

# Announced Finance Inspection Report 24 November 2016



## Crozier House

Residential  
Meeting House Road, Banbridge, BT32 3ER  
Tel no: 028 4066 2734  
Inspector: Joseph McRandle

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

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced inspection of Crozier House took place on 24 November 2016 from 11:00 to 13:00. 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 home's administrator for part of the inspection. Feedback was provided to the registered manager via a telephone conversation on the day following the inspection. The requirements and recommendations listed within the QIP of this report were discussed during the conversation.

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 home's administrator confirmed that they had not received training in relation to the safeguarding of residents' finances. A recommendation was made in relation to this finding.

### **Is care effective?**

Evidence was reviewed which could not confirm if the Southern Health and Social Care Trust (SHSCT) 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.

Records reviewed showed that a variance existed between the balance of residents' monies held at the home and the balance of monies recorded as withdrawn and deposited on behalf of residents. Evidence suggested that the variance existed due to a recording error. A requirement 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.

### **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 members 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 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 that no written agreements were in place between the registered provider and the residents. A requirement was made in relation to this finding.

Six recommendations were made in relation to the system for recording the details from transactions undertaken by staff 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>	3	11

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ms Iris Cromie, registered manager, via a telephone conversation on the day after the inspection, 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 Crozier House.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Southern HSC Trust/ Frances Rice	<b>Registered manager:</b> Iris Cromie
<b>Person in charge of the home at the time of inspection:</b> Iris Cromie, registered manager.	<b>Date manager registered:</b> 09/09/2013
<b>Categories of care:</b> I - Old age not falling within any other category DE – Dementia	<b>Number of registered places:</b> 27

### 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 registered manager was not on duty. The inspector met with the home's administrator for part of the inspection. Feedback was provided to the registered manager via a telephone conversation on the day following the inspection. The requirements and recommendations listed within the QIP of this report were discussed during the telephone conversation.

The following records were examined during the inspection:

- Four residents' finance files
- The residents' guide
- One resident's written agreement
- Records of services provided by hairdresser and podiatrist
- Records of transactions undertaken on behalf of five residents
- Records of safe contents
- Records of reconciliations of residents' monies
- 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 8 June 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 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. No valuables were held on behalf of residents at the time of the inspection.

Discussion with the home's administrator confirmed that they had not received training in relation to the safeguarding of residents' monies. The registered manager confirmed that apart from the administrator all staff had received training.

A recommendation is listed within the QIP of this report for the administrator to receive safeguarding training.

Discussion with staff 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 the home's administrator receiving safeguarding training.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	1
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### 4.4 Is care effective?

Review of records confirmed that the SHSCT forward monies to the home on behalf of one resident. Staff could not confirm if the SHSCT was the appointee for the resident, 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 record of the details of the person nominated to act as appointee was maintained in the resident's files.

A recommendation is listed within the QIP of this report for the registered manager to confirm if the SHSCT acts as an appointee for any resident. If an appointee is in place 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 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.

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 only one signature was recorded against each of the previous reconciliations.

On reviewing the records the inspector noticed a variance between the balance of the monies held on behalf of residents and the balance from residents' monies withdrawn and deposited. Following a discussion, staff agreed to review the records to locate the variance and confirm if any monies were owed to residents. The reason for the variance should be recorded.

A requirement is listed within the QIP of this report for records to be reconciled to ascertain if monies are owed to residents. An explanation for the variance, identified during the inspection, should be recorded.

A recommendation is also listed within the QIP for two signatures to be recorded against future reconciliations undertaken at the home.

Discussion with staff and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. A sample of records for one resident was taken; no record was available for the resident for which staff had confirmed that the resident owned the television within their room. Discussion with staff also confirmed that records of residents' personal possessions and items of furniture were not always updated following admission.

A recommendation is listed within the QIP of this report for residents' records of 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.

Discussion with staff confirmed that the SHSCT managed a Patient Private Property (PPP) Account on behalf of one resident. Staff 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.

