Hilltop Respite Unit
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Inspector: Helen Mulligan
Inspection ID: IN022515

Unannounced Medicines Management Inspection of Hilltop Respite Unit

24 February 2016

The Regulation and Quality Improvement Authority
'Hilltop', Tyrone and Fermanagh Hospital, Omagh, BT89 0NS
Tel: 028 8224 5828 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced medicines management inspection took place on 24 February 2016 from 10:45 to 13:15.

The management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no significant areas of concern though one area for improvement was identified and is set out in the quality improvement plan (QIP) within this report.

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

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. RQIA will continue to monitor any recommendations made under the 2008 standards until compliance is achieved. Please also refer to Sections 5.2 and 6.2 of this report.

1.1 Actions/Enforcement Taken Following the Last Medicines Management Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last inspection on 3 December 2013.

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	1

The details of the QIP within this report were discussed with Ms Maureen Currie, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Southern HSC Trust/Mrs Paula Mary Clarke	**Registered Manager:** Ms Maureen Edna Currie
Person in Charge of the Home at the Time of Inspection: Ms Maureen Edna Currie	**Date Manager Registered:** 19 July 2012
Categories of Care: NH-LD	**Number of Registered Places:** 1
Number of Patients Accommodated on Day of Inspection: 1	**Weekly Tariff at Time of Inspection:** Trust rates apply plus patient contribution

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the last medicines management inspection and to determine if the following standards and themes have been met:

Standard 28: Management of Medicines
Standard 29: Medicines Records
Standard 31: Controlled Drugs

Theme 1: Medicines prescribed on a "when required" basis for the management of distressed reactions are administered and managed appropriately.

Theme 2: Medicines prescribed for the management of pain are administered and managed appropriately.

4. Methods/Process

Specific methods/processes used included the following:

The following records were examined:

- medicines requested and received
- personal medication records
- medicine administration records
- medicines disposed of or transferred
- medicines storage temperatures
- medicine audits
- policies and procedures
- care plans
- training records

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an announced estates inspection dated 7 August 2014. The completed QIP was returned and approved by the estates inspector.

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

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 **Ref**: Regulation 13(4) **Stated:** First time	The registered manager must ensure that a copy of all personal medication records is kept in the home.	**Met**
	Action taken as confirmed during the inspection: A copy of all personal medication records was in the home at the time of the inspection.	
Requirement 2 **Ref**: Regulation 13(4) **Stated:** First time	The registered manager must ensure that all prescribed medicines are recorded on the patients' personal medication records.	**Met**
	Action taken as confirmed during the inspection: All prescribed medicines were noted to be recorded on the patients' personal medication records.	
Requirement 3 **Ref**: Regulation 13(4) **Stated:** First time	The registered manager must ensure that records of medicines disposed of are adequately maintained.	**Met**
	Action taken as confirmed during the inspection: Records of medicines disposed of were adequately maintained.	
Requirement 4 **Ref**: Regulation 13(4) **Stated:** First time	The registered manager must ensure that appropriate signage is in place in all areas where oxygen is stored or in use.	**Met**
	Action taken as confirmed during the inspection: Oxygen signage was posted on the treatment room door.	

Last Inspection Recommendations		Validation of Compliance
Recommendation 1 **Ref**: Standard 37 **Stated:** First time	The registered manager should ensure that all personal medication records are dated and signed each time the medication details are verified as being current and staff should record which period(s) of respite each personal medication covers.	**Met**
	Action taken as confirmed during the inspection: An admission checklist has been completed for each period of respite. This checklist included confirmation of current medication regimes and verification that the personal medication record was current, accurate and complete.	
Recommendation 2 **Ref**: Standard 37 **Stated:** First time	The registered manager should ensure that advice is sought or a reference source is checked for guidance on the appropriate administration of medicines through enteral feeding tubes.	**Not Met**
	Action taken as confirmed during the inspection: There was no written evidence that staff had obtained advice regarding the appropriate administration of medicines through enteral feeding tubes. This recommendation has been stated for the second time.	
Recommendation 3 **Ref**: Standard 37 **Stated:** First time	The registered manager should ensure that liquid medicines are included in the home's auditing procedures and any further discrepancies are investigated and reported to RQIA.	**Met**
	Action taken as confirmed during the inspection: Liquid medicines had been included in the home's auditing procedures. No discrepancies were noted in these audits.	

