



The Regulation and
Quality Improvement
Authority

Announced Finance Inspection Report

15 August 2017



Seymour Gardens

Type of Service: Residential

Address: Nelson Drive, Waterside, Londonderry, BT47 6ND

Tel No: 02871344470

Inspector: Joseph McRandle

www.rqia.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 26 beds that provides care for residents living with dementia.

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust	Registered Manager: Miss Jacqueline McCafferty – Registration pending
Responsible Individual(s): Mrs Elaine Way CBE	
Person in charge at the time of inspection: Miss Jacqueline McCafferty	Date manager registered: Miss Jacqueline McCafferty - Registration pending
Categories of care: Residential Care (RC) DE – Dementia	Number of registered places: 26

4.0 Inspection summary

An announced inspection took place on 15 August 2017 from 10:45 to 14:15. Less than one hours' 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 having adult safeguarding training, the records of reconciliations of residents' monies and valuables, informing residents or their representatives in advance of increases in fees, the financial policies and procedures operated at the home, facilitating journeys on behalf of residents, retaining residents' financial arrangements within their files, offering support to residents or their representatives for managing residents' finances, listing the services included in the weekly fee within the residents' guide, listing additional services to be paid by residents, recording of transactions undertaken on behalf of residents, records for hairdressing service and the retention of receipts from purchases undertaken on behalf of residents.

Areas requiring improvement were identified in relation to: updating residents' inventory records with items brought into the home by, or on behalf of, residents following admission, contacting the Western Health and Social Care Trust (WHSCT) regarding the financial arrangements currently in place for the resident identified during the inspection, retaining signed written agreements in all residents' files and updating the written agreements with the current weekly fee paid by, or on behalf of, residents.

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	3

Details of the Quality Improvement Plan (QIP) were discussed with Miss Jacqueline McCafferty, 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 15 June 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 15 June 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 manager and the senior care assistant.

The following records were examined during the inspection:

- Four residents' finance files
- Three residents' written agreements
- Monies held on behalf of residents
- A sample of valuables held on behalf of residents
- A sample of payments made by three residents towards their fees
- Records from comfort fund
- The residents' guide
- A sample of records of safe contents
- The Western Health and Social Care Trust – cash handling procedures
- A sample of records from purchases undertaken on behalf of residents
- A sample of records of payments to the hairdresser
- Financial policies and procedures
- Patient property procedures
- Guide for managers and staff on receipt and application of expenditure and gift fund
- Records of personal property for one resident.

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 15 June 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP will be validated by the care inspector at the next care inspection.

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 patients 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 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. A sample of valuables held on behalf of three residents was 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 manager confirmed that members of staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults. The manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

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 and members of staff involved in managing residents' finances having 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 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 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 as in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations of monies and valuables held on behalf of residents were carried out regularly.

Discussion with staff and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. The manager was unsure if the records were up to date with items brought into the home following admission for which staff had been informed about e.g. televisions or items of furniture. This was identified as an area for improvement.

Review of records and discussion with staff confirmed that a comfort fund was operated on behalf of residents. Monies held for the fund at the time of the inspection were counted and agreed to the balance recorded at the home. Discussion with the manager confirmed that purchases from the fund were for the benefit of all residents.

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 staff confirmed that the WHSCT managed Patient Private Property (PPP) accounts on behalf of a number of residents. Staff also confirmed that no bank accounts were managed on behalf of residents.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies reflected the procedures currently operated at the home in relation to managing residents' finances.

Areas of good practice

There were examples of good practice in relation to the records of reconciliations of residents' monies and valuables, informing residents or their representatives in advance of increases in fees and the financial policies and procedures operated at the home.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating residents' inventory records with items brought into the home by, or on behalf of, residents following admission.

	Regulations	Standards
Total number of areas for improvement	0	1

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; this included the use of taxis which were paid by the residents or their representatives.

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 Trust were examined, the records showed that monies received by the home were credited to the residents' transaction sheets. Review of records for four residents showed that details of the residents' financial arrangements were retained within their files as in line with standard 15.2 of the DHSSPS Residential Care Homes Minimum Standards (2011).

Discussion with the manager confirmed that monies belonging to one resident were managed by the Office of Care and Protection (OCP). Monies for the resident had not been forwarded to the WHSCT for a number of months resulting in the resident not having sufficient funds to purchase essential items or pay for additional services e.g. hairdressing. The inspector was informed by the manager that due to the goodwill of staff the resident was still receiving these essential items and additional services.

The inspector advised the manager to contact the resident's representative at the WHSCT in relation to the financial arrangements currently in place for the resident. The WHSCT should implement a temporary system to ensure that the resident has sufficient funds at all times. The WHSCT should also expedite the discussions with OCP in order that monies are released on behalf of the resident. This was identified as an area for improvement.

