

Unannounced Finance Follow Up Inspection Report 07 December 2018



Camlo Homes

Type of Service: Residential Care
Address: 3-5 North Parade, Belfast, BT7 2GF
Tel No: 028 9064 5127
Inspector: Briega Ferris

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 provider 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 29 beds that provides care for residents as detailed under the categories of care in section 3.0 below.

3.0 Service details

Organisation/Registered Provider: Camlo Homes Responsible Individual(s): Stephen Emerson	Registered Manager: Joanne Smart
Person in charge at the time of inspection: Joanne Smart	Date manager registered: 01 April 2005
Categories of care: RC- Residential Care PH- Physical disability other than sensory impairment PH(E) -Physical disability other than sensory impairment – over 65 years A - Past or present alcohol dependence LD - Learning Disability LD(E)- Learning disability – over 65 years MP - Mental disorder excluding learning disability or dementia MP(E) - Mental disorder excluding learning disability or dementia – over 65 years	Number of registered places: 29

4.0 Inspection summary

An unannounced inspection took place on 07 December 2018 from 10.00 to 13.00.

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 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.

The following areas were examined during the inspection:

- Income, expenditure and banking arrangements
- Residents Agreements
- Safe Contents

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	0	2

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Joanne Smart, registered manager, and the deputy 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 finance inspection dated 04 January 2018

Other than those actions detailed in the QIP, no further actions were required to be taken following the most recent inspection on 04 January 2018.

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 reviewed and this did not identify any relevant issues.

During the inspection, the inspector met with the registered manager and the deputy manager (who has the key day-to-day responsibility for the oversight of any residents' monies handled by the home). A poster was provided for display in a prominent position in the home detailing the inspection was taking place, however no relatives or visitors chose to meet with the inspector.

The inspector provided to the registered manager written information explaining the role of RQIA, the inspection process, the name of the inspector and the date of the inspection. It was requested that this information be displayed in a prominent position in the home so that relatives or visitors who had not been present during the inspection could contact the relevant inspector should they wish to discuss any matter or provide any feedback about their experience of the home.

Areas for improvement identified at the last finance inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The following records were examined during the inspection:

- The safe contents record "Residents' valuables"
- A sample of residents' income and expenditure records, including supporting deposit and expense receipts
- Evidence of the reconciliation of service users' monies and valuables
- Five record of residents' personal property (in their room)
- Four residents' care files

- A sample of residents' individual written agreements, and associated documents

The findings of the inspection were provided to the registered manager and deputy manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 27 November 2018

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

6.2 Review of areas for improvement from the last finance inspection dated 04 January 2018

Areas for improvement from the last finance inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Regulation 19 (2) Schedule 4 (10)</p> <p>Stated: First time</p> <p>To be completed by: 15 February 2018</p>	<p>The registered person shall ensure that a record of furniture and personal possessions brought by each resident into the room occupied by him/her.</p> <p>Each resident's record should be brought up to date.</p> <p>Ref: 6.7</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>The inspector reviewed a sample of residents' property records and noted that each resident had a record in place entitled "Inventory for valuables on admission to Camlo Homes". Each of the records had been signed by two people. There was evidence available to identify that the records had been updated recently. It was good to note that staff had recorded clear descriptions of items such as the make, model and size of electrical items.</p>	
<p>Area for improvement 2</p> <p>Ref: Regulation 5 (1)</p> <p>Stated: First time</p>	<p>The registered person shall ensure that each resident is provided with a detailed, up to date, written individual agreement which is consistent with the regulatory framework.</p>	Met

