



The Regulation and
Quality Improvement
Authority

80 Malone Road
RQIA ID: 1005
80 Malone Road
Belfast
BT9 5BU

Inspector: Cathy Wilkinson
Inspection ID: IN022460

Tel: 028 9504 0370
Email: marian.lawther@belfasttrust.hscni.net

**Unannounced Medicines Management Inspection
of
80 Malone Road

16 October 2015**

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1 Summary of Inspection

An unannounced medicines management inspection took place on 16 October 2015 from 10:30 to 12:00.

The management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no significant areas of concern though one area for improvement was identified and is set out in the quality improvement plan (QIP) within this report.

This inspection was underpinned by the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011).

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last medicines management inspection on 28 May 2012.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	1

The details of the QIP within this report were discussed with the Mr Paul Braniff, Senior Residential Worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Belfast Health and Social Care Trust Mr Martin Joseph Dillon	Registered Manager: Mrs Marian Lawther
Person in Charge of the Home at the Time of Inspection: Mr Paul Braniff (Senior Residential Worker)	Date Manager Registered: 1 April 2005
Categories of Care: RC-LD, RC-LD(E)	Number of Registered Places: 14
Number of Residents Accommodated on Day of Inspection: 13	Weekly Tariff at Time of Inspection: Trust rates

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the last medicines management inspection and to determine if the following standards and themes have been met:

Standard 30: Management of medicines

Standard 31: Medicine records

Standard 33: Administration of medicines

Theme 1: Medicines prescribed on a “when required” basis for the management of distressed reactions are administered and managed appropriately.

Theme 2: Medicines prescribed for the management of pain are administered and managed appropriately.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

The inspector reviewed the management of medicine related incidents reported to RQIA since the last medicines management inspection.

The following records were examined:

Medicines requested and received

Personal medication records

Medicine administration records

Medicines disposed of or transferred

Medicine audits

Policies and procedures

Training records

Medicines storage temperatures

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 16 October 2014. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 13(4) Stated once	The registered manager must review the addition of medicines to the personal medication records to ensure that they are updated in a timely manner.	Met
	Action taken as confirmed during the inspection: Personal medication records had been fully and accurately completed. They had been updated in a timely manner.	
Requirement 2 Ref: Regulation 13(4) Stated once	The registered manager must ensure that when the medicines refrigerator is in use, the temperature is maintained within the acceptable range of +2°C to +8°C.	Met
	Action taken as confirmed during the inspection: The temperature of the medicines refrigerator was monitored when it was in use. It had been maintained within the required range.	
Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 30 Stated once	The registered manager should ensure that written Standard Operating Procedures are available for the management of controlled drugs.	Met
	Action taken as confirmed during the inspection: Standard Operating Procedures for the management of controlled drugs were in place.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

80 Malone Road was providing residential care for eight permanent residents and the rest of the residents were receiving respite care.

The majority of the audits which were completed at the inspection produced satisfactory outcomes indicating that the medicines had been administered as prescribed. Several audits on liquid medicines showed discrepancies.

Systems were in place to ensure medicines were available for each resident. All medicines audited during the inspection were available for administration.

The senior residential worker advised that robust arrangements were in place to ensure the safe management of medicines during a resident's admission to the home; an up to date personal medication record was in place for each resident. Written confirmation of the resident's medicine regime was obtained and held on file for all new admissions. Parents or carers were responsible for ensuring that any amendments were made to the personal medication records by the resident's general practitioner prior to a respite stay.

The medication administration records had been maintained in a satisfactory manner.

Records for the medicines received and returned had been accurately maintained.

Schedule 2 and 3 controlled drugs had not been in use since the last medicines management inspection, therefore the controlled drug record book was not examined. Extra records for the administration of some schedule 4 controlled drugs were in place. This is good practice.

Is Care Effective? (Quality of Management)

Policies and procedures for the management of medicines, including controlled drugs were available.

The senior residential worker advised that medicines were being managed by staff who had been trained and deemed competent to do so; there was a training matrix in place to ensure that training was up to date. Update training on the management of medicines was provided regularly. Staff had also received training in the management of PEG tubes and emergency treatment of epilepsy. The senior residential worker confirmed that there was a system of regular supervisions and annual competency assessment.

The senior residential worker advised that a controlled drug may be prescribed in the coming weeks. Arrangements were being made to ensure that training would be in place for staff prior to this happening. It was suggested by the inspector that a refresher session on completing the necessary records may be of benefit since the staff in the home had not managed controlled drugs for a number of years.

There were systems in place to audit the practices for the management of medicines. The registered manager completed an audit monthly and the outcomes and action plan were communicated to staff. Good outcomes were observed. However these audits focussed on the medicines that had been supplied in the 28 day blister packs. Discrepancies were noted during this inspection in liquid medicines. It was also suggested that the medicines could be audited at the end of a period of respite to ensure that they had been administered as prescribed.

There were procedures in place to report and learn from medicine related incidents that had occurred in the home. The medicine incident reported to RQIA had been managed appropriately.

Is Care Compassionate? (Quality of Care)

Up to date epilepsy management plans were in place where appropriate.

Appropriate advice had been sought for those residents who required medicines to be administered covertly.

There were no residents in the home that required the administration of “when required” medicines for the management of distressed reactions, therefore this theme could not be examined.

The senior residential worker advised that no residents required regular pain relief; paracetamol was administered when required for some residents. The senior residential worker advised that staff were knowledgeable in managing pain relief.

Areas for Improvement

The auditing arrangements within the home should be broadened to ensure that the system is robust and that medicines not contained within the 28 day blister packs and liquid medicines are included. A recommendation was made.

Number of Requirements:	0	Number of Recommendations:	1
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5.4 Additional Areas Examined

Storage of medicines was observed to be tidy and organised.

The maximum, minimum and current temperature of the medicines refrigerator was monitored each day when in use and these were within the required range.

6. Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Mr Paul Braniff, Senior Residential Worker, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The DHPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Person/Registered Manager

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to pharmacists@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Recommendations			
Recommendation 1 Ref: Standard 30 Stated: First time To be Completed by: 15 November 2015	It is recommended that the auditing system within the home is reviewed and revised. Response by Registered Person(s) Detailing the Actions Taken: The medication auditing system has been reviewed and now includes all the liquid medication dispensed within the home. Records available for inspection. Monthly audits take place. The last 2 have been 18 th of October and 17 th November.		
Registered Manager Completing QIP	Vanessa Grattan	Date Completed	10/11/2015
Registered Person Approving QIP	Martin Dillon	Date Approved	23/11/2015
RQIA Inspector Assessing Response	Cathy Wilkinson	Date Approved	26/11/2015

Please ensure the QIP is completed in full and returned to pharmacists@rqia.org.uk from the authorised email address