

Announced Finance Inspection Report 15 November 2016











Cloughreagh House

Residential (RC)
Millvale Road, Bessbrook, Newry, BT35 7EH
Tel No: 028 3083 0520

Inspector: Joseph McRandle

1.0 Summary

An announced inspection of Cloughreagh House took place on 15 November 2016 from 10:45 to 14:00. Less than twenty four hours' notice was given prior to the inspection.

The inspection sought to assess progress with any issues raised during and since the previous 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 registered manager confirmed that staff had received training in relation to the safeguarding of residents' monies. The record of valuables held on behalf of one resident was not up to date at the time of the inspection. A recommendation was made in relation to this finding.

Is care effective?

Evidence was reviewed which confirmed the Southern Health and Social Care Trust (SHSCT) was the appointee for three 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.

Records confirmed that residents or their representatives were informed in advance of any increase in fees as in line with The Residential Care Homes Regulations (Northern Ireland) 2005.

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 and the time period for the return of receipts from the purchases. A recommendation is listed within the QIP in relation to this matter.

The registered manager was commended on the strong controls in place for reconciling residents' monies.

Is care compassionate?

Evidence confirmed that the financial arrangements for a number of residents were not included within their written agreements. A recommendation 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 members would provide transport or residents paid for taxis to undertake their journey.

Evidence confirmed that the SHSCT held PPP accounts for a number of residents at the home. Evidence also confirmed that arrangements were in place to offer support to residents for managing their own monies.

The registered manager was commended on the good practice of staff completing a consent form following every transaction made on behalf of residents by members of staff.

Is the service well led?

Evidence was reviewed which confirmed that written agreements were in place for residents. The agreements did not include the details of the fees paid by, or on behalf of, residents or the charges for additional services provided at the home. A recommendation was made for residents' agreements to be updated.

Evidence confirmed that records of fees paid by or on behalf of residents were maintained at the SHSCT. The registered manager confirmed that no additional monies were received for fees over and above the amount agreed through the contracting arrangement with the Trust.

Evidence confirmed good practice when monies were deposited at the home on behalf of residents. Receipts were issued to the person depositing the monies; a copy of the receipt was retained at the home.

Evidence confirmed good practice as the written procedure for the management of residents' finances was retained in the file containing the residents' transaction sheets. The file also contained a sample of signatures of staff authorised to make purchases 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
Total number of requirements and recommendations made at this inspection	0	5

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Kathleen McBeth, registered 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.

1.2 Actions/enforcement taken following the most recent finance inspection

There has been no previous RQIA finance inspection of Cloughreagh House.

2.0 Service details

Registered organisation/registered provider: Southern Health and Social Care Trust / Francis Rice	Registered manager: Kathleen Patricia McBeth
Person in charge of the home at the time	Date manager registered:
of inspection:	6 August 2013
Kathleen Patricia McBeth	

Categories of care:	Number of registered places:
I - Old age not falling within any other category	23
DE – Dementia	

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.

During the inspection the inspector met with the registered manager and the home's administration officer.

The following records were examined during the inspection:

- Three residents' finance files
- The residents' guide
- Three residents' written agreements
- Records of services provided by hairdresser
- Records of transactions undertaken on behalf of three residents
- Records of safe contents
- Records of daily and weekly reconciliations
- Receipts from monies deposited at the home on behalf of residents
- Financial policies and procedures
- Accounting and financial controls procedures for residents
- Procedure of residents' cash
- Procedure for residents' private property

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 3 November 2016

The most recent inspection of the home was an unannounced care inspection. The QIP was yet to be returned at the time of issuing this report. This QIP will be validated by the care inspector at their next inspection.

4.2 Review of requirements and recommendations from the last finance inspection

There has been no previous RQIA finance inspection of this home.

4.3 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. Valuables held on behalf of one resident were also reviewed. Evidence showed that the record of the items held on behalf of the resident was not up to date.

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

Discussion with the registered manager confirmed that staff had received training in relation to the safeguarding of residents' monies. Refresher training had been provided to staff on 17 and 20 October 2016. The registered manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

Discussion with the registered manager confirmed that there were no finance related restrictive practices in place for any resident.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating the safe contents book in relation to the valuables held on behalf of one resident.

	Number of requirements	0	Number of recommendations:	1
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4.4 Is care effective?

Discussion with the registered manager confirmed that the SHSCT was the appointee for three residents at the home, i.e. a person authorised by the Social Security Agency (SSA) to receive and manage the social security benefits on behalf of an individual. We noticed that no record of the details of the person nominated to act as appointee was maintained in the residents' files.

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

Discussion with the registered manager confirmed that no member of staff at the home or at the SHSCT 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.

The registered manager was commended on the strong controls in place for reconciling residents' monies. Records confirmed that reconciliations were completed daily and signed by two members of staff. Records also confirmed that a weekly reconciliation was undertaken and signed by a staff member and countersigned by the registered manager.

Review of records and discussion with staff confirmed that an inventory of residents' property was maintained at the home. The record was updated to note items acquired and disposed of after admission for which staff had been made aware of.

Records confirmed that residents or their representatives were informed in advance of any increase in fees as in line with The Residential Care Homes Regulations (Northern Ireland) 2005.

The registered manager confirmed that the SHSCT managed Patient Private Property (PPP) Accounts on behalf of a number of residents. The manager also confirmed that no bank accounts were managed on behalf of 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 and the time limit for the return of receipts from the purchases. Following discussion, the registered manager agreed to review the policies and procedures and contact the SHSCT for the policies to be revised.

