



The Regulation and
Quality Improvement
Authority

Sanville
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BT71 4NE

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**Announced Finance Inspection
of
Sanville**

21 May 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced finance inspection took place on 21 May 2015 from 09:00 to 14:45. Overall, on the day of the inspection, the home was found to be delivering compassionate care; the safety and effectiveness of care were found to be good, however there are some areas identified for improvement. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Nursing Homes Regulations (Northern Ireland) 2005.

1.1 Actions/Enforcement Taken Following the last Inspection

There has been no previous RQIA finance inspection of this service.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	5	0

The details of the QIP within this report were discussed with Ms Claire Reid, the deputy manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Sanville/Brendan Gervin	Registered Manager: Claire Reid (Acting)
Person in Charge of the Home at the Time of Inspection: Ms Claire Reid (Deputy Manager)	Date Manager Registered: 14 April 2015
Categories of Care: NH-LD, NH-LD(E), NH-MP(E), NH-MP, NH-DE, NH-I, NH-PH, RC-I	Number of Registered Places: 36
Number of Service Users Accommodated on the Day of Inspection: 36	Weekly Tariff at Time of Inspection: £470 - £637

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following theme has been met:

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 accommodation and personal care

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 to service users are transparent and agreed in writing with the service user/their representative

4. Methods/Process

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

- Discussion with the deputy manager, the human resources director and the home's administrator
- Examination of records
- Review of records
- Evaluation and Feedback

Prior to inspection the following records were analysed:

- Records of incidents notified to RQIA in the last twelve months

The following records were examined during the inspection:

- The service user guide
- The home's policy on:
 - Recording furniture and personal possessions
 - The use of transport within the home
 - Safeguarding and protecting patients monies and valuables
 - Missing residents money or valuables
 - Patient file record storing
 - Management of the residents comfort fund

- Gifts and legacies

- Five service user agreements
- The home's current schedule of fees receivable
- Completed authorisation forms for hairdressing
- Records of treatments by the hairdresser
- Records of service users' property in the property book

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection on 15 May 2015; the findings from which have been reported on separately and were not discussed during this inspection.

5.2 Review of Requirements and Recommendations from the last Finance Inspection

There has been no previous RQIA finance inspection of this service.

5.3 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

Is Care Safe?

We were provided with a copy of the home's service user guide on the day of inspection. We noted that the guide included relevant information on: service users' right to control their own money; the service users' comfort fund; services available within the home such as hairdressing; information on the service users' individual agreement with the home and arrangements for safeguarding service users' money and property in the home.

The administrator advised that on admission, the new service user is provided with a copy of the service user guide and an individual written agreement.

We queried whether there were any specific financial arrangements in place with individual service users in the home; the administrator described how the home did not have any role in supporting any individual service user with their money and that family representatives were highly involved in supporting individual service users in this regard.

Discussion with the home's administrator established that she had not received training in the protection of vulnerable adults. We noted that it was extremely important for all staff in the home to receive this training. We noted that the administrator must arrange to receive this training as soon as possible and no later than six weeks from the date of inspection.

A requirement has been made in respect of these findings.

Is Care Effective?

We reviewed the home's schedule of fees receivable and selected a sample of four service user agreements for review. On reviewing the sample of four service users' files, we noted that all four service users had a signed agreement on their file. However, all four agreements did not reflect the current fee arrangements for these service users including the person(s) by whom the fees were payable and the respective methods of payment. We noted that the written agreements for the four service users were signed in 2014 and therefore did not reflect regional changes to the tariffs for care which came into place approximately April 2015.

We queried this with the deputy manager and the administrator and were advised that updated agreements had recently been sent to service user representatives; however, only a small number of these had been returned at that time of inspection. We were provided with a signed agreement which had recently been returned to the home. We reviewed this agreement and noted that the fee was stated in the agreement, however the persons by the home the fees were payable and the method of payment were not detailed. We noted that this was a requirement of Regulation 5 of the Nursing Homes Regulations (Northern Ireland) 2005.

We were also provided with the home's current form of agreement for any newly admitted service users and on review, we noted that this agreement was not fully in accordance with Regulation 5 of the Nursing Homes Regulations (NI) 2005. Specifically, we noted that the agreement 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.