<p>To be completed by: 22 February 2018</p>	<p>Ref: 6.7</p> <p>Action taken as confirmed during the inspection:</p> <p>The inspector reviewed a file containing all of the residents' individual written agreements and associated documents. A review of a sample of residents' records evidenced that each resident had a signed written agreement and where relevant, a separate financial agreement (where the home handled any monies belonging to residents).</p> <p>However, a new area for improvement under the Residential Care Homes Minimum Standards was made to ensure that for the individual residents identified during the inspection, there is clear evidence that the resident or their representative has reviewed and signed the agreement or that there is evidence the documents have been provided for signature by the home. This matter is further discussed in section 6.3.2 of this report.</p>	
<p>Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).</p>		<p>Validation of compliance</p>
<p>Area for improvement 1</p> <p>Ref: Standard 15.7</p> <p>Stated: First time</p> <p>To be completed by: 05 January 2018</p>	<p>The registered person shall ensure that records of, and receipts for, all transactions undertaken by the staff on each resident's behalf, and of the expenditure of allowances kept by the home on the resident's behalf are maintained and kept up to date. Where the resident or their representative is unable to sign or chooses not to sign, two members of staff sign the record.</p> <p>Ref: 6.5</p> <p>Action taken as confirmed during the inspection:</p> <p>The inspector reviewed a sample of residents' income and expenditure records and evidenced that records of transactions were up to date and each transaction was signed by two people.</p> <p>There is further discussion on income, expenditure and banking arrangements in section 6.3.1 of this report.</p>	<p>Met</p>

Area for improvement 2 Ref: Standard 15.12 Stated: First time To be completed by: 31 January 2018 and at least quarterly thereafter	The registered person shall ensure that a reconciliation of money/possessions held by the home on behalf of residents is carried out, and evidenced and recorded, at least quarterly. Ref: 6.5	Met
	Action taken as confirmed during the inspection: The inspector reviewed a sample of residents' income and expenditure records and evidenced that reconciliations had been recorded in October 2018. There is further discussion on this matter in section 6.3.1 of this report.	

6.3 Inspection findings

6.3.1 Income, expenditure and banking arrangements

Clear, up to date records of income and expenditure entitled "Resident finance sheet" were available detailing monies received and spent on residents for whom the home handled their monies. A file was provided for review which contained the records and a schedule was in place at the front of the file to detail in respect of each resident, for whom money was handled, whether monies were received from the commissioning trust(s), the Official Solicitor or a resident's family or other representative.

Discussion established that receipts were retained for expenditure which the home made on goods or services on behalf of residents. The deputy manager clarified that where monies were received on behalf of residents, which was subsequently handed over to the resident for their personal expenditure, in this situation the home did not request that residents bring back receipts as it was the resident's right to spent their monies as they wished.

A review of a sample of the income and expenditure records evidenced that they had been most recently reconciled in October 2018. Advice was provided to the deputy manager in respect of more clearly recording the reconciliation such as taking a new line on the ledger, rather than recording the reconciliation on the same line as another transaction, as was the current practice.

The home was operating a residents' bank account into which the personal monies for several residents were being received. It was noted that several other regular deposits of monies were being received from the commissioning trusts- the deputy manager explained that these entries related to fees received in respect of care and accommodation costs for residents. Monies owed to the home were routinely transferred out to another bank account used in the running of the business. The deputy manager reported that he had engaged with the BHSCT to enquire as to whether it would be possible to set up another residents' account so as to keep the residents' monies totally discreet from fees which belonged to the home. He reported that he had not received any further update from the trust in respect of this matter. The

inspector suggested that it may expedite this matter to set up another business bank account and have the fees receivable from the trusts mandated to the new account, rather than attempt to set up another residents' account.

Discussion was held regarding previous negative balances which a small number of residents had accrued to the home. The deputy manager reported that these balances had arisen due to the home paying for goods and services while waiting on the personal monies for the affected residents being received from Belfast Health and Social Care Trust (BHSCT) finance department.

Evidence was available to demonstrate the efforts which the home had made to make alternative arrangements to expedite this process. Email correspondence was available to demonstrate that the deputy manager had engaged with the trust to both clear the accrued expenses and ensure that identified specific regular amounts were received from the trust to the home for residents' expenditure. The deputy manager reported that the new arrangements were working effectively. A sample of residents' records reviewed identified that the residents had positive balances recorded as at the date of the inspection.

The deputy manager explained that an alternative arrangement for the purchase of cigarettes had previously been in place in the home; however this arrangement had now ceased. He reported that residents who smoked cigarettes either purchased these from their own monies which they spent independently or in the remaining cases, the home purchased these from local retailers on the residents' behalf. Purchase receipts were available to support this.

