

Unannounced Finance Inspection Report 27 November 2018











Crozier House

Type of Service: Residential

Address: Meeting House Road, BT32 3ER

Tel No: 02840662734

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 27 beds that provides care for residents living with dementia and older people.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust	Registered Manager: Iris Cromie
Responsible Individual(s): Shane Devlin	
Person in charge at the time of inspection: Iris Cromie	Date manager registered: 9 September 2013
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia	Number of registered places: 27 Maximum of 5 residents in dementia category of care. 4 approved places for day service

4.0 Inspection summary

An unannounced inspection took place on 27 November 2018 from 11.00 to 13.30 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, members of staff involved in managing residents' finances receiving adult safeguarding training, maintaining records within resident's file showing that the Southern Health and Social Care Trust (SHSCT) acts as their appointee, updating the inventory of residents' property following admission to the home, recording of residents' monies received from the SHSCT, retaining records of residents' financial arrangements within their files, facilitating journeys on behalf of residents, offering support to residents for managing their own finances, listing the services provided to residents as part of their weekly fee, hairdresser and podiatrist signing records, signed authorisation forms for making purchases on behalf of residents and issuing receipts to person depositing monies on behalf of resident.

Five areas requiring improvement were identified under standards in relation to: updating the safe contents book to include additional monies held on behalf of temporary residents, contacting the SHSCT to discuss monies held on behalf of a previous resident, reviewing the system for undertaking and recording the reconciliations of monies held on behalf of residents, recording at least two signatures in residents' transaction sheets (restated for a second time) and the recording of errors in residents' transaction sheets (restated for a second time).

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	*5

Two areas for improvement under standards have been stated for a second time.

Details of the Quality Improvement Plan (QIP) were discussed with Iris Cromie, 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.

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

The most recent inspection of the home was an unannounced care inspection undertaken on 5 July 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 registered manager 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 inspector provided the manager with "Have we missed you cards" which were then placed in a prominent position to allow residents or their relatives who were not present on the day of the inspection, the opportunity to give feedback to RQIA regarding the quality of service provision.

The following records were examined during the inspection:

- two residents' finance files
- two residents' written agreements
- records of safe contents
- the residents' guide
- cash held on behalf of three residents
- records of monies held on behalf of three residents
- a sample of records of reconciliations between residents monies held and records of monies held
- records of residents' monies forwarded from the SHSCT

- records of services provided by hairdresser and podiatrist
- a sample of records of payments to the hairdresser and podiatrist
- records of purchases undertaken on behalf of one resident
- a sample of receipts from monies deposited at the home on behalf of residents
- financial policies and procedures
- one resident's records 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 registered manager at the conclusion of the inspection.

6.0 The inspection

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

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

6.2 Review of areas for improvement from the last finance inspection dated 24 November 2016

Areas for improvement from the last finance inspection		
Action required to ensure Homes Regulations (North	e compliance with The Residential Care thern Ireland) 2005	Validation of compliance
Requirement 1	The registered manager must ensure that residents' records are reconciled to ascertain if	
Ref: Regulation 19 (2) Schedule 4 (9) (a)	monies are owed to residents. An explanation for the variance, identified during the inspection, should be recorded.	
Stated: First time	Action taken as confirmed during the	
To be completed by: 31 May 2017	inspection: A review of records evidenced that reconciliations between residents' monies held and the records of monies held were undertaken following the previous finance inspection on 24 November 2016. Discussion with staff confirmed that the variance identified during the previous finance inspection was due to a recording error and that no monies were owed to residents.	Met

Requirement 2

Ref: Regulation 5 (3)

Stated: First time

To be completed by: 30 June 2017

The registered manager must ensure that updated written agreements are in place for all residents accommodated at the home.

The agreements should detail the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.

Agreements should be signed by residents or their representatives (if resident lacks capacity to make decisions in relation to the agreement) and a representative from the home. Where a resident or their representative is unable or chooses not to sign this must be recorded.

Copies of the signed agreements must be retained within residents' files.

