



The **Regulation** and
Quality Improvement
Authority

Secondary Unannounced Finance Inspection

Name of Establishment:	Louisville
Establishment ID No:	1267
Date of Inspection:	13 August 2014
Inspector's Name:	Joe McRandle
Inspection No:	20348

The Regulation And Quality Improvement Authority
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

1.0 General Information

Name of Home:	Louisville
Address:	Glen Road Belfast BT11 8BU
Telephone Number:	02890604316
E mail Address:	louisvillegroup@hotmail.co.uk
Registered Organisation/ Registered Provider:	Mr Raymond Liam Murphy
Registered Manager:	Stephanie J Shannon
Person in Charge of the Home at the Time of Inspection:	Mr Raymond Liam Murphy
Number of Registered Places:	48
Number of Service Users Accommodated on Day of Inspection:	45
Date and Time of Previous Finance Inspection:	6 September 2012
Date and Time of Inspection:	13 August 2014 10am - 6.45pm
Name of Finance Inspector:	Joe McRandle

1.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect domiciliary care agencies. A minimum of one inspection per year is required.

This is a report of a secondary inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection are being met.

1.1 PURPOSE OF THE INSPECTION

The purpose of this inspection was to consider whether the service provided to service users was in accordance with their assessed needs and preferences and was in compliance with legislative requirements, minimum standards and other good practice indicators. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services.

The aims of the inspection were to examine the policies, procedures, practices and monitoring arrangements for the provision of nursing care, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Nursing Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Homes Minimum Standards (2008)

Other published standards which guide best practice may also be referenced during the inspection process.

1.2 METHODS/PROCESS

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

- Discussion with staff
- Examination of records
- Evaluation and feedback

1.3 INSPECTION FOCUS

The inspection sought to assess progress with the issues raised during and since the previous finance inspection (if any) and to establish the level of compliance achieved with respect to the following theme and associated statements:

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

Statement 1: The home maintains complete and up to date records in respect of the terms and conditions of the provision of personal care and accommodation

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 home 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 services are transparent and agreed in writing with the service user/their representative

The registered provider and the inspector have rated the home's compliance level against each criterion.

The table below sets out the definitions that RQIA has used to categorise the service's performance:

Guidance - Compliance statements		
Guidance - Compliance statements	Definition	Resulting Action in Inspection Report
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report.
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report.
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report.
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report.
4 - Substantially Compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report.
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and comment being made within the inspection report.

2.0 Profile of Service

Louisville Private Nursing Home is situated just off the Glen Road in West Belfast. Louisville shares a site with Colinvale Court Private Nursing Home. The home is centrally located within the community and is very convenient to shops, community services and other amenities. There are good parking facilities within the grounds of the home and the facility is on a public transport route with bus stops adjacent to the premises.

The home is a two storey building and comprises of 40 single bedrooms and four double bedrooms. The building was originally the "St Louis Convent" before being converted to a nursing home.

There are a number of seating areas and lounges throughout the home giving patients a choice of where to sit. One larger lounge situated on the ground floor can be used for functions organised within the home for patients.

A designated smoking area is provided for patients on the ground floor.

The dining room is spacious and is used by the majority of patients.

The home mainly caters for patients from the local community or those who have family nearby; therefore, there is a strong community bond which is reflected in the relaxed atmosphere within the home.

Louisville Private Nursing Home is registered to provide services for up to 48 patients over 65 years of age who require nursing care.

The registered manager is Ms Stephanie Shannon who has overall management responsibility for both Louisville Private Nursing Home and Colinvale Court Private Nursing Home.

3.0 Inspection Findings:

Statement 1: The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care

Service user agreements were examined at the previous financial inspection on 6 September 2012. The agreements showed that the weekly fee charged to service users was in line with the amounts agreed with the placing Health and Social care Trusts. The services provided for the weekly fee and the method of payment of the fee were also included within the agreement.

The finance manager informed the inspector during the inspection on 13 August 2014 that agreements were being finalised for service users that were recently placed at the home.

The home has achieved a compliance level of substantially compliant for this theme.