Areas of good practice

Up to date records of income and expenditure were available for residents whose records were reviewed as part of the sample. These identified that transactions were signed by two people and supporting documents such as deposit receipts and expenditure receipts were available in respect of the transactions recorded. The records evidenced that regular reconciliations of the balances of monies held had been carried out.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3.2 Resident Agreements

Individual resident agreements were discussed with the deputy manager. A file containing a range of documents was provided for review. A review of this file identified that the home used a range of documents to detail the financial arrangements in place for residents. Each resident had an individual written agreement, a copy of the home's financial policy signed by the resident or their representative, and "appendix a" i.e.: a finance agreement detailing the current fees and financial arrangements. Where a resident's money was being handled by the home, an individual finance agreement was also on file detailing where the resident's personal money came from and any particular day to day arrangement such as for example, the amount and frequency of money provided to a resident for personal expenditure.

A review of a sample of the residents' documents identified that the majority of these had been signed by the resident or their representative. There were a small number of documents for

identified residents where the home had signed either or both the resident agreement and the financial agreement on behalf of the resident. The inspector noted that the home should have evidence that the documents have been shared for signature by the resident or their representative. An area for improvement was made in respect of this finding.

As noted above, the resident's individual finance agreement detailed any particular arrangement in place in the home to support the resident to manage their money or detail how the home received money on the resident's behalf. The registered manager also provided the care files for several residents and it was noted that the "general assessment" documents on file detailed the individual resident's money management skills. The registered manager also confirmed that if an individual resident's ability to manage their money improved or deteriorated, the resident's file and other associated documents would be updated accordingly.

Advice was provided to the deputy manager in respect of the content of the general individual written resident agreement. For instance it was noted that the document did not detail the date of the resident's agreement to the home. It was further noted that the home may wish to consider reviewing the content of the document in totality prior to any further changes in fees, which are generally notified to the home in April of each year.

Areas of good practice

Each resident had an individual written agreement, a copy of the home's financial policy signed by the resident or their representative, "appendix a" i.e: a finance agreement detailing the current fees and financial arrangements and an individual finance agreement, where relevant.

Areas for improvement

One area for improvement was identified during the inspection in relation to ensuring that the home has evidence that written agreements/financial agreement documents have been shared for signature by the resident or their representative.

	Regulations	Standards
Total number of areas for improvement	0	1

6.3.3 Safe Contents

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 lodged for safekeeping; a small number of valuables were also being held. A review of the "residents' valuables" book identified that deposits of items had been recorded; these items were physically verified as being held within the safe place on the day. A review of the entries identified that they had only been signed by one person.

The inspector highlighted that deposits or withdrawals of items from the safe place should always be signed by two people. An area for improvement was made in respect of this finding.

Areas of good practice

A safe place available for the deposit of cash or valuables belonging to residents, a written record was in place to detail deposits and withdrawals from the safe place.

Areas for improvement

One area for improvement was identified during the inspection in relation to ensuring that entries in the “residents’ valuables” book are always signed by two people.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Joanne Smart, registered manager and the deputy 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 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 via Web Portal for assessment by the inspector.

Quality Improvement Plan

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

<p>Area for improvement 1</p> <p>Ref: Standard 4.6</p> <p>Stated: First time</p> <p>To be completed by: 21 December 2018</p>	<p>The registered person shall ensure that the resident or their representative is given written notice of all changes to the agreement and these are agreed in writing by the resident or their representative. Where the resident or their representative is unable to sign or chooses not to sign, this is recorded.</p> <p>Ref: 6.3.2</p>
	<p>Response by registered person detailing the actions taken: This has been actioned.</p>
<p>Area for improvement 2</p> <p>Ref: Standard 15.5</p> <p>Stated: First time</p> <p>To be completed by: 08 December 2018</p>	<p>The registered person shall ensure that records of residents' possessions handed over for safekeeping and returned to the resident are signed and dated by the resident or their representative and the member of staff receiving or returning the possessions. Where the resident or their representative is unable to sign or chooses not to sign, two members of staff witness the hand-over of the possessions and sign and date the record.</p> <p>Ref: 6.3.3</p>
	<p>Response by registered person detailing the actions taken: This has been actioned.</p>

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



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