

Unannounced Finance Follow Up Inspection Report 11 November 2019



Cedarhurst Lodge

Type of Service: Nursing Home

Address: Cedarhurst Road, Belfast, BT8 4RH

Tel No: 028 9049 2722

Inspector: Briege Shannon

www.rqia.org.uk

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 provider 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 nursing home with 43 beds that provides care for patients with a dementia or those suffering from a mental impairment.

3.0 Service details

Organisation/Registered Provider: Four Seasons Healthcare Responsible Individual: Maureen Claire Royston	Registered Manager: Lavina Ann Harris
Person in charge at the time of inspection: Lavina Harris	Date manager registered: 14 June 2007
Categories of care: Nursing Home- NH DE- Dementia MP – Mental impairment MP (E) – Mental impairment over 65 years	Number of registered places: 43 A maximum of 20 patients in category NH-DE accommodated in the Beech Unit and maximum of 23 patients in category NH-MP/MP (E) accommodated in the Sycamore Unit.

4.0 Inspection summary

An unannounced inspection took place on 11 November 2017 from 11.30 to 14.00 hours.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes (April 2015).

The inspection sought to assess progress with issues raised during the unannounced finance inspection of the home carried out on 1 May 2018.

The following areas were examined during the inspection:

- Patient agreements and documentation detailing authorisation to hold and/or spend patients' monies.
- Patient property records.
- Records of treatments for which there is an additional charge, the availability of records for inspection and records of the reconciliation of patients' monies and valuables.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	2

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Lavina Harris, Registered Manager and the Regional Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent finance inspection dated 01 May 2018

Apart from those items detailed in the Quality Improvement Plan, no further actions were required to be taken following the most recent inspection 01 May 2018.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the record of notifiable incidents reported to RQIA in the last twelve months and the record of calls made to RQIA's duty system was also reviewed and this did not identify any relevant issues.

During the inspection, the inspector met with the registered manager, regional manager and members of administrative staff.

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 registered manager and regional manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 17 June 2019

Areas for improvement from the last care inspection		Validation of compliance
Action required to ensure compliance with the Nursing Homes Regulations (Northern Ireland) 2005		
<p>Area for improvement 1</p> <p>Ref: Regulation 15</p> <p>Stated: Third and final time</p>	<p>The registered person shall ensure care plans are reflective of patients' conditions and that new care plans were formulated to reflect the care required as the patients' condition changes.</p> <p>This is specifically in relation to modified food and fluids.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>Discussion with staff and a review of several care records identified that care plans were updated promptly to reflect new information about patients' changing conditions.</p>	
<p>Area for improvement 2</p> <p>Ref: Regulation 21 (1) (b); and Schedule 2 (2) and (3)</p> <p>Stated: First time</p>	<p>The registered person shall ensure that information pertaining to AccessNI checks and recruitment references are maintained in accordance with regulations and available for inspection.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>A sample of a records relating to newly recruited members of staff identified that the relevant checks were in place prior to the commencement of employment.</p>	

6.2 Review of areas for improvement from the last finance inspection dated 01 May 2018

Areas for improvement from the last finance inspection		
Action required to ensure compliance with the Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 19 (3) (b) Stated: First time To be completed by: 02 May 2018	The registered person shall ensure that the records referred to in paragraphs (1) and (2) (of the Nursing Homes Regulations (Northern Ireland) 2005) are at all times available for inspection in the home by any person authorised by the Regulation and Improvement Authority to enter and inspect the premises.	Met
	Action taken as confirmed during the inspection: All records requested from staff were available on the day of inspection.	
Area for improvement 2 Ref: Regulation 5 (1) (a) (b) Stated: First time	The registered person shall ensure that each patient or their representative is provided with an individual written agreement.	Met
	Action taken as confirmed during the inspection: The inspector reviewed a sample of three patients' files which evidenced that the required records were in place.	
Action required to ensure compliance with the DHSSPS Care Standards for Nursing Homes (April 2015)		Validation of compliance
Area for improvement 1 Ref: Standard 14.25 Stated: First time	The registered person shall ensure that a reconciliation of money and valuables held ad accounts managed is carried out at least quarterly. The reconciliation is recorded and signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.	Not met
	Action taken as confirmed during the inspection: Discussion with administrative staff and a review of the records confirmed that the records of reconciliations of patients' monies had fallen behind. A senior member of administrative staff confirmed that while she was working to bring these up to date on behalf of the home, the most up to date countersigned reconciliation available on the day of inspection, was dated April 2019.	

	<p>As this matter was identified as an area for improvement at the previous finance inspection in May 2018, it is listed in the quality improvement plan for the second time and requires the urgent attention of the registered manager.</p> <p>RQIA was advised by email on 18 November 2019 that the reconciliations had been brought up to date. This will be validated at a future inspection of the home.</p>	
<p>Area for improvement 2</p> <p>Ref: Standard 14.13</p> <p>Stated: First time</p>	<p>The registered person shall ensure that where any service is facilitated within the home (such as, but not limited to, hairdressing, chiropody or visiting retailers) the person providing the service and the patient or a member of staff of the home signs the treatment record or receipt to verify the treatment of goods provided and the associated cost to each patients.</p> <p>Action taken as confirmed during the inspection: A sample of treatment records were reviewed which identified that records were being maintained in line with the Care Standards for Nursing Homes 2015.</p>	Met
<p>Area for improvement 3</p> <p>Ref: Standard 14.26</p> <p>Stated: First time</p>	<p>The registered person shall ensure that an inventory of property belonging to each patient is maintained throughout their stay in the home. The inventory record is reconciled at least quarterly. The record is signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Action taken as confirmed during the inspection: The inspector reviewed a sample of patients' property records which identified that these records had been recently reconciled and were being maintained in line with the standards.</p>	Met
<p>Area for improvement 4</p> <p>Ref: Standard 14.6,14.7</p> <p>Stated: First time</p>	<p>The registered person shall ensure that where the home manage the personal money of any patient or make any purchases of goods or services on behalf of a patient, that there is written authority to do so.</p>	Met

