

**Unannounced Follow-up Finance Inspection
of
Central Promenade**

26 January 2016

1. Summary of Inspection

An unannounced follow-up finance inspection took place on 26 January 2016 from 11:10 to 14:15. During the inspection, we met with the registered manager, the area manager and the senior member of care staff on duty.

This follow-up inspection was carried out to review progress with the actions detailed in the Quality Improvement Plans (QIP's) from the previous inspections of the service on 21 February and 3 September 2013. Significant progress in addressing the actions was evidenced; one additional area for improvement was identified and this is set out in the QIP appended to this report.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

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
Total number of requirements and recommendations made at this inspection	0	1

The details of the QIP within this report were discussed with Mrs Leanne Binks, the registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Autism Initiatives NI/Andrew Grainger (Acting)	Registered Manager: Mrs Leanne Ruth Binks
Person in Charge of the Service at the Time of Inspection: Mrs Bridget Grant (The senior member of staff on duty)	Date Manager Registered: 22 December 2015
Number of Service Users in Receipt of a Service on the Day of Inspection: 9	

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: Service users' finances and property are appropriately managed and safeguarded

Statement 1

The service 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 service users' monies on their behalf are transparent, have been authorised and the appropriate records are maintained.

Statement 3

A safe place is provided within the service 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 service users are transparent and agreed in writing with the service user/their representative.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with the registered manager, area manager and the senior member of care staff on duty
- 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 inspection reports and QIP's from the inspections of the service on 21 February 2013 and 3 September 2013

The following records were reviewed during the inspection:

- Four service user finance files
- Four service user agreements
- A sample of income/lodgements and expenditure records
- Evidence of the reconciliation of service users' monies
- Four records of service users' property

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection on 22 December 2014. The care inspector was contacted prior to this inspection and confirmed that there were no matters to be followed up.

5.2 Review of Requirements and Recommendations from Inspection on 21 February 2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 6 (1) Minimum Standard 4.4	The registered manager should ensure that personal financial agreements are signed by the tenant or their representative (if the tenant is deemed incapable of managing their own affairs) and a representative of the agency.	Met
	Action taken as confirmed during the inspection: During the inspection, a sample of service user agreements were reviewed which evidenced that each agreement had been signed by the service user or their representative.	
Requirement 2 Ref: Regulation 6(1) Minimum Standard 4	Signed tenancy agreements should indicate the amount being paid by the tenant towards their care and also the method of payment of fees. The charges for the agreed itemised services and facilities and the financial arrangements for each tenant should be included in the agreement. The above details should also be included in the notification of increase or variation in fees.	Met
	Action taken as confirmed during the inspection: We reviewed a sample of service users' financial files and noted that each service user had a financial support assessment, a financial support plan and an individualised agreement detailing the costs payable by the service user. We noted that there was evidence of consultation with service users or their representatives and that agreements were reviewed and revised as necessary on a regular basis.	

Requirement 3 Ref: Regulation 6(1) Minimum Standard 4.5	<p>Tenants' individual files should be updated to include notification, in writing, at least 28 days in advance of any change or variation in their fee.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>A review of a sample of files evidenced that notification of increases in costs payable by service users was provided by the service.</p>	Met
Requirement 4 Ref: Regulation 15(6)(d) Minimum Standard 4.2	<p>The registered manager should ensure that a full count of tenants' monies held in the safe place and reconciliation of amounts held is performed immediately.</p> <p>Reconciliations of tenants' monies should be performed at least quarterly by the agency.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>Discussion with the area manager, registered manager and a review of the records established that any money held for safekeeping on behalf of the service users is counted at each staff handover ie: twice a day. We also noted that the records of service users' money are subject to regular audits by a senior member of staff and by the registered manager. The area manager also described how the administration of service users' money is included on a regular basis as part of the service's monthly monitoring visits; a review of the November 2015 report supported this.</p>	Met
Requirement 5 Ref: Regulation 15(6)(d) Minimum Standard 4.2	<p>The registered manager should reconcile the safe contents list for each tenant to items physically held in the safe place to ensure all items held in the safe place are recorded on the safe contents list.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>Discussion with the area manager and registered manager established that since the previous finance inspections of the service, there had been a change in the arrangements regarding a "safe place" within the service. Both members of staff described the new arrangements in detail. Discussion established that there was no written record of any items held for safekeeping. We</p>	Met

