

# Unannounced Finance Inspection Report 18 December 2018



## Triangle Housing Association

**Type of Service: Domiciliary Care Agency**

**Address: 37 Knockcairn Road, Dundrod, Crumlin, BT29 4UE**

**Tel No: 02894454508/07736890780**

**Inspector: Brieghe Ferris**

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

**1.0 What we look for**



**2.0 Profile of service**

37 Knockcairn Road is a domiciliary care agency (supported living type) which provides 24 hour personal care (and housing support) to four people who have a learning disability and complex needs. The service user’s care is commissioned by the Northern Health and Social Care Trust (NHSCT).

### 3.0 Service details

|   |   |
|---|---|
| <b>Organisation/Registered Provider:</b><br>Triangle Housing Association<br><br><b>Responsible Individual:</b><br>Christopher Alexander | <b>Registered Manager:</b><br>Erin Brown        |
| <b>Person in charge at the time of inspection:</b><br>Erin Brown  | <b>Date manager registered:</b><br>07 June 2016 |

### 4.0 Inspection summary

An unannounced inspection took place on 18 December 2018 from 10.20 to 15.00 hours.

This inspection was underpinned by The Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the DHSSPS Domiciliary Care Agencies Minimum Standards (2011).

The inspection assessed progress with any areas for improvement identified since the last finance inspection and to determine if the service was delivering safe, effective and compassionate care and if the service was well led.

There were examples of good practice found in relation to:

- the availability of a safe place to enable service users to deposit money or valuables for safekeeping
- records of income, expenditure and reconciliation (checks) were available including supporting documents
- there were mechanisms to obtain feedback and views from service users and their representatives
- a range of documents were in place to detail the personalised arrangements to support individual service users with managing their money and
- written policies and procedures were in place to guide financial practices in the service.

Areas requiring improvement were identified in relation to ensuring that:

- a written safe record is introduced to record the deposit or withdrawal of any items by service users to and from the identified safe place
- entries in the “activity mileage book” are signed and dated by two people; transport journey records should be clearly written and accurate and a mechanism for checking that all calculations are correct should be introduced and
- the costs for transport services should be detailed within each service user’s support plan and financial agreement.

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

## 4.1 Inspection outcome

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 2           | 1         |

Details of the Quality Improvement Plan (QIP) were shared with the registered manager at the conclusion of the inspection. The timescales for completion commence from the date of inspection.

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

## 5.0 How we inspect

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that none of these incidents related to service users' money or valuables. The record of calls made to RQIA's duty system was reviewed and this did not identify any relevant issues.

During the inspection, the inspector met with the registered manager. The inspector provided to the registered manager written information explaining the role of RQIA, the inspection process, the name of the inspector and the date of the inspection. It was requested that this information be displayed in a prominent position so that relatives or visitors who had not been present during the inspection could contact the relevant inspector should they wish to discuss any matter or provide any feedback.

The following records were examined during the inspection:

- A sample of income, expenditure and reconciliation records (records of checks performed)
- A sample of transport journey records and invoices
- A sample of written financial policies and procedures
- All four service user care files which included a range of documents including an individualised support plan, financial agreement and correspondence from the provider and the landlord detailing charges payable for transport and rent respectively
- The November 2018 "tenant's meeting" minute

The findings of the inspection were shared with 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 14 December 2018

The most recent inspection of the service was an unannounced care inspection; there were no areas for improvement identified as part of the inspection.

### 6.2 Review of areas for improvement from the last finance inspection

The service has not previously received an RQIA finance inspection.

## 6.3 Inspection findings

### 6.4 Is care safe?

**Avoiding and preventing harm to service users and clients from the care, treatment and support that is intended to help them.**

Discussions with the registered manager established that there were no current suspected, alleged or actual incidents of financial abuse, nor were there any finance-related restrictive practices in place for any service user.

The service had two safe places for the deposit of cash or valuables belonging to service users. The inspector was satisfied with the locations of the safe places and the persons with access. On the day of inspection, cash was being held in the main safe place, while other valuable items belonging to one service user were being held within the second safe place. There was no written record in place to detail the items which had been deposited for safekeeping.

An area for improvement was listed to ensure that a written record of the contents of the safe place is introduced. Items deposited or withdrawn from the safe place should be signed and dated by two people.

#### Areas of good practice

There were examples of good practice found for example, in relation to the availability of a safe place to enable service users to deposit money or valuables for safekeeping.

#### Areas for improvement

One area for improvement was identified as part of the inspection in relation to the introduction of a written safe record.

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 1           | 0         |

## 6.5 Is care effective?

**The right care, at the right time in the right place with the best outcome.**

Discussion with the registered manager established that no person associated with the service was acting as appointee for any service user.

Records of income and expenditure were available for service users, cash balances were checked by two members of staff at every staff handover i.e.: daily. Receipts were available for expenditure where service users were supported to make purchases or where purchases were made on a service user's behalf.

The registered manager described how staff used their own cars to provide transport services to service users. She advised that staff documentation in relation to the appropriate motor insurance and certificates of roadworthiness were in place and reviewed six-monthly during staff appraisals. A review of the records and discussion with the registered manager identified that written journey records were maintained for individual service users which were reviewed on a monthly basis and the mileage calculated. The registered manager explained that the health and social care (HSC) trust paid an agreed amount per week per service user for "activities miles".

A review of a sample of the records identified some weaknesses in the record keeping, including that each entry had not been signed by two people and that some entries were difficult to read. Some errors in the calculations used to charge for journeys were also identified within the sample reviewed. An area for improvement was identified in respect of these findings.

