



The Regulation and
Quality Improvement
Authority

Valley Nursing Home
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BT6 0UW

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**Announced Follow-up Finance Inspection
of
Valley Nursing Home**

20 January 2016

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced follow-up finance inspection took place on 20 January 2016 from 11:15 to 15:30. A poster detailing that the inspection was taking place was positioned at the entrance of the home. During the inspection, we met with the home's administrator; no relatives or visitors chose to meet with us.

This follow-up inspection was carried out to review progress with the actions detailed in the Quality Improvement Plan (QIP) from the previous finance inspection of the home on 4 June 2014. Significant progress in addressing the actions was identified; however two additional areas for improvement have been detailed in the 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

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

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	0	2

The details of the QIP within this report were shared with Mrs Lorraine Margaret Cozma, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Valley Nursing Home (MPS) Ltd/Paul Warren-Gray	Registered Manager: Mrs Lorraine Margaret Cozma
Person in Charge of the Home at the Time of Inspection: Miss Louise Hughes	Date Manager Registered: 2 November 2015
Categories of Care: NH-MP, NH-MP(E), NH-TI, NH-DE, NH-I, NH-PH, NH-PH(E), RC-I	Number of Registered Places: 96
Number of Patients Accommodated on the Day of Inspection: 89	Weekly Tariff at Time of Inspection: £470.00 to £1,009.00

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: Patients' 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 patients' 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 patients are transparent and agreed in writing with the patient/their representative.

4. Methods/Process

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

- Discussion with the home administrator
- 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, none of which were finance related
- The inspection report and QIP from the finance inspection of the home on 4 June 2014

The following records were reviewed during the inspection:

- Four patient finance files
- Five patient agreements
- A sample of income/lodgements and expenditure records
- Evidence of the reconciliation of patients' monies
- A sample of treatment receipts for hairdressing and chiropody services provided to patients
- Four records of patients' property

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an announced estates inspection on 19 October 2015. The completed QIP was returned and approved by the estates inspector. The estates inspector was contacted prior to this inspection and confirmed that there were no matters to be followed up.

5.2 Review of Requirements and Recommendations from Finance Inspection Dated 4 June 2014

Previous Inspection Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>Ref: Regulation 5 (1) (a) (b)</p>	<p>The registered person must ensure that an individual written agreement is provided to each service user 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 service user does not have a family member or friend to act as their representative, the service user's individual written agreement should be shared with their care manager. A copy of each service user's agreement must be retained in their records.</p> <p>Action taken as confirmed during the inspection:</p> <p>The inspector selected a random sample of four finance files in order to review the written agreements in place with individual patients. All four files contained an agreement which reflected the up to date fees/payment arrangements for the selected patients.</p>	<p>Met</p>
<p>Requirement 2</p> <p>Ref: Regulation 5 (2) (a) (b)</p>	<p>The registered person must provide at least 28 days' written notice to each service user or their representative of any increase in the fees payable by or in respect of the service user, or any variation in the method of payment of the fees or the person by whom the fees are payable. The registered person must ensure that any changes to the individual service user's agreement are agreed in writing by the service user or their representative. Where the service user or their representative is unable to, or chooses not to sign the agreement, this must be recorded.</p>	<p>Partially Met</p>

	<p>Action taken as confirmed during the inspection:</p> <p>As noted above, a random sample of four finance files was selected to review the written agreements in place with individual patients. All four files contained an agreement which reflected the up to date fees/payment arrangements for the selected patients. However, only two of the four agreements had been signed by the patient/their representative.</p> <p>We reviewed the files for these two patients to establish whether there was any evidence that the home had attempted to secure written agreement to the changes to the patients' agreements; however no such correspondence was evidenced on the files.</p> <p>The administrator provided a fifth file for review and we noted that this patient's file contained a letter from the home to the patient's representative, following up on the return of the signed agreement.</p> <p>We noted, therefore, inconsistency across the files in regard to the home's efforts to secure written agreement to any change to patients' agreements.</p> <p>We highlighted that where the home encountered difficulty in securing signatures on the individual written agreement for any patient, that patient's file should evidence to what lengths the home has gone to attempt to secure agreement in writing and the home's approach must be consistent in this regard.</p> <p>A recommendation was made in respect of this finding.</p>	
<p>Requirement 3</p> <p>Ref: Regulation 14 (4)</p>	<p>The registered person is required to ensure that when a service user's 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 service user's records.</p> <p>Action taken as confirmed during the inspection:</p> <p>A sample of records was reviewed which evidenced that receipts were available to verify purchases made on behalf of patients.</p>	<p>Met</p>

