

Unannounced Finance Inspection Report 16 June 2017



Ballyowen House

Type of Service: Residential Care Home
Address: 179 Andersonstown Road, Belfast, BT11 9EA
Tel No: 028 90 633103
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 31 beds that provides care for residents living with dementia.

3.0 Service details

Organisation/Registered Provider: Belfast HSC Trust Responsible Individual(s): Martin Joseph Dillon	Registered Manager: Fionnuala Breslin
Person in charge at the time of inspection: Fionnuala Breslin	Date manager registered: 20 February 2013
Categories of care: Residential Care (RCH) DE – Dementia	Number of registered places: 31

4.0 Inspection summary

An unannounced inspection took place on 16 June 2017 from 09.15 to 14.50.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Home 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 for example: a safe place in the home was available and staff members were familiar with controls in place to safeguard residents' money and valuables; controls to ensure residents' money and valuables were safeguarded were in place; the home had a range of methods in place to encourage feedback from residents or their representatives and evidence of governance arrangements were identified.

Areas requiring improvement were identified in relation to: the records of residents' furniture and personal possessions brought into each resident's room; written individual agreements between the home and each resident and written personal monies authorisations between the home and each resident detailing the scope of authority to make purchases from residents' monies on their behalf.

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	2	1

Details of the Quality Improvement Plan (QIP) were discussed with Fionnuala Breslin, 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 also reviewed and this did not identify any relevant issues; the care inspector was contacted prior to the inspection and they confirmed there were no matters to be followed up.

During the inspection the inspector met with two members of staff.

The following records were examined as part of the inspection:

- Four residents' files
- A sample of income, expenditure, and reconciliation/audit records
- The safe record "safe contents handover sheets"
- A sample of treatment records for services facilitated within the home
- Financial policy – "Management of Residents' Finances and Private Property, Older Peoples Residential Homes" dated February 2017
- The "Ballyowen House Resident's Guide" (Updated February 2016)
- Records of residents' personal property recorded for three residents

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 14 February 2017

The most recent inspection of the home was an unannounced care inspection; no areas for improvement were identified as a result of this 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 and clients from the care, treatment and support that is intended to help them.

On the day, the inspector met initially with a senior carer in the home and subsequently with the registered manager. Both staff members were able to clearly describe the home's controls in place to safeguard residents' money and valuables. The senior carer confirmed that adult safeguarding training was mandatory for all staff and that this training was up to date for each staff member.

Discussions with the registered manager confirmed 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 and the persons with access. On the day of inspection, cash belonging to residents was deposited for safekeeping; valuables were also deposited, the registered manager confirmed these belonged to former residents.

A safe record, in the form of "safe contents handover sheets" was being maintained. A check of the safe place and a count of cash held was carried out, recorded and signed by two people at each staff handover ie: twice daily.

Areas of good practice

The home had a safe place available for the deposit of money or valuables; access was limited to authorised persons. Staff members spoken to were familiar with controls in place to safeguard residents' money and valuables.

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.

Discussions with the registered manager and senior carer identified that no representative of the home was acting as nominated appointee for any resident. Discussion established that the home was in direct receipt of the personal monies from the HSC trust in respect of a number of residents. In these circumstances, the home requested the personal monies from the Belfast HSC trust finance department which was safeguarding the personal monies for those residents. A sample of records was reviewed and evidence was held regarding the amount and timing of these receipts.

For other residents, family representatives deposited money directly with the home in order to pay for goods or services for which there was an additional charge such as, toiletries, podiatry or other sundries. Receipts were available which were routinely signed by the person depositing the money and the person receiving the money.

The registered manager confirmed that the home did not operate a bank account for any individual resident or for residents jointly.

A sample of the records for income and expenditure incurred on behalf of residents was reviewed. It was noted that the home maintained "Resident Cash Record" documents detailing income and expenditure, together with other records to substantiate each transaction, such as a duplicate receipt for a lodgement or a purchase receipt. There was evidence that transactions recorded on behalf of residents were signed and dated by two people. As noted in section 6.4, records of cash held were reconciled to the records twice daily, as part of the staff handover process.

An additional audit mechanism was also evidenced; the home used "Ballyowen House Financial Records Weekly Audit Sheet" documents. A review of a sample of these documents reflected that one member of staff routinely selected two residents' income and expenditure records to review on a weekly basis and to indicate if the controls detailed on the form were being adhered to.

Hairdressing and podiatry treatment records were all made on a similar template which was designed to include detail as to the treatment provided and the charge; the signature of the person providing the treatment and the signature of a representative of the home who could verify that the treatments had been provided to those residents detailed.

The inspector discussed how residents' furniture and personal possessions which they have brought into their rooms was recorded and requested to see the completed property records for four residents. A review of the files indicated that none of the four residents had a personal property record on their file.

However, later in the inspection, the registered manager provided personal property records for three of the residents and highlighted that these had not been taken out of the "property book" and put into each residents' file. A review of the documents identified shortcomings in record keeping practices. The three residents had either a "Belfast Health and Social Care Trust" template or a "North and West Belfast Health and Social Care Trust" document. The dates of the documents ranged from December 2014 to July 2015.

The templates required the signature of two people; out of a total of five records reviewed, only one had been signed by two people. The fourth resident did not have a personal property record.

This was identified as an area for improvement.

The registered manager confirmed that the home did not operate a residents' comfort fund or provide transport to residents.