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**

Five areas for improvement were identified during the inspection. These related to retaining a record of the residents' appointee, reconciling residents' records in relation to the variance identified during the inspection, the recording of two signatures against the reconciliation 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>	1	<b>Number of recommendations</b>	4
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**4.5 Is care compassionate?**

Discussion with staff and review of records confirmed that the SHSCT forwarded monies to the home for one resident. A sample of records of monies forwarded by the Trust were examined, the records showed that monies received by the home were paid over to the resident. The appropriate signatures were recorded when the monies were paid over. Review of records showed that these financial arrangements were not included within the resident's written

agreement as in line with regulation 19. (2) 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 on behalf of residents or to pay for services on behalf of residents e.g. hairdressing.

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 members 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
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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 staff confirmed that all fees were managed by the SHSCT.

A residents' guide was in place at the time of the inspection. The guide included the details of 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 three residents. The remaining file contained an agreement which was not complete i.e. pages were missing from the agreement. The agreement in place did not show the current weekly fee paid by, or on behalf of, the resident and was not signed by a representative from the home.

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 of items 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 six purchases undertaken by staff, on behalf of three residents, showed that no details of the purchases were recorded i.e. no details of what the monies were withdrawn for or if the monies were handed over to the residents. No receipt was available from one of the purchases. One record showed that an amount of money withdrawn was signed out by a resident. It was noticed, however, that a receipt was retained from a purchase made from the monies withdrawn. A note was recorded on the receipt which stated that the monies remaining from the purchase were handed over to the resident, indicating that a staff member had made the purchase but had not signed the monies out. Only one signature was recorded against the transactions.

A recommendation is listed within the QIP of this report for the details of transactions to be recorded at all times. Records should indicate if monies are handed over to staff to make purchases on the residents' behalf. The staff member receiving the monies should sign the records. At least two signatures should be recorded against each transaction.

A further recommendation is listed for receipts from purchases undertaken by staff to be retained at all times.

Four further records of transactions reviewed had either been scored out or written over with no explanation of the errors recorded.

A recommendation is listed within the QIP for errors to 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.

Three records of monies deposited at the home on behalf of residents were reviewed. It was the policy at the home to issue a receipt to the person depositing the monies. A receipt was not available for one of the transactions. The person depositing the monies did not always sign the receipt or the residents' transaction sheets to confirm the amount deposited.

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.

Two records of payments to the hairdresser and one to the podiatrist were reviewed. Receipts were available from two of the transactions. Separate receipt books were maintained for the hairdresser and podiatrist. The inspector noticed that on a number of occasions transactions for the Podiatrist were recorded in the hairdresser's book and vice versa. The inspector could not make out a number of the transactions in the books as the details did not transpose clearly from the carbon copy.

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.

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

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

<b>Number of requirements</b>	1	<b>Number of recommendations</b>	6
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### 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Iris Cromie, 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 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

<p><b>Requirement 1</b></p> <p><b>Ref:</b> Regulation 19 (2) Schedule 4 (9) (a)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 May 2017</p>	<p>The registered manager must ensure that residents' records are reconciled to ascertain if monies are owed to residents. An explanation for the variance, identified during the inspection, should be recorded.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registered manager can confirm the variance identified during the inspection was due to a recording error. A review of procedures and processes since the inspection has indicated that the Residents Money Record Book was used, a receipt for the money was given to the resident but the calculation for the total contents of the safe was incorrect. The actions agreed following this have ensured that a 2<sup>nd</sup> check is completed on all monetary calculations. This review of records has provided the confidence that monies are not owed to residents.</p>
<p><b>Requirement 2</b></p> <p><b>Ref:</b> Regulation 5 (3)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered manager must ensure that updated written agreements are in place for all residents accommodated at the home.</p> <p>The agreements should detail the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.</p> <p>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.</p> <p>Copies of the signed agreements must be retained within residents' files.</p> <p><b>Response by registered provider detailing the actions taken:</b> Financial agreements are usually retained by the Key worker and or the Trust Finance Department. However in response to this requirement the Registered Manager is requesting that copies of the signed agreements are made available within the residents files . Communication to key workers will be prepared by the Head of Service to ensure compliance within the sepcified time frame.</p>
<p><b>Requirement 3</b></p> <p><b>Ref:</b> Regulation 19 (2) Schedule 4 (3)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>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 resident's PPP account managed by the Trust.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registered manager will ensure that the Communication to key workers will include a request that the agreement to pay documentation detailing the arrangements above is retained in the residents files.</p>

