



Unannounced Finance Inspection Report 19 February 2018



Orchard Grove

Type of Service: Residential Care Home
Address: 7 The Square, Clough, BT30 8RB
Tel No: 028 4481 1672
Inspector: Briege Ferris

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 19 beds that provides care for older residents, and/or those residents with a learning disability or mental disorder excluding learning disability or dementia.

3.0 Service details

Organisation/Registered Provider: Orchard Grove Responsible Individual(s): Ian George Emerson	Registered Manager: Deirdre Burns
Person in charge at the time of inspection: Deirdre Burns	Date manager registered: 01 April 2005
Categories of care: Residential Care (RC) MP - Mental disorder excluding learning disability or dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years LD - Learning Disability LD (E) – Learning disability – over 65 years	Number of registered places: 19

4.0 Inspection summary

An unannounced inspection took place on 19 February 2018 from 10.00 to 14.50 hours.

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

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

There were examples of good practice found in relation to the availability of a safe place to enable residents to deposit money or valuables; the availability of income and expenditure records and records detailing charges raised to residents for transport (including transport agreements) mechanisms to obtain feedback and views from residents and their representatives and signed individual written agreements in place with residents including the arrangements for the management of residents personal allowance monies.

Areas requiring improvement were identified in relation to ensuring that the home administrator receives adult safeguarding training and ensuring that the costs of services facilitated in the home for which there is an additional charge are detailed in full within individual resident agreements.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	2

Details of the Quality Improvement Plan (QIP) were discussed with Deirdre Burns, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

5.0 How we inspect

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that none of these incidents related to residents' money or valuables. The record of calls made to RQIA's duty system was reviewed and this did not identify any relevant issues; the care inspector for the home was also contacted prior to the inspection and they confirmed there were no matters to be followed up.

During the inspection, the inspector met with the registered manager and home administrator (who is based at another home within the group).

The following records were examined during the inspection:

- "Service User's Guide"
- A sample of residents' income and expenditure records
- Written policy and procedures:
 - "Policy on handling residents personal allowance" reviewed 2/3/17
 - "Complaints policy" reviewed 2/3/17
 - "Confidentiality and Data Protection" reviewed 2/3/17
 - "Gifts to staff and donations" revised 2/3/17
 - "Management of records policy" reviewed 2/3/17
 - "Policy on missing items" reviewed 2/3/17
 - "Record management policy" reviewed 31/05/17
 - "Safeguarding residents assets and valuables" reviewed 2/3/17
 - "Transport and care escort scheme" June 2017
 - "Whistle blowing policy"
- Three records of residents' personal property (in their rooms)
- Three residents' individual written agreements
- A sample of treatment records for hairdressing services facilitated within the home

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 08 February 2018

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

6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

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

The registered manager confirmed that adult safeguarding training was mandatory for all staff in the home; however, discussion with the home administrator (who is based at another home within the group) established that she had not received adult safeguarding training.

This was identified as an area for improvement.

Discussions established that there were no current suspected, alleged or actual incidents of financial abuse, nor were there any finance-related restrictive practices in place for any resident.

The home had a safe place available for the deposit of cash or valuables belonging to residents; the inspector was satisfied with the location of the safe place and the persons with access. On the day of inspection, cash belonging to a number of residents was lodged for safekeeping; no valuables were being held.

Records of the reconciliation of monies and valuables are discussed in section 6.5 of this report.

Areas of good practice

There were examples of good practice found for example, in relation to the availability of a safe place to enable residents to deposit money or valuables.

Areas for improvement

One area for improvement was identified in respect of ensuring the home administrator received adult safeguarding training.

	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.

The registered manager confirmed that no representative of the home was acting as nominated appointee for any resident (ie: managing a resident's social security benefits on their behalf). However, she noted that the personal monies belonging to several residents which were held at the Health and Social Care trust were subsequently received at the home and lodged into the safe place on behalf of the residents. Clear records existed to detail the amount and timing of these receipts.

The registered manager noted that by exception, the family members of identified residents deposited cash for expenditure on behalf of their relative. Discussion established that the person making a deposit received a receipt and a duplicate receipt book was in place to record these details. It was noted that the signature of the person receiving the cash was routinely recorded on duplicate receipts and advice was provided in respect of securing the signature of the person making the deposit (or a second member of staff) in order to protect staff members receiving cash.

For those residents for whom the home engaged in transactions for goods or services, records detailing income and expenditure were available for individual residents. A review of a sample of the records identified that two signatures had been recorded against individual transactions and receipts were available in respect of purchases made on behalf of residents. Evidence was available which identified that two people had carried out a reconciliation on a quarterly basis. Advice was provided in respect of how to make the reconciliation more clear on the face of each record.

Hairdressing treatments were being facilitated within the home. A sample of hairdressing treatment receipts were reviewed, which were found to detail the date, the name of the resident, the treatment received (and the cost) the signature of the hairdresser and routinely, the signature of the resident.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see the property records for three residents. A review of the files identified that each resident had record on their file which was signed and dated. Within the sample of records were references to "Flat screen tv", "radio". Advice was provided to the registered manager in respect of recording the make/mode/approximate size of such items in the existing records, as this would provide a better level of detail.

