



Unannounced Finance Inspection Report 20 February 2018



Oakmont Lodge

Type of Service: Residential Home

Address: 267 - 271 Old Belfast Road, Bangor, BT19 1LU

Tel No: 028 9146 5822

Inspector: Briege Ferris

www.rgia.org.uk

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 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 27 beds that provides care for older residents.

3.0 Service details

Organisation/Registered Provider: Maria Mallaband (9) Limited Responsible Individual(s): Victoria Craddock	Registered Manager: Lisa Harrison
Person in charge at the time of inspection: Lisa Harrison	Date manager registered: 26/08/2016
Categories of care: Residential Care (RC) Old age not falling within any other category	Number of registered places: 27 – RC-I

4.0 Inspection summary

An unannounced inspection took place on 20 February 2018 from 10.00 to 13.30 hours.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

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

Evidence of good practice was found in relation to adult safeguarding training; the availability of a safe place in the home (although this was not used to store money or valuables belonging to residents); in relation to listening to and taking account of the views of residents; the availability of written policies and procedures to guide record keeping and financial practices in the home and that each sampled resident had a signed individual written agreement with the home.

One area for improvement was identified in relation to ensuring each resident or their representative is given written notice of all changes to their individual written agreement, which are agreed in writing by the resident or their representative.

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	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Lisa Harrison, 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.

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 residents' 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, and the home administrator. A poster detailing that the inspection was taking place was positioned in a prominent position in the home, however no visitors or representatives chose to meet with the inspector.

The following records were examined during the inspection:

- The resident guide
- Written policies and procedures in respect of:
 - "Complaints Procedure" reviewed October 2017
 - "Whistleblowing Policy" reviewed July 2017
 - "Handling of cash and valuables" reviewed October 2017
 - "Record Keeping & access to records in Northern Ireland" reviewed October 2017
 - Resident's money and valuables and are safeguarded
 - Complaints Policy- recording, due for review 2021
 - Whistleblowing, revised November 2016
- A sample of charges in respect of care and accommodation fees
- Three residents' individual written agreements with the home

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 09 November 2017

The most recent inspection of the home was an unannounced care inspection. No areas for improvement were identified following the inspection.

6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to residents from the care, treatment and support that is intended to help them.

The registered manager confirmed that adult safeguarding training was mandatory for all staff and that the home administrator had most recently received this training in 2017. The registered manager explained that it was the home's policy not to hold money or valuables in the home which belonged to residents and therefore none were being held on the day of inspection.

Discussions 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 resident.

The home had a safe place available, however as noted above, this was not used to store money or valuables belonging to residents.

Areas of good practice

There were examples of good practice found, adult safeguarding training was mandatory for all staff and a safe place was available in the home.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

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

Arrangements in place for the home to receive the personal monies of any resident directly were discussed. The registered manager confirmed that no representative of the home was acting as nominated appointee for any resident (i.e.: managing and receiving social security benefits on a resident's behalf). In addition, she explained that no personal monies were otherwise received on behalf of residents from any source. Therefore income and expenditure records were not maintained, as residents' monies were not being handled by the home.

The registered manager explained that the cost of services attracting an additional charge such as hairdressing, private podiatry, barbering and beautician services were initially met by the home and subsequently billed to the residents or their representatives on a monthly basis. Records of the above treatments were in place which detailed the date of the treatments, the residents treated, the respective costs and these were signed by the person providing the treatment and by a representative of the home in each case.

A sample of the invoices raised to residents or their representatives in respect of both charges for care and accommodation fees and for the cost of additional services received by residents identified that the correct amounts had been charged by the home.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see the completed property records for three randomly sampled residents. The registered manager reported that these were held on each resident's care file and the files were provided for review. Each resident had a record in place which had been signed and dated. It was good to note that the make of one resident's television had been recorded.

The registered manager confirmed that no bank accounts were managed on behalf of residents nor did the home operate a comfort fund. Transport services were available for residents, however the registered manager confirmed that there was no charge to residents for the use of the home's transport.

Areas of good practice

There were examples of good practice found: a sample of charges for care, accommodation and additional services identified that the correct amounts had been charged, and each resident had a written record of the furniture and personal possessions which they had brought to their rooms.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

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

The arrangements to support residents with their money on a day to day basis were discussed with the registered manager. As noted above, the registered manager explained that no residents' monies or valuables were handled or safeguarded by the home in any way.

Discussion established that the home had a number of methods in place to encourage feedback from residents or their representatives in respect of any issue, including ongoing day-to-day feedback, eight-weekly relative and resident meetings and "Your Care" rating surveys.

Areas of good practice

There were examples of good practice identified for example, in relation to listening to and taking account of the views of residents.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	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 residents in order to deliver safe, effective and compassionate care.

The resident guide encompassed a range of information for a new resident, including general information regarding the current fees payable and the goods and services receivable in respect of the total weekly charge, together with details as to services attracting additional charges.

A range of written policies and procedures were easily accessible and addressed practices in the home including record keeping, handling of cash and valuables, complaints and whistleblowing. The home administrator confirmed that she was confident how to deal with the receipt of a complaint or escalate any concerns under the home's whistleblowing procedures.

Discussion was held regarding the individual written agreements in place with residents and three resident files were sampled to review the agreements in place. This review evidenced that all three residents had a signed agreement on their files; each of these was up to date as the residents had been admitted subsequent to the most recent regional uplift in fees (in approximately April 2017). The home administrator confirmed that it was currently the home's practice to update the agreements for the privately funded residents but not those whose fees were paid via the HSC trust.

The inspector highlighted that each resident's agreement should be updated to reflect the change in fees payable which should be agreed in writing by the resident or their representative.

Updating all relevant residents' agreements to reflect the up to date fee arrangements (which should be agreed in writing by the resident or their representative) was identified as an area for improvement.

A review of the sampled agreements identified that the services available within the home which attracted an additional fee were listed, however the current costs were not included. Residents or their representatives had identified those services which they wished to avail of while staying in the home.

The registered manager advised that separate authorisation forms for each service type were also provided to each resident or their representative at the time of admission which detailed the charges payable; these were maintained on residents' care files. The registered manager noted that these had been completed for all residents and she provided an assurance that a copy of the signed documents which detailed the current charges for these services would be attached to the residents' agreements and would be kept up to date as required.

Areas of good practice

There were examples of good practice found for example, in respect of the availability of written policies and procedures to guide record keeping and financial practices in the home and each resident sampled had an individual written agreement in place with the home (albeit a number of these required updating).

Areas for improvement

One area for improvement was identified during the inspection. This related to updating all residents' agreements to reflect the up to date fee arrangements. These changes should be agreed in writing by the resident or their representative.

	Regulations	Standards
Total number of areas for improvement	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 Lisa Harrison, 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 DHSSPS Residential Care Homes Minimum Standards (Updated August 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 DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

**Area for improvement
1**
Ref: Standard 4.6

Stated: First time

To be completed by:
03 April 2018

The registered person shall ensure that the resident or their representative is given written notice of all changes to the agreement and these are agreed in writing by the resident or their representative. Where the resident or their representative is unable to sign or chooses not to sign, this is recorded.

Ref: 6.7

Response by registered person detailing the actions taken:

The Residency Agreement section of the contract(which details fees) will be re-issued from 1.4.18 for signing by all residents / representatives with the change in rates and subsequently updated as required.

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



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