	<p>Action taken as confirmed during the inspection: The inspector reviewed a sample of patients' finance files which identified that the relevant authority documentation was in place.</p>	
<p>Area for improvement 5 Ref: Standard 2.8 Stated: First time To be completed by: 05 June 2018</p>	<p>The registered person shall ensure that each patient is given written notice of all changes to the agreement and these are agreed in writing by the patient or their representative. Where the patient or their representative is unable to sign or chooses not to sign, this is recorded.</p> <p>Ref: 6.7</p>	Not met
	<p>Action taken as confirmed during the inspection: A review of a sample of patients' finance files identified that individual patient agreements were not up to date. As this matter was raised at the previous finance inspection, it is listed in the Quality improvement plan for the second time and requires the urgent attention of the registered manager.</p>	

6.3 Inspection findings

Patient agreements and documentation detailing authorisation to hold and/or spend patients' monies

On the day of inspection, three patients were chosen at random from a list of names and on review of these files it was noted that each patient had a signed written agreement in place with the home. All patients also had a signed personal monies contract authorising the home to spend any monies deposited with the home on certain goods and services.

However, it was noted that the agreements for each patient had not been updated in 2018 or 2019 to reflect the changes in the terms and conditions for each of those respective years. As this matter was identified as an area for improvement at the previous finance inspection, it is listed in the QIP for the second time and requires the urgent attention of the registered manager.

Areas of good practice

Patients had signed written agreements in place (albeit these were out of date) and personal monies authorisation documents were also in place.

Areas for improvement

One area for improvement was identified as part of the inspection in relation to ensuring the individual patient agreements are kept up to date.

	Regulations	Standards
Total number of areas for improvement	0	1

Patients' property records

The inspector requested a sample of three patients' property records to ascertain whether a quarterly check of their property was being maintained. The standard requires that these records are checked at least every quarter and are signed and dated by two members of staff.

A review of the records identified that each of the patients had a template in place to record a quarterly check of their property and each patient's record had been updated within a three month time period prior to the date of the inspection.

Areas of good practice

Each patient's record sampled reflected that a quarterly check of their property had taken place.

Areas for improvement

No areas for improvement were identified as part of the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Records of treatments for which there is an additional charge, the availability of records for inspection and records of the reconciliation of patients' monies and valuables

All records requested from staff were available on the day of inspection.

A sample of treatment records were reviewed which identified that records were being maintained in line with the Care Standards for Nursing Homes 2015.

Discussion with administrative staff and a review of the records confirmed that the records of reconciliations of patients' monies had fallen behind. A senior member of administrative staff confirmed that while she was working to bring these up to date on behalf of the home, the most up to date countersigned reconciliation available on the day of inspection was dated April 2019.

As this matter was identified as an area for improvement at the previous finance inspection in May 2018, it is listed in the quality improvement plan for the second time and requires the urgent attention of the registered manager.

Confirmation that the reconciliations had been brought to date was received by RQIA on 18 November 2019; this will be validated at a future inspection of the home.

Areas of good practice

Records were available for inspection and treatment records were being maintained in line with the standards.

Areas for improvement

One area for improvement was identified during the inspection, this related to ensuring that patients monies are reconciled and signed and dated by two people at least quarterly.

	Regulations	Standards
Total number of areas for improvement	0	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 Lavina Harris, Registered Manager and the Regional 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 Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes (April 2015).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with Care Standards for Nursing Homes (2015)

<p>Area for improvement 1</p> <p>Ref: Standard 14.25</p> <p>Stated: Second time</p> <p>To be completed by: 30 November 2019</p>	<p>The registered person shall ensure that a reconciliation of money and valuables held ad accounts managed is carried out at least quarterly. The reconciliation is recorded and signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Ref:6.3</p>
	<p>Response by registered person detailing the actions taken: This has been addressed.The reconciliation of money and valuables held and accounts managed is being carried out quarterly.The reconciliation is being recorded and signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.The Regioanl Manager is checking the reconciliation monthly for compliance.</p>
<p>Area for improvement 2</p> <p>Ref: Standard 2.8</p> <p>Stated: Second time</p> <p>To be completed by: 31 December 2019</p>	<p>The registered person shall ensure that each patient is given written notice of all changes to the agreement and these are agreed in writing by the patient or their representative. Where the patient or their representative is unable to sign or chooses not to sign, this is recorded.</p> <p>Ref: 6.3</p>
	<p>Response by registered person detailing the actions taken: This is currently being addressed by FSHC centrally.</p>

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



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