

# Inspection Report

2 September 2021



## Our Mother of Mercy

Type of service: Nursing Home  
Address: 1 Home Avenue, Newry, BT34 2DL  
Telephone number: 028 3026 6344

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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<p><b>Organisation/Registered Provider:</b> Kilmorey Care Ltd</p> <p><b>Responsible Individual:</b> Mr Cathal O'Neill</p>	<p><b>Registered Manager:</b> Mrs Jacqueline Rooney</p> <p><b>Date registered:</b> 23 July 2021</p>
<p><b>Person in charge at the time of inspection:</b> Mrs Jacqueline Rooney</p>	<p><b>Number of registered places:</b> 48 Including a maximum of 13 patients in category NH-DE and maximum of two patients in category NH-LD/LD(E). There shall be a maximum of one named resident receiving residential care in category RC-I.</p>
<p><b>Categories of care:</b> Nursing (NH): I – old age not falling within any other category PH – physical disability other than sensory impairment DE – dementia LD – learning disability LD(E) – learning disability – over 65 years PH(E) - physical disability other than sensory impairment – over 65 years</p>	<p><b>Number of patients accommodated in the nursing home on the day of this inspection:</b> 43</p>
<p><b>Brief description of the accommodation/how the service operates:</b> This is a nursing home which is registered to provide care for up to 48 patients.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 2 September 2021 between 09.30 am and 1.55 pm. The inspection was conducted by a pharmacist inspector and focused on medicines management within the home.

Following discussion with the aligned care inspector, it was agreed that ten of the areas for improvement identified at the last care inspection would be followed up at the care inspection. One area for improvement from the last care inspection that related to medicines management was reviewed.

Review of medicines management found that patients were being administered their medicines as prescribed. Arrangements for auditing medicines were satisfactory and medicine records were appropriately maintained. Arrangements were in place to ensure that staff were trained and competent in medicines management.

### **3.0 How we inspect**

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection, information held by RQIA about this home was reviewed. This included previous inspection findings, incidents and correspondence. To complete the inspection we reviewed: a sample of medicine related records, storage arrangements for medicines, staff training and the auditing systems used to ensure the safe management of medicines.

### **4.0 What people told us about the service**

We met with the two members of staff and the manager.

Staff were warm and friendly and it was evident from their interactions that they knew the patients well. All staff were wearing face masks and other personal protective equipment (PPE) as needed. PPE signage was displayed.

The staff members spoken with expressed satisfaction with how the home was managed. They said that they had the appropriate training to look after patients and meet their needs. They said that the manager was very supportive of staff and readily available to discuss any issues and concerns should they arise.

## 5.0 The inspection

### 5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 24 February 2021		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for Improvement 1</b>  <b>Ref:</b> Regulation 13 (7)  <b>Stated:</b> Second time	The registered person shall ensure that the infection prevention and control issues identified during the inspection are managed to minimise the risk and spread of infection.  A more robust system to ensure compliance with best practices on infection prevention and control must be developed.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<b>Area for Improvement 2</b>  <b>Ref:</b> Regulation 13 (7)  <b>Stated:</b> First time	The registered person shall ensure that the laundry room is organised and kept clean.	<b>Carried forward to the next inspection</b>
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<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Regulation 13 (1) (a) (b)</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that the nursing, health and welfare of patients is in accordance with their planned care and the recommendations of other health care professionals.</p> <p>This is in specific reference to care plans and risk assessments:</p> <ul style="list-style-type: none"> <li>• care plans and risk assessments must contain consistent information regarding the equipment required for moving and handling</li> <li>• the MUST assessment is completed correctly</li> <li>• where a prescribed treatment is no longer relevant the care plan is updated</li> <li>• care plans are implemented for all relevant medical history to direct the care required.</li> </ul> <p><b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>
<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Regulation 27 (2) (t)</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall, having regard to the number and needs of the patients, ensure that a risk assessment to manage health and safety is carried out and updated when necessary.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• window blinds and curtain tie backs</li> <li>• window restrictors</li> </ul> <p><b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>