Action taken as confirmed during the inspection:

Discussion with staff confirmed that since the previous finance inspection the majority of residents were placed in the home by the SHSCT on a temporary basis. These residents stayed for a maximum of two weeks and were not charged by the Trust as the placement was an extension of a hospital bed. Two permanent residents were residing at the home at the time of the inspection. A review of the two permanent 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 to residents at an additional cost.

The agreements did not show the amount of the current fee paid by, or on behalf of, residents. Discussion with staff confirmed that fees were agreed between the SHSCT and the residents. The registered manager was advised to review the written agreements in order to include a provision which states that fees are agreed with the SHSCT and the details of the fees are forwarded directly to the residents from the Trust.

Met

Requirement 3 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 resident's PPP account managed by the Trust. Action taken as confirmed during the inspection: Discussion with the registered manager confirmed that the financial arrangements would form part of residents' annual assessments which were retained within the residents' care plans. A review of two residents' files evidenced that copies of the financial arrangements for each resident were retained within their files.	Met
Action required to ensure Homes Minimum Standar	compliance with DHSSPS Residential Care	Validation of compliance
Ref: Standard 16.9 Stated: First time To be completed by: 30 June 2017	The registered manager should ensure that all staff receive vulnerable adults safeguarding training. Action taken as confirmed during the inspection: Discussion with the registered manager confirmed that all members of staff had received adult safeguarding training since the previous finance inspection on 24 November 2016. A review of records evidenced that the home's administrator received training in January 2017.	Met
Ref: Standard 15.10 Stated: First time To be completed by: 31 May 2017	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. The record should also include the date the person was approved to act as appointee by the Social Security Agency. Action taken as confirmed during the inspection: Discussion with staff confirmed that the SHSCT acts as an appointee for one resident. A review of the resident's file evidenced that the required records were maintained within their file.	Met

Ref: Standard 15.12 Stated: First time To be completed by: 25 November 2016	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. Action taken as confirmed during the inspection: A review of records evidenced that the initials of two members of staff were recorded against the records of the reconciliations. The system for undertaking and recording the reconciliations are discussed further under section 6.5 of this report.	Met
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. 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. Discussions also confirmed that furniture and televisions located within residents' rooms were provided by the SHSCT.	Met
Recommendation 5 Ref: Standard 20.10 Stated: First time To be completed by: 30 June 2017	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. A record should be retained showing that staff have read and understood the policies and procedures.	Met

	Action taken as confirmed during the inspection: A review of the policies and procedures evidenced that they were updated since the previous finance inspection on 24 November 2016. The financial procedures undertaken by staff on behalf of residents were included within the revised policies. A record of the names of the members of staff who had read and understood the revised policies and procedures was retained in the home at the time of the inspection.	
Recommendation 6 Ref: Standard 15.7 Stated: First time To be completed by: 25 November 2016	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.	
	Action taken as confirmed during the inspection: A review of a sample of transactions evidenced that since the previous finance inspection the details of the transactions were recorded. The records were also signed by the staff member receiving the monies. It was noticed that a number of the entries had only one signature recorded against them. This area for improvement has been restated.	Partially met
Recommendation 7 Ref: Standard 15.7 Stated: First time	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.	
To be completed by: 25 November 2016	Action taken as confirmed during the inspection: A review of two payments made on behalf of residents evidenced that receipts were retained for both transactions.	Met
Recommendation 8 Ref: Standard 20.14 Stated: First time	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.	Not met

To be completed by: 25 November 2016	Action taken as confirmed during the inspection: A review of one resident's transaction sheet evidenced that since the previous finance inspection, a number of records had been written over with no explanation for the errors recorded. This area for improvement has been restated.	
Ref: Standard 15.6 Stated: First time To be completed by: 25 November 2016	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. Action taken as confirmed during the 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
Ref: Standard 20.14 Stated: First time To be completed by: 31 May 2017	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. Action taken as confirmed during the inspection: A review of the records evidenced that the system for recording the services provided by the hairdresser and podiatrist had been revised since the previous finance inspection. Separate books are used for each service provided resulting in a significant improvement in the accuracy of recording.	Met
Recommendation 11 Ref: Standard 20.14 Stated: First time To be completed by: 31 May 2017	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. Action taken as confirmed during the inspection: A review of records evidence that a record of signatures for members of staff involved in making transactions on behalf of residents was maintained at the home.	Met

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is 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 of three residents were counted, the amounts retained agreed to the balance of monies recorded at the home.