Statement 2: Arrangements for receiving and spending service users' monies on their behalf are transparent, agreed to and the appropriate records are maintained

Records of six purchases made on behalf of service users by members of staff were examined; all of the records had the required signatures. Receipts from all but one of the purchases were retained at the home.

Two further purchases were examined relating to an item of furniture and a television. Records showed relatives of the service user withdrew the monies to buy the items. The finance manager produced a receipt which was signed by the relatives confirming the items were received at the home. The service user's care plan contained a record of the items being recorded as belonging to the service user.

Payments to the hairdresser were also examined; as in line with best practice the record of the transaction was signed by a staff member and countersigned by the hairdresser.

Two further records examined showed monies were received on behalf of a service user and subsequently withdrawn by the service user. The required signatures were in place for both transactions.

A requirement is listed within the Quality Improvement Plan (QIP) for the policy for the retention of receipts from purchases made on behalf of service users to be reinforced with staff. Where a receipt is not available from a purchase, the record should be annotated to reflect this.

The book used to record the above transactions contained a sample of staff signatures for audit purposes. Guidance for staff when signing the transaction book was also included. The guidance states that the second signatory is confirming the remaining balance of monies held on behalf of the service user following the transaction.

The current system for recording transactions was implemented by the registered person following a finance inspection in April 2012. A requirement is listed within the QIP to this report for a further review of the system due to the increase in the transactions and for clearer details to be recorded against the transaction undertaken on the service users' behalf.

The inspector examined the financial arrangements for one service user who was under the control of the Office of Care and Protection (OCP); this service user had been identified during a previous inspection in April 2012.

The finance manager informed the inspector that the service user had recently deceased. On examining the service user's file the inspector noticed that a significant amount was still retained in the bank account managed by

the registered manager as authorised by OCP. The inspector was further informed by the finance manager that the registered manager was not available to manage the bank account.

The registered person informed the inspector that the service user's care manager at the Trust was informed of the situation and was dealing with the issue. The inspector noted that there were no withdrawals from the bank account as in line with the certificate issued by OCP.

At the time of issuing this report the registered person has forwarded a copy of a letter sent to OCP requesting advice on closing the bank account. OCP have also forwarded RQIA a copy of their response to the registered person.

A requirement is listed within the QIP for the registered person to inform RQIA of the actions taken following the guidance from OCP.

RQIA is in the process of contacting the care manager to discuss the findings.

Records showed that the "pooled" bank account operated to retain service users' monies is reconciled on a regular basis, it was noticed however that the reconciliation was of the deposits into and withdrawals from the bank account. The balance remaining in the bank account on behalf of service users was not included in the reconciliation.

A requirement is listed in the QIP for the reconciliation of the "pooled" bank account to include the remaining balance of monies held on behalf of service users.

The finance manager informed the inspector that a second savings bank account was opened on behalf of service users by the registered person since the last finance inspection in September 2012. The second bank account was not included in the regular reconciliation of monies held on behalf of service users.

When asked, the registered person informed the inspector that the second bank account was opened in response to a previous request by RQIA or the Trust for service users to receive interest on their monies. The inspector informed the registered person that RQIA had previously recommended that the home try to facilitate the opening of individual savings accounts for service users with substantial monies in the "pooled" current account.

The registered person also informed the inspector that care managers at the Trusts were not informed prior to the opening of the second bank account.

On examining statements from the second bank account the inspector confirmed that the only activity on the account was the transferring of monies from the service users' current account to the savings account.

A requirement is listed within the QIP for the registered person to contact the relevant care managers at the Trusts to inform them that the second bank

account is in operation. The second bank account must be included in the regular reconciliation of monies held on behalf of service users.

RQIA is in the process of contacting the commissioning Trust in relation to the second bank account.

The registered person acts as a corporate appointee for two service users. The required documentation from the Social security Agency was retained in the service users' files. As in line with the requirements of a corporate appointee the registered person provided written authorisation for the finance manager to manage the service users' benefits. The written authorisation was retained in the service users' files.

The inspector noticed that the two service users' personal allowance monies were handed over to family members. The inspector asked the registered person for clarification regarding this practice. The registered person informed the inspector that this was a long standing arrangement agreed with the family members and that the service users' care managers were aware of the practice. Records showed that the family members signed out the monies. The inspector also noticed that sufficient monies were held on behalf of the two service users to make purchases on their behalf.

