

Announced Finance Inspection Report 15 February 2018



Rectory Field

Type of Service: Residential Home
Address: 19b Limavady Road, Londonderry, BT47 6JU
Tel No: 02871347741
Inspector: Joseph McRandle

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 residential care home with 35 beds registered to provide care for residents living with a range of care needs as detailed in section 3.0.

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust Responsible Individual(s): Dr Anne Kilgallen	Registered Manager: Dolores Moran
Person in charge at the time of inspection: Dolores Moran	Date manager registered: 1 April 2005
Categories of care: Residential Care (RC) I - Old age not falling within any other category PH - Physical disability other than sensory	Number of registered places: 35

4.0 Inspection summary

An announced inspection took place on 15 February 2018 from 11.00 to 14.00 Hours. Less than one hour's notice was given prior to the inspection.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

The inspection assessed progress with any areas for improvement identified since the last finance inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to: providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis, members of staff involved in managing residents' finances receiving adult safeguarding training, the policies and procedures reflecting the operational areas of the home, maintaining records of reconciliations of residents' monies and valuables, informing residents or their representatives in advance of increases in fees, updating records of residents' personal possessions following admission, facilitating journeys on behalf of residents and retaining residents' financial arrangements within their files.

Additional evidence of good practice included: providing a provision for residents to opt in or out of permitting members of staff to make purchases on their behalf, offering support to residents for managing their own finances, the residents' guide detailing the services included in the weekly fee and the costs for additional services, up to date written agreements in place with residents, recording transactions undertaken on behalf of residents, retaining receipts from transactions, hairdresser and a member of staff signing records of transactions, additional controls in place for recording transactions on behalf of residents and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

One area for improvement was identified in relation to retaining a copy of a written agreement within a resident's file.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Dolores Moran, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 1 August 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 1 August 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues, there were no financial issues identified. The inspector from the previous inspection was contacted who confirmed that there were no issues to follow up.

During the inspection the inspector met with the registered manager.

The following records were examined during the inspection:

- Three residents' finance files
- Two residents' written agreements
- The recorded financial arrangements for three residents
- Monies held on behalf of two residents
- Valuables held on behalf of one resident
- A sample of records of residents' monies forwarded from the Western Health and Social Care Trust (WHSCT).
- A sample of records of personal allowance monies signed over to one resident.
- A sample of records from monies deposited at the home on behalf of one resident
- The residents' guide
- A sample of records of safe contents
- A sample of records from purchases undertaken on behalf of two residents
- A sample of records of payments to the hairdresser for three residents
- WHSCT Financial policies and procedures
- Records of personal possessions for two residents

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 1 August 2017

The most recent inspection of the home was an unannounced care inspection. This inspection resulted in no areas for improvement being identified.

6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

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

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 staff members with access. Monies held on behalf of two residents were counted, the amount retained agreed to the balance recorded at the home.

A safe contents book was in place and up to date at the time of the inspection. Valuables held on behalf of one resident were examined. Records agreed to the items held in the safe place. Records also showed that the items held were checked on a regular basis.

Discussion with the registered manager confirmed that members of staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults. The registered manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

Financial policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies and procedures reflected the financial operational areas of the home.

Discussion with staff confirmed that there were no finance related restrictive practices in place for any resident.

Areas of good practice

There were examples of good practice found in relation to providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis, members of staff involved in managing residents' finances receiving adult safeguarding training and the policies and procedures reflecting the operational areas of the home.

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.

Review of records and discussion with the registered manager confirmed that no member of staff at the home or at the WHSCT acted as an appointee for any resident, i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual.

Discussion with the registered manager also confirmed that no member of staff acted as an agent for any resident, i.e. a person authorised by a resident or their representative to collect social security benefits on the resident's behalf.

Discussion with staff and review of records confirmed that in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations between the monies held on behalf of residents and the records of monies held were carried out on a daily basis. As in line with good practice the records were signed by the person carrying out the reconciliation and countersigned by a senior member of staff.

Discussion with the registered manager confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Review of records for two residents showed that the records were updated with items acquired and disposed of following admission for which staff had been made aware of.

Discussion with the registered manager confirmed that a comfort fund was operated on behalf of residents. The registered manager confirmed that the monies held within the fund were retained by the WHSCT. Discussion with the registered manager also confirmed that purchases from the fund were for the benefit of all residents. Records from the comfort fund could not be reviewed as they were retained at the WHSCT at the time of the inspection.

Records confirmed that residents or their representatives were informed in advance of any increase in fees as in line with The Residential Care Homes Regulations (Northern Ireland) 2005.

Discussion with the registered manager confirmed that the WHSCT managed Patient Private Property (PPP) accounts on behalf of a number of residents. The registered manager also confirmed that no bank accounts were managed on behalf of residents.

Areas of good practice

There were examples of good practice in relation to maintaining the records of reconciliations of residents' monies and valuables, informing residents or their representatives in advance of increases in fees and updating records of residents' personal possessions following admission.

