

**REGULATION AND QUALITY IMPROVEMENT**  
**AUTHORITY**

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**ANNOUNCED FINANCE**  
**INSPECTION REPORT**

**- for -**

**MANOR LODGE**

**- on -**

**8 APRIL 2014**

**NURSING HOME  
FINANCE INSPECTION  
2013/14**

**1.0 GENERAL INFORMATION**

<b>Name of Home:</b>	Manor Lodge
<b>Address:</b>	5 The Manor Blacks Road Dunmurry BT10 0NB
<b>Telephone:</b>	02890629331
<b>Proprietor Organisation:</b>	Miss Maura McIntyre
<b>Registered Organisation / Registered Provider:</b>	Mr James McCall Four Seasons Health Care
<b>Registered Manager:</b>	Miss Maura McIntyre
<b>Number of Registered Places:</b>	39
<b>Occupancy on Date of Inspection:</b>	25
<b>Finance Inspector:</b>	Briege Ferris
<b>Date and Times:</b>	8 April 2014 9.00 – 13.00
<b>Previous Announced Finance Inspection:</b>	None

## 2.0 INSPECTION COVERAGE

Description	Regulation Statutory Rule No 160	Minimum Standard	Evidence	Findings
<b>Charges &amp; payments</b>	4 (1)  4 (1) (b)	3.1 & 25.10  3.2	Patient's guide:  Terms and conditions, amount and method of payment	The inspector was provided with a copy of the home's service user guide on the day of inspection. The inspector noted that the guide contained information on: the home's scale of charges; the charges for additional services facilitated within the home; insurance arrangements and information on service users bringing their own furniture and personal possessions into the room to be occupied by them.
	4 (1) (c)  4 (4)	3.2	Standard form of contract. (This would include a copy of the trust(s) contract)	Copies of the home's contracts with the trust(s) are retained at the organisation's head office and these were therefore not reviewed on the day of inspection. Further information on the home's standard form of contract is included in the following section of the report.

Description	Regulation Statutory Rule No 160	Minimum Standard	Evidence	Findings
<b>Information about fees</b>	5 (1)	4.1	Statement to each patient of fees payable for:	<p>The inspector discussed the individual financial circumstances of service users in the home with the home's administrator; and selected three files and associated records for further examination.</p> <p>Of the three files examined, the inspector noted that in all three cases, the service user's contract with the home was either out of date and therefore did not reflect the current fee arrangements with the home or it did not contain details of the total fee for the service user.</p> <p>The inspector was also provided with the home's current form of agreement for new individual service users and on review, the inspector noted that this agreement also did not fully reflect the requirements of Regulation 5 of the Nursing Homes Regulations (NI) 2005 or DHSSPS Nursing Homes Minimum Standard 4.2.</p> <p>Specifically, the inspector noted that: the fees sections did not clearly reflect by whom each element of the fee (where relevant) would be paid and which method would be used by each party as well as the duration of the service user's stay in the home.</p> <p>A copy of the current charges for services facilitated within the home (such as hairdressing) should be kept with the terms</p>
	5 (1) (a) (i)	4.2	Accommodation, including food.	
	5 (1) (a) (ii)	4.2	Nursing	
	5 (1) (a) (ii)	4.2	Services to which each fee relates	
	5 (1) (b)	4.2	Method of payment and by whom	

				<p>and conditions document in the service user's file (as this should form part of the overall agreement with the service user).</p> <p>Requirement 1 is listed in the Quality Improvement Plan (QIP) in respect of this finding.</p>
	5 (2) (a) & (b)	4.6 4.7	Notification of increase or variation in fees	A review of the records held evidenced that the home had previously notified service users/their representatives of any increase in the fee or variation in the method of payment or person(s) by whom the fees are payable.
	5 (3) (a) & (b)	4.2	Statement specifying any nursing contributions	Where the home is in receipt of a nursing contribution for any service user, these details should be outlined within the individual agreement with the service user, including the date the payment commenced and the amount of the nursing contribution. Requirement 1 in respect of providing up to date agreements to each service user (including current fees and financial arrangements) has been listed above.

