

Unannounced Follow Up Medicines Management Inspection Report 2 May 2019











Rockfield Care Home

Type of Service: Nursing Home

Address: Windmill Road, Newry, BT34 2QW

Tel No: 028 3026 9546 Inspector: Paul Nixon

www.rqia.org.uk

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a nursing home that provides care for up to 35 patients living with a range of healthcare needs as detailed in Section 3.0.

RQIA ID: 1496 Inspection ID: IN034734

3.0 Service details

Organisation/Registered Provider: Burnview Healthcare Ltd	Registered Manager: Mrs Loida Nepomuceno
Responsible Individual: Mrs Briege Agnes Kelly	
Person in charge at the time of inspection: Mrs Loida Nepomuceno, Manager	Date manager registered: 19 February 2019
Categories of care: Nursing Homes (NH): I – old age not falling within any other category MP – mental disorder excluding learning disability or dementia PH – physical disability other than sensory impairment	Number of registered places: 35 including: a maximum of two persons in category NH-MP and a maximum of eight persons in category NH-PH.

4.0 Inspection summary

An unannounced inspection took place on 2 May 2019 from 10.00 to 12.30.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes (2015).

The inspection sought to assess progress with issues raised during the previous medicines management inspection that took place on 2 July 2018.

The following areas were examined during the inspection:

- Medicines management audits
- Management of food and fluid thickeners

The findings of this report will provide the home with the necessary information to assist them fulfil their responsibilities, enhance practice and residents experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

RQIA ID: 1496 Inspection ID: IN034734

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Loida Nepomuceno, Registered Manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection

No further actions were required to be taken following the most recent inspection on 19 November 2018.

Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of incidents involving medicines had been reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with the registered manager and deputy manager.

A sample of the following records was examined during the inspection:

- medicines requested and received
- personal medication records
- medicine administration records
- controlled drug record book
- medicine audits
- care plans

Areas for improvements identified at the last medicines management inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspections dated 19 November 2018

The most recent inspection of the home was an unannounced care inspection. The Quality Improvement Plan will be reviewed by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last medicines management inspection dated 2 July 2018

Areas for improvement from the last medicines management inspection Action required to ensure compliance with The Nursing Homes Validation of		
Regulations (Northern Ireland) 2005		compliance
Area for improvement 1 Ref: Regulation 13(4)	The registered person shall develop and implement a robust audit tool to identify and address any shortfalls in the management and administration of medicines.	
Stated: Second time	Action taken as confirmed during the inspection: A revised audit tool had been developed to identify and address any shortfall in the management of medicines. Management perform a monthly audit. The community pharmacist performs a quarterly audit. Running stock balances were maintained on most solid formulation medicines not dispensed in the monitored dosage system packs as well as on some inhaler medicines. There was recorded evidence that issues identified through the audit activity had been addressed. The audits which were performed on a range of medicines produced satisfactory outcomes.	Met
Area for improvement 2 Ref: Regulation 13(4)	The registered person shall investigate the discrepancies observed in the administration of two medicines, contact the prescriber for	
Stated: First time	guidance and report to the safeguarding team. An incident report detailing how the incident occurred and the action taken to prevent a recurrence should be forwarded to RQIA. Action taken as confirmed during the inspection: The registered person investigated the discrepancies observed in the administration of two medicines, contacted the prescriber for guidance and reported them to the safeguarding team. An incident report detailing how the incident occurred and the action taken to prevent a recurrence was submitted to RQIA.	Met

Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015		
Area for improvement 1	The registered person shall ensure that	
	detailed care plans are in place for the	
Ref: Standard 4	management of dysphagia.	
	Action taken as confirmed during the	Met
Stated: First time	inspection:	
	Four patients' records were examined. In	
	each instance a detailed care plan was in	
	place for the management of dysphagia.	

6.3 Inspection findings

See section 6.2

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.





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