

Unannounced Finance Inspection Report 19 November 2019



Mainstay DRP Ardcora Supported Housing Service

Type of Service: Domiciliary Care Agency
Address: 5 Killough Road, Downpatrick, BT30 6PX
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Inspector: Joseph McRandle

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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 domiciliary care agency supported living type service which provides personal care and housing support to people with learning disability needs from the South Eastern Health and Social Care Trust (SEHSCT), Belfast Health and Social Care Trust (BHSCT) and the Western Health and Social Care Trust (WHSCT) living within the SEHSCT area. Service users are supported by staff which includes the registered manager and domestic service staff.

3.0 Service details

Organisation/Registered Provider: Mainstay DRP Responsible Individual: Helen Owen	Registered Manager: Gareth Anthony Baker
Person in charge at the time of inspection: Gareth Anthony Baker	Date manager registered: 29 November 2011

4.0 Inspection summary

An unannounced inspection took place on 19 November 2019 from 11.15 to 16.15 hours.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the DHSSPS Domiciliary Care Agencies Minimum Standards (2011).

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of domiciliary care agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from providers that they take all reasonable steps to promote people's rights. Users of domiciliary care services have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. They should also experience the choices and freedoms associated with any person living in their own home.

The inspection assessed progress with any areas for improvement identified since the last finance 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: policies and procedures reflecting the financial operational areas of the agency, members of staff involved in managing service users' finances receiving adult safeguarding training, written authorisation in place for members of staff to act as service users' appointee, controls surrounding management of service users' savings accounts, reconciling service users' monies held at the agency, management of agency's transport scheme, retaining records of charges to service users, up to date written agreements in place with service users, system in place for recording transactions undertaken on behalf of service users and retaining receipts from these transactions.

No areas for improvement were identified during the inspection.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' 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 Mr Gareth Anthony Baker, 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 care inspection dated 9 May 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 9 May 2019. No areas for improvement were identified during the care inspection.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- previous RQIA inspection report
- all correspondence received by RQIA since the previous inspection

During the inspection the inspector met with three staff members and the registered manager.

The following records were examined during the inspection:

- two service users' finance files
- two service users' individual written agreements
- safe records
- records of monies held on behalf of three service users
- a sample of records from purchases undertaken on behalf of service users
- the service user's guide
- financial policies and procedures
- a sample of records of charges from transport scheme
- a sample of records from service users' savings accounts

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 9 may 2019

The most recent inspection of the home was an unannounced care inspection. No areas for improvement were identified at this inspection.

6.2 Review of areas for improvement from the last finance inspection

The service has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to service users and clients from the care, treatment and support that is intended to help them.

A safe place was provided within the agency for the retention of service users' 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. Monies held on behalf of three service users were counted, the amount retained agreed to the balance recorded at the agency. An up to date safe contents book was in place at the time of the inspection.

Policies and procedures for the management and control of service users' finances were in place at the time of the inspection. A review of the policies and procedures evidenced that they reflected the financial operational areas of the home, including the procedure for organising holidays for service users.

Discussion with the registered manager confirmed that members of staff involved in managing service users' finances had received training in relation to adult safeguarding. Discussion with staff also confirmed that there were no finance related restrictive practices in place for any service user.

Areas of good practice

There were examples of good practice found in relation to: providing a place for service users to deposit items for safekeeping, policies and procedures reflecting the financial operational areas of the agency and members of staff involved in managing service users' 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 registered manager confirmed that a corporate appointee was in place for 22 service users, i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual. A sample of two service user files evidenced that copies of written confirmation from the Social Security Agency for the member of staff to act as their appointee were retained within the files.

Good practice was observed as monies held on behalf of service users were reconciled (checked) daily and recorded. Two signatures were recorded against the records of the reconciliations.

Discussion with staff confirmed that savings accounts were managed on behalf of service users. A review of a sample of statements from the accounts confirmed that the accounts were in the name of the service users. A sample of withdrawals identified within the statements was reviewed. The amounts withdrawn corresponded to the amounts recorded as lodged at the agency on behalf of the service users.

Good controls were observed in relation to the management of the savings accounts as the records of the withdrawals and deposits identified within the statements were checked and agreed by two members of staff on a weekly basis.

Discussion with staff confirmed that a transport scheme was in operation at the time of the inspection. A review of records confirmed that a book was used to record the service users' journeys undertaken in the vehicles. A sample of journeys recorded in the book was examined, the date of the journeys, the names of the service users 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 service users for using the vehicles.

A review of a sample of records confirmed that the book containing the details of service users' journeys was subsequently used to raise invoices to service users for their journeys. A sample of invoices raised for one service user was reviewed. The miles incurred for the journeys were recorded along with the rate per mile. The miles charged to the service user agreed to the miles recorded within the transport book.

Records also showed that the amounts owed by service users for transport were withdrawn from the service users' savings accounts. A sample was taken of two amounts withdrawn from one service user's savings account, the amounts withdrawn agreed to the amounts invoiced to the service user for their journeys.

Discussion with staff confirmed that the mileage rate was reviewed at the end of each month and adjusted to reflect the number of journeys undertaken. As in line with good practice transport agreements were issued to service users or their representatives. A review of two service users' files showed that transport agreements detailing the terms and conditions for availing of the transport scheme were retained within the service users' files. The agreements were signed by the service users' representatives and a representative from the agency.

The inspector commended staff on the controls surrounding the transport scheme.

Areas of good practice

There were examples of good practice found in relation to: reconciling service users' monies and the controls surrounding both the transport scheme and service users' savings accounts.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Service users 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 service users' files showed that copies of the service users' 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 service users and the arrangements for managing service users' finances.

The day to day arrangements in place to support service users with managing their money were discussed with the registered manager and he described a range of examples of how staff achieved this. Discussion with the registered manager also confirmed that the service had a range of methods in place to encourage feedback from service users or their representatives in respect of any issue.

Areas of good practice

There were examples of good practice found in relation to retaining copies of service users' financial arrangements and providing a range of methods to encourage feedback from service users or their representatives.

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.

A review of two service users' files showed that copies of written agreements between the service users' and the agency were retained within the service users' files. The agreements provided details of the terms and conditions for staying at the agency, the current fee charged to service users and a list of the services provided at an additional cost. The two agreements reviewed were signed by the service users' representatives and a representative from the agency.

A review of records and discussion with staff confirmed that individual transaction sheets were maintained for each service user. The sheets were used to record the details of transactions undertaken on behalf of the service users, including purchases of items and payments for additional services. The transaction sheets were also used to record monies deposited at the agency on behalf of service users.

A review of records from seven purchases undertaken by staff on behalf of three service users showed that the details and the amount of the purchases were recorded. Good practice was observed as the amounts deducted to make the purchases and the remaining monies returned from the purchases were recorded separately. Two signatures were recorded against all of the transactions reviewed. Receipts from the purchases were retained 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 in the service users' transaction sheets.

Areas of good practice

There were examples of good practice found in relation to: retaining up to date written agreements, written agreements showing costs of additional services provided to service users, system in place for recording transactions undertaken on behalf of service users and retaining receipts from transactions.

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.



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