

# Finance Inspection Report 7 July 2016











# **Hob Green Country Home**

Type of Service: Residential Care Home Address: 41 Kirk Road, Ballymoney BT53 8HB

Tel No: 02827662620 Inspector: Briege Ferris

# 1.0 Summary

An announced inspection of Hob Green Country Home took place on 7 July 2016 from 10:20 hours to 12:40 hours.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the home was delivering safe, effective and compassionate care, and if the service was well led.

#### Is care safe?

Systems in place to safeguard residents' money and valuables were found to be operating effectively; no requirements were made. One recommendation was made in relation to introducing a written safe record.

#### Is care effective?

Controls in place in respect of documenting residents' money and valuables were found to be in place; however two areas for improvement were identified as part of the inspection. These related to records of hairdressing treatments facilitated in the home and ensuring that records of residents' furniture and personal possessions (in their rooms) are reviewed for each resident and kept up to date.

# Is care compassionate?

A review of a sample of records evidenced that residents or their representatives had over time, been sent written notification of any changes to the fees payable and the rationale for this. With the exception of receiving money from residents' representatives to pay for hairdressing and podiatry services, the home was not involved in supporting any resident with their money. No requirements or recommendations were made.

#### Is the service well led?

Governance and oversight arrangements were found to be in place and operating effectively. No requirements or recommendations were made.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (Updated 2011).

# 1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	0	2
recommendations made at this inspection	U	3

Details of the quality improvement plan (QIP) within this report were discussed with Mrs Mary Elizabeth (Betty) McVicker, 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.

# 1.2 Actions/enforcement taken following the most recent finance inspection

Other than those actions detailed in the previous QIP, there were no further actions required to be taken following the last inspection.

# 2.0 Service details

Registered organisation/registered provider: Hob Green Country Home/Elizabeth Kathleen Mary Lisk	Registered manager: Mrs Mary Elizabeth McVicker
Person in charge of the home at the time of inspection: Mrs Mary Elizabeth McVicker	Date manager registered: 1 April 2005
Categories of care: RC-MP(E), RC-I, RC-DE	Number of registered places: 9

# 3.0 Methods/processes

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that none of these incidents related to services users' money or valuables. The record of calls made to RQIA's duty system was also reviewed and this did not identify any relevant issue. The care inspector for the home was contacted and confirmed that there were no matters to be followed up from the previous care inspection.

During the inspection, we met with Mary Elizabeth McVicker, the registered manager. A poster detailing that the inspection was taking place was positioned at the entrance of the home, however no visitors or relatives chose to meet with the inspector.

The following records were examined during the inspection:

- The home's Statement of Purpose
- The Residents' Guide (Resident) Financial information Guide
- Three signed resident agreements
- A sample of correspondence to residents or their representatives detailing notification of changes to the fees payable
- A sample of records detailing hairdressing and podiatry services facilitated in the home
- The home's complaints book
- Written Policies in respect of:
  - o Management of Service Users' Money, Possessions and Financial affairs
  - Management of Service Users' Money
  - Gifts and legacies
  - o Prevention of abuse
  - Safeguarding vulnerable adults
  - Fees and funding
  - Whistleblowing
  - Record keeping
  - Retention of records
- The record of safe contents book
- A sample of correspondence in respect of the "residents' comfort fund"
- A sample of residents' property/furniture and personal possessions

# 4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 26 May 2016

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 specialist inspector at their next inspection.

# 4.2 Review of requirements and recommendations from the last finance inspection

A finance inspection of the home was carried out on 10 July 2006 on behalf of RQIA; the findings from that inspection were not brought forward as part of the inspection on 6 July 2016.

#### 4.3 Is care safe?

The registered manager confirmed that the home did not employ an administrator and that it was mandatory that all staff received training on the Protection of Vulnerable Adults (POVA). A training matrix was evidenced which identified when staff were due to receive this training.

The registered manager confirmed that no complaints had been received in respect of residents' money and valuables and this was borne out from a review of the home's complaints book.

The registered manager described how residents' family members were highly involved in supporting residents with their money and as such, the home had a very minimal role in handling residents' money or valuables. Mrs McVicker described that the home was involved only to the extent of receiving money from residents' representatives in order to pay for hairdressing and podiatry services facilitated within the home. There is further discussion on these arrangements in section 4.4 of the report.

The home had a range of policies and procedures in place to guide practice and day-to-day procedures relating to how residents' money and valuables were safeguarded; the inspector noted that these were easily accessible on the day. Policies in place included those addressing the prevention of abuse (including financial abuse) and whistleblowing.

