



The Regulation and
Quality Improvement
Authority

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Inspection ID: IN023352

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Unannounced Medicines Management Inspection of Daleview House

20 July 2015

The Regulation and Quality Improvement Authority
Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS
Tel: 028 8224 5828 Fax: 028 8225 2544 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced medicines management inspection took place on 20 July 2015 from 09:45 to 11:50.

Overall on the day of the inspection the management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no areas of concern. A Quality Improvement Plan (QIP) was not included in this report.

Recommendations made as a result of this inspection relate to the DHSSPS Care Standards for Nursing Homes, April 2015. Recommendations made prior to April 2015 relate to the DHSSPS Nursing Homes Minimum Standards, February 2008.

This inspection was underpinned by the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

1.1 Actions/Enforcement Taken Following the Last Inspection

The last medicines management inspection took place on 26 January 2015 to follow up on issues previously identified in the medicines management inspection of 22 July 2014.

The inspection on 26 January 2015 continued to evidence non-compliance with one requirement and four recommendations. Following discussion with senior management a further period was given for compliance to be achieved and another inspection was planned.

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	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Apex Housing Association Mr Gerald Kelly	Registered Manager: Ms Marcella McCorkell
Person in Charge of the Home at the Time of Inspection: Ms Marilou Malate (staff nurse)	Date Manager Registered: 31 December 2008
Categories of Care: NH-I	Number of Registered Places: 25
Number of Patients Accommodated on Day of Inspection: 22	Weekly Tariff at Time of Inspection: £618.00

3. Inspection Focus

The inspection on 26 January 2015 had shown that robust arrangements were still not in place for the management of medicines and improvements were required. This inspection sought to assess progress with the issues raised during and since the last medicines management inspection.

4. Methods/Process

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

Prior to the inspection, the inspector reviewed the management of incidents reported to RQIA since the previous medicines management inspection.

The following records were examined during the inspection:

Personal medication records	Medicine audits
Medicine administration records	Care plans
Medicines disposed of or transferred	

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 19 June 2015. The draft report of this inspection has been issued to the home and the completed QIP is due to be returned to RQIA by 12 August 2015. Any outstanding issues will be followed up by the care inspector.

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

Last Inspection Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>Ref: Regulation 13(4)</p> <p>Stated: Second time</p>	<p>The registered manager must ensure that all records of medicines administered, including topical medicines and thickening agents by care staff are adequately maintained.</p> <hr/> <p>Action taken as confirmed during the inspection: Records of the administration of medicines by nursing staff were adequately maintained. Records of the administration of topical medicines and thickening agents were well-maintained and there was evidence that these records were checked and signed on a daily basis by nursing staff.</p>	Met
<p>Requirement 2</p> <p>Ref: Regulation 13(4)</p> <p>Stated: First time</p>	<p>The registered manager must review and revise the management of anxiolytic medicines prescribed on an “as required” basis to ensure care plans, daily notes and medicine records are adequately maintained.</p> <hr/> <p>Action taken as confirmed during the inspection: Four patients in the home were prescribed anxiolytic medicines on an “as required” basis for the management of distressed reactions. A care plan was in place for each patient and these have been reviewed on a monthly basis. Records of the administration of these medicines were maintained. Records indicated why each dose was required to be administered and the outcome of each administration.</p>	Met

Last Inspection Recommendations		Validation of Compliance
<p>Recommendation 1</p> <p>Ref: Standard 37</p> <p>Stated: Second time</p>	<p>The registered manager should ensure that stock balance records for warfarin tablets are adequately maintained.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>No patients in the home were prescribed warfarin on the day of the inspection. Staff on duty confirmed that daily stock balance sheets were in place for patients previously prescribed warfarin and that these sheets were completed and signed by two designated members of staff on each occasion when warfarin was administered. Sample stock reconciliation sheets were provided for inspection and noted to be satisfactory.</p>	Met
<p>Recommendation 2</p> <p>Ref: Standard 37</p> <p>Stated: Second time</p>	<p>The registered manager should ensure that appropriate action is taken when discrepancies are noted in medicine audits.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>Medicine audits have been completed on a monthly basis. A designated member of staff has reviewed these medicines audits and an action plan was drawn up each month, in consultation with the registered manager, to address any discrepancies and/or areas for improvement. Records of audits were reviewed during the inspection and noted to be satisfactory. There was evidence that medicines not dispensed in monitored dosage cassettes have been audited on a daily basis and stock reconciliation records for these medicines were in place.</p>	Met
<p>Recommendation 3</p> <p>Ref: Standard 38</p> <p>Stated: Second time</p>	<p>The registered manager should review the layout of the medicines received record book to ensure details were consistently and fully recorded.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>The medicines received record book has been reviewed and revised. Details of medicines received were consistently and fully recorded.</p>	Met

Last Inspection Recommendations		Validation of Compliance
Recommendation 4 Ref: Standard 37 Stated: Second time	The registered manager should review the packaging of medicines prescribed on an “as required” basis.	Met
	Action taken as confirmed during the inspection: No medicines prescribed on an “as required” basis were packaged in monitored dosage cassettes.	
Recommendation 5 Ref: Standard 37 Stated: First time	The registered manager should ensure that telephoned instructions regarding medicine dosage instructions are confirmed in writing at the earliest opportunity.	Met
	Action taken as confirmed during the inspection: Appropriate policies and procedures for managing telephoned instructions were in place.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

The medicine records that were examined were well-maintained. Improvements were noted in the management of records of the administration of topical medicines and thickening agents by care staff. Records of the receipt of medicines were satisfactory.

Records showed that discontinued medicines are managed appropriately.

The arrangements in place for the management of anticoagulant medicines and the management of telephoned instructions regarding medicines were satisfactory.

All medicines in the home that were prescribed on a “when required” basis were appropriately packaged.

Is Care Effective? (Quality of Management)

There were robust arrangements in place to audit practices for the management of medicines. Medicines have been audited on a monthly basis. The completed audits have been reviewed each month and an action plan produced to manage any discrepancies/areas for improvement.

There were procedures in place to report and learn from any medicine-related incidents that have occurred in the home. Medicine related incidents reported to RQIA since the previous inspection were managed appropriately.

Is Care Compassionate? (Quality of Care)

Four patients in the home were prescribed anxiolytic medicines on an “as required” basis for the management of distressed reactions. A care plan was in place for each patient and these have been reviewed on a monthly basis. Records of the administration of these medicines were maintained. Records indicated why each dose was required to be administered and the outcome of each administration.

Areas for Improvement

During the inspection, members of staff were reminded that the home should be in control of the ordering process for medicines; it should not be delegated to the community pharmacist.

Number of Requirements:	0	Number of Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Marcella Mc Corkell	Date Completed	28/08/15
Registered Person	Muriel Sands	Date Approved	28/08/15
RQIA Inspector Assessing Response	Helen Mulligan	Date Approved	01/09/2015

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

Please complete in full and returned to pharmacists@rqia.org.uk from the authorised email address

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.