



Unannounced Follow Up Medicines Management Inspection Report 9 October 2018



Deanfield

Type of Service: Nursing
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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 nursing home registered to provide nursing care for up to 28 patients.

3.0 Service details

Organisation/Registered Provider: Loughview Homes Ltd Responsible Individuals: Mr Paul Steele Mr Michael Curran	Registered Manager: Mrs Joy McLaughlin
Person in charge at the time of inspection: Ms Jenna Nutt (Registered Nurse)	Date manager registered: 13 December 2007
Categories of care: Nursing Home (NH) I – Old age not falling within any other category	Number of registered places: 28

4.0 Inspection summary

An unannounced inspection took place on 8 October 2018 from 10.00 to 13.00.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

The findings of the last medicines management inspection on 12 June 2018 indicated that robust arrangements were not in place for some aspects of the management of medicines. A serious concerns meeting was held in RQIA on 21 June 2018, with a representative from Loughview Homes Ltd. A full account of the actions to be taken to drive and sustain improvement was provided. RQIA decided to allow a period of time for the provider to demonstrate that the improvements had been made.

This inspection sought to assess progress with the issues raised during that medicines management inspection and to determine if the service was now delivering safe, effective and compassionate care and if the service was well led.

It was evidenced that three of the four areas identified for improvement had been addressed in a satisfactory manner. Management had reviewed and revised the systems in place and staff had received training. These improvements must be sustained in order that staff continue to deliver safe and effective care in these areas.

However, the evidence seen during the inspection indicated that the management of medicines, to ensure adequate stock is available, had not been addressed in a satisfactory manner. This area for improvement under regulations was stated for a second time.

The following areas were examined during the inspection:

- the management of bisphosphonate medication prescribed for administration weekly
- the management of prescribed medicines to ensure adequate stock is available
- the management of hydroxycobalamin injections prescribed for administration every three months
- the governance and audit arrangements in place for medicines

Patients were relaxed and comfortable in the home and good relationships with staff were evident. Patients and one relative were complimentary regarding the management of medicines and the care provided in the home.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1*	0

*The total number of areas for improvement includes one which has been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Ms Jenna Nutt, Registered Nurse, and with Mrs Joy McLaughlin, Registered Manager, by telephone on 16 and 17 October 2018, as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 27 September 2018. As an outcome of the inspection, enforcement action, in the form of a serious concerns meeting, to discuss recruitment and selection practices, was held on 4 October 2018. RQIA were given assurances that the procedures had been appropriately updated to minimise any risk to the patients. This will be further validated at the next care inspection.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

Enforcement notices for registered establishments and agencies are published on RQIA's website at <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity> with the exception of children's services.

5.0 How we inspect

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

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of medicine incidents

During the inspection the inspector met with the registered nurse in charge, a visiting podiatrist, an overseas nurse observing practice and briefly with two patients and one relative.

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

A sample of the following records was examined during the inspection:

- medicines requested and received
- personal medication records
- medicine administration records
- controlled drug record book
- medicine audits
- care plans

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 27 September 2018

The most recent inspection of the home was an unannounced care inspection. A report has been issued and the completed QIP will be returned and assessed by the inspector. This QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last medicines management inspection dated 12 June 2018

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13(4) Stated: Third and final time	The registered person shall ensure that the management of bisphosphonate medicines is reviewed to ensure that they are administered as prescribed.	Met
	Action taken as confirmed during the inspection: The management of these medicines had been reviewed. Revised documentation for recording the administration and reminding nurses when these medicines were due was in place. Staff training and clinical supervision had taken place. These medicines were included within the audit procedures and satisfactory outcomes were observed.	
Area for improvement 2 Ref: Regulation 13(4) Stated: First time	The registered person shall review procedures to ensure that adequate supplies of prescribed medicines are available so that medicines are not omitted due to being out of stock in the home.	Not met
	Action taken as confirmed during the inspection: Procedures had been reviewed and staff training and clinical supervision had taken place. However, several examples of medicines being omitted due to their being out of stock were observed on medicine administration record sheets, which were reviewed for the previous six weeks. These were discussed with the nurse in charge and then with the registered manager by telephone following the inspection. Further action needs to be taken to address this. It was advised that procedures should be reviewed to ensure that staff report out of stock medicines to management and that immediate action is taken. The registered	

	<p>manager stated that she was already revising procedures and that this will be reviewed regularly.</p> <p>This area for improvement was stated for a second time</p>	
<p>Area for improvement 3</p> <p>Ref: Regulation 13(4)</p> <p>Stated: First time</p>	<p>The registered person shall review the management of hydroxycobalamin injections.</p> <p>Action taken as confirmed during the inspection:</p> <p>The management of this medicine had been reviewed. Revised documentation for recording the administration and reminding nurses when these medicines were due was in place.</p> <p>Staff training and clinical supervision had taken place. These medicines were included within the audit procedures and satisfactory outcomes were observed.</p>	Met
<p>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015</p>		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Standard 28</p> <p>Stated: Second time</p>	<p>The registered person shall ensure that the governance and audit arrangements for medicines are reviewed to ensure that all aspects of medicines management are included, that management review outcomes and that action is taken as necessary.</p> <p>Action taken as confirmed during the inspection:</p> <p>Procedures had been reviewed and staff training and clinical supervision had taken place. Improvements were observed and procedures were more robust.</p> <p>As stated, this area for improvement has been met. However, the management of out of stock medicines still requires improvement and this is addressed in the area for improvement 2 above.</p>	Met

6.3 Inspection findings

For details see section 6.2

Throughout the inspection, it was found that there were good relationships between the staff and the patients. It was clear from discussion and observation of staff, that the staff were familiar with the patients and their needs. Patients were observed to be relaxed and comfortable.

We spoke briefly with two patients and one relative who were satisfied with the care provided and the staff in the home.

Ten questionnaires were left in the home to facilitate feedback from patients and their representatives. None were returned by relatives/representatives within the specified timescale (two weeks).

Any comments from patients and their representatives in questionnaires received after the return date (two weeks) will be shared with the registered manager for information and action as required.

No online questionnaires were completed by staff within the specified time frame (two weeks).

Areas for improvement

No new areas for improvement were identified. However, procedures to ensure that adequate supplies of prescribed medicines are available must be robust. One area for improvement was stated for a second time.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Ms Jenna Nutt, Registered Nurse, and with Mrs Joy McLaughlin, Registered Manager, by telephone on 17 October 2018, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP 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 the nursing home. 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via the Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
<p>Area for improvement 1</p> <p>Ref: Regulation 13(4)</p> <p>Stated: Second time</p> <p>To be completed by: 9 November 2018</p>	<p>The registered person shall review procedures to ensure that adequate supplies of prescribed medicines are available so that medicines are not omitted due to being out of stock in the home.</p> <p>Ref: 6.2 & 6.3</p> <p>Response by registered person detailing the actions taken: Meeting with Registered Nurses to discuss new procedures for ordering and managing out of stock medication. Policy updated and all aware. More robust documentation in place.</p>

Please ensure this document is completed in full and returned via the Web Portal



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