



Unannounced Follow Up Medicines Management Inspection Report 15 May 2019



Loughview

Type of Service: Nursing Home
Address: 68 Fortwilliam Park, Belfast, BT15 4AS
Tel No: 028 9077 1930
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 care for up to 31 patients with a variety of care needs as detailed in Section 3.0.

3.0 Service details

Organisation/Registered Provider: Loughview Homes Ltd Responsible Individuals: Mr Michael Curran & Mr Paul Steele	Registered Manager: Ms Margaret Lakehal
Person in charge at the time of inspection: Ms Margaret (Rita) Lakehal	Date manager registered: 1 April 2005
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 registered places: 31

4.0 Inspection summary

An unannounced inspection took place on 15 May 2019 from 10.20 to 12.35.

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.

The inspection sought to assess progress with the issues raised during the previous medicines management inspection on 3 October 2018.

The following areas were examined during the inspection:

- the management of controlled drugs
- the management of injectable medicines
- the governance arrangements for medicines management

One area for improvement was identified regarding the systems in place to ensure medicines are not administered after their expiry date. One area for improvement was stated for a second time regarding the arrangements in place to audit the management of medicines.

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	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 Ms Rita Lakehal, 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 inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 1 April 2019. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

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: 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 two registered nurses on duty and the registered manager.

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
- controlled drug record book
- 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 1 April 2019

The most recent inspection of the home was an unannounced care inspection. The QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last medicines management inspection dated 3 October 2018

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: First time	The registered person shall ensure that the administrations of controlled drug liquids are closely monitored.	Met
	Action taken as confirmed during the inspection: Balances of controlled drug liquids were checked and found to be correct. Staff advised of the systems in place to measure doses accurately using oral syringes or the syringe provided with the product where applicable. Registered nurses advised that any discrepancies would be escalated to the registered manager for attention.	
Area for improvement 2 Ref: Regulation 13(4) Stated: First time	The registered person shall ensure that the controlled drug record book is only completed to indicate the administration of a controlled drug following the administration of the dose to the patient.	Met
	Action taken as confirmed during the inspection: The administration of controlled drugs had been recorded appropriately at the time of the inspection. The registered manager and registered nurses on duty also confirmed that this had been discussed.	

Area for improvement 3 Ref: Regulation 13(4) Stated: First time	The registered person shall ensure that a robust recording system is in place for injectable medicines prescribed to be administered at atypical intervals.	Met
	Action taken as confirmed during the inspection: A record chart had been implemented to ensure that the due date of the next dose of injection was clearly recorded. This had been effective since introduction following the last medicines management inspection. However, two injections had been administered after their expiry date. As written, this area for improvement was assessed as met; a new area for improvement was identified.	
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015		Validation of compliance
Area for improvement 1 Ref: Standard 28 Stated: First time	The registered person shall ensure that robust arrangements are in place to audit all aspects of the management of medicines.	Not met
	Action taken as confirmed during the inspection: The QIP returned Following the last medicines management inspection, stated that a medicines management audit covering all aspects of medicines management, had been introduced for use on a monthly basis. The registered manager stated that this had not actually taken place, due to time pressures. This area for improvement was stated for a second time.	

6.3 Inspection findings

The management of controlled drugs

Satisfactory procedures were in place for the management of controlled drugs. See section 6.2.

The management of injectable medicines

Robust systems must be implemented to ensure that medicines are not administered after their expiry date. See section 6.2.

Governance arrangements for medicines management

The area for improvement identified at the last medicines management inspection had not been addressed effectively. To ensure that the QIP is fully addressed and the improvement sustained, it was suggested that the QIP should be regularly reviewed as part of the quality improvement process. See section 6.2.

Areas for improvement

Robust systems must be implemented to ensure that medicines are not administered after their expiry date.

Robust arrangements to audit all aspects of the management of medicines should be in place. One area for improvement was stated for a second time.

	Regulations	Standards
Total number of areas for improvement	1	0

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 Ms Rita Lakehal, 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 Nursing Homes Regulations (Northern Ireland) 2005

Area for improvement 1 Ref: Regulation 13(4) Stated: First time To be completed by: 15 June 2019	The registered person shall ensure that robust systems are implemented to ensure that medicines are not administered after their expiry date. Ref: 6.2 Response by registered person detailing the actions taken: Checking the expiry dates of medicines is included on the monthly audit and action is taken accordingly.
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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 Ref: Standard 28 Stated: Second time To be completed by: 15 June 2019	The registered person shall ensure that robust arrangements are in place to audit all aspects of the management of medicines. Ref: 6.2 Response by registered person detailing the actions taken: Audits have been commenced and will be carried forward monthly.
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Please ensure this document is completed in full and returned via the Web Portal



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