

Unannounced Finance Inspection Report 8 January 2019











Greenfield

Type of Service: Residential Care Home Address: 2 Melmount Road, Strabane, BT82 9BT

Tel No: 0208 7188 2381 Inspector: Joseph McRandle

www.rqia.org.uk

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 service from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a residential care home with 34 beds that provides care for residents with old age not falling within any other category of care.

3.0 Service details

Organisation/Registered Provider: Western HSC Trust	Registered Manager: Jane Rush
Responsible Individual(s): Anne Kilgallen	
Person in charge at the time of inspection: Elish Morris	Date manager registered: Acting – No application required
Categories of care: Residential Care (RC) I - Old age not falling within any other category	Number of registered places: 34

4.0 Inspection summary

An unannounced inspection took place on 8 January 2019 from 11.15 to 14.00 hours.

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

The inspection assessed progress with any areas for improvement identified since the last finance inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to: providing a place for residents to deposit items for safekeeping, residents' items held in the safe place checked regularly, members of staff involved in managing residents' finances receiving adult safeguarding training, maintaining signed records of reconciliations of residents' monies, updating the inventory of residents' property, purchases from the home's comfort fund were for the benefit of all residents, residents' financial arrangements included within their written agreements, provision authorising members of staff to purchase essential items included in residents' agreements.

Further evidence of good practice was found in relation to: facilitating journeys on behalf of residents, offering support to residents for managing their own finances, listing services provided to residents as part of their weekly fee, listing services available to residents at an additional cost, hairdresser and a member of staff signing records, the system for recording transactions undertaken on behalf of residents, the system for the retention of receipts from transactions, issuing receipts to the person depositing monies on behalf of a resident and maintaining a list of signatures of members of staff authorised to undertake transactions on behalf of residents.

One area requiring improvement was identified under standards in relation to including a provision within residents' agreements which states that details of residents' fees were forwarded directly to residents from the Western Health and Social Care Trust (WHSCT).

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Elish Morris, person in charge, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 5 October 2018

The most recent inspection of the home was an unannounced care inspection undertaken on 5 October 2018. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues (there were no financial issues identified), the returned QIP from the previous finance inspection and the previous finance inspection report.

During the inspection the inspector met with the person in charge and the home's administrator.

A poster indicating that the inspection was taking place was displayed at the entrance to the home and invited visitors or relatives to speak to the inspector. No relatives or visitors chose to speak to the inspector.

The following records were examined during the inspection:

- two residents' finance files
- two residents' written agreements
- records of safe contents
- monies held on behalf of residents
- records of monies held on behalf of residents
- a sample of valuables held on behalf of two residents
- a sample of records of reconciliations between residents monies held and records of monies held
- a sample of records of reconciliations between residents valuables held and records of valuables held
- a sample of records of monies deposited at the home on behalf of residents
- a sample of records from residents' comfort fund
- a sample of records from WHSCT bank account containing residents' monies

- a sample of records from payments to the hairdresser and podiatrist
- a sample of records from purchases undertaken on behalf of residents
- financial policies and procedures
- one resident's record of personal property.

Areas for improvement identified at the last finance inspection were reviewed and assessment of compliance recorded as met, not met or partially met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 5 October 2018

The most recent inspection of the home was an unannounced care inspection. No further actions were required to be taken following the most recent inspection on 5 October 2018.

6.2 Review of areas for improvement from the last finance inspection dated 1 December 2016

Areas for improvement from the last finance inspection		
Action required to ensure Homes Regulations (North	e compliance with The Residential Care	Validation of compliance
Area for improvement 1 Ref: Regulation 5 (3)	The registered manager must ensure that updated written agreements are in place for all residents accommodated at the home.	
Stated: First time To be completed by: 30 June 2017	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.	Met

	A review of two residents' files evidenced that copies of signed written agreements were retained within both files. The agreements included the details of the services provided to residents as part of their weekly fee and a list of additional services provided at an additional cost. The agreements did not show the current fee paid by, or on behalf of, residents. Discussion with staff confirmed that fees were agreed between the WHSCT and residents. The person in charge was advised to review the written agreements in order to include a provision which states that details of the fees were forwarded directly to residents from the Trust.	
Area for improvement 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. Action taken as confirmed during the inspection: A review of two residents' files evidenced that since the previous finance inspection on 1 December 2016 the financial arrangements for each resident were included within their written agreement.	Met
Action required to ensure Homes Minimum Standar	compliance with DHSSPS Residential Care	Validation of compliance
Area for improvement 1 Ref: Standard 15.10 Stated: First time	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	·
To be completed by: 31 May 2017	should be kept in the residents' files. The record should also include the date the person was approved to act as appointee by the Social Security agency.	Met