It is noted that the DHSSPS Care Standards for Nursing Homes (2015) are now in effect. Standard 2.2 of the Care Standards for Nursing Homes (2015) requires that a number of additional areas are included in a home's individual agreement with service users.

On comparing the home's standard form of agreement with service users to Standard 2.2 of the Care Standards for Nursing Homes (2015), it is noted that the home's agreement does not include the following: a copy of the home's complaints procedure; signposting to independent advocacy services and how the service user will be supported to be involved in the daily life of the home.

A requirement has been made in respect of these findings.

We noted that the home had a number of relevant policies and procedures in place in respect of safeguarding and protecting service users' monies and valuables and service users' records storage.

Is Care Compassionate?

There was evidence on the files reviewed to identify that service users/their representatives had been informed in writing of increases in the fees payable over time.

Discussions with the home's deputy manager, HR director and the home's administrator established that on the day of inspection, the home was not supporting any service user to manage their money in any way.

Areas for Improvement

Overall on the day of inspection, we found care to be compassionate. The safety and effectiveness of care was found to be good, however there were two areas identified for improvement; these were in relation to: the administrator receiving training in the protection of vulnerable adults and updating the homes agreement with service users to reflect recently revised care standards and, subsequently, to up to date individual written agreements to all service users.

Number of Requirements	2	Number Recommendations:	0
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5.4 Statement 2 - Arrangements for receiving and spending service users' monies on their behalf are transparent, have been authorised and the appropriate records are maintained

Is Care Safe?

A review of the records identified that copies of the HSC trust payment remittances are available confirming the weekly fee for each service user in the home and the amount to be contributed by each service user, where relevant. Discussion with the administrator identified that the home has a schedule in place identifying the amount of fees receivable in respect of individual service users; at the time of inspection the home was not invoicing for fees. Amounts were received directly from the commissioning trust in full and in the case of one service user, received from a service user's representative by direct debit.

Discussion with the administrator established that the home does not receive any allowances or benefits on behalf of any service user. The home's administrator also confirmed that no monies belonging to any service user are paid into an account used in carrying on the establishment nor is any bank account operated by the home on behalf of any service user or group of service users (with the exception of the service users' comfort fund bank account detailed below).

On the day of inspection, no cash or valuables belonging to service users were lodged for safekeeping.

Discussion with the administrator established that the home operates a comfort fund for the benefit of all of the service users in the home. This is normally funded from contributions from the community, service users' family/friends and from internal fundraising by the home. The home has a written policy and procedure in place for the administration of the comfort fund.

The administrator explained that this fund is managed at the organisations head office, where a bank account for the fund is also administered. We noted that the account was appropriately named in favour of the service users in the home.

We requested copies of bank statements for the fund and copies of payment invoices for some items which appeared on the statements. We noted that in the year prior to the date of inspection, there was only one significant withdrawal; this related to the purchase of garden furniture for the home. We obtained a copy of the invoice, the amount due was significantly higher than the amount which had been contributed from the comfort fund. We queried this and were informed by the HR director that the home had contributed the remainder of the money to purchase these items.

The home's administrator showed us around the home, during which time we saw the garden furniture in place for service users to use in two separate outdoor areas.

We also requested evidence that the comfort fund back account was routinely being reconciled at least quarterly. The frequency of reconciliations could not be sufficiently established during the inspection; therefore we requested that confirmation of this be provided post-inspection. Subsequent communication with the home's administrator established that the comfort fund bank account was only reconciled when there was a lodgement or withdrawal from the account. We clarified that this may mean a gap of more than three months which was not acceptable.

A requirement has been made in respect of these findings.

Is Care Effective?

Discussions with the administrator and HR director identified that no representative of the home was acting as nominated appointee for any service user on the day of inspection and no allowances or benefits in respect of any service user were being received by the home.

