

Inspection Report

16 October 2023



Belmont Cottages

Type of Service: Residential Care Home (RCH)
Address: Racecourse Road, Londonderry, BT48 7RD
Tel No: 028 7137 2350

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider: Apex Housing Association Responsible Individual: Ms Sheena McCallion	Registered Manager: Mrs Hollie Young Date registered: Registration pending
Person in charge at the time of inspection: Mrs Hollie Young	Number of registered places: 16
Categories of care: Residential Care (RC) LD – Learning disability LD(E) - Learning disability– over 65 years.	Number of residents accommodated in the residential home on the day of this inspection: 15
Brief description of the accommodation/how the service operates: Belmont Cottages is a registered residential care home which provides health and social care for up to 16 residents. The home is divided into four self-contained units which are interlinked by a corridor. Each unit has accommodation for four residents in a bungalow type setting.	

2.0 Inspection summary

An announced inspection took place on 16 October 2023, from 11.15am to 3.45pm. This was completed by a finance inspector.

Short notice of the inspection was provided to the manager in order to ensure that arrangements could be made to safely facilitate the inspection in the home.

The inspection focused on the management of residents' finances within the home. The purpose of the inspection was to assess if the home was delivering safe, effective and compassionate care and if the home was well led with respect to the management of residents' finances and property.

Following discussion with the aligned care inspector, it was agreed that the areas for improvement identified at the last inspection will be followed up at the next care inspection.

Three areas for improvements were identified at the inspection in relation to: the current system of charging residents for transport, one resident's contribution towards their fee and updating the home's policies and procedures.

The outcome of the inspection raised concerns with regards to the current system for charging residents for the use of a vehicle, owned by Apex Housing Association. It was noted that when a number of residents had simultaneously undertaken the same journey, each resident was charged the full cost of the journey rather than the cost being shared equally among the residents who were travelling in the vehicle. This practice is not in line with RQIA's "Guidance On Transport Schemes for Nursing Home, Residential Care Home and Supported Living Domiciliary Care Service Providers".

Following the inspection, the findings were discussed with Mrs Amanda Jackson, Assistant Director, RQIA. As a consequence of the inspection findings, RQIA invited the responsible individual Ms Sheena McCallion, to attend a serious concerns meeting on 10 November 2023.

The meeting was attended virtually by Ms Sheena McCallion, Responsible Individual, Mrs Hollie Young, Manager, Ms Deirdre Walker, Director of Supported Living, and Mr Paul Moore, Financial Controller. At the meeting an action plan which detailed an account of the actions taken to date and planned to be undertaken was provided. The arrangements that had been made to ensure the improvements necessary to achieve full compliance with the relevant regulations were discussed. The responsible individual agreed that the completed action plan would be forwarded to RQIA on 8 December 2023. RQIA accepted the assurances provided by the management team.

RQIA will continue to monitor and review the quality of service provided in Belmont Cottages and will carry out a further inspection to assess compliance. Failure to implement and sustain the necessary improvements may lead to enforcement.

RQIA would like to thank the management and staff for their assistance during the inspection.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection, information held by RQIA about this home was reviewed. This included previous inspection findings, incidents and correspondence. The inspection was completed by examining a sample of residents' financial files including records of transactions, records of residents' financial arrangements, transport records and records of residents' personal property. The auditing systems used to ensure the safe management of residents' finances and property were also reviewed.

4.0 What people told us about the service

The inspector met with the manager. Staff were warm and friendly and it was evident from discussions that they knew the residents well.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last care inspection on 17 July 2023		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 27 (2) (l) Stated: First time	The registered person shall ensure that resident equipment and other items identified are appropriately stored.	Carried forward to the next inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)		Validation of compliance
Area for improvement 1 Ref: Standard 6.6 Stated: First time	The registered person shall ensure that care plans: <ul style="list-style-type: none"> • are signed and dated in full • reflect individual assessed need • evidence resident/representative's involvement 	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 2 Ref: Standard 27 Stated: First time	The registered person shall submit a time bound action plan to address the deficits noted in the identified bathrooms and kitchenettes to promote a safe, healthy and hygienic environment.	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

<p>Area for improvement 3</p> <p>Ref: Standard 29.6</p> <p>Stated: First time</p>	<p>The registered person shall ensure a record is maintained to evidence staff have attended a fire drill at least once a year and that this record is available for inspection.</p>	<p>Carried forward to the next inspection</p>
<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>	<p>Carried forward to the next inspection</p>	
<p>Area for improvement 4</p> <p>Ref: Standard 35</p> <p>Stated: First time</p>		<p>The registered person shall ensure that there are adequate hand washing facilities across the home to promote hand hygiene for staff, residents and visitors.</p>
<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>		

5.2 Inspection findings

5.2.1 What arrangements are in place to ensure that residents' monies and valuables are appropriately stored, recorded and monitored?

