

# Unannounced Follow Up Medicines Management Inspection Report 1 August 2017



## Fairview & Craigdene Residential Care Home

**Type of Service: Residential Care Home**  
**Address: 24a Trench Road, Waterside, Londonderry, BT47 3UB**  
**Tel No: 028 7134 2147**  
**Inspector: Catherine Glover**

[www.rgia.org.uk](http://www.rgia.org.uk)

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 that provides care for up to 26 residents with a learning disability.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Charline Care Homes Ltd  <b>Responsible Individual:</b> Gordon Graham Wilkinson	<b>Registered Manager:</b> See below
<b>Person in charge at the time of inspection:</b> Mr Gordon Graham Wilkinson	<b>Date manager registered:</b> Mr Gordon Graham Wilkinson (acting – no application)
<b>Categories of care:</b> Residential LD – Learning disability LD(E) – Learning disability – over 65 years	<b>Number of registered places:</b> 26

### 4.0 Inspection summary

An unannounced inspection took place on 1 August 2017 from 10.50 to 13.20.

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

Following an unannounced medicine management inspection on 27 March 2017 RQIA was concerned regarding the overall governance of medicines management within the home.

These issues were discussed with the registered person at a serious concerns meeting in RQIA offices on 7 April 2017. Following the assurances provided at that meeting, RQIA decided to allow a period of time to demonstrate improvement.

This inspection was to assess progress with the issues raised.

The following areas were examined during the inspection:

- Previous inspection outcomes
- Audit and governance systems
- Record keeping
- Staff training

The outcome of this inspection showed that all of these concerns had been satisfactorily addressed and the management of the home were commended for their effort. The need to maintain these standards was discussed. No areas for improvement were identified as a result of this inspection.

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
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Graham Wilkinson, Registered Person, as part of the inspection process and can be found in the main body of the report.

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

## 4.2 Action/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP no further actions required to be taken following the most recent inspection on 28 March 2017.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of medicine related incidents reported to RQIA since the last medicines management inspection.

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

During the inspection we met with one resident, three members of staff, and the registered person who is also currently the acting manager.

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
- policies and procedures
- care plans
- training records
- medicines storage temperatures

Areas for improvements 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 28 March 2017

The most recent inspection of the home was an unannounced care inspection.

The completed QIP was returned and approved by the care inspector.

### 6.2 Review of areas for improvement from the last medicines management inspection dated 27 March 2017

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> Third time	A robust auditing system for the management of medicines must be developed and implemented.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A robust auditing system has been developed and implemented. It is completed regularly and an action plan produced following completion. The action plan details the improvements required and who is responsible for completing it. It is signed off by the registered manager once it has been completed.	
<b>Area for improvement 2</b> <b>Ref:</b> Regulation 13 (4) <b>Stated:</b> Third time	Personal medication records must be fully and accurately maintained at all times	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The personal medication records had been reviewed. All were up to date and contained all of the required information.	

<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 13 (4)</p> <p><b>Stated:</b> Third time</p>	<p>Medication administration records must be fully and accurately maintained.</p> <p><b>Action taken as confirmed during the inspection:</b> All of the medication administration records that were examined had been fully and accurately completed. Codes for non-administration had been used appropriately and explanations of the code and the administration of “when required” medicines were provided on the back of the record sheets.</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> Second time</p>	<p>The responsible person must make the necessary arrangements to ensure that the temperatures of the medicine refrigerators maintained within the accepted range of 2°C to 8°C for medicines which require cold storage.</p> <p><b>Action taken as confirmed during the inspection:</b> The storage of medicines which required refrigeration had been reviewed and revised. These medicines were stored in a locked box within the refrigerator in the kitchen. The refrigerator temperatures were monitored and recorded daily. They were within the required range.</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>The registered provider must ensure that further training in the management of medicines is provided for relevant staff and that competency regarding the management of medicines is assessed.</p> <p><b>Action taken as confirmed during the inspection:</b> A training programme has been devised and rolled out to all staff. Records were provided for inspection.</p>	<p><b>Met</b></p>

<b>Action required to ensure compliance with The Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b> <b>Ref:</b> Standard 30 <b>Stated:</b> Second time	The registered manager should share the Quality Improvement Plan with all relevant staff and incorporate this into the home's audit process.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The quality improvement plan was incorporated into the new audit process and shared with all staff.	
<b>Area for improvement 2</b> <b>Ref:</b> Standard 31 <b>Stated:</b> Second time	The registered manager should ensure that completed medicine records are securely archived and are readily retrievable as needed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Medicines records were appropriately archived and easily retrievable.	
<b>Area for improvement 3</b> <b>Ref:</b> Standard 31 <b>Stated:</b> Second time	The responsible person should review the management of distressed reactions to ensure that the relevant records are maintained.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The management of distressed reactions had been reviewed and revised. There was a personalised care plan in place for each relevant resident which described the action to be taken should the resident become distressed and directed when the administration of medication was appropriate.	
<b>Area for improvement 4</b> <b>Ref:</b> Standard 30 <b>Stated:</b> First time	The registered provider should review the administration of bisphosphonates to ensure that they are administered in accordance with the manufacturers' instructions.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Bisphosphonates were observed to be appropriately administered.	

<b>Area for improvement 5</b> <b>Ref:</b> Standard 30 <b>Stated:</b> First time	The registered provider should review the arrangements for the administration and recording the specified medicine to ensure that it is administered as prescribed.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The specified medicine was not being administered at the time of the inspection due to the absence of the resident from the home. The previous records of administration were observed and it had been administered appropriately. Refusals and non-administration had also been appropriately recorded.	
<b>Area for improvement 6</b> <b>Ref:</b> Standard 30 <b>Stated:</b> First time	The registered provider should review the management of medication related incidents to ensure that RQIA are notified when appropriate.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The management of medication related incidents had been reviewed. One medicine incident had been reported since the previous inspection and this had been managed appropriately.	

### 6.3 Inspection findings

#### Previous inspection outcomes

This inspection found that all of the areas for improvement that were identified at the last medicines management inspection had been addressed. The registered provider has invested significant time to ensure that the systems in place within the home have been reviewed (see section 6.2).

#### Audit and governance systems

The auditing system within the home has been comprehensively revised to ensure that all aspects of the management of medicines are included. This audit is completed monthly by management and an action plan is produced. This is discussed with staff at the managers meeting which is held weekly in the home. Staff responsible for completing the action plan are identified and the action plan is signed off by the staff and management once completed. Improvement was noted in each consecutive action plan that has been completed in the last three months.

## Medicine Records

Significant improvement was noted in the maintenance of medicine records. Personal medication records had been reviewed for each resident. They were up to date and contained all of the required information. The medicine administration records were fully and accurately completed. Any non-administration was appropriately explained. The administration of “when required” medicines was accompanied by an explanatory note on the back of the record sheet.

Additional record sheets were in place for any specialised medicines. This ensured that any discrepancy was easily identified and remedial action could be taken.

## Training

All staff have been fully trained in the new policies and procedures, the maintenance of records and the revised audit process.

## Areas of good practice

Areas of good practice were identified throughout the inspection in relation of the management of medicines, medicine records and the administration of medicines.

## Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 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.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit [www.rqia.org.uk/webportal](http://www.rqia.org.uk/webportal) or contact the web portal team in RQIA on 028 9051 7500.



The Regulation and  
Quality Improvement  
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email [info@rqia.org.uk](mailto:info@rqia.org.uk)

Web [www.rqia.org.uk](http://www.rqia.org.uk)

 @RQIANews