



The Regulation and
Quality Improvement
Authority

RESIDENTIAL CARE HOME UNANNOUNCED MEDICINES MANAGEMENT MONITORING INSPECTION REPORT

Inspection No:	IN020795
Establishment ID No:	1507
Name of Establishment:	Manor Court
Date of Inspection:	26 February 2015
Inspector's Name:	Paul Nixon

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
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1.0 GENERAL INFORMATION

Name of home:	Manor Court
Type of home:	Residential Care Home
Address:	Sloan Street Lurgan Craigavon BT66 8NR
Telephone number:	(028) 3832 9586
E mail address:	carol.mccoy@foldgroup.co.uk
Registered Organisation/ Registered Provider:	Fold Housing Association/ Mrs Fiona McAnespie
Registered Manager:	Ms Carol McCoy
Person in charge of the home at the time of inspection:	Mrs Lyn Finnegan (Senior Care Worker)
Categories of care:	RC-I, RC-LD, RC-LD(E), RC-MP(E), RC-DE
Number of registered places:	41
Number of patients accommodated on day of inspection:	37
Date and time of current medicines management inspection:	26 February 2015 10:00 – 12:20
Names of inspectors:	Paul Nixon
Date and type of previous medicines management inspection:	23 September 2014 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 residential care 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 previous medicines management inspection of this home, on 25 September 2014, had shown that the systems in place for the management of medicines were moving towards compliance with legislative requirements and best practice guidelines. A particular area of concern was found regarding the management of topical medicines. The inadequate standard for the management of topical medicines had also been raised at the medicines management inspection that took place on 22 February 2012.

The purpose of this visit was to determine what progress had been made in addressing the eight requirements and four recommendations made during the previous medicines management inspection and to determine if the safety of residents, with respect to the administration of medicines, could be assured.

The aims of the inspection were to examine the policies, practices and monitoring arrangements for the management of medicines in the home, and to determine and assess the home's implementation of the following:

The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

The Residential Care Homes Regulations (Northern Ireland) 2005.

The Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)

Other published standards which guide best practice may also be referenced during the inspection process.

METHODS / PROCESS

Discussion with Mrs Lyn Finnegan (Senior Care Worker)
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 Residential Care Homes Minimum Standards (2011) and to assess progress with the issues raised during and since the previous inspection:

Standard 30: Management of Medicines

Standard Statement - Medicines are handled safely and securely

Standard 31: Medicine Records

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

Standard 32: Medicines Storage

Standard Statement - Medicines are safely and securely stored

Standard 33: 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 criterion 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

Manor Court was first registered in 1994 and is registered to accommodate 41 residents.

Manor Court is located within walking distance of Lurgan town centre. The main building comprises 36 single flatlets, a large communal sitting room, four dining rooms including a small kitchen area to prepare food, a laundry, toilet/washing facilities, staff accommodation and offices. There are well-maintained gardens and grounds and parking spaces to the front of the building with designated parking facilities for disabled users.

An extension to the home took place during 2012 with the addition of a lounge/quiet room with patio doors leading out to an attractive patio area.

An additional secure garden area is available to the rear of the home so that all residents can safely go outside and enjoy the fresh air.

Registered day care is provided for a maximum of eight service users in the communal sitting room and small activity room on the first floor. The registration, management and staffing of the day care provision is separate from the residential facility.

The Nightingale respite unit is situated within a separate bungalow and can be accessed via a link corridor. This unit can provide a respite service for up to five people with learning disabilities. The respite unit has five bedrooms, four with en-suite facilities, a dining room, sitting room and a small games room.

4.0 EXECUTIVE SUMMARY

An unannounced medicines management monitoring inspection of Manor Court was undertaken by Paul Nixon, RQIA Pharmacist Inspector, on 26 February 2015 between 10:00 and 12:20. 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 and to determine if the safety of residents, with respect to the administration of medicines could be assured.

The inspector examined the arrangements for medicines management within the home and focused on the four medicine standards in the DHSSPS Residential Care Homes Minimum Standards (2011):

- Standard 30: Management of Medicines
- Standard 31: Medicine Records
- Standard 32: Medicines Storage
- Standard 33: Administration of Medicines

During the course of the inspection, the inspector met with Mrs Lyn Finegan, Senior Care Worker. 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 in Manor Court are compliant with legislative requirements and best practice guidelines. The registered manager and staff are commended for their efforts.

The eight requirements and four recommendations made at the previous medicines management inspection on 23 September 2014 were examined during the inspection; the inspector's validation of compliance is detailed in Section 5.0 of this report.

Medicines prescribed for topical application are being administered in accordance with the prescribers' instructions. The audits which were performed on these medicines indicated a good correlation between the prescribed instructions and patterns of administration.

Further training in the management of topical medicines was provided to staff by the community pharmacist on 18 December 2014. The care staff competencies have been reassessed.

The registered manager has introduced robust arrangements to audit the use of medicines prescribed for topical application, as an integral part of the home's medicines governance arrangements. Senior care workers confirm, before the end of each shift, that topical medicine administrations have occurred as prescribed. The registered manager performs a weekly audit. Additionally, the treatment medication administration records are monitored by a senior manager during the monthly monitoring visits.

Audits that were performed on asthma treatment inhalers produced satisfactory outcomes, indicating that their administrations are in accordance with the prescribers' instructions.

The registered manager has reviewed the arrangements for the administration of medicines in order to ensure that safe practice exists. Senior care workers now administer all eye-treatment medicines and asthma treatment medicines. A second senior care worker is also on duty to assist with the morning medication round on some mornings; this practice is commended and encouraged.

