

Inspector: Briege Ferris Inspection ID: IN023750

The Cedars RQIA ID: 1588 130 Upper Knockbreda Road Belfast BT6 9QB

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# Unannounced Finance Inspection of The Cedars

**10 November 2015** 

The Regulation and Quality Improvement Authority
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### 1. Summary of Inspection

An unannounced finance inspection took place on 10 November 2015 from 10.15 to 13.40. Overall on the day of the inspection, the financial arrangements in place were found to be contributing to safe, effective and compassionate care; however some areas for improvement were identified which are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005.

### 1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

### 1.2 Actions/Enforcement Resulting from this Inspection

Enforcement did not result from the findings of this inspection.

### 1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	4	2

The details of the QIP within this report were provided to Mrs Jane Hurley, the registered manager, following the inspection. The timescales for completion commence from the date of inspection.

### 2. Service Details

Registered Organisation/Registered Person: Selkirk Investments Ltd/Jane Anne Hurley	Registered Manager: Mrs Jane Anne Hurley
Person in Charge of the Home at the Time of Inspection: Ms Victoria McAuley	Date Manager Registered: 1 April 2005
Categories of Care: RC-I, RC-DE	Number of Registered Places: 26
Number of Residents Accommodated on the Day of Inspection: 23	Weekly Tariff at Time of Inspection: £470.00

### 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following theme has been met:

### Inspection Theme: Residents' finances and property are appropriately managed and safeguarded

### Statement 1

The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care

### Statement 2

Arrangements for receiving and spending residents' monies on their behalf are transparent, have been authorised and the appropriate records are maintained

#### Statement 3

A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained

### Statement 4

Arrangements for providing transport to residents are transparent and agreed in writing with the resident/their representative

### 4. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with Mrs Jane Hurley, the registered manager
- Review of records
- Evaluation and feedback

Prior to inspection the following records were analysed:

Records of incidents notified to RQIA in the last twelve months

The following records were reviewed during the inspection:

- The residents guide
- The home's "financial policy"
- Four residents' agreements
- A sample of hairdressing and chiropody treatment records
- The home's "safe audit"
- Four residents' personal property records

### 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection on 9 June 2015; we were not required to follow up any matters relating to the previous inspection.

### 5.2 Review of Requirements and Recommendations from the Last Finance Inspection Dated 26 August 2011

Previous Inspection	Statutory Requirements	Validation of Compliance
Requirement 1  Ref: Regulation 4(1)	The home's residents' guide should be revised to include all requirements of the residential homes regulations and minimum standards.	
Minimum Standard 3	Action taken as confirmed during the inspection:	Met
	We confirmed that this had been actioned at the time of the inspection.	
Requirement 2 Ref: Regulation 5 (1)	Agreements should be in place with all residents at the home. The agreements should include the current fee (and any additional fees or charges)	
Minimum Standard 4	being charged to the residents.  The terms and conditions of the residents' agreement should be updated to be in line with the residential homes regulations and minimum standards.	
	Action taken as confirmed during the inspection:	Partially Met
	We reviewed a sample of written agreements in place between the home and four residents and noted that all of the elements as required by Regulation 5 (1) of the Residential Care Homes Regulations (Northern Ireland) 2005 and Standard 4.2 of the Residential Care Home Minimum Standards (2011) were not included.	
	This requirement is therefore made for the second time.	

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Requirement 3  Ref: Regulation 5 (2)	Residents' individual files to be updated to include notification, in writing, at least 28 days in advance of any change or variation in their fee.	
	Action taken as confirmed during the inspection:	
	Agreements were not available on the day of inspection; however a sample of agreements were provided to us following the inspection which detailed that they had each been signed on 12 November 2015 i.e. after the date of inspection.	Not Met
	We noted the excessively long delay in providing notification to residents or their representatives of any change in the fee.	
	This requirement is therefore made for the second time.	
Requirement 4  Ref: Minimum Standard 15.12	The monthly reconciliation of residents' personal allowance monies should be signed by the manager of the home along with the administrator.	
	Action taken as confirmed during the inspection:	Met
	We reviewed a sample of records and noted that this requirement had been implemented.	
Requirement 5  Ref: Schedule - 4	A written policy should be in place at the home for any furniture or personal possessions brought by a resident or relative into the home.	
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Regulation 19(2)	Action taken as confirmed during the inspection:	Met
Appendix 2 of Minimum Standards	We noted that a written policy was in place.	
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Requirement 6  Ref: Regulation 19 (4)	Home's written financial policies and procedures should include provision for the retention of financial records for up to six years.	
	Action taken as confirmed during the inspection:  We noted that a written policy regarding the retention of records was in place.	Met
Requirement 7 Ref: Schedule 4 (3) Regulation 19 (2) Minimum Standard 15.2	Authorisation forms for staff to manage and spend residents' personal allowance monies should be revised to include other items purchased on behalf of the residents (e.g. toiletries, newspapers etc.).  Action taken as confirmed during the inspection:  We reviewed a sample of the written authorisations in place between the home and four residents and noted that reference to specific goods and services was not included.  This requirement is therefore made for the second time.	Not Met
Requirement 8  Ref: Schedule 4 (3)  Regulation 19 (2)  Minimum Standards 15.2 & 15.6  Appendix 2 of Minimum Standards	Two signatures are to be recorded when personal allowance monies are passed to staff in order to make purchases on behalf of residents (staff member making purchase should be one of the signatories).  The home's financial policies and procedures should include the procedure for staff withdrawing personal allowance monies from the bank account. The procedure for staff making purchases on behalf of the residents should also be included.  Action taken as confirmed during the inspection:  We reviewed a sample of records and noted that this requirement had been implemented.	Met

