

Unannounced Finance Inspection Report 01 June 2017











Breffni House

Type of Service: Residential Care Home

Address: 27-33 Wandsworth Gardens, Belfast, BT4 3NL

Tel No: 028 9065 6075 Inspector: Briege Ferris

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 22 beds that provides care for older residents, or those living with dementia or a physical disability.

3.0 Service details

Organisation/Registered Provider: Breffni House Ltd Responsible Individual(s): Mark John Uprichard	Registered Manager: Sally-Anne Stacey
Person in charge at the time of inspection: Sally-Anne Stacey	Date manager registered: 25 February 2014
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia PH – Physical Disability	Number of registered places: 22

4.0 Inspection summary

An unannounced inspection took place on 01 June 2017 from 09.25 to 14.30.

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

The inspection assessed progress with any areas for improvement identified during and since the last finance inspection (if any) 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 for example, in relation to methods available for residents and representatives to feedback to the home; the availability of a safe place for residents or representatives to deposit money and valuables; and in relation to available mechanisms to record income and expenditure on behalf of residents and to retain supporting documents such as lodgement or purchase receipts.

Areas requiring improvement were identified in relation to adult safeguarding training; improving how income, expenditure and personal property records are maintained on behalf of residents; and providing individual agreements and personal monies authorisation documents to residents.

Enforcement action resulted from the findings of this inspection. This is further detailed in section 4.1.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	7	4

Details of the Quality Improvement Plan (QIP) were shared with Mark Uprichard, registered person, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the findings of this inspection.

As a result of this inspection, RQIA were concerned regarding the home's arrangements in place to ensure residents' monies were appropriately safeguarded. The areas of concerns related to:

- 1. Statements made by the registered manager in respect of borrowing from residents' monies deposited for safekeeping in order to pay for an expense associated with running the business of the home; none of the nine balances held on behalf of residents agreed to the book balances on the day of inspection. In addition, a number of finance policies and procedures relating to direct practice were not in place.
- 2. Entries in a sample of the residents' income and expenditure records were consistently made by the registered manager and a significant number of recent entries in the records had not been countersigned by a second person. The registered manager confirmed that there were no audit mechanisms in place in respect of residents' monies. There was no evidence available to identify that the income and expenditure records had ever been reconciled to the residents' cash balances held; the absence of reconciliations was confirmed by the registered manager.

As a result of the concerns identified during the inspection, RQIA referred the matter to the Belfast Health and Social Care Trust (BHSCT).

In accordance with RQIA's Enforcement Policy and Procedures, a meeting was held with the registered person and their representative at RQIA's offices on 14 June 2017; this meeting was held with the intention of issuing two Failure to Comply Notices under the Residential Care Homes Regulations (Northern Ireland) 2005. During the meeting, the registered person was informed of the referral of the above matters to the Trust.

At the meeting, the registered person provided RQIA with the details of what actions had been taken following the inspection and those which will be taken to address RQIA's concerns in respect of the matters outlined at point one above.

It was agreed that the registered person would ensure the following: that the registered manager and all relevant members of staff receive refresher training in safeguarding residents' money and valuables; that RQIA would be provided with copies of the registered provider regulation 29 reports until further notice (the frequency of which should be risk assessed in light of the concerns identified); and that RQIA should be provided with a written report on the outcome of the registered person's review of previous financial practices in the home, including any actions taken, as soon as this is available.

In respect of the matters outlined at point two above, RQIA decided to serve one Failure to Comply Notice in respect of noncompliance with Regulation 19 (2) of the Residential Care Homes Regulations (Northern Ireland) 2005.

RQIA will carry out an inspection of Breffni House to ensure compliance with the above regulations, as further detailed in the related Failure to Comply Notice.

The enforcement policies and procedures are available on the RQIA website.

https://www.rgia.org.uk/who-we-are/corporate-documents-(1)/rgia-policies-and-procedures/

Enforcement notices for registered establishments and agencies are published on RQIA's website at https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity with the exception of children's services.