Discussion with the home administrator established that no bank accounts were managed on behalf of residents either individually or jointly. The administrator also noted that the home did not operate a comfort fund for donations; however evidence was available to confirm how a previous one-off donation to the home had been used for the benefit of the residents.

The home operated a transport scheme and a detailed written policy and procedure was in place. This clearly identified that the cost of the scheme was based on individual personal usage by each resident and that the cost per mile was divided equally by the number of passengers travelling in the vehicle.

Discussion with the registered manager and home administrator established that there had been a recent change to some aspects of transport provision insofar as an external provider had begun to provide transport services to a number of residents to their day care opportunities. Discussion established that the HSC trust was involved in the oversight of those particular aspects of transport provision to the residents.

Detailed records were in place identifying the costs on which the home’s own transport provision was based. The basis of the cost per mile (which was reviewed at least annually) was clear and up to date detailed records existed to identify the journeys taken by individual residents. Monthly invoices based on journey records were raised which set out the purpose of the journey, the miles travelled and the associated costs.

Discussion established that one of the appendices to each resident’s individual written agreement detailed the arrangements for transport provision and space for the current arrangements to be agreed to. A sample of agreements were reviewed which identified that those residents had a written transport agreement (appendix) in place.

Evidence was available which identified that the home had engaged with HSC trust representatives to ensure that the HSC trust were in agreement with current arrangements regarding transport provision before any charges would be levied to residents.

Areas of good practice

There were examples of good practice found in relation to the existence of income and expenditure records and supporting documents such as lodgement and expenditure receipts; the availability of personal property records maintained for residents’ furniture and personal possessions and clear evidence of engagement with the HSC trust regarding transport provision; detailed records were in place to identify the costs on which transport was based as well as up to date journey records for individual 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?

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

Day to day arrangements in place to support residents were discussed with the registered manager. She described a range of examples of how the home supported residents with their money. Discussion established that arrangements to safeguard a resident’s money would be discussed with the resident or their representative prior to, or at the time of the resident’s admission to the home.

Discussion established that the home had a range of methods in place to encourage feedback from families or their representatives in respect of any issue. This included ongoing verbal feedback, residents’ meetings and questionnaires.

Arrangements for residents to access money outside of normal office hours were discussed with the registered manager. The registered manager explained that the senior on duty on each shift had access to the safe place; therefore residents had access to their monies at all times.

Areas of good practice

There were examples of good practice found in respect of the arrangements in place to support individual residents discussed during the inspection and mechanisms to obtain feedback and views from resident and their representatives.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

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

The “Service User’s Guide” detailed a range of useful information for a prospective resident including the staffing structure and provided information on how the home would physically safeguard any monies received on a resident’s behalf.

A range of written policies and procedure were in place addressing areas such as handling residents’ personal allowances, gifts to staff and donations, records management and transport. Policies were easily accessible by staff.

Discussion with the home administrator established that she was clear on how to deal with the receipt of a complaint or escalate any concerns under the home’s whistleblowing procedures.

Individual resident agreements were discussed with the registered manager and a sample of three files was chosen in order to review those in place between the home and each resident or their representative.

Each resident had a signed individual written agreement in place, in each case these followed the generic written agreement template which itself, included a number of appendices detailing arrangements in respect of fees, the management of residents’ personal allowances (where relevant) and transport provision. Each resident’s agreement was up to date and reflected the current terms and conditions in respect of the fees payable and the related financial arrangements. The registered manager and home administrator noted that recent changes to transport provision (as discussed in section 6.5 above) required an update to one of the appendices in the agreements. The inspector observed that the updated appendices were prepared and she was advised that these were waiting to be reviewed and signed at a forthcoming visit from a representative of the HSC trust.

A review of the agreements and the generic template identified that one appendix detailed that hairdressing and private chiropody services were accessible in the home, however the

agreement did not provide the current costs of these services as is required by standard 4.2 of the Residential Care Homes Minimum Standards (2011).

This was identified as an area for improvement.

Areas of good practice

There were examples of good practice found in respect of the range of information contained in the "Service User's Guide", each resident had a signed up to date written agreement including details as to the management of personal allowances and transport arrangements; and written policies and procedures were in place to guide financial practices in the home.

Areas for improvement

One area for improvement was identified as part of the inspection, this related to ensuring that at the next change in/update of resident's agreements, the current costs of additional services facilitated within the home are detailed in each agreement.

	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 Deirdre Burns, 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 the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

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

<p>Area for improvement 1</p> <p>Ref: Standard 16.3</p> <p>Stated: First time</p> <p>To be completed by: 19 May 2018</p>	<p>The registered person shall ensure that the home administrator receives adult safeguarding training.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken: The home administrator will attend Adult Safeguarding Training on Friday 4th May 2018</p>
<p>Area for improvement 2</p> <p>Ref: Standard 4.2</p> <p>Stated: First time</p> <p>To be completed by: From the date of the next change in fees payable/financial arrangements</p>	<p>The registered person shall ensure that the content of each resident's individual agreement is consistent with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: From April 1st 2018 residents agreements will be updated to include current costs of additional services facilitated within the home.</p>

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



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