

Adelaide House RQIA ID: 10055 24-26 Adelaide Park Belfast BT9 6FX

Inspector: Joe McRandle Inspection ID: IN23284

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Announced Finance Inspection of Adelaide House

1 July 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced finance inspection took place on 1 July 2015 from 10:10 to 14:45. Twenty four hours' notice was given prior to the inspection. Overall on the day of the inspection the home was found to be delivering safe, effective and compassionate care in relation to the management of residents' finances. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

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
Total number of requirements and recommendations made at this inspection	5	1

The details of the QIP within this report were discussed with Mrs Norma Picking, registered manager and Ms Michelle Eadie, clerical officer, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Linda Wray	Registered Manager: Norma Picking
Person in Charge of the Home at the Time of Inspection: Norma Picking	Date Manager Registered: 22/10/2014
Categories of Care: RC-MP(E), RC-DE, RC-I	Number of Registered Places: 45
Number of Residents accommodated on the day of Inspection: 42 (7 Private)	Weekly Tariff at Time of Inspection: £470 (including private residents)

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following themes have been met:

Statement 1

The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care.

Statement 2

Arrangements for receiving and spending residents' monies on their behalf are transparent, have been authorised and the appropriate records are maintained.

Statement 3

A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained.

Statement 4

Arrangements for providing transport to residents are transparent and agreed in writing with the resident/their representative.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with registered manager and clerical officer
- Audit traces carried out on a sample of residents' records
- Audit of residents' individual files
- Spot check on residents' monies and valuables
- · Audit of policies and procedures
- Evaluation and feedback.

Prior to inspection the following records were analysed:

Records of incidents notified to RQIA in the last twelve months.

The following records were examined during the inspection:

- The resident's guide
- Five residents' individual files
- Records of Trust remittances showing fees paid by Trust on behalf of residents
- Records of payment of fees for four residents
- Records of lodgements made on behalf of residents
- Records of purchases made on behalf of five residents
- · Records of safe contents
- Consent forms for staff to make purchases on behalf of residents.
- Policy and Procedure on residents' finances.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an announced care inspection dated 5 November 2014. The QIP was returned and approved by the inspector on 22 December 4014. There were no issues to be followed up during this inspection.

5.2 Review of Requirements and Recommendations from the last Finance Inspection

There has been no previous finance inspection of this service.

5.3 Statement 1 - The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care

Is Care Safe?

A resident's guide was in place at the time of inspection. Two types of agreements are issued to residents, one for care managed residents and a separate agreement for private residents. Review of five residents' files (two of which were private residents) evidenced that individual written agreements were in place for four of the residents. No records were retained in the remaining resident's file. Discussion with staff confirmed that this resident was admitted to the home in April 2015 and was absent from the home temporarily at the time of the inspection. An agreement was in place waiting to be signed.

The residents' agreements did not show the current weekly fee to be paid by, or on behalf of, residents. The agreements did not provide a breakdown of the fee to be paid by the resident or the Trust. We noticed that a record of the method of payment of the fee for each resident was available; however this did not form part of the written agreement.

We also noticed that two of the agreements were not signed by a representative of the home and one further agreement was not signed by the resident or their representative.

Requirements have been listed within the QIP to this report in relation to these findings.

Is Care Effective?

Review of records and discussion with staff confirmed that no member of staff at the home acts as an appointee for any 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.

Discussion with staff also confirmed that no member of staff 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.

Review of records and discussion with staff confirmed that the only financial arrangements in place for each resident were for staff to manage monies deposited at the home by, or on behalf of residents and staff to make purchases on behalf of residents.

A policy and procedure for residents' finances was in place at the time of inspection. The policy detailed the arrangements of the support provided by the home to enable residents to manage their finances.

Is Care Compassionate?

Review of records confirmed that residents or their representatives receive written notification of increases in fees payable as in line with The Residential care Homes Regulations (Northern Ireland) 2005.

As in line with best practice consent forms authorising staff to make purchases on behalf of residents were in place. We noticed, however that these forms did not detail the items that were authorised for staff to purchase.

A recommendation has been listed within the QIP for the consent forms to be updated to include the items staff are authorised to purchase. The form should include a provision for further authorisation to be obtained from the resident or their representative for any purchases not included in the list.

Areas for Improvement

Overall on the day of inspection, we found care to be effective in relation to statement 1. Safe and compassionate care were found to be good. However, there were two areas identified for improvement; these were:

- Up to date individual written agreements to be issued to residents.
- Consent forms to detail the items to be purchased by staff on behalf of residents.

	Number of Requirements:	2	Number of Recommendations:	1	l
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5.4 Statement 2 - Arrangements for receiving and spending residents' monies on their behalf are transparent, have been authorised and the appropriate records are maintained

Is Care Safe?

Review of records confirmed that copies of payment remittances from Health and Social Care Trusts showing the weekly fee for each care managed resident were retained at the home. The remittances also showed the amount of fees paid by the Trust on behalf of residents and the amount to be contributed by the resident (if any). Records also showed the amount paid by private residents.