Last Inspection Recommendations		Validation of Compliance
Recommendation 4 **Ref**: Standard 38 **Stated:** First time	The registered manager should continue to monitor records of medicines administered to ensure they are being adequately maintained.	**Met**
	Action taken as confirmed during the inspection: Medicine records were adequately maintained and had been audited by the registered manager on a regular basis.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

All medicines in the home and a sample of medicine records were audited at the inspection. Whilst most of the audit trails produced satisfactory outcomes, indicating that medicines were administered as prescribed, one discrepancy was observed. Following the inspection, the registered manager investigated this discrepancy and forwarded a notification to RQIA. The registered manager confirmed that the administration of medicines would continue to be monitored on a regular basis through the home's auditing procedures.

There were procedures in place to ensure the safe management of medicines during a patient's admission to and discharge from the home.

Medicine records were legible and facilitated the audit process.

All discontinued or expired medicines were disposed of appropriately. Medicines were returned to the patient's relative or carer at the end of each period of respite.

The administration of medicines through enteral feeding tubes was reviewed. The prescriber had authorised the administration of medicines through enteral feeding tubes, but there was no written evidence that advice had been sought regarding the safe administration of individual medicines through enteral feeding tubes. A recommendation made at the previous inspection has been stated for the second time.

Is Care Effective? (Quality of Management)

Written policies and procedures for the management of medicines, including Standard Operating Procedures for controlled drugs were in place. These had been reviewed and updated in January 2016.

There was evidence that staff responsible for medicines management had been trained and deemed competent. The impact of training was evaluated through six monthly supervision, staff meetings and annual appraisal. Staff competency was assessed annually. General medicines management training was provided in the last year.

The procedures in place to audit the management of medicines were examined. Medicines were audited by staff on duty on a weekly basis, at the end of each period of respite, and by the registered manager on a regular basis. There was evidence that action had been taken to address any discrepancies noted during the audit process.

Staff confirmed that compliance with prescribed medicines regimes was monitored and any omissions or refusals likely to have an adverse effect on patients' health would be reported to the prescriber.

There were systems in place to report and learn from any incidents that may occur in the home.

Is Care Compassionate? (Quality of Care)

The medicine records which were examined indicated that medicines which were prescribed to treat pain were recorded on the personal medication record and had been administered as prescribed. One discrepancy was noted in the parameters for administration of an analgesic medicine on the patient's personal medication record; this was addressed during the inspection. The registered manager confirmed that all patients had their pain assessed at each admission. A care plan was maintained for one of the patients prescribed pain controlling medicines and a pain tool was in use. The pain care plan for the second patient was not available at the inspection. The registered manager and staff on duty were reminded that this should be in place for all patients receiving respite care in the home. From discussion with the staff, it was evident that they were aware of the signs, symptoms and triggers of pain in patients.

Care plans for the management of epilepsy, including patient-specific protocols for the administration of emergency medicines were in place.

There were no medicines prescribed on a "when required" basis for the management of distressed reactions.

Areas for Improvement

Advice should be sought or a reference source checked for guidance on the appropriate administration of medicines through enteral feeding tubes. A recommendation was stated for the second time.

Number of Requirements	**0**	**Number of Recommendations**	**1**

5.4 Additional Areas Examined

Medicines were stored safely and securely.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Maureen Currie, Registered Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 your premises. 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.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The DHPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Person/Registered Manager

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to **pharmacists@rqia.org.uk** and assessed by the inspector.

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. It is expected that the recommendation set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan	
Recommendations	
Recommendation 1 **Ref**: Standard 37 **Stated:** Second time **To be Completed by:** 25 March 2016	The registered manager should ensure that advice is sought or a reference source is checked for guidance on the appropriate administration of medicines through enteral feeding tubes. **Response by Registered Person(s) Detailing the Actions Taken:** In addition to the existing Gp prescription further advice has been sought from Medicines Information on the appropriate administration of medicines via enteral feeding tubes. The patients care plan will be reviewed and updated as required by the named nurse following any recommended actions made by Medicines Information. The Registered Manager will monitor progress of same

Registered Manager Completing QIP	Maureen Currie	**Date Completed**	31/03/16
Registered Person Approving QIP	Micéal Crilly	**Date Approved**	04/04/16
RQIA Inspector Assessing Response	**Helen Mulligan**	**Date Approved**	**4 April 2016**

Please ensure this document is completed in full and returned to pharmacists@rqia.org.uk from the authorised email address