<b>Action required to ensure compliance with Care Standards for Nursing Homes, April 2015</b>		<b>Validation of compliance summary</b>
<b>Area for Improvement 1</b> <b>Ref:</b> Standard 12 <b>Stated:</b> Third and final time	The registered person shall ensure that when a patient's dietary intake requires monitoring, that the fluid intake is accurately recorded and measured against the patient's fluid target.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<b>Area for Improvement 2</b> <b>Ref:</b> Standard 41 <b>Stated:</b> First time	The registered person shall ensure that the staff duty rota: <ul style="list-style-type: none"> <li>• clearly identifies the hours worked by staff in a format that differentiates between day and night duty</li> <li>• abbreviations have clear codes to reflect what they represent</li> </ul> the full names of staff are consistently recorded.	<b>Carried forward to the next inspection</b>
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<b>Area for Improvement 3</b> <b>Ref:</b> Standard 12 <b>Stated:</b> First time	The registered person shall ensure that menus are displayed in a format that is easy to read and understand.	<b>Carried forward to the next inspection</b>
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<b>Area for Improvement 4</b> <b>Ref:</b> Standard 28 <b>Stated:</b> First time	The registered person shall ensure that prescribed medicines are administered safely.	<b>Met</b>
	<b>Response by registered person detailing the actions taken:</b> Medicines were observed to be administered safely to patients.	

<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Standard 23</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that there are clear and documented processes for the prevention, detection and treatment of pressure damage.</p> <p>With specific reference to ensuring:</p> <ul style="list-style-type: none"> <li>• the recommended setting/type of pressure relieving mattress are maintained at the correct setting and included in the patients care plan</li> <li>• the recommended frequency of repositioning to be recorded within the care plan and the repositioning chart.</li> </ul> <p><b>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>
<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Standard 23.2</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that where a wound has been assessed as requiring treatment, the following measures are implemented:</p> <ul style="list-style-type: none"> <li>• a care plan is implemented to include the dressing type and frequency of dressing renewal and is updated when necessary to reflect any changes</li> <li>• the wound assessment chart is completed in accordance with the care plan.</li> </ul> <p><b>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>

<p><b>Area for Improvement 7</b></p> <p><b>Ref:</b> Standard 44.1</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that the home is kept clean and hygienic at all times in accordance with infection prevention and control best practice.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• the storage arrangements in the home for patient equipment</li> <li>• linen is stored off the ground</li> <li>• the carpet within the corridor on the ground floor is kept clean.</li> </ul> <p><b>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>
<p><b>Area for Improvement 8</b></p> <p><b>Ref:</b> Standard 35</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that robust quality assurance audits are maintained to assess the delivery of care in the home.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• Care records</li> <li>• IPC</li> <li>• Environment</li> </ul> <p><b>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	<p><b>Carried forward to the next inspection</b></p>

## 5.2 Inspection findings

### 5.2.1 What arrangements are in place to ensure that medicines are appropriately prescribed, monitored and reviewed?

Patients in nursing homes should be registered with a general medical practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times patients' needs will change and therefore their medicines should be regularly monitored and reviewed. This is usually done by the GP, the pharmacist or during a hospital admission.

Patients in the home were registered with a GP and medicines were dispensed by the community pharmacist.



Personal medication records were in place for each patient. These are records used to list all of the prescribed medicines, with details of how and when they should be administered. It is important that these records accurately reflect the most recent prescription to ensure that medicines are administered as prescribed and because they may be used by other healthcare professionals, for example at medication reviews or hospital appointments. The patients' personal medication records reviewed were accurate and up to date. In line with best practice, a second member of staff had checked and signed the personal medication records when they were written and updated to provide a double check that they were accurate.

All patients should have care plans which detail their specific care needs and how the care is to be delivered. In relation to medicines these may include care plans for the management of distressed reactions, pain, modified diets, self-administration etc.

Patients will sometimes get distressed and will occasionally require medicines to help them manage their distress. It is important that care plans are in place to direct staff on when it is appropriate to administer these medicines and that records are kept of when the medicine was given, the reason it was given and its effect. The records belonging to three patients were reviewed. Directions for use of medicines prescribed on a "when required" basis were clearly recorded on the patients' personal medication records. For two patients, the directions for use of the prescribed medicine were not recorded on their care plan; this was rectified during the inspection. The reason for and effect of administration was generally recorded.

Some patients may need their diet modified to ensure that they receive adequate nutrition. This may include thickening fluids to aid swallowing and food supplements in addition to meals to manage weight loss. The records belonging to three patients' who were prescribed thickening agents for addition to fluids and food were reviewed. For each patient, a speech and language assessment report and care plan was in place. Records of prescribing and administration were maintained; however, they did not always include the recommended consistency level; this matter was rectified during the inspection.

