

Finance Inspection Report 14 September 2016



Corkey House

Residential (RC): 1 Forthriver Crescent, Belfast, BT13 3SR: Tel No: 028 9071 8095 Inspector: Joseph McRandle

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Corkey House took place on 14 September 2016 from 10.00 to 16:00. Less than twenty four hours' notice was given prior to the inspection.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

Evidence was reviewed which confirmed that a safe place was provided within the home for the retention of monies and valuables belonging to residents. Discussion with the registered manager confirmed that staff had received training in relation to the safeguarding of residents' monies. No areas for improvement were identified during the inspection.

Is care effective?

Evidence was reviewed which confirmed that residents' or their representatives were informed in writing thirty days in advance of any increase in fees. Good practice was observed for the recording of residents' inventory. There were no records maintained to confirm that a reconciliation of residents' monies and valuables was undertaken at least quarterly. A recommendation was made to ensure that records of reconciliations are maintained at the home.

Is care compassionate?

Evidence confirmed that a transport policy was provided to residents or their representatives. Although the home did not provide a transport scheme the policy detailed the arrangements for residents attending hospital appointments.

Evidence confirmed that the financial arrangements for a number of residents were not included within their written agreements. A recommendation was made for these arrangements to be included within the agreements.

Evidence confirmed that consent forms authorising staff to make purchases on behalf of residents were in place.

Is the service well led?

Evidence was reviewed which confirmed that additional third party payments had been made on behalf of newly admitted residents. The payments related to residents occupying an ensuite bedroom and residents assessed as having dementia. The charges were suspended at the time of the inspection as the registered provider was in discussions with the Belfast Health and Social Care Trust (BHSCT). A requirement was made for these discussions to be expedited with the Trust in order for residents to be charged in line with Department of Health's guidelines on the care and assessment process.

Evidence was reviewed which confirmed that one resident had been inadvertently overcharged for their fee. A recommendation was made for the monies to be refunded to the resident's' representative.

Evidence was reviewed which confirmed that written agreements were in place for residents. One agreement reviewed did not show the current weekly fee, another agreement did not show the fee paid or a breakdown of who paid the fee. A requirement was made for residents' agreements to be updated.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	2	3
recommendations made at this inspection	2	5

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Elizabeth Ann Anderson, 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.

1.2 Actions/enforcement taken following the most recent finance inspection

There has been no previous RQIA finance inspection of Corkey House.

2.0 Service details

Registered organisation/registered provider: Presbyterian Council of Social Witness/ Mrs Linda Wray	Registered manager: Mrs Elizabeth Ann Anderson
Person in charge of the home at the time of inspection: Mrs Elizabeth Ann Anderson	Date manager registered: 1 April 2005
Categories of care: RC-I, RC-DE, RC-MP(E)	Number of registered places: 35

3.0 Methods/processes

Prior to the inspection, it was ascertained that no incidents involving residents' finances had been reported to RQIA in the last twelve months. The record of calls made to RQIA's duty system was reviewed and did not identify any relevant issues. Contact was also made with the inspector who had most recently visited the home.

During the inspection the inspector met with the registered manager and the home's administration officer. No relatives or visitors chose to meet with the inspector.

The following records were examined during the inspection:

- Five residents' finance files.
- The residents' guide.
- Five residents' written agreements.
- Records of fees paid by three residents.
- Records of services provided by hairdresser and podiatrist.
- Records of transactions made on behalf of three residents.
- Copies of invoices forwarded to residents' representatives for fees.
- Records of safe contents.
- Financial policies and procedures.
- Transport policy for residents.
- Policy on gifts, Loans and Wills.
- Comforts fund Policy and Procedures.
- Policy on the amount of money held in safe.
- Records for Comforts fund and donations to the Home.
- Code of Behaviour for Staff, Volunteers and Visitors.
- Property records for two residents.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 18 April 2016

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

4.2 Review of requirements and recommendations from the last finance inspection

There has been no previous RQIA finance inspection of this home.

4.3 Is care safe?

A safe place was provided within the home for the retention of monies and valuables belonging to residents. Monies held on behalf of four residents were counted, the amount retained agreed to the balance recorded at the home for each resident. Valuables held on behalf of residents were also reviewed, the valuables inspected agreed to the items recorded in the safe contents book. At the time of the inspection there were satisfactory controls around the physical location of the safe place and the staff members with access.

