



The Regulation and
Quality Improvement
Authority

Oakridge Residential Unit
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BT24 8TJ

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**Unannounced Medicines Management Inspection
of
Oakridge Residential Unit**

25 February 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced medicines management inspection took place on 25 February 2016 from 10.00 to 12.30.

The management of medicines was found to be safe, effective and compassionate. The outcome of the inspection found no significant areas of concern though one area for improvement was identified and is set out in the quality improvement plan (QIP) within this report.

This inspection was underpinned by the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011).

1.1 Actions/Enforcement Taken Following the Last Medicines Management Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last inspection on 9 July 2012.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	1

The details of the QIP within this report were discussed with the Acting Manager, Ms Linda Kelly as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/ Registered Person: Spa Nursing Homes Ltd / Mr Christopher Philip Arnold	Registered Manager: Not applicable
Person in charge of the home at the time of inspection: Ms Linda Kelly (Acting Manager)	Date manager registered: Not applicable
Categories of care: RC-DE	Number of registered places: 10
Number of residents accommodated on day of inspection: 9	Weekly tariff at time of inspection: £470 to £485

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the last medicines management inspection and to determine if the following standards and themes have been met:

Standard 30: Management of medicines
Standard 31: Medicine records
Standard 33: Administration of medicines

Theme 1: Medicines prescribed on a “when required” basis for the management of distressed reactions are administered and managed appropriately.

Theme 2: Medicines prescribed for the management of pain are administered and managed appropriately.

4. Methods/Process

Specific methods/processes used included the following:

The management of incidents reported to RQIA since the last medicines management inspection was reviewed.

We met with the acting manager, Ms Linda Kelly and the team leader.

The following records were examined during the inspection:

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

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 22 September 2015. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Medicines Management Inspection

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 13(4) Stated: First time	<p>The registered manager must closely monitor the medicines highlighted at this inspection.</p> <hr/> <p>Action taken as confirmed during the inspection: Robust arrangements were in place to monitor the administrations of medicines. The audits performed during the inspection indicated that the medicines had been administered in accordance with the prescribers' instructions.</p>	Met
Requirement 2 Ref: Regulation 13(4) Stated: First time	<p>The registered manager must ensure that two members of staff are involved in writing the personal medication records for all new admissions in order to ensure that the required details are accurately recorded.</p> <hr/> <p>Action taken as confirmed during the inspection: Two members of staff were involved in writing the personal medication records for new admissions in order to ensure that the required details were accurately recorded.</p>	Met
Requirement 3 Ref: Regulation 13(4) Stated: First time	<p>The registered manager must ensure that the ambient temperature of the treatment room is monitored daily and does not exceed + 25°C.</p> <hr/> <p>Action taken as confirmed during the inspection: The ambient temperature of the treatment room was monitored daily and did not exceed + 25°C.</p>	Met
Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 31 Stated: First time	<p>Two members of staff should verify and sign all updates on the personal medication records.</p> <hr/> <p>Action taken as confirmed during the inspection: Two members of staff had verified and signed updates on the personal medication records.</p>	Met

5.3 The Management of Medicines

Is Care Safe? (Quality of Life)

Medicines were being administered in accordance with the prescribers' instructions. The audit trails performed on a range of randomly selected medicines produced satisfactory outcomes.

Arrangements were in place to ensure the safe management of medicines during a resident's admission to the home. The admission process was reviewed for two recently admitted residents. Their medicine regimes had been confirmed in writing. Two members of staff had verified and signed the personal medication records.

Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. There was no evidence to indicate that medicine doses were omitted due to being out of stock. Medicines were observed to be labelled appropriately.

Medicines were prepared immediately prior to their administration from the container in which they were dispensed.

The medicine records had been maintained in a satisfactory manner. Records of the ordering, receipt, administration and disposal of medicines were maintained. Where transcribing of medicine details had occurred, this process had involved two staff members to ensure the accuracy of the record; this is good practice.

Stock reconciliation checks were performed on controlled drugs which required safe custody, at each transfer of responsibility.

Records showed that discontinued and expired medicines had been returned to a community pharmacy.

Is Care Effective? (Quality of Management)

Policies and procedures for the management of medicines, including Standard Operating Procedures for the management of controlled drugs, were available.

The acting manager stated that the organisation planned to ensure staff managing medicines had annual updates from the community pharmacist and competencies reviewed annually.

There were robust internal auditing systems. The senior care staff had completed weekly audits on medicine stocks and reported outcomes to management. The audit process was facilitated by the good practice of recording the date and time of opening on the medicine container.

There were procedures in place to report and learn from medicine related incidents that had occurred in the home. The medicine incidents reported to RQIA since the last medicines management inspection had been managed appropriately.

Is Care Compassionate? (Quality of Care)

The records pertaining to two residents who were prescribed medicines for the management of distressed reactions were observed at the inspection. Each resident had a care plan which

detailed the circumstances under which the medicine was to be administered. The parameters for administration were recorded on the personal medication records. The medicines administration records indicated that the medicines had been administered in accordance with the prescribers' instructions. A record of each administration had been maintained; however, the reason for and outcome of administration were mostly not recorded. A recommendation was made.

The records for two residents who were prescribed medicines for the management of pain were reviewed. The senior carer confirmed that all residents had pain reviewed as part of the admission assessment and on an ongoing basis thereafter. Medicines prescribed for the management of pain were recorded on the residents' personal medication records. The analgesics were prescribed for administration on a "when required" basis. Examination of the administration of these medicines indicated that they had been administered as prescribed.

Areas for Improvement

When medication is prescribed on a "when required" basis for the management of distressed reactions, the reason for administration and the outcome should be recorded. A recommendation was made.

Number of Requirements	0	Number of Recommendations	1
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6. Quality Improvement Plan

The issue identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Linda Kelly, Acting Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The DHPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Person/Registered Manager

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to pharmacists@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan			
Recommendations			
Recommendation 1 Ref: Standard 8 Stated: First time To be Completed by: 24 March 2016	When medication is prescribed on a "when required" basis for the management of distressed reactions, the reason for administration and the outcome should be recorded.		
	Response by Registered Person(s) Detailing the Actions Taken: When a medication is given on a "when required" basis for the management of distressed reactions the staff administering medication will record the reason it has been given and also record the outcome on the relevant recording sheets.		
Registered Manager Completing QIP	Linda Kelly	Date Completed	21/03/16
Registered Person Approving QIP	Chris Arnold	Date Approved	21/03/16
RQIA Inspector Assessing Response	Paul W. Nixon	Date Approved	04/04/16

Please ensure this document is completed in full and returned to pharmacists@rqia.org.uk from the authorised email address