



The Regulation and  
Quality Improvement  
Authority

St James' Lodge Care Home  
RQIA ID: 11245  
15 - 17 Coleraine Road  
Ballymoney  
BT53 6BP

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**Unannounced Finance Inspection  
of  
St James' Lodge Care Home**

**1 September 2015**

The Regulation and Quality Improvement Authority  
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## Summary of Inspection

An announced finance inspection took place on 1 September 2015 from 10:00 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. Areas for improvement were identified and 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 responsible individual, 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
<b>Total number of requirements and recommendations made at this inspection</b>	2	3

The details of the QIP within this report were discussed with the Mr Frank McKenna, the responsible person and Ms Bronagh Barker, the registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> St James' Lodge Ltd/Francis Donal McKenna	<b>Registered Manager:</b> Ms Bronagh Barker
<b>Person in Charge of the Home at the Time of Inspection:</b> Ms Bronagh Barker	<b>Date Manager Registered:</b> 4 October 2013
<b>Categories of Care:</b> NH-I, NH-PH, NH-DE	<b>Number of Registered Places:</b> 44
<b>Number of Patients Accommodated on the Day of Inspection:</b> 44	<b>Weekly Tariff at Time of Inspection:</b> £593.00 – 667.00

### 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 responsible individual, the registered manager and 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 residents' guide
- The home's current residents agreement
- Five patient agreements
- Most recent Northern HSC trust payment remittance
- Five personal monies expenditure authorisations
- Hairdressing/Podiatry treatment records
- Computerised accounts records for four patients
- Five records of patients' personal property/inventory

## **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 25 August 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 RQIA finance inspection of the service.

### **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 "Residents' Guide", a copy of which was provided to us for review during the inspection. We noted that the guide included information for patients on the general terms and conditions of residency, how fees payable are arranged, the arrangements for the safe storage of any money deposited with the home (in exceptional circumstances) and that patients were encouraged to personalise their rooms should they wish.

We noted that the home has a standard written resident agreement, an individual copy of which is provided to each newly admitted patient. We asked to see both a copy of an up to date agreement and agreements which are already in place with a sample of patients in the home.

We reviewed a sample of four agreements in place with patients or their representatives and noted that all four were signed and reflected the current fee structure in place for the individual patients.

We noted that the details of the persons by whom the fees the payable were included but we highlighted that this information could be set out more clearly. We noted for instance that the total fee payable in a sample of the agreements was included under the amount payable by the patient as well as the amount payable by the HSC trust. We noted that to improve the agreement, it should also make clear how the home is actually getting paid and by what method.

We highlighted that the home should review how best to make this information more clear and also compare the content of the agreement to updated Care Standards for Nursing Homes (April 2015), in particular Standard 2 to ensure that any additional components were included in the homes standard agreement.

A recommendation has been made in respect of these findings.

#### **Is Care Effective?**

We queried whether there was any involvement by the home in supporting individual patients with their money; discussions established that there was no involvement by the home in this regard.

We noted that the home did not have a policy and procedure in place addressing patients' money and valuables.

A recommendation has been made in respect of this finding.

Discussions also revealed that the home's administrator had not received training in the protection of vulnerable adults.

A requirement has been made in respect of this finding.

### **Is Care Compassionate?**

We obtained confirmation that written notifications of increases in fees in response to changes in regional fee rates had provided to patients or their representatives.

Discussions with the registered manager established that on the day of inspection, the home was not supporting any individual patient to manage their money.

### **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 were three areas identified for improvement; these related to reviewing the content of the home's agreement in light of the Care Standards for Nursing Homes (2015), POVA training for the home's administrator and introducing a policy and procedure on residents' money and valuables.

<b>Number of Requirements</b>	<b>1</b>	<b>Number Recommendations:</b>	<b>2</b>
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## **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 trust payment remittances are available confirming the weekly fee for each patient in the home. There is an identified number of patients in the home who contribute their weekly care fees in full or part, directly to the home. For all other patients, the home is paid directly by the relevant HSC trust. A review of a sample of charges established that the correct amounts were being charged by the home.