Review of records of payments made by or on behalf of four residents (two of which were private residents) confirmed that the amounts received agreed to the contribution owed by each resident.

Is Care Effective?

We reviewed records of purchases made on behalf of residents by staff. Individual transaction sheets were maintained which gave details of the purchases undertaken on behalf of residents. Each entry reviewed included the date, details and amount of the purchase. The majority of records reviewed had three signatures recorded against each entry; two staff signatures and either the resident or their representative.

We reviewed payments to the hairdresser. Discussion with the registered manager and clerical officer confirmed that a list of the hairdressing charges was displayed at the home. Records showed that when the hairdresser received payment two members of staff and the hairdresser signed the transaction sheet.

We noticed from records reviewed that the podiatrist does not sign the transaction sheet or issue a receipt when receiving payment.

A requirement is listed in the QIP to this report in relation to payments to the podiatrist.

Discussion with the registered manager confirmed that a shop is available at the home for residents to purchase certain items e.g. toiletries and treats. The registered manager informed us that proceeds from the shop goes towards the upkeep of the home's garden for the benefit of all residents. A review of records confirmed that only a few purchases from the shop were made by residents' over the last quarter. Residents and their representatives mainly availed of the choice of purchasing these items outside of the home.

Review of records confirmed that the person depositing monies on behalf of residents signed the transaction sheet along with two members of staff. Records also showed that monies held on behalf of residents were reconciled monthly. As in line with best practice two signatures were recorded against each of the reconciliations.

We observed good practice of maintaining a list of signatures of the members of staff involved in making purchases on behalf of residents. The hairdresser's signature was also included in the list.

Discussion with the registered manager confirmed that no bank accounts were managed on behalf of residents.

Is Care Compassionate?

Discussion with the registered manager confirmed that additional activities were provided to residents at no additional cost, e.g. entertainment and outings with staff to the local coffee shop.

As previously stated in this report, no member of staff acts as an appointee or agent on behalf of residents.

Review of records confirmed that residents capable of managing their own finances have access to their monies when required. Records showed that the resident signed the transaction sheet when receiving the monies. Discussion with the registered manager confirmed that no assessed restrictions were in place for any resident receiving their monies.

Areas for Improvement

Overall on the day of inspection, we found care to be safe and compassionate in relation to statement 2. The effectiveness of care was found to be good. However, there was one area identified for improvement; this was in relation to the podiatrist issuing receipts when receiving payment.

Number of Requirements:	1	Number of Recommendations:	0	١
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5.5 Statement 3 - A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained

Is Care Safe?

A safe place was provided within the home for the retention of monies and valuables belonging to residents. We counted monies held on behalf of five residents, the amount retained agreed to the balance recorded at the home for each resident. We were satisfied with the controls around the physical location of the safe place and the staff members with access.

A record of the contents of the safe was maintained. We took a sample of the valuables held on behalf of residents. The valuables inspected agreed to the items recorded in the safe register. We noticed that the monies and valuables held on behalf of residents were reconciled monthly. As in line with best practice the record was signed by the staff member undertaking the reconciliation and countersigned by a second member of staff.

Is Care Effective?

As stated within this report the only financial arrangements in place were the provision of a safe place for monies deposited on behalf of residents and for staff to make purchases on behalf of residents.

Discussions with the registered manager and review of records confirmed that an inventory of residents' property was maintained at the home. The inventory book was updated when items were brought into the home by or on behalf of residents. We noticed that there was no record of the inventory book being reconciled on a regular basis (at least quarterly). We also noticed that when items were removed from the home, no signatures were recorded to confirm that the items of property were received by the resident's relative or their representative.

A requirement is listed within the QIP in relation to this finding.

Is Care Compassionate?

A safe place is provided to enable residents to deposit monies and valuables when required. A lockable facility was also provided in each resident's room.

The home has a policy of reminding residents to restrict the amount of monies and valuables held at the home.

Areas for Improvement

Overall on the day of inspection, we found care to be safe and compassionate in relation to statement 3. The effectiveness of care was found to be good. However, there was one area identified for improvement; this was in relation to signatures being recorded when residents' property was received by relatives or their representatives.

Number of Requirements:	1	Number of Recommendations:	0	
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5.6 Statement 4 - Arrangements for providing transport to residents are transparent and agreed in writing with the resident/their representative

Is Care Safe?

The home does not provide transport to residents.

Is Care Effective?

A transport policy is provided to residents. Although transport is not provided the policy details the arrangements for residents attending hospital appointments. The policy also gives details of the arrangements for staff accompanying residents on such appointments. The resident pays for the taxi however they will not be charged for any staff member accompanying them to the appointment.

Residents or their representatives are required to sign the transport policy to agree the contents and confirm that the policy had been explained to the resident. We noticed that one of the transport policies retained in the files inspected was not signed by the resident.

A requirement is listed within the QIP in relation to this finding.