Areas of good practice

There were examples of good practice found in respect of the availability of mechanisms to record income and expenditure on behalf of residents and of the existence of audit mechanisms. Controls to ensure that residents' money and valuables were safeguarded were evidenced.

Areas for improvement

One area for improvement was identified during the inspection, this related to ensuring that each resident has a record of the furniture and personal possessions which they have brought into their rooms.

	Regulations	Standards
Total number of areas for improvement	1	0

6.6 Is care compassionate?

Residents and clients 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 day to day basis were discussed with the registered manager and the senior carer. The senior carer described how discussions regarding the arrangements to store money safely in the home or pay fees etc would be held with the resident or their representative around the time of admission to the home.

The home had a number of methods in place to encourage feedback from families or their representatives in respect of any issue; this included monthly resident meetings, the most recent of which had been held on 22 May 2017.

Arrangements for residents to access money outside of normal office hours were discussed with the registered manager. She noted that the senior carer on duty had access to the safe place, this responsibility was passed onto the next senior at each staff handover (as described in section 6.4). She noted therefore, that residents had access to their money at all times.

During the course of the inspection, numerous interactions between staff members and residents were observed. Staff members were noted to be attentive and caring in their approach to meeting the residents' needs during these interactions.

Areas of good practice

There were examples of good practice identified in relation to listening to and taking account of the views of residents and in the manner in which residents were seen to be cared for and supported on the day.

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.

Written policies and procedures were available to staff via the trust’s intranet facility. Following the inspection, the registered manager provided the inspector with a copy of the “Management of Residents’ Finances and Private Property, Older Peoples Residential Homes” policy dated February 2017.

A copy of “The “Ballyowen House Resident’s Guide” (updated February 2016) was also shared with RQIA. This included information in respect of general financial information for prospective residents and those services facilitated within the home for which there is an additional charge, i.e.: hairdressing.

Discussion with the senior carer also established that he was clear on 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 a sample of four resident files were selected for review. None of the four residents had an individual written agreement on their file. The registered manager advised that the agreements may have been archived. Following the inspection, the registered manager shared a copy of the “Agreement between Residential Provider and Resident” which she noted was updated in April 2016.

This was identified as an area for improvement.

The four resident files were reviewed to identify whether they contained an individual personal monies authorisation which should be in place to provide the home with the authority to spend each resident’s money on identified goods and services. Earlier discussions had established that the home was making purchases from residents’ monies on their behalf, including on toiletries and clothing; none of the four residents had a personal monies authorisation on their file providing the home with the authority detailed above.

This was identified as an area for improvement.

Areas of good practice

There were examples of good practice found in respect of governance arrangements regarding how resident' monies were safeguarded in the home; and the existence of policies and procedures to guide financial practice in the home.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to ensuring that each resident or their representative is provided with a written individual agreement; and ensuring that written personal monies authorisations detailing the arrangements for handling the personal monies of each resident and making purchases on their behalf, are in place.

	Regulations	Standards
Total number of areas for improvement	1	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 Fionnuala Breslin, 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 nursing 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 Residential Care Home 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 visit www.rqia.org.uk/webportal or 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)

<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: 30 July 2017</p>	<p>The registered person shall ensure that a record is maintained of the furniture and personal possessions which each resident has brought with them to the home; (a record should be made for each of the current residents in the home; the records should be updated to record items acquired or disposed of after admission).</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken: All residents now have a record of furniture and personal possessions which is updated when new items are brought in. Records are kept in the residents file for inspection. Records include any items disposed of since admission. As advised by inspector this will be carried out at least every three months or more often if necessary.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 5 (1) & 5 (3)</p> <p>Stated: First time</p> <p>To be completed by: 16 August 2017</p>	<p>The registered person shall ensure that each resident is provided with a written agreement which specifies the fees payable by or in respect of the resident for the provision of accommodation and personal care (and except where a single fee is payable for those services, the services to which each fee relates); the method of payment and the person by whom the fees are payable.</p> <p>Where a third party top up is payable, the resident's individual agreement must detail the reason for the additional charge, by whom it will be paid and must list the services if any provided for it. (The content of each resident's individual agreement should be consistent with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards).</p> <p>Ref: 6.7</p>
	<p>Response by registered person detailing the actions taken: The Trust does not charge a third party top up, the finance department provides each resident with a financial agreement, if applicable, which details the reason for the charge, the method of payment and the person by whom the fees are payable. This is generated by the finance department and sent directly to the service user's representative.</p> <p>The residential home provide an agreement detailing the services provided for by the Trust, and services which are not included, which will need to be paid by the service user/representative. E.g. hairdressing, podiatry.</p>

	All residents now have this agreement in place. Any changes in charge for care is updated in the service user guide and the financial department advises us and families of any change to the weekly charge.
Action required to ensure compliance with the Residential Care Home Minimum Standards (August 2011).	
Area for improvement 1 Ref: Standard 15.2 Stated: First time To be completed by: 30 July 2017	The registered person shall ensure that personal monies authorisations are in place for all residents for whom the home engages in purchases of goods or services on their behalf. Personal monies authorisations should provide detail on the scope of the authority provided to the home to make purchases of identified goods and services, where possible. Ref: 6.7 Response by registered person detailing the actions taken: Personal monies authorisations have been adapted in response to the RQIA inspectors advice and are included in residents file and are available for inspection.

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



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