A requirement is listed within the QIP for the service users' financial arrangements to be updated to include the arrangement for their personal allowance monies to be handed over to family members. The arrangements should be shared with the service users' care managers at the Trust.

RQIA is in the process of contacting the relevant care managers in relation to this finding.

The inspector examined records of the benefits received on behalf of the two service users for which the registered person acts as appointee. It was noticed that the registered person was not taking the full amount from the service users' benefits for payment towards their fee. This was due to the system used at the home to record the benefits being received.

Following a discussion with the finance manager and the registered person it was agreed that the home would review the system used to record the benefits received on behalf of the two service users. The new system will show the correct amount of benefits being retained by the registered person towards the service users' fee and the remaining amount of personal allowance monies (including mobility monies) paid over to the service users.

A requirement is listed in the QIP to this effect.

The registered person is to inform RQIA and the Trust of the outcome of the decision in relation to the two service users being undercharged for their contribution towards their fee for a specific period of time.

The home has achieved a compliance level of moving towards compliance compliant for this theme.

Statement 3: A safe place is provided within the home for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained

The home provides a safe place for the retention of service users' monies and valuables. The inspector examined amounts held at the home for a number of service users, the amounts held agreed to the balance recorded at the home.

The inspector discussed the current arrangements for storing service users' monies and valuables. The registered person agreed to review the storage facilities.

A requirement is listed within the QIP with regard to this finding.

Records showed that the home was retaining a bank card for one service user. On examining the safe place the service user's bank card could not be found, the record did not show the bank card being signed out. A further record showed that a sum of money was deposited at the home on behalf of the service user. The record was signed by a staff member and the service user's care manager from the Health and Social Care Trust.

When asked by the inspector as to the whereabouts of the bank card, the finance manager stated that the service user's care manager retains the bank card. The finance manager contacted the care manager during the inspection who confirmed that the bank card was held at the care manager's office.

The finance manager also informed the inspector that the bank statements for the account are forwarded to the service user. A requirement is listed within the QIP for the financial arrangements for this service user to be updated to include the procedure for retaining and using the service user's bank card. The arrangements should be shared with the care manager at the Trust.

A further requirement is listed in the QIP for the policy for signing valuables belonging to service users in and out of the safe place are strengthened with staff.

The inspector was concerned with the oversight of this bank account and informed the registered person that RQIA will contact the service user's care manager to discuss this finding.

The inspector and finance manager discussed the amount of monies held for one service user. Records showed that there were no purchases made on behalf of the service user for a considerable period. The finance manager informed the inspector that the service user's family member purchases essentials, e.g. toiletries on behalf of the service user.

A recommendation is listed within the QIP for the registered person to contact the service user to review the amount of monies held on their behalf.

The home has achieved a compliance level of moving towards compliance compliant for this theme.

Statement 4: Arrangements for providing transport to service users are transparent and are agreed in writing with the service user/their representative

At the time of inspection, the home did not provide transport service to service users.

The home has achieved a compliance level of 'not applicable' for this theme.

4.0 Follow-Up on Previous Issues

No	Regulation Ref	Requirements	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1	Regulation 5	Outstanding agreements for patients to be followed up by registered manager. The agreements should be signed by the patients or their representative, (if patient deemed incapable of managing their own affairs) and a representative of the home.	Agreements issued to all service users. Finance Manager informed inspector that any outstanding agreements were for service users that have only been recently placed at the home.	Moving towards compliance.

No	Minimum Standard Ref	Recommendations	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1	15.8	<p>Trust(s) should be informed in writing, at least annually, of the amount of monies or valuables held by the home on behalf of patients incapable of managing their own affairs.</p> <p>A copy of the correspondence should be retained in the patients' files.</p>	<p>Email sent to care managers indicating amounts held on behalf of service users. Inspector showed copy of emails to Trust care managers.</p>	<p>Moving towards compliance.</p>

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Mr Raymond Liam Murphy as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

Where the inspection resulted in no recommendations or requirements being made the provider/manager is asked to sign the appropriate page confirming they are assured about the factual accuracy of the content of the report.

