

Announced Finance Inspection Report 7 November 2017



Seeconnell Private Village

Type of Service: Residential

Address: 119 Clonvaraghan Road, Castlewellan, BT31 9LA

Tel No: 028 4377 1412

Inspector: Joseph McRandle

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 21 beds that provides care for residents living with a learning disability and or a mental disorder excluding learning disability or dementia.

3.0 Service details

Organisation/Registered Provider: Corriewood Private Clinic Limited Responsible Individual(s): Maria Therese McGrady	Registered Manager: Paula Murray- Acting
Person in charge at the time of inspection: Paula Murray	Date manager registered: Acting - No application required
Categories of care: Residential Care (RC) LD - Learning Disability MP- Mental disorder excluding learning disability or dementia	Number of registered places: 21

4.0 Inspection summary

An announced inspection took place on 07 November 2017 from 11:00 to 15:30 hours. Less than one hour's notice was given prior to the inspection.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes 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 in relation to: providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place, members of staff involved in managing residents' finances receiving adult safeguarding training, retaining the details of the person authorised to act as a resident's appointee, retaining records of the reconciliations of residents' monies, undertaking audits of the controls surrounding residents' finances, updating residents' inventory with personal items, two members of staff signing the transport records, a transport policy and procedure in place, the system for retaining the records of transport charges, signed transport agreements retained within residents' files and the financial policies and procedures operated at the home.

Additional evidence of good practice included: retaining copies of residents' financial arrangements within their files, offering support to residents for managing their finances, the residents' guide detailing the services included in the weekly fee, the system for recording purchases undertaken on behalf of residents, the retention of receipts from purchases and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

Areas requiring improvement were identified in relation to: updating one resident's file with the details of the item of equipment purchased from the resident's monies and retaining signed written agreements within all residents' files.

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	0	2

Details of the Quality Improvement Plan (QIP) were discussed with Paula Murray, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 31 October 2017

Other than those actions detailed in the QIP, no further actions were required to be taken following the most recent inspection on 31 October 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues, there were no financial issues identified. The inspector from the previous inspection was contacted who confirmed that there were no issues to follow up.

During the inspection the inspector met with the manager and registered person.

The following records were examined during the inspection:

- three residents' finance files
- two residents' written agreements
- a sample of cash held on behalf of three residents
- a sample of records of reconciliations between monies held on behalf of residents and records of monies held
- a sample of records from audits of financial controls
- a sample of records of monies forwarded by the health and social care trust
- the residents' guide
- a sample of records of safe contents
- a sample of records showing purchases undertaken on behalf of two residents
- a sample of records showing monies deposited at the home on behalf of two residents
- a sample of bank statements from residents' bank account

- a sample of invoices for transport charges
- financial policies and procedures
- signatory list of staff authorised to make purchases on behalf of residents
- two residents' records of personal property

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 31 October 2017

The most recent inspection of the home was an unannounced care inspection. The report from the care inspection was yet to be issued at the time of issuing this report. The returned QIP will be validated by the care inspector at the next care 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 patients and clients from the care, treatment and support that is intended to help them.

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. Monies held on behalf of three residents were counted, the amounts retained agreed to the balances recorded at the home.

No valuables were held on behalf of residents, a safe contents book was in place and up to date at the time of the inspection.

Discussion with the manager confirmed that members of staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults. The manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

Discussion with staff confirmed that there were no finance related restrictive practices in place.

Areas of good practice

There were examples of good practice found in relation to: providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place and members of staff involved in managing residents' finances receiving adult safeguarding training.

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.

Discussion with the manager and review of records confirmed that the registered person was the appointee for one resident i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual. A review of the resident's file showed that details of the person authorised to manage the benefits was retained within their file.

Discussion with the manager confirmed that no member of staff at the home acted as an agent for any resident, i.e. a person authorised by a resident or their representative to collect social security benefits on the resident's behalf.

