



The **Regulation** and
Quality Improvement
Authority

The Somme
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Belfast
BT4 2NA

Inspector: Paul Nixon
Inspection ID: IN022503

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Unannounced Medicines Management Inspection of The Somme

9 December 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced medicines management inspection took place on 9 December 2015 from 10.00 to 13.55.

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 DHSSPS Care Standards for Nursing Homes, April 2015.

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 medicines management inspection on 19 April 2012.

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: Board of Directors The Somme Nursing Home Mr Jonathon Kitson – Responsible Person	Registered Manager: Mrs Gail Ellen Chambers
Person in Charge of the Home at the Time of Inspection: Mrs Gail Ellen Chambers	Date Manager Registered: 11 June 2014
Categories of Care: NH-I, NH-PH, NH-PH(E) and NH-TI	Number of Registered Places: 41
Number of Patients Accommodated on Day of Inspection: 41	Weekly Tariff at Time of Inspection: £643 - £693

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 included the following:

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

We met with the registered manager, Mrs Gail Chambers and the registered nurses on duty.

The following records were examined:

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

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 14 August 2015. The completed QIP was returned and approved by the care 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 policy and procedure document detailing the arrangements for the disposal of medicines must be revised and expanded in order to ensure that it complies with legislative requirements and covers all aspects of the disposal of medicines.	Met
	Action taken as confirmed during the inspection: This document had been revised and expanded.	
Requirement 2 Ref: Regulation 13(4) Stated: First Time	Unwanted medicines must be taken to facilities that are licensed or permitted to receive them, in accordance with the requirements of The Controlled Waste Regulations (Northern Ireland) 2002, as amended.	Met
	Action taken as confirmed during the inspection: Discontinued or expired medicines were uplifted by a waste management company.	
Requirement 3 Ref: Regulation 13(4) Stated: First Time	Eye-treatment medicines must not be used beyond their expiry dates.	Met
	Action taken as confirmed during the inspection: The eye-treatment medicines examined were within their recommended expiry dates.	
Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 37 Stated: First Time	There should be standard operating procedures covering all areas of the management of controlled drugs.	Met
	Action taken as confirmed during the inspection: There were standard operating procedures detailing the arrangements for the management of controlled drugs.	

Recommendation 2 Ref: Standard 38 Stated: First Time	The removals of lidocaine patches should be recorded.	Met
	Action taken as confirmed during the inspection: Arrangements had been made to address this issue.	
Recommendation 3 Ref: Standard 39 Stated: First Time	The dates of opening should be routinely recorded on all medicines that have a short expiry date once opened.	Met
	Action taken as confirmed during the inspection: The dates of opening were recorded on all those medicines examined that had a short expiry date once opened.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

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

Arrangements were in place to ensure the safe management of medicines during a patient's admission to the home. The admission process was reviewed for three recently admitted patients. Two nurses had verified and signed the personal medication records.

Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. There was no evidence to indicate that medicine doses were omitted due to being out of stock. Medicines were observed to be labelled appropriately.

Medicines were prepared immediately prior to their administration from the container in which they were dispensed.

The medicine records had been maintained in a satisfactory manner. Records of the ordering, receipt, administration and disposal of medicines were maintained. Where transcribing of medicine details had occurred, this process had involved two registered nurses to ensure the accuracy of the record; this is good practice. Other good practice acknowledged included the additional records for insulin, hydroxocobalamin injections, transdermal patches and warfarin.

Stock reconciliation checks were performed on controlled drugs which require safe custody, at each transfer of responsibility.

Records showed that discontinued and expired medicines had been returned to a waste management company. Two registered nurses were involved in the disposal of medicines and both had signed the records of disposal. Controlled drugs were denatured prior to their disposal.

Is Care Effective? (Quality of Management)

Policies and procedures for the management of medicines, including Standard Operating Procedures for the management of controlled drugs, were available.

There was evidence that medicines were being managed by registered nurses who had been trained and deemed competent to do so. Annual update training on the management of medicines had been completed. Competency assessments were completed annually.

Care staff were responsible for the administration of thickening agents and emollient preparations, under the supervision of the registered nurses. The registered manager advised that care staff received training on the management of thickening agents and emollient preparations as part of their induction.

There were robust internal auditing systems. The registered nurses had completed daily audits on most psychoactive medicines. In addition, the management team had completed regular audits on the management of medicines. The community pharmacist had completed a quarterly audit.

There were procedures in place to report and learn from medicine related incidents that had occurred. The medicine incidents reported to RQIA since the last medicines management inspection had been managed appropriately.

Is Care Compassionate? (Quality of Care)

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

The records for five patients who were prescribed anxiolytic medicines for administration on a “when required” basis for the management of distressed reactions were examined. For two patients, who were occasionally administered the prescribed anxiolytic medicine, there were care plans in place and there was evidence that the care plans were reviewed regularly. The other three patients had not needed to be administered the medication for a significant period of time. The registered manager stated that the medication would only be detailed in the patient’s care plan if it needed to be administered. The need to ensure that each patient who was prescribed medication for administration on a “when required” basis for the management of distressed reactions had a care plan directing its use was discussed.

The records for three patients who are prescribed medicines for the management of pain were reviewed. The registered manager confirmed that patients have pain reviewed as part of the admission assessment. Care plans for the management of pain were in place and there was evidence that they were being reviewed monthly. The names of the medicines and the parameters for administration had been recorded on the personal medication records. Pain assessment tools were being used when appropriate.

Areas for Improvement

IN022503

None

Number of Requirements:	0	Number of Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	<i>68 Chambers</i>	Date Completed	04/01/16.
Registered Person	<i>[Signature]</i>	Date Approved	04/01/16.
RQIA Inspector Assessing Response		Date Approved	

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

RQIA Inspector Assessing Response	Paul W. Nixon	Date Approved	05/01/2016
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