

Unannounced Finance Inspection Report 16 and 21 January 2019



Millbrook Court

Type of Service: Residential
Address: 228 Donaghadee Road, Bangor, BT20 4RZ
Tel No: 02891462472
Inspector: Joseph McRandle

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 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 50 beds that provides care and support for residents who are living with dementia.

3.0 Service details

Organisation/Registered Provider: Radius Housing Association Responsible Individual(s): Fiona McAnespie	Registered Manager: Siobhan Diane Strong
Person in charge at the time of inspection: Siobhan Diane Strong	Date manager registered: 1 April 2005
Categories of care: Residential Care (RC) DE – Dementia	Number of registered places: 50

4.0 Inspection summary

An unannounced inspection took place on 16 January 2019 from 11:00 to 15:00 hours and 21 January 2019 from 10:15 to 11:45 hours.

During the inspection on 16 January 2019 the registered manager was not available and certain records relating to residents' monies could not be accessed. The home's administrator stated that records were located within the home and the registered manager would be able to provide them on her return. The inspection reconvened on 21 January 2019 and the records were available at that time.

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

Evidence of good practice was found in relation to: providing a place for residents to deposit items for safekeeping, policies and procedures reflecting the financial operational areas of the home, members of staff involved in managing residents' finances receiving adult safeguarding training, reconciling residents' monies, updating the inventory of residents' property following admission to the home, purchases from the home's comfort fund were for the benefit of all residents and retaining authorisation forms for members of staff to spend residents' monies on specific items and services.

Further evidence of good practice was found in relation to: facilitating journeys on behalf of residents, offering support to residents for managing their finances, retaining records of charges to residents, hairdresser and podiatrist signing records along with a member of staff, resident's guide detailing the services included in the weekly fee, written agreements showing current amount of third party payments, retaining receipts from transactions and issuing receipts to individuals depositing monies on behalf of residents.

Four areas requiring improvement were identified under standards in relation to: implementing a system for recording and checking valuables held at the home, ensuring signed consent forms are retained within all residents' files, ensuring copies of signed written agreements were held in all residents' files and for the use of correction fluid on residents' records to cease.

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	4

Details of the Quality Improvement Plan (QIP) were discussed with Diane Strong, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 9 December 2018

The most recent inspection of the home was an unannounced care inspection undertaken on 9 December 2018. Any actions to be taken from this inspection will be addressed by the care inspector.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues (there were no financial issues identified), the returned QIP from the previous finance inspection and the previous finance inspection report.

During the inspection the inspector met with the registered manager and the home's administrator.

A poster indicating that the inspection was taking place was displayed at the entrance to the home and invited visitors or relatives to speak to the inspector. No relatives or visitors chose to speak to the inspector. The inspector provided the registered manager with "Have we missed you cards" which were then placed in a prominent position to allow residents or their relatives who were not present on the day of the inspection, the opportunity to give feedback to RQIA regarding the quality of service provision.

The following records were examined during the inspection:

- six residents' finance files
- three residents' licence to occupy agreements

- consent forms for three residents authorising members of staff to spend residents' monies
- monies held on behalf of six residents
- records of monies held on behalf of six residents
- a sample of valuables held on behalf of two residents
- a sample of records of valuables held at the home
- a sample of records of reconciliations between residents monies held and records of monies held
- a sample of records from bank accounts containing residents' monies
- a sample of records of monies deposited at the home on behalf of two residents
- a sample of records from residents' comfort fund
- a sample of records from payments to the hairdresser and podiatrist
- a sample of records from purchases undertaken on behalf of three residents
- a sample of Health and Social Care trust remittances showing fees paid on behalf of residents
- a sample of records of amounts received from residents for fees
- financial policies and procedures
- one resident's record of personal property

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

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 9 December 2018

The most recent inspection of the home was an unannounced care inspection. Any areas for improvement from this inspection will be addressed by the care inspector.