A safe place must be available for residents to deposit and withdraw their money and valuables when required. Up to date records of the monies and valuables held should be in place (including monies held in bank accounts). Checks on monies and valuables held should be undertaken at least quarterly and recorded.

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 members of staff with access to it. A review of a sample of records of residents' monies held at the home showed that the records were up to date. No valuables were held on behalf of residents at the time of the inspection.

Comfort fund monies were held on behalf of residents. These are monies donated to the home for the benefit of all residents. A review of a sample of transactions from the comfort fund confirmed that purchases from the fund were for the benefit of all residents. Receipts from the purchases were available for inspection.

Discussion with the manager confirmed that no bank accounts were used to retain residents' monies. A bank account was in place to retain monies which were raised through sponsored events for the purchase and use of a vehicle to transport residents on journeys. This vehicle was temporarily out of use at the time of the inspection. An additional vehicle owned by Apex

Housing Association was used for providing transport for residents. The charging for the use of this vehicle is discussed further under section 5.2.2 of this report.

A sample of records evidenced that reconciliations (checks) of monies held on behalf of residents were undertaken on a weekly basis. Reconciliations of the transport bank account were undertaken on a monthly basis. The records of the reconciliations were signed by the member of staff undertaking the reconciliations and countersigned by a senior member of staff.

A review of records showed that comfort fund monies held at the home were reconciled on a weekly basis however, the last recorded check undertaken of the comfort fund bank account was in May 2023. The manager provided assurances that signed records of the reconciliations of the comfort fund bank account will be retained from the date of the inspection onwards.

5.2.2 What arrangements are in place to ensure that residents' monies, valuables and personal property are appropriately managed and safeguarded?

Each resident must be provided with an individual written agreement that sets out the terms of their residency, the amount of the weekly fee (including any third party top-up charge) and an accurate itemised list of all agreed services and facilities over and above the general services and facilities provided.

Two residents' finance files were reviewed. Written agreements were retained within both files. A list of services provided to residents as part of their weekly fee was included in the agreements. Both agreements were signed by the resident, or their representative, and a representative from the home.

It was noticed that the agreements did not include the details of the current weekly fee paid by, or on behalf of, the residents. The manager provided assurances that all residents' agreements would be updated to reflect the current weekly fees, including showing the contribution paid by residents towards their fee. The agreements will be updated when the next increase in fees is implemented.

A review of a sample of records of fees received from two residents evidenced that the records were up to date at the time of the inspection. It was noticed that one of the residents was paying an amount over and above the amount agreed with the Health and Social Care Trust. At the time of issuing this report no clarification was received from Apex Housing Association regarding the resident's fee. An area for improvement was identified.

The written agreements should include details of any financial arrangements in place for residents such as, details of any appointee for social security benefits or controller of a resident's bank account. Written authorisation from relevant agencies to act as an appointee or controller should be retained at the care home.

Discussion with the manager confirmed that no member of staff was an appointee for any resident, namely a person authorised by the Department for Communities to receive and manage the social security benefits on behalf of an individual.

Discussion with staff confirmed that apart from the vehicle which is temporarily out of use, a second vehicle, owned by Apex Housing Association, was available for residents to undertake journeys. The miles undertaken for the journeys were recorded and subsequently invoiced to

the residents at an agreed rate per mile. The driver had signed the records to confirm the journeys. A sample of transport invoices raised for two residents was reviewed; the miles invoiced to the residents reflected the information recorded within the home's transport records.

It was noted that when a number of residents had simultaneously undertaken the same journey each resident was charged the full cost of the journey rather than the cost being shared equally among the residents who were travelling in the vehicle. RQIA raised concerns during the inspection with regard to the current system of charging residents for transport.

The home's transport scheme was discussed during the serious concerns meeting on 10 November 2023. RQIA is not of the view that these charging arrangements are in keeping with RQIA's "Guidance On Transport Schemes for Nursing Home, Residential Care Home and Supported Living Domiciliary Care Service Providers". RQIA advised the responsible individual that a more equitable transport system should be implemented at the home. The cost of the journey should be shared equally among the residents undertaking the same journey. An area for improvement was identified.

A review of a sample of purchases undertaken on behalf of residents showed that the records were up to date. Two signatures were recorded against each entry in the residents' records and receipts from the purchases were retained for inspection.

A sample of records of monies deposited at the home on behalf of two residents evidenced that the records were up to date at the time of the inspection. Receipts were provided to the person depositing the monies who had signed the records along with a member of staff.

