

# Unannounced Medicines Management Inspection Report 27 September 2016



## Alpine House

**Type of service: Residential Care Home**  
**Address: 20 Ballyholme Road, Bangor, BT20 5JN**  
**Tel no: 028 9145 4904**  
**Inspector: Cathy Wilkinson**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Alpine House took place on 27 September 2016 from 12.30 to 14.00.

The findings of the last medicines management inspection on 9 June 2016 indicated that improvements were necessary in several areas of the management of medicines. A serious concerns meeting took place on 22 June 2016 with the registered person and registered manager. At that meeting the concerns raised by the inspection findings were discussed. A full account of the actions taken to ensure that robust systems for the management of medicines were in place was provided by the registered person.

Following the meeting RQIA decided to give the management of the home a period of time to address the concerns and drive the necessary improvement.

The inspection sought to assess progress with the concerns raised during the last medicines management inspection and to determine if the home was now delivering safe, effective and compassionate care and if the service was well led.

The evidence seen during the inspection indicated that the management of medicines supported the delivery of safe, effective and compassionate care.

Since the previous inspection and the serious concerns meeting, the areas identified for improvement had been addressed in a satisfactory manner. Management have reviewed the systems in place. Staff have received further training on the management of medicines and their competency in this aspect of care has been reassessed.

The improvements which had taken place were acknowledged. These must be sustained in order that staff continue to deliver safe and effective care.

No requirements or recommendations were made.

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 Ms Joanne Glendinning, 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.

## 1.2 Actions/enforcement taken following the most recent medicines management inspection

Other than those actions detailed in the QIP and agreed in the serious concerns meeting, there were no further actions required to be taken following the most recent inspection on 9 June 2016.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Mr Sathrouhun Bogun	<b>Registered manager:</b> Ms Joanne Glendinning
<b>Person in charge of the home at the time of inspection:</b> Ms Joanne Glendinning	<b>Date manager registered:</b> 3 April 2009
<b>Categories of care:</b> RC-I	<b>Number of registered places:</b> 22

## 3.0 Methods/processes

Prior to inspection the following records were analysed:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the incidents register; it was ascertained that no incidents involving medicines had been reported to RQIA since the last medicines management inspection.

We met with two members of staff and the registered manager.

A poster indicating that the inspection was taking place was displayed in the lobby of the home and invited visitors/relatives to speak with the inspector. No one availed of this opportunity during the inspection.

A sample of the following records was examined:

- medicines requested and received
- personal medication records
- medicine administration records (MARs)
- medicines disposed of or transferred
- controlled drug record book
- medicine audits
- policies and procedures
- care plans
- training records
- medicines storage temperatures

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 9 June 2016

The most recent inspection of the home was an unannounced medicines management inspection. The completed QIP was returned and approved by the pharmacist inspector (see section 4.2).

### 4.2 Review of requirements and recommendations from the last medicines management inspection 9 June 2016

Last medicines management inspection statutory requirements		Validation of compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 19(2) <b>Stated:</b> Third and final time	A record must be maintained of the medicines management training and development activities completed by staff members (to include any competency and capability assessment that is carried out).	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A record of the training completed by staff was provided during the inspection. Competency of staff had also been reassessed and records maintained.	
<b>Requirement 2</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> Third and final time	The personal medication record must be fully and accurately maintained in accordance with DHSSPS guidance.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The personal medication records had been reviewed and were observed to be fully and accurately maintained.	
<b>Requirement 3</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> Second time	The registered manager must ensure that the impact of training is evaluated and that supervision and appraisal of staff is completed and documented.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The impact of training was evaluated and staff had attended supervision in July 2016. The registered manager was aiming to complete supervision quarterly or more often if needed.	

