



The Regulation and
Quality Improvement
Authority

Apple Mews
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**Unannounced Medicines Management Inspection
of
Apple Mews**

12 May 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced medicines management inspection took place on 12 May 2015 from 09.30 to 13.30. Three of the five bungalows, April Cottage, Bramley Cottage and Orchard Cottage were inspected.

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.

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

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection on 22 January 2014.

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: Priory (Watton) Ltd Ms Sarah Hughes	Registered Manager: Mrs Rosemary Dilworth
Person in Charge of the Home at the Time of Inspection: Mrs Rosemary Dilworth	Date Manager Registered: 17 July 2013
Categories of Care: NH-LD, NH-LD(E)	Number of Registered Places: 30
Number of Patients Accommodated on Day of Inspection: 30	Weekly Tariff at Time of Inspection: £1640 - £2800

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 in this inspection include the following:

Prior to the inspection, the inspector reviewed the home's management of any medicines related incidents reported to RQIA since the previous medicines management inspection.

During the inspection the inspector met with Mrs Rosemary Dilworth, Registered Manager and Ms Dawn Rhodie, Deputy Manager.

Samples of the following records were examined during the inspection:

Medicines requested and received

Personal medication records

Medicines administration records

Medicines disposed of or transferred

Controlled drug record book

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 10 December 2014. The completed QIP was returned and will be reviewed by the specialist inspector.

5.2 Review of Requirements and Recommendations from the last Medicines Management Inspection on 22 January 2014

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 13(4) Stated Once	The registered manager must ensure that controlled drug cabinets are secured in accordance with the safe custody legislation.	Met
	Action taken as confirmed during the inspection: In each of the three bungalows inspected, the controlled drug cabinet was secured in accordance with the safe custody legislation.	
Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 38 Stated Once	The registered manager should review the procedures in place for the management of medicines being disposed of.	Met
	Action taken as confirmed during the inspection: Satisfactory arrangements were observed to be in place for the disposal of medicines. In each bungalow, discontinued or expired medicines are discarded by two registered nurses into a pharmaceutical clinical waste bin which is uplifted by the waste disposal contractor. Controlled drugs are denatured by two registered nurses prior to disposal.	
Recommendation 2 Ref: Standard 38 Stated Once	The registered manager should monitor the completion of medicine records through the audit process.	Met
	Action taken as confirmed during the inspection: Robust medicines management audit arrangements were observed to be in place.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

Medicines were being administered in accordance with the prescribers' instructions. The audit trails performed on a variety of randomly selected medicines at the inspection produced satisfactory outcomes.

There was evidence that robust arrangements are in place to ensure the safe management of medicines during a patient's admission to the home. Medication details are confirmed with the prescriber and personal medication record sheets are completed and checked by two registered nurses.

Systems are in place to manage the ordering of prescribed medicines to ensure adequate supplies are available and to prevent wastage.

All of the medicines examined at the inspection were available for administration and were labelled appropriately.

The medicine records had been maintained in a satisfactory manner. Good practice acknowledged included the additional records for transdermal patches.

Controlled drug record books and records of the shift handover stock reconciliation checks of Schedule 3 and several Schedule 4 (Part 1) controlled drugs were well maintained.

In each bungalow, discontinued or expired medicines are discarded by two registered nurses into a pharmaceutical clinical waste bin which is uplifted by the waste disposal contractor. Controlled drugs are denatured by two registered nurses prior to disposal.

Is Care Effective? (Quality of Management)

Suitable arrangements are in place for the registered manager to ensure that the management of medicines is undertaken by trained and competent staff and systems are in place to review staff competency in the management of medicines. An induction medicines management training process is in place. Staff have also attended epilepsy management and enteral feeding training. The impact of training is monitored through supervision and appraisal. Staff competency and capability assessments are performed annually. Records of the training and competency assessments are maintained.

There are robust arrangements in place to audit all aspects of the management of medicines. A medicines audit is carried out by the deputy manager each month and she advised that the findings, along with any actions required, are shared with the registered manager and communicated to staff. Copies of these audits were available for inspection. Stock reconciliation checks of Schedule 3 and several Schedule 4 (Part 1) controlled drugs are performed at each transfer of responsibility. Running stock balances are maintained of most solid dose formulation non-blistered medicines. The community pharmacist also completes regular medication audits and provides written reports of the outcomes. A review of the audit records indicated that there had been no major issues raised. The audit process is facilitated by the good practice of recording the date and time of opening on the medicine container.

There are procedures in place to report and learn from any medicines related incidents that have occurred in the home. Since the previous medicines management inspection, the reported incident had been managed appropriately.

Is Care Compassionate? (Quality of Care)

The records for four patients who are prescribed medication for administration on a "when required" basis in the management of distressed reactions were examined. In each instance, the care plan detailed the circumstances under which the medicine was to be administered. The parameters for administration were recorded on the personal medication records. The medicines administration records indicated that the medicines were being administered in accordance with the prescribers' instructions. The reason for administration and outcome of administration were recorded. Staff demonstrated that they have the knowledge to recognise signs, symptoms and triggers which may cause a change in a patient's behaviour.

The records for four patients who are prescribed medicines for the management of pain were reviewed. In each instance, there was a care plan in place which detailed the management of the patient's pain. The care plans are evaluated at approximately monthly intervals. For each patient, a pain assessment had been completed within the previous month. When analgesics are administered, their effect is monitored to ensure that they provide relief and that the patient is comfortable.

Evidence of the prescriber's instruction was in place for several patients who either have medication added to food in order to facilitate its administration or who have medication administered via the enteral feeding route.

Most patients are prescribed either buccal midazolam or rectal diazepam. Several patients' records were examined and, in each instance, there was an epilepsy care plan in place.

Areas for Improvement

None identified.



Number of Requirements:	0	Number of Recommendations:	0
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5.4 Additional Areas Examined

Medicines are being stored safely and securely in accordance with statutory requirements and manufacturers' instructions. Satisfactory arrangements are in place for the security of medicine keys.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager		Date Completed	02.06.15
Registered Person		Date Approved	02.06.15
RQIA Inspector Assessing Response		Date Approved	

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.