

Children's Home Inspection Report
IN045461
7 June 2024

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Service Type: Children's Home Provider Type: Health and Social Care Trust Located within: South Eastern Health and Social Care Trust	Manager status: Not registered
Brief description of how the service operates: This home is registered as a small children's home as defined in The Minimum Standards for Children's Homes (Department of Health) (2023). The children in this home have been assessed as having physical and/or intellectual needs/ disability and in need of short breaks in residential care. Children and young people will be referred to collectively as young people throughout the remainder of this report.	

2.0 Inspection summary

An unannounced inspection took place on 7 June 2024, from 10.40am to 12.15pm. This was completed by a pharmacist inspector and focused on medicines management within the home.

The areas for improvement identified at the last care inspection will be followed up at the next care inspection.

Review of medicines management found that medicine records were well maintained. There were effective auditing processes in place to ensure that staff were trained and competent to manage medicines and the young people were administered their medicines as prescribed. Three new areas for improvement were identified in relation to; monitoring and recording the temperature of the medicine refrigerator and the medicines storage area and ensuring that two staff check and sign the personal medication records to verify that they are accurate.

Whilst areas for improvement were identified, RQIA can conclude that overall, the young people were being administered their medicines as prescribed.

RQIA would like to thank the staff for their assistance throughout the inspection.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection, a review of information held by RQIA about this home was reviewed. This included previous inspection findings, incidents and correspondence. The inspection was completed by examining a sample of medicine related records, the storage arrangements for medicines, staff training and the auditing systems used to ensure the safe management of medicines. Discussions took place with staff and management about how they plan, deliver and monitor the management of medicines in the home.

4.0 What people told us about the service

The inspector met with the manager and the independent monitoring officer. It was evident from discussions that they knew the young people well.

The manager said that the team communicated well and processes were in place for staff to discuss/escalate any issues and concerns should they arise.

Feedback methods included a staff poster and paper questionnaires which were provided to the manager for any young person or their family representative to complete and return using pre-paid, self-addressed envelopes. At the time of issuing this report, no questionnaires had been received by RQIA.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 16 May 2023		
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)		Validation of compliance
Area for Improvement 1 Ref: Standard 2 Stated: First time	The registered provider shall ensure that young people's care plans are reviewed and improved to ensure young people's agreed behaviour support strategies, and any restrictive practices in use are aligned to young people's needs within the current environment.	Carried forward to the next inspection

	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 2 Ref: Standard 11 Stated: First time	The registered provider shall ensure that the electric shower provided is suitably thermostatically controlled. It is essential that the temperature settings on the shower allow for a safe maximum temperature (44 ⁰ c) to be set and maintained in accordance with current best practice guidance (HSG220 & HSI6 issued by Health & Safety Executive – https://www.hse.gov.uk/pubns/hsis6.pdf).	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

5.2 Inspection findings

5.2.1 What arrangements are in place to ensure that medicines are appropriately prescribed, monitored and reviewed?

Young people in children's homes should be registered with a general practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times the young person's needs will change and therefore their medicines should be regularly monitored and reviewed. This is usually done by their general practitioner, consultant, a pharmacist or during a hospital admission.

Young people in the home were registered with a GP and medicines were dispensed by the community pharmacist.

Personal medication records were in place for each young person. These are records used to list all of the prescribed medicines, with details of how and when they should be administered. It is important that these records accurately reflect the most recent prescription to ensure that medicines are administered as prescribed and because they may be used by other healthcare professionals, for example, at medication reviews or hospital appointments.

The personal medication records reviewed at the inspection were accurate and up to date. However, in line with best practice, a second member of staff had not checked and signed the personal medication records when they were written and updated to confirm that they were accurate. An area for improvement was identified.

Staff advised that when required care plans to direct staff in the management of distressed reactions, pain, thickened fluids, diabetes etc. would be in place.

5.2.2 What arrangements are in place to ensure that medicines are supplied on time, stored safely and disposed of appropriately?

Medicine stock levels must be checked on a regular basis and new stock must be ordered on time. This ensures that the young person's medicines are available for administration as prescribed. It is important that they are stored safely and securely so that there is no unauthorised access and disposed of promptly to ensure that a discontinued medicine is not administered in error.

The records inspected showed that medicines were available for administration when young people required them. Staff advised that they had a good relationship with the community pharmacist and that medicines were supplied in a timely manner.

The medicines storage area was observed to be securely locked to prevent any unauthorised access. However, the temperature of the medicines storage area was not monitored or recorded to ensure that medicines are stored appropriately as per the manufacturers' recommendations. An area for improvement was identified.

Medicines which require cold storage must be stored between 2°C and 8°C to maintain their stability and efficacy. In order to ensure that this temperature range is maintained it is necessary to monitor the current, maximum and minimum temperatures of the medicine refrigerator when in use and to then reset the thermometer. The temperature of the medicines refrigerator was not monitored or recorded. The manager provided assurances that this would be rectified immediately and that this would be monitored through the home's auditing system. An area for improvement was identified.