The records of two residents who are prescribed 'when required' medicines for the treatment of distressed reactions were examined. For one resident, the medicine was not recorded in their care plan; the senior care worker stated that she would rectify this matter without delay. For each resident, the parameters for administration were recorded on their personal medication record and records of administration had been maintained on the medicine administration record sheets. The reason for administration and outcome were recorded.

The topical medicines administration record was observed to have been maintained in a satisfactory manner.

The routes of application of eye-treatment medicines were recorded on the personal medication record sheets.

The removal of lidocaine patches were observed to be recorded for the two residents for whom this medication was prescribed.

The inspection attracted no requirements or recommendations.

The inspector would like to thank the senior care worker for her assistance and co-operation throughout the inspection.

5.0 FOLLOW-UP ON PREVIOUS ISSUES

Issues arising during previous medicines management inspection on 23 September 2014:

NO.	REGULATION	REQUIREMENT	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
1	13(4)	<p>Medicines prescribed for topical application must be administered in accordance with the prescribers' instructions.</p> <p>Stated twice</p>	<p>The audits which were performed on medicines prescribed for topical application indicated a good correlation between the prescribed instructions and patterns of administration.</p>	<p>Compliant</p>
2	13(4)	<p>The registered manager must ensure the care workers are provided with further training in relation to the management of medicines prescribed for topical application. Furthermore, the competency of the care workers in the management of medicines must be reassessed</p> <p>Stated twice</p>	<p>Further training in the management of topical medicines was provided to staff by the community pharmacist on 18 December 2014. The care staff competencies have been reassessed.</p>	<p>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 robustly audit the use of medicines prescribed for topical application, as an integral part of the home's medicines governance arrangements, in order to obtain the necessary assurance that they are being administered to patients in accordance with the prescribers' instructions.</p> <p>Stated twice</p>	<p>Senior care workers confirm, before the end of each shift, that topical medicine administrations have occurred as prescribed. The registered manager performs a weekly audit. Additionally, the treatment medication administration records are monitored by a senior manager during the monthly monitoring visits.</p>	Compliant
4	13(4)	<p>The registered manager must submit written reports of the outcomes of the audit activity on medicines prescribed for topical application to RQIA on a monthly basis until further notice. Each written report must be submitted to RQIA within five working days of the commencement of the next month.</p> <p>Stated twice</p>	<p>These monthly reports were submitted to RQIA.</p> <p>The registered manager is no longer required to continue to submit these monthly audit reports to RQIA.</p>	Compliant
5	13(4)	<p>The topical medicines administration record must be fully and accurately maintained.</p> <p>Stated twice</p>	<p>The topical medicines administration record was observed to have been maintained in a satisfactory manner.</p>	Compliant

NO.	REGULATION	REQUIREMENT	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
6	13(4)	<p>Asthma inhalers must be administered in accordance with the prescribers' instructions.</p> <p>Stated once</p>	<p>Audits that were performed on asthma treatment inhalers produced satisfactory outcomes, indicating administration in accordance with the prescribers' instructions.</p>	<p>Compliant</p>
7	13(4)	<p>The registered person must submit an action plan to RQIA in relation to the issues raised regarding the management of topical medicines.</p> <p>Stated once</p>	<p>This action plan was submitted to RQIA with the previous Quality Improvement Plan.</p>	<p>Compliant</p>
8	13(4)	<p>The registered person must review the arrangements for the administration of medicines in order to ensure that safe practice exists.</p> <p>Stated once</p>	<p>The registered manager has reviewed the arrangements for the administration of medicines in order to ensure that safe practice exists. Senior care workers now administer all eye-treatment medicines and asthma treatment medicines. A second senior care worker is also on duty to assist with the morning medication round on some days.</p>	<p>Compliant</p>

NO	MINIMUM STANDARD REF	RECOMMENDATION	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
1	33	<p>In an instance where a resident self-administers medication, the initial risk assessment and any changes to the risk assessment should be recorded.</p> <p>Stated once</p>	<p>Whilst no residents currently self-administer medicines, there are written policies and procedures that include risk assessment requirements for all cases of self-administration.</p>	<p>Compliant</p>
2	30	<p>The registered person should ensure that the recording system in place for residents who are prescribed 'when required' medicines for the treatment of distressed reactions is reviewed.</p> <p>Stated once</p>	<p>The records of two residents who are prescribed 'when required' medicines for the treatment of distressed reactions were examined. For one resident, the medicine was not recorded in their care plan; the senior care worker stated that she would rectify this matter without delay. For each resident, the parameters for administration were recorded on their personal medication record and records of administration had been maintained on the medicine administration record sheets. The reason for administration and outcome were recorded.</p>	<p>Substantially compliant</p>
3	31	<p>The routes of application of eye-treatment medicines should be routinely recorded on the personal medication record sheets.</p> <p>Stated once</p>	<p>This practice was observed.</p>	<p>Compliant</p>

NO	MINIMUM STANDARD REF	RECOMMENDATION	ACTION TAKEN (as confirmed during this inspection)	INSPECTOR'S VALIDATION OF COMPLIANCE
4	31	<p>The removal of lidocaine patches should be recorded.</p> <p>Stated once</p>	<p>The removal of lidocaine patches were observed to be recorded for the two residents for whom this medication was prescribed.</p>	<p>Compliant</p>

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 7 April 2015.

Enquiries relating to this report should be addressed to:

Paul Nixon
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 Manor Court** which was undertaken on **26 February 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	Carol Mc Coy
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	Fiona McAnespie

Approved by:	Date
Paul W. Nixon	14/04/15