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?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The home did not provide a transport scheme at the time of the inspection. Discussion with staff confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; in some instances this included the use of taxis which were paid for by the WHSCT.

Discussion with staff and review of records confirmed that the WHSCT held PPP accounts for a number of residents. A sample of records of monies forwarded from the WHSCT on behalf of one resident was examined, the records showed that the corresponding amounts of monies received by the home were credited to the records of monies held on behalf of the resident. Records also confirmed that the resident was handed over their weekly personal allowance from the monies forwarded by the WHSCT. Good practice was observed as the resident receiving their personal allowance monies had signed the records along with a member of staff.

Review of records for three residents showed that details of their financial arrangements were retained within their files as in line with standard 15.2 of the DHSSPS Residential Care Homes Minimum Standards (2011). The records included the details of the person managing the residents' finances and any procedures that were undertaken by staff on behalf of residents. The records were signed by a representative from the WHSCT and a member of staff from the home.

In line with good practice a provision was included within the residents' agreements requiring residents to opt in or out of permitting members of staff to make purchases on their behalf or pay for additional services provided to residents e.g. hairdressing. The agreements were signed by the residents or their representatives and a representative from the home.

Discussion with the registered manager confirmed that arrangements were in place to offer support to residents for managing their monies.

Areas of good practice

There were examples of good practice in relation to: facilitating journeys on behalf of residents, retaining details of residents' financial arrangements within their files, providing a provision for residents to opt in or out of permitting members of staff to make purchases on their behalf and offering support to residents for managing their own finances.

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.

Discussion with staff and review of records confirmed that records of fees paid by, or on behalf of, residents were maintained at the WHSCT. Staff confirmed that no additional monies were received for fees over and above the amount agreed through the contracting arrangements with the Health and Social Care Trust.

A residents' guide was in place at the time of the inspection. The guide included the details of the services provided to residents as part of their weekly fee. The guide also listed the costs for additional services provided at the home e.g. hairdressing.

The resident's guide included a written agreement which was issued to residents on admission to the home. Review of three residents' files evidenced that written agreements were in place for two of the residents. An area for improvement has been listed within the QIP of this report for a written agreement to be in place for the resident identified during the inspection.

A Review of the two agreements in place confirmed that in line with good practice, the agreements showed the current weekly fee paid by, or on behalf of, the residents. Both agreements were signed by the resident or their representative and a representative from the home.

Review of records and discussion with staff confirmed that a book was maintained for each resident (entitled "Receipt Book"). The books were used to retain receipts from purchases undertaken on behalf of residents and from additional services paid on behalf of residents e.g. hairdressing. The details of the transactions undertaken on behalf of residents were recorded in the safe register. A review of three payments to the hairdresser on behalf of three residents showed that receipts were retained from each of the transactions. The amounts recorded in the safe register agreed to the amounts listed on the receipts retained within the residents' receipt books. In line with good practice two signatures were recorded against each of the transactions. It was noticed that the hairdresser had also signed the records to confirm the service took place.

A review of records of two purchases undertaken by staff, on behalf of two residents, showed that as in line with good practice the details of the purchases, the date and the amount of the purchases were recorded. Receipts were retained from both purchases and two signatures were recorded against each entry in the safe register and receipt books.

The registered manager was commended on the additional controls in place for recording transactions. Further to the signatures recorded in the safe register and on the receipts from the transactions, two members of staff had also signed the receipt books to confirm the transactions took place.

Review of records showed that as in line with good practice a list of signatures of staff authorised to make purchases or payments on behalf of residents was maintained at the home.

Areas of good practice

There were examples of good practice found in relation to: the residents' guide detailing the services included in the weekly fee and the costs for additional services, updated written agreements in place with residents, recording transactions undertaken on behalf of residents, retaining receipts from transactions, hairdresser and a member of staff signing records of transactions, additional controls in place for recording transactions on behalf of residents and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

Areas for improvement

One area for improvement was identified during the inspection. This related to retaining a copy of a written agreement within the file of a resident identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Dolores Moran, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 the residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 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 DHSSPS Residential Care Homes Minimum Standards, August 2011.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and returned the completed QIP via Web Portal for assessment by the inspector.

If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011.

<p>Area for improvement 1</p> <p>Ref: Standard 4.2</p> <p>Stated: First time</p> <p>To be completed by: 23 March 2018</p>	<p>The registered person shall ensure that a copy of a written agreement is in place for the resident identified during the inspection.</p> <p>The agreement should be signed by resident or their representative (if resident lacks capacity to make decisions in relation to the agreement) and a representative from the home. Where a resident or their representative is unable or chooses not to sign this must be recorded.</p> <p>Ref: 6.7</p>
	<p>Response by registered person detailing the actions taken:</p> <p>A copy of a Written Agreement is now in place for any resident identified during the inspection. Where a resident or their representative is unable or chooses not to sign a Written Agreement, this is now clearly recorded in their file.</p>

Please ensure this document is completed in full and returned via Web Portal



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