Description	Regulation Statutory Rule No 160	Minimum Standard	Evidence	Findings
<b>Patients' money and valuables</b>	18 (2) (l)	15.2	Place for deposit of money & valuables for safe keeping and arrangements to record in writing all transactions	The inspector examined the safe place within the home and was satisfied with the controls around the physical location of the safe place and the persons with access.
	19 (2)  Schedule 4.9	15.3		<p>The inspector undertook a count of the cash balances deposited for safekeeping and noted that these agreed to the records held by the home.</p> <p>In reviewing the safe record of valuables, the inspector noted that reconciliations of the valuables were not being performed and recorded at least quarterly.</p> <p>Requirement 2 is listed in the QIP in respect of this finding.</p>
	19 (2)  18 (2) (d)  Schedule 4.10	Appendix 2	Record of furniture & personal possessions. Policy and procedure in place	<p>The inspector requested the inventory/property records for three service users in the home. The inspector noted that all three records sampled had been signed by only one person, not two.</p> <p>In addition, the inspector also noted that different staff members had recorded varying levels of detail of the service users' possessions and that maintaining consistency in recording items was important.</p> <p>Requirement 3 is listed in the QIP in respect of this finding.</p>

				The inspector noted however, that in one record, the colour and make of a TV owned by a service user had been recorded and referenced this good practice to staff present during the inspection.
<b>Records</b>	19 (4)	27.6	Policy in place for retention of financial records for not less than six years from date of last entry	The home's administrator confirmed that records are retained for a period of at least six years.
<b>Acting for patients</b>	22 (1) (a) & (b) 22 (2)	15.1 15.2	Monies belonging to any patient paid into an account in the name of that patient and not paid into a business account used in carrying on the establishment	A review of the documentation evidenced that the home has a pooled bank account used exclusively for the safekeeping of service users' personal monies which are received by the home for expenditure on the service users' behalf such as hairdressing, toiletries etc.  As noted above, balances of service user monies held for safekeeping by the home (whether in cash or in the personal allowance bank account managed by the home) are reconciled on a regular basis and the inspector was able to obtain evidence of this process on the day of inspection. Good practice was observed.
	19 (2) 22 (3) Schedule 4.3	15.2 15.10 15.11	A record is kept at the home of persons acting as an appointee or agent	Discussion with the home's administrator and a review of the records evidenced that on the day of inspection, no representative of the home was acting as nominated appointee for any service user.

Description	Regulation Statutory Rule No 160	Minimum Standard	Evidence	Findings
<b>Records to be kept in a nursing home</b>	19 (2)  Schedule 4.3	15.4	Record of patients' fees received	<p>A review of the records evidenced that the home retain copies of the trust remittances confirming the weekly fee for each service user in the home (and the amount to be contributed by each service user, where relevant.)</p> <p>The inspector reviewed the records relating to amounts charged to a selection of service users contributing to their fees and was satisfied that the correct amounts were being charged by the home. The inspector also reviewed the records of cash lodged in respect of fees and was able to trace this record to the duplicate receipt written on the day. Good practice was observed.</p>
	19 (2)  Schedule 4.3	15	Record of financial arrangements handled by the home	<p>Discussions with the home's administrator and a review of the records evidenced that the home were not acting as nominated appointee for any service user on the day of inspection. The home does however; receive monies from service user representatives to be spent by the home on the service user's behalf.</p> <p>A review of a sample of the records revealed that the home had personal allowance contracts in place with the service users/their representatives in this regard.</p> <p>The inspector reviewed the records for expenditure incurred on behalf of service</p>



				<p>users such as that in respect of hairdressing, podiatry, newspapers or other non-frequent sundry items. The inspector noted that the home maintain clear records detailing income and expenditure, together with other records to substantiate each transaction, such as copy receipt for cash lodged or hairdressers or shop receipt for expenditure. The inspector traced a sample of transactions and was able to evidence the all of the relevant documents.</p> <p>In reviewing a sample of receipts however, the inspector noted two instances of representatives of the home using a personal shop loyalty card when purchasing items with service users' money. The inspector highlighted that this practice was unacceptable.</p> <p>Requirement 4 is listed in the QIP in respect of this finding.</p> <p>In reviewing the income and expenditure records for one service user, the inspector noted that the home had transferred an amount belonging to a service user (and held within the pooled service users' bank account) to the personal bank account of the service user, which is managed outside of the home.</p> <p>The inspector could not evidence any correspondence on the service user's finance file in respect of this transfer.</p>
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				<p>The inspector requested the care file held for the service user to establish whether this would shed any light and noted that the latest HSC trust care review was filed therein. An examination of the care review minute evidenced a discussion regarding a significant purchase for the service user to be made by the service user's representatives. In order to facilitate the purchase, the home was requested to transfer monies to the personal bank account. The care review minute also detailed that that home should obtain a copy of the receipt for the agreed purchase. The inspector could not evidence a copy of the receipt on the day and subsequent discussion with the home's administrator confirmed that the receipt had not been obtained as requested.</p> <p>Requirement 5 is listed in the QIP in respect of this finding.</p>
	<p>19 (2)</p> <p>Schedule 4.8</p>	<p>15.2</p> <p>15.4</p>	<p>Record of the nursing home's charges to patients, including any extra amounts payable for additional services not covered by those charges and amounts paid by or in respect of each patient</p>	<p>The home maintains copies of payment remittances from the commissioning trusts which detail the amount receivable by the home and the amount to be contributed by the service user/representative where relevant.</p> <p>The inspector examined a broad sample of transactions in respect of treatments by the hairdresser, podiatrist, newspapers, and other sundry items. In each case examined, the inspector was able to trace the record of these transactions to the duplicate record</p>