6.2 Review of areas for improvement from the last finance inspection dated 15 December 2015

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
Requirement 1 Ref: Regulation 5 (1) (a) & (b) Stated: First time	The registered person must provide a written agreement to the resident (or their representative) identified during the inspection. The agreement must comply with the requirements under regulation 5 of The	Met

<p>To be Completed by: 19 February 2016.</p>	<p>Residential Care Homes Regulations (Northern Ireland) 2005 and meet standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards (2011).</p> <p>The agreements must detail the amount to be paid by the Health and Social Care Trust and the contribution to be paid by the resident (if any). The method of payment and the details of the person paying the fee must also be included in the agreement.</p> <p>The financial arrangements undertaken on behalf of the resident must be included within their agreement e.g. authorisation to manage a bank account on behalf of the resident.</p> <p>The agreement should be signed by the resident or their representative (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.</p> <p>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.</p> <p>A copy of the signed agreements must be retained within the resident's file.</p>	
	<p>Action taken as confirmed during the inspection:</p> <p>A review of the resident's file evidenced that since the previous finance inspection on 15 December 2015 a signed agreement was retained within the resident's file. The agreement complied with the requirements under regulation 5 of The Residential Care Homes Regulations (Northern Ireland) 2005.</p> <p>Discussion with the registered manager confirmed that the Health and Social Care Trust currently manages the bank account on behalf of the resident identified during the previous finance inspection in December 2015.</p>	

<p>Requirement 2</p> <p>Ref: Regulation 14 (4)</p> <p>Stated: First time</p> <p>To be Completed by: When returning completed QIP.</p>	<p>The registered person must confirm if monies were provided to the resident identified during the inspection. The registered person must also confirm if a policy is in place for the provision of monies to residents. If a policy is in place a copy should be forwarded to RQIA at the time of returning the completed QIP.</p> <p>A record of discussions with the resident’s care manager at the Trust prior to any future withdrawals from the resident’s bank account should be maintained within the resident’s file. The record should show that all parties agree with the amount to be withdrawn for the purchase.</p> <p>Confirmation should also be forwarded at the time of returning the completed QIP that staff have received training in the safeguarding of residents finances.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Review of records and discussion with the registered manager confirmed that no monies were provided to the resident identified during the previous finance inspection in December 2015.</p> <p>Discussion with the registered manager confirmed that the Health and Social Care Trust currently manages the bank account on behalf of the resident identified during the previous finance inspection in December 2015.</p> <p>A review of records during the inspection on 21 January 2019 confirmed that members of staff were up to date in relation to adult safeguarding training.</p>		

<p>Requirement 3</p> <p>Ref: Regulation 19 (2) Schedule 4 (9) (a)</p> <p>Stated: First time</p> <p>To be Completed by: From the date of the inspection.</p>	<p>The registered person must ensure that monies held on behalf of residents are reconciled immediately. Any variances are recorded with an explanation for the variance.</p> <p>The current method for paying the hairdresser and podiatrist must cease immediately. Monies must be taken from the relevant residents at the time of making the payment.</p> <p>Action taken as confirmed during the inspection: Discussion with staff and a review of records confirmed that following the inspection on 15 December 2015 residents' monies were reconciled. No variances were found during the reconciliation.</p> <p>A review of records during the inspection on 21 January 2019 evidenced that the system for paying the hairdresser and podiatrist had significantly improved since the last finance inspection on 15 December 2015. Both services were paid directly from the relevant residents' monies.</p>	<p>Met</p>
<p>Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011</p>		<p>Validation of compliance</p>
<p>Recommendation 1</p> <p>Ref: Standard 3.2</p> <p>Stated: First time</p> <p>To be Completed by: 31 January 2016.</p>	<p>The registered person should ensure that the resident's handbook is updated to include a list of charges for additional services provided to residents e.g. hairdressing.</p> <p>Action taken as confirmed during the inspection: A review of a sample of records evidenced that since the previous finance inspection on 15 December 2015 residents' agreements were updated to show the charges for additional services provided to residents.</p>	<p>Met</p>
<p>Recommendation 2</p> <p>Ref: Standard 4</p> <p>Stated: First time</p> <p>To be Completed by: 19 February 2016.</p>	<p>The registered person should ensure that updated written agreements are in place for all residents accommodated at the home. The agreement must meet standard 4 of the DHSSPS Residential Care Homes Minimum Standards (2011).</p> <p>The agreements must detail the amount to be paid by the Health and Social Care Trust and the contribution to be paid by the resident (if any). The method of payment and the details of the person paying the fee should also be</p>	<p>Met</p>

