



NURSING HOME UNANNOUNCED MEDICINES MANAGEMENT MONITORING INSPECTION REPORT

Inspection No: IN020984
Establishment ID No: 1391
Name of Establishment: Jordanstown
Date of Inspection: 22 January 2015
Inspector's Name: Rachel Lloyd

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

1.0 GENERAL INFORMATION

Name of home:	Jordanstown
Type of home:	Nursing Home
Address:	1a Old Manse Road Jordanstown BT37 0RU
Telephone number:	028 9085 2258
E mail address:	jordanstown@fshc.co.uk
Registered Organisation/ Registered Provider:	Four Seasons Health Care/ Dr Maureen Claire Royston (Registration Pending)
Registered Manager:	Mrs Jean Elizabeth Steele
Person in charge of the home at the time of inspection:	Mrs Jean Elizabeth Steele
Categories of care:	NH-I
Number of registered places:	53
Number of patients accommodated on day of inspection:	46
Date and time of current medicines management inspection:	22 January 2015 10:25 – 12:50
Name of inspector:	Rachel Lloyd
Date and type of previous medicines management inspection:	26 September 2013 Unannounced

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect nursing homes. A minimum of two inspections per year is required.

This is the inspection report of an unannounced medicines management monitoring inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection are being met.

PURPOSE OF THE INSPECTION

The purpose of this visit was to determine what progress had been made in addressing the requirements and recommendations made during the previous medicines management inspection on 26 September 2013, to assess the home's level of compliance with legislative requirements and the DHSSPS Minimum Standards for Nursing Homes and to determine if the safety of patients, with respect to the administration of medicines, could be assured.

METHODS/PROCESS

Discussion with the registered manager, Mrs Jean Steele, and the registered nurses on duty
Audit trails carried out on a sample of randomly selected medicines
Review of medicine records
Observation of storage arrangements
Spot-check on policies and procedures
Evaluation and feedback

HOW RQIA EVALUATES SERVICES

The inspection sought to establish the level of compliance being achieved with respect to the following DHSSPS Nursing Homes Minimum Standards (2008) and to assess progress with the issues raised during and since the previous inspection.

Standard 37: Management of Medicines

Standard Statement - Medicines are handled safely and securely

Standard 38: Medicine Records

Standard Statement - Medicine records comply with legislative requirements and current best practice

Standard 39: Medicines Storage

Standard Statement - Medicines are safely and securely stored

Standard 40: Administration of Medicines

Standard Statement - Medicines are safely administered in accordance with the prescribing practitioner's instructions

An outcome level was identified to describe the service's performance against each standard that the inspector examined. Table 1 sets the definitions that RQIA has used to categorise the service's performance:

Table 1: Compliance statements

Guidance - Compliance statements		
Compliance statement	Definition	Resulting Action in Inspection Report
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report
4 - Substantially compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and being made within the inspection report.

3.0 PROFILE OF SERVICE

Jordanstown is a purpose built three-storey nursing home, occupying an elevated site in the village of Whiteabbey. It is convenient to the main Belfast to Carrickfergus road, public transport, shops, churches and walks along the edge of Belfast Lough.

Bedroom accommodation is provided in double and single rooms situated over all three floors of the home. There is a range of bathroom, shower and toilet facilities, lounges and a large dining room. The first and second floors are accessed by stairs and a passenger lift.

The home is surrounded by landscaped gardens and car parking facilities are available.

4.0 EXECUTIVE SUMMARY

An unannounced medicines management monitoring inspection of Jordanstown was undertaken by Rachel Lloyd, RQIA Pharmacist Inspector, on 22 January 2015, between 10:25 and 12:50. This summary reports the position in the home at the time of the inspection.

The focus of this medicines management monitoring inspection was to determine the extent to which the previous requirements and recommendations had been addressed, to assess the home's level of compliance with the legislative requirements and the DHSSPS Minimum Standards for Nursing Homes and to determine if the safety of patients, with respect to the administration of medicines could be assured.

The inspector examined the arrangements for the medicines management within the home and focused on the four medicine standards in the DHSSPS Nursing Homes Minimum Standards (2008):

- Standard 37: Management of Medicines
- Standard 38: Medicine Records
- Standard 39: Medicines Storage
- Standard 40: Administration of Medicines

During the course of the inspection, the inspector met with the registered manager of the home, Mrs Jean Steele, and with the registered nurses on duty. The inspector observed practices for medicines management in the home, inspected storage arrangements for medicines, examined a selection of medicine records and conducted an audit of a sample of randomly selected medicines.

This inspection indicated that the arrangements for the management of medicines are compliant with legislative requirements and best practice guidelines. The outcomes of the medicines management inspection found no areas of concern.

The three requirements and two recommendations made at the previous medicines management inspection on 26 September 2013 were examined during the inspection. The inspector's validation of compliance can be observed in the tables following this summary. Two of the three requirements were assessed as compliant and one as substantially compliant. One recommendation was assessed as compliant and one as substantially compliant.

Several areas of good practice were evidenced during the inspection including the use of separate administration and stock balance records for anticoagulants and antibiotics, topical medicine administration records and records to ensure that the next dose of injectable medicines is referenced. The registered manager and the staff are commended for their efforts.