				within the home and to the original receipt.
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Description	Regulation Statutory Rule No 160	Minimum Standard	Evidence	Findings
<b>Records to be kept in a nursing home</b>	19 (2) Schedule 4.17	18	Record of charges made to patients for transport & amounts paid by or in respect of each patient	On the day of inspection, the home did not provide transport services to service users.
	19 (2) Schedule 4.18 (a) 19 (2) Schedule 4.18 (b)	18  18	Where patients collectively own the vehicles – record of amounts paid by or in respect of each patient running the vehicle  Record of journeys made and names of patients being transported	On the day of inspection, the home did not provide transport services to service users.
		18  Appendix 2	Policy & procedure in place for transport - use & provision	On the day of inspection, the home did not provide transport services to service users.

### **3.0 ENQUIRIES**

Enquiries relating to this report should be addressed to:

**Briege Ferris  
Finance Inspector / Quality Reviewer  
Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT**



**QUALITY IMPROVEMENT PLAN**  
**ANNOUNCED FINANCE INSPECTION**  
**MANOR LODGE**  
**8 APRIL 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 Jacinta Silva during or after 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	5 (1) (a) (b)	<p>The registered person must provide individual agreements to each service user currently accommodated in the home (or their representative) which detail the current fees and financial arrangements in place in respect to the individual service user.</p> <p>Individual service user agreements should comply with requirements under Regulation 5 of the Nursing Homes Regulations (Northern Ireland) 2005 and Standard 4.2 of the DHSSPS Minimum Standards for Nursing Homes 2008, which details the minimum components of the agreement. A copy of the signed agreement by the service user or their representative and the registered person must be retained in the service user's records.</p> <p>Where the service user or their representative is unable to, or chooses not to sign the agreement, this must be recorded. Where a HSC trust-managed service user does not have a family member or friend to act as their representative, the service user's individual agreement should be shared with the HSC trust care manager.</p>	One	Individual agreements detailing current fees and financial arrangements in place have been sent to each resident or their representative where applicable. These will be retained in the resident's records on their completion and return to the home.	20 May 2014

2	18 (2) (l)	The registered person should ensure that reconciliations of items deposited by service users in the safe place in the home are reconciled at least quarterly.	One	Reconciliation of items deposited for safe keeping has now been diarised to ensure quarterly checking	From the date of inspection
3	19(2) Schedule 4 (10)	The registered person must ensure that an up to date inventory is maintained of furniture and personal possessions brought into the home by all newly admitted service users. The registered person must also ensure that a retrospective record is made of the furniture and personal possessions owned by existing service users accommodated in the home. All inventory records should be updated on a regular basis. Any entry, whether an addition or disposal, must be dated and signed by two members of staff at the time of the entry. The registered person should advise staff of the importance of recording inventory details consistently. Items of significant value or those requiring electrical safety testing should be distinctly highlighted on the record for ease of identification.	One	Relevant staff have received guidance on recording of personal possessions and the need for consistency as well as highlighting valuable items for ease of identification. A review of all personal possessions brought into the home has been commenced by key workers and inventories will be signed by two staff members when updated.	20 May 2014
4	14 (4)	The registered person must ensure that representatives of the home do not use personal loyalty cards to benefit from purchases made on behalf of service users in the home.	One	All representatives of the home involved in purchasing on behalf of residents have been made aware of this. All receipts are checked by Home Manager.	From the date of inspection
5	19(2) Schedule 4 (3)	The registered person should ensure that evidence is obtained confirming that the monies transferred to the representative of the service user identified during the inspection were used for the intended purpose as described in the service user's most recent HSC Trust care review notes.	One	Communication has been received from the identified individual's Care Manager to state that although a funeral plan was discussed with the NOK at the time of the HSC Care Review this was not agreed by the	6 May 2014




				NOK and the record made in the HSC Care review notes is incorrect. There is documented evidence that that the monies transferred were placed in the personal account of the identified individual for the resident's own use.	
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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	Maura McIntyre
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Jim McCall <i>Carol Cousins</i>

CAROL COUSINS  
DIRECTOR OF OPERATIONS.

QIP Position Based on Comments from Registered Persons			Inspector	Date
	Yes	No		

QIP Position Based on Comments from Registered Persons				Inspector	Date
		Yes	No		
A.	Quality Improvement Plan response assessed by inspector as acceptable	✓			2 June 2014
B.	Further information requested from provider				