The home is not directly in receipt of any personal allowance monies belonging to patients in the home. Discussions established that the cost of additional items or services required by patients is initially met by the home, and subsequently billed to the patients' representatives. Therefore no money is deposited with the home to pay for items or services, and therefore no money is held by the home (except for a very short time period, by exception).

We reviewed the records of items of expenditure incurred on behalf of patients such as on newspapers, hairdressing etc. The receipts for any items purchased on behalf of patients are retained by the home and recorded on the home's computerised accounts system. The cost of

items or services received by individual patients is recorded on their account and billed on a monthly basis to the patient's representatives.

We sampled a number of transactions from the records and were able to trace these entries to the corresponding records to substantiate each transaction, such as a receipt or the corresponding hairdressing treatment record.

We reviewed the hairdressing treatment records and noted that the record detailed the name of the patient, the date of the treatment, the treatment received and the cost. We noted that the treatment records were not signed by either the hairdresser or a representative of the home.

We noted that these receipts must also be signed by the person providing the treatment and by a representative of the home who can verify that the patient has received the service detailed and incurred the associated cost.

A requirement has been made in respect of this finding.

We also reviewed receipts provided by the private podiatrist who visits the home. We noted that recently the home's administrator had begun to counter sign these records, which we commended. However, we noted that the representative from the home signing treatment records must be able to verify that the patient has received the treatment and this may more appropriately be a member of care staff.

Discussions established that the home does not currently operate a comfort fund for patients in the home.

### **Is Care Effective?**

Discussions established that no representative of the home was acting as nominated appointee for any patient, nor does the home operate a bank account for the patients jointly or any individual patients.

A review of a sample of patients' records established that personal allowance authorisations were in place to provide the home with the necessary written authorisation to purchase goods and services on behalf of each patient; good practice was observed.

### **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 care to be contributing to safe, effective and compassionate care; however there was one area identified for improvement; this was in relation to hairdressing treatment records.

<b>Number of Requirements</b>	<b>1</b>	<b>Number Recommendations:</b>	<b>0</b>
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### **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 should patients wish to deposit cash or valuables. Discussions established that it is the home's policy not to hold money or valuables indefinitely; however money or valuables can be deposited in the safe place for a short period, such as 48 hours.

We viewed the location of the safe place and 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, no cash or valuables belonging to patients were deposited for safekeeping.

#### **Is Care Effective?**

We queried whether there were any general or specific arrangements in place to support patients with their money. The registered manager confirmed that there were no specific agreed arrangements in place to support any patient at present.

We enquired how patients' property within their rooms was recorded and requested to see a sample of the completed property records for five patients.

We were advised that the property records were contained within the patients' care files. We noted that each patient's file contained a record of property, recorded on a template. We noted that the template provided different headings for staff to record separate items underneath. We noted that family members had also provided notes to staff detailing additional items brought in for patients, such as additional clothing. We noted that there was evidence of records of property being updated for patients; however a number of records were not signed or dated.

We discussed these findings and explained that additions or disposals of furniture and personal possessions brought into each patient's room must be signed and dated by two people and that these records must be updated at least quarterly.

We highlighted that the home should review the current template to ensure that future additions or disposals of items of patients' property are easier to record in a consistent manner. We also highlighted that the Minimum Standards now require that patients' property records are reconciled at least quarterly and that the home should consider the best way to achieve this, which might mean creating a new template for recording patients' property. The relevant staff members should also be advised of the best way to record the detail of items such as the make/model/size/colour of items.

A recommendation 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. The availability of safe storage arrangements in the home is detailed in the residents guide.

**Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found care to be contributing to safe, effective and compassionate care; however there was one area identified for improvement; this was in relation how patients' property is recorded.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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**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, however we discussed options for patients to access other forms of transport and it was clear that arrangements exist in the home to support patients to access private transport and organised transport for outings or medical/hospital appointments.

**Is Care Compassionate?**

As above, we noted that 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 were found care to be contributing to safe, effective and compassionate care. No areas for improvement were noted in respect of Statement 4.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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**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 Mr Frank McKenna, the responsible person and Ms Bronagh Barker, 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](mailto: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.

<b>Quality Improvement Plan</b>	
<b>Statutory Requirements</b>	
<p><b>Requirement 1</b></p> <p>Ref: Regulation 14.4</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 01 December 2015</p>	<p>The registered person must ensure that the home's administrator receives training in the protection of vulnerable adults.</p> <hr/> <p><b>Response by Registered Person(s)Detailing the Actions Taken:</b> Our Home administrator received training on the safeguarding of vulnerable adults on Wednesday 23.9.15 carried out by Mr Trevor Gage. (external consultant)</p>
<p><b>Requirement 2</b></p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> From the date of inspection</p>	<p>The registered person must ensure that the treatment records for hairdressing/podiatry are signed by the both the person providing the treatment and by a representative of the home who can verify that the treatment has been received by the individual patients.</p> <hr/> <p><b>Response by Registered Person(s)Detailing the Actions Taken:</b> New signage section has been added to our hairdressing/podiatry sheets. This sheet is signed both my the person carrying out the service and a member of staff on duty to confirm same. This is done prior to being given to administrator for payment.</p>
<b>Recommendations</b>	
<p><b>Recommendation 1</b></p> <p>Ref: Minimum Standard 2.2</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 01 April 2016</p>	<p>The registered person should ensure that the content of the home's resident agreement is compared to the updated Care Standards for Nursing Homes (April 2015), in particular Standard 2 to ensure that any additional components are included in the homes standard agreement. The breakdown of the fees payable section of the agreement should also be reviewed to ensure that arrangements are clear and detail how the home will actually be paid and the method of payment.</p> <hr/> <p><b>Response by Registered Person(s)Detailing the Actions Taken:</b> The contract will provide the information on the fees being paid in gross to the Home from the Trust. We will not, however, have access to Resident's private information to allow us to break down individual fee payments.</p>
<p><b>Recommendation 2</b></p> <p>Ref: Minimum Standard Appendix 2</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 01 November 2015</p>	<p>The registered person should ensure that a policy and procedure addressing residents' money and valuables is introduced.</p> <hr/> <p><b>Response by Registered Person(s)Detailing the Actions Taken:</b> Policy and procedure addressing Resident's money and valuables has been developed and introduced. This is available to view on request.</p>

<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Minimum Standard 14.26</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 01 October 2015</p>	<p>The registered person should review the current template for recording patients' property to ensure that future additions or disposals of items are easier to record in a consistent manner. The Minimum Standards now require that property records are reconciled at least quarterly, therefore the registered person should consider the best way to achieve this, which may require creating a new template for recording patients' property. The relevant staff members should also be advised of the best way to record the detail of items such as the make/model/size/colour of items.</p>		
	<p><b>Response by Registered Person(s) Detailing the Actions Taken:</b> New template for recording Resident's property has been developed and will be in use going forward. Quarterly reconciliations will be carried out.</p>		
<p><b>Registered manager Completing QIP</b></p>	<p>Bronagh Barker</p>	<p><b>Date Completed</b></p>	<p>30.9.15</p>
<p><b>Registered Person Approving QIP</b></p>	<p>Frank Mc Kenna</p>	<p><b>Date Approved</b></p>	<p>30.9.15</p>
<p><b>RQIA Inspector Assessing Response</b></p>		<p><b>Date Approved</b></p>	<p>01/10/15</p>

*\*Please complete in full and return to [finance.team@rqia.org.uk](mailto:finance.team@rqia.org.uk) from the authorised email address\**