

Unannounced Finance Inspection Report 16 April 2018



Hillcrest Care Facility

Type of service: Residential Care Home
Address: 23 Old Mountfield Road, Omagh, BT79 7EL
Tel No: 028 8225 1222
Inspector: Briege Ferris

www.rqia.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 17 beds which care for residents with a dementia.

3.0 Service details

Organisation/Registered Provider: Knockmoyle Lodge Ltd Responsible Individual: Linda Florence Becket (registration pending)	Registered Manager: Julie Ann Elizabeth Taylor
Person in charge at the time of inspection: Julie Ann Elizabeth Taylor	Date manager registered: 1 October 2009
Categories of care: Residential Care (RC) DE - Dementia	Number of registered places: 17

4.0 Inspection summary

An unannounced inspection took place on 16 April 2018 from 10.00 to 14.40 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 since the last finance inspection and to determine if the home 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 residents to deposit money or valuables for safekeeping; the existence of income and expenditure records and supporting documents such as lodgement and expenditure receipts; Clear, detailed records relating to transferring the balance of personal monies owed to two residents following payment of their contribution to care costs; and treatment records for hairdressing and chiropody; in respect of the arrangements in place to support individual residents discussed during the inspection; mechanisms to obtain feedback and views from residents and their representatives; in respect of the information contained in the patients guide; the accounts administrator was clear on how to deal with the receipt of a complaint or escalate any concerns under the home's whistleblowing procedures and each resident who was sampled had a signed written agreement in place with the home, albeit that these needed review and update.

Areas requiring improvement were identified in relation to ensuring that: the accounts administrator receives adult safeguarding training at the next opportunity; ensuring that each resident has a up to date record of the furniture and personal possessions which they have brought to their room; ensuring that the residents' bank account and cash records are reconciled and signed and dated by two people at least quarterly; ensuring that any change to a resident's agreement including fees and financial arrangements are agreed in writing by the resident or their representative, ensuring that personal monies authorisation documents are in

place for all relevant residents and ensuring that policies and procedures are reviewed and updated as appropriate.

One resident who was spoken with was very satisfied with the current arrangements in place to support them to manage their money as independently as possible.

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	5

Details of the Quality Improvement Plan (QIP) were discussed with Julie Taylor, 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 managers, the accounts administrator and one resident.

The following records were examined during the inspection:

- The Patient Guide
- A sample of residents' income and expenditure records
- A sample of bank statements in respect of the residents' bank account
- Written policies and procedures:
 - "Complaints Procedure" dated March 2017
 - "Whistleblowing" dated December 2012
 - "Confidentiality Policy" dated February 2018
 - "Principles of Good Record keeping" dated December 2014
 - "Policy on handling Patients Money and Valuables" dated March 2013
 - "Policy on Financial records and documents pertaining to finance" dated July 2010
- A sample of residents' personal property (in their room)
- A sample of residents' individual written agreements
- A sample of treatment records for services facilitated within 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 11 January 2018

The most recent inspection of the home was an announced pre-registration care inspection. The completed QIP was returned and approved by the care inspector. The QIP will be validated by the care inspector at the next care 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 in the home; however the accounts administrator had not received this training.

This was identified as an area for improvement.

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 resident.

The home had a safe place available for the deposit of cash or valuables belonging to residents; the inspector was satisfied with the location of the safe place. On the day of inspection, cash belonging to a number of residents was lodged for safekeeping.

Areas of good practice

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

Areas for improvement

One area for improvement was identified in respect of ensuring that the accounts administrator receives adult safeguarding training at the next opportunity.

	Regulations	Standards
Total number of areas for improvement	0	1

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 and accounts administrator established that no person associated with the home was acting as appointee for any resident.

Discussion and a review of the records identified that for two residents, social security benefits were received directly by the home to a business bank account. Clear, detailed records existed to identify of these amounts, the balance retained in respect of the residents' contribution to their care and the balance transferred to the residents' pooled bank account in favour of the respective residents.

As noted above, a residents' bank account was in place to hold monies on behalf of two residents in the home. There was evidence that transactions in the account statements had been reviewed, however a reconciliation signed and dated by two people had not been recorded.

Ensuring that a double-signed reconciliation of the residents' bank account is carried out and recorded at least quarterly was identified as an area for improvement.

