

Medicines Management Inspection Report 15 September 2020



The Tilery

Type of Service: Nursing Home
**Address: 130 Swanlinbar Road, Florencecourt,
Enniskillen, BT92 2DZ**
Tel no: 028 6634 8811
Inspector: Paul Nixon

www.rqia.org.uk

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 this inspection and do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

Information relating to our inspection framework, the guidance and legislation that informs the inspections, the four domains which we assess services against as well as information about the methods we use to gather opinions from people who have experienced a service can be found at <https://www.rqia.org.uk/guidance/legislation-and-standards/> and <https://www.rqia.org.uk/guidance/guidance-for-service-providers/>

1.0 Profile of service

This is a registered nursing home which provides care for up to 40 patients.

2.0 Service details

<p>Organisation/Registered Provider: The Tilery</p> <p>Responsible Individuals: Mrs Claire Stranney Mr Stephen Stranney</p>	<p>Registered Manager and date registered: Miss Nicola Scovell 13 April 2018</p>
<p>Person in charge at the time of inspection: Ms Donna McGoldrick (Registered Nurse)</p>	<p>Number of registered places: 40</p> <p>The home is approved to provide care on a day basis for 2 persons and 1 named person in category NH-LD. There shall be a maximum of 2 named residents receiving residential care in category RC-I and 1 named patient in category NH-LD.</p>
<p>Categories of care: Nursing Home (NH) I – Old age not falling within any other category.</p>	<p>Number of patients accommodated in the nursing home on the day of this inspection: 38</p>

3.0 Inspection focus

This announced inspection was undertaken by a pharmacist inspector on 15 September 2020 from 09.40 to 12.30. It focused on medicines management within the home.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous inspections findings, registration information, and any other written or verbal information received.

During our inspection we:

- spoke to staff about how they plan, deliver and monitor the care and support provided in the home.
- observed practice and daily life.
- reviewed documents to confirm that appropriate records were kept.

A sample of the following records were examined and/or discussed during the inspection:

- personal medication records
- medicine administration records
- medicine receipt and disposal records
- controlled drug record book
- care records
- staff medicines management training and competency records
- audits

4.0 Inspection Outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Details of the Quality Improvement Plan (QIP) were discussed with Ms Donna McGoldrick, Registered Nurse, as part of the inspection process. The timescales for completion commence from the date of inspection.

The areas for improvement identified at the last care inspection were not reviewed as part of this inspection. They are carried forward to the next care inspection.

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

5.0 What has this service done to meet any areas for improvement identified at or since the last medicines management inspection (IN031136) on 16 July 2018 and care inspection (IN033858) on 18 February 2020?

There were no areas for improvement identified at the last medicines management inspection.

Areas for improvement identified at the last care inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 14 (2) (a) (b) and (c) Stated: Second time	The registered person shall ensure that cleaning chemicals are suitably labelled and stored in accordance with COSHH regulations.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	
Area for improvement 2 Ref: Regulation 13 (1) (b) Stated: First time	The registered person shall ensure that all unwitnessed falls are managed in line with current best practice and that neurological observations are obtained.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	
Area for improvement 3 Ref: Regulation 13 (1) (a) (b) Stated: First time	The registered person shall ensure that the nursing, health and welfare of patients is in accordance with their planned care and the recommendations of other health care professionals.	Carried forward to the next care inspection
	With specific reference to ensuring that: <ul style="list-style-type: none"> • Care plans contain patients recommended dietary type/fluid consistency and daily fluid target. • The patients normal bowel type and frequency are included in care plans. 	

	<ul style="list-style-type: none"> Where a hoist is required the name/type of hoist must be included within the patients care plan. 	
	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	
<p>Area for improvement 4 Ref: Regulation 13(7) Stated: First time</p>	<p>The registered person shall ensure that the environmental and infection prevention and control issues identified during this inspection are urgently addressed.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> Storage of equipment Cleaning of patient equipment following use Colour coding system for the use of cloths and mops for cleaning 	<p>Carried forward to the next care inspection</p>
	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	
<p>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015</p>		<p>Validation of compliance</p>
<p>Area for improvement 1 Ref: Standard 14.26 Stated: Third and final time</p>	<p>The registered person should ensure that an inventory of property belonging to each resident is maintained throughout their stay in the home. The inventory record is reconciled at least quarterly. The record is signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p>	<p>Carried forward to the next care inspection</p>
	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	

