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Inspector: Briege Ferris
Inspection ID: IN023278

# Unannounced Finance Inspection
# of
# Belmont

## 22 September 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

## 1. Summary of Inspection

An unannounced finance inspection took place on 22 September 2015 from 10:05 to 13:00. A poster detailing that the inspection was taking place that day was positioned at the entrance to the home.

Overall on the day of the inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care; however there are some areas identified for improvement which are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Nursing Homes Regulations (Northern Ireland) 2005.

On the day of inspection, we met with the registered manager and the administrator; no relatives or visitors chose to meet with us during the inspection. We would like to thank those who participated in the inspection for their co-operation.

### 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** | 1 | 1 |

The details of the QIP within this report were discussed with Mrs Victoria Lane, the registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

| | |
|---|---|
| **Registered Organisation/Registered Person:** Four Seasons Health Care/Maureen Claire Royston | **Registered Manager:** Mrs Victoria Lane |
| **Person in Charge of the Home at the Time of Inspection:** Mrs Victoria Lane | **Date Manager Registered:** 4 July 2012 |
| **Categories of Care:** NH-I, NH-PH, NH-PH(E), NH-TI | **Number of Registered Places:** 48 |
| **Number of Patients Accommodated on the Day of Inspection:** 42 | **Weekly Tariff at Time of Inspection:** £593.00 – 654.00 |

## 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 theme has been met:

**Inspection Theme: Patients' finances and property are appropriately managed and safeguarded**

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 patients' 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 patients are transparent and agreed in writing with the patient/their representative

## 4. Methods/Process

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

- Discussion with the registered manager and the home administrator
- Review of records
- 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 reviewed during the inspection:

- The patient guide
- Four patient files
- Four patient agreements
- Four patient personal monies authorisations
- Most recent HSC trust payment remittances
- Personal allowance Income/lodgements and expenditure records
- Comfort Fund/Resident Social Fund records
- Hairdressing and Podiatry treatment records
- The safe record
- Three patient's personal property records.

## 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection on 2 September 2015, the findings from which will be reported on separately.

### 5.2 Review of Requirements and Recommendations from the last Finance Inspection

There has been no previous finance inspection of Belmont.

### 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?**

The home has a Four Seasons' patient guide (for use throughout Northern Ireland) and also its own brochure and associated appendices. We noted that the guide contained information for patients on: fees (in general); charging for additional services, the management of patients' personal monies and insurance.

The home has a standard written agreement, an individual copy of which is provided to each admitted patient. We asked to see a sample of the agreements in place for four identified patients in the home and were provided with a file for each of the sampled patients. We noted that the files were extremely neat and organised. Each patient file contained a signed agreement which was signed by both parties and reflected the up to date fees and financial arrangements in place for the identified patients. Agreements from previous years detailing changes in the regional fee rates were also contained on each file.

We commended the staff in the home for the level of detail which was included in the agreements and how they had been annotated to include all of the important information in respect of the amount, method of payment of the fees and the payee details.

We highlighted that Standard 2.2 of the Care Standards for Nursing Homes (April 2015), detailed all of the components which should be included in each patient's individual agreement with the home. We noted that the home should compare the current standard agreement with Standard 2.2 of the Care Standards for Nursing Homes to ensure that all of the elements are included when providing up to date agreements to patients from the date of the next change.

We were advised by the registered manager that the organisation had already begun the process of reviewing the standard written agreement with patients to ensure that it fully reflects the content of the updated DHSSPS Minimum Standards.

A recommendation has been made in respect of this finding.

Discussion with the home's administrator established that they had received training in the Protection of Vulnerable Adults.

**Is Care Effective?**

We queried whether there was any involvement by the home in supporting individual patients with their money; discussions established that there is an agreed arrangement in respect of one identified patient. We noted that the home issue a written request to the commissioning trust to release funds held for safekeeping on behalf of the patient. The issued cheque is cashed by the home and in turn, provided to the patient at their request. We noted that these arrangements were clearly detailed within an appendix to the individual patient's written agreement, which was signed by a representative of the commissioning trust. Good practice was observed in respect to the way this arrangement had been detailed and agreed in writing.

We noted that the home has a number of policies and procedures in place addressing patients' money and the "Residents Social Fund"/comfort fund detailing the controls in place to safeguard money and valuables belonging to patients.