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 none of these incidents related to residents' money or valuables. The record of calls made to RQIA's duty system was also reviewed and this did not identify any relevant issues; the care inspector was contacted prior to the inspection and they confirmed there were no matters to be followed up.

During the inspection, the inspector met with the registered manager, who confirmed that the home did not employ an administrator. The registered manager had a planned appointment on the afternoon of the inspection and therefore feedback from the inspection was shared with Mark Uprichard, the registered person, following the inspection.

The following records were examined during the inspection:

- The home's Statement of Purpose
- Written policy and procedure in respect of Whistleblowing, dated "2015"
- A record of personal property for one resident
- A record of charges in respect of one resident's care and accommodation fees
- A sample of residents' income and expenditure records
- A sample of hairdressing and podiatry treatment records
- A untitled document relating to management of residents' monies

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 23 March 2017

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 the next care inspection.

6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

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

The registered manager confirmed that adult safeguarding training was mandatory for all staff in the home. She was able to describe day to day controls in place in the home to safeguard residents' money and valuables.

Discussions with the registered 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 resident.

The home had a safe place available for the deposit of cash or valuables belonging to residents; the inspector was satisfied with the location of the safe place and the persons with access. On the day of inspection cash belonging to a number of residents was deposited for safekeeping; valuables belonging to one resident were being held.

The home did not have a written safe record/safe register to record the contents of the safe place, including any items depositing for safekeeping. As noted above, the home was holding a number of valuable items for one resident which had been deposited for safekeeping. These items had been recorded in the resident's income and expenditure records rather than being recorded appropriately in a record of safe contents. A review of the safe place identified that the items recorded in the income and expenditure records were contained within the safe place on the day.

Section 6.5 of this report includes further detail in respect of recording valuables deposited for safekeeping.

A sample of book balances held for residents were also selected in order to identify that they agreed to the cash balances for each of the selected residents.

While the sample of cash balances were being counted by the inspector, the registered manager reported that as a result of having insufficient petty cash, she had borrowed from a resident's money deposited for safekeeping. She explained that this was done in order to pay for an expense associated with running the business of the home. A second resident's cash tin was examined and this contained an undated IOU for £40, which the registered manager confirmed she had written.

On the assumption that the income and expenditure records were correct as of the most recent entries, when compared with the recorded book balances, each of the nine residents' cash balances held were incorrect. Five residents' cash balances were under by £79.45, £72.51, £25.00, £10.00 and £0.40 respectively and four residents had more cash in their tins when compared to the written balances recorded for them.

In accordance with RQIA's Enforcement Policy and Procedures, a meeting was held with the registered person and their representative at RQIA's offices on 14 June 2017. At the meeting, the registered person confirmed that the registered manager had used residents' monies deposited for safekeeping on expenditure associated with running the business e.g.: on printer ink and dry cleaning bills for the home; this was acknowledged as wholly inappropriate. The registered person asserted that petty cash was always available at short notice to the home and that he was unaware of the above practices until these were highlighted following the finance inspection. The registered person also reported that following the inspection, each resident's income and expenditure record had been reconciled to the balance held.

Specifically, it was agreed that the registered person would:

- ensure that the registered manager (and any other relevant member of staff) receives refresher training in safeguarding residents' money and valuables;
- provide RQIA with copies of the registered provider regulation 29 reports until further notice; which should encompass a review of the home's practice in relation to safeguarding residents' money and valuables;
- risk assess whether it is necessary to carry out more frequent registered provider visits in light of the concerns discussed in the meeting on 14 June 2017.

Requirements have been made in respect of the above actions.

It was also noted that the registered person would provide RQIA with a written report on the outcome of the review of previous financial practices in the home, including any actions taken, as soon as this is available.

Areas of good practice

The home had a safe place available for the deposit of money or valuables, access was limited to authorised persons.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to ensuring that the registered manager (and any other relevant member of staff) receives refresher training in safeguarding residents' money and valuables and ensuring that RQIA is provided with copies of the registered provider regulation 29 reports until further notice.