	<p>included in the agreements.</p> <p>Agreements should be signed by the resident or their representative (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.</p> <p>Copies of the signed agreements must be retained within residents' files.</p>	
	<p>Action taken as confirmed during the inspection:</p> <p>A review of six residents' files evidenced that copies of signed written agreements were retained within three of the residents' files. Discussion with staff confirmed that the remaining three agreements were still to be signed and returned by the residents' representatives.</p> <p>A review of the six residents' files evidenced that updated agreements were provided to the residents or their representatives following the previous finance inspection in December 2015.</p> <p>The findings from the inspection on 21 January 2019 are discussed further under section 6.7 of this report.</p>	
<p>Recommendation 3</p> <p>Ref: Standard 4.2</p> <p>Stated: First time</p> <p>To be Completed by: 19 February 2016.</p>	<p>The registered person should ensure that the details of residents' financial arrangements are included in their written agreements.</p> <p>The financial arrangements should include written consent from residents or their representatives authorising staff to make purchases on behalf of residents or to make payments on behalf of residents for additional services. A list of the items members of staff are authorised to purchase and the services authorised to be paid e.g. hairdressing, should be included.</p> <p>The authorisation should be signed by the resident or their representative (if resident lacks capacity to make decisions in relation to the management of their finances).</p> <p>Action taken as confirmed during the inspection:</p> <p>A review of a sample of residents' files</p>	<p>Met</p>

	<p>evidenced that since the previous finance inspection on 15 December 2015 consent forms authorising members of staff to spend resident's monies on additional services i.e. hairdressing and podiatry had been implemented. The forms also gave consent for members of staff to purchase sundry items on behalf of residents, e.g. toiletries and clothes. The forms were signed by the resident, or their representative, and a representative from the home.</p>	
<p>Recommendation 4</p> <p>Ref: Standard 21</p> <p>Stated: First time</p> <p>To be Completed by: 19 February 2016.</p>	<p>The registered person should ensure that the policies and procedures operated at the home are updated to include all of the financial procedures undertaken by staff on behalf of residents. This should include discussions with resident's care manager prior to any withdrawals from the resident's bank account.</p> <p>A record should be retained showing that staff have read and understood the policies and procedures.</p> <p>Action taken as confirmed during the inspection:</p> <p>A review of the policies and procedures evidenced that the policies were updated since the previous finance inspection on 15 December 2015. The financial procedures undertaken by staff on behalf of residents were included within the policies.</p> <p>A record of the names of the members of staff who had read and understood the policies and procedures was retained in the home at the time of the inspection on 21 January 2019.</p> <p>Discussion with the registered manager confirmed that the Health and Social Care Trust currently manages the bank account on behalf of the resident identified during the previous finance inspection in December 2015.</p>	<p>Met</p>

<p>Recommendation 5</p> <p>Ref: Standard 15.7</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that receipts are issued at all times when monies are deposited at the home on behalf of residents. Two signatures should be recorded when the monies are deposited. The person depositing the monies should be one of the signatures.</p> <p>Where the person depositing the money is unable to sign or chooses not to sign two members of staff witness the hand over and sign and date the record.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>A review of two records of monies deposited at the home on behalf of two residents evidenced that receipts were issued to the person depositing the monies on both occasions. Records were signed by the person depositing the monies and a member of staff.</p>		
<p>Recommendation 6</p> <p>Ref: Standard 15.7</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that the hairdressing sheets are signed at all times by the hairdresser and a member of staff to confirm residents received the service.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with staff confirmed that since the previous finance inspection in December 2015 the system for recording services provided by the hairdresser had been reviewed and a new system was implemented following the inspection.</p> <p>A review of a sample of records during the inspection on 21 January 2019 evidenced that hairdressing sheets had been implemented following the inspection in December 2015. The sheets were signed and dated by the hairdresser and a representative from the home to confirm that residents had received the service.</p>		