Review of records and discussion with staff confirmed that no valuables were held on behalf of residents. A safe contents book was in place at the time of the inspection. Discussion with staff confirmed that monies were held for an additional three temporary residents. The monies had been handed over by the residents for safekeeping. A review of records showed that the amounts held on behalf of these residents were not recorded in the safe contents book. This was discussed with the registered manager and identified as an area for improvement.

A review of records evidenced that an amount of money was held on behalf of a resident since April 2017. Discussion with staff confirmed that the resident had left the home and was unable to be contacted. The registered manager was advised to contact the resident's designated care manager at the trust in order to discuss the monies held. This was identified as an area for improvement.

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 registered manager confirmed that members of staff involved in managing residents finances had received training in relation to adult safeguarding. A review of records evidenced that the home's administrator last received safeguarding training in January 2017. 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 and members of staff involved in managing residents' finances receiving adult safeguarding training.

Areas for improvement

Two areas for improvement were identified under standards in relation to updating the safe contents book to include additional monies held on behalf of temporary residents and contacting the SHSCT to discuss monies held on behalf of a previous resident.

	Regulations	Standards
Total number of areas for improvement	0	2

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 the SHSCT was acting as the appointee for one resident, i.e. a person authorised by the Social Security Agency to receive and manage the benefits on behalf of an individual. A review of the resident's file evidenced that the required documentation in relation to acting as the appointee was retained within their file.

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 and a review of records confirmed that reconciliations between the monies held on behalf of residents and the records of monies held were undertaken on a weekly basis. The record was initialled by two members of staff. It was noticed that the monies held for temporary residents were not included in the weekly reconciliations. The system for undertaking and recording the reconciliations was discussed with the registered manager and identified as an area for improvement.

Discussion with staff and a review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. The records were updated with items acquired and disposed of after admission for which staff had been made aware of. Discussion with staff also confirmed that furniture and televisions in residents' rooms were provided by the SHSCT.

Review of records showed that the SHSCT managed a Patient Private Property (PPP) account for the resident they act as an appointee. Discussion with Staff confirmed that no bank accounts were managed on behalf of residents and no comfort fund monies were maintained on behalf of residents.

Areas of good practice

There were examples of good practice found in relation to maintaining the required records within the resident's file the SHSCT acts as appointee and updating the inventory of residents' property following admission to the home.

Areas for improvement

An area for improvement was identified under standards in relation to reviewing the system for undertaking and recording the reconciliations of monies held on behalf of residents

	Regulations	Standards
Total number of areas for improvement	0	1

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.

A review of records confirmed that the SHSCT forwarded monies to the home on behalf of the resident the Trust acts as an appointee. A sample of records of monies forwarded by the Trust was examined; the records showed that monies recorded as received by the home agreed to the amounts forwarded by the Trust. Records also showed that the monies forwarded from the SHSCT were handed over to the resident. Good practice was observed as the resident and a member of staff had signed the records to confirm the transaction.

Discussion with staff and a review of records confirmed that records of the financial arrangements for residents were retained within the residents' files.

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 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 the recording of residents' monies received from the SHSCT, retaining the records of residents' financial arrangements within their files, 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.

Discussion with staff confirmed that the majority of residents were placed in the home by the SHSCT on a temporary basis. These residents stayed for a maximum of two weeks and were not charged by the Trust as the placement was an extension of a hospital bed. Two permanent residents were residing at the home at the time of the inspection.

No records of fees paid by the permanent residents were available at the time of inspection. Discussion with staff confirmed that residents' fees were managed by the SHSCT.

Staff also 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. The agreements did not show the amount of the current fee paid by, or on behalf of, residents.

Discussion with staff confirmed that fees were agreed between the SHSCT and residents. The registered manager was advised to review the written agreements in order to include a provision which states that fees were agreed with the SHSCT and the details of the fees were forwarded directly to residents from the Trust.

