

# **Unannounced Enforcement Medicines Management Inspection Report 17 October 2018**



## **Glenabbey Manor**

**Type of service: Residential Care Home**  
**Address: 93 – 97 Church Road, Glengormley,**  
 **Newtownabbey, BT36 6HG**  
**Tel No: 028 9084 3601**  
**Inspector: Catherine Glover**

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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.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home with 57 beds that provides care for residents with a range of care needs as detailed in Section 3.0.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Runwood Homes Ltd  <b>Responsible Individual:</b> Mr Gavin O'Hare-Connolly	<b>Registered Manager:</b> Mrs Julie Beacom
<b>Person in charge at the time of inspection:</b> Mrs Julie Beacom	<b>Date manager registered:</b> 28 September 2018
<b>Categories of care:</b> Residential Care (RC) I – Old age not falling within any other category DE – Dementia	<b>Number of registered places:</b> 57

### 4.0 Inspection summary

An unannounced inspection took place on 17 October 2018 from 09.50 to 13.10.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005/ the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011).

The inspection sought to assess the level of compliance achieved in relation to a Failure to Comply (FTC) Notice. The areas identified for improvement and compliance with the regulation were in relation to the management of medicines and the lack of effective monitoring and governance arrangements in the home. These concerns included the admission process, the management of controlled drugs, warfarin, eye preparations, medication changes, staff competency and governance arrangements. The date of compliance with the notice was 17 October 2018.

The following FTC Notice was issued by RQIA:

FTC ref: FTC000014, issued on 10 September 2018.

Evidence was available during this inspection to validate compliance with the Failure to Comply Notice.

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

#### 4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified.

Further 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 home was reviewed. This included the following:

- Recent inspection reports and returned QIPs
- Recent correspondence with the home
- The management of medication related incidents
- Weekly monitoring reports submitted by the responsible individual

During the inspection the inspector met with three residents, one resident's relative, three care team managers (CTM), the deputy manager and the registered manager.

A poster informing visitors to the home that an inspection was being conducted was displayed.

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

- medicines requested and received
- personal medication records
- medicine administration records
- medicines disposed of or transferred
- controlled drug record book
- medicine audits
- care plans
- training records
- medicines storage temperatures

Areas for improvement identified at the last medicines management inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the person 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 3 September 2018

The most recent inspection of the home was an unannounced medicines management inspection. The completed QIP was returned and approved by the pharmacist inspector. The details were validated during this inspection.

### 6.2 Review of areas for improvement from the last medicines management inspection dated 3 September 2018

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 13(4)  <b>Stated:</b> First time  Was included in the Failure to Comply Notice FTC000014	The registered person shall ensure that all staff that have medicines management responsibilities have had appropriate training and have been assessed as competent in their role.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The registered manager provided evidence that all CTMs had received further training. Several sessions covering all of the aspects of medicines management had been scheduled and completed. The competency of the CTMs had been reassessed and only those who have successfully completed the training and competency assessment have medicines management responsibility.	

<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p> <p>Was included in the Failure to Comply Notice FTC000014</p>	<p>The registered person shall ensure that robust arrangements are in place for the management of medicines for newly admitted residents and that these are fully implemented.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>No new residents had been admitted since the previous inspection. The procedure for admitting new residents was discussed with several CTMs who were able to describe the process clearly. The readmission of one resident from hospital was examined and this had been completed accurately. New forms have been implemented to guide staff through the admission process. The registered manager and deputy manager will take the lead on all new admissions to ensure that all of the appropriate documentation is completed.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p> <p>Was included in the Failure to Comply Notice FTC000014</p>	<p>The registered person shall ensure that robust arrangements are in place for the management of medication changes and omissions and that these are fully implemented.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>The management of medication changes had been reviewed. There was only one supply of each medicine on the medicine trolley. All omissions of medicines and the reason for the omission had been clearly documented.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p> <p>Was included in the Failure to Comply Notice FTC000014</p>	<p>The registered person shall ensure that robust arrangements are in place for the management of controlled drugs and that these are fully implemented.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>The management of controlled drugs had been reviewed. The controlled drugs record book had been fully and accurately completed. All controlled drugs had been administered appropriately.</p>	<p><b>Met</b></p>