Discussion with the registered manager confirmed that staff had received training in relation to safeguarding residents' monies. Review of the "Code of Behaviour for Staff, Volunteers and Visitors" stated that staff and volunteers receive training including guidelines on the handling of vulnerable adult's money. The registered manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

Discussion with the registered manager confirmed that there were no finance related restrictive practices in place for any resident.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements 0	Number of recommendations:	0
--------------------------	----------------------------	---

4.4 Is care effective?

Review of records and discussion with the registered manager confirmed that no member of staff at the home acted as an appointee for any resident, i.e. a person authorised by the Social Security Agency (SSA) to receive and manage the social security benefits on behalf of an individual.

Discussion with the registered manager also confirmed that no member of staff 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 the registered manager confirmed that monies and valuables held on behalf of residents were reconciled on a regular basis. Review of records showed that a representative from the home's head office reconciled residents' monies periodically. The last recorded date was February 2016. There were no records to confirm that residents' monies and valuables were reconciled by the home at least quarterly, as in line with minimum standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011).

A recommendation is listed within the QIP of this report in relation to this finding.

A provision was included in the residents' agreements for residents or their representatives to be informed thirty days in advance of any increase in fees. Review of residents' files evidenced that copies of letters sent to residents or their representatives informing them of previous increases in fees were retained within the files.

Discussion with the registered manager and review of records confirmed that no bank accounts were managed on behalf of residents.

Review of records and discussion with staff confirmed that a comforts fund was operated on behalf of residents. Records also confirmed that the home paid for any activity in advance, e.g. a bus run. Receipts were subsequently forwarded to the home's head office and the monies were withdrawn from the comforts fund and paid back into the home's account. The registered manager also confirmed that the comforts fund was for the benefit of all residents.

Evidence showed that a welcome pack was provided to residents and their representatives. The pack contained relevant policies and procedures in relation to residents' finances, including a policy and procedure for the comforts fund.

Discussions with the registered manager and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. The records were updated when items were brought into the home by, or on behalf, of residents following admission. Good practice was observed as photographs were taken of the residents' property and retained within the residents' files. The registered manager confirmed that the items were checked at least quarterly.

Areas for improvement

One area for improvement was identified during the inspection. This related to maintaining a record of the reconciliation of residents' monies and valuables at least quarterly.

Number of requirements	0	Number of recommendations:	1
------------------------	---	----------------------------	---

4.5 Is care compassionate?

Evidence confirmed that a transport policy was provided to residents or their representatives. Although the home did not provide a transport scheme the policy detailed the arrangements for residents attending hospital appointments. The policy also gave details of the arrangements for staff accompanying residents on such appointments. The policy stated that outings organised by the home were not charged to residents.

Discussion with staff confirmed that the Belfast Health and Social Care Trust (BHSCT) managed Patient Private Property (PPP) Accounts on behalf of a number of residents. The trust forwarded monies to the home on behalf of these residents. Review of records showed that these financial arrangements were not included within the residents' written agreements as in line with standard 2 of the DHSSPS Residential Care Homes Minimum Standards (2011).

A recommendation is listed within the QIP of this report, for residents' agreements to include their financial arrangements.

Discussion with the registered manager confirmed that arrangements were in place to offer support to residents' for managing their own monies.

In accordance with best practice consent forms authorising staff to make purchases on behalf of residents were in place. The forms detailed the purchases staff were authorised to make e.g. hairdressing and podiatry. Review of five residents' files confirmed that authorisation forms were retained within their files. The forms were signed and dated by the resident, or their representative, and a representative from the home.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating residents' agreements to include their financial arrangements.

4.6 Is the service well led?

Review of records confirmed that copies of payment remittances from Health and Social Care Trusts showing the weekly fee for each care managed resident were retained at the home. The remittances also showed the amount of fees paid by the Trusts on behalf of residents and the amount paid by care managed residents directly to the home. Records were also available showing the amount received from private residents for their fee.