	<p>recommended that items held for safekeeping were recorded, with the record signed and dated by two people. We highlighted that best practice was to check the items against the written record on at least a quarterly basis.</p> <p>A recommendation was made in respect of this finding.</p>	
<p>Requirement 6</p> <p>Ref: Regulation 15(6)(d) Minimum Standard 4.2</p>	<p>The registered manager should ensure that monies withdrawn and monies deposited are shown separately in the tenants' transaction books.</p> <p>All transactions should be signed and dated by a tenant or their representative and a member of staff, or by two members of staff if the tenant or their representative is unable to sign.</p> <p>Action taken as confirmed during the inspection:</p> <p>A review of a sample of income and expenditure records evidenced that the above controls were being adhered to.</p>	Met
<p>Requirement 7</p> <p>Ref: Regulation 14(d) Schedule 4.11 Appendix 1</p>	<p>It is required that the registered manager ensures the listings of communally held inventory are copied and attached to each relevant tenant's inventory listing.</p> <p>Action taken as confirmed during the inspection:</p> <p>We reviewed a sample of three service user's property records and noted that these reflected a commendable level of detail for individual service users.</p>	Met

<p>Requirement 8</p> <p>Ref: Regulation 15(6)(d) Minimum Standard 8.15</p>	<p>Written confirmation from the Social Security Agency should be maintained at the Agency showing the name of the appointee for the tenants identified during the inspection. A record of the date approved by the Social Security Agency should also be maintained.</p> <p>The agreed arrangement for acting as appointee should be included in the tenants' agreement.</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>We reviewed a sample of four service users' records which evidenced that details of the individual service user's appointee was held on file. In the cases where a representative of the organisation was acting as the service user's nominated appointee, confirmation of this had been sought from the Social Security office, and was held on file for the relevant service users. We also reviewed the corresponding service user's financial agreements and noted the appointee details were reflected within.</p>	
<p>Requirement 9</p> <p>Ref: Regulation 15(6)(d) Schedule 4.11 Minimum Standard 8.14</p>	<p>Receipts must be retained (where possible) from all purchases made by or on behalf of tenants. The full details of the purchase should be recorded along with the reason for any discrepancies.</p> <p>Where a receipt is not available for a purchase, the record should be annotated to reflect this.</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>A sample of records evidenced that the above controls were being adhered to.</p>	

Requirement 10 Ref: Regulation 15(6)(d) Schedule 4.11 Minimum Standard 8.14 & 8.15	For the tenant whose relative acts as appointee, the registered manager should ensure that, in respect of tenants' finances, copies of all documentation sent to and correspondence with this relative are retained on the tenant's finance file.	Met
	Action taken as confirmed during the inspection: We reviewed the relevant service user's financial file and noted that copies of correspondence sent to the service user's representative were being retained on file.	
Requirement 11 Ref: Regulation 15(6)(d) Appendix 1 Minimum Standard 8.14	The policy and procedure for the transport scheme should be updated to reflect actual practice within the agency.	Met
	Action taken as confirmed during the inspection: Discussion established that since the previous finance inspections of the service, there had been a change in arrangements regarding transport services. The registered manager provided us with a copy of the service's updated transport policy and procedure.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 8.14 & 8.15	Preparation and review of the weekly finance checks should be evidenced by two signatories.	Met
	Action taken as confirmed during the inspection: A review of a sample of records evidenced that the above controls were being adhered to.	