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1	In order to aid the administrator in the monthly reconciliation of residents' monies, residents and	
Ref: Standard 15.12	staff should sign the receipt book when personal allowance monies are passed to the residents.	
	Action taken as confirmed during the inspection:	
	We reviewed a sample of records and noted that this recommendation had been implemented.	

### 5.3 Statement 1 - The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care

#### Is Care Safe?

The home has a written resident guide which is provided to newly admitted residents. We noted that the guide included general information on the terms and conditions in respect of accommodation, as well as information on other services facilitated within the home for which an additional fee is payable (such as hairdressing services).

### Is Care Effective?

We selected a sample of four residents in order to view the signed agreements in place with the home; the agreements selected were not available on the day of inspection. The registered manager stated that the home's bookkeeper would be able to locate them; however she was not in the home on the day of inspection. We noted that records must at all times available for inspection in the home by any person authorised by the Regulation and Improvement Authority.

A requirement has been made in respect of this finding.

The registered manager advised that a copy of the agreements for the residents selected would be provided as soon as the home's bookkeeper returned to the home later in the week. We were subsequently provided with copies of the required agreements by email and noted that all four agreements detailed the correct weekly fee, however we noted that the agreements did not state the person by whom the fees were payable or the method of payment; these details are required by Regulation 5 of the Residential Care Homes Regulations (Northern Ireland), 2005.

We highlighted that each of the residents in the home must be provided with an agreement which reflects all of the required details.

As a requirement in this regard was made following the previous financial inspection of the home on 26 August 2011.

This requirement is therefore stated for the second time.

We also noted that each of the four agreements had been signed on 12 November 2015, i.e. after the date of the inspection. Following the previous inspection, a requirement had been

made to ensure that residents are informed in writing of any changes to the fees by 28 days' advance notice (or as soon as possible following an increase in the regional rate, usually April each year).

This requirement is therefore stated for second time.

Given that agreements provided to us by email were dated 12 November 2015, it was clear that they had not been in place on the day of inspection (10 November 2015). We also noted the delay in providing the updated agreements/notification of an increase in the fees payable for the current year. We highlighted to the registered manager that there should be no undue delay in informing residents of an increase in the fees payable following an increase in the regional fee rates. We noted that once the home is informed of what the new rate will be, the home should ensure that notification is provided to each resident or their representative and that the changes are agreed in writing in each resident's individual agreement accordingly and in a timely manner.

This requirement is therefore stated for the second time.

### **Is Care Compassionate?**

As noted above, a review of a sample of written agreements evidenced that notice of changes in the fee payable had not been provided in a timely manner by the home.

### **Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care. However, there were three areas identified for improvement. These related to ensuring that records are at all times available for inspection in the home; providing revised agreements to residents, which reflect the weekly fee, the method of payment and the person by whom the fees are payable; and ensuring that residents or their representatives are provided with timely notification of any changes to fees payable, ensuring that the residents' agreements are updated accordingly.

Number of Requirements 3	Number Recommendations:	0
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### 5.4 Statement 2 - Arrangements for receiving and spending residents' monies on their behalf are transparent, have been authorised and the appropriate records are maintained

### Is Care Safe?

A review of the records identified that copies of the HSC trust payment remittances are available confirming the weekly fee for each resident in the home. Discussion with the registered manager and a review of the records established that the home was not directly charging any resident or their representative for care and accommodation fees.

We noted that the home has a written "financial policy" to guide practice in respect of safeguarding residents' money, property and valuables.