The accounts administrator reported that in a number of other cases, the family members of residents deposited cash for expenditure on behalf of their relative. Discussion established that the person making a deposit received a receipt and receipts were in place to record these details. It was noted that routinely only the signature of the person receiving the cash was recorded. The inspector provided advice in respect of recording the signature of the person depositing the money (or a second member of staff) as this acts as a protection for the resident and also the member of staff receiving cash.

For those residents for whom the home engaged in transactions for goods or services, records detailing income and expenditure were available for individual residents. A review of a sample of the records identified that two signatures had been recorded against individual transactions and receipts were available in respect of purchases made on behalf of residents. Evidence was available which identified that approximately on a monthly basis, the accounts administrator had recorded a check of the balance. Older records reviewed identified that the check/reconciliation of the individual residents' cash balances to the records had been signed by two people, however in all but one case; this had not been carried out within the last three months.

Ensuring that a reconciliation of cash balances is carried out, recorded and signed and dated by two people was identified as an area for improvement. This area for improvement is stated in conjunction with that above, in respect of the reconciliation of the residents' bank account.

Hairdressing and chiropody treatments were being facilitated within the home. The costs of the treatments agreed to a sample of charges recorded in residents' income and expenditure records. A sample of hairdressing treatment receipts were reviewed, which detailed the date, the name of the resident, the treatment received, the cost and the signature of the person providing the treatment. (Best practice would dictate that these records are also signed by a representative of the home to verify that the treatment has been provided to the resident and this advice was provided to the registered manager during feedback from the inspection).

The inspector discussed how residents' property (within their rooms) was recorded and requested to see a sample of the property records maintained.

The accounts administrator provided a book containing property records; however for a sample of residents selected, all of the residents' records were not in place.

Ensuring that each resident has a signed and dated record of the furniture and personal possessions which they have brought to their room (and which is kept up to date) was identified as an area for improvement.

During feedback from the inspection, advice was provided to the registered manager in respect of best practice in reviewing and countersigning each resident's record of personal property on at least a quarterly basis.

The registered manager and the accounts administrator confirmed that the home did not operate a comfort fund nor provide transport services to residents.

Areas of good practice

There were examples of good practice found in relation to the existence of income and expenditure records and supporting documents such as lodgement and expenditure receipts; Clear, detailed records existed relating to transferring the balance of personal monies owed to two residents following payment of their contribution to care costs and treatment records for hairdressing and chiropody were in place.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to ensuring that each resident has an up to date record of the furniture and personal possessions which they have brought to their room and ensuring that the residents' bank account and cash records are reconciled and signed and dated by two people at least quarterly.

	Regulations	Standards
Total number of areas for improvement	1	1

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.

Day to day arrangements in place to support residents were discussed with the registered manager and the accounts administrator. They described a range of examples of how the home supported residents with their money. Discussion established that arrangements to appropriately support residents with their money would be discussed with the resident or their representative at the time of the resident's admission to the home. It was clear from this discussion that residents were encouraged to be as independent as possible in managing their money. This was supported by comments made by one resident spoken with who spoke about how they were supported by the registered manager and the accounts administrator and they confirmed that they spent their money as they wished.

Discussion with the registered manager established that the home had a range of methods in place to encourage feedback from families or their representatives in respect of any issue. This included ongoing verbal feedback and an annual questionnaire.

Arrangements for residents to access money outside of normal office hours were discussed with the accounts administrator. This established that there were arrangements in place to ensure that the individual needs and wishes of residents could be met in this regard.

Areas of good practice

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

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 “patient guide”, included a range of useful information for a prospective resident including for example, information regarding the provision of a resident agreement to each resident, general information in respect of fees and terms and conditions, additional services facilitated within the home for which there was a fee, the management of lost property within the home.

Written policies and procedures were in place and were easily accessible. Policies were in place addressing areas of practice including general record keeping, whistleblowing, confidentiality, and accounting and financial control arrangements. A review of a sample of policies identified that they were outside of the three year time period for review. This was discussed with the registered manager who noted that a comprehensive review of all of the home’s policies was currently in motion.

Ensuring that policies and procedures are reviewed and updated as necessary was identified as an area for improvement.

Discussion with the home administrator established that she was clear on how to deal with the receipt of a complaint or escalate any concerns under the home’s whistleblowing procedures.

Individual resident agreements were discussed with the home administrator and a sample of residents’ agreements were requested for review. A review of the information provided established that each resident had a signed individual written agreement with the home. However, it was noted that all of the agreements reviewed were dated between 2012 and 2017, and therefore reflected the terms and conditions at that point in time.