Discussions with the home's administrator established that service users' representatives do not lodge any money with the home in order to pay for additional goods and services not covered by the weekly fee (such as hairdressing). The administrator described how instead, the home had written authorisation in place from family representatives to provide contact details to the hairdresser who visits the home; the hairdresser subsequently arranges to collect payment from service users' representatives with no input from the home whatsoever. The administrator provided us with signed authorisation forms from service users or their representatives for review. Discussion with the deputy manager established that community podiatry services are facilitated within the home for which there is no cost to the service users.

The book used by the hairdresser to record treatments was not in the home on the day of inspection, as it is retained by the hairdresser personally. During the inspection, we described the information which had to be detailed on the treatment record, including the date, details of the treatment, the name of the service user, the cost and the signature of the both the hairdresser and a member of staff to verify that the service user had received the treatment.

Following the inspection, we received copies of the two previous treatment records prior to the date of inspection. We noted that details had been recorded including: the name of the service user, the treatment received, the cost; the invoice number where relevant; and the signature of a representative of the home. We noted that the hairdresser had not signed these treatment records.

A requirement has been made in respect of these findings.

Is Care Compassionate?

Discussions with the administrator established that the home do not have any involvement in supporting service users to manage their money. As noted above, the payments for any additional services facilitated within the home such as hairdressing are arranged directly between the hairdresser and service users' representatives. The home does not engage in any financial transactions on behalf of any service user. We queried whether any service user had an assessed need in respect of their money or any agreed restrictions; the administrator

confirmed that none of the service users had any known assessed needs or restrictions and reiterated that there is a significant family involvement with service users in the home.

Areas for Improvement

Overall on the day of inspection, we found care to be compassionate. The safety and effectiveness of care was found to be good, however there were two areas identified for improvement; these were in relation to recording treatments of additional services facilitated within the home for which there is an extra charge and the frequency of reconciling the bank account containing service users' comfort fund monies.

Number of Requirements	2	Number Recommendations:	0
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5.5 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

Is Care Safe?

A safe place exists within the home to enable service users to deposit cash or valuables. We reviewed the safe place within the home with the home's administrator and were satisfied with the controls around the physical location of the safe place and the persons with access. We viewed the content of the safe place and established that on the day of inspection, no cash or valuables belonging to service users were lodged for safekeeping.

Is Care Effective?

We queried whether there were any general or specific arrangements in place to support service users with their money. Discussions with the administrator established that the home do not have any direct involvement in supporting any service user to manage their money. As noted above, the costs of any additional services such as hairdressing are arranged between the hairdresser and the service users' representatives directly. The home does not purchase any items for service users or engage in any financial transactions on behalf of service users.

We discussed how service users' property was recorded with the home's administrator. The home's administrator described how as any new items were brought into the home for service users by their representatives; these were requested to be brought to the home's office initially. The administrator described how this allowed staff to mark these items with the individual service user's name so as to appropriately identify them. On the day of inspection, we observed this process in action.

We were informed that written property records were recorded in a property book, this was provided to us for review. We noted that the book being used contained a pre-printed template to complete for each service user. However we noted that the template was cramped and did not provide sufficient space for items of furniture or personal possessions to be appropriately recorded. We noted that a number of records which had been completed were limited for space, given the number of items which staff had to record. In addition, we noted that the template correctly required two signatures to be recorded for each completed record; we reviewed the records and noted that a number of the completed records had only been signed by one person.

A requirement has been made in respect of these findings.

Is Care Compassionate?

A safe place exists within the home to enable service users to deposit cash or valuables should they wish to. The availability of safe storage arrangements for service users and arrangements to safeguard service users' property are clearly detailed in the service user guide which is provided to each service user or their representative on admission. The home also has a policy on recording furniture and personal possessions to guide practice in this area.

Areas for Improvement

Overall on the day of inspection, we found care to be safe and compassionate. The effectiveness of care was found to be good, however there was one area identified for improvement; this was in relation to recording service users' furniture and personal possessions.

Number of Requirements	1	Number Recommendations:	0
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5.6 Statement 4 - Arrangements for providing transport to service users are transparent and agreed in writing with the service user/their representative

Is Care Safe?

At the time of inspection, the home did not provide transport to service users. The home has arrangements in place to support service users to avail of other means of transport.

The home has a clear written policy in respect of the use of transport/options for service users to access transport and how the home can arrange transport for service users for medical appointments etc.

