

Unannounced Finance Inspection Report

22 June 2017



Limetree House

Type of Service: Residential

Address: 133/133A Comber Road, Dundonald, BT16 2BJ

Tel No: 028 9048 9380

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 that provides care for residents living with dementia.

3.0 Service details

Organisation/Registered Provider: Limetree Responsible Individual(s): Mrs Gertrude Alexandra Priscilla Nixon	Registered Manager: Mrs Deborah Cecilia Moore
Person in charge at the time of inspection: Mrs Deborah Cecilia Moore	Date manager registered: 26 January 2015
Categories of care: Residential care (RC) DE – Dementia	Number of registered places: 35

4.0 Inspection summary

An unannounced inspection took place on 22 June 2017 from 10:15 to 14.15.

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 safe place for residents to deposit items for safekeeping, the controls surrounding the safe place, staff involved in managing residents' finances having adult safeguarding training, recording the reconciliations of residents' monies, informing residents or their representatives of increases in the weekly fee, providing residents with cash agreements, facilitating journeys on behalf of residents, offering support to residents or their representatives for managing residents' finances, retaining records of fees received, written agreements in place for residents, retention of receipts from purchases, records from hairdressing treatments and records of monies deposited on behalf of residents.

Areas requiring improvement were identified in relation to updating the financial policies and procedures, reviewing the system of retaining residents' lost property, updating residents' written agreements with the current fee, updating residents' agreements to show the amount of third party contributions paid on behalf of residents, update agreements of care managed residents to be consistent with the health and social care trust's contract, update financial policies and procedures to include the practice of on-line shopping, update either residents agreements or cash agreements with provision for on-line shopping and review system of recording transactions 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	8

Details of the Quality Improvement Plan (QIP) were discussed with Mrs Deborah Moore, 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 11 May 2017

The most recent inspection was an unannounced care inspection undertaken on 11 May 2017. There were no further actions required to be taken following the most recent 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: 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 and the home's deputy manager.

The following records were examined during the inspection:

- Five residents' finance files
- Four residents' individual written agreements
- Three residents' cash agreements
- The residents' guide
- Records of safe contents
- Records of residents' lost property
- A sample of records from hairdressing and podiatry services
- A sample of records from purchases undertaken on behalf of residents
- A sample of records from monies deposited at the home on behalf of residents
- Financial policies and procedures
- Signatory list of staff authorised to manage residents finances
- One record of resident's personal property.

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 11 May 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 four residents were counted, the amount retained agreed to the balance recorded at the home.

It was noticed that one resident had incurred a negative balance in relation to monies held at the home. The inspector discussed this finding with the registered manager to determine how purchases and services e.g. hairdressing were paid for on behalf of the resident. The registered manager confirmed that the home would pay for the purchases or services and subsequently recoup the monies from the resident's representative. It was noted that this practice was not included in the financial policies and procedures operated at the home. This was identified as an area for improvement.

An up to date safe contents book was in place at the time of the inspection. Discussion with staff confirmed that lost property belonging to unidentified residents was held at the time of the inspection. A record of the items maintained was also in place. It was noted that the items were kept separately from the safe place. An area for improvement was identified for a system to be implemented for these items to be retained within the safe place.

Discussion with the registered manager confirmed that all staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults.

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 safe place for residents to deposit items for safekeeping, the controls surrounding the safe place and staff involved in managing residents' finances having adult safeguarding training.

Areas for improvement

Two areas for improvement were identified. These were in relation to updating the financial policies and procedures and for the system of retaining residents' lost property to be reviewed.

	Regulations	Standards
Total number of areas for improvement	0	2

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 acted as an appointee for any resident, i.e. a person authorised by the Social Security Agency (SSA) 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 monies held on behalf of residents were reconciled on a monthly basis. As in line with good practice the records of the reconciliations were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff.

A provision was included within the residents' agreements for residents or their representatives to be informed one month in advance of any increase in fees. Review of records evidenced that copies of letters sent to residents or their representatives informing them of previous increases in fees were retained at the home.

Discussion with the registered manager confirmed that no bank accounts were operated on behalf of any resident.

Discussion with the registered manager and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. The registered manager informed the inspector that forms were located within residents' rooms for the person bringing personal items into the home on behalf of residents to complete. Discussions also confirmed that all items of furniture located within residents' rooms were owned by the home.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies did not reflect all of the practices currently operated at the home e.g. the procedure for staff to purchase items and pay for services on behalf of

residents. An area for improvement has previously been listed under section 6.4 of this report for the financial policies and procedures to be updated.

Areas of good practice

There were examples of good practice found in relation to recording the reconciliations of residents' monies and informing residents or their representatives of increases in the weekly fee.