<b>Recommendations</b>	
<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 16.9</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 all staff receive vulnerable adults safeguarding training.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registered Manager can confirm that all staff receive vulnerable adults safeguarding training every two years and records are retained to confirm this. The reference made in this report to staff will confirm that this training was delivered on 16<sup>TH</sup> &amp; 30<sup>TH</sup> Jnauary 2017</p>
<p><b>Recommendation 2</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 a record of the name of the person, from the Trust, nominated to act as appointee is kept in 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 Registered Manager can confirm that a record of the name od the person from the Trust nominated to act as appointee for the named resident in the home is kept on the residents file. The additional information required as part of this recommendation is also retained on the residents file.</p>
<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Standard 15.12</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 25 November 2016</p>	<p>The registered manager should ensure that two signatures are recorded against the reconciliations of residents' monies at all times. The record should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registerd Manager has reviewd this process and can confirm that this recommendation will be adhered to.</p>
<p><b>Recommendation 4</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 Registered Manager has reviewed the personal property inventory and can confirm that the above process will be put in place and completed within the required time frame.</p>
<p><b>Recommendation 5</b></p> <p><b>Ref:</b> Standard 20.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b></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>

30 June 2017	<p><b>Response by registered provider detailing the actions taken:</b> The Registered manager can confirm that a record has been put in place to show that staff have read and understood the policies and procedures .</p>
<p><b>Recommendation 6</b> <b>Ref:</b> Standard 15.7 <b>Stated:</b> First time <b>To be completed by:</b> 25 November 2016</p>	<p>The registered manager should ensure that the details of transactions undertaken on behalf of residents are recorded at all times. Records should show if monies are handed over to staff to make purchases on the residents' behalf and signed by the staff member receiving the monies. At least two signatures should be recorded against each transaction.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registered manager can confirm that this recommendation has been put in place.</p>
<p><b>Recommendation 7</b> <b>Ref:</b> Standard 15.7 <b>Stated:</b> First time <b>To be completed by:</b> 25 November 2016</p>	<p>The registered manager should ensure that receipts from purchases undertaken by staff on behalf of residents are retained at all times. Where a receipt is not available, the record should be annotated to reflect this.</p> <p><b>Response by registered provider detailing the actions taken:</b> The Registered Manager can confirm that this recommendation has been put in place.</p>
<p><b>Recommendation 8</b> <b>Ref:</b> Standard 20.14 <b>Stated:</b> First time <b>To be completed by:</b> 25 November 2016</p>	<p>The registered manager should ensure that recorded errors are 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><b>Response by registered provider detailing the actions taken:</b> The Registered Manager can confirm that this recommendation has been put in place and this has been re-enforced with all staff.</p>
<p><b>Recommendation 9</b> <b>Ref:</b> Standard 15.6 <b>Stated:</b> First time <b>To be completed by:</b> 25 November 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> The Registered manager can confirm that the above recommendation has been put in place and this has been re-enforced with all staff.</p>
<p><b>Recommendation 10</b> <b>Ref:</b> Standard 20.14 <b>Stated:</b> First time</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 that a system for adequate recording is in place to aid the audit process.</p>

<p><b>To be completed by:</b> 31 May 2017</p>	<p><b>Response by registered provider detailing the actions taken:</b> The current recording system using the same book for the above transactions has been reviewed. Separate books have now been put in place and from the 1<sup>st</sup> of June a better quality duplicate book will be used to record transactions for both services</p>
<p><b>Recommendation 11</b>  <b>Ref:</b> Standard 20.14  <b>Stated:</b> First time  <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> The Registered Manager can confirm that this recommendation has been put in place and will take effect from the 1<sup>st</sup> June 2017.</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\**



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