Is Care Effective?

There was no transport scheme in place on the day of inspection.

Is Care Compassionate?

There was no transport scheme in place on the day of inspection.

Areas for Improvement

There were no areas for improvement identified in respect of Statement 4.

Number of Requirements	0	Number Recommendations:	0
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5.7 Additional Areas Examined

No additional areas were examined as part of this inspection.

6 Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Claire Reid, the deputy 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.

6.1 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, The Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes (April 2015) etc. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to finance.team@rqia.org.uk and assessed by us.


It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulation 14 (4)</p> <p>Stated: First time</p> <p>To be Completed by: 2 July 2015</p>	<p>The registered person must ensure that the administrator receives training in the Protection of Vulnerable Adults (POVA). Any other member of staff who is identified as requiring POVA must also receive the training.</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken:</p> <p>Training has been earmarked for the administrator and will be completed by 9th Jul 2015.</p> <p>Safeguarding training is provided by Sanville on average twice a year.</p>
<p>Requirement 2</p> <p>Ref: Regulation 5 (1) (a) (b)</p> <p>Stated: First time</p> <p>To be Completed by: 21 June 2015</p>	<p>The registered person must review its standard form of agreement with service users to ensure that it complies with Regulation 5 of the Nursing Homes Regulations (Northern Ireland) 2005 and meets Standard 2.2 of the DHSSPS Care Standards for Nursing Homes (2015).</p> <p>The registered person must subsequently 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>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. Where the service user or their representative is unable to, or chooses not to sign the agreement, this must be recorded.</p> <p>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>
	<p>Response by Registered Person(s) Detailing the Actions Taken:</p> <p>Sanville PNH agreements have been amended to reflect, recent changes in tariff (April 2015), April 2015 care standards and Regulation 5 of the Nursing Homes Regulations.</p>

<p>Requirement 3</p> <p>Ref: Regulation 19(2) Schedule 4 (9)</p> <p>Stated: First time</p> <p>To be Completed by: From the date of inspection</p>	<p>The registered person must ensure that the bank account used to hold the service users' comfort fund monies is reconciled at least quarterly. Reconciliations of the bank account must be performed, recorded, and signed and dated by two persons.</p> <hr/> <p>Response by Registered Person(s) Detailing the Actions Taken: Reconciliations of the comfort fund bank account is now performed, recorded, signed and dated by two persons.</p>
<p>Requirement 4</p> <p>Ref: Regulation 19(2) Schedule 4 (9)</p> <p>Stated: First time</p> <p>To be Completed by: From the date of inspection</p>	<p>The registered person must ensure that the treatment records for hairdressing services facilitated in the home are also signed by the hairdresser.</p> <hr/> <p>Response by Registered Person(s) Detailing the Actions Taken: The hairdresser now signs treatment records.</p>
<p>Requirement 5</p> <p>Ref: Regulation 19(2) Schedule 4 (10)</p> <p>Stated: First time</p> <p>To be Completed by: 21 June 2015</p>	<p>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. Any entry, whether an addition or disposal, must be dated and signed by two members of staff at the time of the entry.</p> <p>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.</p> <p><u>All inventory records should be updated on a regular basis. (Care Standards for Nursing Homes, April 2015 requires that a reconciliation of these records is recorded at least quarterly).</u></p> <p>The registered person should advise staff of the importance of recording inventory details consistently, and items of significant value or those requiring electrical safety testing should be distinctly highlighted on the record for ease of identification.</p> <hr/> <p>Response by Registered Person(s) Detailing the Actions Taken: Inventories are being updated and will be reconciled quarterly. Entires will be signed by two members of staff. We require that residents or their representatives notify us of all items brought into Sanville PNH especially those of significant value. High risk items will be distinctly highlighted.</p>

Registered Manager Completing QIP	Joan Mc Guckin Acting Manager Pending Registration	Date Completed	07.07.15
Registered Person Approving QIP	Alice McAleer	Date Approved	07.07.15
RQIA Inspector Assessing Response		Date Approved	21/07/2015

Please ensure the QIP is completed in full and returned to finance.team@rqia.org.uk from the authorised email address