

Unannounced Follow Up Medicines Management Inspection Report 8 November 2017



The Tilery

Type of service: Nursing Home
**Address: 130 Swanlinbar Road, Florencecourt,
Enniskillen, BT92 2DZ**
Tel No: 028 6634 8811
Inspector: Catherine Glover

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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 which is registered to provide nursing and residential care for up to 40 patients and residents.

3.0 Service details

Organisation/Registered Provider: The Tilery Responsible Individual(s): Mrs Claire Stranney Mr Stephen Stranney	Registered Manager: Mrs Eileen Stanford
Person in charge at the time of inspection: Ms Nicola Scovell (newly appointed manager)	Date manager registered: 8 December 2016
Categories of care: Nursing Home (NH) I – Old age not falling within any other category Residential Care (RC) I – Old age not falling within any other category	Number of registered places: 40 comprising: Two residential care places in category RC-I with three additional identified persons in this category. The home is approved to provide care on a day basis for two persons.

4.0 Inspection summary

An unannounced inspection took place on 8 November 2017 from 11.30 to 13.20.

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

During the last medicines management inspection on 10 July 2017 concerns regarding audit and governance were identified. This had also been identified during the previous two medicines management inspections and any progress made in addressing the issue had not been sustained.

This was discussed with the registered provider and registered manager during a meeting on 19 July 2017. RQIA decided to allow a period of time to demonstrate improvement.

This inspection was to assess progress with the issue raised.

The outcome of this inspection showed that this concern had been satisfactorily addressed. The need to maintain these standards was discussed. No areas for improvement were identified as a result of this 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

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Nicola Scovell, Manager, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent medicines management inspection

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 10 July 2017. At that inspection, it was identified that improvement continued to be required in the auditing and governance arrangements within the home. This was stated for a third and final time in the Quality Improvement Plan. The registered providers and registered manager were invited to attend a meeting in RQIA to discuss the inspection findings and their action plans to address the issues identified at the inspection. The registered provider gave assurances that the necessary support to drive the improvements would be provided.

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 incidents

During the inspection the inspector met with two patients, the newly appointed manager and deputy manager, the clinical lead, and two registered nurses.

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

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

- personal medication records
- medicine administration records
- medicine audits

Areas for improvements identified at the last medicines management inspection were 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 10 July 2017

The most recent inspection of the home was an unannounced medicines management inspection. The completed QIP was returned and approved by the pharmacist inspector.

6.2 Review of areas for improvement from the last medicines management inspection dated 10 July 2017

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13(4) Stated: Third and final time	The registered person must ensure that there are robust arrangements in place to audit all aspects of the management of medicines and any discrepancies must be investigated and managed appropriately.	Met
	Action taken as confirmed during the inspection: Robust arrangements for auditing all aspects of the management of medicines were observed.	

6.3 Inspection findings

Audit and Governance Systems

The audit and governance systems within the home had been reviewed. It was evident that there had been a focus on medicines management since the last inspection. All nurses in the home had responsibility for completing medicines audits. At the time of the inspection, all of the medicines in the home were being audited at least monthly. Where a discrepancy was noted, the medicine was monitored daily by completing a running stock balance. The manager had completed a comprehensive audit of the complete medicines systems and an action plan to address any issues identified had been generated. There was evidence that staff and management were making progress in completing the action plan.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, the management of medicine incidents and quality improvement. There were clearly defined roles and responsibilities for staff.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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