

Announced Finance Inspection Report 6 December 2016



Joymount House

Residential Care
Joymount Court, Carrickfergus, BT38 7DN
Tel no: 02893363904
Inspector: Joseph McRandle

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Joymount House took place on 6 December 2016 from 10:45 to 14:30. Less than twenty four hours' notice was given prior to the inspection.

The inspection sought to assess progress with any issues raised during and 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.

Is care safe?

Evidence was reviewed which confirmed that a safe place was provided within the home for the retention of monies and valuables belonging to residents. One area of improvement was identified in relation to valuables belonging to a deceased resident. One recommendation was made.

Discussion with the registered manager confirmed that staff had received training in relation to the safeguarding of residents' monies.

Is care effective?

Evidence was reviewed which could not confirm if the Northern Health and Social Care Trust (NHSCT) was the appointee for any residents at the home. No record of the name of the person acting as the residents' appointee was retained within the residents' files. A recommendation was made.

Evidence confirmed that 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 procedures currently operated at the home e.g. the procedure for staff to purchase items on behalf of residents. A recommendation was made.

Evidence confirmed that the inventory of residents' personal possessions and items of furniture were not regularly updated following admission to the home. A recommendation was made.

Evidence confirmed that a reconciliation of resident's monies was undertaken on a regular basis. One area of improvement was identified in relation to the system of reconciling residents' monies and valuables. A recommendation was made.

Is care compassionate?

Evidence confirmed that the financial arrangements for a number of residents were not included within their written agreements. A requirement was made for these arrangements to be included within the agreements.

Evidence confirmed that no transport scheme was in place at the time of the inspection. Alternative arrangements were in place for residents wishing to undertake journeys. Residents' family would provide transport or residents paid for taxis to undertake their journey.

Evidence confirmed that arrangements were in place to offer support to residents for managing their own monies.

Is the service well led?

Evidence confirmed that no written agreements were in place between the registered provider and the residents. A requirement was made.

Two areas of improvement were identified in relation to the governance and oversight arrangements at the home. These related to the services detailed within the residents' guide and the hairdresser not signing the hairdressing sheets prior to payment. Two recommendations were made.

Good practice was observed in relation to the records of monies deposited at the home on behalf of residents.

Good financial control was observed as the hairdresser was paid directly from the NHSCT by cheque.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	2	7

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ms Gillian McBride, 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

There has been no previous RQIA finance inspection of Joymount House.

2.0 Service details

Registered organisation/registered person: Northern Health and Social Care Trust / Dr Anthony Baxter Stevens	Registered manager: Ms Gillian McBride
Person in charge of the home at the time of inspection: Ms Gillian McBride	Date manager registered: Ms Gillian McBride -18/04/2014

Categories of care: RC-DE, RC-I	Number of registered places: 40
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3.0 Methods/processes

Prior to the inspection, it was ascertained that no incidents involving residents' finances had been reported to RQIA in the last twelve months. The record of calls made to RQIA's duty system was reviewed and did not identify any relevant issues. Contact was also made with the inspector who had recently visited the home.

The inspector met with Ms Gillian McBride, registered manager, and the home's administrator.

The following records were examined during the inspection:

- Four residents' finance files
- The residents' guide
- Records of payments made to the hairdresser and podiatrist
- Records of transactions undertaken on behalf of four residents
- Records of safe contents
- Records of reconciliations of residents' monies and valuables
- Records of fees paid by two residents
- Records of monies deposited at the home on behalf of residents
- Records from comfort fund
- Financial policies and procedures
- Accounting and financial controls procedures for residents
- Records of residents' private property

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 25/08/2016.

The most recent inspection of the home was an unannounced medicine management inspection. The completed QIP was returned and approved by the pharmacy inspector. This QIP will be validated by the pharmacy inspector at the next medicine management inspection.

4.2 Is care safe?

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 residents were counted, the amount retained agreed to the balance recorded at the home. A safe contents book was in place and up to date at the time of the inspection.

