



Unannounced Follow Up Medicines Management Inspection Report 27 September 2018



Abbeylands-Seapark Unit

Type of Service: Residential Care Home
Address: 441 Shore Road, Whiteabbey,
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Tel No: 028 9086 4552
Inspector: Helen Daly

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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 residential care home with 37 beds that provides care for residents living with a range of care needs as detailed in Section 3.0.

3.0 Service details

Organisation/Registered Provider: Four Seasons Health Care Responsible Individual: Dr Maureen Claire Royston	Registered Manager: Ms Eleanor Dodson
Person in charge at the time of inspection: Ms Eleanor Dodson	Date manager registered: 23 February 2018
Categories of care: Residential Care (RC): I – old age not falling within any other category MP – mental disorder excluding learning disability or dementia MP(E) - mental disorder excluding learning disability or dementia – over 65 years A – past or present alcohol dependence	Number of registered places: 37 This number includes a maximum of two residents in category RC-MP and one named resident in category RC-A. The home is also approved to provide care on a day basis for one person.

4.0 Inspection summary

An unannounced inspection took place on 27 September 2018 from 10.15 to 14.15.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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).

The inspection focus was to assess progress with the areas for improvement identified during and since the last medicines management inspection. We reviewed:

- Training on medicines management and accountability
- The management of medicines on admission
- The management of medication changes
- The management of antibiotics
- The standard of maintenance of the personal medication records, the medication administration records and records of medicines received into the home
- The governance systems for medicines management.

The last medicines management inspection was the first inspection in the residential care home and the evidence seen indicated that the majority of medicines were administered in accordance to the prescriber's directions. However, a number of issues were identified in relation to the systems in place for the management of medicines.

The outcome of the last medicines management inspection was been discussed with senior management in RQIA and it was agreed that the regional manager of Four Seasons Health Care, Mrs Janice Brown, would be contacted to discuss the issues. Following this telephone discussion, RQIA received an action plan (3 May 2018) advising how the concerns evidenced during the inspection would be addressed. Due to the assurances provided it was decided that this follow up inspection would be planned to examine if the necessary improvements had been implemented and sustained.

We spoke with three residents who were complimentary regarding the care provided in the home.

Evidence of good practice was found in relation to medicines administration, medicine records, medicine storage and the management of controlled drugs.

One area for improvement in relation to ensuring residents have a continuous supply of their prescribed medicines was identified.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Ms Eleanor Dodson, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

4.2 Action/enforcement taken following the most recent care inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 5 June 2018. Other than the action detailed in the QIP no further actions were required to be taken. 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 home was reviewed. This included the following:

- Recent inspection reports
- Recent correspondence with the home
- The management of medicine related incidents reported to RQIA since the last medicines management inspection.

A poster informing visitors to the home that an inspection was being conducted was displayed.

During the inspection we met with three residents, one senior carer, the deputy manager and the registered manager.

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

- medicines requested and received
- personal medication records
- medicine administration records
- controlled drug record book
- medicine audits
- care plans
- training records
- medicines storage temperatures

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

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 5 June 2018

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

6.2 Review of areas for improvement from the last medicines management inspection dated 25 April 2018

Areas for improvement from the last medicines management inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13 (4) Stated: First time	The registered person shall ensure that staff receive training on the management of medicines and be made aware of their accountability to ensure that medicines are administered as prescribed on all occasions.	Met
	Action taken as confirmed during the inspection: Training on the management of medicines, including staff accountabilities, was completed following the last medicines management inspection.	

<p>Area for improvement 2</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The registered person shall review and revise the systems in place for the management of medicines on admission.</p> <p>Action taken as confirmed during the inspection: We reviewed the management of medicines on admission for two recently admitted/re-admitted residents and safe systems were observed.</p>	Met
<p>Area for improvement 3</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The registered person shall review and revise the systems in place for the management of medication changes.</p> <p>Action taken as confirmed during the inspection: We reviewed the management of medication changes for several residents and safe systems were observed.</p>	Met
<p>Area for improvement 4</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The registered person shall review and revise the systems in place for the acquisition of antibiotics to ensure that courses are commenced without delay.</p> <p>Action taken as confirmed during the inspection: We reviewed several antibiotics. The evidence seen indicated that courses were commenced without delay.</p> <p>Running stock balance sheets were maintained for antibiotics.</p>	Met
<p>Area for improvement 5</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p>	<p>The registered person shall ensure that personal medication records, medicine administration records and receipt of medicine records are fully and accurately completed.</p> <p>Action taken as confirmed during the inspection: We reviewed several personal medication records, medication administration records and records of medicines received into the home. The necessary improvements which were identified at the last medicines management inspection had been addressed.</p>	Met

