



The **Regulation** and  
**Quality Improvement**  
**Authority**

**Valley Nursing Home**

**8 Tullybroom Road, Clogher  
BT76 0UW**

**Follow Up Inspection – Enforcement Monitoring**

**12 August 2014**

## **1. GENERAL INFORMATION**

- 1.1 Name of Home:** Valley Nursing Home
- 1.2 Address:** 8 Tullybroom Road, Clogher, BT76 0UW
- 1.3 Telephone No:** 028 85548048
- 1.4 Fax No:** 028 85549911
- 1.5 Email:** valley@mpscare.co.uk
- 1.6 Name of Person(s)/Partnership / Organisation Registered to Carry on the Home:**  
Paul Gray
- 1.7 Name of Person Registered to Manage the Home:**  
Alison Sweeney
- 1.8 Type of Home:** Nursing Home
- 1.9 Registration Status and Legislative Framework**

Valley Nursing Home is registered as a nursing home and provides nursing care and accommodation for a maximum of 96 persons.

The home's registration number is 1502 and the home is registered in accordance with the following:

- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005
- The Nursing Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Homes Minimum Standards (2008)

## 1.10 Inspection details

**a) Type of Inspection:**

Follow Up Inspection – Enforcement Monitoring

**b) Date and Time of Inspection:**

12 August 2014  
10:00 – 13.00

**c) Persons who met with the Inspector:**

Lloyd Young (Group Financial Director, MPS Care Group)  
Chandler Warren-Gray (Managing Director, MPS Care Group)  
Alison Sweeney (Registered Manager)

**d) Name of Inspector:**

Briege Ferris  
Finance Inspector

## **2. BACKGROUND**

The Valley Nursing Home is situated in its own private grounds near the centre of Clogher village.

The current registered manager is Alison Sweeney.

A finance inspection of the home was carried out on 4 June 2014, where concerns arose about aspects of how the home were managing the money of service users.

The registered person was invited to meet with RQIA on 17 June 2014 in order to discuss these concerns. Following the meeting, the registered person was issued with eight notices of failure to comply with the Regulations, including notices in respect of Regulation 5 (1), 14 (4), 18 (2) and 19 (2) Schedule 4 (9) of the Nursing Homes Regulations (Northern Ireland) 2005.

The timescales for compliance and actions required to comply with these regulations were outlined within the notices (FTC/NH/1502/2014-15/03, FTC/NH/1502/2014-15/06, FTC/NH/1502/2014-15/07, and FTC/NH/1502/2014-15/08) and within the Quality Improvement Plan accompanying the finance inspection report of 4 June 2014.

The date for compliance with the matters outlined within the above failure to comply notices was 12 August 2014. The inspector met with the registered manager and representatives of the registered person on 12 August 2014, in order to discuss the actions taken in order to achieve compliance with the above notices.

### **3. FINDINGS IN RELATION TO THE FAILURE TO COMPLY NOTICE**

**FTC/NH/1502/2014-15/03**

#### **The Nursing Homes Regulations (Northern Ireland) 2005 Regulation 14 (4)**

The registered person shall make arrangements, by training staff or by other measures, to prevent patients being harmed or suffering abuse or being placed at risk of harm or abuse.

#### **Action Required to Comply with Regulations:**

The registered person is required to ensure that when patients' money lodged with the registered persons for safekeeping is used to make purchases, the purchases are verified and receipts are obtained or copied for the patient's records.

The registered person must implement a policy and procedure addressing the safeguarding of patient's money and valuables, which will support compliance with the regulations.

All staff engaged in any tasks involving patients' money and valuables must be trained on implementation of the new policy and procedure.

#### **Inspection Findings:**

The inspector noted that there had been substantial work completed to improve how service users' monies were safeguarded by the home. The inspector was provided with a copy of the new financial procedures for staff to follow when handling and recording service users' money. The inspector also noted that better use of the home's computerised accounts package was being made to complement the manual records made and to enable timely reporting to the home's head office.

The inspector spoke with the home's newly appointed financial administrator who could clearly describe and explain what the home's new procedures were and how the receipt, expenditure and reconciliation of service users' monies was being recorded.

The inspector reviewed the new policy entitled "Safeguarding Service Users' Money and Possessions". The inspector noted that staff engaged in any tasks involving service users' monies had received training in the new policy and procedures (as relevant to their individual role). The inspector was provided with copies of a sample of the signed statements from staff confirming that they had received the relevant training.