### Is Care Effective?

The registered manager advised that the home is not in direct receipt of the personal allowance monies for any resident, nor is any representative of the home acting as nominated Appointee for any resident (i.e. managing their social security benefits).

We noted that a residents' pooled bank account is in place which is named appropriately; we also noted that there is regular reconciliation of the bank account, signed and dated by two people; good practice was observed.

Discussion established that for the majority of residents in the home, residents' representatives deposit money with the home in order to pay for additional goods and services not covered by the weekly fee (such as hairdressing). A review of the records identified that the home provides a receipt to anyone depositing money. We reviewed a sample of receipts and noted that they are routinely signed by the person receiving the money and the person depositing the money.

Following the deposit of the money by the residents' representatives, the money is lodged to the residents' pooled bank account in favour of the individual resident(s). The payment for additional services such as hairdressing, chiropody or taxis is subsequently paid by cheque from the residents' bank accounts.

We reviewed the records for hairdressing and chiropody services facilitated within the home. We noted that the records left by the hairdresser, the "hairdresser report", detailed the name of the resident, the type of treatment provided, and the signature of both the hairdresser and a representative of the home to verify that the resident had received the treatment, good practice was observed.

We also reviewed the records for chiropody treatments facilitated within the home; we noted that the chiropodist routinely issued the home a headed receipt detailing the names of the residents treated and the cost of treatment, and that the record was signed by the chiropodist. We noted, however, that the records were not signed by a representative of the home to verify that the resident had received the treatment.

We highlighted that best practice was for the treatment records to be signed by the person providing the treatment and by a member of staff who can verify that the patient has received the treatment and incurred the associated cost, and that this would therefore be consistent with the practice for recording hairdressing treatments as detailed above.

A recommendation has been made in respect of this finding.

Discussions established that the home does not operate a fund for the benefit of the residents in the home (often referred to as a comfort fund).

#### Is Care Effective?

As noted above, for the majority of residents in the home, residents' representatives deposit money with the home in order to pay for additional goods and services not covered by the weekly fee (such as hairdressing). A review of a sample of residents for whom money was lodged to pay for additional services established that residents or their representatives had signed a written authorisation which states that: "I give permission for Cedars Residential Home

to use the fund held in my client account for any personal care I desire, that requires additional payment to a third party".

Following the previous inspection, a requirement had been made that authorisation forms for staff to manage and spend residents' personal allowance monies should be revised to detail more specifically, other items to be purchased on behalf of the residents (e.g. toiletries, newspapers etc.).

We selected a sample of four resident authorisation forms for review. Two of these were available on the day of inspection; the remaining two could not be located. (A requirement for records to be available for inspection has already been made in this report).

Following the inspection, we were provided with the two remaining authorisation forms, one of which had been signed by the resident on 12 November 2015 i.e. after the date of the inspection. We concluded that this resident's authorisation form could not have been in place on 10 November 2015.

As noted above, it was clear that the requirement to update the resident authorisation forms to include specific goods and services had not been implemented by the home.

This requirement is therefore stated for the second time.

### Is Care Compassionate?

We queried whether any patient had a specific assessed need in respect of their money or any agreed restrictions; the registered manager advised that none of the patients had any known assessed needs or restrictions. We also discussed access to residents' money outside of normal office hours. The registered manager advised that at present the majority of residents did not have any money lodged with the home, and that at present there were no identified issues in respect of residents requiring access to money outside of the office hours.

### **Areas for Improvement**

Overall on the day of inspection the financial arrangements were found to be contributing to safe, effective and compassionate care; however there were two areas identified for improvement. These related to ensuring that chiropody treatment records are signed by the person providing the treatment and by a representative of the home and ensuring that personal monies authorisations provide the appropriate level of detail.

Number of Requirements	1	Number Recommendations:	1
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## 5.5 Statement 3 - A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained

### Is Care Safe?

A safe place exists within the home to enable residents or their representatives to deposit cash or valuables; we viewed the safe place within the home and were satisfied with the controls around the physical location of the safe place and the persons with access. On the day of inspection, no cash or valuables belonging to residents were deposited for safekeeping.

A "safe audit" record exists to record any movements into or out of the safe place. We noted that the most recent reconciliation recorded was in March 2015. We noted that, while on the day of inspection there was no cash or valuables belonging to residents stored in the safe place, nor is this routine practice, the minimum frequency for reconciling the safe place is at least quarterly.

A recommendation has been made in respect of this finding.

### Is Care Effective?

We queried whether there were any general or specific arrangements in place to support residents with their money; the registered manager advised that there were no such arrangements in place.