	Action taken as confirmed during the inspection: Discussion with staff confirmed that the WHSCT does not act as an appointee for any resident.	
Area for improvement 2 Ref: Standard 15.12 Stated: First time	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.	
To be completed by: 31 May 2017	Action taken as confirmed during the inspection: Discussion with staff and a review of records confirmed that since the previous finance inspection in December 2016, monies held on behalf of residents were reconciled against the records of monies held on a daily basis. Records also confirmed that residents' valuables held for safekeeping were reconciled monthly.	Met
Area for improvement 3 Ref: Standard 8.7 Stated: First time To be completed by: 30 June 2017	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.	
	Action taken as confirmed during the inspection: Discussion with staff and a review of a sample of records evidenced that the inventory of residents' possessions had been brought up to date since the previous finance inspection on 1 December 2016. Discussion with staff also confirmed that records were updated with items acquired and disposed of after admission for which staff had been made aware of.	Met

Area for improvement 4	The registered manager should ensure that the policies and procedures operated at the	
Ref: Standard 20.10	home are updated to include all of the financial procedures undertaken by staff on behalf of	
Stated: First time	residents e.g. the procedure for staff to purchase items on behalf of residents.	
To be completed by: 30 June 2017	A record should be retained showing that staff have read and understood the policies and procedures.	
	Action taken as confirmed during the inspection: A review of the policies and procedures evidenced that the policies were updated since the previous finance inspection on 1 December 2016. The financial procedures undertaken by staff on behalf of residents were included within the policies.	Met
	A record of the names of the members of staff who had read and understood the policies and procedures was retained in the home at the time of the inspection on 8 January 2019.	
Area for improvement 5	The registered manager should ensure that receipts are issued at all times when monies	
Ref: Standard 15.6 Stated: First time	are deposited at the home on behalf of residents. The person depositing the monies	
To be completed by:	should be one of the recorded signatories. Action taken as confirmed during the	
2 December 2016	inspection: A review of two records of monies deposited at the home on behalf of one resident evidenced that receipts were issued to the person depositing the monies on both occasions. Records were signed by the person depositing the monies and a member of staff.	Met

Area for improvement 6	The registered manager should ensure that the current system of recording transactions	
Ref: Standard 20.14 Stated: First time	from services provided by the Hairdresser and podiatrist is reviewed in order to aid the audit process. The hairdresser and podiatrist	
To be completed by:	should be one of the signatories recorded.	
31 May 2017	Action taken as confirmed during the inspection: A review of records evidenced that the system for recording transactions on behalf of residents had significantly improved since the last finance inspection on 1 December 2016. Records showed that the hairdresser and podiatrist had signed the records along with a member of staff from the home.	Met
Area for improvement 7 Ref: Standard 20.14 Stated: First time	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	
To be completed by: 2 December 2016	used to record the transaction. A reason for the error should be recorded and initialled by the staff member recording the transaction.	
	The practice of using correction fluid and writing over errors should cease immediately.	Met
	Action taken as confirmed during the inspection: A review of a sample of transactions undertaken by members of staff on behalf of residents showed a significant improvement in the recording process since the previous finance inspection in December 2016. The use of correction fluid had ceased and errors were scored out and a new line was used to record the transaction. An explanation for the error was recorded along with two initials.	

Area for improvement 8 Ref: Standard 20.14	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.	
Stated: First time		
	Action taken as confirmed during the	Met
To be completed by:	inspection:	wet
31 May 2017	A review of records evidenced that a record of signatures of members of staff involved in making transactions on behalf of residents was maintained at the home during the inspection on 8 January 2019.	

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that are intended to help them.

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 members of staff with access to it. Monies held on behalf residents were counted, the amount retained agreed to the balance of monies recorded at the home.

A safe contents book was in place and up to date at the time of the inspection. Valuables held on behalf of two residents were examined. Records agreed to the items held in the safe place. Records showed that the items held were checked on a regular basis. Two signatures were recorded against the records examined.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies and procedures reflected the financial operational areas of the home.

Discussion with the person in charge confirmed that members of staff involved in managing residents' finances had received training in relation to adult safeguarding. Discussion with staff also confirmed that there were no finance related restrictive practices in place for any resident.

Areas of good practice

There were examples of good practice found in relation to providing a place for residents to deposit items for safekeeping, residents' items held in the safe place were checked regularly and members of staff involved in managing residents' finances receiving adult safeguarding training.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

Discussion with staff confirmed that since the previous finance inspection on 1 December 2016 the WHSCT was not the appointee for any resident, i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual.

Discussion with staff also confirmed that no member of staff 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 and a review of records confirmed that in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations between the monies held on behalf of residents and the records of monies held were undertaken on a daily basis. In line with good practice two signatures were recorded against the records of the reconciliations.

Discussion with staff and a review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Discussion with staff and a review of records also confirmed that since the previous finance inspection on 1 December 2016, the records were updated with items acquired and disposed of after admission for which staff had been made aware of.

Review of records showed that the WHSCT managed Patient Private Property (PPP) accounts for a number of residents. Discussion with Staff confirmed that a bank account was managed on behalf of residents by the WHSCT which was used to retain a number of residents' personal allowance monies.

Review of records and discussion with staff confirmed that a comfort fund was operated on behalf of residents. Monies held for the fund at the time of the inspection were counted and agreed to the balance recorded at the home. Discussion with staff and a review of a sample of records confirmed that purchases from the fund were for the benefit of all residents.

