<p>Upon conclusion of training needs analysis currently being undertaken for the nursing workforce, focus group to be convened with other Lead Professionals (e.g. AHPs, GP, Denistry, Area Support) and relevant partner representatives to discuss agree how to progress this. Lead Professionals are already involved in workforce planning activity for Aberdeenshire so elements of this will likely contribute to Health Centre Team Development Plan</p>	<p>Tbc</p>	

		<p>Expand options for clinical supervision (individual and group) and professional collaboration - improved links and collaborative working with community and acute services and other Scottish prison Health Centres.</p> <p>Explore options for developing / improving structures that allow for staff to share knowledge and experience following attendance at courses etc.</p>	<p>Links already established or developing with community and acute services and other Scottish prison Health Centres but primarily at a management level. To be explored for staff team when staffing levels improve.</p>	Tbc
<p><b>2</b></p>	<p><b>Workforce Development</b></p>	<p>Implement programme of joint sessions with SPS and Health Centre staff to learn more about each other's roles and developed shared professional understanding.</p> <p>Develop and agree a communication strategy for all health care staff to use in relation to providing patient care to enable interrogation of interventions.</p>	<p>Currently there is an opportunity within existing team meetings but staff shortages meant that focus of discussion is centred on operational matters. To be progressed when staffing levels improve.</p> <p>Appropriate professional relationships and collaborative working in place at management level but action is required at front-line staffing levels. Previous sessions were held in 2016 but there was a lack of attendance from SPS front-line officers due to staff shortages. Currently there are staff shortages in both SPS Officer and Nursing teams so this action will be progressed when staffing levels improve in both teams.</p> <p>Action to be submitted to the relevant workstreams for consideration and input.</p>	Tbc
				31/03/2018

	<b>Patient experience / involvement</b>	Agree programme of input with patient forum, e.g. revision of patient induction, service performance and service development	To be progressed once patient forum is in place	Tbc
<b>2</b>		Finalise performance information system which supports improvement work	Processes in place for Mental Health and Substance Misuse teams but less progress with primary care due to lack of staff. To be progressed as staffing levels improve. SMS Workstream are working on scorecard. Explore potential for score cards to be developed for other service elements.	Tbc
		Undertake audit of patient recording system to ensure consistent and effective use	To be progressed once staffing levels have improved.	Tbc
		Performance information on non-attendance available within health centre and wider establishment	This information is currently gathered but there are questions on the validity of the data as not all SPS officers have engaged with the process for refusal slips. To be reviewed and progressed in conjunction with patient forums and joint sessions with SPS, once in place.	Tbc
		Programme of regular staff team-building events with SPS in place	To be progressed once staffing levels have improved for SPS officers and within the Health Centre	Tbc
<b>3</b>	<b>Measuring and improving performance</b>	All staff have sight and ownership of performance information and are empowered to make improvements via action learning sets.	Opportunity to develop scorecards with visuals for specific service elements and make progress when staffing levels have improved and patient forums and joint sessions with SPS are in place.	Tbc

	<b>Patient experience / involvement</b>	Regular programme of patient forums in place and patient champions identified and trained.	To be progressed once patient forums fully established.	Tbc
	<b>Workforce development</b>	Student nurse placements offered within the Health Centre	To be progressed once staffing levels are sufficiently improved and appropriate supervisors for student placements have been identified and trained.	Tbc
<b>3</b>	<b>Workforce development</b>	Extended training for Health Care Support Workers to undertake roles with other professionals e.g. Occupational Therapy and Psychologists.	Possibly move into Phase 2 depending on improvement in staffing levels - Professional Lead has been identified and has provided some input to Health Care Support Workers; Consultant Clinical Psychologist for the prison expected to commence in post in January 2018.	Tbc