	Regulations	Standards
Total number of areas for improvement	2	0

6.5 Is care effective?

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

Discussions with the registered manager identified that no representative of the home was acting as nominated appointee for any resident. The registered manager confirmed that the home was not in direct receipt of the personal monies for any resident. She described how a number of residents' family representatives deposited money with the home in order to pay for goods or services facilitated within the home for which there was an additional charge, such as hairdressing, podiatry, newspapers or other sundries.

In one resident's case, personal monies for expenditure were received from a solicitor acting as controller. In this case, cheques were received by the home which the registered manager explained were cashed through the business bank account, with the cash subsequently deposited into the balance held at the home for safekeeping. She described how a cheque had been received recently; however she noted that the balance had only been partly deposited due to a query regarding the maximum amount which could be held in the safe place. The registered manager confirmed that as of the date of inspection, there was a sum of money which had not yet been deposited to the resident's cash balance held in the home. A review of the resident's income and expenditure records confirmed that an entry noting that a sum of money was owed to the resident had been recorded. Following the inspection, this finding was shared with the registered person.

The home's arrangements to prevent any undue delay in the deposit of the resident's money (based on the above arrangement) will be reviewed at a future finance inspection of the home.

Evidence was reviewed which identified that a receipt was provided to those making deposits, however it was noted that these were routinely signed by the person receiving the money. The inspector advised that best practice would be for both the person depositing the money (or another member of staff) to sign the record alongside the person receiving the money. The inspector advised that this was a safeguard both for residents and for members of staff receiving money.

For those residents for whom the home engaged in transactions for goods or services, records of income and expenditure were available. A sample of the entries in the residents' income and expenditure records were reviewed. The records followed a basic financial ledger format, and the review identified that entries were consistently made by the registered manager; a significant number of recent entries in the records had not been countersigned by a second person.

The registered manager confirmed that there were no audit mechanisms in place in respect of residents' monies. There was no evidence available to identify that the income and expenditure records had ever been reconciled to the residents' cash balances held. The absence of reconciliations was confirmed by the registered manager.

These findings were discussed with the registered person and their representative at a meeting held with RQIA on 14 June 2017. Following the meeting, RQIA decided to serve one Failure to Comply Notice in respect of noncompliance with Regulation 19 (2) of the Residential Care Homes Regulations (Northern Ireland) 2005.

A further inspection of home will be carried out to ensure compliance with the above regulations, as further detailed in the related Failure to Comply Notice.

The registered person was reminded that in future, each entry in the income and expenditure records maintained for residents must detail the date money is deposited for safekeeping by the resident or their representative and must be signed by two people. When money is returned to the resident or their representative or is used on the resident's behalf, the record must be updated with the date of the transaction and must also detail the signatures of two people. Records of residents' possessions deposited for safekeeping or withdrawn by the resident or their representative must detail the date and the signatures of two people. At least every quarter, a reconciliation of residents' money or possessions deposited for safekeeping must be performed and evidenced, with the date and signatures of two people recorded. An initial reconciliation must be performed, evidenced and recorded before 27 July 2017.

Requirements have been made in respect of the above.

As noted above, hairdressing and podiatry treatments were being facilitated within the home. A sample of hairdressing treatment receipts were reviewed, which were found to detail the date, the name of the resident, the treatment received (and the cost) the signature of the hairdresser and the initials of a second person. These controls were not in place in respect of podiatry receipts/treatment records.

These findings were shared with the registered person and it was noted that there should be consistent practice in the home with respect to recording how residents' monies are spent on treatments for which there is an additional charge.

A recommendation was made in respect of this finding.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see the property records for three residents.

An untitled book was provided by the registered manager who advised that the record for each resident was made on admission. A review of the book identified that it contained a record for one of the three residents sampled. The entry was dated December 2015 and had been updated with more items in January 2016. The original entry had been signed by the registered manager.