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.

Review of records and discussion with staff confirmed that "Residents Cash Agreements" were provided to residents or their representatives. A review of three residents' files showed that cash agreements were in place for all three residents. The agreements outlined the terms and conditions for staff at the home retaining residents' monies. The forms also listed the items members of staff were permitted to purchase on behalf of residents. The agreements were signed by the residents' representatives and a representative from the home.

The home did not provide a transport scheme at the time of the inspection. Discussion with the registered manager 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 the registered manager confirmed that arrangements were in place to offer support for residents managing their own monies.

Areas of good practice

There were examples of good practice found in relation to providing residents with cash agreements, facilitating journeys on behalf of residents and offering support to residents or their representatives for managing residents' 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.

Review of records confirmed that copies of payment remittances from the health and social care trust showing the weekly fee for each care managed resident were retained at the home. The remittances also showed the amount of fees paid by the trust on behalf of residents and the contribution to be paid directly by the residents towards their fee. Records were also available showing the amount received from private residents for their fee.

Review of records of payments made by, or on behalf of, two private residents confirmed that the amounts received agreed to the contribution owed by each resident.

A residents' guide was in place at the time of the inspection which included the details of the services provided to residents as part of their weekly fee. The guide also included a list of the additional services provided at the home to be paid by residents e.g. hairdressing.

The guide included a written agreement which was issued to residents on admission to the home. Review of five residents' files (two of which were private residents) evidenced that individual written agreements were in place for four of the residents. Discussion with the registered manager confirmed that the agreement for the remaining resident had recently been forwarded to the resident's representative to be agreed and signed.

It was noted that the agreements did not show the current weekly fee paid by, or on behalf of, the residents. All four agreements reviewed were signed by the resident or their representative and a representative from the home. An area for improvement was identified for residents' agreements to be updated to show the current fee paid by, or on behalf of, residents.

An additional third party contribution (top up) was paid on behalf of care managed residents. Review of records and discussion with staff confirmed that the additional amount was for an ensuite room and an ensuite room with a shower. Records also confirmed that the additional third party contribution was paid to the home via the Health and Social Care Trust. Two of the written agreements reviewed showed that one of the agreements did not include the amount of the third party contribution and the other agreement did not show the current amount paid on behalf of the resident. This was identified as an area for improvement.

Three of the agreements reviewed, which were for care managed residents, showed that the terms and conditions of the agreements were not consistent with the terms and conditions of the contract between the registered persons and the health and social care trust i.e. the amount of fees paid by a resident when they are temporarily absent from the home. This was identified as an area for improvement.

Discussion with the registered manager confirmed that care managed residents were not paying an additional amount towards their fee over and above the amount agreed with the health and social care trusts.

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 transactions undertaken on behalf of residents including purchases of items and payments for additional services e.g. hairdressing. The transaction sheets were also used to record monies deposited at the home on behalf of residents.

A review of four records of purchases undertaken by staff, on behalf of two residents, showed that the details of the purchases were recorded in the residents' transaction sheets. Receipts from the purchases were available at the time of the inspection. Two signatures were recorded against each of the transactions.

It was policy for staff to purchase essential items for residents on-line, e.g. toiletries. A review of a sample of records showed that items purchased and their associated costs were recorded against the residents' transaction sheets. It was noticed that this practice was not included in the financial policies and procedures operated at the home. This was identified as an area for improvement.

The procedure for on-line purchases was not included as a provision within either the residents' written agreements or the residents' cash agreements. The inspector highlighted to the registered manager that the inclusion of the provision would allow residents or their representatives to agree or opt out of the arrangement. This was identified as an area for improvement.

Two records of payments to the hairdresser and one to the podiatrist were reviewed. Receipts were available from all three transactions. It was noticed that, as in line with good practice, the hairdresser and podiatrist had signed the records, along with two members of staff, to confirm that the service took place and that the hairdresser and podiatrist had received payment.

The registered manager was commended on the records retained for the hairdresser. A file was retained of the transactions undertaken. The records within the file included the name of the residents receiving the service and the details of the treatment provided. The amount charged to each resident was also recorded. The file also included a list of the signatures of members of staff (including the hairdresser) authorised to sign the records. An up to date price list of the services charged to residents was also retained within the file.

Two records of monies deposited at the home on behalf of two residents were reviewed. The amounts deposited were recorded in the residents' transaction sheets. Two signatures were recorded against each of the transactions. It was noted that as in line with good practice the person depositing the monies, on behalf of the resident, was one of the signatures recorded.

The inspector discussed the recording of residents' transactions with staff. It was noticed that a number of entries had either been written over or scored out. No initials were recorded against the amendments and no explanation for the errors was recorded. An area for improvement was identified for the system of recording residents' transactions to be reviewed in order to improve the accuracy of recording and to facilitate the audit process.

