Manor Lodge
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5 The Manor
Blacks Road
Dunmurry
BT10 0NB

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Unannounced Medicines Management Inspection of Manor Lodge

3 March 2016

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced medicines management follow-up inspection of Manor Lodge took place on 3 March 2016 from 10.15 to 13.00. The dementia unit was inspected.

The management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no areas of concern. A Quality Improvement Plan (QIP) was not included in this report.

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

For the purposes of this report, the term 'patients' is used to described those living in Manor Lodge which provides both nursing and residential care.

1.1 Actions/Enforcement Taken Following the Last Medicines Management Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last inspection on 28 October 2015.

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	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Four Seasons Health Care / Dr Maureen Claire Royston	**Registered Manager:** Ms Judy Brown (Acting Manager)
Person in Charge of the Home at the Time of Inspection: Mr Edward Kearney (Deputy Manager)	**Date Manager Registered:** Application not yet submitted
Categories of Care: NH-I, NH-PH, NH-PH(E), NH-TI, NH-DE, RC-I	**Number of Registered Places:** 39
Number of Patients Accommodated on Day of Inspection: 34 (13 patients in the dementia unit)	**Weekly Tariff at Time of Inspection:** £593 - £608 per week, nursing care £593 - £604 per week, dementia care £470 per week, residential care

3. Inspection Focus

The inspection on 28 October 2015 had shown that robust arrangements were not in place for all aspects of the management of medicines and improvements were necessary. This inspection sought to assess progress with the issues raised during the last medicines management inspection.

4. Methods/Process

Specific methods/processes used included the following:

The management of incidents reported to RQIA since the last medicines management inspection was reviewed.

We met with the deputy manager, Mr Edward Kearney.

The following records were examined:

- medicines requested and received
- personal medication records
- medicine administration records
- controlled drug record book
- medicine audits
- care plans

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced medicines management inspection dated 28 October 2015. The completed QIP was returned and approved by the pharmacist inspector.

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

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 **Ref**: Regulation 13(4) **Stated:** First time	The registered person must ensure that the administrations of liquid formulation medicines in the dementia unit are closely monitored in order to ensure compliance with the prescribed dosage directions.	**Met**
	Action taken as confirmed during the inspection: Weekly audits were performed on liquid formulation medicines. A record was maintained of the date of opening and expected date of completion for each liquid medication and daily monitoring sheets were in place. The audits performed during the inspection produced satisfactory outcomes.	
Last Inspection Recommendations		**Validation of Compliance**
Recommendation 1 **Ref**: Standard 29 **Stated:** First time	Records of all medicines received on admission should be maintained.	**Met**
	Action taken as confirmed during the inspection: Records had been maintained of all medicines received from patients admitted to the dementia unit since the previous medicines management inspection.	
Recommendation 2 **Ref**: Standard 18 **Stated:** First time	Where medication is prescribed on a 'when required' basis for the management of distressed reactions, the care plan should identify the parameters for administration and the reason for and outcome of each administration should be recorded.	**Met**
	Action taken as confirmed during the inspection: Care plans had been put in place which identified the parameters for administration of medication prescribed on a 'when required' basis for the management of distressed reactions. The reason and outcome of administration had been recorded.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

Liquid formulation medicines were being administered in accordance with the prescribers' instructions. The audit trails performed on a range of randomly selected liquid formulation medicines produced satisfactory outcomes.

Records of medicines received from patients on admission had been maintained.

The personal medication records and medicine administration records examined had been maintained in a satisfactory manner.

One patient had medication dispensed, by the community pharmacy, in a weekly multi compartment dose administration aid. The pharmacist had not provided a description of each medicine in order to facilitate its identification. The deputy manager agreed to follow this matter up with the pharmacist.

Is Care Effective? (Quality of Management)

There was an effective medicines auditing system in place. A record was maintained of the date of opening and expected date of completion for each liquid medication and daily monitoring sheets were in place. The dates and times of opening of medicine containers were recorded in order to facilitate audit activity. Weekly audits were performed on a selection of liquid formulation medicines and solid dose medicines not contained in the monitored dosage system blister packs. These audits had produced broadly satisfactory outcomes. The deputy manager stated that one discrepancy had recently been observed in a liquid formulation medicine and this had been discussed with the nursing staff.

Is Care Compassionate? (Quality of Care)

The records for three patients who were prescribed medication for administration on a 'when required' basis for the management of distressed reactions were reviewed. Care plans were in place. The parameters for administration were recorded on the personal medication records. Examination of the medicine administration records indicated that the medicines had been administered as prescribed. When administered, the reason and outcome had been recorded.

Areas for Improvement

No areas for improvement, other than the one area discussed in the body of the report, were identified.

Number of Requirements	**0**	**Number of Recommendations**	**0**

6. No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Tracey Palmer	**Date Completed**	11.03.16
Registered Person	Dr Claire Royston	**Date Approved**	21.03.16
RQIA Inspector Assessing Response	Paul W. Nixon	**Date Approved**	01.04.16

Please provide any additional comments or observations you may wish to make below:

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

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 service. 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.