<p>Requirement 4</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>A reconciliation of the service users' bank account/s 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.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>A review of the records evidenced that the most recent reconciliation had taken place on 29 October 2015; therefore the next quarterly reconciliation is due on or before 29 January 2016. The home's administrator explained that it would be her intention to ensure that these reconciliations were carried out at least monthly.</p>		
<p>Requirement 5</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>A standard financial ledger format is used to clearly and accurately detail transactions for service users. 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 of the lodgement or withdrawal; the running balance of the service user's cash total held and the signatures of two persons to verify the entry in the ledger.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Evidence was reviewed which confirmed that lodgements of cash or cheques for patients are signed into the home by at least two people. A review of a sample of the expenditure records established that it is the home's practice that three signatures are recorded against expenditure for patients.</p>		
<p>Requirement 6</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>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.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>A review of a sample of receipts evidenced that the home provided a receipt to anyone depositing cash; receipts were routinely signed by two people.</p>		

<p>Requirement 7</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>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 service user 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.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussions established that practice in the home had changed since the previous finance inspection of the home. The administrator explained how the home does not encourage patients to store items of value in the safe place. The administrator confirmed that no items belonging to patients were lodged for safekeeping on the day of inspection. A safe record is therefore not maintained. The administrator advised that in an emergency situation, a patient could lodge an item into the safe place until other arrangements were made to secure the item e.g. the item may be taken home by a family member. However the administrator explained that while the home would be flexible in this regard, these circumstances would be exceptional.</p>		
<p>Requirement 8</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>The registered person is required to ensure that, where a service user has been supported by staff on an outing, returned receipts clearly denote (1) the service users and the staff that went on the outing and (2) any food or drinks consumed by staff.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The administrator advised that it is now the home's policy that any monies used on social outings for patients are taken from the home's comfort fund and therefore patients do not pay from their personal monies. In addition, the administrator advised that she understood the home's policy to be that only patients could benefit from food/drinks</p>		

	etc. purchased from the comfort fund while on a social outing.	
<p>Requirement 9</p> <p>Ref: Regulation 18 (2)</p>	<p>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 service users are provided by the home.</p> <p>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 service users identified. Records relating to purchases made on behalf of service users who are no longer residing in the home must also be included.</p> <p>The examination of the records must cover the period from at least six years prior to the date of the last entry.</p> <p>The registered persons must submit to RQIA an acceptable proposal for making repayments of any inappropriate charges to service users. The registered persons must agree a timescale with RQIA for making any such repayments to service users.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>This matter was not examined on inspection as the home had previously contacted RQIA to advise of the outcome of the review of purchases made by patients.</p>	
<p>Requirement 10</p> <p>Ref: Regulation 19 (2) Schedule 4 (9)</p>	<p>The registered person must ensure that the person providing the hairdressing or barber services, and the service user or a member of staff at the home, signs the treatment records to verify the treatment and the associated cost to each service user.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>We reviewed a sample of the records for hairdressing and chiropody services facilitated in the home and established that the controls as outlined above, were being adhered to.</p>	