The property records for the remaining two residents were not contained in the book.

A requirement was made to ensure that a record is maintained of the furniture and personal possessions which each of the residents have brought with them to the home; (a record should be made for each of the current residents in the home; the records should be updated to record items acquired or disposed of after admission).

The registered manager confirmed that the home did not have a comfort fund for donations, manage any bank account for residents whether individually or jointly, nor did the home provide a transport service to residents.

Areas of good practice

There were examples of good practice found in respect of the availability of mechanisms to record income, expenditure and personal property records on behalf of residents.

Areas for improvement

Five areas for improvement were identified during the inspection. These related to controls in respect of recording income and expenditure and reconciliations on behalf of residents; maintaining personal property records for resident and the manner in which records of treatments facilitated in the home which have an additional charge are maintained.

	Regulations	Standards
Total number of areas for improvement	4	1

6.6 Is care compassionate?

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

Day to day arrangements in place to support residents with their monies were discussed with the registered manager and she described how the home supported residents in this regard. She reported that arrangements to safeguard a resident's money would be discussed with the resident or their representative prior to, or at the time of the resident's admission to the home.

Discussion with the registered manager identified that the home had a number of methods in place to encourage feedback from families or their representatives in respect of any issue. This included ongoing verbal feedback, six-monthly residents' meetings, a "quality review" questionnaire and annual care review meetings.

Arrangements for residents to access money outside of normal office hours were discussed with the registered manager. The registered manager explained the arrangements in place to ensure that those residents who routinely required access to their money outside of normal office hours would be able to do so.

Areas of good practice

There were examples of good practice in relation to listening to and taking account of the views of residents via feedback mechanisms described by the registered manager.

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

During the inspection, the home's written policies and procedures were requested. A review of the folders provided identified that a significant number of policies and procedures relating to direct practice were not in place. Written policies which were absent included those in respect of 'Safeguarding and protecting residents' money and valuables', 'Accounting and financial control arrangements' and 'Gifts to staff and donations to the home'.

This finding was discussed with the registered person and their representative at the meeting held with RQIA on 14 June 2017. At the meeting, the registered person provided a copy of the home's undated "Policy of Safekeeping of Resident's Money and Property". He noted that the document version control history identified that it had been created on 13 February 2015 and relayed that he was not clear why the registered manager did not produce the document during the inspection.

In light of the broader inspection findings and the registered person's commitment to review financial practices in the home; it was recommended that the policy and procedure be reviewed and updated as appropriate.

The statement of purpose reviewed on inspection outlined the organisational structure and contained some information for prospective residents regarding safeguarding of their money in the home "...when a resident is admitted into Breffni House, the resident can avail from a locked cashbox if they wish."

Individual resident agreements were discussed with the registered manager who noted that documents were all held on the residents' care files. The three sampled files were provided and a review of all three identified that none of the residents had an individual written agreement on their file.

A copy of the home's up to date written agreement template was requested during the inspection and was provided by the deputy manager. Following the inspection, the registered manager emailed RQIA a copy of the same document.

A review of the agreement identified that it did not constitute an individual agreement as detailed within the Residential Care Homes Regulations (Northern Ireland) 2005 and specifically, standard four of the (DHSSPS) Residential Care Home's Minimum Standards, (updated August 2011). The front page of the agreement detailed reference to operating "...in accordance with the Registered Care Homes (NI) Order 1992 and the Residential Care Homes Regulations (NI) 1993." The document therefore required updating, not least to reflect the current regulatory framework.

Each resident or their representative must have a written individual agreement with the home which reflects the up to date weekly fee for their stay in the home, the person(s) by whom the fees are payable and methods of payment. Any individual financial arrangements (such as those for the one resident detailed in section 6.5 of this report) must also be reflected in each resident's agreement with the home.

RQIA ID: 1582 Inspection ID: IN029287

A requirement was made in respect of this finding.

