



Announced Enforcement Medicines Management Inspection Report 13 May 2020



Greenhaw Lodge Care Centre

Type of Service: Nursing Home

Address: 42 Racecourse Road, Londonderry, BT48 8DA

Tel No: 028 7135 4725

Inspectors: Catherine Glover and Judith Taylor

www.rqia.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 registered nursing home which provides care for up to 42 patients.

3.0 Service details

Organisation/Registered Provider: Larchwood Care Homes (NI) Ltd Responsible Individual: Mr Christopher Walsh	Registered Manager: Ms Mary Bernadette Conway-McDaniel
Person in charge at the time of inspection: Ms Mary Bernadette Conway-McDaniel	Date manager registered: 30 January 2020
Categories of care: Nursing Home (NH) DE – Dementia A – Past or present alcohol dependence MP(E) - Mental disorder excluding learning disability or dementia – over 65 years	Number of registered places: 42 Category NH-MP(E) for one named patient only.

4.0 Inspection summary

A compliance inspection was undertaken on 13 May 2020.

The inspection sought to assess the level of compliance achieved in relation to two Failure to Comply Notices issued on 5 March 2020. On 30 April 2020, following a compliance inspection, the Failure to Comply Notices were extended by two weeks. The areas identified for improvement and compliance with the regulations were in relation to the audit process and the completion of medicine records.

Due to the Covid-19 pandemic, it was decided by RQIA that it would not be suitable to visit the home to assess the level of compliance with the two Failure to Comply Notices. As a result, we contacted the management team at Greenhaw Lodge Care Centre and it was agreed that they would submit specific medicine related documents to RQIA, and these would be inspected by the pharmacist inspectors. These documents and supporting information were chosen by RQIA and were received on 12 April 2020.

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/ the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

Evidence was available to validate compliance with the Failure to Comply Notices FTC000089E1 and FTC000090E1, which were extended from 30 April 2020 to 14 May 2020.

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	0	0

The findings of the inspection were discussed via teleconference on 14 May 2020, with Nuala Green, Managing Director of Larchwood Care Homes NI Ltd, Chris Walsh, Responsible Individual and Bernadette Conway-McDaniel, Registered Manager.

This inspection resulted in no areas for improvement being identified. Further enforcement action did not result from the findings of this 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 home was reviewed. This included the following:

- recent correspondence with the home
- the management of incidents - no incidents involving medicines had been reported to RQIA since the last medicines management inspection.

The following records were examined during the inspection:

- personal medication records for six patients
- medicine administration records for six patients
- monitoring report completed by the Responsible Individual
- medicine audits and action plans
- anticoagulant medicine records

Areas for improvement identified at the last medicines management inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

6.0 The inspection

6.1 Review of areas for improvement from the last medicines management inspection on 30 April 2020

This inspection focused solely on the actions contained within the failure to comply extension notices issued on 30 April 2020 and the QIP resulting from the inspection. The areas for improvement from the last care inspection on 4 February 2020 were not reviewed as part of this inspection and will be assessed at the next care inspection.

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 develop a monitoring system to ensure that personal medication records are fully and accurately maintained.	Met
	Action taken as confirmed during the inspection: The registered manager advised of the monitoring systems in place and staff updates regarding the completion of these records. A review of the submitted records showed improvement in the standard of record keeping.	

6.3 Inspection findings

FTC Ref: FTC000089

Notice of failure to comply with regulation (10(1)) of The Nursing Homes Regulations (Northern Ireland) 2005

Registered person: general requirements

10.—(1) *The registered provider and the registered manager shall, having regard to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill.*

In relation to this notice the following four actions were required to comply with this regulation:

- Systems must be implemented which identify that patients do not have the required supply of their prescribed medicines and registered nurses must highlight these to management.

- Robust auditing systems must be implemented to quality assure the management of medicines.
- The monthly monitoring reports must be completed in accordance with Regulation 29 of the Nursing Homes Regulations (Northern Ireland) 2005, and contain clear, time-bound action plans, detailing all areas of improvement required. The completed Regulation 29 report must be shared with the manager and the senior management team to ensure that the required improvements are made in a timely way.
- Regulation 29 reports must be completed every two weeks and submitted to RQIA within five working days of completion.

Through inspection of records and discussion with management, we evidenced and acknowledged the progress made in relation to this Failure to Comply Notice.

We reviewed the outstanding action that was not addressed satisfactorily on our previous compliance inspection on 30 April 2020, in relation to auditing systems.

The registered manager confirmed that all patients' medicines records were being closely monitored and deficits identified had been addressed appropriately. Review of the governance audits evidenced that a robust system was in place to quality assure these records. It was good to note that the audit system has been developed to include a review of one patient's medicines records per day. This close scrutiny should help to sustain compliance.

Evidence was available to validate compliance with this Failure to Comply Notice.

FTC Ref: FTC000090

Notice of failure to comply with regulation 13(4) of The Nursing Homes Regulations (Northern Ireland) 2005

Health and welfare of patients

13.—(4) *Subject to paragraph (5), the registered person shall make suitable arrangements for the ordering, storage, stock control, recording, handling, safe keeping, safe administration and disposal of medicines used in or for the purposes of the nursing home to ensure that -*

In relation to this notice the following eight actions were required to comply with this regulation:

- A robust auditing process must be developed and implemented for medicines management.
- Systems must be implemented to ensure that patients have a continuous supply of their prescribed medicines.
- Registered nurses must ensure that when a patient misses a dose of their medicines due to insufficient stock, they inform the registered manager and the incident is reported to RQIA.
- Registered nurses should ensure medicines are required prior to requesting a further supply from the prescriber.
- Medicines must be administered in strict accordance with the prescribers' instructions and from the patient's own supply.
- Medicine administration records must be completed accurately and kept updated.
- Medicines storage areas must be secure, clean and organised.

- Further training and competency assessment on the management of medicines must be completed for all staff with responsibility for managing medicines.

Through inspection of records and discussion with management, we evidenced and acknowledged the progress made in relation to this Failure to Comply Notice.

We reviewed the outstanding actions that were not addressed satisfactorily on our previous compliance inspection on 30 April 2020 in relation to audit and medicine records.

We saw an improvement in the standard of record keeping. The necessary arrangements had been made to ensure these records were up to date and accurate; there was evidence that patients had been administered their medicines as prescribed. Any discrepancy in the records had been identified by management and action had been taken to ensure that it was rectified by the staff member involved.

It was good to note that the management team had provided further training and guidance for staff specific to the issues raised and new monitoring systems had been developed. Effective monitoring must continue to ensure that this progress is sustained.

Evidence was available to validate compliance with the Failure to Comply Notice.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Number of areas for improvement	0	0

6.4 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notice.

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.



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9536 1111

Email info@rqia.org.uk

Web www.rqia.org.uk

 [@RQIANews](https://twitter.com/RQIANews)