Unannounced Finance Inspection Report
10 April 2018

Kilbroney House

Type of Service: Nursing Home
Address: 83 Kilbroney Road, Rostrevor, BT34 3BL
Tel no: 028 4173 8600
Inspector: Briege Ferris

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 nursing home with 19 beds that provides care for older patients and/or those living with a dementia, a mental disorder excluding learning disability or dementia, and/or a physical disability other than sensory impairment.

3.0 Service details

Organisation/Registered Provider: Jaqueline Ann Campbell	**Registered Manager:** Jaqueline Ann Campbell
Person in charge at the time of inspection: Pauline Campbell (Nurse Manager)	**Date manager registered:** 1 April 2005
Categories of care: Nursing Care (NC) I - Old age not falling within any other category DE - Dementia MP - Mental disorder excluding learning disability or dementia MP(E) - Mental disorder excluding learning disability or dementia – over 65 years PH - Physical disability other than sensory impairment PH(E) - Physical disability other than sensory impairment – over 65 years	**Number of registered places:** Total number 19: Comprising a maximum of 4 patients in category NH-DE, a maximum of 7 patients in category NH-MP/MP(E) and a maximum of 2 patients in category NH-PH/PH(E). The home is also approved to provide care on a day basis to 1 person.

4.0 Inspection summary

An unannounced announced inspection took place on 10 April 2018 from 10.15 to 13.30 hours.

This inspection was underpinned by Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes (April 2015).

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: a safe place in the home was available for the deposit of cash and valuables; records were available relating to monies received and used on behalf of patients; expenditure receipts were available; records were in place detailing reconciliations (checks) of money managed on behalf of patients; there was clear evidence of listening to and taking account of the wishes and preferences of patients and in respect of the range of information contained in the patient guide.

Areas requiring improvement were identified in relation to: ensuring that hairdressing and chiropody services include all of the required detail, including the signatures of both the person providing the treatment and a member of staff to confirm that the treatment has been received; ensuring that each patient is provided with an individual written agreement and ensuring that personal monies authorisation documents are in place for relevant patients.

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

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4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	2	2

Details of the Quality Improvement Plan (QIP) were discussed with Pauline Campbell, Nurse Manager, 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.

5.0 How we inspect

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that one of these incidents related to patients' money or valuables. A review of the information received from the home in the wake of the incident was discussed with the nurse manager during the inspection; this identified that the appropriate action had been taken by the home. The record of calls made to RQIA's duty system was reviewed and this did not identify any relevant issues.

During the inspection, the inspector met with the nurse manager, and briefly, the responsible individual/registered manager. A poster detailing that the inspection was taking place was displayed in a prominent position in the home. The inspector also met with two patients separately, both of whom reported their contentment with the current arrangements in place to support them manage their money.

The following records were examined during the inspection:

- "Kilbroney House Nursing Home and Patient Guide "
- A sample of patients' income, expenditure and reconciliation records (records of checks performed)
- Written policies and procedures:
    - "Confidentiality of case records and care delivered" dated October 2016
    - "Complaints" dated April 2017
    - "Managing patients money" dated May 2016
    - "Receiving gifts" dated February 2016
    - "Creation, storage, recording, retention and disposal of records" dated April 2017
    - "Whistleblowing" dated July 2017
    - "Transport policy" dated April 2017
- A sample of treatment records for hairdressing and chiropody services facilitated within the home.

The findings of the inspection were provided to the nurse manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 15 June 2017

The most recent inspection of the home was an unannounced medicines management inspection.

6.2 Review of areas for improvement from the last finance inspection

A finance inspection of the home was carried out on behalf of RQIA on 13 May 2010. The findings were not brought forward to the inspection on 10 April 2018.

6.3 Inspection findings

6.4 Is care safe?

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

The nurse manager confirmed that adult safeguarding training was mandatory for all staff in the home. She was able to clearly describe the home's controls in place to safeguard patients' money and valuables.

The nurse manager confirmed that there were no current suspected, alleged or actual incidents of financial abuse, nor were there any finance-related restrictive practices in place for any patient.

