

Unannounced Finance Follow Up Inspection Report 27 February & 2 March 2020



Bohill Nursing Home

Type of Service: Nursing Home

Address: 69 Cloyfin Road, Coleraine, BT52 2NY

Tel No: 02870325180

Inspector: Joseph McRandle

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 registered nursing home which is registered to provide nursing care for up to 62 persons. The home is comprised of a ground floor where nursing care is provided to patients living with dementia; a first floor in which frail elderly nursing care is provided and a third floor which is used for storage and staff facilities. Bohill Residential Care Home is also located within the same building and is a separately registered service with RQIA. The manager has managerial responsibility for both the nursing and residential services.

3.0 Service details

Organisation/Registered Provider: Amore (Ben Madigan) Limited Responsible Individual(s): Nicola Cooper	Registered Manager: Tracey Henry
Person in charge at the time of inspection: Tracey Henry	Date manager registered: 15 August 2011
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. DE – Dementia. PH – Physical disability other than sensory impairment.	Number of registered places: 62 A maximum of 36 patients in category NH-DE (ground floor dementia unit) and a maximum of 26 patients in categories NH-I and NH-PH

4.0 Inspection summary

An unannounced inspection took place on 27 February 2020 from 11.15 to 11.45 hours and 02 March 2020 from 11.15 to 13.00 hours.

During the inspection on 27 February 2020 the registered manager and the home's administrator were not available and certain records relating to patients' finances could not be accessed. The inspection reconvened on 2 March 2020.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes (April 2015).

The inspection assessed progress with any areas for improvement identified since the last inspection and to determine if the service was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to: maintaining up to date records of reconciliations (checks) of patients' monies and valuables, maintaining up to date records of patients' personal property and maintaining up to date written agreements within patients' files.

No areas for improvement were identified during the inspection.

The inspector saw that members of staff were available in the lounges and in the dining areas during lunchtime to provide assistance as required. The home's environment was clean, tidy, and comfortably warm throughout.

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.

The following areas were examined during the inspection:

- Controls surrounding the management of patients' monies and valuables
- Environment

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Tracey Henry, registered manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent inspection dated 09 and 17 September 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 09 and 17 September 2019.

5.0 How we inspect

Prior to the inspection a range of information relevant to the home was reviewed. This included the previous care and finance inspection findings and any other written or verbal information received, for example, notifications.

During the inspection the inspector met with the registered manager and a number of staff.

The following records were examined during the inspection:

- two patients' finance files including copies of written agreements
- a sample of financial records including patients' personal allowance monies and valuables
- a sample of statements from the patients' bank account
- a sample of two patients' property records

Areas for improvement identified at the last inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

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 09 and 17 September 2019

Areas for improvement from the last inspection		Validation of compliance
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015		
Area for improvement 1 Ref: Standard 2.2 Stated: First time	<p>The registered person shall ensure that up to date copies of signed written agreements are retained within all patients' files. The agreements should show the current fee paid by, or on behalf of, patients. The agreements should also show the current amount of the third party contribution (where relevant).</p>	Met
	<p>Action taken as confirmed during the inspection: A review of two patients' files evidenced that up to date written agreements were retained within both files. The agreements reviewed also showed the current amount of the third party contributions paid on behalf of the patients.</p>	
Area for improvement 2 Ref: Standard 14.25 Stated: First time	<p>The registered person shall confirm that patients' monies held in the bank account are reconciled at least quarterly. The reconciliation should be recorded and signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p>	Met
	<p>Action taken as confirmed during the inspection: Discussion with staff and a review of records confirmed that reconciliations of the patients' bank account were undertaken at the home's head office at least quarterly.</p> <p>The records of the reconciliations were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff.</p>	

<p>Area for improvement 3</p> <p>Ref: Standard 14.31</p> <p>Stated: First time</p>	<p>The registered person shall ensure that patients' comfort fund monies are held in a separate bank account from patients' personal allowance monies.</p> <hr/> <p>Action taken as confirmed during the inspection: Following the last inspection in September 2019 RQIA has been in discussions with representatives from Priory Group in relation to the patients' bank account. During the most recent discussion on 24 February 2020, Priory Group confirmed that it was in the process of opening separate bank accounts for patients' comfort fund monies. These accounts should be operational by 31 March 2020.</p> <p>This area for improvement has been assessed as met on the proviso that the new bank accounts will be operational by 31 March 2020.</p>	<p>Met</p>
<p>Area for improvement 4</p> <p>Ref: Standard 35.21</p> <p>Stated: First time</p>	<p>The registered person shall implement a system to ensure that patients' personal allowance monies are not used to either purchase items or pay for additional services e.g. hairdressing, for those patients who have insufficient funds.</p> <hr/> <p>Action taken as confirmed during the inspection: A review of a sample of records showed that all patients had sufficient funds to purchase items or pay for additional services. Discussion with staff confirmed that since the last inspection in September 2019 no personal allowance monies were used to make transactions for patients' with insufficient funds.</p>	<p>Met</p>

Area for improvement 5 Ref: Standard 14.26 Stated: First time	The registered person shall ensure that the inventory of property belonging to each patient is reconciled at least quarterly. The record is signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.	Met
	Action taken as confirmed during the inspection: A review of two patients' property records evidenced that the records had been updated and reconciled in line with the Care Standards for Nursing Homes (2015) The records were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff.	

6.2 Inspection findings

Records of reconciliations of patients' monies and personal property

Discussion with the registered manager and the home's administrator confirmed that reconciliations (checks) of the patients' bank account were undertaken at the home's head office. The inspector discussed the reconciliations with a finance officer from head office by telephone. During the inspection evidence was forwarded to the home confirming that patients' monies held in the bank account were reconciled in line with the Care Standards for Nursing Homes (2015).

A review of two patients' personal property records evidenced that since the last finance inspection in September 2019; the records were updated and checked in line with the Care Standards for Nursing Homes (2015). The records reviewed were signed and dated by two members of staff.

The registered manager was advised during the inspection to record further details of patients' personal property e.g. the make and model of television within patients' rooms.

Areas of good practice

There were examples of good practice found in relation to maintaining up to date records of reconciliations (checks) of patients' monies and valuables and maintaining up to date records of patients' personal property.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Patients' written agreements

A review of two patients' files evidenced that copies of up to date written agreements between the home and the patients were retained within the files. The agreements reviewed also showed the current amount of the third party contributions paid on behalf of the patients.

It was noticed that one of the agreements was not signed by the patient's representative. Discussion with staff confirmed that the agreement was yet to be returned by the patient's representative and that correspondence reminding the representative to sign and return the document had been forwarded.

The inspector advised the registered manager to retain a record in patients' files to evidence that patients' representatives had been contacted to remind them to sign and return the documents.

Areas of good practice

There were examples of good practice found in relation to maintaining up to date written agreements in patients' files.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Patients' bank account

As stated under 6.1 of this report, RQIA has been in discussions with representatives from Priory Group in relation to the patients' bank account. Priory Group has provided assurance that separate bank accounts to retain patients' comfort fund monies will be operational by 31 March 2020. Assurance was also provided that patients' written agreements will be updated to include a provision authorising patients' personal monies to be retained within a designated bank account. These areas will be validated at future RQIA inspections.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9051 7500
Email info@rqia.org.uk
Web www.rqia.org.uk
🐦 @RQIANews