The inspector commented on the strong controls in place surrounding residents' monies. Review of records showed that a reconciliation between the monies held on behalf of residents and the records of monies held was undertaken on a monthly basis. As in line with good practice the records were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff. Review of records also showed that internal audits were undertaken quarterly by the manager, the audit was undertaken to ensure that the control systems in place for managing residents' finances were adhered to. The records of the audits were signed by the manager and another senior member of staff.

Discussion with the manager confirmed that a bank account was managed on behalf of residents. Review of a sample of bank statements from the account confirmed that the name of the bank account referred to residents' monies and that the bank account was not used for the management of the home, as in line with regulation 22 (1) of The Residential Care Homes Regulations (NI) 2005.

A sample of withdrawals identified within the bank statements was reviewed. The amounts withdrawn corresponded to the amounts recorded as lodged at the home on behalf of the residents on the same date.

Good controls were observed in relation to the management of the bank account as the records of the withdrawals and deposits identified within the bank statements were checked and agreed by a senior member of staff at least quarterly.

Review of records and discussion with the manager confirmed that a comfort fund was operated on behalf of residents. No monies were held in the fund at the time of the inspection. The manager confirmed that purchases from the fund were for the benefit of all residents.

Discussion with the manager confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Review of records for two residents showed that the records were updated with items acquired and disposed of after admission for which staff had been made aware of. It was identified that an item of equipment purchased from one of the resident's monies was not included within their inventory records. This was identified as an area for improvement.

A review of the resident's file showed that documentary evidence was in place authorising members of staff at the home to purchase the item of equipment. The record was signed by the resident's relative and key worker from the health and social care trust.

Discussion with the manager confirmed that a transport scheme involving one minibus was operated at the home. A review of records confirmed that a book was used to record the residents' journeys undertaken in the bus. A sample of journeys recorded in the book was examined, the date of the journeys, the names of the residents undertaking the journeys and the destinations were recorded. The miles incurred for the journeys were also recorded. Good practice was observed as the records of the journeys were signed by two members of staff.

A policy and procedure for the transport scheme was in place at the time of the inspection. The policy detailed the rate per mile charged to residents for using the minibus. The amount charged to residents depended on the number of residents undertaking the journey. If more than one resident was undertaking the journey then the total cost of the journey was divided equally between the residents.

A review of a sample of records confirmed that the book containing the details of residents' journeys was subsequently used to raise invoices to residents for their journeys. A sample of invoices raised for one resident was reviewed. The miles incurred for the journeys were recorded along with the rate per mile. The miles charged to the resident agreed to the miles recorded within the transport book. It was noted that the amounts charged were reduced when the resident shared journeys with other residents.

Records also showed that the amounts owed by the residents for transport were withdrawn from the residents' bank account. A sample of two amounts withdrawn from the bank account in relation to the invoices for the above resident confirmed that the amounts withdrawn agreed to the amounts invoiced to the resident for their journeys. The inspector commented on the good system in place for retaining the records in relation to the transport charges.

As in line with good practice transport agreements were issued to residents or their representatives. A review of two residents' files showed that transport agreements detailing the terms and conditions of the transport scheme were retained within the residents' files. The agreements were signed by the residents' representatives and a representative from the home.

Comprehensive policies and procedures for the management and control of residents' finances were in place at the time of the inspection. A review of the policies confirmed that the procedures undertaken by staff on behalf of residents were reflected within the policies.

Areas of good practice

There were examples of good practice found in relation to: retaining a record within one resident's file of the details of the person authorised to act as their appointee, retaining records of the reconciliations of residents' monies, internal audits of the controls surrounding residents' finances, updating residents' inventory with personal items following admission, two members of staff signing the transport records, a transport policy and procedure in place, system in place for retaining the records in relation to the transport charges, signed transport agreements retained within residents' files and the financial policies and procedures operated at the home.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating one resident's file with the details of the item of equipment purchased from the resident's monies.

