

Inspection Report

22 November 2021



Bramley Cottage

Type of service: Residential Care Home
Address: 95 Cathedral Road, Lower Desart lane, Armagh, BT61 8AR
Telephone number: 028 3751 7840

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Amore (Watton) Limited Responsible Individual: Miss Sarah Elizabeth Perez (acting) and Mrs Nicola Cooper	Registered Manager: Mrs Aoife Corr Date registered: Acting
Person in charge at the time of inspection: Mrs Aoife Corr	Number of registered places: 6
Categories of care: Residential Care (RC) LD – learning disability LD(E) – learning disability – over 65 years	Number of residents accommodated in the residential care home on the day of this inspection: 1
Brief description of the accommodation/how the service operates: This home is a residential care home which provides social care for up to six persons living with learning disabilities. The home comprises communal living areas, kitchen, six ensuite bedrooms, a multi-sensory room and a secure garden to the rear of the property.	

2.0 Inspection summary

An unannounced inspection took place on 22 November 2021, between 10.20am and 11.50am by a pharmacist inspector. This inspection focused on medicines management within the home.

Robust arrangements were in place for the management of medicines. Medicine records were fully and accurately completed, medicines had been administered as prescribed and were stored appropriately. Staff were trained and competent in the management of medicines. No new areas for improvement were identified during this inspection.

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 information held by RQIA about this home was reviewed. This included previous inspection findings, incidents and correspondence. To complete the inspection the following were 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

The inspector spoke with the senior care assistant on duty and the manager. All staff were wearing face masks and other personal protective equipment (PPE) as needed. PPE signage was displayed.

Staff were warm and friendly and it was evident from conversation that that they knew the resident well. The inspector did not speak to the resident as they had decided to remain in their room on the morning of the inspection.

Feedback methods included a staff poster and paper questionnaires which were provided for the resident or their family representative to complete and return using pre-paid, self-addressed envelopes. At the time of issuing this report, no completed 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?

Areas for improvement from the last care inspection on 22 July 2022		
Action required to ensure compliance with Residential Care Homes Minimum Standards (2011)		Validation of compliance summary
Area for Improvement 1 Ref: Standard 23.1 Stated: First time	The registered person shall ensure staff who are newly appointed, agency staff and students are required to complete structured orientation and induction.	Carried forward to the next inspection
	Action taken as confirmed during the inspection: There have been no new staff since the last inspection, therefore this area for improvement is carried forward to be reviewed at the next inspection.	

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.

The current resident in the home was registered with a GP and medicines were dispensed by the community pharmacist.

Personal medication records 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 at medication reviews or hospital appointments.

The personal medication record reviewed at the inspection was accurate and up to date. In line with best practice, a second member of staff had checked and signed the personal medication record when it was written and updated to provide a double check that it was accurate.

Copies of the resident's 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.

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 and disposed of promptly to ensure that a discontinued medicine is not administered in error.

The records inspected showed that medicines were available for administration.

The medicines storage area was observed to be securely locked to prevent any unauthorised access. It was tidy and organised so that medicines could be easily located. A medicine refrigerator and controlled drugs cabinet were available for use as needed.

Discontinued medicines were returned to the community pharmacy for disposal and records maintained.

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.

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 and a running stock balance was completed so that they could be easily audited.

5.2.4 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.

The audit system in place would help staff to identify medicine related incidents. There have been no medicine related incidents reported to RQIA since the home was registered in April 2021.

5.2.5 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 they are supported. Policies and procedures should be up to date and readily available for staff use.

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 is planned annually thereafter. A written record was completed for induction and competency assessments.

Policies and procedures for the management of medicines were held on file in the treatment room for staff reference.

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.

The outcome of this inspection concluded that robust arrangements were in place for the management of medicines. No new areas for improvement were identified. Based on the inspection findings and discussions held, RQIA was assured that this service is providing safe and effective care in a caring and compassionate manner; and that it is well led by the manager.

RQIA would like to thank the resident and staff for their assistance throughout the inspection.

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no new areas for improvement being identified.

	Regulations	Standards
Total number of Areas for Improvement	0	1*

* the total number of areas for improvement includes one that is carried forward for review at the next inspection.

Quality Improvement Plan	
Action required to ensure compliance with Residential Care Homes Minimum Standards (2021)	
<p>Area for Improvement 1</p> <p>Ref: Standard 23.1</p> <p>Stated: First time</p> <p>To be completed by: 29 July 2021</p>	<p>The registered person shall ensure staff who are newly appointed, agency staff and students are required to complete structured orientation and induction.</p>
	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>



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Authority

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