Area for improvement 6 Ref: Regulation 13 (4) Stated: First time	The registered person shall review and revise the auditing and governance systems within the home to provide assurances that medicines are being administered as prescribed and that shortfalls in the management of medicines are identified and addressed.	Met
	Action taken as confirmed during the inspection: Daily, weekly and monthly audits were in place. There was evidence that shortfalls were being identified and addressed.	

6.3 Inspection findings

Training on medicines management and accountability

Following the last medicines management inspection senior carers had attended training provided by the community pharmacist (26 April 2018). This training included an update on staff accountabilities. Senior carers had also completed on-line training on medicines management. Competency assessments were updated.

The management of medicines on admission

Written confirmation of currently prescribed medicine regimens was received. Personal medication records and hand-written medication administration records completed on admission were verified and signed by two members of staff. Records of the medicines received into the home were accurately maintained.

The management of medication changes

Personal medication records were up to date. Updates on the personal medication records and hand-written entries on the medication administration records had been verified and signed by two trained staff. Discontinued medicines had been removed for disposal. The audits which were completed indicated that the newly prescribed medicines had been administered correctly.

The management of antibiotics

The evidence seen indicated that courses were commenced without delay. Running stock balance sheets were maintained for antibiotics to ensure that they were being administered as prescribed.

The standard of maintenance of the personal medication records, the medication administration records and records of medicines received into the home

The necessary improvements which were identified at the last medicines management inspection had been addressed i.e. two trained staff verified and signed entries on the personal medication records at the time of writing and at each update, two trained staff verified and

signed hand-written entries on the medication administration records, records of medicines received into the home were accurately maintained and records of the administration of thickening agents were maintained.

The governance systems for medicines management

Daily, weekly and monthly audits were in place. There was evidence that shortfalls were being identified and addressed. This inspection found that all of the areas for improvement that were identified at the last medicines management inspection had been addressed. The registered manager and deputy manager had invested significant time to ensure that the systems for medicines management were reviewed and improved. The need to continue to monitor the management and administration of medicines was discussed in detail with the management team as these improvements must be sustained.

Additional areas examined

Management advised of the systems in place to manage the ordering of prescribed medicines to ensure that all residents have a continuous supply of their prescribed medicines. However, it was noted that two medicines had been out of stock for up to five doses during the current four week medicine cycle. The medicines were in stock on the day of the inspection. The management of out of stocks, including the need to report omitted doses to the prescriber, care manager and RQIA was discussed in detail with the management team. Incident report forms were received by RQIA on 28 September 2018. An area for improvement was identified.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to medicines administration, medicine records, medicine storage and the management of controlled drugs.

Areas for improvement

The registered person shall ensure that all residents have a continuous supply of their prescribed medicines. Omitted doses shall be reported to the prescriber for advice and reported to the appropriate authorities.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Ms Eleanor Dodson, Registered Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 the residential care home. 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with 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).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

<p>Area for improvement 1</p> <p>Ref: Regulation 13 (4)</p> <p>Stated: First time</p> <p>To be completed by: 27 October 2018</p>	<p>The registered person shall ensure that all residents have a continuous supply of their prescribed medicines.</p> <p>Ref: 6.3</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Monthly medication script management will be monitored through the Potential Missing Items List by the Home Manager to ensure medications are available at the start of each cycle. Staff will manage intermittent script management before the tablet goes out of stock. Potential out of stock medications should be brought to the attention of the SCA in Charge or Home Manager to ensure the situation is resolved before the tablet is missed. Residents' GP 's will be informed of any issues and action taken to address. Script collection issues will be recorded on Datix and brought to the attention of the Regional Manager for discussion within the Pharmacy contract.</p>

Please ensure this document is completed in full and returned via Web Portal



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