<p>Area for improvement 2</p> <p>Ref: Standard 35</p> <p>Stated: Second time</p>	<p>The registered person shall ensure that robust management systems are appropriately established to effectively monitor and report on the safe delivery of care in the home.</p> <p>The registered manager must ensure:</p> <ol style="list-style-type: none"> 1 Environmental audits include all areas of the environment. 2 There is a system in place to ensure that assessments in relation to registered nurse competency and capability are carried out on at least a yearly basis or more often if deemed necessary. <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	<p>Carried forward to the next care inspection</p>
<p>Area for improvement 3</p> <p>Ref: Standard 4</p> <p>Stated: First time</p>	<p>The registered person shall ensure that all nursing interventions are appropriate to the individual patients needs and supported by current evidence and best practice guidelines.</p> <p>Specific reference to supplementary recording charts:</p> <ul style="list-style-type: none"> • Recommended dietary type and fluid consistency to be recorded on daily intake charts to direct relevant care. • Twenty-four hour fluid intake to be entered into the patients daily progress notes. • The frequency of repositioning to be recorded on daily recording charts to reflect the current care plan. <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	<p>Carried forward to the next care inspection</p>

6.0 What people told us about this service

On the day of inspection we spoke to several staff on duty. They expressed satisfaction with how the home was managed and stated they found their work fulfilling. They also said that she had the appropriate training to look after patients and meet their needs.

Good interactions were observed between staff and patients. Staff were warm and friendly and knew the patients well. Staff were wearing appropriate personal protective equipment (PPE).

Feedback methods also included a staff poster and paper questionnaires which were provided to the registered person for any patient or their family representative to complete and return using pre-paid, self-addressed envelopes. No questionnaires were completed within the timeframe for inclusion in this report.

7.0 Inspection findings

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

Patients in nursing homes should be registered with a general medical practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times patients' needs may change and therefore their medicines should be regularly monitored and reviewed. This may be done by the GP or the pharmacist.

All patients in the home were registered with local GPs and medicines were reviewed and dispensed by the community pharmacist.

Personal medication records were in place for each patient. These contained a list of all 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 e.g. medication reviews, transfers to hospital. The records reviewed had been fully and accurately completed. In line with best practice, a second member of staff checked and signed these records when they are updated to provide a double check that they were accurate.

We reviewed the management of medicines prescribed on a "when required" basis for the management of distressed reactions. Care plans were in place and directions for use were clearly recorded on the personal medication records. These medicines were infrequently used.

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

Medicines must be available to ensure that they are administered to patients as prescribed and when they require them. It is important that they are stored safely and securely and disposed of promptly so that there is no unauthorised access.

The records inspected showed that medicines were available for administration when patients required them. The registered nurses advised that there was a good relationship with the community pharmacist and that medicines were supplied in a timely manner.

The medicines storage areas were observed to be securely locked. They were tidy and organised so that medicines belonging to each patient could be easily located. The medicines currently in use were stored within medicine trolleys that were also securely stored so that there could be no unauthorised access. Controlled drugs were stored in the controlled drug cabinets. When medicines needed to be stored at a colder temperature, they were stored within the medicine refrigerator. However, the temperature range had not been monitored for a couple of months. Amongst other medicines, insulin was being stored in the refrigerator. The temperature range of the medicine refrigerator needs to be closely monitored to confirm that medicines are being stored in accordance with the manufacturers' instructions. An area for improvement was identified.

Medicines disposal was discussed with the nurse-in-charge. Medicines were denatured regularly by two registered nurses and were not allowed to accumulate in the home. Disposal of medicine records were examined and had been completed so that medicines could be accounted for.

7.3 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 patients to ensure that they are receiving the correct prescribed treatment.

Within the home, a record of the administration of medicines is completed on pre-printed medicine administration records (MARs) when medicines are administered to a patient. A sample of these records were reviewed which found that they had been completed in a satisfactory manner. For a couple of patients, the food and fluid thickener consistency was not recorded on their personal medication record and MAR sheet. The need for this information to always be recorded in order to help ensure the safe use of thickeners was discussed.

The registered person audits medicine administration on a monthly basis within the home. The audits showed that medicines had been given as prescribed. The date of opening was recorded on medicines not dispensed into monitored dosage system packs so that they can be easily audited. This is good practice.

Audits completed during this inspection also showed that medicines had been given as prescribed.

7.4 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.