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.

Enquiries relating to this report should be addressed to:

Joe McRandle
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT



The inspection report dated 13 August 2014 for this service is not currently available. However, it is anticipated that it will be available soon. If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk

QUALITY IMPROVEMENT PLAN

SECONDARY UNANNOUNCED FINANCE INSPECTION

LOUISVILLE

13 AUGUST 2014

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Mr Raymond Murphy, registered person and Mr Barry Murphy, finance manager during the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

Registered providers / managers should note that failure to comply with regulations may lead to further enforcement and/ or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider / manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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.

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 Nursing Homes Regulations (NI) 2005

NO	REGULATION REFERENCE	REQUIREMENTS	NUMBER OF TIMES STATED	DETAILS OF ACTION TAKEN BY REGISTERED PERSON(S)	TIMESCALE
1	19 (2) Schedule 4 (9)	The registered person must ensure that the policy for the retention of receipts from purchases made on behalf of service users is reinforced with staff. Where a receipt is not available from a purchase, the record should be annotated to reflect this.	Once		30 September 2014
2	19 (2) Schedule 4 (9)	A review of the system used to record transactions made on behalf of service users should be undertaken. Clearer details of the transaction should be recorded.	Once		From the date of inspection
3	14 (4)	The registered person must inform RQIA and the Trust of the outcomes of the guidance from OCP in relation to the bank account for the deceased service user identified during the inspection.	Once		17 October 2014
4	19 (2) Schedule 4 (9)	The registered person must ensure that the remaining balance of monies held in the service users' "pooled" bank account is included in the reconciliation process.	Once		13 August 2014

5	14 (4)	The registered person is required to ensure that relevant care managers at the Trusts are informed of the second bank account used to retain service users' monies.	Once		30 September 2014
6	19 (2) Schedule 4 (9)	The second bank account must be included in the reconciliation of monies held on behalf of service users.	Once		From the date of inspection
7	19 (2) Schedule 4 (3)	The registered person must ensure that the financial arrangements for the two service users identified during the inspection are updated to include the practice of handing over their personal allowance monies to family members. The arrangements should be shared with the service users' care managers at the Trust.	Once		30 September 2014
8	19 (2) Schedule 4 (9)	The registered person should review the system used to record the benefits received on behalf of the two service users identified during the inspection. The new system should show the correct amount of benefits being retained by the registered person towards the service users' fee and the remaining amount of personal allowance monies (including mobility monies) paid over to the service users.	Once		30 September 2014
9	19 (2) Schedule 4 (8)	The registered person should inform RQIA and the Trust of the outcome of the decision in relation to the two service users identified during the inspection undercharged their contribution towards their fee for a specific period of time.	Once		30 September 2014

10	19 (2) Schedule 4 (9)	The registered person should review the current arrangements for storing service users' monies and valuables.	Once		From date of inspection
11	19 (2) Schedule 4 (3)	<p>The registered person must ensure that the financial arrangements for the service user identified during the inspection are updated to include the procedure for retaining and using the service user's bank card.</p> <p>The arrangements should be shared with the care manager at the Trust.</p>	Once		30 September 2014
12	19 (2) Schedule 4 (9)	The registered person must ensure that the policy for signing valuables belonging to service users in and out of the safe place is strengthened with staff.	Once		From date of inspection

RECOMMENDATIONS

These recommendations are based on Nursing Homes Minimum Standards (2008), research or recognised sources. They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

NO	MINIMUM STANDARD REFERENCE	RECOMMENDATIONS	NUMBER OF TIMES STATED	DETAILS OF ACTION TAKEN BY REGISTERED PERSON(S)	TIMESCALE
1	15.3	<p>It is recommended that the registered person contacts the service user identified during the inspection to review the amount of monies held on their behalf.</p> <p>A record of the review including any agreement to retain or reduce the monies held should be retained in the service user's file.</p>	Once		30 September 2014

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	

QIP Position Based on Comments from Registered Persons				Inspector	Date
		Yes	No		
A.	Quality Improvement Plan response assessed by inspector as acceptable				
B.	Further information requested from provider				