<p>Recommendation 7</p> <p>Ref: Standard 20.14</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that as in line with good financial practice both the hairdresser and podiatrist are paid by cheque.</p> <p>Action taken as confirmed during the inspection: A review of a sample of payments to the hairdresser and podiatrist evidenced that since the previous finance inspection in December 2015 both the hairdresser and podiatrist were paid by cheque.</p>	<p>Met</p>
<p>Recommendation 8</p> <p>Ref: Standard 15.7</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that at least two signatures are recorded against all entries in the residents' transaction sheets.</p> <p>Action taken as confirmed during the inspection: A review of records from ten transactions undertaken by staff on behalf of five residents showed that two signatures were recorded against each of the transactions.</p>	<p>Met</p>
<p>Recommendation 9</p> <p>Ref: Standard 15.12</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that a record is maintained of the reconciliation of monies held on behalf of residents. The record should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Action taken as confirmed during the inspection: Discussion with staff and a review of records confirmed that in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011), reconciliations between the monies held on behalf of residents and the records of monies held were undertaken on a monthly basis.</p> <p>Records from the reconciliations were in place at the time of the inspection on 21 January 2019. The records were signed by the person undertaking the reconciliation and countersigned by the registered manager.</p>	<p>Met</p>

<p>Recommendation 10</p> <p>Ref: Standard 8.7</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that a reconciliation of residents' inventory is undertaken regularly (at least quarterly).</p> <p>Two signatures should be recorded against the reconciliation.</p>	Met
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with staff and a review of a sample of records evidenced that the inventory of residents' possessions had been brought up to date since the previous finance inspection on 15 December 2015.</p> <p>Discussion with staff also confirmed that records were updated with items acquired and disposed of after admission for which staff had been made aware of.</p>		
<p>Recommendation 11</p> <p>Ref: Standard 15.7</p> <p>Stated: First time</p> <p>To be Completed by: from the date of the inspection.</p>	<p>The registered person should ensure that all transactions made on behalf of residents are recorded in the residents' transaction sheets.</p>	Met
<p>Action taken as confirmed during the inspection:</p> <p>A review of records from ten transactions undertaken by members of staff on behalf of five residents showed that all of the transactions were recorded in the residents' transaction sheets. Two signatures were recorded against each of the transactions.</p>		

6.3 Inspection findings

6.4 Is care safe?

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

A safe place was provided within the home for the retention of residents' 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 with access to it. Monies held on behalf of six residents were counted, the amounts retained agreed to the balance of monies recorded at the home.

Discussion with staff confirmed that a number of valuables found within the home were retained at the time of the inspection. There was no evidence of a safe record in place at the time of the inspection. Discussion with staff also confirmed that the administrator had retained a record of the items found however the items could not be attributed to any resident.

A sample of three items held were examined, the items held agreed to the records maintained by the administrator. There was no recorded evidence that the items held were checked on a regular basis.

The findings were discussed with the registered manager and an area for improvement has been listed within the QIP of this report for a system to be implemented for recording and checking valuables held at the home.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies and procedures reflected the financial operational areas of the home.

Discussion with the registered manager confirmed that members of staff involved in managing residents' finances had received training in relation to adult safeguarding. Discussion with staff also confirmed that there were no finance related restrictive practices in place for any resident.

Areas of good practice

There were examples of good practice found in relation to: providing a place for residents to deposit items for safekeeping, policies and procedures reflecting the financial operational areas of the home and members of staff involved in managing residents' finances receiving adult safeguarding training.

Areas for improvement

One area for improvement was identified under standards in relation to implementing a system for recording and checking valuables held at the home.

	Regulations	Standards
Total number of areas for improvement	0	1

6.5 Is care effective?

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

Discussion with the registered manager confirmed that no member of staff was the appointee for any resident i.e. a person authorised by the Social Security Agency 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 at the home 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 staff confirmed that reconciliations between the monies held on behalf of residents and the records of monies held were undertaken on a monthly basis. A review of a sample of records evidenced that a record was completed each month which indicated that transactions undertaken on behalf of residents were checked. The records were signed by the administrator and countersigned by the registered manager. The record did not indicate that the balance of residents' monies held following the transactions was also checked.