An inventory of personal property brought into residents' rooms should be maintained at the care home. The inventory records should be updated when additional items are brought into the rooms or when items are disposed of. The records of personal property should be checked at least quarterly and signed by two members of staff.

A sample of two residents' files evidenced that property records were in place for both residents. The records were updated with additional items brought into the residents' rooms following admission. There was no recorded evidence to show that the personal possessions were checked at least quarterly.

The manager provided assurances that a system for recording the reconciliation of residents' personal possessions would be implemented following the inspection. The manager was advised to ensure that the full details of the items were recorded, for example, make and model of television owned by the resident.

5.2.3 What measures are in place to ensure that staff in the agency are trained and supported to manage residents' finances?

Policies and procedures for the management and control of residents' finances and property were available for inspection. The policies were readily available for staff use. The policies were reviewed at least every three years.

The inspector identified two anomalies in the policies which were brought to the attention of the management team during the serious concerns meeting. The home's policies should be updated to reflect the current practices operated at the home. The transport policy should also

be updated to reflect any change in the procedures as a result of implementing a new transport scheme. The policies should reflect the procedure for sharing the cost of a journey, if a number of residents are availing of the vehicle at the same time. Staff should sign to indicate that they have read and understood the revised policy and procedures. An area for improvement was identified.

6.0 Quality Improvement Plan/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 Homes Minimum Standards (December 2022).

	Regulations	Standards
Total number of Areas for Improvement	2*	6*

* The total number of areas for improvement includes five which are carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Hollie Young, Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 27 (2) (l) Stated: First time To be completed by: Immediately from the date of inspection (17 July 2023)	<p>The registered person shall ensure that resident equipment and other items identified are appropriately stored.</p>
	<p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref:5.1</p>
Area for improvement 2 Ref: Regulation 14 (4) Stated: First time To be completed by: 8 December 2023	<p>The registered person shall ensure that an equitable system for charging residents for the use of the vehicle, owned by Apex Housing Association, is implemented.</p> <p>The new system should allow for the cost of the journey to be shared between the residents using the vehicle at the same time.</p> <p>RQIA should be informed of the arrangements for appropriate reimbursement to residents prior to the implementation of the equitable scheme.</p> <p>Ref: 5.2.2</p>
	<p>Response by registered person detailing the actions taken:</p>
Action required to ensure compliance with the Residential Care Homes Minimum Standards (December 2022)	
Area for improvement 1 Ref: Standard 6.6 Stated: First time To be completed by: Immediately from the date of inspection (17 July 2023)	<p>The registered person shall ensure that care plans:</p> <ul style="list-style-type: none"> • are signed and dated in full • reflect individual assessed need • evidence resident/representative's involvement
	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>

<p>Area for improvement 2</p> <p>Ref: Standard 27</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection (17 July 2023)</p>	<p>The registered person shall submit a time bound action plan to address the deficits noted in the identified bathrooms and kitchenettes to promote a safe, healthy and hygienic environment.</p>
<p>Area for improvement 3</p> <p>Ref: Standard 29.6</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection (17 July 2023)</p>	<p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>

<p>Area for improvement 4</p> <p>Ref: Standard 35</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection (17 July 2023)</p>	<p>The registered person shall ensure that there are adequate hand washing facilities across the home to promote hand hygiene for staff, residents and visitors.</p> <hr/> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</p> <p>Ref: 5.1</p>
<p>Area for improvement 5</p> <p>Ref: Standard 4.7</p> <p>Stated: First time</p> <p>To be completed by: 20 November 2023</p>	<p>The registered person shall ensure that an investigation is undertaken to clarify the rationale for the resident, identified during the inspection, paying an additional contribution towards their fee over and above the amount identified in Trust records.</p> <p>If, as a result of the investigation the resident had been charged inappropriately, then the resident should be reimbursed for the period they were paying the additional amount.</p> <p>RQIA should be informed of the outcome of the investigation including any details of reimbursement to the resident (if relevant).</p> <p>Ref:5.2.2</p> <hr/> <p>Response by registered person detailing the actions taken:</p>
<p>Area for improvement 6</p> <p>Ref: Standard 21</p> <p>Stated: First time</p> <p>To be completed by: 8 December 2023</p>	<p>The registered person shall ensure that the home's financial policies and procedures are updated to reflect current practices operated at the home.</p> <p>The transport policy should reflect any change in the procedures as a result of implementing a new transport scheme, including the procedure for sharing the cost of a journey, if a number of residents are availing of the vehicle at the same time.</p> <p>Staff should sign to indicate that they have read and understood the revised policy and procedures.</p> <p>Ref:5.2.3</p> <hr/> <p>Response by registered person detailing the actions taken:</p>

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



The **Regulation** and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)