Review of records confirmed that valuables were held for a deceased resident. Following a discussion with the inspector the registered manager agreed to contact the NHSCT in order to discuss the current arrangements for retaining the deceased resident's valuables.

A recommendation is listed within the QIP of this report in relation to this finding.

Discussion with the registered manager confirmed that all staff had received training in relation to the safeguarding of residents' monies.

Discussion with staff confirmed that there were no finance related restrictive practices in place for any resident.

Areas for improvement

One area for improvement was identified during the inspection. This related to contacting the NHSCT to discuss the current arrangements for retaining valuables on behalf of a deceased resident.

Number of requirements	0	Number of recommendations	1
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4.3 Is care effective?

Review of records confirmed that the NHSCT held Patient Private Property (PPP) Accounts on behalf of a number of residents. Residents' monies were forwarded to the home from the trust when requested. Staff could not confirm if the NHSCT was the appointee for any of the residents, i.e. a person authorised by the Social Security Agency (SSA) to receive and manage the social security benefits on behalf of an individual. No records of the details of the person nominated to act as appointee were maintained within the residents' files.

A recommendation is listed within the QIP of this report for the registered manager to confirm if the NHSCT acts as an appointee for any resident. If an appointee is in place, then a record of the person at the Trust acting as appointee should be retained in the residents' files.

Discussion with staff confirmed that no member of staff at the home or at the NHSCT 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 confirmed that monies held on behalf of residents were reconciled on a monthly basis it was also confirmed that valuables held on behalf of residents were reconciled twice annually by an officer from the NHSCT. A review of records of the reconciliations undertaken within the home showed that only one signature was recorded against the reconciliation of resident's monies and no signatures were recorded against the reconciliations undertaken by the trust.

The inspector highlighted to staff that as in line with standard 15.12 of the Residential Care Homes Minimum Standards, a reconciliation of monies and valuables held on behalf of residents should be carried out at least quarterly. Two signatures should be recorded against the reconciliations. Following a discussion with the inspector, the registered manager agreed to review the system of recording the reconciliations of residents' monies.

A recommendation is listed within the QIP of this report for the system of reconciling monies and valuables held on behalf of residents to be reviewed in order to facilitate the audit process.

Discussion with staff and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Discussion with staff also confirmed that these records were not always updated following admission e.g. televisions located in residents' bedrooms.

A recommendation is listed within the QIP of this report for records of residents' personal possessions and items of furniture to be reviewed and brought up to date. Any additional items brought into the home or items that have been disposed of (for which staff have been informed of) should be recorded. The records should be signed and dated by two members of staff; the records should be reconciled at least quarterly.

Staff confirmed that no bank accounts were managed on behalf of residents.

Review of records and discussion with staff confirmed that a comfort fund was operated on behalf of residents. Monies held from the fund at the time of the inspection were counted and agreed to the balance recorded at the home. A bank account was operated at the NHSCT to retain the monies within the fund.

Discussion with the registered manager and a review of records confirmed that purchases from the fund were for the benefit of all residents.

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 procedures currently operated at the home e.g. the procedure for staff to purchase items on behalf of residents.

A recommendation is listed within the QIP of this report for the policies and procedures to be reviewed and updated to reflect all of the practices undertaken on behalf of residents. A record should be maintained showing that all staff have read and understood the revised policies and procedures.

Areas for improvement

Four areas for improvement were identified during the inspection. These related to confirming if the NHSCT acts as an appointee for residents and retaining a record of same, reviewing the system of recording the reconciliations of residents' monies and valuables, update records of residents personal possessions and items of furniture following admission and reviewing and updating the financial policies and procedures operated at the home.

Number of requirements	0	Number of recommendations	4
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4.4 Is care compassionate?

Discussion with staff and review of records confirmed that the NHSCT forwarded monies to the home for a number of residents. A sample of records of monies forwarded by the Trust were examined, the records showed that monies received by the home were credited to the residents' transaction sheets. Records also showed that the monies were paid over to the residents. The appropriate signatures were recorded when the monies were paid over.