We reviewed the management of medicines for two patients who had a recent hospital stay and were discharged back to this home. For each patient, a hospital discharge letter had been received and a copy had been forwarded to the patient's GP. The patient's personal medication record and MAR sheets had been updated to reflect medication changes which had been initiated during the hospital stay. Medicines had been accurately received into the home and administered in accordance with the most recent directions.

7.5 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 that 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.

The audit system in place would help staff to identify medicine related incidents.

There had been no medication related incidents identified since the last medicines management inspection.

7.6 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 patients are well looked after and receive their medicines appropriately, staff who administer medicines to patients must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and that staff are supported.

Staff in the home had received a structured induction which included medicines management when that forms part of their role. Competency had been assessed following induction and annually thereafter. A written record was completed for induction and competency assessments.

8.0 Evaluation of Inspection

This inspection sought to assess if the home was delivering safe, effective and compassionate care and if the service was well led with respect to medicines management.

Although one area for improvement was identified in relation to the management of medicines, the outcome of this inspection concluded that patients and their relatives can be assured medicines are well managed within the home.

We would like to thank the patients and staff for their assistance throughout the inspection.

9.0 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 Ms Donna McGoldrick, Registered Nurse, 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.

9.1 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 (2015)

9.2 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 Nursing Homes Regulations (Northern Ireland) 2005

<p>Area for improvement 1</p> <p>Ref: Regulation 14 (2) (a) (b) and (c)</p> <p>Stated: Second time</p> <p>To be completed by: With Immediate effect</p>	<p>The registered person shall ensure that cleaning chemicals are suitably labelled and stored in accordance with COSHH regulations</p> <p>Ref: 5.0</p>
	<p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 13 (1) (b)</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>The registered person shall ensure that all unwitnessed falls are managed in line with current best practice and that neurological observations are obtained.</p> <p>Ref: 5.0</p>
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<p>Area for improvement 3</p> <p>Ref: Regulation 13 (1) (a) (b)</p> <p>Stated: First time</p> <p>To be completed by: With Immediate effect</p>	<p>The registered person shall ensure that the nursing, health and welfare of patients is in accordance with their planned care and the recommendations of other health care professionals.</p> <p>With specific reference to ensuring that:</p> <ul style="list-style-type: none"> • Care plans contain patients recommended dietary type/fluid consistency and daily fluid target. • The patients normal bowel type and frequency are included in care plans. • Where a hoist is required the name/type of hoist must be included within the patients care plan. <p>Ref: 5.0</p>
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<p>Area for improvement 4</p> <p>Ref: Regulation 13 (7)</p> <p>Stated: First time</p> <p>To be completed by: With Immediate effect</p>	<p>The registered person shall ensure that the environmental and infection prevention and control issues identified during this inspection are urgently addressed.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> • Storage of equipment • Cleaning of patient equipment following use • Colour coding system for the use of cloths and mops for cleaning <p>Ref: 5.0</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
<p>Area for improvement 5</p> <p>Ref: Regulation 13(4)</p> <p>Stated: First time</p> <p>To be completed by: From the date of the inspection onwards</p>	<p>The registered person shall ensure that the temperature range of the medicine refrigerator is closely monitored to confirm that medicines are being stored in accordance with the manufacturers' instructions.</p> <p>Ref: 7.2</p> <p>Response by registered person detailing the actions taken: The registered person has purchases a new fridge thermometer and has implemented a new temperature recording shed to ensure the fridge temperature is monitored to ensure medications are being stored in accordance with manufacturers instructions.</p>
<p>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes (2015)</p>	
<p>Area for improvement 1</p> <p>Ref: Standard 14.26</p> <p>Stated: Third and final time</p> <p>To be completed by: 18 March 2020</p>	<p>The registered person should ensure that an inventory of property belonging to each resident is maintained throughout their stay in the home. The inventory record is reconciled at least quarterly. The record is signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Ref: 5.0</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>

<p>Area for improvement 2</p> <p>Ref: Standard 35</p> <p>Stated: Second time</p> <p>To be completed by: 18 March 2020</p>	<p>The registered person shall ensure that robust management systems are appropriately established to effectively monitor and report on the safe delivery of care in the home.</p> <p>The registered manager must ensure:</p> <ol style="list-style-type: none"> 1 Environmental audits include all areas of the environment. 2 There is a system in place to ensure that assessments in relation to registered nurse competency and capability are carried out on at least a yearly basis or more often if deemed necessary. <p>Ref: 5.0</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
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Please ensure this document is completed in full and returned via the Web Portal



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