Review of records of payments made by, or on behalf of three residents confirmed that the amounts received agreed to the contribution owed by each resident. Records showed that one of the residents currently paying their fee by direct debit had been invoiced for their fee prior to the direct debit being implemented. Review of the invoice forwarded to the resident's representative showed that the resident had been inadvertently overcharged for their fee.

Good practice was observed in relation to the retention of copies of the invoices. When payment was received the date of the payment along with "paid" were recorded on the copies.

A recommendation is listed within the QIP of this report for the records of fees to be reviewed and any overpayment reimbursed to the resident's representative.

A resident's guide was in place at the time of inspection which included the details of the services provided to residents as part of the weekly fee. The guide also included a list of the charges for additional services provided at the home e.g. hairdressing.

The guide included a written agreement which was issued to residents on admission to the home. Two types of agreements were issued to residents, one for care managed residents and another for private residents. Review of five residents' files (two of which were private residents) evidenced that individual written agreements were in place for all five residents.

One resident's agreement did not show the current weekly fee paid by, or on behalf of, the resident. One other agreement did not show the weekly fee, the method of payment of the fee or the details of the person paying the fee. The agreement was not signed by the resident or their representative and a representative of the home. Discussion with the registered manager confirmed that the resident had only recently been admitted to the home.

Discussion with the registered manager confirmed that third party payments had recently been implemented by the home's head office for newly admitted care managed residents. One charge was for residents availing of a room with an ensuite and a further charge for residents assessed as having dementia. The registered manager confirmed that the additional charge had been suspended as representatives from the home's head office were in discussions with the BHSCT in relation to the charge.

A review of the residents' agreements showed that there were no details included in the agreements of the additional services provided for those residents for which the third party payment was made.

During the inspection the inspector discussed the issue (via telephone) with the home's responsible person. The inspector queried the additional charge especially the charge levied against newly admitted dementia residents.

RQIA ID: 1591 Inspection ID: 26326 The inspector referred the responsible person to the Department of Health's circular "CARE MANAGEMENT, PROVISION OF SERVICES AND CHARGING GUIDANCE" which states that any third party payment must be agreed with the Health and Social Care Trusts.

Discussion with the registered manager confirmed that existing residents were not paying an additional amount towards their fee over and above the amount agreed with the Health and Social Care Trusts.

A requirement in relation to these findings is listed within the QIP of this report.

A further requirement is listed for the registered provider to expedite the discussions with the BHSCT in order for residents to be charged in line with Department of Health's guidelines on the care and assessment process. Any payments previously made on behalf of residents should be refunded if the Trust is not in agreement in relation to the additional charge.

Review of records confirmed that Individual transaction books were maintained on behalf of residents. The books recorded the details of the purchases undertaken on behalf of residents, the date of the purchase and the amount of the purchase. A sample of residents' transaction books were reviewed, two signatures were recorded against each entry in the books. Receipts from the purchases reviewed were available at the time of the inspection.

Records for the hairdresser and podiatrist were reviewed. A hairdressing book was maintained at the home. The book recorded the name of the residents availing of the hairdresser, the service provided and the amount charged to residents. The hairdresser and a member of staff signed the records to confirm that the service was provided to the residents. There was evidence of good practice as a second member of staff signed the records when payment was made to the hairdresser.

Records confirmed that the podiatrist had issued receipts when receiving payment for providing a service to residents. The receipts were on headed paper and signed by the podiatrist and a member of staff. Review of residents' transaction books confirmed that the amounts recorded in the hairdressing and podiatrist records agreed to the amounts withdrawn from residents' monies to pay for the service.

Review of records and discussion with staff confirmed that newspapers were provided to residents by a local newsagent. The newsagent forwarded invoices to the home detailing the amounts owed by the residents. Review of records showed that the payments made on behalf of residents agreed to the amounts invoiced by the newsagent.

Review of payments to a local taxi firm on behalf of residents showed that receipts were available for the records reviewed. The receipts included the details of the journey undertaken by the resident and the amount charged by the taxi firm. Review of records showed that the amounts recorded as paid in the residents' transaction books agreed to the receipts provided by the taxi firm. Two staff members had signed the residents' books to confirm the journey and payment.