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 in relation to, retaining records of fees received, written agreements in place for residents, retention of receipts from purchases, records from hairdressing treatments and records of monies deposited on behalf of residents.

Areas for improvement

Six areas for improvement were identified during the inspection. These related to: updating residents' written agreements with the current fee, updating agreements to show the amount of third party contributions paid on behalf of residents, updating agreements for care managed residents to be consistent with the health and social care trust's contract, update financial policies and procedures to include the procedure for on-line shopping, update either residents agreements or cash agreements with provision for on-line shopping and review system of recording transactions on behalf of residents.

	Regulations	Standards
Total number of areas for improvement	0	6

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Deborah Moore, 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 return the completed QIP via Web Portal 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 the DHSSPS Residential Care Homes Minimum Standards, August 2011.	
Area for improvement 1 Ref: Standard 20.10 Stated: First time To be completed by: 31 July 2017	The registered person shall ensure that the financial policies and procedures operated at the home are updated to include all of the financial procedures undertaken by staff on behalf of residents e.g. the procedure for staff to purchase items on behalf of residents. The policies should include a provision for reducing the risk of residents incurring a negative balance and how purchases and services will be paid for these residents. A record should be retained showing that staff have read and understood the revised policies and procedures. Ref: 6.4
	Response by registered person detailing the actions taken: Completed - Financial P&P's have been updated to show all financial procedures undertaken by staff, and provision in place to reduce the the risk of residents having a negative balance. Staff have signed a sheet to show they have read and understood the updates.
Area for improvement 2 Ref: Standard 20.14 Stated: First time To be completed by: 31 July 2017	The registered person shall implement a system to ensure that residents' lost property is retained within the safe place. Ref: 6.4
	Response by registered person detailing the actions taken: Completed - all lost property is locked in a cupboard in a locked room.
Area for improvement 3 Ref: Standard 4.2 Stated: First time To be completed by: 15 August 2017	The registered person shall update the residents' written agreements to show the current amount paid by the health and social care trust and the current contribution paid by residents. Copies of the signed agreements should be retained within residents' files. Ref: 6.7
	Response by registered person detailing the actions taken: Will be completed by 15 th August 2107 - Currently updating these to show the amounts paid by trusts and residents.
Area for improvement 4 Ref: Standard 4.2	The registered person shall update residents' agreements to show the current amount of the third party contribution paid on behalf of residents.

Stated: First time	Ref: 6.7
To be completed by: 15 August 2017	Response by registered person detailing the actions taken: Will be completed by 15 th August 2017- residents agreements will be updated to show third party contributions.
Area for improvement 5 Ref: Standard 4.2 Stated: First time To be completed by: 15 August 2017	<p>The registered person shall update the written agreements for care managed residents in order to be consistent with the terms and conditions of the contract between the registered persons and the health and social care trust i.e. the amount of fees paid by a resident when they are temporarily absent from the home.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: Will be completed by 15th August 2017- agreements shall be updated to include terms and conditions of the contract between the registered persons and the trust.</p>
Area for improvement 6 Ref: Standard 20.10 Stated: First time To be completed by: 31 July 2017	<p>The registered person shall ensure that the financial policies and procedures operated at the home are updated to include the policy for purchasing items on behalf of residents on-line.</p> <p>A record should be retained showing that staff have read and understood the revised policies and procedures.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: Completed - P&P's have been updated to include a section on purchasing items from online grocery store etc. Staff have signed a sheet to state they have read and understood.</p>
Area for improvement 7 Ref: Standard 4.2 Stated: First time To be completed by: 15 August 2017	<p>The registered person shall update either the residents' written agreements or residents' cash agreements to ensure that residents or their representatives are informed of the practice of purchasing items on-line.</p> <p>A provision should be included for residents or their representatives to agree or opt out of the arrangement.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: Will be completed by 15th August 2017 - I am currently updating petty cash agreements with a section to give residents/representatives the option to opt out of online purchasing.</p>
Area for improvement 8 Ref: Standard 20.14	<p>The registered person shall implement a robust system for recording residents' transactions in order to improve the accuracy of recording and to facilitate the audit process. Errors should be crossed out and a new line used to record the transaction. A reason for the error should</p>

Stated: First time To be completed by: 31 July 2017	be recorded and initialled by the staff member recording the transaction. The practice of writing over errors should cease immediately. Ref: 6.7
	Response by registered person detailing the actions taken: Completed - Staff have been informed that errors should not be over written and instead a reason given for the error and a new line created for a transaction. Staff have signed a sheet to say they understand this.

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



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