Areas of good practice

There were examples of good practice found in relation to maintaining signed records of reconciliations of residents' monies, updating the inventory of residents' property following admission to the home and purchases from the home's comfort fund were for the benefit of all residents.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Discussion with staff confirmed that the WHSCT managed a bank account on behalf of a number of residents; the account contained residents' personal allowance monies. Discussions also confirmed that monies were withdrawn from the account when required. A sample of records of monies withdrawn from the bank account was examined; the records showed that monies recorded as received by the home agreed to the amounts withdrawn from the bank account.

Discussion with staff and a review of two residents' agreements showed that since the previous finance inspection on 1 December 2016, the above financial arrangements were included in the residents' written agreements. A provision was included in the agreements requesting authorisation for members of staff to purchase essential items e.g. toiletries on behalf of residents.

At the time of the inspection the home did not provide a transport scheme. Discussion with staff confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of taxis which were paid for by the residents or their representatives. Discussion with staff also confirmed that if residents were unable to obtain transport for a hospital appointment then the WHSCT would provide transport at no cost to the resident.

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

Areas of good practice

There were examples of good practice found in relation to: residents' financial arrangements included within their written agreements, provision authorising members of staff to purchase essential items included in residents' agreements, facilitating journeys on behalf of residents and offering support to residents for managing their own finances.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

No records of fees paid by residents were available at the time of inspection. Discussion with staff confirmed that fees were managed by the WHSCT. Staff confirmed that no additional monies were received for fees over and above the amount agreed through the contracting arrangements with the Trust.

A residents' guide was in place at the time of the inspection. The guide included a written agreement which was issued to residents on admission to the home. A review of two residents' files evidenced that copies of signed written agreements were retained within both files. The agreements included the details of the services provided to residents as part of their weekly fee and a list of services available to residents at an additional cost e.g. hairdressing. The agreements did not show the current fee paid by, or on behalf of, residents.

Discussion with staff confirmed that details of the fees paid by residents, or on their behalf, were forwarded directly to residents from the Trust. The person in charge was advised to review the written agreements in order to include a provision which states that the details of the fees were forwarded directly to residents from the WHSCT. This was identified as an area for improvement.

Review of records and discussion with staff confirmed that a book was maintained to record the details of transactions undertaken on behalf of residents. This included purchases and payments for additional services e.g. hairdressing. The transaction book was also used to record monies deposited at the home on behalf of residents.

A review of records from three purchases undertaken by staff, on behalf of two residents, showed that in line with good practice the details of the purchases, the date and the amount of the purchases were recorded in the transaction book. Two signatures were recorded against each entry in the transaction book. Receipts from the purchases were available at the time of the inspection. Good practice was observed as the name of the resident for which the purchase was undertaken was recorded on the receipts. A member of staff had also signed the receipts to confirm that the items purchased were handed over to residents.

Review of records confirmed that a book was retained to record the services provided by the hairdresser. The book recorded the names of the residents availing of the service, the date the service was provided and the amount charged to each resident. In line with good practice the hairdresser and a member of staff had signed the records to confirm that the service took place.

A sample of payments to the hairdresser for three residents was examined. The amounts recorded in the residents' transaction book agreed to the amounts recorded in the hairdressing book. Receipts were provided by the hairdresser following payment for the service provided. In line with good practice the receipts were signed by the hairdresser and a member of staff.

Two records of monies deposited at the home on behalf of residents were reviewed. Records showed that receipts were issued to the person depositing the monies. In line with good practice the records were signed by the person depositing the monies and countersigned by a member of staff.

Discussion with staff and a review of records confirmed that since the previous inspection on 1 December 2016, a record was maintained of a sample of signatories of members of staff authorised to undertake transactions on behalf of residents.

The inspector discussed with the person in charge, the arrangements in place in relation to the equality of opportunity for residents and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of residents. The person in charge informed the inspector that the equality data collected was managed in line with best practice.

Areas of good practice

There were examples of good practice found in relation to: listing the services provided to residents as part of their weekly fee, listing services available to residents at an additional cost, hairdresser signing records along with a member of staff, the system for recording transactions undertaken on behalf of residents, the system for the retention of receipts from transactions, issuing receipts to the person depositing monies on behalf of a resident and maintaining a list of signatures of members of staff authorised to undertake transactions on behalf of residents.

Areas for improvement

One area for improvement was identified under standards in relation to including a provision within residents' agreements stating that details of the fees were forwarded directly to residents from the Health and Social Care Trust.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Elish Morris, person in charge, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 the 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 and DHSSPS Residential Care Homes Minimum Standards, August 2011.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011	
Area for improvement 1 Ref: Standard 4.2	The registered person shall include a provision within the residents' agreements stating that details of the fees were forwarded directly to residents from the WHSCT.
Stated: First time	Ref: 6.7
To be completed by: 28 February 2019	Response by registered person detailing the actions taken: Amendments have been made in the Residents' Financial Assessments to state the above.





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