



The Regulation and
Quality Improvement
Authority

DAY CARE SETTING

MEDICINES MANAGEMENT INSPECTION REPORT

Inspection No: IN020110
Establishment ID No: 11313
Name of Establishment: The Omagh Centre
Date of Inspection: 9 July 2014
Inspector's Name: Paul Nixon

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
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1.0 GENERAL INFORMATION

Name of establishment:	The Omagh Centre
Type of establishment:	Day Care Setting
Address:	4a Deverney Road Omagh Co Tyrone BT79 0JJ
Telephone number:	(028) 8224 4001
E mail address:	eddie.mccrystal@westerntrust.hscni.net
Registered Organisation/ Registered Provider:	Western Health and Social Care Trust Ms Elaine Way CBE
Registered Manager:	Mr Edmund McCrystal
Persons in charge of the day care setting at the time of Inspection:	Niall Campbell, Sean Gormley and Geraldine McKenna (Senior Day Care Workers)
Categories of care:	DCS-LD
Number of registered places:	65
Number of service users accommodated on day of inspection:	50
Date and time of current medicines management inspection:	9 July 2014 10:00 – 12:00
Name of inspector:	Paul Nixon
Date and type of previous medicines management inspection:	Not applicable

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 (2012).

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

METHODS/PROCESS

Discussion with Niall Campbell, Sean Gormley and Geraldine McKenna (Senior Day Care Workers)

Review of medicine records

Observation of storage arrangements

Spot check on policies and procedures

Evaluation and feedback

This is the first medicines management inspection to this establishment. This announced 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

Omagh Day Care centre is a Western Health and Social Care Trust facility for people with a learning disability and can accommodate up to a maximum of 50 service users each day. The centre has recently been refurbished following a fire in 2008 when services were provided over two sites.

The overall aim of the service is to provide service users, where possible, with on-going educational opportunities and support which is underpinned by personal, social and vocational training, for example: sports and leisure, social and life skills, self-advocacy and development of new interests.

There are four units in which service users are accommodated according to the level of care and supervision required.

The centre is open from 08.45 hours until 16.45 hours each weekday and closes on public holidays, two weeks in July and periodic closure for staff training and development purposes.

4.0 EXECUTIVE SUMMARY

An announced medicines management inspection of The Omagh Centre was undertaken by Paul Nixon, RQIA Pharmacist Inspector, on 9 July 2014 between 10:00 hours and 12:00 hours. 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 day care setting and focused on the four medicine standards in the DHSSPS Day Care Settings Minimum Standards:

- 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 Niall Campbell, Sean Gormley and Geraldine McKenna (Senior Day Care Workers). The inspector observed practices for medicines management in the day care setting, inspected storage arrangements for medicines and examined a selection of medicine records.

This inspection indicated that the arrangements for the management of medicines are substantially compliant with legislative requirements and best practice guidelines. The outcome of the medicines management inspection found no areas of concern, though several areas for improvement were noted.

RQIA has monitored the management of medicines in the day care setting through the reporting of any medicine incidents and discussion with care inspectors.

Policies and procedures for the management of medicines are in place. However, these were last reviewed by the Western Health and Social Care Trust (trust) in June 2007 and were in need of some revision e.g. there were no Standard Operating Procedures for the management of controlled drugs. The trust should review the medicines management policies and procedures in order to ensure that they cover each of the activities concerned with the management of medicines.

Records of staff training in the management of medicines are maintained. The senior day care workers expressed their concern that there has been no trust supported medicines management training for several years. They stated that any staff training had been facilitated by them without them having received any formal training to perform this role. The trust should review the medicines management training support provided to staff.

A record is maintained of the initial medicines management competency and capability assessments of staff members at the end of their induction. The senior day care workers stated that subsequent medicines management capability and competency assessments

are not performed. Annual competency and capability assessments should be performed on staff managing medicines.

Care plans pertaining to specific areas in medicines management were in place e.g. epilepsy, covert administration of medicines and dysphagia.

There are robust systems in place to audit the practices of medicines management.

Medicine records are well maintained and readily facilitated the inspection process.

Medicines are stored safely and securely and key control is appropriate.

Medicines are supplied and labelled appropriately.

The inspection attracted three recommendations. The recommendations are detailed in the Quality Improvement Plan.

The inspector would like to thank the senior day care workers for their assistance and co-operation throughout the inspection.

5.0 MEDICINES MANAGEMENT REPORT

5.1 Management of Medicines

The day care setting is substantially compliant with this standard.

The registered manager maintains a satisfactory system for the management of medicines, in accordance with legislative requirements, professional standards and DHSSPS guidance. The registered manager and staff are commended for their efforts.

Written policies and procedures for the management and administration of medicines are in place. However, these were last reviewed by the trust in June 2007 and were in need of some revision e.g. there were no Standard Operating Procedures for the management of controlled drugs. The trust should review the medicines management policies and procedures in order to ensure that they cover each of the activities concerned with the management of medicines. A recommendation is stated.

Staff managing medicines are provided with induction training and, thereafter, update training at approximately annual intervals. Training is provided by the senior day care workers. Training on the administration of buccal midazolam is provided both at the update training and at first aid training. Dysphagia training has been provided by the speech and language therapist. Training on the administration of nutritional feeds via gastrostomy tube is provided by representatives from the manufacturing companies. Records of staff training in the management of medicines are maintained. The senior day care workers expressed their concern that there has been no trust supported medicines management training for several years. They stated that any staff training had been facilitated by them without them having received any formal training to perform this role. The trust should review the medicines management training support provided to staff. A recommendation is stated.

