

# Unannounced Follow Up Medicines Management Inspection Report 4 June 2019



# **Springlawn Nursing Home**

Type of Service: Nursing Home Address: 44 Old Dromore Road, Omagh, BT78 1RB Tel No: 028 8224 4550 Inspector: Rachel Lloyd

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 nursing home registered to provide nursing care for up to 40 patients with a range of needs as detailed in Section 3.0.

# 3.0 Service details

Organisation/Registered Provider: Springlawn House Limited Responsible Individual: Mrs Linda Florence Beckett	Registered Manager: Mrs Sharon Margaret Colhoun
<b>Person in charge at the time of inspection:</b> Mrs Sharon Colhoun	Date manager registered: 1 April 2005
Categories of care: Nursing Home (NH) I – Old age not falling within any other category LD(E) – Learning disability – over 65 years PH – Physical disability other than sensory impairment PH(E) - Physical disability other than sensory impairment – over 65 years	Number of registered places: 40 including: - a maximum of two patients in category NH- LD(E) and a maximum of two patients in category NH-PH. There shall be a maximum of one named resident receiving residential care in category RC-I.

# 4.0 Inspection summary

An unannounced inspection took place on 4 June 2019 from 10.25 to 14.00.

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

The inspection was undertaken following the receipt of anonymous information by RQIA in relation to Springlawn Nursing Home, regarding the management of and disposal of some controlled drugs and the completion of records.

The following areas were examined during the inspection:

- the storage, management and disposal of controlled drugs
- the area identified for improvement at the last medicines management inspection

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
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	Regulations	Standards
Total number of areas for improvement	1	1*

\*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 Mrs Sharon Colhoun, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

# 4.2 Action/enforcement taken following the most recent care and finance inspection

The most recent inspection of the home was an unannounced care and finance inspection undertaken on 2 May 2019. The report and QIP had not been issued at the time of this inspection.

Significant concerns were identified in respect of the management of patient's care needs, the management of nursing care records, patient fluid intake, wound management and the management of restrictive practice. Governance systems in the home were insufficiently robust to ensure that the nursing home was working in line with legislation.

Enforcement action resulted from the findings of the inspection. As a result two failure to comply notices were issued under The Nursing Homes Regulations (Northern Ireland) 2005 with regards to patient's health and welfare and the governance of the home.

# 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 related incidents reported to RQIA since the last medicines management inspection

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

During the inspection we met with two registered nurses and the registered manager.

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

- medicines requested and received
- personal medication records
- medicines disposed of or transferred
- medicine audits
- medicine administration records
- controlled drug record book

The area for improvement identified at the last medicines management inspection was 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 2 May 2019

The most recent inspection of the home was an unannounced care and finance inspection. The completed QIP will be validated by the care and finance inspectors at their next inspection(s).

# 6.2 Review of areas for improvement from the last medicines management inspection dated 23 April 2018

Areas for improvement from the last medicines management inspectionAction required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015Validation of compliance		Validation of
Area for improvement 1 Ref: Standard 28	The registered person shall closely monitor the administration of inhaled medicines through the audit process.	
Stated: First time	Action taken as confirmed during the inspection: No inhaler devices had been included in audit procedures since the last medicines management inspection. Six inhaler devices were on the trolley at the time of the inspection. Our audits indicated that four of these had been administered according to the prescriber's instructions. One was not marked with the date of opening and therefore compliance could not be assessed. The final inhaler device belonged to a recently admitted patient. It was not recorded on the personal administration record or in the record of incoming medicines and our audits indicated it had not been administered since admission. The registered manager agreed to inform the prescriber. This area for improvement was stated for a second time and a new area for improvement	Not met

was identified regarding the management of medicines at the time of admission.	

### 6.3 Inspection findings

#### The storage, management and disposal of controlled drugs

The two registered nurses on duty and the registered manager advised of the procedures in place for the storage, management and disposal of controlled drugs. These were in line with the systems evidenced during the inspection and the written policies and procedures in place.

The management of controlled drugs that require safe custody was examined. The controlled drug record book was up to date and all balances were checked and found to be correct. All entries included the signature of two registered nurses. Stock was reconciled twice daily at handover and staff stated that balances were checked before the record was signed by both nurses.

Controlled drugs that do not require safe custody were stored separately from other medicines. A running balance was maintained for each medicine and stock was audited once a month by two registered nurses and regularly spot checked by the registered manager. All balances were checked and found to be correct.

The registered manager stated that the process for the disposal of controlled drugs was in line with legal requirements and the written procedure in place. Two registered nurses are involved in denaturing these medicines in order to make them irretrievable and both sign the record of destruction and disposal. Denatured controlled drugs are then disposed of in the appropriate waste receptacle which is stored in the treatment room, collected at regular intervals by an approved waste contractor and a record maintained. This waste had been collected in the last few days and the small amount of content matched the record of outgoing medicines. The record of outgoing medicines from March 2019 onwards was examined and matched entries of outgoing medicines in controlled drug records.

The manager stated at the outset of the inspection that the required procedure had not been followed on one occasion and this was investigated. Procedures were immediately reviewed and reinforced with all registered nurses and signage was observed consistent with this. A copy of the relevant records was provided at the outset of the inspection. This incident should have been reported to RQIA. It was agreed that any further incidents involving the management of controlled drugs would be reported to the appropriate bodies including RQIA.

The registered manager stated that written procedure documents, dated 2012 were still applicable, would be reviewed and shared with staff following the inspection.

#### Management of medicines on admission

Robust arrangements are necessary to ensure that admission procedures are followed on every occasion. See Section 6.2.

	Regulations	Standards
Total number of areas for improvement	0	1

# 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 Mrs Sharon Colhoun, Registered Manager, 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 Department of Health, Social Services and		
Public Safety (DHSSPS)	Care Standards for Nursing Homes, April 2015	
Area for improvement 1	The registered person shall closely monitor the administration of	
	inhaled medicines through the audit process.	
Ref: Standard 28		
	Ref: 6.2	
Stated: Second time	Response by registered person detailing the actions taken:	
	Each patients medicines when being audited will include a full range of	
To be completed by:	all medicines prescribed on there individual kardex	
4 July 2019		
Area for improvement 2	The registered person shall ensure that robust arrangements are in	
	place for the safe management of medicines when a patient is	
Ref: Standard 28	admitted to the home.	
Stated: First time	Ref: 6.3	
	Response by registered person detailing the actions taken:	
To be completed by:	When patient is admitted to springlawn all medicines will be checked	
4 July 2019	of against discharge sheet or if admitted from home gp will supply list	
	of current medication to be checked off against	

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





The Regulation and Quality Improvement Authority 9th Floor Riverside Tower 5 Lanyon Place BELFAST BT1 3BT

Tel028 9536 1111Emailinfo@rqia.org.ukWebwww.rqia.org.ukImage: Organ state sta

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