It was highlighted that each resident's written agreement with the home should be updated to reflect any changes to fees payable or any other matter as detailed in the agreement. Changes to the agreement should be agreed in writing with the resident or their representative.

Discussion was held regarding written personal monies authorisations between the resident/their representative and the home. These documents are in place to provide the home with authority to use a residents' personal monies to purchase goods and services on their behalf. The files of three residents for whom the home was making such purchases were selected for review.

A review of the first resident's file evidenced an untitled document, which had been signed by the resident and the registered manager. It stated that "On admission, residents will be offered a safe deposit box to keep their money or valuables in. This will be locked and the key given to the resident. The spare key will be given to the Manager or family member as resident prefers. The box will be kept in a locked cupboard. Only the manager and officer in charge have access to this. An account is kept in a file of all money put in and taken out. This must be signed by the resident and the manager or officer in charge at each transaction. Breffni House recognises the right of residents to keep money in their own room but this is done at resident's own risk."

It was noted that the authorisation set out the general controls to be adhered to and did not detail any specific scope of authority, such as listing the goods and services for which the home has been given permission to purchase on behalf of the individual resident.

A recommendation was made for this document to be reviewed and consideration given to elaborating accordingly.

A review of the files for the remaining two residents identified that neither had the above document in place.

A recommendation was made to ensure that where the home make purchases of goods or services on behalf of a resident, the resident has a personal monies authorisation document in place as described above.

Evidence from the inspection highlighted weaknesses in appropriate governance and oversight arrangements in respect of how residents' monies had been safeguarded by the home and in particular regarding actions taken by the manager and weaknesses in record keeping.

As noted above, these findings were discussed at length with the registered person and his representative at the meeting held with RQIA on 14 June 2017. Following this meeting, a Notice of Failure to Comply with Regulation 19 (2) of the Residential Care Homes Regulations (Northern Ireland) 2005 was issued.

A further inspection of the home will be carried out on 27 July 2017, or sooner at the registered person's request. This inspection will be carried out to assess compliance with the actions set out the Failure to Comply Notice.

Areas of good practice

There were examples of good practice found in respect of the existence of a written resident agreement template and personal monies authorisation template for provision to residents or their representatives.

Areas for improvement

Four areas for improvement were identified during the inspection. These related to providing an individual written agreement to each resident; ensuring that the home's personal monies authorisation document is reviewed; providing a personal monies authorisation to each relevant resident and updating the home's written policy addressing residents' money and valuables.

	Regulations	Standards
Total number of areas for improvement	1	3

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were shared with Mark Uprichard, registered person, 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 the DHSSPS Residential Care Homes Minimum Standard (Updated 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 to Agencies.Team@rqia.org.uk for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		
Area for improvement 1 Ref: Regulation 14 (4)	The registered person shall ensure that the registered manager (and any other relevant member of staff) receives refresher training in safeguarding residents' money and valuables.	
Stated: First time	Ref: 6.4	
To be completed by: 27 July 2017	Response by registered person detailing the actions taken: The staff group received safeguarding and vulnerable adults training on 12 and 20 June The Home Manager and OiC have received individual guidance on the financial procedures required and inplace	
Area for improvement 2 Ref: Regulation 29 (5) (a)	The registered person shall provide RQIA with copies of the registered provider regulation 29 reports until further notice; these should encompass a review of the home's practice in relation to safeguarding residents' money and valuables.	
Stated: First time	Ref: 6.4	
To be completed by: 30 June 2017 until further notice	Response by registered person detailing the actions taken: Cash audit 14 July 2017 provided and ongoing	
Area for improvement 3 Ref: Regulation 19 (2) Schedule 4 (9) Stated: First time To be completed by: 27 July 2017	The registered person shall ensure that each entry in the income and expenditure records maintained for residents must detail the date money is deposited for safekeeping by the resident or their representative and must be signed by two people. When money is returned to the resident or their representative or is used on the resident's behalf, the record is updated with the date of the transaction and must also detail the signatures of two people. Ref: 6.5	
	Response by registered person detailing the actions taken: Two signatures are in place at all times, the resident's monies cash sheet has been adjusted to make this more obvious and accessible	

