



The Regulation and
Quality Improvement
Authority

Aughnacloy House
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**Unannounced Medicines Management Inspection
of
Aughnacloy House**

4 February 2016

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced medicines management inspection took place on 4 February 2016 from 10.40 to 14.05.

The management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no significant areas of concern though one area for improvement was identified and is 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, April 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 the DHSSPS Nursing Homes Minimum Standards, February 2008.

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 inspection on 23 January 2014.

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	1

The details of the QIP within this report were discussed with Ms Annette Greene, Deputy Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: MD Healthcare Ltd Mrs Lesley Catherine Megarity	Registered Manager: Ms Constance Mitchell
Person in Charge of the Home at the Time of Inspection: Ms Annette Greene (Deputy Manager)	Date Manager Registered: 12 February 2015
Categories of Care: NH-DE, NH-I, NH-PH, NH-PH(E)	Number of Registered Places: 71
Number of Patients Accommodated on Day of Inspection: 68	Weekly Tariff at Time of Inspection: £593 - £611

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 medicine related incidents reported to RQIA since the last medicines management inspection was reviewed.

We met with the deputy manager and the registered nurses 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
- 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 8 July 2015. The completed QIP was returned and approved by the care inspector. There were no outstanding issues to be followed up at this inspection.

5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection

Last Inspection Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The manager must ensure that the refrigerator temperature is maintained within the accepted range (2°C to 8°C).</p> <p>Action taken as confirmed during the inspection: The daily recordings of the refrigerator temperatures indicated that they were being maintained within the accepted range. The deputy manager confirmed that registered nurses were resetting the thermometer each day.</p>	Met
<p>Requirement 2</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The manager must ensure that oxygen cylinders are stored safely and securely at all times.</p> <p>Action taken as confirmed during the inspection: Oxygen cylinders were observed to be stored safely and securely. Signage was in place and the cylinders were chained to a wall.</p>	Met
<p>Requirement 3</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The manager must review the management of eye preparations to ensure that they are being administered as prescribed and discarded at their expiry.</p> <p>Action taken as confirmed during the inspection: The records of administration indicated that eye preparations were being administered as prescribed. Dates of opening had been recorded on all containers and they were within their expiry date.</p>	Met

Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 38 Stated: First time	Hand-written entries on the medication administration records (MARs) should be signed and verified by two nurses.	Partially met
	Action taken as confirmed during the inspection: The majority of hand-written entries on the MARs had been verified and signed by two registered nurses. Some omissions were observed and these were discussed with the deputy manager for ongoing monitoring; the recommendation was therefore not restated.	

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

The audits which were carried out on 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 that patients had a continuous supply. Significant overstocks of some medicines were observed on the ground floor and these were discussed with the deputy manager for review.

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. Their medicine regime had been confirmed in writing.

The management of insulin and medicines which are prescribed for Parkinson's was reviewed and found to be satisfactory.

The management of warfarin was mostly satisfactory. Obsolete dosage directions should be cancelled and archived; it was agreed that this would be actioned immediately.

Medicine records had been maintained in a satisfactory manner. The registered manager and registered nurses were commended for their efforts. Two registered nurses had verified and signed the personal medication records at the time of writing and at each update. Two registered nurses had not verified and signed a small number of hand-written entries on the MARs; this was discussed for ongoing monitoring. Some photographs were missing and it was agreed that replacements would be obtained.

The deputy manager confirmed that records for the administration of thickening agents and emollient preparations by care staff were maintained. These were not examined.

The receipt, administration and disposal of controlled drugs subject to record keeping requirements were maintained in a controlled drug record book. Stock reconciliation checks were performed at each transfer of responsibility. Quantities of controlled drugs matched the balances recorded in the record book.

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. There was evidence that controlled drugs were denatured by two registered nurses 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. These were not examined.

There was evidence that medicines were being managed by registered nurses who had been trained and deemed competent to do so. Training records were available for inspection.

Care staff were responsible for the administration of thickening agents and emollient preparations. The deputy manager confirmed that training had been provided and was ongoing.

There were robust internal auditing systems. Accurate daily running stock balances were maintained for medicines which were not contained within the blister pack system. In addition, the registered manager completed a monthly audit on all aspects of the management of medicines. The findings of these audits were discussed with staff for corrective action.

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 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 have had difficulty swallowing tablets/capsules.

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 however care plans were in place for only some of the patients. The reason for and outcome of administrations had not been recorded on all occasions. The registered manager should review and revise the management of medicines which are prescribed to be administered “when required” for distressed reactions. A recommendation was made.

The records for several patients who were prescribed medicines for the management of pain (for both regular and “when required” administration) were reviewed. Care plans for the management of pain were in place and there was evidence that the medicines were being administered appropriately. Pain assessment tools were being used.

Areas for Improvement

The registered manager should review and revise the management of medicines which are prescribed to be administered “when required” for distressed reactions. Detailed care plans should be in place. The reason for and outcome of each administration should be recorded to facilitate a comprehensive review process. A recommendation was made.

Number of Requirements	0	Number of Recommendations	1
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5.4 Additional Areas Examined

5.4.1. Storage of Medicines

Medicines were observed to be stored at appropriate temperatures.

The deputy manager was reminded that insulin pens should be stored in their outer box until brought into use and that lidocaine pouches should be sealed.

6. Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Ms Annette Greene, Deputy 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 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 Department of Health, Social Services and Public Safety (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 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

Recommendations

Recommendation 1 Ref: Standard 18 Stated: First time To be Completed by: 7 March 2015	The registered manager should review and revise the management of medicines which are prescribed to be administered "when required" for distressed reactions as detailed in the report.		
	Response by Registered Person(s) Detailing the Actions Taken: The registered manager has reviewed with staff the management of medicines which are prescribed to be administered "when required" for distressed reactions, and will ensure that all residents, who receive these medicines, have their care plan in place, with the reason for and the outcome of administrations recorded on all occasions.		
Registered Manager Completing QIP	Connie Mitchell	Date Completed	09/02/2016
Registered Person Approving QIP	Lesley Megarity	Date Approved	09.02.16
RQIA Inspector Assessing Response	Helen Daly	Date Approved	10/02/2016

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