



Unannounced Follow Up Medicines Management Inspection Report 29 April 2019



Fairlawns

Type of service: Residential Care Home
Address: 63 Drumcairn Road, Armagh, BT61 8DQ
Tel No: 028 3752 5074
Inspector: Paul Nixon

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 residential care home provides care for up to 56 residents with a variety of care needs, as detailed in Section 3.0.

3.0 Service details

Organisation/Registered Provider: Fairlawns Responsible Individual: Mr Michael Murphy	Registered Manager: Mrs Claire Patricia Cassidy
Person in charge at the time of inspection: Ms Ruth Brimage (Deputy Manager)	Date manager registered: 1 April 2005
Categories of care: Residential Care (RC) I – Old age not falling within any other category DE – Dementia MP – Mental disorder excluding learning disability or dementia MP(E) - Mental disorder excluding learning disability or dementia – over 65 years PH – Physical disability other than sensory impairment	Number of registered places: 56 including: A maximum of 11 residents in category of care RC-I. Three named individuals accommodated in Fairlawns House under category of care RC-I. All other category RC-I residents to be accommodated in Fairlawns Lodge. A maximum of two residents in category RC-MP. A maximum of four residents in category RC-PH. The home is approved to provide care on a day basis only to five persons.

4.0 Inspection summary

An unannounced follow-up inspection took place on 29 April 2019 from 10.00 to 12.45.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011).

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

The following areas were examined during the inspection:

- The maintenance of personal medication records
- The management of medicines prescribed to be administered on a “when necessary” basis for the management of distressed reactions

It was evidenced that the areas identified for improvement had been addressed effectively. The improvements which had taken place were acknowledged. These must be sustained in order to ensure that staff continue to deliver safe and effective care.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Ruth Brimage, Deputy 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 and premises inspections

No further actions were required to be taken following the most recent inspections on 5 March 2019.

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 deputy manager.

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

- personal medication records
- medicine administration records
- care plans
- medicine audits

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 deputy manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspections dated 5 March 2019

The most recent inspections of the home were unannounced care and premises inspections. There were no areas for improvement made as a result of these inspections.

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

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13(4) Stated: First time	The registered person shall ensure that each resident has a personal medication record that is accurately maintained and used as an integral part of the medicines administration process.	Met
	Action taken as confirmed during the inspection: The personal medication records belonging to 30 residents were reviewed. These had been accurately maintained. The deputy manager confirmed that the staff had been provided with training on the maintenance of the personal medication records and were using these records as an integral part of the medicines administration process.	

Action required to ensure compliance with the Residential Care Homes Minimum Standards (2011)		Validation of compliance
Area for improvement 1 Ref: Standard 6 Stated: Second time	The registered provider should ensure that where a resident is prescribed a medicine for administration on a “when required” basis for the management of distressed reactions, the management of the medicine is detailed in a care plan and the reason for and outcome of administration is recorded on each occasion.	Met
	Action taken as confirmed during the inspection: The records of three residents who were prescribed a medicine for administration on a “when required” basis for the management of distressed reactions were examined. For each resident, the management of the medicine was detailed in a care plan and the reason for and outcome of administration were recorded on each occasion.	

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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