During discussion, the registered manager confirmed that there were no current suspected, alleged or actual incidents of financial abuse, nor were there any finance-related restrictive practices in place for any resident. The home had a safe place available for the deposit of cash or valuables belonging to residents; the inspector was satisfied with the location of the safe place. On the day of inspection, no cash or valuables were being safeguarded on behalf of residents.

It was noted that the home's policy "Management of service users' money, property and financial affairs", there was reference to "the home will keep records and receipts of all possessions handed over to it for safekeeping". It was noted that the home did not have a safe record in place in order to evidence this and a recommendation was made for the home to have a safe record/book in place to record the deposit or withdrawal of valuables.

One area for improvement was identified during the inspection; this related to the introduction of a written safe record.

Number of requirements	0	Number of recommendations:	1

#### 4.4 Is care effective?

The home had a number of policies in place addressing record keeping and a specific policy addressing the retention of records.

The home did not provide transport services to residents; the registered manager stated that families were very involved in supporting residents with attendance at medical appointments etc.

Hairdressing and podiatry services were facilitated within the home. The cost of these was met by residents or their representatives, and as noted above, money was deposited with the home specifically for this purpose. The registered manager noted that families would be made aware of an impending visit by either the hairdresser or podiatrist and money would subsequently be lodged shortly before their visit. A new system to record the receipt of money deposited and spent on behalf of residents had recently been introduced. Individual books were in place to record income and expenditure on behalf of residents.

On the day of inspection, the books did not contain any entries as no money had been lodged. The registered manager explained that the new system had been introduced following a financial audit carried out (approximately six weeks prior) on behalf of the Northern Health and Social Care Trust. Mrs McVicker noted the record keeping arrangements which would be adhered to under the new measures, included countersigning each entry into the residents' books and checking (reconciling) the money on a regular basis (the inspector explained that any monies held should be reconciled at least every quarter).

Podiatry treatment records were available which for each treatment day detailed the date, the names of the residents treated, any other relevant comments by the podiatrist and the signature of the podiatrist. These records were consistently countersigned by the registered manager.

Records detailing hairdressing services had also been retained and for each treatment day; these detailed the name of the residents, whether the cost had been paid and the signature of the hairdresser. It was noted that these records had not been signed by a member of staff to verify the service had been provided.

A recommendation was made to ensure that the hairdressing treatment records were also signed by a member of staff from the home to verify that the service had been provided to the resident.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see a sample of the completed property records. A book labelled "Personal possessions record" was in place and entries from 2003 to June 2016 were recorded in the book. Three residents were selected at random and a review of the book evidenced that only two residents had an entry recorded in the book. Of the two records reviewed, both were dated (date of admission); one record had been signed by one person and one had been signed by two persons. The property record for the third resident sampled could not be located in the book.

The inspector noted that these records must be made on admission to the home and kept up to date throughout the resident's stay in the home. Any additions or disposals must be signed and dated by two people.

A recommendation was made to review all of the residents' furniture and personal possessions and bring the records of these items up to date, so that they can be easily maintained in future.

# **Areas for improvement**

Two areas for improvement were identified during the inspection. These related to records of hairdressing treatments facilitated in the home and ensuring that records of furniture and personal possessions for each resident were brought up to date.

Number of requirements	0	Number of recommendations:	2

# 4.5 Is care compassionate?

The inspector discussed the day to day arrangements in place in the home to support residents. The registered manager confirmed that (with the exception of receiving money from residents' representatives to pay for hairdressing and podiatry services), the home was not involved in supporting any resident with their money. She noted that no financial arrangements were in place, nor were any particular arrangements requiring consent or agreement from family or HSC trust care management written into the care plans for any resident.

The registered manager explained that when a resident was admitted to the home, the arrangements in the home to secure money would be explained; however, she noted that families would be discouraged from bringing large amounts of money or expensive items into the home. Mrs McVicker gave the example of expensive jewellery and noted that many families arranged to take these items home when a resident was admitted to the home.

The registered manager showed the inspector the safe storage arrangements within and home and also noted that residents had a locked space within their rooms.

Discussion took place regarding residents having access to the money outside of normal office hours. The registered manager explained that as a result of the needs of the current residents in the home, and the arrangements for receiving lodgements of cash from family members for a specific purpose (as detailed in section 4.4 above) access to money out of hours was not an arrangement which had been necessary; however the registered manager noted that the need for this would be kept under review.

A review of a sample of records evidenced that residents or their representatives had, over time, been sent written notification of any changes to the fees payable and the rationale for this.

#### **Areas for improvement**

No areas for improvement were identified during the inspection.