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.

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

A sample of payments to the hairdresser and podiatrist for one resident was examined. The amounts recorded as paid in the resident's transaction sheet agreed to the amounts recorded in the hairdressing and podiatry books. Records also showed that the dates of the payments recorded in the transaction sheet corresponded to the dates recorded in the hairdressing and podiatry books. A review of other residents' transaction sheets showed that a number of the entries in the sheets had only one signature recorded against them. This was identified as an area for improvement during the previous finance inspection on 24 November 2016. This area for improvement has been restated for a second time.

A review of records of two purchases undertaken by staff on behalf of one resident showed that the details of the transactions were recorded. Two signatures were recorded against each of the transactions. Receipts from the purchases reviewed were retained at the home at the time of the inspection. Good practice was observed as authorisation forms to make the purchases were held with the receipts from the purchases. The forms provided details of the purchases and the details of the member of staff making the purchase. The form was signed by the member of staff making the purchase, the resident and countersigned by the registered manager.

A review of residents' transaction sheets evidenced that a number of records had been written over with no explanation for the errors recorded. This was identified as an area for improvement during the previous finance inspection on 24 November 2016. This area for improvement has been restated for a second time.

Two records of monies deposited at the home on behalf of one resident were reviewed. The amounts deposited were recorded in the resident's transaction sheet. In line with good practice receipts were issued to the person depositing the monies.

The inspector discussed with the registered manager, 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 registered manager 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 and podiatrist signing records, signed authorisation forms for making purchases on behalf of residents and issuing receipts to the person depositing monies on behalf of the resident.

Areas for improvement

Two areas for improvement were identified under standards in relation to recording at least two signatures in residents' transaction sheets and the recording of errors in residents' transaction sheets.

	Regulations	Standards
Total number of areas for improvement	0	2

7.0 Quality improvement plan

Areas for improvement 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 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 Standards, August 2011	e compliance with DHSSPS Residential Care Homes Minimum	
Area for improvement 1	The registered person shall ensure that the monies held for temporary residents are recorded in the safe contents book.	
Ref: Standard 15.5 Stated: First time	The book should be updated when monies are withdrawn from or deposited into the safe place.	
To be completed by: 28 November 2018	Ref: 6.4	
	Response by registered person detailing the actions taken: Monies held for temporary residents ae now recorded in safe contents book; updated when monies withdrawn as appropriate.	
Area for improvement 2 Ref: Standard 15.5	The registered person shall contact the SHSCT in order to agree a decision in relation to the monies held on behalf of the previous resident, identified during the inspection.	
Stated: First time	Ref: 6.4	
To be completed by: 31 December 2018	Response by registered person detailing the actions taken: It has been agreed with the SHSCT, that monies held on behalf of previous resident identified during inspection should be lodged to charitable donations account. This lodgement has been made.	
Ref: Standard 15.12	The registered person shall review the system for undertaking and recording the weekly reconciliations of residents' monies held at the home. The monies held on behalf of temporary residents should be included in the reconciliations.	
Stated: First time To be completed by: 28 November 2018	The records of the reconciliations should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff to evidence that they have taken place.	
	Ref: 6.5	
	Response by registered person detailing the actions taken: Monies held on behalf of temporary residents are included in the reconcillations. Countersigned by 2 senior staff.	
Area for improvement 4	The registered person shall ensure that the details of transactions undertaken on behalf of residents are recorded at all times. Records	
Ref: Standard 15.7 Stated: Second time	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.	
To be completed by: 28 November 2018	Ref: 6.7	

	Response by registered person detailing the actions taken: Two signatures are recorded against each transaction. All transactions recorded.
Area for improvement 5	The registered person shall ensure that errors are crossed out and a new line used to record the transaction. A reason for the error should
Ref: Standard 20.14	be recorded and initialled by the staff member recording the transaction.
Stated: Second time	
	Ref: 6.7
To be completed by:	
28 November 2018	Response by registered person detailing the actions taken: Errors crossed out and new line to record transaction, reason recorded and initialled by staff member recording the transaction.

^{*}Please ensure this document is completed in full and returned via Web Portal*





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