The management of pain was discussed. Staff advised that they were familiar with how each patient expressed their pain and that pain relief was administered when required.

### **5.2.2 What arrangements are in place to ensure that medicines are supplied on time, stored safely and disposed of appropriately?**

Medicines stock levels must be checked on a regular basis and new stock must be ordered on time. This ensures that the patient's medicines are available for administration as prescribed. It is important that they are stored safely and securely so that there is no unauthorised access and disposed of promptly to ensure that a discontinued medicine is not administered in error. The records inspected showed that medicines were available for administration when patients required them.

Medicines must be stored safely and securely so that there is no unauthorised access and disposed of promptly to ensure that a discontinued medicine is not administered in error. The medicines storage areas were observed to be securely locked to prevent any unauthorised access. They were tidy and organised so that medicines belonging to each patient could be easily located. Records were maintained of the disposal of medicines.

Two insulin pens did not have the dates of opening recorded. This was discussed with the manager who gave an assurance that this matter would be monitored as part of the ongoing audit activity.

### **5.2.3 What arrangements are in place to ensure that medicines are appropriately administered within the home?**

It is important to have a clear record of which medicines have been administered to patients to ensure that they are receiving the correct prescribed treatment. A sample of these records was reviewed. The records were found to have been completed to the required standard.

Controlled drugs are medicines which are subject to strict legal controls and legislation. They commonly include strong pain killers. The receipt, administration and disposal of controlled drugs are recorded in a controlled drugs record book. Robust arrangements were in place for the management of controlled drugs. The controlled drugs record book had been maintained to the required standard.

Management and staff audited medicine administration on a regular basis within the home. A range of audits were carried out. The date of opening was recorded on medicines so that they could be easily audited. This is good practice.

The audits completed at the inspection indicated that the patients had received their medicines as prescribed

### **5.2.4 What arrangements are in place to ensure that medicines are safely managed during transfer of care?**

People who use medicines may follow a pathway of care that can involve both health and social care services. It is important that medicines are not considered in isolation, but as an integral part of the pathway, and at each step. Problems with the supply of medicines and how information is transferred put people at increased risk of harm when they change from one healthcare setting to another.

The management of medicines for three patients who had been admitted to this home were reviewed. Staff had been provided with a list of prescribed medicines from either the hospital or GP practice. The patients' personal medication records had been accurately written. Medicines had been accurately received into the home and administered in accordance with the prescribed directions.

### **5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?**

Occasionally medicines incidents occur within homes. It is important that there are systems in place which quickly identify that an incident has occurred so that action can be taken to prevent a recurrence and that staff can learn from the incident. The audit system in place in this home helps staff to identify medicine related incidents.

### **5.2.6 What measures are in place to ensure that staff in the home are qualified, competent and sufficiently experienced and supported to manage medicines safely?**

To ensure that patients are well looked after and receive their medicines appropriately, staff who administer medicines to patients must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and that they are supported.

Staff in the home had received a structured induction which included medicines management when this forms part of their role. Competency had been assessed following induction and annually thereafter. A written record was completed for induction and competency assessments.

## **6.0 Conclusion**

The inspection sought to assess if the home was delivering safe, effective and compassionate care and if the home was well led with respect to the management of medicines.

Based on the outcome of the medicines management inspection, RQIA was assured that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the manager with respect to the management of medicines. RQIA was assured that the patients were being administered their medicines as prescribed by their GP.

We would like to thank the patients and staff for their assistance throughout the inspection.

**7.0 Quality Improvement Plan/Areas for Improvement**

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of Areas for Improvement</b>	4*	7*

\* the total number of areas for improvement includes 11 which are carried forward for review at the next care inspection.

This inspection resulted in no new areas for improvement being identified in relation to the management of medicines. Findings of the inspection were discussed with Mrs Jacqueline Rooney, Manager, as part of the inspection process and can be found in the main body of the rep

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<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 27 (2) (t)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 24 February 2021</p>	<p>The registered person shall, having regard to the number and needs of the patients, ensure that a risk assessment to manage health and safety is carried out and updated when necessary.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• window blinds and curtain tie backs</li> <li>• window restrictors</li> </ul> <p><b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p> <p>Ref: 5.1</p>
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