

# Announced Finance Inspection Report 1 December 2016



## Greenfield Residential Care

Residential  
2 Melmount Road, Strabane, BT82 9BT  
Tel no: 028 7188 2381  
Inspector: Joseph McRandle

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced inspection of Greenfield took place on 1 December 2016 from 10:00 to 14:00. Less than twenty four hours' notice was given prior to the inspection. The registered manager was not on duty at the time of the inspection. The inspector met with the acting senior care assistant.

The inspection sought to assess progress with any issues raised during and since the previous 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. Discussion with the acting senior care assistant confirmed that staff had received training in relation to the safeguarding of residents' monies. No areas of improvement were identified.

### Is care effective?

Evidence was reviewed which could not confirm if the Western Health and Social Care Trust (WHSCT) 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 in relation to this finding.

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 in relation to this finding.

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

Evidence confirmed that a reconciliation of resident's monies was undertaken on a monthly basis. Evidence of the reconciliations was recorded on two separate documents; one of the entries was recorded in pencil. A recommendation was made in relation to this finding.

### 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 in relation to this finding.

Four recommendations were made in relation to the governance and oversight arrangements at the home. These included the issuing of receipts when monies were deposited at the home on behalf of residents, a review of the system for recording services provided by the hairdresser and podiatrist, a review of the system for recording transactions undertaken on behalf of residents and the retention of signatures of staff undertaking transactions on behalf of residents.

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
<b>Total number of requirements and recommendations made at this inspection</b>	2	8

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Rosaleen McConnell, acting senior care Assistant, 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 Greenfield.

### 2.0 Service details

<b>Registered organisation/registered person:</b> Western Health and Social Care Trust/ Elaine Way CBE	<b>Registered manager:</b> Patrick Travers
<b>Person in charge of the home at the time of inspection:</b> Mrs Rosaleen McConnell, Acting Senior Care Assistant	<b>Date manager registered:</b> Registration pending
<b>Categories of care:</b> RC-I - Old age not falling within any other category	<b>Number of registered places:</b> 34

### 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 Mrs Rosaleen McConnell, acting senior care assistant and the home's administrator. The registered manager was not on duty at the time of the inspection.

The following records were examined during the inspection:

- Four residents' finance files
- Four residents' "Care Plan Finances Sheets"
- The residents' guide
- Records of services provided by hairdresser and podiatrist
- Records of transactions undertaken on behalf of two residents
- Records of safe contents
- Records of reconciliations of residents' monies
- Records from monies deposited at the home on behalf of residents
- Records from comfort fund
- Financial policies and procedures
- Transport Policy
- Accounting and financial controls procedures for residents
- Procedure for residents' private property

### 4.0 The inspection

#### 4.1 Review of requirements and recommendations from the most recent inspection dated 13/10/2016.

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

Discussion with the acting senior care assistant confirmed that 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

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
-------------------------------	---	----------------------------------	---

#### 4.3 Is care effective?

Review of records confirmed that the WHSCT 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 WHSCT 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 in the residents' files.

A recommendation is listed within the QIP of this report for the registered manager to confirm if the WHSCT 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 WHSCT 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. A review of the records of the reconciliations undertaken within the home showed that two separate documents were used to record the reconciliations. The date of the reconciliation was recorded with the comment "monies checked and correct" in one of the documents. The administrator recorded the date of the reconciliation on the other document used to record the monies held on behalf of the residents. It was noticed that the dates were recorded in pencil.

Following a discussion, the acting senior care assistant 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. Discussions also confirmed that records of residents' personal possessions and items of furniture were not always updated following admission e.g. televisions located in residents' bedrooms.

A recommendation is listed within the QIP of this report for the 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 to retain the monies within the fund.

Discussion with staff 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 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 relate to confirming if the WHSCT acts as an appointee for residents and retaining a record of same, reviewing the system of recording the reconciliations of residents' monies, 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.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	4
-------------------------------	---	----------------------------------	---

#### 4.4 Is care compassionate?

Discussion with staff and review of records confirmed that the WHSCT 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. Review of records showed that these financial arrangements were not included within the residents' 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. Three of the four residents' files reviewed contained a form entitled "Care Plan Finances sheet". The form gave details of what staff should do when residents were admitted to the home, e.g. permission from the resident to open a PPP account at the Trust in order to purchase items on behalf of residents. All three forms reviewed were not signed by the resident or their representative to authorise this practice.

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.

<b>Number of requirements</b>	1	<b>Number of recommendations</b>	0
-------------------------------	---	----------------------------------	---

**4.5 Is the service well led?**

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

A residents’ guide was in place at the time of the inspection. The guide included 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.

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 and payments for additional services e.g. hairdressing. The transaction sheets were also used to record amounts of monies deposited at the home on behalf of residents.

A review of records of three purchases made by staff, on behalf of two residents, showed that as in line with best 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.

Four records of monies deposited at the home on behalf of residents were reviewed. It was noticed that receipts were not issued to the person depositing the monies. The records confirming the amounts deposited were signed by two members of staff. The person depositing the monies had not signed the records in the absence of receipts.

A recommendation is listed within the QIP of this report for receipts to be issued at all times when monies are deposited at the home on behalf of residents. The person depositing the monies should be one of the recorded signatories.

Three records of payments to the hairdresser and one to the podiatrist were reviewed. Receipts were available from all three transactions. It was noticed that the hairdresser and podiatrist had not signed the records to confirm that the service took place and that they had received payment.

A recommendation is listed within the QIP for the system of recording transactions from services provided by the Hairdresser and podiatrist to be reviewed in order to aid the audit process. The hairdresser and podiatrist should be one of the signatories recorded.

