



The Regulation and  
Quality Improvement  
Authority

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**Unannounced Medicines Management Inspection  
of  
Lisgarel**

**5 May 2015**

The Regulation and Quality Improvement Authority  
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An unannounced medicines management inspection took place on 5 May 2015 from 11:00 to 14:00.

Overall on the day of the inspection the management of medicines was found to be safe, effective and compassionate. The outcome of the medicines management 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 Inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the last medicines management inspection on 28 February 2013.

### 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

The details of the QIP within this report were discussed with Mrs Debbie Gillespie (Registered Manager) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Northern Health and Social Care Trust (NHSCT) Mr Anthony Baxter Stevens	<b>Registered Manager:</b> Mrs Debbie Gillespie
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Debbie Gillespie	<b>Date Manager Registered:</b> 23 October 2009
<b>Categories of Care:</b> RC-I	<b>Number of Registered Places:</b> 40
<b>Number of Residents Accommodated on Day of Inspection:</b> 38	<b>Weekly Tariff at Time of Inspection:</b> £461

## 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 in this inspection include the following:

Prior to the inspection, the inspector reviewed the management of any medicine related incidents reported to RQIA since the last medicines management inspection.

During the inspection the inspector met with the registered manager and some of the staff on duty.

The following records were examined during the inspection:

Medicines requested and received	Medicine audits
Personal medication records	Policies and procedures
Medicine administration records	Care plans
Medicines disposed of or transferred	Training records
Controlled drug record book	

## 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 4 December 2014. The completed QIP was returned and was approved by the care inspector.

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

Last Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b> Ref: Standard 30 Stated once	The standard operating procedures detailing the arrangements for the management of controlled drugs should be expanded in order to ensure that all aspects are fully covered.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The standard operating procedures for the management of controlled drugs have been reviewed and revised, most recently in April 2015. Robust arrangements are in place for the management of controlled drugs.	
<b>Recommendation 2</b> Ref: Standard 31 Stated once	The layout of the personal medication record sheets should be reviewed in order to ensure that regular prescriptions are clearly recorded in the designated section of the sheet.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The layout of the personal medication record sheets was reviewed following the last inspection. The majority those examined were observed to have been maintained in a satisfactory manner.	

<p><b>Recommendation 3</b></p> <p>Ref: Standard 31</p> <p>Stated once</p>	<p>On the personal medication record sheets, the medicine dose to be administered should be specified in metric units or the number of individual units where appropriate.</p>	<p><b>Met</b></p>
<p><b>Action taken as confirmed during the inspection:</b></p> <p>The medicine dose to be administered was recorded in a satisfactory manner on the records examined.</p>		
<p><b>Recommendation 4</b></p> <p>Ref: Standard 31</p> <p>Stated once</p>	<p>The resident's photograph should be affixed to their personal medication record sheet.</p>	<p><b>Met</b></p>
<p><b>Action taken as confirmed during the inspection:</b></p> <p>The resident's photograph was affixed to all personal medication records examined.</p>		

## 5.3 The Management of Medicines

### Is Care Safe? (Quality of Life)

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

Systems are in place to manage the ordering of prescribed medicines to ensure adequate supplies are available and to prevent wastage.

There was evidence that robust arrangements are in place to ensure the safe management of medicines during a resident's admission to the home. Medication details are confirmed with the prescriber and personal medication record sheets are completed and checked by two staff members.

Medicines are prepared immediately prior to their administration from the container in which they are dispensed. All of the medicines examined were available for administration and had been labelled appropriately. This included those medicines which had been supplied in seven day blister packs.

Medicine records were legible and accurately maintained so as to ensure a clear audit trail. Records of the ordering, receipt, administration, disposal and transfer of medicines were maintained in a satisfactory manner.

Controlled drug record books and records of the stock reconciliation of controlled drugs which are subject to safe custody requirements were well maintained. Stock balances of these medicines are reconciled on each occasion when the responsibility for safe custody is transferred.

Any medicines which are discontinued or are unsuitable for use are returned to the community pharmacy for disposal.

There are procedures in place to report and learn from any medicine related incidents that have occurred in the home. The reported incidents had been managed appropriately.

### Is Care Effective? (Quality of Management)

Written policies and procedures for the management of medicines are in place. These were updated in April 2015. There are up to date Standard Operating Procedures for the management of controlled drugs.

Medicines are managed by staff who have been trained and deemed competent to do so. An induction process is in place. Medicines management training is provided by the Trust and is next planned for June 2015. The impact of training is monitored through supervision and appraisal. Staff performance reviews are undertaken annually and supervision at least twice a year.

There are arrangements in place to note any compliance issues with medicine regimes and these are reported to the resident's prescriber.

Practices for the management of medicines are audited regularly. In addition, running stock balances are maintained for medicines such as antibiotics and anticoagulants. A review of the audit records indicated that largely satisfactory outcomes had been achieved and in the instances where a discrepancy had been identified, a reason had been recorded. The audit process is facilitated by the good practice of recording the date of opening on the container. The registered manager agreed to ensure that a range of medicine formulations and medicines used 'when required' are included.

### **Is Care Compassionate? (Quality of Care)**

The records for several residents prescribed medication for administration 'when required' for the management of distressed reactions were examined. The medicine administration records indicated that the medicines were being administered in accordance with the prescribers' instructions. The parameters for administration were recorded on the personal medication records.

A care plan was in place for the management of distressed reactions. The registered manager agreed to ensure that these are regularly reviewed and that the review is recorded.

The records for several residents prescribed medication for the management of pain were examined. The medicine administration records indicated that the medicines were being administered in accordance with the prescribers' instructions. The parameters for administration were recorded on the personal medication records.

From discussion with the staff on duty, it was evident that staff are aware of the signs, symptoms and triggers of pain in residents. Staff are aware that ongoing monitoring is necessary to ensure the pain is well controlled and the residents are comfortable.

There are systems in place to report any increased frequency in the use, or lack of effect of pain management medicines to the resident's prescriber. There was evidence that the prescriber had been contacted and requested to review these medicines for several residents.

### **Areas for Improvement**

The reason for administration and outcome of administration of medicines prescribed on a 'when required' basis for the management of distressed reactions were not always recorded. This information should always be recorded. A recommendation was made.

<b>Number of Requirements:</b>	0	<b>Number of Recommendations:</b>	1
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### **5.4 Additional Areas Examined**

Medicines were safely and securely stored in accordance with the manufacturers' instructions.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Debbie Gillespie (Registered 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 HPSS (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 Manager/Registered Person

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](mailto: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 recommendation 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

**No requirements were made following this inspection**

### Recommendation

<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 30</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 5 June 2015</p>	<p>It is recommended that the reason for and outcome of administration of medicines prescribed on a 'when required' basis for the management of distressed reactions are routinely recorded.</p>
	<p><b>Response by Registered Person(s) Detailing the Actions Taken:</b></p> <p>When a medication has been prescribed on a "when required" basis and has been administered in response to distressed reaction the reason and outcome will be recorded in the progress notes.</p>

<b>Registered Manager Completing QIP</b>	ID.Gillespie	<b>Date Completed</b>	18.05.2015
<b>Registered Person Approving QIP</b>	Una Cuning Tony Stevens	<b>Date Approved</b>	27.05.15
<b>RQIA Inspector Assessing Response</b>	<b>Rachel Lloyd</b>	<b>Date Approved</b>	<b>1/6/15</b>

*Please ensure the QIP is completed in full and returned to [pharmacists@rqia.org.uk](mailto:pharmacists@rqia.org.uk) from the authorised email address*