

# Unannounced Finance Inspection Report 24 August 2017











# **Ellis Court Respite Unit**

Type of Service: Residential Care Home Address: Ellis Street, Carrickfergus, BT38 8AZ

Tel No: 028 9331 5113 Inspector: Joseph McRandle

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 6 beds that provides respite care for residents living with a learning disability.

#### 3.0 Service details

Organisation/Registered Provider: Northern Health and Social Care Trust  Responsible Individual(s): Mr Anthony Baxter Stevens	Registered Manager: Mrs Rosemary Alida Wray
Person in charge at the time of inspection: Mrs Elaine Hall, senior support worker	Date manager registered: 20 February 2013
Categories of care: Residential (RC) LD – learning disability LD(E) – learning disability – over 65 years	Number of registered places: Six

#### 4.0 Inspection summary

An unannounced inspection took place on 24 August 2017 from 11:00 to 12.00.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

The inspection assessed progress with any areas for improvement identified since the last finance inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to: providing a place for residents to deposit items for safekeeping and the controls surrounding the safe place, maintaining records of reconciliations of residents' monies, the policies and procedures operated at the home, facilitating journeys for residents outside of the home, the recording of transactions undertaken on behalf of residents and the retention of receipts from purchases undertaken on behalf of residents.

No areas requiring improvement were identified during the inspection.

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Elaine Hall, senior support worker, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

# 4.2 Action/enforcement taken following the most recent Medicines Management inspection dated 19 July 2017

No further actions were required to be taken following the most recent inspection on 19 July 2017.

# 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous medicines management 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 senior support worker.

The following records were examined during the inspection:

- The residents' guide
- A sample of records from safe register
- A sample of records of monies held on behalf of three residents
- A sample of records of payments undertaken on behalf of three residents
- Policy for oversight of service users' finances in residential and nursing homes
- Guidance on senior staff to sign or witness personal money received on admission/discharge.

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 19 July 2017

The most recent inspection of the home was an unannounced medicines management 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 three residents were counted, the amount retained agreed to the balance recorded at the home.

Review of records and discussion with staff confirmed that no valuables were held on behalf of residents. A register of the safe contents was in place and up to date at the time of the inspection.

Discussion with the senior support worker confirmed that members of 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 place for residents to deposit items for safekeeping and the controls surrounding the safe place.

#### **Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

#### 6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

Discussion with the senior support worker confirmed that no member of staff at the home or at the NHSCT acted as an appointee for any resident, i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual.

Discussion with the senior support worker also confirmed that no member of staff acted as an agent for any resident, i.e. a person authorised by a resident or their representative to collect social security benefits on the resident's behalf.

Discussion with staff and review of records confirmed that as in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations of monies and valuables held on behalf of residents were carried out regularly.

Discussion with staff confirmed that due to the length of stay no inventory records were maintained at the home. Discussions also confirmed that items of furniture and televisions were provided by the home.

Discussion with staff confirmed that no bank accounts were managed on behalf of residents.

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

#### Areas of good practice

There were examples of good practice in relation to maintaining records of reconciliations of residents' monies and the policies and procedures operated at the home.

#### **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.

The home did not provide a transport scheme at the time of the inspection. Discussion with staff confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of taxis which were paid by the residents or their representatives.

Discussion with staff confirmed that arrangements were in place to offer support to residents when managing their own monies.

### Areas of good practice

There were examples of good practice in relation to facilitating journeys for residents outside of the home.

#### **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.

No records of fees paid by residents were available at the time of inspection. Discussion with staff confirmed that all fees were managed by the NHSCT.

Discussion with staff and review of records confirmed that due to the transitional arrangements for residents staying at the home no written agreements were in place. Discussions also confirmed that residents would normally stay for a period of between four to five days. The inspector advised staff to consider updating the home's policies and procedure with a provision stating that that due to the temporary arrangements no agreements are issued to residents

Review of records and discussion with staff confirmed that Individual transaction sheets were maintained for each resident. The sheets were used to record the details of purchases undertaken on behalf of residents and to record amounts of monies deposited at the home on behalf of residents. Discussion with staff also confirmed that representatives of some of the residents purchased essential items on behalf of the residents.

A review of records of four purchases undertaken by members of staff on behalf of three residents showed that as in line with good practice the details of the purchases, the date and the amount of the purchases were recorded in the transaction sheets. Two signatures were recorded against each entry in the transaction sheets. Receipts from three of the purchases were available at the time of the inspection. Good practice was observed as although no receipt was available from the remaining purchase a note was retained with the record which gave details of the purchase including the amount. The note was signed by two members of staff.

#### Areas of good practice

There were examples of good practice in relation to the recording of transactions undertaken on behalf of residents and the retention of receipts from purchases undertaken on behalf of residents.

#### **Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

## 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

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