The home had a safe place available for the deposit of cash or valuables belonging to patients; the inspector was satisfied with the location of the safe place and the persons with access.

On the day of inspection, money belonging to five patients was deposited for safekeeping, no valuables were being held.

Areas of good practice

The home had a safe place available for the deposit of money or valuables; access was limited to authorised persons. The nurse manager was familiar with controls in place to safeguard patients' money and valuables.

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 the nurse manager established that no representative of the home was acting as nominated appointee for any patient (i.e.: managing and receiving social security benefits on a patient's behalf). However the home was in direct receipt of the personal monies for five patients. In each case, the personal monies for the patients were received by cheque from the Health and Social Care (HSC) trust which was managing the patients' monies. Clear records were in place to detail the amount and timing of the receipts of monies safeguarded by the home in each case. The nurse manager confirmed that no other personal monies were received by the home; patients' representatives did not deposit money with the home for safekeeping.

Up to date, detailed income and expenditure records were maintained for those patients for whom money was held for safekeeping. A sample of transactions was traced in order to establish whether the appropriate supporting evidence was in place; for instance, evidence detailing the receipt of monies or a purchase receipt for expenditure. This identified that the supporting documents were in place for the sample of transactions chosen. Advice was provided to the nurse manager in respect of improving the layout of the template used to record transactions.

Evidence was available to confirm that reconciliations, which had been signed and dated by two people, were carried out at least quarterly.

Hairdressing and chiropody treatments were being facilitated within the home and a sample of recent records was reviewed. Receipts for treatments were in place; however these did not detail all of the required information as set out within standard 14.13 of the Care Standards for Nursing Homes (2015).

This was identified as an area for improvement.

Patients' property (within their rooms) was discussed. The nurse manager reported that a record for each patient would have been made at the time of each patient's admission; however she noted that these were no longer available and therefore the records were not in place for patients in the home.

This was identified as an area for improvement.

The day following the inspection, the nurse manager contacted the inspector to advise that a new template had been developed to record hairdressing and chiropody treatments and that each patient now had a record of their valuables in place.

During the inspection, the nurse manager confirmed that the home did not operate a bank account on behalf of patients individually or jointly, nor did the home operate a patients' comfort fund. She noted that the home operated a transport scheme, however reported that there was no charge to the patients for the use of the transport service.

Areas of good practice

There were examples of good practice found for example, records were available relating to monies received and used on behalf of patients; expenditure receipts were available; and records were in place detailing reconciliations of money held on behalf of patients.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to ensuring that hairdressing and chiropody treatment records detail all of the required detail as set out within standard 14.13 of the Care Standards for Nursing Homes and ensuring that each patient has an up to date record of the furniture and personal possessions which they have brought to their room.

	Regulations	Standards
Total number of areas for improvement	1	1

6.6 Is care compassionate?

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

The arrangements to support patients with their money on a day to day basis were discussed with the nurse manager and separately with two patients. These discussions identified how the home had individualised arrangements in place to meet the specific needs and wishes of individual patients regarding how they were supported to manage their money.

The nurse manager reported that arrangements to support patients with their money would be discussed with the patient or their representative prior to or at the time of a patient's admission to the home.

The home had a number of methods in place to encourage feedback from patients or their representatives in respect of any issue including a 2018 "Residents personalised survey" which had recently been completed with several patients in the home. A review of a sample of the completed surveys identified that the survey included a question "Are you able to manage your own money and spend it as you wish?" The responses from several patients indicated that the home had person-centred arrangements in place to meet the individual requests and choices of patients as to how they were supported to manage their money with input from staff in the home.

Arrangements for patients to access money outside of normal office hours were discussed. The nurse manager explained that the nurse in charge of the home held the keys to the safe place and therefore should patients require their money outside of normal office hours, this could easily be facilitated.

Areas of good practice

There were examples of good practice identified in relation to listening to and taking account of the choices and preferences of patients.

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 patients in order to deliver safe, effective and compassionate care.

The "Kilbroney House Nursing Home and Patient Guide" dated May 2017, included a range of information for a new patient including general arrangements in the home regarding valuables, fees, services provided in the home for which there was an additional charge and general record keeping arrangements.