Satisfactory arrangements were in place for the safe disposal of medicines.

5.2.3 What arrangements are in place to ensure that medicines are appropriately administered within the home?

It is important to have a clear record of which medicines have been administered to young people to ensure that they are receiving the correct prescribed treatment.

A sample of the medicines administration records was reviewed. All of the records reviewed were found to have been accurately completed. The records were filed once completed and were readily available for audit and review.

Controlled drugs are medicines which are subject to strict legal controls and legislation. They commonly include strong pain killers. The receipt, administration and disposal of controlled drugs were appropriately recorded in the controlled drug record book. There were satisfactory arrangements in place for the management of controlled drugs.

Management and staff audited medicine administration on a regular basis within the home. A range of audits were carried out. Review of a sample of records of medicines received into the

home, administered while in the home and returned at discharge indicated that the medicines had been administered as prescribed.

5.2.4 What arrangements are in place to ensure that medicines are safely managed during transfer of care?

Young people who use medicines may follow a pathway of care that can involve both health and social care services. It is important that medicines are not considered in isolation, but as an integral part of the pathway, and at each step. Problems with the supply of medicines and how information is transferred put young people at increased risk of harm when they change from one healthcare setting to another.

There had been no recent admissions to the home. However, the admission process for young people on admission or returning from other settings was reviewed. Staff advised that robust arrangements were in place to ensure that they were provided with a current list of the young person's medicines.

5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?

Occasionally medicines incidents occur within homes. It is important that there are systems in place which quickly identify that an incident has occurred so that action can be taken to prevent a recurrence and that staff can learn from the incident. A robust audit system will help staff to identify medicine related incidents.

Management and staff were familiar with the type of incidents that should be reported. The medicine related incident which had been reported to RQIA since the last inspection was discussed. There was evidence that the incident had been reported to the prescriber for guidance, investigated and learning shared with staff in order to prevent a recurrence.

5.2.6 What measures are in place to ensure that staff in the home are qualified, competent and sufficiently experienced and supported to manage medicines safely?

To ensure that young people are well looked after and receive their medicines appropriately, staff who administer medicines to young people must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and that staff are supported. Policies and procedures should be up to date and readily available for staff use.

There were records in place to show that staff responsible for medicines management had been trained and deemed competent. Ongoing review was monitored through supervision sessions with staff and at annual appraisal.

It was agreed that the findings of this inspection would be shared with staff for ongoing improvement.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with The Minimum Standards for Children's Homes (2023).

	Regulations	Standards
Total number of Areas for Improvement	0	5*

* the total number of areas for improvement includes two which are carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with the manager as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 Ref: Standard 2 Stated: First time To be completed by: 30 June 2023	<p>The registered provider shall ensure that young people's care plans are reviewed and improved to ensure young people's agreed behaviour support strategies, and any restrictive practices in use are aligned to young people's needs within the current environment.</p>
	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>
Area for improvement 2 Ref: Standard 11 Stated: First time To be completed by: 12 December 2023	<p>The registered provider shall ensure that the electric shower provided is suitably thermostatically controlled. It is essential that the temperature settings on the shower allow for a safe maximum temperature (44⁰c) to be set and maintained in accordance with current best practice guidance (HSG220 & HSIS6 issued by Health & Safety Executive – https://www.hse.gov.uk/pubns/hsis6.pdf).</p>
	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>

<p>Area for improvement 3</p> <p>Ref: Appendix 1, Standard 2</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing (7 June 2024)</p>	<p>The registered person shall ensure that personal medication records are checked and signed by two trained members of staff to verify that they are accurate.</p> <p>Ref: 5.2.1</p> <p>Response by registered person detailing the actions taken: The registered person has checked all medication records ensuring each one is correct and signed by two trained members of staff to verify they are accurate.</p>
<p>Area for improvement 4</p> <p>Ref: Appendix 1, Standard 3</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing (7 June 2024)</p>	<p>The registered person shall ensure that the temperature of the medicines storage area is monitored and recorded daily to ensure that medicines are stored as per the manufacturers' recommendations. Appropriate action must be taken if the temperature exceeds 25°C.</p> <p>Ref: 5.2.2</p> <p>Response by registered person detailing the actions taken: The registered person has purchased a room thermometer that attaches to the medication cabinet. This is checked on each shift and recorded in the handover. Appropriate action will be taken should the room exceed 25 degrees C.</p>
<p>Area for improvement 5</p> <p>Ref: Appendix 1, Standard 3</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing (7 June 2024)</p>	<p>The registered person shall ensure that the maximum, minimum and current temperatures of the medicine refrigerator are monitored and recorded daily when in use and that appropriate action is taken if the temperature recorded is outside the recommended range of 2°C-8°C.</p> <p>Ref: 5.2.2</p> <p>Response by registered person detailing the actions taken: The registered person has ordered a refrigerator thermometer which will be used to monitor and record the daily minimum, maximum and current temperature of the fridge. The registered person will ensure appropriate action is taken if the temperature recorded is outside the recommended range.</p>

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