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

Areas of good practice

There were examples of good practice in relation to: facilitating journeys on behalf of residents, retaining residents' financial arrangements within their files and offering support to residents for managing their own finances.

Areas for improvement

One area for improvement was identified during the inspection in relation to contacting the WHSCT regarding the financial arrangements currently in place for the resident identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	1

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 three residents paid their contribution towards their weekly fee directly to the home. A sample of payments made by the residents was examined, the amounts received agreed to the contribution owed by each resident. Records of fees paid by, or on behalf of, the remaining 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 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 of 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 four residents' files evidenced that written agreements were in place for three of the residents. The agreements did not show the current weekly fee paid by, or on behalf of, the residents. One of the agreements was not signed by either the resident (or their representative) or a representative from the home. One other agreement was not signed by the resident or their representative. This was identified as an area for improvement.

Review of records and discussion with staff confirmed that individual transaction sheets were maintained for each resident. The sheets were used to record the details of purchases undertaken on behalf of residents and the payments made for additional services e.g. hairdressing. The transaction sheets were also used to record amounts of monies deposited at the home on behalf of residents. Discussion with staff also confirmed that representatives of some of the residents purchased essential items on behalf of the residents. The representatives would provide receipts from the purchases and the home would subsequently

forward the receipts to the WHSCT. The residents' representatives were reimbursed the amounts by the WHSCT.

A review of records of four purchases made by staff, on behalf of three residents, showed that as in line with good practice the details of the purchases, the date and the amount of the purchases were recorded in the transaction sheets. Two signatures were recorded against each entry in the transaction sheets. Receipts from the purchases reviewed were available at the time of the inspection.

Review of records confirmed that a book was in place to record the treatments provided by the hairdresser. The book recorded the names of the residents availing of the hairdresser, the service provided and the amount charged to residents. The hairdresser and a member of staff signed the records to confirm that the service was provided to residents.

Records showed that the last entry recorded in the hairdressing book was 05 April 2017. Discussion with the manager confirmed that the book was no longer used and the hairdresser provided receipts for each service provided to residents. A sample of payments made on behalf of two residents was examined. The amounts deducted from the two residents' monies to pay the hairdresser agreed to the amounts recorded on the hairdresser's receipts. Two signatures were recorded against the transactions reviewed.

Areas of good practice

There were examples of good practice in relation to listing the services included in the weekly fee, listing the costs of additional services provided to residents, recording of transactions undertaken on behalf of residents, records for hairdressing service and the retention of receipts from purchases undertaken on behalf of residents.

Areas for improvement

One area for improvement was identified during the inspection. This related to retaining written agreements within all residents' files and updating the written agreements with the current weekly fee paid by, or on behalf of, residents.

	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 Miss Jacqueline McCafferty, 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 return the completed QIP to Agencies.Team@rqia.org.uk for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. 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 DHSSPS Residential Care Homes Minimum Standards, August 2011.

Area for improvement 1 Ref: Standard 8.7 Stated: First time To be completed by: 22 September 2017	<p>The registered person shall ensure that the inventory of residents' possessions is reviewed and brought up to date. Any items brought into the home or items that have been disposed of e.g. televisions or items of furniture following admission (for which members of staff have been informed of) should be recorded.</p> <p>The records should be signed and dated by two members of staff.</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken:</p> <p>The registered person has reviewed and updated the residents inventory. All residents in the facility have a property book and all items brought in and out of the home must be recorded, dated and signed by two staff.</p>
Area for improvement 2 Ref: Standard 9.3 Stated: First time To be completed by: 22 September 2017	<p>The registered person shall contact the representative from the WHSCT for the resident (identified during the inspection). The WHSCT should implement a temporary system to ensure that the resident has sufficient funds at all times. The WHSCT should also expedite the discussions with OCP in order that monies are released on behalf of the resident</p> <p>Ref:6.6</p>
	<p>Response by registered person detailing the actions taken:</p> <p>The registered person has resolved the situation for the resident (identified during the inspection). The office of care and protection has agreed to release an amount of money and have it paid into the residents patient property account.</p> <p>The registered person is also working with the head of service to implement a procedure should this situation arise again. Once completed it will be forwarded to directorate governance for approval.</p>
Area for improvement 3 Ref: Standard 4.2 Stated: First time To be completed by: 30 September 2017	<p>The registered person shall ensure that written agreements are in place for all residents. The registered person shall update the residents' agreements to be in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards, August 2011.</p> <p>The agreements should show the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.</p> <p>Agreements should be signed by residents or their representatives (if resident lacks capacity to make decisions in relation to the agreement)</p>

	<p>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>Copies of the signed agreements must be retained within residents' files.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: The registered person has obtained the weekly charge and residents assessed weekly contribution from the WHSCT finance department. The registered person has reviewed all residents files to ensure written agreements are in place and signed. The registered person is also updating the agreements to be in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards, August 2011.</p>
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