In addition, it was noted that an appendix attached to the agreements to provide further detail in respect of the payment of fees, the persons by whom fees were payable and the method of payment had in the majority of cases, not been completed.

These findings were discussed with the registered manager during feedback. It was also highlighted that the home's generic resident agreement should be reviewed at this point to ensure that its content is consistent with Standard 4.2 of the Residential Care Homes Minimum Standards, 2011.

Ensuring that each resident is provided with an up to date written agreement and which is kept up to date to reflect all changes (which should be agreed in writing with the resident or their representative) was identified as an area for improvement.

A review of the agreements in place with residents identified that there was reference within the document to an appendix providing details of the appointment of an agent (ie: the home) and to providing the home with authorisation to use the resident's money for the resident's personal expenditure. However, this appendix was not attached to any of the resident agreements reviewed.

The registered person should ensure that where the home manage the personal money of any resident or make any purchases of goods or services on behalf of a resident, that there is written authority to do so. For the two residents for whom the home are acting as agent (receiving the social security benefits on behalf of these residents) this financial arrangement should be clearly detailed within the residents' individual written agreements with the home.

This has been identified as an area for improvement.

Areas of good practice

There were examples of good practice found in respect of the information contained in the patients guide; the accounts administrator was clear on how to deal with the receipt of a complaint or escalate any concerns under the home's whistleblowing procedures and that each resident who was sampled had a signed written agreement in place with the home, albeit that these needed review and update.

Areas for improvement

Three areas for improvement were identified as part of the inspection. These related to ensuring that any change to a resident's agreement including fees and financial arrangements are agreed in writing by the resident or their representative, ensuring that personal monies authorisation documents are in place for all relevant residents and ensuring that policies and procedures are reviewed and updated as appropriate.

	Regulations	Standards
Total number of areas for improvement	0	3

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Julie Taylor, 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 the Residential Care Homes Regulation (Northern Ireland)2005

<p>Area for improvement 1</p> <p>Ref: Regulation 19 (2) Schedule 4 (10)</p> <p>Stated: First time</p> <p>To be completed by: 16 June 2018</p>	<p>The registered person shall ensure that a record is made of the furniture and personal possessions which each resident has brought to the room occupied by them.</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken: Furniture & personal possession inventory compiled for each resident.</p>

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standard (Updated August 2011).

<p>Area for improvement 1</p> <p>Ref: Standard 16.9</p> <p>Stated: First time</p> <p>To be completed by: 16 July 2018</p>	<p>The registered person shall ensure that the home administrator receives adult safeguarding training at the next opportunity.</p> <p>Ref: 6.4</p>
	<p>Response by registered person detailing the actions taken: Adult safeguarding training completed 10.05.18.</p>

<p>Area for improvement 2</p> <p>Ref: Standard 15.12</p> <p>Stated: First time</p> <p>To be completed by: 30 April 2018 and at least quarterly thereafter</p>	<p>The registered person shall ensure that a reconciliation of the residents' bank account and residents' cash is carried out and recorded at least quarterly.</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken: Quarterly reconciliations in place for residents account.</p>

<p>Area for improvement 3</p> <p>Ref: Standard 4.6</p> <p>Stated: First time</p> <p>To be completed by: 16 June 2018</p>	<p>The registered person shall ensure that each resident 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.</p> <p>Ref: 6.7</p>
	<p>Response by registered person detailing the actions taken: Contracts currently being updated for all residents.</p>

<p>Area for improvement 4</p> <p>Ref: Standard 15.2</p> <p>Stated: First time</p> <p>To be completed by: 16 June 2018</p>	<p>The registered person shall ensure that where the home manage the personal money of any resident or make any purchases of goods or services on behalf of a resident, that there is written authority to do so. For the two residents for whom the home are acting as agent (receiving the social security benefits on behalf of these residents) this financial arrangement should be clearly detailed within the residents' individual written agreements with the home.</p> <p>Ref: 6.7</p>
<p>Area for improvement 5</p> <p>Ref: Standard 21.5</p> <p>Stated: First time</p> <p>To be completed by: 16 October 2018</p>	<p>Response by registered person detailing the actions taken: Authorisation sheets currently being updated</p> <p>The registered person shall ensure that policies and procedures are subject to a systematic three yearly review, and the registered person ratifies any revision to, or the introduction of, new policies and procedures.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: Policies and procedures are being updated at present. Ongoing until completion.</p>

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



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