



The Regulation and  
Quality Improvement  
Authority

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## Unannounced Medicines Management Inspection of Pinewood

12 August 2015

The Regulation and Quality Improvement Authority  
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## 1. Summary of Inspection

An unannounced medicines management inspection took place on 12 August 2015 from 10.45 to 13.10.

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 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) Residential Care Homes Minimum Standards (2011).

### 1.1 Actions/Enforcement Taken Following the Last 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 22 August 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
<b>Total number of requirements and recommendations made at this inspection</b>	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

<b>Registered Organisation/Registered Person:</b> Northern Health and Social Care Trust Mr Anthony Baxter Stevens	<b>Registered Manager:</b> Mrs Mairead Donnelly (Acting)
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Mairead Donnelly	<b>Date Manager Registered:</b> Not Applicable
<b>Categories of Care:</b> RC-I	<b>Number of Registered Places:</b> 36
<b>Number of Residents Accommodated on Day of Inspection:</b> 24	<b>Weekly Tariff at Time of Inspection:</b> £470

### 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 30: Management of medicines

Standard 31: Medicine records

Standard 33: Administration of medicines

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 medicine related incidents reported to RQIA since the previous medicines management inspection.

During the inspection the inspector met with the acting manager and staff on duty.

The following records were examined during the inspection:

Medicines requested and received

Personal medication records

Medicine administration records

Medicines disposed of or transferred

Controlled drug record book

Medicine audits

Policies and procedures

Training records.

Medicines refrigerator 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 18 November 2014. The completed QIP was returned and approved by the care inspector.

## 5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection 18 November 2015

Last Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b> <b>Ref: Standard 30</b>  <b>Stated once</b>	The registered manager should develop and implement Standard Operating Procedures for the management of controlled drugs.  <b>Action taken as confirmed during the inspection:</b>  The manager is in the process of reviewing the standard operating procedure for controlled drugs. A draft was provided for inspection. The draft procedure should be amended to reflect practices in Pinewood. This recommendation has not been restated as it was agreed that it would be addressed in the following days.	<b>Partially Met</b>

## 5.3 The Management of Medicines

### Is Care Safe? (Quality of Life)

Pinewood was providing residential care for four permanent residents and the rest of the residents were receiving step up/step down or respite care.

The audits which were completed at the inspection produced satisfactory outcomes indicating that the medicines had been administered as prescribed.

Systems were in place to ensure medicines were available for each resident's needs. The acting manager advised that medicines were counted on admission and a diary entry was made to prompt staff to order more medicines when required. Analgesia requirements were reassessed two days after admission to ensure that sufficient supplies were available.

The acting manager advised that robust arrangements were in place to ensure the safe management of medicines during a resident's admission to the home; an up to date personal medication record was in place for each resident. New arrangements had been implemented whereby newly admitted residents were assessed by a general practitioner within five days of admission. The acting manager advised that this procedure was working well.

The management of warfarin was discussed with the acting manager who advised that she was in the process of changing some of the documentation used. Advice was given to reduce the number of times the faxed dosage instructions were required to be transcribed by staff.

Personal medication records were in place for each resident. In the absence of the prescriber's signature two members of staff had signed the personal medication records.

The medication administration records had been maintained in a satisfactory manner.

Records for the medicines received and returned had been accurately maintained.

### **Is Care Effective? (Quality of Management)**

The Northern Health and Social Care Trust policies and procedures for the management of medicines were available.

The acting manager advised that medicines were being managed by staff who had been trained and deemed competent to do so; there was a training matrix in place to ensure that training was up to date. Update training on the management of medicines was provided regularly. Staff had also recently attended training on the application of topical medicines and the management of Parkinson's. The acting manager confirmed that there was a system of regular supervisions and annual competency assessment.

There was an up to date list of staff names and sample signatures.

There were systems in place to audit the practices for the management of medicines. Night staff randomly sample medicines to be audited.

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

### **Is Care Compassionate? (Quality of Care)**

No residents were prescribed medicines on a "when required" basis for the management of distressed reactions at the time of this inspection. The management of these medicines was discussed with the acting manager.

The acting manager confirmed that residents would have their pain management reviewed as part of the admission assessment. The acting manager advised that residents were able to tell staff when they required pain relief and that staff were knowledgeable in managing pain relief.

### **Areas for Improvement**

It was agreed that the Standard Operating Procedures for the management of controlled drugs would be updated without delay.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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#### 5.4 Additional Areas Examined

Storage of medicines was observed to be tidy and organised.

The maximum, minimum and current temperature of the medicines refrigerator was being monitored each day and was within the required range.

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.

**No requirements or recommendations resulted from this inspection.**

**I agree with the content of the report.**

<b>Registered Manager</b>	M Donnelly	<b>Date Completed</b>	14.09.15
<b>Registered Person</b>	Tony Stevens Una Cunning	<b>Date Approved</b>	21.09.15
<b>RQIA Inspector Assessing Response</b>	Cathy Wilkinson	<b>Date Approved</b>	25/09/2015

Please provide any additional comments or observations you may wish to make below:  
Standard Operating Procedures now reflect the practice in Pinewood

\*Please complete in full and returned to [pharmacists@rqia.org.uk](mailto:pharmacists@rqia.org.uk) from the authorised email address\*