Review of Requirements from Inspection on 3 September 2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14(b)(d)	The registered person is required to develop and submit to RQIA robust policies and procedures in relation to the safe management of service users' finances and property.	Met
	Action taken as confirmed during the inspection: Following the inspection on 3 September 2013, the organisation submitted its Service User financial support policy and procedures. During the inspection on 26 January 2016, the regional manager advised that these had recently been updated. We noted that a copy of the policy and procedures was available within the service.	
Requirement 2 Ref: Regulation 14(b)(d)	The registered person is required to ensure that policies and procedures directing appropriate financial practices are implemented and to provide RQIA with details of the arrangements in place for monitoring the implementation of these. In particular recording of financial transactions made on behalf of service users must meet best practice standards.	Met
	Action taken as confirmed during the inspection: As noted above, the organisation's policy and procedure addressing how service users are supported has been in use in the service since 2013. We enquired as to how new members of staff are introduced to the service's policy and procedures; management described how new members of staff are inducted and receive training on how to support service users with their money. We reviewed a sample of training records for recently recruited staff which evidenced that training on how to support service users with their money had been carried out.	

Requirement 3 Ref: Regulation 14(b)(d)	<p>The registered person is required to undertake a review of the management arrangements within the agency to ensure that the registered manager has appropriate oversight and monitoring in relation to all aspects of safeguarding service users' money.</p> <p>The registered person is required to submit to RQIA the findings of this review and any associated action plan.</p>	Met
<p>Action taken as confirmed during the inspection:</p> <p>Following the inspection on 3 September 2013, proposals regarding management arrangements were shared with RQIA. This matter was not addressed at the inspection on 26 January 2016.</p>		
Requirement 4 Ref: Regulation 14(b)(d)	<p>The registered person is required to ensure that all agency staff have received training in the implementation of the policies and procedures outlined above.</p>	Met
<p>Action taken as confirmed during the inspection:</p> <p>As noted above, we reviewed a sample of training records which evidenced training for new and existing members of staff on the organisation's policies and procedures.</p>		
Requirement 5 Ref: Regulation 15(9)	<p>The registered person is required to ensure that service users' finances and property are administered in a manner that does not result in any loss or disadvantage to the service user.</p>	Met
<p>Action taken as confirmed during the inspection:</p> <p>As noted above, the service ensures that staff are trained in how to support service users with the individual financial needs and to ensure that protocols regarding record keeping are adhered to at all times. We noted that one bedroom within one of the flats was vacant at the time of the inspection on 26 January 2016; the registered manager and area manager confirmed that Autism Initiatives is currently paying for the costs of the spare bedroom, therefore ensuring that the existing tenant in the shared flat is not being overcharged.</p>		

Requirement 6 Ref: Regulation 15(9)	<p>The registered person is required to quantify all losses experienced by service users as a result of inappropriate practices.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>Following the inspection in 2013, the registered person confirmed that service users had not been disadvantaged. This matter was not reviewed as part of the inspection on 26 January 2016.</p>	Met
Requirement 7 Ref: Regulation 15(9)	<p>The registered person is required to outline and agree with RQIA the arrangements for appropriate restitution.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>As noted above, following the inspection in 2013, the registered person confirmed that service users had not been disadvantaged. This matter was not reviewed as part of the inspection on 26 January 2016.</p>	Met

5.3 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 Mrs Leanne Binks, 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 and The Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Domiciliary Care Agencies Minimum Standards (updated August 2011) 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 and assessed by us.

Quality Improvement Plan			
Recommendations			
Recommendation 1 Ref: Standard 8.15 Stated: First time To be Completed by: From the date of inspection	<p>A written record should exist of any item held for safekeeping on behalf of a service user. The record should be checked against the items held on at least a quarterly basis, with the check signed and dated by two people. When any item is placed into or removed from safekeeping, this should also be recorded, with the entry signed and dated by two people.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: A written record is now in place for any item held for safeguarding on behalf of each individual service user. The record is checked against the items held on a daily basis, the check is signed and dated by two staff members. Any item removed from safekeeping will also be recorded with the entry signed and dated by two people.</p>		
Registered Manager Completing QIP	Leanne Binks	Date Completed	01.03.16
Registered Person Approving QIP	Andrew Grainger	Date Approved	02.03.16
RQIA Inspector Assessing Response		Date Approved	03/03/2016

Please ensure this document is completed in full and returned to finance.team@rqia.org.uk from the authorised email address

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 in this report do not absolve the registered provider/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 provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.