<b>Requirement 4</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> Second time	The registered manager must ensure that a robust audit system, which examines all aspects of the management of medicines, is implemented and documented.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Audits were provided for inspection and had produced satisfactory outcomes. There was evidence that the registered manager was routinely monitoring the medicine records.	
<b>Requirement 5</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> Second time	The registered manager must ensure that the record of medicines returned for disposal is fully completed and legible.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> This record was fully completed and legible.	
<b>Requirement 6</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> Second time	The registered manager must ensure that the refrigerator temperatures are accurately recorded and maintained within the required range of +2°C to +8°C.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The refrigerator temperatures had been recorded daily and were within the required range.	
<b>Requirement 7</b> <b>Ref:</b> Regulation 19(2) <b>Stated:</b> First time	The registered person must ensure that records are available for inspection at all times.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> All records that were requested were available for inspection.	
<b>Requirement 8</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> First time	The registered person must ensure that a record of the administration of each medicine is made.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A record of the administration of each medicine was made. MARs sheets were in place for all medicines.	

<b>Requirement 9</b> <b>Ref:</b> Regulation 13(4) <b>Stated:</b> First time	The registered person must review and revise the management of pain.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The management of pain had been reviewed and revised. Pain relief patches had been applied as prescribed and there was a care plan in place when appropriate.	
<b>Last medicines management inspection recommendations</b>		<b>Validation of compliance</b>
<b>Recommendation 1</b> <b>Ref:</b> Standard 30 <b>Stated:</b> Second time	The registered manager should closely monitor inhaled medicines to ensure that they are appropriately administered.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A running balance was maintained for inhaled medicines. The audit indicated that they had been administered as prescribed.	
<b>Recommendation 2</b> <b>Ref:</b> Standard 30 <b>Stated:</b> Second time	The registered manager should review and revise the management of warfarin.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The management of warfarin had been reviewed and revised. The written dosage instruction is collected from the GP surgery and transcribed by two staff onto the administration form. A running stock balance is maintained.	
<b>Recommendation 3</b> <b>Ref:</b> Standard 30 <b>Stated:</b> Second time	Standard Operating Procedures for the management of controlled drugs should be in place.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Standard Operating Procedures were in place.	

<b>Recommendation4</b>  <b>Ref:</b> Standard 10  <b>Stated:</b> First time	The management of medicines prescribed on a “when required” basis for the management of distressed reactions should be reviewed and revised to ensure that all of the appropriate records are maintained.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The management of “when required” medicines had been reviewed. All of the appropriate records had been maintained. These medicines are administered very rarely and the registered manager is consulted prior to administration.	
<b>Recommendation 5</b>  <b>Ref:</b> Standard 30  <b>Stated:</b> First time	The Quality Improvement Plans should be regularly reviewed as part of the quality improvement process and form part of the auditing process.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The registered manager advised that the Quality Improvement Plan was used as part of the auditing process. All of the requirements and recommendations had been assessed as met.	

### 4.3 Inspection findings

#### Is care safe?

There was evidence that the management of medicines supported the delivery of safe care and positive outcomes for residents. The areas identified for improvement at the last inspection had been addressed in a satisfactory manner. Records were available for inspection, records of training and competency had been maintained and the management of warfarin had been reviewed and revised. Improvement in the maintenance of the personal medication records and medicine administration records was noted. Medicines were being stored safely and securely. There were systems in place to ensure the management of medicines was in compliance with legislative requirements and standards. No requirements or recommendations were made.

#### Is care effective?

The management of medicines supported the delivery of effective care. There were systems in place to ensure residents were receiving their medicines as prescribed. The areas identified for improvement at the last inspection had been addressed in a satisfactory manner. Inhaled medicines were being administered as prescribed and the management of “when required” medicines and pain had been reviewed and revised. No requirements or recommendations were made.



**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 residents. No requirements or recommendations were made.

**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. The registered manager had delegated some medicine related tasks to the senior care assistants to ensure that medicines were managed appropriately when she was not present in the home. Systems were in place to enable management to identify and cascade learning from any medicine related incidents and medicine audit activity. Robust auditing systems were in place. No requirements or recommendations were made.

**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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