**Is Care Compassionate?**

A review of a sample of the records established that the home had previously notified patients/their representatives of any increase in the fee or variation in the method of payment or person(s) by whom the fees were payable.

**Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care; however there was one area identified for improvement; this related to reviewing the home's standard patient agreement to ensure that it fully reflects the requirements of Minimum Standard 2.2 of the Care Standards for Nursing Homes (2015).

| | | | |
|---|---|---|---|
| **Number of Requirements** | **0** | **Number Recommendations**: | **1** |

**5.4 Statement 2 - Arrangements for receiving and spending patients' monies on their behalf are transparent, have been authorised and the appropriate records are maintained**

**Is Care Safe?**

A review of the records identified that copies of the HSC trusts' payment remittances are available confirming the weekly fee for each patient in the home. At the time of inspection, there were no patients or their representatives paying any fees directly to the home.

The home is not in direct receipt of any personal allowance monies for patients in the home either from the Social Security Agency or any Commissioning Trust (with the exception of one identified patient detailed earlier in this report).

The only other money received by the home is that which patients' representatives deposit in order to pay for additional goods and services not covered by the weekly fee (such as for hairdressing, toiletries or other sundries).

A review of the records identified that the home provides a receipt to anyone depositing money; receipts are routinely signed and dated by two people. We also commended the home's administrator on the level of detail provided on each receipt, good practice was observed.
We reviewed a sample of the income and expenditure records for four patients. We noted that the home maintain "personal allowance account statements" detailing income and expenditure items. We sampled a number of transactions from the records and traced these entries to the corresponding records to substantiate each transaction, such as a copy of the receipt for a cash lodgement or the hairdresser's treatment record for an entry recorded on the patient's statements.

We noted that a template was in place to record treatments by the hairdresser and podiatrist who visit the home. The template recorded all of the required information including the treatment provided to each patient and the associated cost; records were routinely signed by the hairdresser/podiatrist and a member of staff to verify that the patients had received the treatments recorded, good practice was observed.

The home also operates a patients' bank account used to safeguard funds on behalf of patients. The bank statements and the records of income and expenditure recorded on behalf of patients are reconciled on a monthly basis and signed and dated by two people.

The home operates a fund for the benefit of the patients in the home; this is referred to in the home as the "residents' social fund". We noted that a bank account was in place for the administration of the fund and that the account was named appropriately. A review of the records identified that monies were being spent in a way which enhanced the experience of those living in the home. Again, the bank statements and the residents' social fund records are reconciled on a monthly basis and are signed and dated by two people.

**Is Care Effective?**

Discussions established that no representative of the home was acting as nominated Appointee for any patient in the home (managing the patient's social security benefits).

As noted above, discussions established that the home receives money from family representatives or the commissioning trust (in one case). A review of a sample of four patients' records established that personal allowance authorisations to provide the home with the necessary written authorisation to purchase goods and services on behalf of each patient were in place on all four files.

**Is Care Compassionate?**

We queried whether any patient had a specific assessed need in respect of their money or any agreed restrictions; the registered manager confirmed that none of the patients had any known assessed needs or restrictions.

**Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care; there were no areas for improvement identified in respect of Statement 2.

| Number of Requirements | 0 | Number Recommendations: | 0 |
|---|---|---|---|

**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 exists within the home to enable patients to deposit cash or valuables; we were satisfied with the controls around the physical location of the safe place and the persons with access.

We viewed the contents of the safe place and established that on the day of inspection, the safe place contained patients' cash and valuables.

We noted that the home have a written safe record clearly detailing all of the items in the safe place in the home. A review of the records identified that the safe record if reconciled and signed and dated by two people every month, good practice was observed.

**Is Care Effective?**

We enquired how patients' furniture and personal possessions in their rooms was recorded. Discussion with the registered manager established that the home create a record of items which patients bring with them to the home. We requested to see a sample of four patients' records. We were provided with records for only three of the four patients sampled. The registered manager advised that the remaining patient's record had been archived and was not re-written when the home implemented new documentation to capture these details for more recently admitted patients. We did not request that the registered manager search the home's archives for the record.

On reviewing the three available patient records we noted that all three records had been made using a template which formed part of the patient's admission process to the home. We noted that there was significant inconsistency between the records in the level of detail recorded; one patient had 1 ½ pages of items recorded while another patient's records reflected that they had eight items in their room, including clothing. One of the three records had been signed by one person but not dated; the remaining two records had neither been signed nor dated.

