

# Unannounced Follow Up Medicines Management Inspection Report 10 December 2019



## Owen Mor

Type of Service: Nursing Home  
Address: 167 Culmore Road, Londonderry, BT48 8JH  
Tel No: 028 7135 3631  
Inspectors: Rachel Lloyd & Paul Nixon

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Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

## 1.0 What we look for



## 2.0 Profile of service

This is a nursing home registered to provide care for up to 81 patients with a variety of care needs as detailed in Section 3.0.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> East Eden Ltd  <b>Responsible Individual:</b> Dr Una McDonald	<b>Registered Manager:</b> Ms Joy Hynds Registration pending
<b>Person in charge at the time of inspection:</b> Ms Lynn O'Brien, Clinical Lead	<b>Date manager registered:</b> See above
<b>Categories of care:</b> Nursing Home (NH) DE – Dementia LD – Learning disability LD(E) – Learning disability – over 65 years MP – Mental disorder excluding learning disability or dementia MP(E) – Mental disorder excluding learning disability or dementia – over 65 years	<b>Number of registered places:</b> 81 comprising: 68 - NH-DE 7 - NH-LD and LD(E) accommodated in Strule Unit 6 - NH-MP and MP(E) accommodated in Erne Unit  A maximum of 68 patients in category NH-DE; 24 accommodated in the Foyle/Faughan Unit, 13 accommodated in the Roe Unit, 10 accommodated in the Derg Unit, 10 accommodated in the Mourne Unit and 11 accommodated in the Finn Unit

### 4.0 Inspection summary

An unannounced inspection took place on 10 December 2019 from 10.15 to 14.05.

This inspection was to assess the progress since the recent enforcement action and the medicines management inspections on 24 October 2019 and 19 November 2019, and to determine if the home was delivering safe, effective and compassionate care and if the service was well led with respect to the management of medicines.

The following areas were examined during the inspection:

- the availability of prescribed medicines
- the management of medicine records
- the governance arrangements for medicines management

During this inspection we were able to evidence ongoing progress in developing and implementing new systems for medicines management within the home. Evidence of good practice was found in relation to the medicine records, arrangements to ensure that there is sufficient stock of medicines and the management of controlled drugs. No areas for improvement were identified.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients experience.

#### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Lynn O'Brien, Clinical Lead and Dr Una McDonald, Responsible Individual, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

#### 4.2 Action/enforcement taken following the most recent inspection

The most recent inspection of the home was an unannounced inspection undertaken on 19 November 2019. There were no areas for improvement made as a result of the inspection. Enforcement action did not result from the findings of this inspection.

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of incidents: it was ascertained that no incidents involving medicines had been reported to RQIA since the last inspection.

During the inspection the inspectors met with the clinical lead, three other registered nurses and the responsible individual.

A sample of the following records was examined during the inspection:

- personal medication records
- medicine administration records
- the management of antibiotics
- medicines management audits
- the management of medicines on admission
- the management of controlled drugs
- medicine policies and procedures

The findings of the inspection were provided to the responsible individual and the nurse-in-charge at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 19 November 2019

The most recent inspection of the home was an unannounced care and medicines management inspection. The report had not been issued at the time of this inspection. There were no areas for improvement made as a result of the inspection.

## 6.2 Inspection findings

Satisfactory systems for the following areas of the management of medicines were observed: the availability of prescribed medicines, the completion of medicine records, the management of medicines on admission and the management of controlled drugs. A sample of audits completed by the inspectors in each unit indicated that patients were receiving their medicines as prescribed. A small number of discrepancies between personal medication records and printed medicine administration records were identified and addressed immediately.

The implementation of the change of medicines supplier and the system in use had been completed the day prior to the inspection. The transition had taken place effectively in a staged manner. The inspectors were assured that there was managerial oversight of this process.

The auditing process for medicines was discussed. A new audit system had been implemented in some units and was in place to begin in the units that had just transitioned to the new medicines system. There was evidence that any issues picked up were being addressed promptly.

Policies and procedures to reflect the new medicines systems had been reviewed and updated and were in place for staff in managing medicines in the home to refer to.

### Areas of good practice

Areas of good practice were identified in relation to the ongoing improvements in relation to the availability of prescribed medicines, the management of medicine records and the governance arrangements for medicines management

### Areas identified for improvement

No areas for improvement were identified.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

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