

Announced Finance Inspection Report 11 November 2020



Croaghpatrick

Type of Service: Nursing Home
Address: Miller Hill, 235 Millisle Road,
Donaghadee, BT21 0LN
Tel No: 028 9188 8383
Inspector: Joseph McRandle

www.rqia.org.uk

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 this inspection and do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

Information relating to our inspection framework, the guidance and legislation that informs the inspections, the four domains which we assess services against as well as information about the methods we use to gather opinions from people who have experienced a service can be found at <https://www.rqia.org.uk/guidance/legislation-and-standards/> and <https://www.rqia.org.uk/guidance/guidance-for-service-providers/>

1.0 What we look for



2.0 Profile of service

This is a nursing home which is registered to provide care for up to 67 patients with a range of healthcare needs, as detailed in Section 3.0.

3.0 Service details

Organisation/Registered Provider: Four Seasons Healthcare Responsible Individual(s): Dr Maureen Claire Royston	Registered Manager: Wilhelmina Anne Devoy
Person in charge at the time of inspection: Wilhelmina Anne Devoy	Date manager registered: 1 April 2005
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment. PH(E) - Physical disability other than sensory impairment – over 65 years. TI – Terminally ill	Number of registered places: 67

4.0 Inspection summary

An announced inspection took place on 11 November 2020 from 10.30 to 14.00 hours.

Short notice of the inspection was provided to the manager in order to ensure that arrangements could be made to safely facilitate the inspection in the home.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes (April 2015).

The inspection assessed progress with any areas for improvement identified since the last finance inspection and to determine if the service was delivering safe, effective and compassionate care and if the service was well led.

RQIA received information from Four Seasons Health Care regarding a financial discrepancy in relation to patients' monies. Four Seasons Health Care informed RQIA that the Adult Safeguarding Team at the South Eastern Health and Social Care Trust was notified of the incident. The company had undertaken an internal investigation of the incident which found that an amount of patients' monies could not be accounted for due to the recording of transactions. This meant that Four Season Heath Care had to pay back monies to patients.

It is not the remit of RQIA to investigate adult safeguarding concerns made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care. However, if RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required; this may include an inspection of the home.

The following areas were examined during the inspection:

- Governance systems in place at the home, including system for reconciling patients' monies, recording contents of the safe place and the home's policies and procedures.
- Controls surrounding management of patients' finances, including management of a bank account and transactions undertaken on behalf of patients.

Evidence of good practice was found in relation to maintaining up to date records of: reconciliations (checks) of patients' monies and valuables and written agreements.

One area requiring improvement was identified in relation to the recording of patients' personal property.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Anne Devoy, 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.

5.0 How we inspect

Prior to the inspection a range of information relevant to the home was reviewed. This included the previous care and finance inspection findings and any other written or verbal information received, for example, notifications.

During the inspection the inspector met with the manager, the regional finance support manager and the administrator.

The following records were examined during the inspection:

- three patients' finance files including copies of written agreements
- a sample of financial records including patients' personal allowance monies, patients' valuables, patients' fees and purchases undertaken on behalf of patients
- a sample of records of payments to the hairdresser and podiatrist
- a sample of records of monies deposited on behalf of patients
- a sample of records of patients' personal property
- a sample of records from patients' comfort fund
- a sample of statements from the patients' bank account

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Inspection findings

Financial controls and records

A safe place was provided within the home for the retention of patients' monies and valuables. At the time of the inspection there were satisfactory controls around the physical location of the safe place and the members of staff that had access to it. Monies held on behalf of patients were counted by the inspector and the amount retained agreed with the balance recorded at the home.

A sample of valuables held on behalf of two patients was also reviewed. Records of valuables held on behalf of patients were up to date at the time of the inspection.

Policies and procedures for the management and control of patients' finances were in place at the time of the inspection. A review of the policies and procedures evidenced that they reflected the financial operational areas of the home.

Discussions with staff confirmed that no member of staff was the appointee for any patient i.e. a person authorised by the Social Security Agency to receive and manage the social security benefits on behalf of an individual. Discussions also confirmed that no member of staff acted as an agent for any patient, i.e. a person authorised by a patient or their representative to collect social security benefits on the patient's behalf.

