

Inspection Report

15 August 2022



Northlands Addiction Treatment Centre

Type of service: Residential Care Home

Address: Shepherds Way,
Dungiven Road, Waterside,
Londonderry, BT47 5GW

Telephone number: 028 7131 3232

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider: Northlands Addiction Treatment Centre Responsible Individual: Mr Tommy Canning – not registered	Registered Manager: Mr Tommy Canning – not registered
Person in charge at the time of inspection: Mr Tommy Canning	Number of registered places: 8
Categories of care: Residential Care (RC): D – past or present drug dependence A – past or present alcohol dependence	Number of residents accommodated in the residential care home on the day of this inspection: 3
Brief description of the accommodation/how the service operates: This home is a registered residential care home which provides care for up to eight residents. The home offers a six week placement for people who are undertaking treatment for alcohol or drug addiction. Counselling is also provided for non-residential persons who attend the home as part of their treatment programme. The home is a two storey building with residents bedrooms located on the first floor. Offices and counselling rooms are located over the two floors. Residents have access to a communal lounge, dining area and an outdoor space.	

2.0 Inspection summary

An unannounced inspection took place on 15 August 2022, from 10.45am to 12.45pm. This was completed by a pharmacist inspector and focused on medicines management within the home. The purpose of the inspection was to assess if the home was delivering safe, effective and compassionate care and if the home was well led with respect to medicines management.

The area for improvement identified at the last care inspection has been carried forward for review at the next care inspection.

Review of medicines management found that robust arrangements were in place for the safe management of medicines. Medicine records and medicine related care plans were well maintained. There were effective auditing processes in place to ensure that staff were trained and competent to manage medicines and residents were administered their medicines as prescribed.

Based on the inspection findings and discussions held, RQIA are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the management team.

RQIA would like to thank the residents and staff for their assistance throughout the inspection.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection, information held by RQIA about this home was reviewed. This included previous inspection findings, incidents and correspondence. The inspection was completed by examining a sample of medicine related records, the storage arrangements for medicines, staff training and the auditing systems used to ensure the safe management of medicines. The inspector spoke to staff and management about how they plan, deliver and monitor the management of medicines.

4.0 What people told us about the service

The inspector met with senior care staff and the manager. All staff were wearing face masks and other personal protective equipment (PPE) as needed. PPE signage was displayed.

Staff interactions with residents were warm, friendly and supportive.

Staff expressed satisfaction with how the home was managed and spoke positively about the teamwork and communication between staff in the home. They said that they had the appropriate training to look after residents and meet their needs.

Feedback methods included a staff poster and paper questionnaires which were provided to the manager for any resident or their family representative to complete and return using pre-paid, self-addressed envelopes. At the time of issuing this report, no questionnaires had been received by RQIA.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since the last inspection?

Areas for improvement from the last inspection on 25 May 2022		
Action required to ensure compliance with Residential Care Homes Minimum Standards (August 2011) (Version 1:1)		Validation of compliance
Area for Improvement 1 Ref: Standard 23.3 Stated: First time	The registered person shall ensure that all volunteer staff complete/update mandatory training specific to their role.	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

5.2 Inspection findings

5.2.1 What arrangements are in place to ensure that medicines are appropriately prescribed, monitored and reviewed?

Within Northlands Addiction Treatment Centre, residents bring their own medicines with them at the beginning of their stay and any unused medicines are returned at the end of their stay. Following discussions with staff, it was evident that when applicable, other healthcare professionals were contacted in response to residents' needs and should medicines be prescribed arrangements were in place to ensure these were obtained in a timely manner.

Personal medication records were in place for each resident. These are records used to list all of the prescribed medicines, with details of how and when they should be administered. It is important that these records accurately reflect the most recent prescription to ensure that medicines are administered as prescribed and because they may be used by other healthcare professionals, for example, at medication reviews or hospital appointments.

The personal medication records reviewed at the inspection were accurate and up to date. In line with best practice, a second member of staff had checked and signed the personal medication records when they were written and updated to state that they were accurate.

Accurate and complete records of the receipt of medicines brought into the home by residents were maintained and were readily available for review.