#### 4. FINDINGS IN RELATION TO THE FAILURE TO COMPLY NOTICE

FTC/NH/1502/2014-15/06

##### The Nursing Homes Regulations (Northern Ireland) 2005 Regulation 5 (1)

The registered person shall provide to each patient, by not later than the day on which he becomes a patient, a statement specifying-

- (a) the fees payable by or in respect of the patient for the provision to the patient of any of the following services –
  - (i) accommodation, including the provision of food; and
  - (ii) nursing;

and except where a single fee is payable for those services, the services to which each fee relates;

- (b) the method of payment of the fees and the person by whom the fees are payable

##### **Action Required to Comply with Regulations:**

The registered person must ensure that an individual written agreement is provided to each patient or their representative, which supports compliance with Regulation 5 of the Nursing Homes Regulations (Northern Ireland) 2005 and meets Standard 4 of the DHSSPS Minimum Standards for Nursing Homes, 2008. Where a patient does not have a family member or friend to act as their representative, the patient's individual written agreement should be shared with their care manager. A copy of each patient's agreement must be retained in their records.

##### **Inspection Findings:**

On 12 August 2014, the inspector was informed that written individual agreements had been provided to all service users or their representatives. Records reviewed also demonstrated that a list was being kept of those agreements which had been returned and those for which staff at the home had made telephone contact with service users' representatives in order to encourage representatives to return a copy of the signed agreement to the home.

The inspector was provided with an example of a written individual agreement which had been sent out for signature to the service user's representative and returned signed to the home. On reviewing the contents of the agreement, the inspector noted that it did not fully reflect the requirements of Regulation 5 of the Nursing Homes Regulations (NI) 2005 or DHSSPS Nursing Homes Minimum Standard 4.2. Specifically, the inspector noted that the agreement did not detail: the persons by whom each element of the fee would be paid and which method would be used by each party; the duration of the service user's stay or include a copy of the home's complaints procedure.

The inspector discussed this with the representatives on the day and noted that as the agreements which had been sent by the home to service users or their representatives did not fully reflect compliance with Regulation 5 of the Nursing Homes Regulations (Northern Ireland) 2005 and meet Standard 4 of the DHSSPS Minimum Standards for Nursing Homes, 2008; compliance with failure to comply notice FTC/NH/1502/2014-15/06 could not be demonstrated at 12 August 2014.

In accordance with RQIA's Enforcement Policy and Procedure, one further notice of failure to comply with regulation was issued on 15 August 2014. The reference for this notice is FTC/NH/1502/2014-15/06 (E). The above notice was extended by a further 30 days to 16 September 2014.

On 13 August 2014, RQIA received a revised draft of the home's individual service user agreement in advance of the home tailoring this draft template for each service user in the home. The draft template was reviewed by RQIA and feedback provided accordingly.

On 28 August 2014, representatives of the registered person provided RQIA with information regarding the provision of individual written agreements to each service user or their representatives and details as to progress with the receipt of signed agreements.

A review of this information identified that the registered person had demonstrated compliance with the extended failure to comply notice FTC/NH/1502/2014-15/06 (E) in advance of the date for compliance.

## **5. FINDINGS IN RELATION TO THE FAILURE TO COMPLY NOTICE FTC/NH/1502/2014-15/07**

### **The Nursing Homes Regulations (Northern Ireland) 2005 Regulation 18 (2)**

The registered person shall having regard to the size of the nursing home and the number and needs of patients –

- (c) provide in rooms occupied by patients adequate furniture, bedding and other furnishings, including curtains and floor coverings, and equipment suitable to the needs of patients and screens where necessary;

#### **Action Required to Comply with Regulations:**

The registered person must ensure that any items of furniture, bedding, and other furnishings (including curtains and floor coverings) and equipment suitable to the needs of the patients are provided by the home.

The record of previous purchases of any items specified in Regulation 18 (2) (c) must be examined and the cost of these items to the patients identified. Records relating to purchases made on behalf of patients who are no longer residing in the home must also be included.

The examination of the records must cover the period from at least six years prior to the date of the last entry.

The registered persons must submit to RQIA an acceptable proposal for making repayments of any inappropriate charges to patients. The registered persons must agree a timescale with RQIA for making any such repayments to patients.

#### **Inspection Findings:**

During the inspection of 12 August 2014, the inspector was informed by the Group Financial Director that the process of reviewing expenditure for inappropriateness was currently being undertaken in order to identify any sums to be repaid to service users. The inspector also noted that the cost of one item had already been repaid to a service user prior to 12 August 2014. The Group Financial Director and the inspector, on behalf of RQIA, agreed a short timescale for the completion of the exercise of reviewing the records and subsequently for the repayment to be made.

Compliance with the above notice was therefore demonstrated on 12 August 2014.

On 28 August 2014, representatives of the registered person provided RQIA with an analysis of items which the home had identified as inappropriate and evidence of the repayment of these monies to the service users' balances within the service users' pooled bank account.



## 6. FINDINGS IN RELATION TO THE FAILURE TO COMPLY NOTICE

FTC/NH/1502/2014-15/08

### The Nursing Homes Regulations (Northern Ireland) 2005

#### Regulation 19 (2)

The registered person shall maintain in the nursing home the records specified in Schedule 4.