We discussed these findings with the registered manager and noted that an improvement was required in recording items of value which belonged to patients so as to appropriately safeguard them. The quality of the records reviewed indicated that they could not be relied upon to accurately reflect what furniture and personal possessions the patient had in their room at the current time.

The registered manager advised us that she was aware that the organisation was reviewing its current documentation and was developing a new template for the home to capture this information. As the timescales for the implementation of the updated template from the organisation was unclear, we required that the home begin to record the relevant items in each patient's room at the current time and to implement the new template for each patient in the home in due course.

A requirement has been made in respect of this finding.

**Is Care Compassionate?**

As noted above, there are safe storage arrangements within the home to enable patients to deposit cash or valuables, should they wish to. We enquired as to how patients would know about the safe storage arrangements; discussions established that the home has a good relationship with families and arrangements for the home to store any money or valuables safely is discussed on admission of each patient to the home.

We asked about arrangements for patients to access their money from the safe place in the home outside of office hours. The registered manager explained that at the present time, the needs of service users were such that access to their money during office hours was currently sufficient to meet their needs.

**Areas for Improvement**

Overall, the financial arrangements were found to be delivering safe, effective and compassionate care; however one area was identified for improvement in relation to records of patients' furniture and personal possessions in their rooms.

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|---|---|---|---|
| **Number of Requirements** | **1** | **Number Recommendations**: | **0** |

## 5.6 Statement 4 - Arrangements for providing transport to patients are transparent and agreed in writing with the patient/their representative

**Is Care Safe?**

On the day of inspection, the home did not operate a transport scheme for patients.

**Is Care Effective?**

As noted above, on the day of inspection, the home did not operate a transport scheme for patients.

**Is Care Compassionate?**

The home has arrangements to support patients to access other means of transport.

**Areas for Improvement**

Overall on the day of inspection, the financial arrangements in place were found to be contributing to safe, effective and compassionate care. No areas for improvement were identified in respect of Statement 4.

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|---|---|---|---|
| **Number of Requirements** | **0** | **Number Recommendations**: | **0** |

## 5.7 Additional Areas Examined

There were no additional areas examined as part of the inspection.

## 6 Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Victoria Lane, the registered manager, 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 Nursing Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes (April 2015) etc. 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@rqia.org.uk and assessed by us.

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**<br><br>**Ref**: Regulation 19 (2) Schedule 4 (10)<br><br>**Stated:** First time<br><br>**To be Completed by:**<br>17 November 2015 | The registered person must ensure that an up to date inventory is maintained of furniture and personal possessions brought into the home by all newly admitted patients. The registered person must also ensure that a retrospective record is made of the furniture and personal possessions owned by existing patients accommodated in the home.<br><br>All inventory records should be updated on a regular basis. (Care Standards for Nursing Homes, April 2015 require that a reconciliation of these records is recorded at least quarterly).<br><br>Any entry, whether an addition or disposal, must be dated and signed by two members of staff at the time of recording.<br><br>The registered person should advise staff of the importance of recording inventory details consistently. Items of significant value or those requiring electrical safety testing should be distinctly highlighted on the record for ease of identification. |
| | **Response by Registered Person(s)Detailing the Actions Taken:**<br>All Resident property lists in the home are under review for accuracy, to include items of value and electrical items along with Serial Numbers where applicable. Two staff members will date and sign this document. Any new residents have an inventory completed as part of the admission procedure. |
| **Recommendations** | |
| **Recommendation 1**<br><br>**Ref**: Standard 2.2<br><br>**Stated:** First time<br><br>**To be Completed by:**<br>31 March 2016 | The registered person should arrange to compare the current standard agreement with Standard 2.2 of the Care Standards for Nursing Homes to ensure that all of the elements are included. |
| | **Response by Registered Person(s)Detailing the Actions Taken:**<br>FSHC standard agreements are currently under review and will be updated to meet/comply with DHSSPS Minimum Standards. The agreements will be in place for issue with the new April 2016 Uplifted Rates. |

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|---|---|---|---|
| **Registered Manager Completing QIP** | Tory Lane | **Date Completed** | 12/10/15 |
| **Registered Person Approving QIP** | Dr Claire Royston | **Date Approved** | 13.10.15 |
| **RQIA Inspector Assessing Response** |  | **Date Approved** | 16/10/2015 |

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