



The Regulation and
Quality Improvement
Authority

DAY CARE SETTING MEDICINES MANAGEMENT INSPECTION REPORT

Inspection No: IN020537
Establishment ID No: 11317
Name of Establishment: Crossmaglen Social Education Centre
Date of Inspection: 11 September 2014
Inspector's Name: Paul Nixon

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1.0 GENERAL INFORMATION

Name of establishment:	Crossmaglen Social Education Centre
Type of establishment:	Day care setting
Address:	Rathkeeland House Blaney Road Crossmaglen Co Armagh BT35 9JJ
Telephone number:	(028) 3086 8185
E mail address:	crossmaglenc.nm@southerntrust.hscni.net
Registered Organisation/ Registered Provider:	Southern Health and Social Care Trust Mrs Anne Mairead McAlinden
Registered Manager:	Mrs Carmel McGrath
Person in charge of the home at the time of Inspection:	Ms Grainne Rafferty (Senior Day Care Worker)
Categories of care:	DCS - LD
Number of registered places:	24
Number of service users accommodated on day of inspection:	10
Date and time of current medicines management inspection:	11 September 2014 10.00 to 11.00
Name of inspector:	Paul Nixon
Date and type of previous medicines management inspection:	N/A

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 Ms Grainne Rafferty (Senior Day Care Worker)

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

Crossmaglen Social Education Centre provides day care to adults with various learning disabilities who live in the local area. Located in the town of Crossmaglen and based in Rathkeeland House, the centre is leased by the Trust and shares its premises with other agencies.

The Southern Health and Social Care Trust are the registered organisation in control and the registered manager is Mrs. Carmel McGrath. The registered manager is based in Windsor Hill, Newry and a designated day care worker assumes responsibility for the centre in the absence of the registered manager.

Referrals and allocation of days are in accordance with the trust procedures with placements offered following an assessment of need.

The centre is not purpose built and has had to adapt in terms of its environment to meet the increased needs of the client group. The centre is open plan and bright however, space is limited to two rooms and storage of wheelchairs and other equipment can prove problematic.

The centre operates Monday, Tuesday, Thursday and Friday and service users attend Windsor Hill in Newry on a Wednesday from 9.00 am.

4.0 EXECUTIVE SUMMARY

An announced medicines management inspection of Crossmaglen Social Education Centre was undertaken by Paul Nixon, RQIA Pharmacist Inspector, on 11 September 2014 between 10.00 and 11.00 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 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 Ms Grainne Rafferty, Senior Day Care Worker. 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 Crossmaglen Social Education 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 16 September 2013.

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 service users in accordance with the prescribing practitioners' instructions

The inspection attracted no requirements or recommendations.

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

5.0 FOLLOW-UP ON PREVIOUS ISSUES

Issues arising during previous medicines management inspection on 16 September 2013:

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. Evidence was provided that a record is kept of the medicines management training, including refresher training, completed by staff. The senior day care worker confirmed that the impact of medicines management training is evaluated as part of the quality improvement process, and through supervision and appraisal of staff.

There was recorded evidence to confirm that the three staff members who manage medicines are trained and competent. Staff competencies are reviewed by the registered manager annually.

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 carers. A medicines management assessment form is completed for any service user who requires medication to be administered whilst attending the day centre.

If any assistance is required, a personal medication record sheet is completed and signed by an authorised prescriber. The personal medication record sheet only includes the medications the service user is to take or be administered whilst in the day centre. 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 dealing with the service user's medication needs.

Practices for the management of medicines are systematically audited to ensure they are consistent with the day care setting's policy and procedures, and action is taken when necessary. A running stock balance is maintained of each of the three medicines held.

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

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 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.

During the opening hours of the day centre, the key to the medicine cupboard is held by the designated senior member of staff. There are procedures in place for the safe custody of keys at times when the day centre is closed.

COMPLIANCE LEVEL: Compliant

6.4 Administration of Medicines

The day care setting is compliant with this standard.

Satisfactory arrangements are in place to ensure that medication is safely administered to service users in accordance with the prescribing practitioners' instructions. Two staff administer medication to service users at all times.

Each of the three 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 October 2014**.

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



No requirements or recommendations resulted from the **announced medicines management** inspection of **Crossmaglen Social Education Centre** which was undertaken on **11 September 2014** and I agree with the content of the report.

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

NAME OF REGISTERED MANAGER COMPLETING	<i>C. H. Smith</i>
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	<i>Michael Kelly</i>

Approved by:	Date

QIP Position Based on Comments from Registered Persons				Inspector	Date
		Yes	No		
A.	Quality Improvement Plan response assessed by inspector as acceptable	X		Paul W. Nixon	09/10/14
B.	Further information requested from provider		X	Paul W. Nixon	09/10/14