Scrabo Isles
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BT23 4TP

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Unannounced Medicines Management Inspection of Scrabo Isles

12 May 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced medicines management inspection took place on 12 May 2015 from 10:20 to 13:55.

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 (2015).

Recommendations made as a result of this inspection relate to the DHSSPS Care Standards for Nursing Homes, April 2015. Recommendations made prior to April 2015 relate to DHSSPS Nursing Homes Minimum Standards, February 2008. RQIA will continue to monitor any recommendations made under the 2008 standards until compliance is achieved. Please also refer to sections 5.2 and 6.2 of this report.

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 medicines management inspection on 23 January 2013.

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	2	0

The details of the QIP within this report were discussed with Ms Annalyn Depayso, 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: Tona Enterprises Ltd Mr Robert Maxwell Duncan	**Registered Manager:** Ms Annalyn Depayso
Person in Charge of the Home at the Time of Inspection: Ms Annalyn Depayso	**Date Manager Registered:** 4 June 2009
Categories of Care: NH-I, NH-PH, NH-PH(E), NH-TI	**Number of Registered Places:** 33
Number of Patients Accommodated on Day of Inspection: 29	**Weekly Tariff at Time of Inspection:** £593 - £623

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the last medicines management inspection and to determine if the following standards and themes have been met:

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 reviewed the management of medication related incidents reported to RQIA since the last medicines management inspection.

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

The following records were examined during the inspection:

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

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home on 23 January 2015 was an announced care and estates inspection (due to a variation in registration). The completed QIP was returned and approved by the care inspector on 6 February 2015.

5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection on 23 January 2013

Last Inspection Recommendation		Validation of Compliance
Recommendation 1 **Ref**: Standard 37 **Stated:** First time	Two nurses should be involved in the disposal of medicines into the designated clinical waste bins.	**Met**
	Action taken as confirmed during the inspection: The records of the disposal of medicines indicated that two nurses were involved in the disposal of medicines into the designated clinical waste bins.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

The majority of the audits which were carried out on several randomly selected medicines produced satisfactory outcomes. However, discrepancies were observed in two supplies of Ebixa liquid 5mg/actuation. The registered person must closely monitor the administration of Ebixa liquid 5mg/actuation. Any further discrepancies must be investigated and reported to the appropriate authorities, including RQIA.

The stock ordering system was reviewed. Systems are in place to manage the ordering of prescribed medicines to ensure adequate supplies are available and to prevent wastage. All medicines were available for administration on the day of the inspection.

Arrangements are in place to ensure the safe management of medicines during a patient's admission to the home. The admission process was reviewed for two recently admitted patients. Their medicine regimes had been confirmed with the prescribers in writing; hospital discharge letters were in place.

The management of insulin was reviewed. The date of opening had been recorded on the insulin pen, in use, and it was stored at room temperature. Control checks are carried out on blood glucometers each day and the date of opening had been recorded on the glucose control solution in order to facilitate disposal at expiry.

The management of warfarin was reviewed for two patients and found to be satisfactory. Dosage directions had been received in writing and transcribing involved two registered nurses. Daily running stock balances had been maintained. Satisfactory audit outcomes were observed at this inspection.

The management of thickening agents was discussed. Records of administration were recorded on the home's computerised recording system. The required consistency level was recorded.

Medicine records were legible and accurately maintained so as to ensure that there was a clear audit trail.

The majority of updates on the personal medication records and hand-written medication administration records had been verified and signed by two registered nurses.

Medicine receipt records were observed to be satisfactory. Discontinued and refused medicines are collected by a waste management company. Two members of trained staff were involved in the disposal of medicines and both had signed the records of disposal.

Controlled drugs were observed to be managed in a satisfactory manner. The registered manager confirmed that controlled drugs in Schedules 2, 3 and 4 (Part 1) are denatured prior to disposal, however this had not been recorded in the controlled drug record book. The registered manager agreed to record that controlled drugs are denatured prior to their disposal from the date of the inspection onwards.

Is Care Effective? (Quality of Management)

Written policies and procedures for the management of medicines, including Standard Operating Procedures for the management of controlled drugs, were in place.