A recommendation is listed within the QIP in relation to this matter.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to updating residents' files with the details of the person at the SHSCT acting as their appointee and reviewing and updating the policies and procures to include all the procedures undertaken on behalf of residents.

Number of requirements 0 Number of recommendations: 2

4.5 Is care compassionate?

The registered manager was commended on the good practice of staff completing a consent form following every transaction made on behalf of residents by members of staff. The consent form gave the details of the purchase or payment for an additional service (e.g. hairdresser) and was signed by the resident and a member of staff. The registered manager countersigned the form to show that approval was agreed for the purchase or payment.

Discussion with staff and review of records confirmed that the SHSCT forwarded monies to the home for the residents the Trust held PPP accounts. 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 standard 15.2 of the DHSSPS Residential Care Homes Minimum Standards (2011).

A recommendation 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 the registered manager confirmed that alternative arrangements were in place for residents wishing to undertake journeys. Residents' family members would provide transport or residents paid for taxis to undertake their journey.

Discussion with the registered manager 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 updating the residents' agreements to include their financial arrangements.

Number of requirements	0	Number of recommendations:	1
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4.6 Is the service well led?

No records of fees paid by residents were available at the time of inspection. Discussion with the registered manager confirmed that all fees were managed by the SHSCT. The registered manager confirmed that no additional monies were received for fees over and above the amount agreed through the contracting arrangement with the Trust.

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 three residents' files evidenced that individual written agreements were in place for all three residents. The agreements were signed by the resident, or their representative and a representative from the home. Records showed that the agreements were reviewed regularly; the last review took place on 28 February 2016.

The agreements reviewed referred to two appendices (appendix A and B) which provided details of the fees paid by, or on behalf of, residents and the charges for additional services provided at the home. None of the agreements reviewed contained these appendices.

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

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 purchases undertaken on behalf of residents and the payments made 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.

Review of records showed good practice when monies were deposited at the home on behalf of residents. Receipts were issued to the person depositing the monies; a copy of the receipt was retained at the home. A sample of records of monies deposited on behalf of residents was examined, the amounts recorded in the residents' transaction sheets agreed to the amounts listed on the receipts.

A review of records of ten transactions made by staff on behalf of three residents (including payments to the hairdresser) showed that 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. One transaction had been recorded two weeks following the purchase. Signed consent forms were in place for all the transactions reviewed.

The inspector discussed, with the registered manager, the practice of staff withdrawing monies to make purchases on behalf of residents. The manager agreed to review this practice and the period for the return of receipts from purchases.

As mentioned within this report a recommendation is listed in the QIP in relation to updating the policies and procedures operated at the home.

Good practice was observed as the procedure for the management of residents' finances was retained in the file containing the residents' transaction sheets. The file also contained a sample of signatures of staff authorised to make purchases on behalf of residents. Records showed that outside suppliers (e.g. clothes suppliers) signed the receipts to confirm that they had received payment.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating the residents' agreements to include the appendices showing the fees paid by residents and the charges for additional services.

Number of requirements	0	Number of recommendations:	1

5.0 Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Kathleen McBeth, registered manager, 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/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 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 the 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 Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered provider may enhance service, quality and delivery.

5.3 Actions taken by the registered manager/registered provider

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered provider will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to agencies.team@rqia.org.uk and assessed 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/manager 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/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan		
Recommendations		
Recommendation 1 Ref: Standard 15.12 Stated: First time	The registered provider should ensure that the record of valuables held on behalf of the resident, identified during the inspection, is updated. The record should include the dates when the items were reconciled, (at least quarterly). A record should be maintained when the items are removed and returned to the safe place.	
To be completed by: 9 December 2016	Response by registered provider detailing the actions taken: The Registered manager can confirm that this recommendation has been put in place within the required time frame.	
Recommendation 2 Ref: Standard 15.10	The registered provider should ensure that a record of the name of the person, from the Trust, nominated to act as appointee is kept in residents' files.	
Stated: First time To be completed by:	The record should also include the date the person was approved to act as appointee by the Social Security agency.	
16 December 2016	Response by registered provider detailing the actions taken: The Registrered manager can confirm that this recommendation has been put in place within the required time frame.	
Recommendation 3 Ref: Standard 20.10	The registered provider 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	
Stated: First time	for staff to purchase items on behalf of residents and the time limit for the return of receipts from the purchases.	
To be completed by: 30 December 2016	A record should be retained showing that staff have read and understood the policies and procedures.	
	Response by registered provider detailing the actions taken: The Registered manager can confirm that the required polices and procedures have been updated within the required timeframe.	
Recommendation 4 Ref: Standard 15.2	The registered provider should 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	
Stated: First time	residents monies forwarded from the residents PPP accounts at the Trust.	
To be completed by: 30 December 2016	Response by registered provider detailing the actions taken: The recommendation is now compliant and the required arrangements have been put in place.	

Recommendation 5 Ref: Standard 4.2 Stated: First time	The registered provider should ensure that updated written agreements are provided to residents or their representatives. The agreements should include the appendices detailing the fees paid by, or on behalf of, residents and the charges for the additional services provided at the home.
To be completed by: 30 December 2016	Response by registered provider detailing the actions taken: The Registered Manager can confirm the the written agreements have been updated as required and the recommnedation has been achieved within the required time frame.

^{*}Please ensure this document is completed in full and returned to agencies.team@rqia.org.uk from the authorised email address*





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