The registered manager confirmed that the record also verified that the balance of residents' monies was checked. The inspector advised the registered manager to revise the wording on the record in order to show that the balance of residents' monies was checked as part of the monthly reconciliations.

Discussion with staff confirmed that a bank account was operated at the home for the retention of monies belonging to a number of residents. A review of a sample of bank statements confirmed that the name of the bank account referred to residents' monies. Review of records also confirmed that in line with regulation 22 (1) of The Residential Care Homes Regulations (NI) 2005 the bank account was not used in connection with the carrying on or management of the home.

Discussion with staff confirmed that reconciliations between the transactions made against the bank account and the statements from the account were undertaken on a quarterly basis. A review of a sample of records confirmed that checks had taken place. It was noticed however, that the records did not show if the balance of monies held in the bank account was agreed following the transactions made against the account. The registered manager was advised to revise the wording on the record in order to show that the reconciliation included the balance of monies held in the account following transactions.

Discussion with staff confirmed that a comfort fund was operated on behalf of residents. Monies held for the fund at the time of the inspection were counted and agreed to the balance recorded at the home. A bank account was also operated for the fund. Reconciliations were undertaken in relation to the bank account on a quarterly basis. Discussion with staff and a review of a sample of records confirmed that purchases from the fund were for the benefit of all residents.

Discussion with staff confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Discussion with staff also confirmed that the records were updated with items acquired and disposed of after admission for which staff had been made aware of.

Areas of good practice

There were examples of good practice found in relation to: reconciling residents' monies, updating the inventory of residents' property following admission to the home and purchases from the home's comfort fund were for the benefit of all residents.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

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

Good practice was observed as forms were retained within residents' files authorising the home to hold and spend resident's monies on additional services i.e. hairdressing and podiatry. The forms also gave consent for members of staff to purchase sundry items on behalf of residents, e.g. toiletries and clothes. A review of six residents' files showed that authorisation forms were retained within three of the files. The forms retained were signed by the resident, or their representative, and a representative from the home. There was no evidence of signed forms retained within the remaining three residents' files. This was discussed with the registered manager and identified as an area for improvement.

The home did not provide a transport scheme at the time of the inspection. Discussions with the registered manager confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of taxis which were paid for by the residents or their representatives.

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

Areas of good practice

There were examples of good practice found in relation to: retaining authorisation forms for members of staff to spend residents' monies on specific items and services, facilitating journeys on behalf of residents and offering support to residents for managing their finances.

Areas for improvement

One area for improvement was identified under standards in relation to ensuring signed consent forms are retained within all residents' files.

	Regulations	Standards
Total number of areas for improvement	0	1

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

Review of records confirmed that copies of payment remittances from the health and social care trusts showing the weekly fee charged for each care managed resident were retained at the home. The remittances also showed the amount of fees paid by the trust on behalf of residents and the contribution owed by residents towards their fee. Discussion with staff and a review of records confirmed that all residents fees were paid by the health and social care trusts and no residents were paying a contribution towards their fee directly to the home.

Discussion with staff confirmed that residents were not paying an additional amount towards their fee over and above the amount agreed with the health and social care trusts.

A residents' guide was in place at the time of the inspection. The guide included the details of the services provided to residents as part of their weekly fee. The residents' guide also included a licence to occupy agreement which was issued to residents on admission to the home. A review of six residents' files evidenced that copies of signed agreements were retained within three of the files. The three agreements in place showed the current fee paid by, or on behalf of, the residents.

Discussion with staff confirmed that the remaining three agreements were forwarded to the residents' representatives but were still to be signed and returned to the home. This was discussed with the registered manager and an area for improvement has been listed within the QIP of this report for the registered person to follow up with the residents' representatives regarding the outstanding written agreements.

Review of records confirmed that a weekly third party contribution (top up) was paid on behalf of care managed residents. Discussion with staff confirmed that the third party contribution was not for any additional services provided to residents but the difference between the tariff for Millbrook Court and the regional rate paid by the Health and Social Care Trusts.