<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p> <p>Was included in the Failure to Comply Notice FTC000014</p>	<p>The registered person shall ensure that robust arrangements are in place for the management of warfarin and that these are fully implemented.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>The management of warfarin for three residents was examined. Up to date warfarin dosage instructions were held on file and the records of administration were clearly and accurately maintained.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that all medicines are removed from use and disposed of when the date of expiry is reached.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>All of the medicines that were examined during the inspection were in date. The registered manager advised of the process that has been implemented to ensure that medicines are disposed of promptly once the date of expiry is reached.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 7</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p>	<p>The registered person must ensure that the administration of inhaled medicines is closely monitored.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>Inhaled medicines were being closely monitored through the audit process to ensure that they were being administered as prescribed.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 8</b></p> <p><b>Ref:</b> Regulation 13(4)</p> <p><b>Stated:</b> First time</p> <p>Was included in the Failure to Comply Notice FTC000014</p>	<p>The registered person shall ensure that medicine records are fully and accurately completed.</p> <p><b>Action taken as confirmed during the inspection:</b></p> <p>The medicines records had been reviewed and new records had been implemented by the registered manager. These contained all of the necessary information and had been fully and accurately completed.</p>	<p><b>Met</b></p>

<b>Area for improvement 9</b>  <b>Ref:</b> Regulation 13(4)  <b>Stated:</b> First time  Was included in the Failure to Comply Notice FTC000014	The registered person must provide assurance to RQIA that medicines management processes are being monitored for effectiveness. Information on auditing arrangements, a summary of the outcomes and any remedial action taken must be provided by email from the Registered Person, on a weekly basis, to the identified pharmacist inspector in RQIA.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A comprehensive audit programme was implemented. A summary of the outcomes, training, competency assessments and incidents was emailed to RQIA on a weekly basis. The action taken to address any issues noted was detailed in the report.	

### 6.3 Inspection findings

**FTC Ref:** FTC000014

#### **Notice of failure to comply with The Residential Care Homes Regulations (Northern Ireland) 2005**

##### **Health and welfare of residents Regulation 13**

(4) Subject to paragraph (5) the registered person shall make suitable arrangements for the ordering, storage, recording, handling, safe keeping, safe administration and disposal of medicines used in or for the purposes of the home to ensure that –

- (a) any medicine that is kept in the home is stored in a secure place; and
- (b) medicine which is prescribed is administered as prescribed to the resident for whom it is prescribed, and to no other resident: and
- (c) a written record is kept of the administration of any medicine to a resident.

In relation to this notice the following seven actions were required to comply with this regulation.

The Registered Person must ensure that:

- Robust arrangements are in place for the management of controlled drugs and that these are fully implemented.
- Robust arrangements are in place for the management of medicines for newly admitted residents and that these are fully implemented.
- Medicine records are fully and accurately completed.
- Robust arrangements are in place for the management of warfarin and that these are fully implemented.



- Robust arrangements are in place for the management of medication changes and omissions and that these are fully implemented.
- All staff that have medicines management responsibilities have had appropriate training and have been assessed as competent in their role.

The Registered Person must provide assurance to RQIA that medicines management processes are being monitored for effectiveness. Information on auditing arrangements, a summary of the outcomes and any remedial action taken must be provided by email from the Registered Person, on a weekly basis, to the identified pharmacist inspector in RQIA.

The findings of the inspection and the actions taken by the service to evidence compliance is detailed in Section 6.2.

Evidence was available to validate compliance with the Failure to Comply Notice.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Number of areas for improvement	0	0

## 6.4 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notice.

## 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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