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Unannounced Medicines Management Inspection of Kingscourt

7 October 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced medicines management inspection took place on 7 October 2015 from 10:10 to 13:45.

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.

Recommendations made as a result of this inspection relate to the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015. Recommendations made prior to April 2015 relate to the 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.

This inspection was underpinned by the DHSSPS Care Standards for Nursing Homes, April 2015.

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 medicine management inspection on 29 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	0	3

The details of the QIP within this report were discussed with the nurse in charge, Ms Miranda Curry, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Manor Healthcare Ltd Mr Eoghain King	**Registered Manager:** Mr Brian Campbell
Person in Charge of the Home at the Time of Inspection: Ms Miranda Curry, Nurse in Charge	**Date Manager Registered:** 1 April 2005
Categories of Care: NH-LD, NH-LD(E)	**Number of Registered Places:** 19
Number of Patients Accommodated on Day of Inspection: 16	**Weekly Tariff at Time of Inspection:** £607 (minimum)

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 incidents reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with several patients, two registered nurses and the registered manager.

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
Care plans
Training records.
Medicines storage temperature records

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 11 June 2015. The completed QIP was returned and approved by the care inspector on 17 August 2015.

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 twice**	The registered manager must ensure that the maximum, minimum and current temperatures of the refrigerator are monitored and recorded daily.	**Met**
	Action taken as confirmed during the inspection: Temperatures were recorded daily and records were available for inspection. Staff were reminded that the thermometer should be reset after temperatures are recorded on every occasion.	
Requirement 2 **Ref**: Regulation 13(4) **Stated once**	The registered manager must ensure that the controlled drugs record book is maintained appropriately.	**Met**
	Action taken as confirmed during the inspection: The controlled drug record book had been satisfactorily maintained.	
Requirement 3 **Ref**: Regulation 13(4) **Stated once**	The registered manager must ensure that appropriate signage is in place where oxygen is stored.	**Met**
	Action taken as confirmed during the inspection: Appropriate signage was observed to be in place.	

Last Inspection Recommendations		Validation of Compliance
Recommendation 1 **Ref**: Standard 38 **Stated once**	The registered manager should ensure that records of disposal/transfer of medicines include the signature of two nurses and the reason for the transfer/disposal.	**Met**
	Action taken as confirmed during the inspection: This was evidenced during the inspection.	
Recommendation 2 **Ref**: Standard 38 **Stated once**	The registered manager should ensure that entries in the controlled drug record book are checked on each occasion when stock reconciliation and the transfer of responsibility for safe custody of controlled drugs take place.	**Not Met**
	Action taken as confirmed during the inspection: These arrangements were put into place following the last inspection but have since been discontinued. No records of stock reconciliation at transfer of responsibility of controlled drugs subject to safe custody arrangements were in place. This included controlled drugs in use and those discontinued and awaiting destruction and disposal. **This recommendation was restated.**	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

The audits which were carried out on a range of randomly selected medicines produced satisfactory outcomes, indicating that the medicines had been administered as prescribed.

Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. All medicines were available for administration on the day of the inspection. Medicines were observed to be labelled appropriately.

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 one recently admitted patient. Medicine regimes had been confirmed in writing. Two registered nurses had verified and signed the personal medication record.

At the time of the inspection, medicines were prepared immediately prior to their administration from the container in which they were dispensed.

Medicine records had largely been maintained in a satisfactory manner to ensure that there was a clear audit trail. Records of the prescribing, ordering, receipt, administration, non-administration and disposal of medicines were examined. Personal medication records examined were written and signed by two registered nurses, this is safe practice. Diabetes and epilepsy management plans were available for relevant patients.

Records of the administration of external preparations by care assistants were examined. These did not always reflect the administration of these preparations according to the prescriber's instructions and were not monitored regularly.

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 disposal using denaturing kits.

The controlled drug record book had been maintained in a satisfactory manner. However, records of stock reconciliation checks for controlled drugs, which are subject to safe custody legislation, were not in place for each transfer of responsibility.

Is Care Effective? (Quality of Management)

Policies and procedures for the management of medicines, including Standard Operating Procedures (SOPs) for the management of controlled drugs, were being updated at the time of the inspection. These were forwarded to the inspector by email on 15 October 2015.