At the time of the inspection the home did not provide a transport scheme. Discussion with staff confirmed that alternative arrangements were in place to support patients wishing to undertake journeys; this included the use of taxis which were paid for by the patients or their representatives.

Review of records evidenced that copies of payment remittances from the health and social care trusts showing the weekly fee charged for each care managed patient were retained at the home. A sample of records of fees received for two patients evidenced that the amounts received were in line with the remittances forwarded by the health and social care trusts. Discussions confirmed that patients were not paying an additional amount towards their fee over and above the amount agreed with the health and social care trusts.

A bank account was operated to retain patients' monies. A review of a sample of statements from the account confirmed that the name of the bank account referred to patients' monies. A review of the statements also confirmed that in line with regulation 22 (1) of The Nursing Homes Regulations (Northern Ireland) 2005 the bank account was not used in connection with the carrying on or management of the home.

Transactions undertaken on behalf of patients

A review of records and discussions with staff confirmed that transaction sheets were maintained for each patient. The sheets were used to record the details of transactions undertaken on behalf of patients, including purchases of items and payments for additional services e.g. hairdressing. The transaction sheets were also used to record monies deposited at the home on behalf of patients.

A review of records from purchases undertaken by staff on behalf of three patients showed that the details and the amount of the purchases were recorded. Two signatures were recorded against all of the transactions reviewed. Receipts from the purchases reviewed were retained at the home at the time of the inspection.

A review of a sample of records of payments to the hairdresser and podiatrist evidenced that the amounts deducted from the patients' monies agreed to the amounts listed in both the hairdressing and podiatrist records for the corresponding dates. The hairdresser and the podiatrist had signed the records along with a member of staff to confirm that the treatments took place and the amounts charged to each patient.

Discussions with staff confirmed that the recent internal investigation by Four Seasons Health Care found that dockets from nine transactions undertaken on behalf of patients from November 2019 to March 2020 could not be located. The book used to record the transactions contained three dockets for each transaction undertaken. All three dockets from each of the nine transactions were missing. The manager provided assurances during the inspection that additional controls had been introduced following the investigation in order to reduce the risk of this reoccurring. The records examined also showed that the full amount of monies, which could not be accounted for from the recent internal investigation, was paid back into the patients' bank account.

Patients' personal property

A review of three patients' property records evidenced that the records had not been updated or reconciled at least quarterly in line with the DHSSPS Care Standards for Nursing Homes (April 2015). This was discussed with the manager and identified as an area for improvement under the standards.

Governance

A review of a sample of records confirmed that reconciliations (checks) between monies and valuables held on behalf of patients and the records of monies and valuables held were undertaken on a monthly basis. The records were signed by the member of staff undertaking the reconciliations and countersigned by a senior member of staff.

Discussions with the manager confirmed that following the findings from the recent internal investigation the regional finance support manager visits the home on a weekly basis to support the manager in reconciling patients' monies and valuables held at the home. We were informed that these weekly governance visits will continue until further notice. The manager confirmed that no other discrepancies were evidenced during the recent investigation by Four Seasons Health Care. Further training and support was also being provided to some staff with responsibility for managing finances and associated records within the home.

Areas of good practice

There were examples of good practice found in relation to additional controls surrounding patients finances implemented following the recent internal investigation.

Areas for improvement

One area for improvement was identified in relation to the recording of patients' property.

	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 Anne Devoy, 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 nursing 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 DHSSPS Care Standards for Nursing Homes (April 2015).

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 the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

<p>Area for improvement 1</p> <p>Ref: Standard 14.26</p> <p>Stated: First time</p> <p>To be completed by: 31 December 2020</p>	<p>The registered person shall ensure that the records of patients' property are up to date. The personal property should be reconciled to the records held in the home at least quarterly.</p> <p>The records of the reconciliations should be signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>The Records of all Patients Property held in Home are currently being updated to ensure an accurate account of current belongings. This will be signed and dated by the staff member who has completed the review and countersigned by Nurse in Charge / Deputy Manager to verify and reconcile the records.</p> <p>Due to current outbreak status this cannot be completed by 31st December 2020 but will be completed by 31st January 2021. Quarterly checks will be commenced going forward and will be diarised for completion.</p> <p>The Home Manager will maintain a matrix to ensure oversight of the process and as an area identified for improvement it will be further monitored as part of the Regulation 29 Report on a monthly basis.</p>



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