	Regulations	Standards
Total number of areas for improvement	0	1

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Good practice was observed as a review of two residents' files showed that copies of the residents' recorded financial arrangements were retained within their files. The details recorded included the arrangements for staff at the home to act as the appointee for one resident and the arrangements for managing residents' finances.

Discussion with staff and review of records confirmed that the South Eastern Health and Social Care Trust forwarded personal allowance monies to the home on behalf of a number of residents. A sample of records of monies forwarded from the Trust were examined, the records showed that monies received by the home were credited to the residents' bank account. The amounts credited to the bank account agreed to the amounts forwarded by the health and social care trust.

Discussion with the manager confirmed that arrangements were in place to offer support for residents managing their finances.

Areas of good practice

There were examples of good practice found in relation to: retaining copies of residents' financial arrangements within their files and offering support to residents for managing their finances.

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 service users in order to deliver safe, effective and compassionate care.

Discussion with the manager and registered person confirmed that the health and social care trust paid the full fee on behalf of all residents. Copies of payment remittances from the health and social care trust were retained at the home which confirmed that no resident was paying a contribution towards their fee. Discussion with staff also confirmed that residents were not paying an additional amount towards their fee over and above the amount agreed with the health and social care trust.

A residents' guide was in place at the time of the inspection. The guide included the details of the services provided to residents as part of their weekly fee. The residents' guide also included a written agreement which was issued to residents on admission to the home. A review of three residents' files evidenced that copies of signed written agreements were retained within two of the files. Discussion with staff and review of records confirmed that the outstanding agreement had been forwarded to the resident's representative and had yet to be signed and returned. This was identified as an area for improvement.

It was noticed that the written agreements included a provision for residents or their representatives to agree for members of staff at the home to make purchases on behalf of residents prior to signing the agreement.

Review of records and discussion with staff confirmed that transaction sheets were maintained for each resident. The sheets were used to record the details of transactions undertaken on behalf of residents including items purchased by members of staff. The sheets were also used to record monies deposited at the home on behalf of residents.

A review of records of four purchases undertaken by staff, on behalf of two residents, showed that as in line with good practice the details of the purchases, the date and the amount of the purchases were recorded within the transaction sheets. Two signatures were recorded against each entry in the transaction sheets. Good practice was observed as the remaining amounts of monies from the purchases returned by the member of staff after making the purchases were recorded. Receipts from the purchases were available at the time of the inspection.

Good practice was also observed in relation to the audit process as a number was recorded on the receipts and the corresponding number was recorded against the purchases recorded in the residents' transaction sheets.

Review of records showed that as in line with good practice a list of signatures of staff authorised to make purchases on behalf of residents was maintained at the home.

Areas of good practice

There were examples of good practice in relation to: the residents' guide detailing the services included in the weekly fee, recording of purchases undertaken on behalf of residents, the retention of receipts from purchases and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

Areas for improvement

One area for improvement was identified during the inspection. This related to retaining signed written agreements within all residents' files.

	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 Paula Murray, 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 residential care 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 DHSSPS Residential Care Homes 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.

Quality Improvement Plan	
Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011.	
Area for improvement 1 Ref: Standard 8.7 Stated: First time To be completed by: 08 November 2017	The registered person shall ensure that the inventory records for the resident identified during the inspection are updated to include the item of equipment purchased from the resident's monies. Ref: 6.5
	Response by registered person detailing the actions taken: Outdoor item has been added onto the individuals personal inventory held within their file.
Area for improvement 2 Ref: Standard 4.4 Stated: First time To be completed by: 15 December 2017	The registered person shall ensure that copies of signed written agreements are retained within all residents' files. Where a resident or their representative is unable to sign or chooses not to sign, this is recorded. Ref: 6.7
	Response by registered person detailing the actions taken: Residents individual agreement has been signed and is retained within the file.

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



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](https://twitter.com/RQIANews)