We requested the inventory/property records for four residents and were provided with a record for each of the residents sampled. We noted that each resident had a "property list" in place which consisted of a two page template. We noted that the records were clear and that there was evidence that staff had attempted to capture the important detail of electrical items such as "Radio, Alba" and "CD player, no make". We noted that the records were routinely signed and dated by two people; good practice was observed.

### Is Care Compassionate?

A safe place exists within the home to enable residents or their representatives to deposit cash or valuables should they wish to.

### **Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care; there was one area identified for improvement which related to the frequency of reconciling the contents of the safe place.

Number of Requirements 0 Number Recommendations: 1
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### 5.6 Statement 4 - Arrangements for providing transport to residents are transparent and agreed in writing with the resident/their representative

### Is Care Safe, Effective and Compassionate?

The home does not provide transport services to residents.

### **Areas for Improvement**

There were no areas of improvement identified in respect of Statement 4.

Number of Requirements	0	Number Recommendations:	0
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### 5.7 Additional Areas Examined

There were no additional areas examined as part of the inspection.

### 6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were provided to Mrs Jane Hurley, the registered manager, following the inspection. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### **6.1 Statutory Requirements**

This section outlines the actions which must be taken so that the registered person meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Residential Care Home Minimum Standards (August 2011) etc. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to finance.team@rgia.org.uk and assessed by us.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan		
Statutory Requirement	'S	
Requirement 1  Ref: Regulation 5 (1)	The registered person is required to ensure that agreements are in place with all residents at the home. The agreements should include the current fee (and any additional fees or charges) being charged to the residents.	
<b>Stated:</b> Second time <b>To be Completed by:</b> 31 December 2015	The terms and conditions of the residents' agreement should be updated to be in line with the residential homes regulations and minimum standards.	
	Response by Registered Person(s)Detailing the Actions Taken: The Manager has updated the residency agreement to include the current and any additional fees or charges to residents.	
Requirement 2  Ref: Regulation 5 (2)	The registered person is required to ensure that residents' individual files are updated to include notification, in writing, at least 28 days in advance of any change or variation in their fee.	
Stated: Second time  To be Completed by: From the date of the	Response by Registered Person(s)Detailing the Actions Taken: The manager will ensure that residents files are updated to include notification in writing as soon as we have been notified by the trust of any increase in fees.	
next change  Requirement 3	The registered person is required to ensure that authorisation forms for	
Ref: Regulation 19 (2) Schedule 4 (3)	staff to manage and spend residents' personal allowance monies are revised to include other items purchased on behalf of the residents (e.g. toiletries, newspapers etc.)	
Stated: Second time  To be Completed by:	Response by Registered Person(s)Detailing the Actions Taken: Authorisation forms have been reviewed and updated in line with the requirement.	
31 December 2015  Requirement 4	The registered person must ensure that records are at all times	
Ref: Regulation 19 (2) (b)	available for inspection in the home by any person authorised by the Regulation and Improvement Authority to enter and inspect the home.  Response by Registered Person(s)Detailing the Actions Taken:	
Stated: First time  To be Completed by:	The manager will ensure that all records are available for inspection, the residency agreement, third party agreement, letters regarding fee increase and audit of any valuables held are all currently held in the	
From the date of inspection	home office and are readily available for inspection.	

Recommendations				
Recommendation 1	It is recommended that a representative of the home also signs the chiropody treatment record to verify that the resident has received the			
Ref: Standard 20.14	treatment and incurred the associated cost.			
Stated: First time	-	egistered Person(s)Deta will be drawn up to facilita	_	
To be Completed by:	being the person providing the treatment and the other for staff member to verify the treatment has been provided			
From the date of inspection		·		
Recommendation 2	Reconciliation of money/possessions held by the home on behalf of residents is carried out, and evidenced and recorded, at least quarterly.			
Ref: Standard 15.12	Response by Registered Person(s)Detailing the Actions Taken:			
Stated: First time	An inventry of money and valuables held in the home on behalf of residents is evidenced and recorded quarterly, this list is displayed beside the locked box in the home office			
To be Completed by:				
From the date of inspection				
Registered Manager Completing QIP		Jane Hurley	Date Completed	11/01/16
Registered Person Approving QIP		Jane Hurley	Date Approved	11/01/16
RQIA Inspector Assess	sing Response	7.2	Date Approved	12/01/2016

<sup>\*</sup>Please ensure this document is completed in full and returned to <a href="mailto:finance.team@rqia.org.uk">finance.team@rqia.org.uk</a> from the authorised email address\*