

# Unannounced Finance Inspection Report

## 15 June 2017



## Killynure House

**Type of Service: Residential**

**Address: 26 Church Road, Carryduff, BT8 8DT**

**Tel No: 028 9504 2960**

**Inspector: Joseph McRandle**

[www.rgia.org.uk](http://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 40 beds that provides care for residents living with old age and dementia.

### 3.0 Service details

<b>Registered Organisation/Registered Provider:</b> Belfast Health and Social Care Trust  <b>Responsible Individual(s):</b> Mr Martin Joseph Dillon	<b>Registered Manager:</b> Ann Doherty- Acting
<b>Person in charge at the time of inspection:</b> Mrs Mandy Andrews, senior care assistant	<b>Date manager registered:</b> Not registered – no application required
<b>Categories of care:</b> Residential Care (RC) DE – Dementia	<b>Number of registered places:</b> 40

### 4.0 Inspection summary

An unannounced inspection took place on 15 June 2017 from 10.30 to 13.30.

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

Evidence of good practice was found in relation to: providing a safe place for residents to deposit items for safekeeping and the controls surrounding the safe place, daily reconciliations of residents' monies, facilitating residents to undertake journeys and providing residents with social outings and entertainment, listing the services included in the weekly fee and any additional services to be paid by residents. Other evidence of good practice included the recording of transactions undertaken on behalf of residents, records for the hairdressing service and the retention of receipts from purchases undertaken on behalf of residents.

Areas requiring improvement were identified in relation to: the current arrangement for retaining monies on behalf of a deceased resident, confirming if the Belfast Health and Social Care Trust (BHSCT) acts as an appointee for residents, updating residents' agreements to include their financial arrangements, issuing written agreements to all residents, Podiatrist to sign records and the person depositing monies on behalf of residents to sign records.

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 Mrs Mandy Andrews, senior care assistant, 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 dated 14 March 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 14 March 2017.

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues, no issues were identified.

During the inspection the inspector met with the senior care assistant and the home's administration officer. The manager was not on duty at the time of the inspection.

The following records were examined during the inspection:

- Four service users' finance files
- Two service users' individual written agreements
- The residents' guide
- Records of services provided by hairdresser and podiatrist
- Records of safe contents
- Records of transactions undertaken on behalf of three residents
- Records of reconciliations of residents' monies
- Records from monies deposited at the home on behalf of residents
- Financial policies and procedures
- One record of resident's personal property.

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

The findings of the inspection were provided to the senior care assistant at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 14 March 2017

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 finance inspection dated 12 February 2013

Areas for improvement from the last finance inspection dated 12 February 2013		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 4 (1) b  <b>Stated:</b> First time	It is required that the registered person ensures that agreements between the home and the residents are updated to indicate current weekly home costs and charges, and agreements are signed as agreed by the resident or their representative.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that the current fee and any additional charges to be paid by residents were included in the agreements available at the time of the inspection.	
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 4 (4)  <b>Stated:</b> First time	It is required that the registered person ensures that resident agreements between the home and the residents are updated to include current fees payable and method of payment of fees, as listed in requirement 1 above.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that the current fee and any additional charges to be paid by residents were included in the agreements available at the time of the inspection.	

<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 5 (1)  <b>Stated:</b> First time	It is required that the registered person ensures that residents' file records are updated to include signed and updated agreements between the home and the residents for current weekly charge, monthly amount and method of payment, as listed in requirements 1 & 2 above.	<b>Partially met</b>
<b>Area for improvement 4</b>  <b>Ref:</b> Regulation 5 (2) a & b  <b>Stated:</b> First time	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that two of the four residents' files reviewed at the time of inspection did not contain a signed written agreement. This area for improvement has been restated within the QIP of this report.	
	It is required that the registered person ensures that residents' file records are updated to include notification of increase in fees, as listed in requirement 3 above.	<b>Met</b>
<b>Area for improvement 5</b>  <b>Ref:</b> Regulation 19 (2)  <b>Stated:</b> First time	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that the BHSCT forward details of the increase in fee as part of the residents' annual financial assessment.	
	It is required that the registered person ensures that residents' file records are updated to include a record of fees received. The registered person must ensure that all resident written agreements comply with requirements under Regulation 5 of the Residential Care Homes Regulations Northern Ireland, 2005 and standard 4 of the DHSSPS Minimum Standards for Residential Care Homes 2011.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that details of the amounts received for residents' fees are maintained at the BHSCT.	

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011.		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 19 (2) Schedule 4.9  Minimum Standard 15.12  <b>Stated:</b> First time	It is recommended that the registered person should consider carrying out a regular reconciliation of money held at the home on behalf of residents and recording this reconciliation, at least quarterly.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed from records available at the time of inspection that reconciliations of residents' monies were undertaken on a daily basis.	

