

**Announced Medicines Management Inspection
of
Knockagh Rise**

29 April 2015

1. Summary of Inspection

An announced medicines management inspection took place on 29 April 2015 from 11.25 to 14.15.

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 significant areas of concern though some areas for improvement were identified and are 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.

1.1 Actions/Enforcement Taken Following the Last Inspection

This was the first medicines management inspection since registration in December 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	4

The details of the QIP within this report were discussed with Ms Anne McCracken, 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: Knockagh Rise Ltd /Mr Malcolm James Wilson	Registered Manager: Ms Anne Florence Josephine McCracken
Person in Charge of the Home at the Time of Inspection: Ms Anne McCracken	Date Manager Registered: 17 December 2014
Categories of Care: NH-I, NH-PH, NH-PH(E)	Number of Registered Places: 29
Number of Patients Accommodated on Day of Inspection: 14	Weekly Tariff at Time of Inspection: £632 - £671

3. Inspection Focus

This was the first medicines management inspection since registration. The inspection sought to assess whether the service provided to patients and residents was in compliance with legislative requirements and current minimum standards, through a process of evaluation of the available evidence. This was achieved through an examination of the following standards and themes:

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 ascertained that no incidents involving medicines had been reported to RQIA since registration. It was noted that a complaint had been received by RQIA in relation to medicine management and while RQIA does not have a role in the investigation of individual complaints, the issues identified were examined during the inspection.

During the inspection the inspector met with the registered manager and the registered nurse on duty.

Samples of the following records were examined during the inspection:

Medicines requested and received	Medicine audits
Personal medication records	Policies and procedures
Medicines administration records	Care plans
Medicines disposed of or transferred	Training records.
Controlled drug record book	

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 4 March 2015. The completed QIP was returned and approved by the care inspector on 28 April 2015.

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

This was the first medicines management inspection since registration.

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

Written confirmation of current medication regimes is obtained from a health or social care professional for new admissions to the home.

Each patient had their own supply of medicines and the audits indicated patients were administered medicines from their own supply. All of the medicines which were selected for audit had been labelled appropriately and included full dosage directions.

The results of a number of random medicine audits, carried out during the inspection, indicated that medicines are broadly being administered to patients in accordance with the prescribers' instructions. Some discrepancies were noted which were discussed with the manager.

Satisfactory arrangements for the management of warfarin were observed. There was evidence that a query regarding the dosage of warfarin had been followed up and resolved promptly.

The majority of the records in relation to the management of medicines had been maintained in a satisfactory manner.

The arrangements in place for the disposal of medicines were discussed. The manager advised that these are collected by a waste disposal company and that the community pharmacist assists staff to denature controlled drugs prior to disposal.

Is Care Effective? (Quality of Management)

From discussion with the manager and examination of training records, there was evidence that a training programme for registered nurses with respect to the management of medicines is in place. This had also included training on the use of a medicinal pump for one patient. The manager advised that she had deemed competent all registered nurses with respect to the management of medicines.

The home has a sample signature and initials list of registered nurses who have been trained and deemed competent to manage medicines.

There was evidence that the manager and staff had undertaken audits of medicines on a regular basis. Registered nurses routinely undertake 'end of bottle' audits.

Is Care Compassionate? (Quality of Care)

The medicines of one patient who was prescribed anxiolytic medicines for the management of distressed reactions were reviewed. The name of the medicines and the parameters for administration had been recorded on the personal medication records. The administration of the medicine was recorded on the MARs and this record corresponded to the entry in the daily nursing evaluation.

Areas for Improvement

The acquisition of prescribed medicines was discussed as there was evidence that a few patients had not received up to two doses of their prescribed medicine as the medicine had been out of stock. While it was acknowledged that ordering systems may have teething problems, registered nurses must be proactive throughout the process. If a new medicine is prescribed by the general practitioner it is the responsibility of the manager to ensure that this is obtained as soon as possible in order that treatment can commence. Guidance previously issued by the Health and Social Care Board advised that staff in registered nursing homes must be responsible for ordering prescriptions for their patients. After the inspection, a copy of this letter was forwarded to the manager.

Although registered nurses have been assessed as competent there was no evidence of the procedure followed. This was discussed with the manager and a recommendation made to formalise the procedure.

The home has written policies and procedures in place for the management of medicines. These had been provided to RQIA as part of the registration process. Queries were raised with the manager and it was agreed that she would review the documents.

The frequency of administration of "when required" medicines must be indicated by clear and definitely stated minimal intervals and a maximum daily dose on the personal medication records. A recommendation was made.

The management of the use of "when required" medicines for pain relief and the management of distressed reactions requires to be developed. Care plans should be in place when these medicines are prescribed detailing the circumstances under which the prescribed medicine may be administered. Regular reviews should be in place. When applicable, pain assessment tools should be in place. A recommendation was made.

The management of patients with Parkinson's was discussed. Following a recent experience in the home it was recommended that staff should have further training to ensure that staff recognise the importance of these medicines being administered in a timely manner.

Number of Requirements:	0	Number of Recommendations:	4
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5.4 Additional Areas Examined

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

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Anne McCracken 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 HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Nursing Homes Regulations (Northern Ireland) 2005/The Residential Care Homes Regulations (Northern Ireland) 2005 and The Children's Home Regulations (Northern Ireland) 2005

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and 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 Manager/Registered Person

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.

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 requirements and recommendations 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

Statutory Requirements

No requirements were made during this inspection.

Recommendations

Recommendation 1

Ref: Standard 28
Stated: First time

To be Completed by:
30 May 2015

It is recommended that a competency assessment tool is developed in order to assess staff prior to assuming responsibility for the management of medicines.

Response by Registered Person(s) Detailing the Actions Taken:

A competency assessment tool has been developed to assess staff prior to assuming responsibility for the management of medicines and is currently in use.

Recommendation 2

Ref: Standard 29
Stated: First time

To be Completed by:
30 May 2015

It is recommended that the frequency of administration of "when required" medicines must be indicated by clear and definitely stated minimal intervals and a maximum daily dose on the personal medication records.

Response by Registered Person(s) Detailing the Actions Taken:

The frequency of administration of "when required" medicines is indicated on the personal medicine kardex by stating the minimal intervals and the maximum daily dose.

Recommendation 3

Ref: Standard 28
Stated: First time

To be Completed by:
30 May 2015

It is recommended that the procedures in place for the management of the use of "when required" medicines for pain relief and the management of distressed reactions are developed.

Response by Registered Person(s) Detailing the Actions Taken:

Residents who are prescribed "when required" medicines for pain relief and/or medicines for the management of distressed reactions have a detailed care plan

Recommendation 4

Ref: Standard 28
Stated: First time

To be Completed by:
30 May 2015

It is recommended that training is provided to staff regarding the management of medicines prescribed for Parkinson's.

Response by Registered Person(s) Detailing the Actions Taken:

A training session conducted by the Parkinson's UK Link Nurse for NI which included the management of medicines prescribed for Parkinson's was held on the 4th June 2015

Registered Manager Completing QIP	<i>Quene H. Gaghan</i>	Date Completed	11.06.15
Registered Person Approving QIP	<i>J. Wilson</i>	Date Approved	12-6-15
RQIA Inspector Assessing Response		Date Approved	

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

RQIA Inspector Assessing Response	Frances Gault	Date Approved	15 June 2015
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