Is Care Compassionate?

Review of the transport policy and discussion with the registered manager confirmed that residents have the option of making their own arrangements for attending hospital appointments. The policy also stated that outings organised by the home are not charged to residents.

Areas for Improvement

Overall on the day of inspection, we found care to be safe and compassionate in relation to statement 4. The effectiveness of care was found to be good. However, there was one area identified for improvement; this was in relation to the transport policy being signed by all residents.

Number of Requirements:	1	Number of Recommendations:	0

5.7 Additional Areas Examined

No additional areas were examined during this inspection.

6 Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Norma Picking, registered manager and Ms Michelle Eadie, clerical officer, 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 the 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, The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Residential Care Homes Minimum Standards. 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 finance.team@rgia.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 requirements and recommendations 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

Statutory Requirements

Requirement 1

Ref: Regulation 5 (1) (a) (b)

Stated: First time

To be Completed by:

14 August 2015

The registered person must provide an updated individual written agreement to each resident (or their representative) accommodated at the home.

The agreement must comply with the requirements under regulation 5 of The Residential Care Homes Regulations (Northern Ireland) 2005 and meet standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards.

The agreements must detail the amount to be paid by the Health and Social Care Trust and the contribution to be paid by the resident (if any). The method of payment must also be included in the agreement.

Agreements should be signed by the resident or their representative (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.

Where a Health and Social Care Trust managed resident does not have a representative to sign the agreement, the resident's agreement should be shared with a representative from the Trust.

Copies of the signed agreements must be retained within residents' files.

Response by Registered Person(s)Detailing the Actions Taken:

Individual written agreements actioned.

Added to Contract when received from Trust.

Signatures actioned.

All residents currently have representation and NOK

All contracts in residents files. Actioned.

Requirement 2

Ref: Regulation 5 (1)

(a) (b)

Stated: First time

Stated: First time

To be Completed by: 14 August 2015

The registered person must provide a written agreement to the resident (or their representative) identified during the inspection.

The agreement must comply with the requirements under regulation 5 of The Residential Care Homes Regulations (Northern Ireland) 2005 and meet standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards.

The agreement must detail the amount to be paid by the Health and Social Care Trust and the contribution to be paid by the resident (if any). The method of payment must also be included in the agreement.

Agreements should be signed by the resident or their representative (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. Where a Health and Social Care Trust managed resident does not have a representative to sign the agreement, the resident's agreement should be shared with a representative from the Trust. Copies of the signed agreement must be retained within the resident's files. Response by Registered Person(s)Detailing the Actions Taken: Resident refused to sign contract, recorded same. Has since moved to nursing care. Complies with Regulation 5. Actioned. Breakdown of payment by resident and Trust actioned. Failure to sign by resident or representative is recorded. Actioned. All agreements in residents files. Actioned. **Requirement 3** The registered person must ensure that receipts are obtained from the podiatrist. Ref: Regulation 19 (2) Where a receipt is not available, the record should be annotated to Stated: First time reflect this. To be Completed by: Response by Registered Person(s)Detailing the Actions Taken: From the date of Podiatrist signs each transaction in record of residents small monies. inspection Actioned. Requirement 4 The registered person must ensure that the inventory book is reconciled at least quarterly. Two signatures must be recorded against **Ref:** Regulation 19(2) the reconciliation to confirm the items belong to residents. Schedule 4 (10) When items are removed from the home, two signatures must be Stated: First time recorded to confirm that the items of property were received by the resident's relative or their representative. To be Completed by: From the date of Response by Registered Person(s)Detailing the Actions Taken: inspection New inventory system implemented with two signatures including one from next of kin on admission and reconciled quarterly thereafter.

Requirement 5	The registered person must ensure that all residents or their representative (if resident lacks capacity to understand the transport
Ref: Regulation 5 (1) (a) (b)	policy) have signed the transport agreement.
	Response by Registered Person(s)Detailing the Actions Taken:
Stated: First time	This has been actioned.
To be Completed by:	
14 August 2015	
Recommendations	
Recommendation 1 Ref: Standard 4.2	It is recommended that the consent forms currently in place are revised to include a list of the items members of staff are authorised to purchase on behalf of residents. The forms should be signed by the resident or
	their representative (if resident lacks capacity to make decisions in
Stated: First time	relation to the management of their finances).
To be Completed by: 14 August 2015	The consent forms should include a provision for further authorisation to be obtained from residents or their representatives if items to be purchased are not included in the list.
	Response by Registered Person(s)Detailing the Actions Taken:
	Consent forms revised. Actioned.
	Provision included. Actioned.

Registered Manager Completing QIP	Norma Picking	Date Completed	08/10/15
Registered Person Approving QIP	Linda Wray	Date Approved	08/10/15
RQIA Inspector Assessing Response	Joe McRandle	Date Approved	09/10/15

^{*}Please ensure the QIP is completed in full and returned to finance.team@rqia.org.uk from the authorised email address*

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.