

# Announced Medicines Management Inspection Report 18 February 2017



## Arbour House

Type of Service: Residential Care Home  
Address: 16 Great George's Street South, Warrenpoint BT34 3HR  
Tel No: 028 4177 4181  
Inspector: Helen Daly

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced inspection of Arbour House took place on 18 February 2017 from 10.20 to 11.30.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

### Is care safe?

There was evidence that the management of medicines supported the delivery of safe care and positive outcomes for guests. Staff administering medicines were trained and competent. There were systems in place to ensure the management of medicines was in compliance with legislative requirements and standards. It was evident that the working relationship with the community pharmacists, the knowledge of the staff and their proactive action in dealing with any issues enables the systems in place for the management of medicines to be robust. There were no areas for improvement identified.

### Is care effective?

The management of medicines supported the delivery of effective care. There were systems in place to ensure guests were receiving their medicines as prescribed. There were no areas for improvement identified.

### Is care compassionate?

The management of medicines supported the delivery of compassionate care. Staff interactions were observed to be compassionate, caring and timely which promoted the delivery of positive outcomes for patients. Guests consulted with confirmed that they were administered their medicines appropriately. There were no areas for improvement identified.

### Is the service well led?

The service was found to be well led with respect to the management of medicines. Written policies and procedures for the management of medicines were in place which supported the delivery of care. Systems were in place to enable management to identify and cascade learning from any medicine related incidents and medicine audit activity. There were no areas for improvement identified.

This inspection was underpinned by 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).

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mrs Joanne McDonald, Registered Manager, as part of the inspection process and can be found in the main body of the report.

## 1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 18 November 2016.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Arbour House Management Committee/ Ms Anne Woods	<b>Registered manager:</b> Ms Joanne McDonald
<b>Person in charge of the home at the time of inspection:</b> Ms Joanne McDonald	<b>Date manager registered:</b> 22 January 2014
<b>Categories of care:</b> RC-LD, RC-LD(E)  The home is approved to provide care on a day basis only to 1 person.	<b>Number of registered places:</b> 2

## 3.0 Methods/processes

Prior to inspection we analysed the following records:

- Recent inspection reports and returned QIPs
- Recent correspondence with the home
- The management of medicine related incidents reported to RQIA since the last medicines management inspection

We met with three guests, two carers and the registered manager.

Nine questionnaires were issued to guests, relatives/representatives and staff, with a request that they were returned within one week from the date of the inspection.

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

- Medicines received
- Personal medication records
- Medicine administration records
- Medicine audits
- Policies and procedures
- Medicines disposed of or transferred

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 18 November 2016

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP will be validated by the care inspector at the next care inspection.

### 4.2 Review of requirements and recommendations from the last medicines management inspection dated 8 March 2014

There were no requirements or recommendations made as a result of the last medicines management inspection.

### 4.3 Is care safe?

Medicines were managed by staff who have been trained and deemed competent to do so. One core carer manages the medicines each weekend. Training and competency assessment was provided annually by a registered nurse. The impact of training was monitored through the home's auditing system.

Systems were in place to ensure that guests had sufficient medicines to cover their period of respite care. Quantities were checked as part of the admission process.

There were satisfactory arrangements in place to manage changes to prescribed medicines. Personal medication records were written and updated by two members of staff. Families were requested to provide written confirmation of all medication changes.

There were procedures in place to ensure the safe management of medicines during a resident's admission to the home and discharge from the home. Two members of staff were involved in the process.

Medicines were returned to family members at the end of each period of respite care.

Medicines were stored safely and securely and in accordance with the manufacturer's instructions. Medicine storage areas were clean, tidy and well organised. There were systems in place to alert staff of the expiry dates of medicines with a limited shelf life, once opened. A lockable container was available for use when medicines which required refrigeration were prescribed.

#### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.4 Is care effective?

The sample of medicines examined had been administered in accordance with the prescriber's instructions.

The sample of records examined indicated that medicines which were prescribed to manage pain had been administered as prescribed. Staff were aware that ongoing monitoring was necessary to ensure that the pain was well controlled and that the guests were comfortable. Staff confirmed that all guests could verbalise any pain.

Staff advised that all guests were compliant with prescribed medicine regimes. .

Medicine records were well maintained and facilitated the audit process.

All medicines were audited at the end of each period of respite care.

Following discussion with the registered manager and staff, it was evident that when applicable, other healthcare professionals were contacted in response to any medication related issues.

#### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.5 Is care compassionate?

Appropriate arrangements were in place to facilitate residents responsible for the self-administration of medicines.

Staff confirmed that the administration of medicines to residents was completed in a caring manner, residents were given time to take their medicines and medicines were administered as discreetly as possible.

Guests advised that they were very happy with the care provided by staff in Arbour House. They were relaxing in the lounge having a cup of tea and planning their activities for the day. They spoke of their day trips and holidays. Staff knew the guests well.

As part of the inspection process nine questionnaires were issued to guests, relatives/representatives and staff, with a request that they were returned within one week from the date of the inspection. Three guests and three members of staff returned the questionnaires within the specified timescale. All responses were positive stating that they were "very satisfied" with the management of medicines within the home.

#### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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**4.6 Is the service well led?**

Written policies and procedures for the management of medicines were in place. Following discussion with staff it was evident that they were familiar with the policies and procedures and that any updates were highlighted to staff.

There were robust arrangements in place for the management of medicine related incidents. Staff confirmed that they knew how to identify and report incidents. One medicine related incident had been identified since the last medicines management inspection. There was evidence of the action taken and learning which had been implemented.

A review of the audit records indicated that satisfactory outcomes had been achieved. Staff confirmed that if a discrepancy was identified, it would be reported and investigated to ensure that any learning was identified and actioned.

Following discussion with the registered manager and care staff, it was evident that staff were familiar with their roles and responsibilities in relation to medicines management.

Staff confirmed that any concerns in relation to medicines management were raised with management. They advised that any resultant action was communicated with all staff.

**Areas for improvement**

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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**5.0 Quality improvement plan**

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards.



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