There was evidence that medicines were being managed by registered nurses who had been trained and deemed competent to do so. The impact of training was monitored through team meetings, supervision and annual appraisal. A sample of training records and competency assessments were provided. Update training on the management of medicines had been completed at training sessions provided by a training consultancy. Training on delegated medicines tasks had been provided for relevant care assistants on 2 July 2015. Competency assessments for registered nurses and for those care assistants responsible for delegated medicines tasks were available for examination. Lists of the names, signatures and initials of registered nurses and trained care assistants were maintained.

There were satisfactory auditing systems in place for medicines. Any discrepancies were discussed with staff. Audit was facilitated by the routine practice of recording the date of opening on most medicine containers.

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

There were arrangements in place to note any compliance issues with medicine regimes and the nurse in charge confirmed that these would be reported to the patient's prescriber.

Is Care Compassionate? (Quality of Care)

Observation of staff interactions with patients confirmed that communication was well maintained and patients were observed to be treated with dignity and respect. Staff were observed responding to patients' needs and requests promptly and cheerfully, and taking time to reassure patients as necessary.

The records for a number of patients who were prescribed anxiolytic medicines for administration on a "when required" basis for the management of distressed reactions were examined. Records of prescribing and administration were in place; these medicines had been used only occasionally. Care plans were in place for both medication and behaviour and there was evidence that these were being reviewed monthly, however the use of the anxiolytic was not always detailed in the care plan. The reason for and outcome of administration had been recorded for most of the few examples of administration observed.

The nurse in charge confirmed that all patients have pain reviewed as part of the admission assessment. The records for several patients who were prescribed medicines for the management of pain were reviewed. The names of the medicines and the parameters for administration had been recorded on personal medication records. Care plans for the management of pain were in place and these had been reviewed monthly. Pain assessment tools and charts were in use where appropriate.

Areas for Improvement

The administration of external preparations by designated care assistants should be reviewed to ensure that records of administration are accurately maintained and monitored regularly. A recommendation was made.

The registered manager should ensure that entries in the controlled drug record book are checked on each occasion when stock reconciliation and the transfer of responsibility for safe custody of controlled drugs take place. This should include both controlled drugs in use and those discontinued and awaiting destruction and disposal. A recommendation was restated.

The registered manager should monitor the completion of records regarding the management of distressed reactions, to ensure that the prescribed medication is detailed in the care plan and that the reason for and outcome of administration is recorded on every occasion. A recommendation was made.

Number of Requirements:	**0**	**Number of Recommendations**:	**3**

5.4 Additional Areas Examined

Medicines were stored safely and securely. Satisfactory arrangements were in place for the management of medicines keys.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with the nurse in charge, Ms Miranda Curry, 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 DHPSS (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 the DHSSPS Care Standards for Nursing Homes, April 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 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

No requirements were made as a result of this inspection

Recommendations

Recommendation 1 **Ref**: Standard 38 **Stated: Second time** **To be Completed by:** **7 November 2015**	The registered manager should ensure that entries in the controlled drug record book are checked on each occasion when stock reconciliation and the transfer of responsibility for safe custody of controlled drugs take place.
	Response by Registered Person(s) Detailing the Actions Taken: Our arrangements for maintaining stock checks of controlled drugs will be amended to ensure that checks are made and the amount of stock is entered in the Controlled Drug Record Audit Book on each occasion when transfer of responsibility of controlled drugs take place.
Recommendation 2 **Ref**: Standard 29 **Stated: First time** **To be Completed by:** **7 November 2015**	It is recommended that the registered manager should review the administration of external preparations by designated care assistants to ensure that records of administration are accurately maintained and monitored regularly.
	Response by Registered Person(s) Detailing the Actions Taken: A review of training and record keeping for the administration of external preparations by deignated care staff will be undertaken to ensure that records of administration are accurately maintained and monitored.
Recommendation 3 **Ref**: Standard 18 **Stated: First time** **To be Completed by:** **7 November 2015**	It is recommended that the registered manager should monitor the completion of records regarding the management of distressed reactions, to ensure that the prescribed medication is detailed in the care plan and that the reason for and outcome of administration is recorded on every occasion.
	Response by Registered Person(s) Detailing the Actions Taken: Arrangements for record keeping of medication prescribed to be given on an as and when required basis for distressed reactions will be monitored to ensure that nurses administering any such medicines record the reason for and the outcome of administration on each occasion and that the care plan reflects the use of the medicine.

Registered Manager Completing QIP	Brian Campbell	**Date Completed**	11/11/15
Registered Person Approving QIP	Eoghain King	**Date Approved**	11/11/15
RQIA Inspector Assessing Response	**Rachel Lloyd**	**Date Approved**	**16/11/15**

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