

DAY CARE SETTING MEDICINES MANAGEMENT INSPECTION REPORT

Inspection No: IN020791

Establishment ID No: 11170

Name of Establishment: The Laurels' Day Centre

Date of Inspection: 5 February 2015

Inspector's Name: Paul Nixon

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT

Tel: 028 9051 7500 Fax: 028 9051 7501

1.0 GENERAL INFORMATION

Name of establishment:	The Laurels' Day Centre		
Type of establishment:	Day Care Setting		
Address:	Dromalane Road Newry BT35 8AP		
Telephone number:	(028) 3026 1570		
E mail address:	laurels.centre@southerntrust.hscni.net		
Registered Organisation/	Southern HSC Trust /		
Registered Provider:	Mrs Anne Mairead McAlinden		
Registered Manager:	Ms Carmel McGrath (Registered Manager)		
Person in charge of the home at the time of Inspection:	Mrs Marita Higgins (Nurse in Day Care)		
Categories of care:	DCS-LD		
Number of registered places:	78		
Number of service users accommodated on day of inspection:	50		
Date and time of current medicines management inspection:	5 February 2015 10:00 to 11:15		
Name of inspector:	Paul Nixon		
Date and type of previous medicines management inspection:	28 February 2012 Announced		

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect day care settings. A minimum of one inspection per year is required.

This is a report of an announced medicines management inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection are being met.

PURPOSE OF THE INSPECTION

The purpose of this inspection was to consider whether the service provided to service users was in accordance with their assessed needs and preferences and was in compliance with legislative requirements and current minimum standards, through a process of evaluation of available evidence.

RQIA aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations. For this reason, annual inspection involves in-depth examination of a limited number of aspects of service provision, rather than a less detailed inspection of all aspects of the service.

The aims of the inspection were to examine the policies, practices and monitoring arrangements for the management of medicines in the establishment, and to determine and assess the establishment's implementation of the following:

The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003

The Day Care Setting Regulations (Northern Ireland) 2007

The Department of Health, Social Services and Public Safety (DHSSPS) Day Care Settings Minimum Standards (January 2012)

Other published standards which guide best practice may also be referenced during the inspection process.

METHODS/PROCESS

Discussion with Mrs Marita Higgins (Nurse in Day Care)
Review of medicine records
Observation of storage arrangements
Spot check on policies and procedures
Evaluation and feedback

This announced medicines management inspection was undertaken to examine the arrangements in place for the recording, safekeeping, handling and disposal of medicines.

HOW RQIA EVALUATES SERVICES

The inspection sought to establish the level of compliance being achieved with respect to the following DHSSPS Day Care Settings Minimum Standards (2012):

Standard 29: Management of Medicines

Standard Statement - Medicines are handled safely and securely

Standard 30: Medicine Records

Standard Statement - Medicine records comply with legislative requirements and current best practice

Standard 31: Medicines Storage

Standard Statement - Medicines are safely and securely stored

Standard 32: Administration of Medicines

Standard Statement - Medicines are safely administered in accordance with the prescribing practitioner's instructions

An outcome level was identified to describe the service's performance against each criterion that the inspectors examined. Table 1 sets the definitions that RQIA has used to categorise the service's performance:

Guidance - Compliance statements				
Compliance statement Definition		Resulting Action in Inspection Report		
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report		
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report		
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report		
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report		
4 - Substantially Compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report		
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and being made within the inspection report.		

3.0 PROFILE OF SERVICE

The Laurels' Day Centre is a purpose-built centre renovated and refurbished in the late 1990s. It is a single storey detached building within a complex of buildings providing a range of health and social care services primarily provided by the Southern Health and Social Care Trust.

The centre provides day care to up to 78 clients with various Learning Disabilities from Newry, South Down and South Armagh areas.

4.0 EXECUTIVE SUMMARY

An announced medicines management inspection of The Laurels' Day Centre was undertaken by Paul Nixon, RQIA Pharmacist Inspector, on 5 February 2015 between 10:00 and 11:15. This summary reports the position in the day care setting at the time of the inspection.

The purpose of this inspection was to consider whether the service provided to service users was in compliance with legislative requirements and current minimum standards, through a process of evaluation of the available evidence. The inspector examined the arrangements for medicines management within the home and focused on the four medicine standards in the DHSSPS Day Care Settings Minimum Standards (2012):

- Standard 29: Management of Medicines
- Standard 30: Medicine Records
- Standard 31: Medicines Storage
- Standard 32: Administration of Medicines.

During the course of the inspection, the inspector met with Mrs Marita Higgins, Nurse in Day Care. The inspector observed practices for medicines management in the home, inspected storage arrangements for medicines and examined a selection of medicine records.