Number of requirements 0 Number of recommendations: 0
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#### 4.6 Is the service well led?

As noted above, a broad range of written policies and procedures for the management of residents' money and valuables were in place; the registered manager confirmed that it was the intention to review these as often as required and at least every three years.

There was a clear organisational structure within the home, which was set out in the home's statement of purpose and resident guide; following discussion with the registered manager, it was evident that she was familiar with her role and responsibilities in relation to safeguarding residents' money and valuables.

Three resident records were sampled in order to review the written agreements in place between the home and the resident/their representative and all three residents had a signed agreement in place. Each agreement had evidence that over time, the resident or their representative had been informed of any change to the fees; and agreements had been updated to reflect the breakdown of updated fees and the relative parties contributing to the overall amount.

#### Areas for improvement

No areas for improvement were identified during the inspection

Number of requirements	0	Number of recommendations:	0
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# 5.0 Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Mary Elizabeth McVicker, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 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.

#### 5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider/s meets legislative requirements based on Residential Care Homes Regulations (Northern Ireland) 2005.

#### 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (Updated 2011). They promote current good practice and if adopted by the registered provider(s) may enhance service, quality and delivery.

#### 5.3 Actions taken by the registered manager/registered provider

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered provider will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to **this office** and assessed by the inspector.

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 registered provider/manager from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

# **Quality Improvement Plan**

#### Recommendations

#### Recommendation 1

Ref: Standard 15.5

Stated: First time

To be completed by: 14 July 2016

The registered provider should ensure that a written safe record is in place to maintain records of the resident's possessions handed over for safekeeping and returned to the resident. The record is signed and dated by the resident or their representative and the member of staff receiving or returning the possessions. Where the resident or their representative is unable to sign or chooses not to sign, two members of staff witness the hand-over of the possessions and sign and date the record. Any money or valuables held on behalf of residents should be reconciled at least quarterly.

# Response by registered provider detailing the actions taken:

A WRITTEN SAFE RECORD IS IN PLACE TO MAINTAIN RELORDS OF ALL RESIDENT'S POSSESSIONS HANDED OVER FOR SAFEKEEPING AND RETURNED TO THE RESIDENT. THIS RELARD IS SIGNED AND DATED, BOTH BY THE RESIDENT (OR REPRESENTATIVE) AND BY THE MEMBER OF STAFF (OR REPRESENTATIVE OR RETURNING THE POSSESSIONS. IN THE EVENTUALITY THAT THE RESIDENT OR THEIR REPRESENTATIVE IS UNABLE TO SIGN OR CHOOSES NOT TO SIGN, TWO MEMBERS OF STAFF WILL WITNESS THE HAND-OVER OF THE POSSESSIONS AND SIGN AND DATE THE RECORD.

ANY MONEY OR VALUABLES HELD ON BEHALF OF RESIDENTS WILL BE RECONCILED ON AT LEAST A QUARTERLY BASIS.



#### Recommendation 2

Ref: Standard 15.7

Stated: First time

To be completed by: 8 July 2016

The registered provider should ensure that where any service is facilitated within the home (such as but not limited to, hairdressing, chiropody or visiting retailers) the person providing the service and the resident or a member of staff of the home sign the record or receipt to verify the service or goods have been provided and the associated cost had been incurred.

# Response by registered provider detailing the actions taken:

WHERE AND SERVICE IS FACILITATED WITHIN THE HOME,
THE PERSON PROVIDING THE SERVICE AND THE RESIDENT
OR A STAND MEMBER WILL SIGN THE RECERD, TO VERIFY
THE SERVICE OR GOODS HAVE BEEN PROVIDED AND ASSOCIATED
COST INCURRED.

HAIRDRESSING AND PODIATRY RECORDS IN THIS REGARD ARE ALREADY IN PLACE, AND ARE SIGNED AS REQUIRED.

#### **Recommendation 3**

Ref: Standard 8.7

Stated: First time

To be completed by: 7 August 2016

The registered person should ensure that an inventory of property belonging to each resident is maintained throughout their stay in the home. The inventory record should be reconciled at least quarterly. The record must be signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.

# Response by registered provider detailing the actions taken:

AN INVENTORY OF PROPERTY BELONGING TO EACH RESIDENT IS MAINTAINED THROUGHOUT THEIR STAY IN THE HOME. THIS RECOND IS NOW SIGNED BY THE STAFF MEMBER UNDERTAKING THE RECONCILIATION AND COUNTERSIGNED BY A SENIOR STAFF MEMBER.

THIS INVENTORY RECORD WILL BE RECONCILED AT LEAST QUARTERLY.





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