### 6.3 Inspection findings

#### 6.4 Is care safe?

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

A safe place was provided within the home for the retention of residents' monies and valuables. At the time of the inspection there were satisfactory controls around the physical location of the safe place and the staff members with access. Monies held on behalf of residents were counted, the amount retained agreed to the balance recorded at the home.

Review of records confirmed that monies were still being held for a deceased resident. Following a discussion with the inspector, staff agreed to contact the BHSCT in order to discuss the current arrangements for retaining the deceased resident's monies. This was identified as an area for improvement.

Review of records confirmed that valuables were held for one resident. A safe contents book was in place and up to date at the time of the inspection. Good controls were in place in relation to the recording the items.

Discussion with staff confirmed that administration staff had received training in relation to the safeguarding of residents' monies.

Discussion with staff confirmed that there were no finance related restrictive practices in place for any resident.

#### Areas of good practice

There were examples of good practice found in relation to providing a safe place for residents to deposit items for safekeeping and the controls surrounding the safe place.

## Areas for improvement

One area for improvement was identified. This related to the current arrangements for retaining monies on behalf of a deceased resident.

	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.**

Review of records confirmed that the BHSCT forwarded monies to the home on behalf of one resident. Staff could not confirm if the BHSCT was the appointee for the resident, i.e. a person authorised by the Social Security Agency (SSA) to receive and manage the social security benefits on behalf of an individual. No record of the details of the person nominated to act as appointee was maintained within the resident's files. This was identified as an area for improvement.

Discussion with staff confirmed that no member of staff at the home or at the BHSCT acted as an agent for any resident, i.e. a person authorised by a resident or their representative to collect social security benefits on the resident's behalf.

Discussion with staff and review of records confirmed that as in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations of monies and valuables held on behalf of residents were carried out regularly. Good practice was observed as the reconciliations were undertaken on a daily basis.

Discussion with staff and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Review of records also confirmed that the records of residents' personal possessions and items of furniture were regularly updated following admission to the home.

Records confirmed that residents or their representatives were informed in advance of any increase in fees as in line with The Residential Care Homes Regulations (Northern Ireland) 2005.

Discussion with staff confirmed that the BHSCT managed a Patient Private Property (PPP) account on behalf of one resident. Staff also confirmed that no bank accounts were managed on behalf of residents.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies reflected the procedures currently operated at the home in relation to managing residents' finances.

## Areas of good practice

There were examples of good practice in relation to the records of reconciliations of residents' monies and valuables and updating residents' records of personal possessions and furniture following admission to the home.

## Areas for improvement

One area for improvement was identified during the inspection. This related to confirming if the BHSCT acts as an appointee for residents and retaining a record of same within residents' files.

	Regulations	Standards
Total number of areas for improvement	0	1

### 6.6 Is care compassionate?

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

The home did not provide a transport scheme at the time of the inspection. Discussion with staff confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of taxis which were paid by the residents or their representatives.

Discussion with staff and review of records confirmed that on some occasions residents were taken on social outings or provided with entertainment. The residents' agreements stated that these activities were included within the services paid for by residents as part of their weekly fee.

Discussion with staff and review of records confirmed that the BHSCT held a PPP account for one resident. A sample of records of monies forwarded by the Trust were examined, the records showed that monies received by the home were credited to the residents' transaction sheets. Review of records showed that these financial arrangements were not included within the resident's written agreement as in line with standard 15.2 of the DHSSPS Residential Care Homes Minimum Standards (2011). This was identified as an area for improvement.

Discussion with staff confirmed that arrangements were in place to offer support to residents or their representatives for managing the residents' own monies.

## Areas of good practice

There were examples of good practice in relation to facilitating residents to undertake journeys and providing residents with social outings and entertainment.

## Areas for improvement

One area for improvement was identified during the inspection. This related to updating the residents' agreements to include their financial arrangements.

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

### 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.**

No records of fees paid by residents were available at the time of inspection. Discussion with staff confirmed that all fees were managed by the BHSC. Staff confirmed that no additional monies were received for fees over and above the amount agreed through the contracting arrangement with the Trust.

A residents' guide was in place at the time of the inspection. The guide included the details of the services provided to residents as part of their weekly fee. The guide also listed the additional services provided at the home to be paid by residents e.g. hairdressing.

The guide included a written agreement which was issued to residents on admission to the home. Review of four residents' files evidenced that individual written agreements were not in place for two of the residents. This was identified as an area for improvement during the previous finance inspection on 12 February 2013. This area for improvement has been restated within the QIP of this report.

Review of records and discussion with staff confirmed that Individual transaction sheets were maintained for each resident. The sheets were used to record the details of purchases undertaken on behalf of residents and the payments made for additional services e.g. hairdressing. The transaction sheets were also used to record amounts of monies deposited at the home on behalf of residents.

