

# Unannounced Medicines Management Inspection Report 7 September 2016



## Corriewood Private Clinic

Type of service: Residential Care Home  
Address: 3 Station Road, Castlewellan, BT31 9NF  
Tel No: 028 4377 8230  
Inspector: Cathy Wilkinson

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

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Corriewood Private Clinic – The Gate Lodge took place on 7 September 2016 from 09.55 to 11.15.

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 residents. 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. There were no areas of improvement identified.

### 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. There were no areas of improvement identified.

### Is care compassionate?

The management of medicines supported the delivery of compassionate care. Staff were knowledgeable regarding their resident's needs, wishes and preferences. There were no areas of 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 of 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 Joan Brenton, Senior Care Assistant, and Mrs M I McGrady, Registered Person, 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 estates inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 17 November 2015.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Corriewood Private Clinic Mrs M I McGrady Mrs Anne Monica Byrne	<b>Registered manager:</b> Mrs Teresa Josephine McClean
<b>Person in charge of the home at the time of inspection:</b> Mrs Joan Brenton (Senior Care Assistant)	<b>Date manager registered:</b> 1 April 2005
<b>Categories of care:</b> RC-MP, RC-LD, RC-LD(E)	<b>Number of registered places:</b> 4

## 3.0 Methods/processes

Prior to inspection we analysed the following records:

- recent inspection reports and returned QIPs
- recent correspondence with the home.

Prior to the inspection, it was ascertained that no incidents involving medicines had been reported to RQIA since the last medicines management inspection.

We met with the senior care assistant on duty. It was not possible to speak to any residents as they were either attending a day centre or participating in other activities outside the home.

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 during the inspection:

- medicines requested and received
- personal medication records
- medicine administration records
- medicines disposed of or transferred
- medicine audits
- policies and procedures
- training records

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 17 November 2015

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

### 4.2 Review of requirements and recommendations from the last medicines management inspection dated 1 July 2013

Last medicines management inspection recommendations		Validation of compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 31 <b>Stated:</b> First time	A member of staff from The Gate Lodge should check and initial each entry on the personal medication records.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> This was evidenced during the inspection.	

### 4.3 Is care safe?

Medicines were managed by staff who have been trained and deemed competent to do so. The impact of training was monitored through team meetings, supervision and annual appraisal. Competency assessments were completed annually. The most recent medicines management training was in 2012 however the records indicated that further training was planned for this year.

Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. Staff advised of the procedures to identify and report any potential shortfalls in medicines.

There were satisfactory arrangements in place to manage changes to prescribed medicines. Personal medication records were updated by two members of staff. This safe practice was acknowledged.

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.

Discontinued or expired medicines were disposed of appropriately.

Medicines were stored safely and securely and in accordance with the manufacturer's instructions. Medicine storage areas were clean, tidy and well organised.

## 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.

Staff confirmed that compliance with prescribed medicine regimes was monitored and any omissions or refusals likely to have an adverse effect on the resident's health were reported to the prescriber.

Medicine records were well maintained and facilitated the audit process. Areas of good practice were acknowledged. They included a 'Distress Passport' which detailed how the resident presented when distressed. A record of all infections was also maintained. Staff were reminded that obsolete personal medication records should be removed from the file and archived.

Practices for the management of medicines were audited on the first day of every month and good outcomes were achieved.

Following discussion with the senior care assistant, it was evident that other healthcare professionals are contacted when appropriate to meet the needs of residents. Staff were reminded that any nursing care that the residents may require should be sought from the community nursing team.

## 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?

The administration of medicines could not be observed during this inspection. Staff were knowledgeable regarding their resident's needs, wishes and preferences. Staff spoke of the residents with kindness and it was evident that there were good relationships between residents and staff.

The senior care assistant spoke of the activities that the residents enjoyed and the holidays that were planned for the coming weeks. She said that staff and residents were very much looking forward to their holidays. Arrangements had been made for the management of medicines whilst the residents were away.

## 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. They were not examined during this inspection.

There were arrangements in place for the management of medicine related incidents. Staff confirmed that they knew how to identify and report incidents. There have been no adverse incidents since the last medicines management inspection.

A review of the audit records indicated that satisfactory outcomes had been achieved.

Following discussion with the senior care assistant, 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.

## 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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