Review of records showed that these financial arrangements were not included within the resident's written agreements as in line with regulation 19. (2), Schedule 4.(3) of The Residential Care Homes Regulations(NI) 2005.

A further review of residents' files confirmed that no written authorisations were in place for staff to purchase items or to pay for services on behalf of residents e.g. hairdressing. Four residents' files were reviewed during the inspection none of the files reviewed retained the financial arrangements for the residents.

A requirement is listed within the QIP of this report for residents' agreements to include their financial arrangements.

No transport scheme was in place at the time of the inspection. Discussion with staff confirmed that alternative arrangements were in place for residents wishing to undertake journeys. Residents' family would provide transport or residents paid for taxis to undertake their journey.

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

Areas for improvement

One area for improvement was identified during the inspection. This related to the recording of residents' financial arrangements within their written agreements.

Number of requirements	1	Number of recommendations	0
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4.5 Is the service well led?

Discussion with staff and review of records confirmed that a number of residents paid the home directly for their contribution towards their fee. A sample of records of the payments was reviewed and the appropriate records were found to be in place. This included copies of receipts issued to the residents when making the payment. Discussion with staff confirmed that the records of fees paid for the remaining residents were managed and retained at the NHSCT.

A residents' guide was in place at the time of the inspection. The guide did not include the details of the services provided to residents as part of their weekly fee and 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 four residents' files evidenced that individual written agreements were not in place for all four residents.

A requirement is listed within the QIP of this report for written agreements to be in place for all residents. A recommendation is also listed within the QIP in relation to the inclusion within the residents' guide of the details of the services provided 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 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 records of three purchases made by 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 the purchases were available at the time of the inspection.

Review of records showed good practice when monies were deposited at the home on behalf of residents. Receipts were issued to the person depositing the monies and a copy of the receipt was retained at the home. A sample of records of monies deposited on behalf of residents was examined, the amounts recorded in the residents' transaction sheets agreed to the amounts listed on the receipts. The person depositing the monies was one of the signatories on the receipt.

Records of payments to the hairdresser and one to the podiatrist were reviewed. A hairdressing sheet was completed on the day the service was provided to residents. A sample of the sheets was examined, the details recorded on the sheets included the name of the resident, the service provided and the total charged to the resident. Two staff signatures were recorded on the sheets, the hairdresser had not signed the records.

Good financial practice was observed as the completed hairdressing sheets were forwarded to the NHSCT, the trust subsequently paid the hairdresser by cheque. The same procedure was operated for the podiatrist.

A recommendation is listed within the QIP of this report for the hairdresser to sign the sheets along with a member of staff prior to forwarding to the NHSCT for payment.

Review of records showed that a sample of signatures of staff authorised to make purchases or payments on behalf of residents was maintained at the home.

Areas for improvement

Three areas for improvement were identified during the inspection. These related to issuing written agreements to all residents, updating the resident's guide to include services provided to residents and for the hairdresser to sign the hairdressing sheets prior to forwarding them to the NHSCT for payment.

Number of requirements	1	Number of recommendations	2
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Ms Gillian McBride, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 this 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.

5.1 Statutory requirements

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

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and the Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP via web portal for assessment 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 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 with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 5 (3)

Stated: First time

To be completed by:
30 June 2017

The registered manager must ensure that updated written agreements are in place for all residents accommodated at the home.

The agreements should detail the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.

Agreements should be signed by residents or their representatives (if resident lacks capacity to make decisions in relation to the agreement) and a representative from the home. Where a resident or their representative is unable or chooses not to sign this must be recorded.

Copies of the signed agreements must be retained within residents' files.