Discussion with the registered manager confirmed that a mobile shop was available at the home for residents to purchase certain items e.g. toiletries and treats. We reviewed records of purchases made from the shop, the records showed the details of the purchases, the date and the amount of the purchases. Two signatures were recorded against each entry in the residents' transaction books. Receipts from the purchases were available at the time of the inspection.

Areas for improvement

Three areas for improvement were identified during the inspection. These related to the refunding of fees, updating residents' agreements and third party payments made on behalf of residents.

Number of requirements	2	Number of recommendations:	1

5.0 Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Elizabeth Ann Anderson, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider/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 this residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider/s meets legislative requirements based on The Residential Care Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

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

5.3 Actions taken by the registered manager/registered provider

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered provider will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to <u>agencies.team@rgia.org.uk</u> and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider/manager from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality improvement Fian		
Statutory requirements	S	
Requirement 1	The registered provider must ensure that updated written agreements are in place for all residents accommodated at the home.	
Ref : Regulation 5 (3)	The agreements should detail the current amount paid by the Health	
Stated: First time To be completed by:	and Social Care Trust, the current contribution paid by residents and the current amount paid on behalf of residents.	
31 October 2016	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.	
	Where a Health and Social Care Trust managed resident does not have a representative to sign the agreement, the resident's agreement should be shared with a representative from the Trust. Copies of the signed agreements must be retained within residents' files.	
	Response by registered provider detailing the actions taken: The two identified Residents agreements have now been completed and signed. All Residents agreements are being updated with the current amounts being paid. This will be carried out yearly by the Home	
Requirement 2 Ref: Regulation 5 (3)	The registered provider must ensure that the discussions with the BHSCT in relation to the third party payments are expedited in order that residents are charged in accordance with current Department of Health guidelines on the care and assessment process.	
Stated: First time To be completed by: 31 October 2016	If agreement is not reached with the BHSCT the third party payments received prior to the payments being suspended should be refunded to the residents' representatives.	
	RQIA should be informed in writing of the outcome of the discussions and the date and amount of any reimbursements (if relevant).	
	Response by registered provider detailing the actions taken: Mrs Wray Registered Provider met with Kathleen McDonnell Contracts Department 30/9/16. It was agreed that all 3 rd Party top-ups will be paid directly to the Trust. It will be the responsibility for Care Managers to arrange these payments Ms McConnell will contact Care Managers directly regarding this. Mr Hooks of Head Office Finance Department will undertake any reimbursements necessary.	
	directly regarding this. Mr Hooks of Head Office Finance Department	

Quality Improvement Plan

Recommendations	
Recommendation 1	The registered provider should ensure that a system is in place to
Ref: Standard 15.12	record the reconciliation of monies and valuables held on behalf of residents at least quarterly. The record should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.
Stated. First time	Sidii.
To be completed by: 21 October 2016	Response by registered provider detailing the actions taken: Unit Manager and Clerical officer have commenced and will undertake
	reconciliations of the above quarterly. Finance Officer from Head office will continue to carryout his own checks.
Recommendation 2	The registered provider should ensure that residents' agreements are
Ref : Standard 15.2	updated to include the details of their financial arrangements.
Ref. Standard 15.2	Response by registered provider detailing the actions taken:
Stated: First time To be completed by:	Request has been forwarded to Residents Care Managers for written confirmation of arrangements to receive Monies via the Patients Trust Bank. This will be placed in the Relevant Residents agreements when
31 October 2016	received.
Recommendation 3 Ref: Standard 20.14	The registered provider should ensure that the resident's representative, identified during the inspection, is reimbursed the overpayment for fees.
Ref. Stanuaru 20.14	The financial control procedures operated at the home should be
Stated: First time	revised to improve the audit process for safeguarding against errors e.g. increase in audit checks internally and by head office.
To be completed by: 21 October 2016	Response by registered provider detailing the actions taken: Full reimbursement was made by Finance to the Relevant Client on 28 th September 2016





The Regulation and Quality Improvement Authority

The Regulation and Quality Improvement Authority 9th Floor Riverside Tower 5 Lanyon Place BELFAST BT1 3BT

 Tel
 028 9051 7500

 Fax
 028 9051 7501

 Email
 info@rqia.org.uk

 Web
 www.rqia.org.uk

 O
 @RQIANews