This inspection indicated that the arrangements for the management of medicines in The Laurels' Day Centre are compliant with legislative requirements and best practice guidelines. The registered manager and staff are commended for their efforts.

No requirements or recommendations were made at the previous medicines management inspection on 28 February 2012.

Medicines are handled safely and securely.

Medicine records comply with legislative requirements and current best practice.

Medicines are safely and securely stored.

Appropriate arrangements are in place to ensure that medication is safely administered to the service user in accordance with the prescribing practitioner's instructions

The inspection attracted no requirements or recommendations.

The inspector would like to thank the nurse in day care for her assistance and co-operation throughout the inspection.

5.0 FOLLOW-UP ON PREVIOUS ISSUES

Issues arising during previous medicines management inspection on 28 February 2012:

No requirements or recommendations were made.

6.0 MEDICINES MANAGEMENT REPORT

6.1 Management of Medicines

The day care setting has a written policy and procedures detailing the activities concerned with the management of medicines.

The management of medicines is included in the induction programme for those staff who will administer them. The nurse in day care confirmed that the impact of medicines management training is evaluated as part of the quality improvement process, and through supervision and appraisal of staff. Staff attend refresher medicines management training at least once every three years. Evidence was provided that a record is kept of the medicines management training, including refresher training, completed by staff.

There was recorded evidence to confirm that the staff members who manage medicines are trained and competent. Staff competencies are reviewed annually by the nurse in day care.

Robust systems are in place for auditing the arrangements for the management of medicines. Each prescribed medicine is audited by the nurse in day care on a monthly basis and records of the audit activity are maintained. A running stock balance is also maintained of each medicine. The evidence indicated that the audit activity had produced good outcomes; which was reflected during the inspection.

There is a policy and procedure detailing the arrangements for confirming medication regimes when service users require medication to be administered in the day centre. When a service user is referred for day care, it is the responsibility of the referral agent to carry out a medicines management assessment. This involves liaising with the day care facility, the general medical practitioner, the service user and their family/carers. A medicines management assessment form is completed for any service user who requires medication to be administered whilst attending the day centre. Any changes in medicine regimes are confirmed in writing by the prescriber. An information leaflet on medication in day care is provided to the service user and family/carer.

New supplies of medications are requested, in writing, by the staff member that is responsible for the service user's medication needs.

When discontinued or if unfit for use, medicines held for services users are returned to either the carer or to a community pharmacy for disposal.

There is a written policy on the management of medication errors and incidents.

The records in place for the use of a 'when required' anxiolytic medication in the management of distressed reactions were examined for one service user. The care plan detailed the circumstances under which the medicine should be administered. The parameters for administration were recorded on the personal medication record. The administrations were recorded on the medication administration record and in the progress notes.

COMPLIANCE LEVEL: Compliant

6.2 Medicine Records

Medicine records comply with legislative requirements and current best practice.

The following records are maintained:

- Medicines received;
- Medicines prescribed;
- Medicines administered:
- Medicines returned to either the community pharmacy or parent/carer for disposal.

There were no controlled drugs.

COMPLIANCE LEVEL: Compliant

6.3 Medicine Storage

Medicines were observed to be safely and securely stored in a locked metal medicines cabinet, under conditions that conform to statutory and manufacturers' requirements.

Suitable arrangements are in place regarding the key control for medicines.

COMPLIANCE LEVEL: Compliant

6.4 Administration of Medicines

Satisfactory arrangements are in place to ensure that medication is safely administered to the service users in accordance with the prescribing practitioners' instructions.

Each of the medicines being held in the day care setting was audited and a good correlation was observed between the dosage instructions, patterns of administration and stock balances.

COMPLIANCE LEVEL: Compliant

7.0 QUALITY IMPROVEMENT PLAN

As no requirements or recommendations were made following the inspection a Quality Improvement Plan has not been appended on this occasion. The registered manager/provider is asked to please complete and return a copy of the signature page at the end of the report for our records by **13 March 2015.**

Enquiries relating to this report should be addressed to:

Paul W Nixon
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT

Inspection number: IN020791



NAME OF REGISTERED MANAGER

No requirements or recommendations resulted from the **announced medicines management** inspection of **The Laurels' Day Centre** which was undertaken on **5 February 2015** and I agree with the content of the report.

Please provide any additional comments or observations you may wish to make below:

COMPLETING	C Mª Charles	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	Hedis Cailly	
	4	
Approved by:	Date	

RQIA ID:11170/Insp: IN020791



RQIA Inspector Assessing Response	Paul W. Nixon	Date Approved	5/10/2015
-----------------------------------	---------------	------------------	-----------