The registered manager advised that a record of the training and development activities completed by the registered nurses in relation to the management of medicines is maintained. A sample of training records and competency assessments was provided for inspection and found to be satisfactory.

There was recorded evidence to indicate that care staff had received training on the use of thickening agents and the administration of emollient and barrier preparations. Further update training has been arranged.

Daily running stock balances are maintained for the majority of medicines which are not supplied in the monitored dosage system. A review of these audits indicated that they had been accurately maintained. These audits are then reviewed by the registered manager at random intervals. The registered manager agreed to initial and date her audits from the date of the inspection onwards.

Two medication related incidents had been reported to RQIA since the last medicines management inspection. They had been addressed in a satisfactory manner.

Is Care Compassionate? (Quality of Care)

There was evidence that registered nurses have requested alternative formulations to assist administration when patients have had difficulty swallowing tablets.

One patient was prescribed medicines for the management of Parkinson's. The timing of the administration of their medicines was clearly recorded and the registered manager confirmed that staff recognised the importance of these medicines being administered in a timely manner.

The registered manager and registered nurse advised that anxiolytic medicines for administration on a "when required" basis for the management of distressed reactions are not currently prescribed for any patients. A review of one recently prescribed "when required" anxiolytic indicated that a care plan had been in place and because the medicine was being used frequently it had been reviewed by the prescriber and was now been administered daily.

The records for two patients who are prescribed medicines for the management of pain were reviewed. The names of the medicines and the parameters for administration had been recorded on the personal medication records. The administration had been recorded on the medication administration records and the management of the patients' pain had been assessed daily. Care plans were in place and there was evidence that these had been reviewed. Pain assessments are completed as part of the pre-admission assessments. Where patients are unable to verbalise that they are in pain, a pain assessment tool is used.

Areas for Improvement

The registered person must closely monitor the administration of Ebixa liquid 5mg/actuation. Any further discrepancies must be investigated and reported to the appropriate authorities, including RQIA. A requirement was made.

The registered manager agreed to record that controlled drugs are denatured prior to their disposal from the date of the inspection onwards.

The registered manager agreed to initial and date her audits from the date of the inspection onwards.

Number of Requirements:	**1**	**Number of Recommendations**:	**0**

5.4 Additional Areas Examined

Storage space for medicines is very limited; the registered manager advised that plans are in place for a larger treatment room.

The consistent recordings for the daily maximum and minimum refrigerator temperature recordings indicate that the thermometer is not being reset each day. The registered person must ensure that the refrigerator thermometer is reset each day after the current, maximum and minimum temperatures have been recorded. A requirement was made.

The registered manager was reminded that oxygen cylinders should be secured by a chain attached to the wall.

6 Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Annalyn Depayso, Registered Manager, 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.

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 (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 Person/Registered Manager

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** and assessed by the inspector.

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	
Requirement 1 **Ref**: Regulation 13 (4) **Stated:** First time **To be Completed by:** **12 June 2015**	It is a requirement that the registered person must closely monitor the administration of Ebixa liquid 5mg/actuation. Any further discrepancies must be investigated and reported to the appropriate authorities, including RQIA.
	Response by Registered Person(s) Detailing the Actions Taken: Administration of Ebixa liquid 5mg/actuation will be closely monitored. Now included in the daily balance sheet. Any discrepancies will be investigated and reported to the appropriate authorities including RQIA.
Requirement 2 **Ref**: Regulation 13 (4) **Stated:** First time **To be Completed by:** **12 June 2015**	It is a requirement that the registered person must ensure that the refrigerator thermometer is reset each day after the current, maximum and minimum temperatures have been recorded.
	Response by Registered Person(s) Detailing the Actions Taken: The Refrigerator thermometer is being reset by the Nurses every after taking and recording the daily current, maximum and minimum temperatures.

Registered Manager Completing QIP	Annalyn Depayso	**Date Completed**	29/05/15
Registered Person Approving QIP	Robert Duncan	**Date Approved**	29/05/15
RQIA Inspector Assessing Response	Helen Daly	**Date Approved**	3/6/2015

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