



Announced Enforcement Medicines Management Inspection Report 1 December 2020



Kings Castle

Type of Service: Nursing Home
Address: Kildare Street, Ardglass, BT30 7TR
Tel No: 028 4484 2065
Inspector: Paul Nixon

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 registered nursing home which provides care for up to 42 patients.

3.0 Service details

Organisation/Registered Provider: Messana Investments Ltd Responsible Individual: Mr Gerald Ward	Registered Manager and date registered: Mrs Wendy Miniss Date Registered: 11 February 2016
Person in charge at the time of inspection: Mrs Wendy Miniss	Number of registered places: 42 There shall be a maximum of 5 named residents receiving residential care in category RC-I
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment. PH(E) - Physical disability other than sensory impairment – over 65 years. TI – Terminally ill.	Number of patients accommodated in the nursing home on the day of this inspection: 29

4.0 Inspection summary

An announced inspection took place on 1 December 2020 from 09.40 to 13.25. The inspection sought to assess compliance in relation to two Failure to Comply (FTC) Notices. The areas identified for improvement and compliance with the regulation were in relation to governance and medicines management. The date of compliance with the notices was 1 December 2020.

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 following FTC Notices were issued by RQIA:

FTC000131 and FTC000132 issued on 19 October 2020.

Evidence was available to validate compliance with the FTC Notices.

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	1*	3*

This inspection resulted in no new areas for improvement being identified. Further enforcement action did not result from the findings of this inspection.

* Four areas for improvement from the last inspection on 8 October 2020 were not reviewed as part of this inspection and are carried forward to the next care inspection.

The findings of the inspection were discussed with Mr Gerald Ward, Responsible Individual and Mrs Wendy Minnis, Registered Manager.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

Enforcement notices for registered establishments and agencies are published on RQIA's website at <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity> with the exception of children's services.

5.0 How we inspect

Prior to the inspection a range of information relevant to the home was reviewed. This included the following:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of incidents: it was ascertained that no incidents involving medicines had been reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with the responsible individual, the registered manager, the deputy manager, the office manager and one registered nurse.

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

- personal medication records
- medicine administration records
- controlled drugs records
- hospital discharge record
- monitoring reports completed by the Responsible Individual
- medicine audits and action plans
- staff medicines management training and competency records
- staff duty rotas

6.0 The inspection

6.1 Review of areas for improvement from the last inspection on 8 October 2020

The most recent inspection of the home was an unannounced medicines management and care inspection. The report was issued on 11 November 2020. The Quality Improvement Plan (QIP) is due to be returned to RQIA by 9 December 2020 and will be reviewed by the care inspector. This QIP will be validated by the care inspector at the next care inspection.

This inspection focused solely on the actions contained within the FTC Notices issued on 19 October 2020.

The areas for improvement from the last inspection on 8 October 2020 were not reviewed as part of this inspection and are carried forward to the next care inspection. The QIP in 7.2 reflects the carried forward areas for improvement.

6.2 Inspection findings

FTC Ref: FTC000131

Notice of failure to comply with regulation (10(1)) of The Nursing Homes Regulations (Northern Ireland) 2005

Registered person: general requirements

10.—(1) The registered provider and the registered manager shall, having regard to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill.

In relation to this notice the following five actions were required to comply with this regulation:

- A robust auditing system must be implemented to quality assure the management of medicines.
- A weekly summary of the medicines management audit outcomes must be submitted to RQIA, within five working days of completion.
- Monitoring reports completed under Regulation 29 must be effective in highlighting any shortfalls in the management of medicines.
- Regulation 29 reports must be submitted to RQIA within five working days of completion
- The planned staffing for registered nurses must be consistently provided to ensure that the registered manager has sufficient time to monitor and oversee the management of medicines.

Through inspection of records and discussion with management, we evidenced and acknowledged the progress made in relation to this FTC Notice.

A robust auditing system had been implemented to quality assure the management of medicines. Daily, weekly and monthly audits had been carried out. The daily audits focused on

six patients' medicines each day. The weekly and monthly audits were broader in nature, examining the processes for managing medicines.

The required summaries of the medicines management audit outcomes and Regulation 29 monitoring reports had been submitted to RQIA.