A review of records of two purchases made by staff, on behalf of one resident, showed that as in line with good practice the details of the purchases, the date and the amount of the purchases were recorded in the transaction sheets. Two signatures were recorded against each entry in the transaction sheets. Receipts from the purchases were available at the time of the inspection.

Records of payments to the hairdresser and podiatrist were reviewed. A hairdressing book was maintained at the home. The book recorded the name of the residents availing of the hairdresser, the service provided and the amount charged to residents. The hairdresser and a member of staff signed the records to confirm that the service was provided to the residents. There was evidence of good practice as a second member of staff signed the records when payment was made to the hairdresser.

Records for the podiatrist showed the names of the residents receiving the treatment and the amount charged to each resident. Two members of staff had signed the records. It was noticed that the podiatrist had not signed the records to confirm that they provided the service and had received payment. This was identified as an area for improvement.

Two records of monies deposited at the home on behalf of residents were reviewed. It was noticed that as in line with good practice receipts were issued to the person depositing the monies. The records confirming the amounts deposited were signed by two members of staff. Review of the records confirmed that the person depositing the monies had not signed the records. This was identified as an area for improvement.

### Areas of good practice

There were examples of good practice in relation to listing the services included in the weekly fee and any additional services to be paid by residents, recording of transactions undertaken on behalf of residents, records for hairdressing service and the retention of receipts from purchases undertaken on behalf of residents.

### Areas for improvement

Three areas for improvement were identified during the inspection. These related to issuing written agreements to all residents, Podiatrist to sign records and the person depositing monies on behalf of residents to sign records.

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

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Mandy Andrews, senior care assistant, 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, 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.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 5  <b>Stated:</b> Second time  <b>To be completed by:</b> 31 July 2017	<p>The registered person shall ensure that updated written agreements are in place for all residents accommodated at the home.</p> <p>The agreements should detail the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.</p> <p>Agreements should be signed by residents or their representatives (if resident lacks capacity to make decisions in relation to the agreement) and a representative from the home. Where a resident or their representative is unable or chooses not to sign this must be recorded.</p> <p>Copies of the signed agreements must be retained within residents' files.</p> <p><b>Ref: 6.7</b></p> <p><b>Response by registered person detailing the actions taken:</b>  All updated written agreements now signed and retained on residents individual file. The manager will ensure that this process is in place for all new admissions.</p>
Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 15.5  <b>Stated:</b> First time  <b>To be completed by:</b> 31 July 2017	<p>The registered person shall contact the BHSCT in order to agree a decision in relation to the monies held on behalf of the deceased resident, identified during the inspection.</p> <p><b>Ref: 6.4</b></p> <p><b>Response by registered person detailing the actions taken:</b>  This related to one resident family were contacted on 20.06.17 money was collected balance on ledger now reads as clear.</p>
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 15.10  <b>Stated:</b> First time  <b>To be completed by:</b> 31 July 2017	<p>The registered person shall contact the BHSCT to confirm if they are acting as appointee for any resident. If this is the case then a record of the name of the person, from the Trust, nominated to act as appointee should be kept in the residents' files.</p> <p>The record should also include the date the person was approved to act as appointee by the Social Security Agency.</p> <p><b>Ref: 6.5</b></p>

	<p><b>Response by registered person detailing the actions taken:</b> The Belfast Trust can confirm that a representative from the Trust is appointee for one resident, details are now included in resident's file.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 15.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 July 2017</p>	<p>The registered person shall ensure that details of residents' financial arrangements are included within their agreements i.e. the arrangements for the Trust to act as appointee and the arrangements for managing residents monies forwarded from the residents' PPP accounts managed by the Trust, including authorisation to make purchases and payments on behalf of residents.</p> <p><b>Ref: 6.6</b></p>
	<p><b>Response by registered person detailing the actions taken:</b></p> <p>Forms completed detailing residents agreements and filed in residents' files under 'legal documents Manager will audit on a monthly basis and ensure system is in place for all new admissions.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 20.14</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 3 July 2017</p>	<p>The registered person shall implement a system to ensure that the podiatrist signs the records to confirm the service took place and that they received payment.</p> <p><b>Ref: 6.7</b></p>
	<p><b>Response by registered person detailing the actions taken:</b> Podiatrist and senior staff informed that signatures are required when paying Podiatrist and that signed invoice must be retained on residents file.</p>
<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Standard 15.6</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 July 2017</p>	<p>The registered person shall ensure that the person depositing monies on behalf of residents signs the records to confirm the amount deposited.</p> <p><b>Ref: 6.7</b></p>
	<p><b>Response by registered person detailing the actions taken:</b> Senior staff have been informed that they must ensure that the person depositing money on behalf of residents signs the ledger to confirm amount deposited. Manager will ensure this is audited on a monthly basis.</p>

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



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