A record is maintained of the initial medicines management competency and capability assessments performed on staff members at the end of their induction. The senior day care workers stated that subsequent medicines management competency and capability assessments are not performed. Annual competency and capability assessments should be performed on staff managing medicines. A recommendation is stated.

Robust arrangements are in place for auditing the management of medicines. Each medicine is audited at approximately two monthly intervals. Records of the audit activity are maintained.

Written confirmation of current medicine regimes is obtained for service users in the form of a personal medication record signed by the general medical practitioner. Staff confirmed that there are arrangements in place to manage any changes in medicine regimes. All medicine changes are implemented following the completion of an updated personal medication record.

There is a system in place to ensure that there are sufficient supplies of each medicine held in stock.

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.

The management of medicines includes the administration of buccal midazolam. A sample of care plans for the management of epilepsy was observed.

The arrangements for the management of thickening agents are satisfactory. Three service users' records were examined. In each instance, the thickening agent was appropriately recorded on the care plan and there was a Speech and Language Therapist (SALT) report. A record of administration is made.

5.2 Medicine Records

The day care setting is compliant with this standard.

The following records are maintained:

- Medicines requested and received
- Medicines prescribed
- Medicines administered
- Medicines returned.

Samples of the above medicine records were examined at this inspection. These were found to be satisfactory. The registered manager and staff are commended for their efforts.

5.3 Medicine Storage

The day care setting is compliant with this standard.

Medicines were observed to be safely and securely stored under conditions that conform to statutory and manufacturers' requirements.

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

5.4 Administration of Medicines

The day care setting is compliant with this standard.

Satisfactory arrangements are in place to ensure that medicines are safely administered to the service user in accordance with the prescribing practitioners' instructions.

The senior day care workers confirmed that prescribed medicines are only administered to the service user for whom they are prescribed. They also confirmed that medicine doses are prepared immediately prior to their administration from the container in which they are dispensed.

6.0 QUALITY IMPROVEMENT PLAN

All registered establishments and agencies are required to comply with The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 (the 2003 Order) and the subordinate regulations specific to the particular service being provided.

Registered providers/managers are also expected to ensure that their service operates in accordance with any standards relevant to their establishment or agency that have been issued by the Department of Health, Social Services and Public Safety (DHSSPS).

Enforcement action is an essential element of the responsibilities of RQIA under the 2003 Order, and is central to the aim of RQIA to protect the safety of the service users and to bring about sustained improvements in the quality of service provision.

In line with the principles set out in the Enforcement Policy, RQIA will normally adopt a stepped approach to enforcement where there are areas of concern. Any enforcement action taken by RQIA will be proportionate to the risks posed to service users and the seriousness of any breach of legislation.

The Quality Improvement Plan (QIP) appended to this report details the action required to ensure compliance with legislation and improvement in the quality of the service. These details were discussed with **Niall Campbell, Sean Gormley and Geraldine McKenna (Senior Day Care Workers)**, as part of the inspection process. The registered provider must record comments on the QIP and return it to RQIA within the required timeframe.

Registered providers/managers should note that failure to comply with regulations may lead to further enforcement action. It should also be noted that under the 2003 Order, failure to comply with some regulations is considered to be an offence and RQIA has the power to prosecute in conjunction with other enforcement action, for example place conditions on registration.

Enquiries relating to this report should be addressed to:

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

QUALITY IMPROVEMENT PLAN

DAY CARE SETTING

ANNOUNCED MEDICINES MANAGEMENT INSPECTION

THE OMAGH CENTRE

9 JULY 2014



The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan. The timescales commenced from the date of the inspection.

The specific actions set out in the Quality Improvement Plan were discussed with **Niall Campbell, Sean Gormley and Geraldine McKenna (Senior Day Care Workers)**, during the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

Registered providers / managers should note that failure to comply with regulations may lead to further enforcement and / or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider / manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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.

No requirements were made following this inspection.

RECOMMENDATION					
This recommendation is based on the Day Care Settings Minimum Standards (January 2012), research or recognised sources. It promotes current good practice and if adopted by the registered person may enhance service, quality and delivery.					
NO.	MINIMUM STANDARD REFERENCE	RECOMMENDATION	NUMBER OF TIMES STATED	DETAILS OF ACTION TAKEN BY REGISTERED PERSON(S)	TIMESCALE
1	29.2	The trust should review the medicines management policies and procedures in order to ensure that they cover each of the activities concerned with the management of medicines. Ref: Section 5.1	One	As recommended the Trust will review the medicines management policies and procedures.	9 January 2015
2	21.4	The trust should review the medicines management training support provided to staff. Ref: Section 5.1	One	The Trust will review the medicines management training provided to staff.	9 October 2014
3	29.4	Annual competency and capability assessments should be performed on staff managing medicines. Ref: Section 5.1	One	Annual competency and capability assessment will be performed on staff managing medicines.	9 October 2014

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	Margaret Dolan
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	<i>Loise Hy</i>

QIP Position Based on Comments from Registered Persons				Inspector	Date
		Yes	No		
A.	Quality Improvement Plan response assessed by inspector as acceptable	X		<i>Paul W. Nixon</i>	<i>25/8/14</i>
B.	Further information requested from provider				