#### Schedule 4 (9)

A record of all money or other valuables deposited by a patient for safekeeping or received on the patient's behalf, which –

- (a) shall state the date on which the money or valuables were deposited or received, the date on which any money or valuables were returned to a patient or used, at the request of the patient, on his behalf and, where applicable, the purpose for which the money or valuables were used; and
- (b) shall include the written acknowledgement of the return of the money or valuables.

#### **Action Required to Comply with Regulations:**

The registered person is required to ensure that:

Records of cash or possessions deposited for safekeeping reflect the date cash or possessions are deposited and should be signed by two persons. When cash or possessions are returned to the patient or their representative, the record is updated with the date the cash or possessions are returned and includes two signatures to verify the return of the items. A reconciliation of the cash or possessions held within the safe place is performed, evidenced and recorded with the date and signatures of two persons at least quarterly. An initial reconciliation is to be performed, evidenced and recorded before 12 August 2014.

A reconciliation of the pooled patients' bank account is performed, evidenced and recorded with the date and signatures of two persons at least quarterly. An initial reconciliation is to be performed, evidenced and recorded before 12 August 2014.

A standard financial ledger format is used to clearly and accurately detail transaction for patients. This format captures the following information each time an entry is made on the ledger: the date; a description of the entry; whether the entry is a lodgement or a withdrawal, the amount; the running balance of the patient's cash total held and the signatures of two persons to verify the entry in the ledger.

When cash or cheques are deposited for safekeeping in the home, there are records (e.g.: a duplicate receipt book) which confirm the date, details and the amount of cash or cheque deposited, signed by two persons.

The registered person must implement a policy and procedure addressing the safeguarding of patient's money and valuables, which will support compliance with the regulations.

All staff engaged in any tasks involving patients' money and valuables must be trained on the implementation of the new policy and procedure.

### **Inspection Findings:**

As noted above, the inspector noted that there had been substantial work completed to improve how service users' monies were safeguarded by the home. The inspector was provided with a copy of the new financial procedures for staff to follow when handling and recording service users' money. The inspector also noted that better use of the home's computerised accounts package was being made to complement the manual records made and to enable timely reporting to the home's head office.

In addition, the inspector spoke with the home's newly appointed financial administrator who could clearly describe and explain what the home's new procedures were and how the receipt, expenditure and reconciliation of service users' monies was being recorded.

The inspector reviewed a sample of the financial ledgers retained for service users and noted that for each transaction, these reflected: the date, the details of the transaction, the relevant amount, the running balance and the signatures of two persons. The inspector also traced a sample of cash lodgements to the receipt books used by staff to record these details. The inspector noted that the receipts reflected the date, the name of the service user, the amount of cash lodged and the signatures of two persons. The inspector could trace these transactions to the computerised record made on the financial accounts package which detailed the lodgement of these monies in favour of individual service users.

The inspector reviewed evidence of the regular reconciliation of service users' monies and valuables, both physically and of the service users' pooled personal monies bank account and that these reconciliations had commenced prior to 12 August 2014.

The inspector reviewed the new policy entitled "safeguarding service users money and possessions". The inspector noted that staff engaged in any tasks involving service users' monies had received training in the new policy and procedures (as relevant to their individual role). The inspector was provided with copies of a sample of the signed statements from staff confirming that they had received the relevant training.

Compliance with the above notice was therefore demonstrated on 12 August 2014.

**Conclusion:**

Representatives of the registered person have carried out a significant amount of work in order to improve how service users' monies and property are safeguarded by the home and to achieve compliance with the relevant regulations as set out in the failure to comply notices listed within this report.

The inspector will continue to monitor the home's compliance with these Regulations and the home is required to ensure continued compliance with legislative requirements and minimum standards.

The inspector would like to thank representatives of the registered person for their co-operation during and following the inspection process.

Enquiries relating to this report should be addressed to:

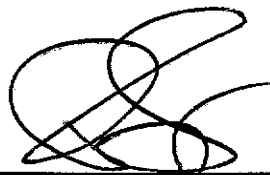
**Briege Ferris  
The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
Belfast  
BT1 3BT**



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**Quality Improvement**  
**Authority**

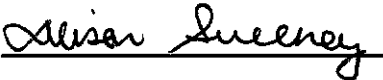
No requirements or recommendations resulted from the follow up inspection - enforcement monitoring - of **Valley Nursing Home** which was undertaken on **12 August 2014** and I agree with the content of the report.

Please provide any additional comments or observations you may wish to make below:

SIGNED: 

NAME:   
Registered Provider

DATE 27/10/14

SIGNED: 

NAME: ALISON SWEENEY  
Registered Manager

DATE 27:10:14

Approved by:	Date