As in line with regulation 5 (1) of The Residential Care Homes Regulations (NI) 2005 the three written agreements reviewed showed the current amounts of the additional third party contributions paid on behalf of the residents. Records also showed that the third party contributions were paid directly from the Health and Social care Trusts.

Review of records and discussion with staff confirmed that Individual transaction sheets were maintained for each resident. The sheets were used to record the details of transactions undertaken on behalf of residents 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 residents.

A review of records from five purchases undertaken by staff on behalf of four residents showed that the details and amounts of the purchases were recorded. Two signatures were recorded against each of the transactions. Receipts from the purchases reviewed were retained at the home at the time of the inspection.

A review of records of three payments to the hairdresser and two to the podiatrist evidenced that the hairdresser and podiatrist provided invoices after providing the service to residents. The invoices showed the name of the residents receiving the service, the service provided to the residents and the amount charged to each resident. The amounts deducted from the resident's monies agreed to the amounts listed on the invoices from the hairdresser and podiatrist. In line with good practice the hairdresser and podiatrist had signed the records along with a member of staff.

Two records of monies deposited at the home on behalf of two residents were reviewed. The amounts deposited were recorded in the residents' transaction sheets. In line with good practice receipts were issued to the person depositing the monies.

Review of records showed that correction fluid was used for a number of entries in the residents' transaction sheets. This was discussed with the registered manager and identified as an area for improvement.

The inspector discussed with the registered manager, the arrangements in place in relation to the equality of opportunity for residents and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of residents. The registered manager informed the inspector that the equality data collected was managed in line with best practice.

Areas of good practice

There were examples of good practice found in relation to: retaining records of charges to residents, hairdresser and podiatrist signing records along with a member of staff, residents' guide detailing the services included in the weekly fee, written agreements showing current amount of third party payments, retaining receipts from transactions and issuing receipts to individuals depositing monies on behalf of residents.

Areas for improvement

Two areas for improvement were identified under standards in relation to: ensuring copies of written agreements were held in all residents' files and the use of correction fluid on residents' records to cease immediately.

	Regulations	Standards
Total number of areas for improvement	0	2

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Diane Strong, registered 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 DHSSPS Residential Care Homes Minimum Standards, 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 DHSSPS Residential Care Homes Minimum Standards, August 2011	
<p>Area for improvement 1</p> <p>Ref: Standard 15.12</p> <p>Stated: First time</p> <p>To be completed by: 8 February 2019</p>	<p>The registered person shall ensure that a system is implemented for recording and checking (at least quarterly) valuables held at the home. A safe register should also be maintained showing when items have been deposited and removed from the safe place.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken: The current system has been updated and the current policy has been reviewed</p>
<p>Area for improvement 2</p> <p>Ref: Standard 15.2</p> <p>Stated: First time</p> <p>To be completed by: 15 February 2019</p>	<p>The registered person shall ensure that signed consent forms authorising the home to hold and make transactions on behalf of residents are retained in all relevant residents' files.</p> <p>Ref: 6.6</p> <p>Response by registered person detailing the actions taken: This procedure is in place, all new resident permissions are now in place.</p>
<p>Area for improvement 3</p> <p>Ref: Standard 4.4</p> <p>Stated: First time</p> <p>To be completed by: 22 February 2019</p>	<p>The registered person shall ensure that copies of up to date and signed written agreements are retained within all residents' files.</p> <p>Where the resident or their representative is unable to sign or chooses not to sign, this is recorded on the agreement. Copies of any documentation forwarded to residents or their representatives reminding them to sign and return the agreements should also be retained within residents' files.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: This has been actioned and recorded in the resident file as stated.</p>
<p>Area for improvement 4</p> <p>Ref: Standard 20.14</p> <p>Stated: First time</p> <p>To be completed by: 22 January 2019</p>	<p>The registered person shall ensure that the use of correction fluid on residents' records ceases immediately.</p> <p>Any errors should be crossed out and a new line used to record the transaction. A reason for the error should be recorded and initialled by the staff member recording the transaction.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken:</p>

	Correction fluid is not permitted all staff have been reminded to make any admendments as stated.
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