Response by registered provider detailing the actions taken:

Occupancy agreements are in place for each resident, signed by the resident/representative and a representative from the home. These are held in the residents file

Requirement 2

Ref: Regulation 19 (2)
Schedule 4 (3)

Stated: First time

To be completed by:
30 June 2017

The registered manager must ensure that details of residents' financial arrangements are included in their agreements i.e. the arrangements for the Trust to act as appointee and the arrangements for managing residents monies forwarded from the residents' PPP accounts managed by the Trust including authorisation to make purchases and payments on behalf of residents.

Response by registered provider detailing the actions taken:

The Occupancy agreement includes consent for the Trust to act as appointee for any monies held in the home and to make purchases from this money on the residents behalf.

Recommendations

Recommendation 1

Ref: Standard 15.5

Stated: First time

To be completed by:
30 June 2017

The registered manager should contact the NHSCT in order to agree a decision in relation to the valuables held on behalf of the deceased resident, identified during the inspection.

Response by registered provider detailing the actions taken:

Completed

<p>Recommendation 2</p> <p>Ref: Standard 15.10</p> <p>Stated: First time</p> <p>To be completed by: 31 May 2017</p>	<p>The registered manager should ensure that the Trust confirms if they are acting as appointee for any residents. If this is the case then a record of the name of the person, from the Trust, nominated to act as appointee should be kept in the residents' files.</p> <p>The record should also include the date the person was approved to act as appointee by the Social Security Agency.</p> <p>Response by registered provider detailing the actions taken:</p> <p>The Trust is not appointee for any resident at this time.</p>
<p>Recommendation 3</p> <p>Ref: Standard 15.12</p> <p>Stated: First time</p> <p>To be completed by: 31 May 2017</p>	<p>The registered manager should ensure that the system of reconciling monies and valuables held on behalf of residents is reviewed in order to facilitate the audit process. The reconciliations should be undertaken at least quarterly.</p> <p>The reconciliation should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Response by registered provider detailing the actions taken:</p> <p>The safe contents are reconciled on a monthly basis. This is recorded in the safe book and signed by the two staff members at the time of checking.</p>
<p>Recommendation 4</p> <p>Ref: Standard 8.7</p> <p>Stated: First time</p> <p>To be completed by: 30 June 2017</p>	<p>The registered manager should ensure that the inventory of residents' possessions and items of furniture is reviewed and brought up to date. Any additional items brought into the home or items that have been disposed of (for which staff have been informed of) should be recorded. The records should be signed and dated by two members of staff; the records should be reconciled at least quarterly.</p> <p>Response by registered provider detailing the actions taken:</p> <p>The inventory of residents possessions is updated each time staff are informed of items being brought into or taken out of the home. These records will be signed by by two members of staff. To undertake to update each residents inventory of belongings on a quarterly basis would be a huge task. This will be discussed at the next residential managers meeting.</p>
<p>Recommendation 5</p> <p>Ref: Standard 20.10</p> <p>Stated: First time</p> <p>To be completed by: 30 June 2017</p>	<p>The registered manager should ensure that the 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.</p> <p>A record should be retained showing that staff have read and understood the revised policies and procedures.</p> <p>Response by registered provider detailing the actions taken:</p> <p>A new unit policy has been written to cover staff purchasing items on behalf of residents.</p>
<p>Recommendation 6</p>	<p>The registered manager should ensure that the residents' guide is updated to include the details of the services provided to residents as</p>

Ref: Standard 3.2 Stated: First time To be completed by: 30 June 2017	part of their weekly fee and the details of any additional services paid for by the residents. Response by registered provider detailing the actions taken: The residents guide has been updated to include Trust Fees. It also states items not covered in this fee.
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Recommendation 7 Ref: Standard 20.14	The registered manager should ensure that the hairdresser signs the hairdressing sheets, along with a member of staff, prior to the records being forwarded to the NHSCT for payment.
Stated: First time To be completed by: 7 December 2016	Response by registered provider detailing the actions taken: The sheet has been redesigned to allow the hairdresser and one member of staff to sign.

Please ensure this document is completed in full and returned to via web portal



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