Written policies and procedures addressing areas including managing patients' money, transport, receiving gifts and confidentiality were in place and were easily accessible by staff. The sample of policies and procedures reviewed were dated within the last three years.

Individual patient agreements were discussed with the nurse manager; however this discussion and a review of the records by the nurse manager established that individual written agreements required by Regulation 5 of the Nursing Homes Regulations (Northern Ireland) were not in place for any of the patients. The inspector highlighted the importance of addressing this matter as a priority.

Advice was provided to the nurse manager with respect to ensuring that any written agreement which is developed for issue to each patient is consistent with standard 2.2 of the Care Standards for Nursing Homes (2015).

Ensuring that each patient or their representative is provided with an individual written agreement was identified as an area for improvement.

A review of income and expenditure records for six patients identified that the home used a template entitled "Patients financial agreement". This document was available within the records for three of the six patients and had been signed by the patients accordingly. It included detail as to the high-level principles of money management as set out within the relevant home policy and statements in respect of the patient being kept actively involved in all aspect of their money management; including a statement that only those staff members trained in money management would be involved in supporting the patient with their money.

The inspector discussed these documents with the nurse manager and noted that there should be a more detailed authority in place for those patients for whom the home engaged in purchases of goods or services.

This was identified as an area for improvement.

Advice was provided to the nurse manager in respect of a potential written format for capturing this authority with the relevant patients or their representatives.

Areas of good practice

There were examples of good practice found in respect of the range of information contained in the "Kilbroney House Nursing Home and Patient Guide" and written policies and procedures were in place to guide financial practices in the home.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to ensuring that each patient or their representative is provided with an individual written agreement; and ensuring that for those patients for whom the home engaged in purchases of goods or services, the patients or their representatives are provided with a document requesting authority to spend the patient's money accordingly.

	Regulations	Standards
Total number of areas for improvement	1	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 Pauline Campbell, nurse manager, 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 nursing 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 Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes (April 2015).

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 Nursing Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 **Ref**: Regulation 19 (2) Schedule 4 (10) **Stated:** First time **To be completed by:** 11 May 2018	The registered person shall ensure that each patient has a record of furniture and personal possessions which they have brought into the room occupied by them. Ref: 6.5
	Response by registered person detailing the actions taken: This has been completed for all Residents
Area for improvement 2 **Ref**: Regulation 5 (1) (a) (b) **Stated:** First time **To be completed by:** 11 May 2018	The registered person shall ensure that each patient is provided with a statement (written agreement) 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. Ref: 6.7
	Response by registered person detailing the actions taken: The Home is in the process of issuing an agreement as stated with all Residents. This should be completed by Friday 4th May.
Action required to ensure compliance with DHSSPS Care Standards for Nursing Homes (April 2015).	
Area for improvement 1 **Ref**: Standard 14.13 **Stated:** First time **To be completed by:** 12 April 2018	The registered person shall ensure that where any service is facilitated within the home (such as, but not limited to, hairdressing, chiropody or visiting retailers) the person providing the service and the patient or a member of staff of the home signs the treatment record or receipt to verify the treatment or goods provided and the associated cost to each patient. Ref: 6.5
	Response by registered person detailing the actions taken: A new template reciept covering these areas for services provided is now in use

Area for improvement 2 **Ref**: Standard 14.6,14.7 **Stated:** First time **To be completed by:** 12 April 2018	The registered person shall ensure that written authorisation is obtained from each patient or their representative to spend the patient's personal monies to pre-agreed expenditure limits. The written authorisation must be retained on the patient's records and updated as required. Where the patient or their representative is unable to, or chooses not to sign the agreement, this must be recorded. Where the patient is managed by a HSC Trust and does not have a family member or friend to act as their representative, the authorisation about their personal monies must be shared with the HSC Trust care manager. Ref: 6.7
	Response by registered person detailing the actions taken: Written authorisation for spending of Residents personal monies is being updated and should be completed by

Please ensure this document is completed in full and returned via Web Portal

The Regulation and Quality Improvement Authority

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