



Announced Medicines Management Inspection Report 17 September 2020



Parkanaur College

Type of Service: Residential Care Home
Address: 57 Parkanaur Road, Dungannon, BT70 3AA
Tel No: 028 8776 1272
Inspector: Paul Nixon

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 this inspection and do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

Information relating to our inspection framework, the guidance and legislation that informs the inspections, the four domains which we assess services against as well as information about the methods we use to gather opinions from people who have experienced a service can be found at <https://www.rqia.org.uk/guidance/legislation-and-standards/> and <https://www.rqia.org.uk/guidance/guidance-for-service-providers/>

1.0 Profile of service

This is a registered residential care home which provides care for up to 24 residents.

2.0 Service details

<p>Organisation/Registered Provider: Thomas Doran Trust</p> <p>Responsible Individual: Ms Maureen Crawford (Acting)</p>	<p>Registered Manager and date registered: Mr Waldemar Mietlicki 25 July 2016</p>
<p>Person in charge at the time of inspection: Mr Waldemar Mietlicki</p>	<p>Number of registered places: 24</p> <p>The home is approved to provide care on a day basis only to 1 person.</p>
<p>Categories of care: Residential Care (RC) MP - Mental disorder excluding learning disability or dementia LD - Learning Disability LD (E) - Learning disability - over 65 years PH - Physical disability other than sensory impairment</p>	<p>Total number of residents in the residential care home on the day of this inspection: 9</p>

3.0 Inspection focus

This inspection was undertaken by a pharmacist inspector on 17 September 2020 from 09.45 to 11.45. It focused on medicines management within the home. The inspection also assessed progress with any areas for improvement identified at or since the last medicines management inspection.

Short notice of the inspection was provided to the manager on the day before the inspection in order to ensure that arrangements could be made to safely facilitate the inspection in the home.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous inspection findings, registration information and any other written or verbal information received.

During our inspection we:

- spoke to staff and management about how they plan, deliver and monitor the care and support provided in the home
- observed practice and daily life
- reviewed documents to confirm that appropriate records were kept.

A sample of the following records was examined and/or discussed during the inspection:

- medicines management training records and competency assessments
- personal medication records
- medicine administration records
- medicine receipt and disposal records
- controlled drug record book
- care records regarding medicines management
- audits

4.0 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 Mr Waldemar Mietlicki, 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.

5.0 What has this service done to meet any areas for improvement identified at or since the last medicines management inspection on 11 December 2018 and care inspection on 17 December 2019?

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011)		Validation of compliance
Area for improvement 1 Ref: Standard 30 Stated: First time	The registered person shall ensure that the date of opening is recorded on all medicines to facilitate audit and disposal at expiry.	Met
	Action taken as confirmed during the inspection: The date of opening was recorded on all medicines to facilitate audit and disposal at expiry.	

There were no areas for improvement from the last care inspection.

6.0 What people told us about this service

Observation of the delivery of care evidenced that staff attended to residents needs in a timely and caring manner. Staff were warm and friendly and obviously knew the residents well. The home was observed to be clean and warm; there were no malodours. Corridors were free from trip hazards.

Staff spoken to expressed satisfaction with how the home was managed and with their training opportunities. They said that management was supportive and responsive to any suggestions or concerns raised.

Feedback methods also included a staff poster and paper questionnaires which were provided to the manager for any resident or their family representative to complete and return using pre-paid, self-addressed envelopes. Five questionnaires were returned within the timeframe for inclusion in this report; the respondents indicated that they were very satisfied with all aspects of care.

7.0 Inspection findings

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

Residents in care homes should be registered with a general medical practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times residents' needs may change and therefore their medicines should be regularly monitored and reviewed. This may be done by the GP or the pharmacist.

All residents in the home were registered with local GPs and medicines were reviewed and dispensed by the community pharmacist into a compliance aid from which staff administered medicines.

Personal medication records were in place for each resident. These contained a list of all 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 e.g. medication reviews, transfers to hospital. These records had been fully and accurately completed. In line with best practice, a second member of staff had checked and signed these records when they were updated to provide a double check that they were accurate.

We reviewed the management of medicines prescribed on a "when required" basis for the management of distressed reactions. Care plans were in place and directions for use were clearly recorded on the personal medication records. These medicines were rarely used.

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

Medicines must be available to ensure that they are administered to residents as prescribed and when they require them. It is important that they are stored safely and securely and disposed of promptly so that there is no unauthorised access.

The records inspected showed that medicines were available for administration when residents required them. The manager advised that there was a good relationship with the community pharmacist and that medicines were supplied in a timely manner.

On arrival at the home the medicines storage area was observed to be securely locked. It was tidy and organised so that medicines belonging to each resident could be easily located. The medicines currently in use were stored within a medicine trolley that was also securely stored so that there could be no unauthorised access. Controlled drugs were stored in the controlled drug cabinet. When medicines needed to be stored at a colder temperature, they were stored within the medicine refrigerator and the temperature of this refrigerator was monitored.

Medicines disposal was discussed with the manager. Medicines were returned to the community pharmacy regularly and were not allowed to accumulate in the home. Disposal of medicine records were examined and had been completed so that medicines could be accounted for.

7.3 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 residents to ensure that they are receiving the correct prescribed treatment.

Within the home, a record of the administration of medicines is completed on pre-printed medicine administration records (MARs). A sample of these records was reviewed which found that they had been fully and accurately completed. The completed MARs are filed once completed.

Management audits medicine administration on a monthly basis within the home. The audits showed that medicines have been given as prescribed. The date of opening was recorded so that the medicines could be easily audited. This is good practice.

Audits completed during this inspection also showed that medicines had been given as prescribed.

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

This element was not reviewed during this inspection. There had been no recently admitted residents or residents readmitted from hospital.

7.5 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 that 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 would help staff to identify medicine related incidents. The manager was familiar with the type of incidents that should be reported.

There had been several medication related incidents identified since the last medicines management inspection. There was evidence that the incidents had been investigated and learning had been shared with staff. The incidents had been reported to the prescribers for guidance and to the appropriate authorities including RQIA.

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

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

8.0 Evaluation of Inspection

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

The outcome of this inspection concluded that the area for improvement identified at the last inspection had been addressed and no new areas for improvement were identified.

We can conclude that residents and their relatives can be assured that medicines are well managed within the home and that the residents are receiving their medicines as prescribed.

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

9.0 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.



The **Regulation** and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

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