

## Unannounced Follow Up Medicines Management Inspection Report 17 June 2019



## Larne Care Centre

Type of Service: Nursing Home Address: 46-48 Coastguard Road, Larne, BT40 1AU Tel No: 028 2827 7979 Inspector: Paul Nixon

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Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

#### 1.0 What we look for



#### 2.0 Profile of service

This is a nursing home with 87 beds that provides care for patients with a range of healthcare needs as detailed in Section 3.0. This number includes three persons who are receiving residential care.

#### 3.0 Service details

Organisation/Registered Provider: Larne Care Centre Responsible Individuals: Mr Colin Nimmon and Mr Frederick Michael Stewart	Registered Manager: Mr Leslie Stephens
Person in charge at the time of inspection: Mr Leslie Stephens	Date manager registered: 3 October_2014
Categories of care: Nursing Home(NH): I – old age not falling within any other category PH – physical disability other than sensory impairment PH(E) - physical disability other than sensory impairment – over 65 years TI – terminally ill DE – dementia LD – learning disability LD(E) – learning disability – over 65 years	<ul> <li>Number of registered places: 87</li> <li>This number includes: <ul> <li>a maximum of 31 patients accommodated within category NH- DE,</li> <li>a maximum of 25 patients accommodated within category NH- LD/LD(E), and</li> <li>a maximum of three residential places in categories RC-I, RC-PH and RC- PH(E)</li> </ul> </li> </ul>

#### 4.0 Inspection summary

An unannounced inspection took place on 17 June 2019 from 10.00 to 13.40.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

The inspection specifically sought to assess progress with issues raised during the previous medicines management inspection that took place on 1 November 2018.

The following areas were examined during the inspection:

- the stock control of medicines
- the administration of medicines
- the management of the medicine refrigerators
- the management of medicines which are prescribed to be administered "when required" for distressed reactions.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

#### 4.1 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 Leslie Stephens, 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.

#### 4.2 Action/enforcement taken following the most recent care inspection

No further actions were required to be taken following the most recent inspection on 26 November 2018.

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

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following:

- recent inspection reports and returned QIPs
- recent correspondence with the home
- the management of incidents involving medicines that had been reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with the registered manager and four registered nurses.

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

- personal medication records
- medicine administration records
- medicine audits
- care plans
- medicines refrigerator temperatures

Areas for improvements identified at the last medicines management inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

No areas for improvement were identified.

### 6.0 The inspection

# 6.1 Review of areas for improvement from the most recent inspection dated 26 November 2019

The most recent inspection of the home was an unannounced care inspection. The Quality Improvement Plan will be reviewed by the care inspector at the next care inspection.

# 6.2 Review of areas for improvement from the last medicines management inspection dated 1 November 2018

Areas for improvement from the last medicines management inspection			
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance	
Area for improvement 1 Ref: Regulation 13(4) Stated: First time	The registered person shall investigate the non-administration of one medicine for four nights. The outcome of the investigation including the action taken to prevent a recurrence shall be forwarded to RQIA.	complance	
	Action taken as confirmed during the inspection: An investigation was carried out and RQIA was informed of the outcome including the action taken to prevent a recurrence. The medicine administration records since 20 May 2019, for 42 patients, were examined and a range of audits were performed on randomly selected medicines. The medicine administration records and audit outcomes indicated that the medicines had been administered in accordance with the prescribed instructions. There were no out-of- stock medicines.	Met	

Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015		Validation of compliance
Area for improvement 1	The registered person shall ensure that	
	medicine refrigerator temperatures are	
Ref: Standard 30	maintained between 2°C and 8°C. Corrective	
Stated: First time	action should be taken if temperatures outside this range are observed.	
	Action taken as confirmed during the inspection: In each of the three units the records of the daily monitoring of the medicine refrigerator, since 1 May 2019, were examined. These records showed that the temperatures had been maintained between 2°C and 8°C.	Met
Area for improvement 2 Ref: Standard 18 Stated: First time	The registered person shall review and revise the management of medicines which are prescribed to be administered "when required" for the management of distressed reactions.	
	Action taken as confirmed during the inspection: The records for three patients who were prescribed medication to be administered "when required" for the management of distressed reactions were examined. For each of these patients a care plan was in place and the reason for and outcome of administration of the medicine was recorded.	Met

## 6.3 Inspection findings

#### See section 6.2.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

## 7.0 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.





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