The inspector discussed the recording of residents' transactions with staff. It was noticed that a lodgement made on behalf of one resident had been incorrectly recorded as a payment to the hairdresser. Other records showed that correction fluid had been used to amend errors or the initial entry had been written over. Other errors had been scored out but no initials were recorded of the staff member making the entry and no explanations for the errors were recorded. Following the discussion staff agreed to cease the practice of using correction fluid and writing over errors from the date of the inspection.

A recommendation is listed within the QIP for the system of recording residents' transactions to be reviewed in order to improve the accuracy of recording and to facilitate the audit process. Errors should be crossed out and a new line used to record the transaction. A reason for the error should be recorded and initialled by the staff member recording the transaction.

Review of records showed that a sample of signatures of staff authorised to make purchases or payments on behalf of residents was not maintained at the home.

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

### Areas for improvement

Five areas for improvement were identified during the inspection. These related to issuing written agreements to all residents, issuing receipts when monies are deposited at the home on behalf of residents, reviewing the system for recording services provided by the hairdresser and podiatrist, review the system of recording transactions on behalf of residents and retaining a sample of staff signatures.

<b>Number of requirements</b>	1	<b>Number of recommendations</b>	4
-------------------------------	---	----------------------------------	---

## 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Rosaleen McConnell, acting senior care assistant, 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 to [Finance.team@rqia.org.uk](mailto:Finance.team@rqia.org.uk) 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:**

All residents will have written updated & signed agreements in place and retained in their files by 30/6/17. A record will be kept when a resident or representative is unable or refuses to sign. The agreements will state the amounts paid by the Trust and the resident for their placement.

#### 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.

**Response by registered provider detailing the actions taken:**

The residents agreement will state if the Trust or someone else is acting as the appointee. The residents agreement will specify the financial arrangements for managing the residents monies forwarded from the patients property account in line with the Trusts Cash Handling Procedures.

<b>Recommendations</b>	
<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 15.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 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><b>Response by registered provider detailing the actions taken:</b> The Trust will confirm if they are acting as appointee for any resident. (A record of the Trust appointee's name and date approved by the Social Security Agency will be kept in the residents file).</p>
<p><b>Recommendation 2</b></p> <p><b>Ref:</b> Standard 15.12</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 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.</p> <p><b>Response by registered provider detailing the actions taken:</b> The system for reconciling residents money and valuables has been reviewed in order to facilitate the audit process - in line with the Trusts Cash Handling Procedures.</p>
<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Standard 8.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 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><b>Response by registered provider detailing the actions taken:</b> The inventory record of residents possessions and furniture is being reviewed and updated to reflect any new additions and disposals. The will be updaed quarterly and signed/dated by 2 members of staff.</p>
<p><b>Recommendation 4</b></p> <p><b>Ref:</b> Standard 20.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 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 policies and procedures.</p> <p><b>Response by registered provider detailing the actions taken:</b> Financial procedures are being reviewed and updated in line with Trust policy. Staff have been issued with a copy of the Trust's Cash Handling Procedures and training is being arranged for all relevant staff.</p>

<p><b>Recommendation 5</b></p> <p><b>Ref:</b> Standard 15.6</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 2 December 2016</p>	<p>The registered manager should ensure that receipts are issued at all times when monies are deposited at the home on behalf of residents. The person depositing the monies should be one of the recorded signatories.</p> <p><b>Response by registered provider detailing the actions taken:</b> Receipts are issued when monies are deposited at the home on resident's behalf. The depositor is asked to sign a record of same.</p>
<p><b>Recommendation 6</b></p> <p><b>Ref:</b> Standard 20.14</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 May 2017</p>	<p>The registered manager should ensure that the current system of recording transactions from services provided by the Hairdresser and podiatrist is reviewed in order to aid the audit process. The hairdresser and podiatrist should be one of the signatories recorded.</p> <p><b>Response by registered provider detailing the actions taken:</b> The system for recording transactions from the Hairdresser and Podiatrist have been reviewed in line with this recommendation. Both providers sign the records to verify the service took place and they have received payment. Both are recorded as signatories.</p>
<p><b>Recommendation 7</b></p> <p><b>Ref:</b> Standard 20.14</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 2 December 2017</p>	<p>The registered manager should ensure that the system of recording residents' transactions is reviewed in order to improve the accuracy of recording and to facilitate the audit process. Errors should be crossed out and a new line used to record the transaction. A reason for the error should be recorded and initialled by the staff member recording the transaction.</p> <p>The practice of using correction fluid and writing over errors should cease immediately.</p> <p><b>Response by registered provider detailing the actions taken:</b> All relevant staff have been instructed to improve practices in this regard. Staff no longer use correction fluid. Errors are crossed out and initialled and a new line used to record transactions.</p>
<p><b>Recommendation 8</b></p> <p><b>Ref:</b> Standard 20.14</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 May 2017</p>	<p>The registered manager should ensure that a sample of signatures of staff authorised to make purchases or payments on behalf of residents is maintained at the home.</p> <p><b>Response by registered provider detailing the actions taken:</b> A sample of signatures of staff authorised to make purchases or payments on behalf of residents is being maintained.</p>

*\*Please ensure this document is completed in full and returned to [Finance.team@rqia.org.uk](mailto:Finance.team@rqia.org.uk) from the authorised email address\**



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email [info@rqia.org.uk](mailto:info@rqia.org.uk)

Web [www.rqia.org.uk](http://www.rqia.org.uk)

 [@RQIANews](https://twitter.com/RQIANews)