Area for improvement 4 The registered person shall ensure that records of residents' possessions deposited for safekeeping or withdrawn by the resident or Ref: Regulation 19 (2) their representative must detail the date and the signatures of two Schedule 4 (9) people. Stated: First time Ref: 6.5 To be completed by: Response by registered person detailing the actions taken: 27 July 2017 Demonstrated to RQIA on finance inspection 27 July 2017 improved procedures agreed Area for improvement 5 The registered person shall ensure that at least every quarter, a reconciliation of residents' money or possessions deposited for safekeeping must be performed and evidenced, with the date and Ref: Regulation 19 (2) Schedule 4 (9) signatures of two people recorded. Stated: First time An initial reconciliation must be performed, evidenced and recorded before 27 July 2017. To be completed by: 27 July 2017 Ref: 6.5 Response by registered person detailing the actions taken: Audit and reconcilliation of all cash and valuables held 14 July 2017 **Area for improvement 6** The registered person shall ensure that a record is maintained of the furniture and personal possessions which each resident has brought Ref: Regulation 19 (2) with them to the home; (a record should be made for each of the Schedule 4 (10) current residents in the home; the records should be updated to record items acquired or disposed of after admission). Stated: First time Ref: 6.5 To be completed by: 01 August 2017 Response by registered person detailing the actions taken: Record completed for all residents

Area for improvement 7

Ref: Regulation 5 (1) &

5 (3)

Stated: First time

To be completed by: 01 August 2017

The registered person shall ensure that each resident is provided with a written agreement which specifies the fees payable by or in respect of the resident for the provision of accommodation and personal care (and except where a single fee is payable for those services, the services to which each fee relates); the method of payment and the person by whom the fees are payable.

Where a third party top up is payable, the resident's individual agreement must detail the reason for the additional charge, by whom it will be paid and must list the services if any provided for it.

(The content of each resident's individual agreement must be consistent with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards).

Ref: 6.7

Response by registered person detailing the actions taken: Contract being adjusted

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

Area for improvement 1

Ref: Standard 15.7

Stated: First time

To be completed by:

03 July 2017

The registered person shall ensure that records of treatments facilitated in the home for which there is an additional charge are recorded in a manner which is consistent with how hairdressing treatments are recorded in the home.

Ref: 6.4

Response by registered person detailing the actions taken:

Hairdressing and Podiatry recorded in the same manner

Area for improvement 2

Ref: Standard 21.5

Stated: First time

To be completed by:

01 August 2017

The registered person shall ensure that in light of the broader inspection findings and the registered person's commitment to review financial practices in the home; the policy and procedure should be reviewed and updated as appropriate.

Ref: 6.7

Response by registered person detailing the actions taken:

Polices under review

Area for improvement 3 Ref: Standard 15.2	The registered person shall ensure that the personal monies authorisation document should be reviewed and consideration given to elaborating on the scope of the authority provided to the home to make purchases of goods or services on a resident's behalf.
Stated: First time	D. (0.7
To be completed by:	Ref: 6.7
01 August 2017	Response by registered person detailing the actions taken: Personal authorisation document being drafted to be included in each residents file as part of their care plan
Area for improvement 4	The registered person shall ensure that personal monies authorisations are in place for all residents for whom the home
Ref: Standard 15.2	engages in purchases of goods or services on their behalf. Personal monies authorisations should provide detail on the scope of the
Stated: First time	authority provided to the home to make purchases of identified goods and services, where possible.
To be completed by:	•
01 August 2017	Ref: 6.7
	Response by registered person detailing the actions taken: Personal authorisation document being drafted to be included in each residents file as part of their care plan

^{*}Please ensure this document is completed in full and returned to <u>Agencies.Team@rqia.org.uk</u> from the authorised email address*





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