Policies and procedures in place for medicines management and standard operating procedures for the management of controlled drugs are in place.

The management of anxiolytic/antipsychotic medicines which are prescribed for use 'when required' for distressed reactions was examined. Records examined showed that a care plan was in place, the parameters for administration were recorded on the patient's personal medication record and the reason for and outcome of each administration was documented. The registered nurses on duty also confirmed that any change in the frequency of administration is reviewed in consultation with the prescriber.

There is an auditing process for the management of medicines. Examination of audit records showed that largely satisfactory outcomes had been achieved. The date and time of opening had been recorded for medicines examined; this good practice facilitates the audit process.

The medicine records reviewed during the inspection were noted to be compliant with legislative requirements and current best practice. Improvements were noted since the previous inspection in the management of records of the administration of thickening agents and the transcription of warfarin doses on to medicine records.

Medicines are stored safely and securely. The temperatures of the medicine storage areas were satisfactory at the time of the inspection.

Medicine refrigerator temperature records were examined. Although the current temperature was appropriate in each of the two refrigerators, records indicate that maximum temperatures sometimes exceed the upper limit for the cold storage of medicines (8°C) in one refrigerator. Registered nurses were reminded to reset the thermometer on a daily basis.

The outcomes of the audit trails which were performed on a variety of randomly selected medicines during the inspection, indicated that patients had been administered their medicines in accordance with the prescriber's instructions.

The inspection attracted no requirements or recommendations.

The inspector would like to thank the registered manager and staff for their assistance and co-operation throughout the inspection.

5.0 FOLLOW-UP ON PREVIOUS ISSUES

Issues arising during previous medicines management inspection on 26 September 2013:

NO.	REGULATION	REQUIREMENT	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
1	13(4)	<p>The registered manager must ensure that records of the administration of thickening agents are fully and accurately maintained.</p> <p>Stated once</p>	<p>The recording of the administration of thickening agents was reviewed following the previous inspection. It was noted that a daily fluid balance chart is maintained and all entries are signed. The front of the chart indicates the prescribed thickening agent and the required consistency. This information is also available in the kitchen and in care plans.</p>	<p>Compliant</p>
2	13(4)	<p>The registered manager must ensure that robust arrangements are in place for the management of medicine refrigerator temperatures.</p> <p>Stated once</p>	<p>The maximum, minimum and current temperatures of the two medicine refrigerators are monitored and recorded daily. The current temperature was appropriate in each of the two refrigerators at the time of the inspection; however records indicate that maximum temperatures sometimes exceed the upper limit for the cold storage of medicines (8°C) in one refrigerator. Registered nurses were reminded to reset the thermometer on a daily basis to prevent this.</p>	<p>Substantially compliant</p>

NO.	REGULATION	REQUIREMENT	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
3	13(4)	<p>The registered manager must ensure that the temperatures of medicine storage areas are monitored regularly and maintained at a temperature not exceeding 25°C.</p> <p>Stated once</p>	<p>The temperatures of medicine storage areas are monitored daily and records are maintained. Records examined for the period since July 2014 were examined and found to be satisfactory and temperatures were noted to be satisfactory at the time of the inspection.</p>	Compliant

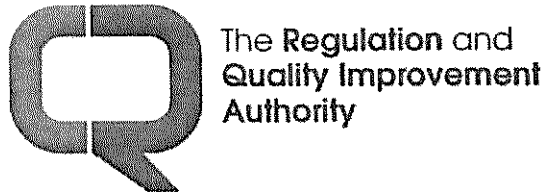
NO.	MINIMUM STANDARD	RECOMMENDATION	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
1	38	<p>The registered manager should ensure that prescriptions are received into the home and checked against the medicine order before being dispensed.</p> <p>Stated once</p>	<p>Although not all prescriptions are received into the home prior to dispensing, the procedure for the ordering of medicines was reviewed and found to be satisfactory. A copy of the prescription is received by the home with each medicine supplied by the pharmacy and kept on file. This is checked against the order record and personal medication record at the time of receipt. Any discrepancies are investigated immediately.</p>	Substantially compliant
2	37	<p>The registered manager should ensure that the two nurses involved in the transcription of warfarin doses sign the documentation in accordance with the home's own policy and procedure.</p> <p>Stated once</p>	<p>This has been satisfactorily addressed and was evidenced during the inspection.</p>	Compliant

6.0 QUALITY IMPROVEMENT PLAN

As no requirements or recommendations were made following the inspection a Quality Improvement Plan has not been appended on this occasion. The registered manager/provider is asked to please complete and return a copy of the signature page at the end of the report for our records by **11 March 2015**.

Enquiries relating to this report should be addressed to:

**Rachel Lloyd
Pharmacy Inspector
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT**



No requirements or recommendations resulted from the **unannounced medicines management monitoring inspection** of **Jordanstown** which was undertaken on **22 January 2015** and I agree with the content of the report.

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

NAME OF REGISTERED MANAGER COMPLETING	Jean Steele
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	Jim McCall <i>JRL to JP LARSON</i> MANAGING DIRECTOR 2/4/15.

Approved by:	Date
<i>R Lloyd</i>	14/4/15.