

Inspection Report

8 June 2021



Ashbrook Care Home

Type of Service: Residential Care Home

Address: 50 Moor Road, Coalisland, Dungannon, BT71 4QB

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www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Ashbrook Home Ltd Responsible Individual: Mr Marcus James Mulgrew	Registered Manager and date registered: Miss Gillian Larmour – 11 May 2018
Person in charge at the time of inspection: Miss Gillian Larmour	Number of registered places: 9
Categories of care: Residential Care (RC) I - Old age not falling within any other category	Number of residents accommodated in the residential home on the day of this inspection: 7

2.0 Inspection summary

An unannounced inspection took place on 8 June 2021 between 10.30am and 1.00pm. This inspection was conducted by a pharmacist inspector and focussed on medicines management within the home.

A review of how medicines were managed in the service found that safe systems were in place and no areas for improvement were identified. Medicine records were fully completed, medicines were stored safely and arrangements were in place to ensure that staff were trained and competent in medicines management.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included previous inspection findings, incidents and correspondence. To complete the inspection we reviewed: a sample of medicine related records, storage arrangements for medicines, staff training and the auditing systems used to ensure the safe management of medicines.

4.0 What people told us about the service

We spoke with two residents, a senior care assistant and the manager.

Residents were very complimentary about the home and the staff. They said that the staff were “wonderful” and that they went above and beyond to ensure that their needs were met. They spoke warmly about the activities co-ordinator and the fun that they had on a daily basis. Both residents said that the food was good and plentiful.

Staff were warm and friendly and throughout the inspection they were heard laughing and joking with residents; it was evident from their interactions that they knew the residents well. They were also observed to attend to residents needs promptly and provided reassurance to them when required.

The staff member we spoke with expressed satisfaction with how the home was managed. They said that they had the appropriate training to look after residents and meet their needs. They said that the home owner and manager were very supportive of staff and readily available to discuss any issues and concerns should they arise.

Feedback methods included a staff poster and paper questionnaires which were provided to the registered manager for any resident or their family representative to complete and return using pre-paid, self-addressed envelopes. At the time of issuing this report, no questionnaires had been received by RQIA.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to this residential care home was undertaken on 23 March 2021 by a care inspector; no new areas for improvement were identified and one area for improvement had been carried forward for assessment at this inspection.

Areas for improvement from the last inspection on 23 March 2021		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance summary
Area for Improvement 1 Ref: Regulation 13 (4) Stated: First time	The registered person shall ensure that the arrangements for the management of controlled drugs are reviewed with respect to storage, recording and stock balance checks performed.	Met

	<p>Action taken as confirmed during the inspection: A controlled drug cabinet for the residential care home had been installed. Controlled drugs were stored appropriately, records had been fully completed and reconciliation checks were completed at each shift change.</p>	
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5.2 Inspection findings

5.2.1 What arrangements are in place to ensure that medicines are appropriately prescribed, monitored and reviewed?

Residents in care homes should be registered with a general practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times the residents' needs will change and therefore their medicines should be regularly monitored and reviewed. This is usually done by the GP, the pharmacist or during a hospital admission.

Residents in the home were registered with a GP and medicines were dispensed by the community pharmacist.

Personal medication records were in place for each resident. These are records used to list all of the prescribed medicines, with details of how and when they should be administered. It is important that these records accurately reflect the most recent prescription to ensure that medicines are administered as prescribed and because they may be used by other healthcare professionals, for example, medication reviews and hospital appointments.

The personal medication records reviewed at the inspection were accurate and up to date. In line with best practice, a second member of staff had checked and signed the personal medication records when they were written and updated to provide a double check that they were accurate. The medicines for one resident had changed in the days before the inspection and the personal medication record was unclear. This was discussed with the manager who agreed to clarify the medicine regimen and update immediately following the inspection.

Copies of residents' prescriptions/hospital discharge letters were retained in the home so that any entry on the personal medication record could be checked against the prescription. This is good practice.

The management of pain was discussed. Staff advised that they were familiar with how each resident expressed their pain and that pain relief was administered when required. Pain assessments were completed throughout the day when required.

5.2.2 What arrangements are in place to ensure that medicines are supplied on time, stored safely and disposed of appropriately?

Medicines stock levels must be checked on a regular basis and new stock must be ordered on time. This ensures that the resident's medicines are available for administration as prescribed. It is important that they are stored safely and securely so that there is no unauthorised access.

The records inspected showed that medicines were available for administration when residents required them. Staff advised that they had a good relationship with the community pharmacist and that medicines were supplied in a timely manner.

The medicines storage areas were observed to be securely locked to prevent any unauthorised access. They were tidy and organised so that medicines belonging to each resident could be easily located. A medicine refrigerator and controlled drugs cabinet were available for use as needed. The manager was advised that the medicine trolley should be chained to the wall when not in use. It was agreed that this would be addressed following the inspection.

5.2.3 What arrangements are in place to ensure that medicines are appropriately administered within the home?

It is important to have a clear record of which medicines have been administered to residents to ensure that they are receiving the correct prescribed treatment.

Within the home, a record of the administration of medicines is completed on pre-printed medicine administration records (MARs) or occasionally handwritten MARs, when medicines are administered to a resident. A sample of these records was reviewed and were found to have been fully and accurately completed.

Controlled drugs are medicines which are subject to strict legal controls and legislation. They commonly include strong pain killers. The receipt, administration and disposal of controlled drugs are recorded in a controlled drug record book. Suitable arrangements were in place for the management of controlled drugs.

Management and staff audited medicine administration on a regular basis within the home. A range of audits were carried out. The date of opening was recorded on all medicines so that they could be easily audited. This is good practice.

5.2.4 What arrangements are in place to ensure that medicines are safely managed during transfer of care?

People who use medicines may follow a pathway of care that can involve both health and social care services. It is important that medicines are not considered in isolation, but as an integral part of the pathway, and at each step. Problems with the supply of medicines and how information is transferred put people at increased risk of harm when they change from one healthcare setting to another.

The admission process for residents new to the home or returning to the home after receiving hospital care was reviewed. Robust arrangements were in place to ensure that an up to date

list of medicines was obtained. Records had been fully and accurately completed. Medicines had been accurately received into the home and administered in accordance with the most recent directions.

5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?

Occasionally medicines incidents occur within homes. It is important that there are systems in place which quickly identify that an incident has occurred so that action can be taken to prevent a recurrence and that staff can learn from the incident.

There had been no recent medicine related incidents. The audit system in place helps staff to identify medicine related incidents. Management and staff were familiar with the type of incidents that should be reported.

5.2.6 What measures are in place to ensure that staff in the home are qualified, competent and sufficiently experienced and supported to manage medicines safely?

To ensure that residents are well looked after and receive their medicines appropriately, staff who administer medicines to residents must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and that staff are supported.

Staff in the home had received a structured induction which included medicines management when this forms part of their role. Competency had been assessed following induction and annually thereafter. A written record was completed for induction and competency assessments.

6.0 Conclusion

The inspection sought to assess if the home was delivering safe, effective and compassionate care and if the home was well led in relation to medicines management.

The outcome of this inspection concluded that the area for improvement identified at the last medicines management inspection had been addressed. No new areas for improvement were identified. We can conclude that overall that the residents were being administered their medicines as prescribed by their GP.

Based on the inspection findings and discussions held we are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the manager/management team.

We would like to thank the residents, relatives/representatives and staff for their assistance throughout the inspection.

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Miss Gillian Larmour, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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