

Inspection Report

9 August 2023



Mantlin Cottage

Type of service: Residential Care Home
Address: Mantlin Road, Kesh, BT93 1TU
Telephone number: 028 6863 1248

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: Praxis Care Responsible Individual: Mrs Alyson Dunn	Registered Manager: Mr Derek Maxwell Date registered: 1 April 2005
Person in charge at the time of inspection: Mr Derek Maxwell	Number of registered places: 9
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: 6
Brief description of the accommodation/how the service operates: Mantlin Cottage is a registered residential care home which provides health and social care for up to nine residents. Each resident has their own bedroom and residents also have access to communal areas with secure outside spaces.	

2.0 Inspection summary

An announced inspection took place on 9 August 2023, from 11.15am to 3.15pm. This was completed by a finance inspector.

Short notice of the inspection was provided to the manager the day before the inspection commenced 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.

Three areas for improvement were identified in relation to: the recording of items held on behalf of residents, the reconciliation of residents' monies and a review of the financial arrangements for two residents.

Although areas for improvement were identified, RQIA are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the management team in relation to the management of residents' finances and property.

RQIA would like to thank the residents and staff for their assistance throughout 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 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

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?

The last inspection was completed by a care inspector on 19 January 2023; no areas for improvement were identified.

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.

A number of items, including savings books, were held in the safe place for two residents. There were no records to show when the savings books were removed and returned to the safe place. The findings were discussed with the manager who agreed to implement a system for recording the items in order to facilitate the audit process. An area for improvement was identified.

A sample of records evidenced that reconciliations (checks) of monies held on behalf of residents were undertaken twice daily. The records of the reconciliations were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff.

The system for reconciling the records of transactions undertaken on behalf of residents was discussed with the manager. Following the discussion, the manager agreed to implement a more robust system which would reduce potential errors and aid the audit process. It was noticed that the two residents' savings accounts were not part of the reconciliation process. An area for improvement was identified.

A sample of records of withdrawals from the two residents' savings accounts was reviewed; the amounts withdrawn reflected the amounts recorded as lodged at the home.

Discussion with the manager confirmed that the Health and Social Care Trust (the Trust) was the corporate appointee for the two residents with the savings accounts. There was no recorded evidence that the arrangements in place were agreed with the residents' care manager at the Trust. The arrangements were not recorded in the residents' agreements.

There was also no evidence of regular oversight of the accounts by the Trust as the residents' appointee. The manager was advised to contact the Trust to arrange a review of the current arrangements for the two residents. The arrangements agreed from the review should be recorded in the residents' written agreements and care plans. An area for improvement was identified.

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 weekly fees, including the contribution paid by residents towards their fee, 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.

Discussion with the manager confirmed that no resident was paying an additional amount towards their fee over and above the amount agreed with the Trusts.

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 apart from the two savings account books managed for two residents (Section 5.2.1) no bank accounts were used to retain residents' monies. The manager also confirmed that no member of staff was the 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.

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 transactions were retained for inspection.

A sample of records of monies deposited at the home on behalf of a resident 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.

A sample of records of one resident's monies forwarded to the home from the Trust was reviewed. The amounts recorded as received on behalf of the resident reflected the amounts on the records forwarded from the Trust.

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. This will be reviewed at the next RQIA inspection.

Discussion with staff confirmed that no transport scheme was in place at the time of the inspection.

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. A review of the policies evidenced that they reflected the operational areas for managing residents' finances and property. The policies were up to date and reviewed at least every three years.

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	0	3

Areas for improvement and details of the Quality Improvement Plan were discussed with Mr. Derek Maxwell, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (December 2022)	
Area for improvement 1 Ref: Standard 15.5 Stated: First time To be completed by: 1 September 2023	<p>The registered person shall ensure that a recording system is implemented to evidence when residents' savings books are removed and returned to the safe place.</p> <p>Ref: 5.2.1</p> <hr/> <p>Response by registered person detailing the actions taken:</p> <p>An updated system has been implemented to record when savings books have been removed from the safe.</p>
Area for improvement 2 Ref: Standard 15.12 Stated: First time To be completed by: 1 September 2023	<p>The registered person shall ensure that a robust system is implemented for reconciling residents' monies. The records of the reconciliations should show that the monies held in all residents' savings accounts are included in the reconciliations.</p> <p>Ref: 5.2.1</p> <hr/> <p>Response by registered person detailing the actions taken:</p> <p>A monthly reconciling process has been implemented by Manager which include residents savings books.</p>
Area for improvement 3 Ref: Standard 15.2 Stated: First time To be completed by: 30 September 2023	<p>The registered person shall ensure that the Health and Social Care Trust is contacted to request a review of the savings accounts held for the two residents identified during the inspection.</p> <p>The agreed arrangements from the review should be recorded in the residents' written agreements and care plans. A copy of the outcome of the review should be forwarded to RQIA once available.</p> <p>Ref: 5.2.1</p> <hr/> <p>Response by registered person detailing the actions taken:</p> <p>Manager has met with the Western Health and Social Care Trust on 26/10/2023 and they have agreed that they will ask the families if they would like to become appointee. If they are</p>

	<p>reluctant to do so discussions will commence to explore the ability for the service users to retain the savings books safely in their own rooms. If this is unsuccessful, The trust will make arrangements to take control of the savings books. In the interim, The Trust have agreed to monitor the savings books and finances for all residents on their monthly visits, and Manager has a system in place for them to confirm this. Manager will forward RQIA the outcome of what is agreed in relation to the savings books. Care plans have been updated in relation to this.</p>
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