<p>Requirement 11</p> <p>Ref: Regulation 19 (2) Schedule 4 (10)</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. 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. All inventory records should be updated on a regular basis. Any entry, whether an addition or disposal, must be dated and signed by two members of staff at the time of the entry. The registered person should advise staff of the importance of recording inventory details consistently. Items of significant value or those requiring electrical safety testing should be distinctly highlighted on the record for ease of identification.</p>	
	<p>Action taken as confirmed during the inspection:</p> <p>We requested to see the property records for a random sample of four patients and the records were subsequently sought by the home administrator from care staff in the home. We noted that each patient had a record of property; however there was significant inconsistency in the way that property was recorded. We noted that the patients who had been sampled resided in different units in the home.</p> <p>Two patients each had two records of property, one written on plain paper (the entries had not been signed or dated) and the other made on a pre-printed template (the entries had been signed by one person, and dated).</p> <p>A third patient had one property record which had only one item recorded - "TV". No supplementary detail such as make/model/approximate size had been included against this entry. This record was signed by two people but had not been dated. A review of the records and discussion with the administrator established that this patient had recently purchased a television (the receipt was available to evidence this); however the administrator advised that the patient had also disposed of the previous TV from their room. It was therefore difficult to establish whether the entry "TV" was a reference to the previous or current television</p>	<p>Partially Met</p>

owned by the patient. The home administrator stated that it most likely referred to the previous television. We noted that if that was the case the record should evidence the date that the previous television was removed/disposed of and the entry should be signed and dated by two people.

The fourth patient's property record had been made on a pre-printed template and included a substantial level of detail. This record had been signed by one person and detailed the date of the patient's admission; it was not clear if the record itself had been made on the date of admission.

We noted that the staff member recording items on this patient's property record had made an effort to provide useful detail. For instance, we noted evidence of an addition on this record which had been dated, and the colour of the electrical item had been recorded.

The administrator also provided us with a copy of the most up to date "Resident Property List" which was included in a new patient admission pack. We noted that this constituted a two-page template, one page for clothing and one page for other items. We noted that the template was comprehensive and included space for two people to sign.

We noted that while each patient sampled had a property record available, and a new template was available for newly admitted patients, the sample of records reviewed evidenced significant differences in the way that patients' property was recorded, including the types of template, the level of detail recorded against items and controls around signing and dating of the records.

We noted that the Care Standards for Nursing Homes (2015) require that patients' property records are updated at least quarterly; these reconciliations must be signed and dated by two people. We highlighted that as part of this process, patients' records should be harmonised to ensure that a consistent approach is taken and that staff completing and reconciling the records are familiar with the layout of records, and know exactly the level of detail to record.

Compliance with this will be monitored in a future finance inspection of the home. A recommendation

	was made in respect of this finding.	
Requirement 12 Ref: Regulation 19 (2) Schedule 4 (9)	The registered person must implement a policy and procedure addressing the safeguarding of service users' money and valuables, which will support compliance with the regulations. All staff engaged in any tasks involving service users' money and valuables must be trained on the implementation of the new policy and procedure.	Met
	Action taken as confirmed during the inspection: A copy of the home's written policy and procedure had previously been shared with RQIA.	

5.3 Additional Areas Examined

There were no additional areas examined as part of the inspection.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were shared with Mrs Lorraine Margaret Cozma, 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 and 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 in this report do not absolve the registered provider/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 provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Recommendations	
<p>Recommendation 1</p> <p>Ref: Standard 2.8</p> <p>Stated: First time</p> <p>To be Completed by: From the date of the next change to any patient's agreement</p>	<p>The registered person should ensure that any changes to the individual agreement are agreed in writing by the resident or their representative. The individual agreement is updated to reflect any increases in charges payable. Where the resident or their representative is unable or chooses not to sign the revised agreement, this is recorded.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: This is being done, S/U agreements are reviewed annually (April) and reflect the changes and responsible parties of paying fees etc.</p>
<p>Recommendation 2</p> <p>Standard 14.26</p> <p>Stated: First time</p> <p>To be Completed by: From the date of inspection</p>	<p>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 is reconciled at least quarterly. The record is signed and dated by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: quarterly reconciliations to be performed, documented and signed. Inventory list is taken at time of admission and updated when new inventory is received.</p>
Registered Manager Completing QIP	<p><i>[Signature]</i></p> <p>Date Completed 4-4-16</p>
Registered Person Approving QIP	<p><i>[Signature]</i></p> <p>Date Approved 8-4-16</p>
RQIA Inspector Assessing Response	<p><i>[Signature]</i></p> <p>Date Approved 19/04/16</p>

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