There were arrangements in place to facilitate any residents who wished to self-administer their medicines.

5.2.2 What arrangements are in place to ensure that medicines are supplied on time, stored safely and disposed of appropriately?

Medicines stock levels must be checked on a regular basis and new stock must be obtained on time. This ensures that the resident's medicines are available for administration as prescribed. It is important that they are stored safely and securely so that there is no unauthorised access and disposed of promptly to ensure that a discontinued medicine is not administered in error.

Staff were not responsible for ordering medicines, as this was the responsibility of the residents/resident's families. However, they regularly reviewed stock levels and advised of the procedures in place to ensure that each resident had a continuous supply of their medicines.

The medicines storage areas were observed to be securely locked to prevent any unauthorised access. They were tidy and organised so that medicines belonging to each resident could be easily located.

Satisfactory arrangements were in place for the safe disposal/transfer of medicines at the end of short break care.

5.2.3 What arrangements are in place to ensure that medicines are appropriately administered within the home?

It is important to have a clear record of which medicines have been administered to residents to ensure that they are receiving the correct prescribed treatment.

A sample of the medicines administration records was reviewed. Most of the records were found to have been fully and accurately completed. A small number of missed signatures were brought to the attention of the senior care staff for ongoing close monitoring. The records were filed once completed and were readily retrievable for audit/review.

Controlled drugs are medicines which are subject to strict legal controls and legislation. They commonly include strong pain killers. The receipt, administration and disposal of controlled drugs should be recorded in the controlled drug record book. There were no controlled drugs in stock in the home on the day of the inspection. Staff spoken with were aware of the type of medicines requiring storage in the controlled drugs cabinet and the necessary records to be maintained. From discussions held it was evident satisfactory arrangements were in place for the management of controlled drugs.

Staff audited medicine administration on a regular basis within the home. A range of audits were carried out. Clear records for the receipt of medicines were maintained so that the administration of medicines could be easily audited.

5.2.4 What arrangements are in place to ensure that medicines are safely managed during transfer of care?

People who use medicines may follow a pathway of care that can involve both health and social care services. It is important that medicines are not considered in isolation, but as an integral part of the pathway, and at each step.

Problems with the supply of medicines and how information is transferred put people at increased risk of harm when they change from one healthcare setting to another.

The management of medicines for two residents who were recently admitted to Northlands Addiction Treatment Centre was reviewed. Written confirmation of the resident's medicine regime was obtained from the GP at or prior to admission and this was reconciled with the medicines brought in on admission. There was evidence that staff had followed up any discrepancies in a timely manner to ensure that the correct medicines were available for administration. The residents' personal medication records had been written accurately and medicines had been administered in accordance with the most recent directions.

5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?

Occasionally medicines incidents occur within homes. It is important that there are systems in place which quickly identify that an incident has occurred so that action can be taken to prevent a recurrence and that staff can learn from the incident. A robust audit system will help staff to identify medicine related incidents.

Staff knew how to identify and report medicine related incidents. The audits completed at the inspection indicated that medicines were being administered as prescribed.

5.2.6 What measures are in place to ensure that staff in the home are qualified, competent and sufficiently experienced and supported to manage medicines safely?

To ensure that residents are well looked after and receive their medicines appropriately, staff who administer medicines to residents must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and they are supported. Policies and procedures should be up to date and readily available for staff.

There were records in place to show that staff responsible for medicines management had been trained and deemed competent. Medicines management policies and procedures were in place and readily available to staff.

6.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0*	1*

* The total number of areas for improvement includes one which is carried forward for review at the next inspection.

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Elaine Moore and Christina McClements, Senior Care Staff, as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan	
Action required to ensure compliance with Residential Care Homes Minimum Standards (August 2011) (Version 1:1)	
Area for Improvement 1 Ref: Standard 23.3 Stated: First time To be completed by: 25 July 2022	The registered person shall ensure that all volunteer staff complete/update mandatory training specific to their role.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection. Ref: 5.1



The Regulation and Quality Improvement Authority

7th Floor, Victoria House
15-27 Gloucester Street
Belfast
BT1 4LS

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

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