

Inspection Report

3 October 2023



Drumary House

Type of service: Residential Care Home

Address: 44 Knockmore Road,

Derrygonnelly, BT93 6GA

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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: Potensial Ltd Responsible Individual: Miss Nicki Stadames	Registered Manager: Mrs Emma Keaney Date of registration: Acting
Person in charge at the time of inspection: Mr Chris Carr, Service Manager	Number of registered places: 17
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: 14
Brief description of the accommodation/how the service operates: This home is a registered Residential Care Home which provides health and social care for up to 17 residents with a learning disability. Accommodation is provided in single bedrooms and all residents have access to communal spaces and a garden.	

2.0 Inspection summary

An announced inspection took place on 3 October 2023, from 11.15am to 3.15pm. This was completed by a finance inspector.

Short notice of the inspection was provided to the home 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.

Following discussion with the aligned care and pharmacy inspectors, it was agreed that the areas for improvement previously identified would be followed up at the next care and medicines management inspections.

Based on the inspection findings and discussions held, 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.

No areas for improvement were identified during the inspection. Four areas identified within sections 5.2.1 and 5.2.2 of this report will be reviewed at the next RQIA inspection.

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.

5.1 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 20 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 13 (4) Stated: First time	The registered person shall ensure that personal medication records are fully and accurately completed and are reflective of the resident's currently prescribed medicines.	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 (December 2022)		Validation of compliance
Area for improvement 1 Ref: Standard 6.6 Stated: First time	The registered person shall ensure that falls care plans and risk assessments are reviewed following a fall in the home.	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.	

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, recorded and signed.

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 bank account was in place to retain residents' personal monies. A review of a sample of statements from the bank account evidenced that the account only contained residents' monies and was not used for the running of the care home. A sample of records of withdrawals from the bank account was reviewed; the amounts withdrawn reflected the amounts recorded as lodged at the home.

A number of items, including savings books, were held in the safe place for some residents. There were no records to show when the savings books were removed and returned to the safe place. The findings were discussed with staff who agreed to implement a system for recording the items in order to facilitate the audit process. This will be reviewed at the next RQIA inspection.

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

It was noticed that the residents' savings accounts were not part of the monthly reconciliation process. The service manager provided assurances that these monies would be included in the process and recorded. This procedure will be reviewed at the next RQIA inspection.

Records evidenced that the home was in the process of reviewing the need for maintaining the savings accounts given a bank account for retaining residents' monies was in operation. The service manager was advised to contact the Health and Social Care Trust in order for it to be included as part of the review. The inspector asked for RQIA to be informed of the progress and outcome of the review. The arrangements will be reviewed again at the next RQIA inspection.

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 service 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 service 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 staff confirmed that Potensial Limited was the appointee for four residents, 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 records for two residents confirmed that the benefits received were managed appropriately.

The inspector commended staff on retaining budget management plans for each resident. The plans provided details of the residents' financial arrangements including details of the residents' appointees and the benefits received.

A review of a sample of purchases undertaken on behalf of two 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 payments to the hairdresser and podiatrist were reviewed. Records were up to date and good practice was observed as the hairdresser and podiatrist had signed the records along with a member of staff to confirm that the treatments took place.

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. It was noticed that additional items recently brought into the residents' rooms were not included in the records. There was no recorded evidence to show that the personal possessions were checked at least quarterly.

The service manager advised that new templates for recording residents' possessions were in the process of being implemented. The templates will include the full details of the items, for example, the make and model of television owned by the resident. The service manager provided assurances that the new templates 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

No new areas for improvement were identified during this inspection. Areas for improvement had been previously identified where action is required to ensure compliance with **The Residential Care Homes Regulations (Northern Ireland) 2005 and/or the Residential Care Homes' Minimum Standards (December 2022) (Version 1:2)**.

	Regulations	Standards
Total number of Areas for Improvement	1*	1*

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

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 13 (4) Stated: First time To be completed by: With Immediate effect (6 January 2022)	The registered person shall ensure that personal medication records are fully and accurately completed and are reflective of the resident's currently prescribed medicines. 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. Ref:5.1
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: With Immediate effect (21 July 2023)	The registered person shall ensure that falls care plans and risk assessments are reviewed following a fall in the home. 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. Ref: 5.1



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