The monitoring reports completed under Regulation 29 had been revised to include a medicines management section and was now effective in highlighting any shortfalls in this aspect of care. The area for improvement relating to the review of the current approach to the monthly visits and the overall quality of the reports produced for the monthly monitoring visit to ensure the processes are effective in monitoring the quality of the service provided was not reviewed as part of this inspection is carried forward to the next care inspection.

Review of the weekly duty rotas evidenced that the planned staffing for registered nurses had been consistently provided to ensure that the registered manager had sufficient time to monitor and oversee the management of medicines

Evidence was available to validate compliance with this FTC Notice.

FTC Ref: FTC000132

Notice of failure to comply with regulation 13(4) of The Nursing Homes Regulations (Northern Ireland) 2005

Health and welfare of patients

13.—(4) *Subject to paragraph (5), the registered person shall make suitable arrangements for the ordering, storage, stock control, recording, handling, safe keeping, safe administration and disposal of medicines used in or for the purposes of the nursing home to ensure that -*

- (a) any medicine which is kept in a nursing home is stored in a secure place; and*
- (b) medicine which is prescribed is administered as prescribed to the patient for whom it is prescribed, and to no other patient; and*
- (c) a written record is kept of the administration of any medicine to a patient.*

In relation to this notice the following four actions were required to comply with this regulation:

- Medicines must be administered to patients in strict accordance with the prescribers' instructions.
- A robust process must be in place for the management of the patient's medicines as part of the admission and readmission process.
- Medicines with a short shelf life must be labelled with the patient's name and date of opening.
- Further training and competency assessment on the management of medicines must be completed for all staff with responsibility for managing medicines.

Through inspection of records and discussion with management, we evidenced and acknowledged the progress made in relation to this FTC Notice.

A wide range of audits indicated that medicines had been administered to patients in strict accordance with the prescribers' instructions.

Although there had been no recent admissions to the home, the records of one patient who had been readmitted to the home from hospital were reviewed and indicated that a robust process was in place for the management of the patient's medicines as part of the readmission process. The policy and procedure for the admission/readmission of patients had been reviewed and revised. A flow chart had also been developed for staff to follow in ensuring that they obtain the correct information and follow the correct procedure to allow a safe and effective admission covering full medical history, correct medicines prescribed and drug allergies.

Medicines with a short shelf life were labelled with the patient's name and date of opening.

Further training and competency assessment on the management of medicines had been completed for all staff with responsibility for managing medicines.

Evidence was available to validate compliance with this FTC Notice.

Areas for improvement

No new areas for improvement were identified during the inspection.

	Regulations	Standards
Number of areas for improvement	0	0

6.3 Conclusion

Evidence was available to validate compliance with the FTC Notices. The management in the home have enhanced systems and processes to ensure that governance is robust. The importance of sustaining the progress made was emphasised.

7.0 Quality improvement plan

There were no new areas for improvement identified during this inspection. The attached QIP contains the areas for improvement carried forward from the last inspection on 8 October 2020. This inspection focused solely on the actions contained with the Failure to Comply Notices issued on 19 October 2020.

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 from the last inspection on 8 October 2020 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 Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 29(4)(a)(b) and (c) Stated: Second time To be completed by: 5 November 2020	The registered person shall ensure that the current approach to the monthly visits and the overall quality of the reports produced for the monthly monitoring visit should be reviewed to ensure the processes are effective in monitoring the quality of the service provided.
	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. Ref 6.1
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes (2015)	
Area for improvement 1 Ref: Standard 46 Stated: Second time To be completed by: Immediate from the date of the inspection	The registered person shall ensure that any notices displayed around the home are laminated to allow them to be cleaned properly.
	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. Ref 6.1
Area for improvement 2 Ref: Standard 23.5 Stated: Second time To be completed by: Immediate from the date of the inspection	The registered person shall ensure that pressure relieving mattresses which required the setting to be completed manually are set accurately. Systems to ensure that correct setting is maintained must be implemented.
	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. Ref 6.1

<p>Area for improvement 3</p> <p>Ref: Standard 35</p> <p>Stated: Second time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that that auditing processes include a re-audit of any deficits identified to ensure the required improvements are made.</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>Ref 6.1</p>



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