The registered manager was able to clearly describe the basis for categorising service users' journeys as either "activities" or "personal" miles. The registered manager reported that the amount per week for each service user had not changed in the years since each service user had taken up their tenancy and there was no written criterion as to the distinction between "activities" and "personal" mileage.

Advice was provided to the registered manager to detail in writing and share with the service user's HSC trust care manager(s) the current criterion used to categorise the types of journeys either as "activities" or "personal".

### Areas of good practice

There were examples of good practice found in relation to the existence of records of income, expenditure and regular reconciliations of monies held.

### Areas for improvement

One area for improvement was identified during the inspection in relation to ensuring that entries in the "activity mileage book" are signed and dated by two people and that transport journey records should be clearly written and accurate and a mechanism for checking that all calculations are correct should be introduced.

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 1           | 0         |

**6.6 Is care compassionate?**

**Patients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

The day to day arrangements in place to support service users with managing their money were discussed with the registered manager and she described a range of examples of how staff within the service achieved this. Discussion with the registered manager also established that the service had a range of methods in place to encourage feedback from service users or their representatives in respect of any issue.

The registered manager provided a copy of the most recent service user “tenants” meeting held in November 2018. The meeting minute detailed discussions regarding communal costs associated with living in the property including utility costs and noted that all service users were satisfied with the current arrangements regarding their joint contributions to these costs.

The registered manager explained how service users had access their monies at all times as senior members of staff within the service held keys to the safe place.

**Areas of good practice**

There were examples of good practice found in respect of the arrangements in place to support individual service users discussed during the inspection and mechanisms to obtain feedback and views from service users and their representatives.

**Areas for improvement**

No areas for improvement were identified during the inspection.

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 0           | 0         |

**6.7 Is the service well led?**

**Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.**

A written policy and procedure was in place addressing support provided to service users to manage their finances and a procedure addressing staff using their cars to provide transport. The latter policy did not detail the costs associated with transport services and an area has been identified in section 6.5 above to detail these charges within individual service users’ documentation.

Both files for all four service users were reviewed by the inspector. Each service user had a range of documents in place including:

- Support plan - which detailed the support required by the service user to manage their monies – these had been reviewed in October 2018. The registered manager noted that these were reviewed on a six-monthly basis.
- Be safe personal plan - which detailed the day to day controls in place to safeguard service users' monies.
- Tenancy agreement with the Landlord – (Choice housing).
- Written correspondence detailing the most recent increase in rent payable dated February 2018.
- Written correspondence from the provider dated March 2013 detailing the charges per mile for transport services. It was noted that the rate per mile detailed in this correspondence had not been updated since 2013. The registered manager noted that she would pass this feedback on to senior colleagues and identify whether there were any plans to review the current charge of 65p/mile.
- The most recently available minute of the service user's trust care management review - which detailed reference to how the service user managed their money and what support (if any) was provided by the service in this regard.
- Property record form/property disposal record form - which detailed items of value purchased by the service user and when items were disposed of. Entries had been signed.
- Service user guide - which included a section entitled "Helping you pay your bills" detailing potential support to service users to enable them to effectively manage their money.
- Service user financial agreement 2018/2019 - which detailed the individual service user's income and current (known) charges and an estimate of projected expenditure. It was noted that the document did not detail the current charges for transport services. The inspector noted that the charges for transport services should be clearly detailed within the document which should be shared again with the individual service users. The registered manager noted that support plan for each service user would also be updated with this information for consistency purposes.

Ensuring that the costs for transport services are detailed within each service user's support plan and financial agreement was identified as an area for improvement.

### Areas of good practice

There were examples of good practice found in relation to the range of documents in place detailing the personalised arrangements to support individual service users with managing their money and written policies and procedures were in place to guide financial practices in the service.

### Areas for improvement

One area for improvement was identified as part of the inspection. This related to ensuring that the costs for transport services are detailed within each service user's support plan and financial agreement.

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 0           | 1         |



## **7.0 Quality improvement plan**

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the registered manager, at the conclusion of the inspection. 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 agency. 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 Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the DHSSPS Domiciliary Care Agencies 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 Domiciliary Care Agencies Regulations (Northern Ireland) 2007

|   |  |
|---|--|
| <p><b>Area for improvement 1</b></p> <p>Ref: Regulation 14 (d)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b><br/>18 January 2019</p> | <p>The registered person shall ensure that a written safe record is introduced to record the deposit or withdrawal of any items by service users to and from the identified safe place.</p> <p>Ref: 6.4</p>  |
|   | <p><b>Response by registered person detailing the actions taken:</b><br/>Written safe record now in place where the Service User signs with the staff member.</p>  |
| <p><b>Area for improvement 2</b></p> <p>Ref: Regulation 14 (d)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b><br/>31 January 2018</p> | <p>The registered person shall ensure that entries in the “activity mileage book” are signed and dated by two people (this should be introduced from the date of the inspection).</p> <p>Transport journey records should be clearly written and accurate and a mechanism for checking that all calculations are correct should be introduced.</p> <p>Ref: 6.5</p> |
|   | <p><b>Response by registered person detailing the actions taken:</b><br/>Records have been reviewed so that journeys are clearly costed against each Service User</p>  |
| <h3>Action required to ensure compliance with the DHSSPS Domiciliary Care Agencies Minimum Standards (Updated August 2011)</h3>                           |  |
| <p><b>Area for improvement 1</b></p> <p>Ref: Standard 4.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b><br/>18 January 2019</p>      | <p>The registered person shall ensure that the costs for transport services are detailed within each service user’s support plan and financial agreement.</p> <p>Ref: 6.7</p>  |
|   | <p><b>Response by registered person detailing the actions taken:</b><br/>Support Plan and Financial agreement updated with costs for transport.</p>  |

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



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