

Unannounced Finance Inspection Report 13 February 2018











Glenalina Lodge

Type of Service:Residential

Address: 607 Springfield Road, Belfast, BT12 7FN

Tel No: 02890412030

Inspector: Joseph McRandle

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 48 beds registered to provide care for residents living with a range of care needs as detailed in section 3.0.

3.0 Service details

Organisation/Registered Provider: Care Circle Limited	Registered Manager: See box below
Responsible Individual(s): Christopher Walsh	
Person in charge at the time of inspection:	Date manager registered:
Peter Bradley	Peter Bradley – acting, no application required
Categories of care:	Number of registered places:
Residential Care (RC)	48 comprising:
I - Old age not falling within any other category	1 - RC-SI
DE – Dementia	1 – RC-A
MP - Mental disorder excluding learning	6 – RC-DE 2 – RC-PH
disability or dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years PH - Physical disability other than sensory impairment	8 – RC-MP and RC-MP(E)
A - Past or present alcohol dependence SI – Sensory impairment	

4.0 Inspection summary

An unannounced inspection took place on 13 February 2018 from 10.15 to 14.15 hours.

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, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis, members of staff involved in managing residents' finances receiving adult safeguarding training, the policies and procedures reflecting the operational areas of the home, updating records of residents' personal possessions following admission, informing residents in advance of increases in the weekly fee, facilitating journeys on behalf of residents, retaining signed consent forms within residents' files authorising members of staff to pay for additional services or purchase identified items, offering support to residents for managing their finances, the residents' guide detailing the services included in the weekly fee and the costs for additional services.

Other evidence of good practice included: retaining records of charges to residents, retaining records of amounts paid by residents for fees, written agreements in place with residents, recording transactions undertaken on behalf of residents, retaining receipts from transactions,

hairdresser and podiatrist signing records, issuing a receipt to person depositing money on behalf of residents and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

Areas requiring improvement were identified in relation to: recording evidence that residents' monies are reconciled at least quarterly, updating residents money contracts and the financial policies and procedures with the arrangement for purchasing toiletries in bulk for residents from one supplier, updating residents' agreements to show the current fee, updating agreements for care managed residents in order to be consistent with the Health and Social Care Trusts' Contracts and implement a revised system for recording transactions on behalf of residents.

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	6

Details of the Quality Improvement Plan (QIP) were discussed with Peter Bradley, 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 26 October 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 26 October 2017.

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 inspector from the previous inspection was contacted who confirmed that there were no issues to follow up.

During the inspection the inspector met with the manager and admin staff.

The following records were examined during the inspection:

- four residents' finance files
- four residents' written agreements
- four residents personal money contracts
- monies held on behalf of residents
- the residents' guide
- records of safe contents

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- a sample of valuables held on behalf of a resident
- a sample of records of monies deposited at the home on behalf of a resident
- a sample of records of payments for hairdressing and podiatry services
- a sample of records of purchases undertaken on behalf of four residents
- a sample of a statement from bank account retaining residents' monies
- financial policies and procedures
- inventory records for two residents

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 26 October 2017

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 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 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 staff members with access. Monies held on behalf of residents were counted, the amount retained agreed to the balance recorded at the home.

A safe contents book was in place and up to date at the time of the inspection. A sample of valuables held on behalf of one resident was examined. Records agreed to the items held in the safe place. Records also showed that the items held were checked on a regular basis.

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

Financial 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.

Areas of good practice

There were examples of good practice found in relation to providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis, members of staff involved in managing residents' finances receiving adult safeguarding training and the policies and procedures reflecting the operational areas of the home.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

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

Review of records and discussion with the 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 to receive and manage the social security benefits on behalf of an individual.

Discussion with the 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 staff confirmed that reconciliations between the monies held on behalf of residents and the records of monies held were undertaken on a regular basis. There was no recorded evidence to confirm that the residents' monies were reconciled as in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards, August 2011. This was identified as an area for improvement.

Discussion with staff confirmed that no bank account belonging to any resident was managed at the home. Staff confirmed that a number of residents' personal allowance monies were held within a business bank account. Review of a statement from the bank account confirmed that the monies held within the account belonged to residents and were not used for the management of the home, as in line with regulation 22 (1) of The Residential Care Homes Regulations (NI) 2005. Records of transactions from the bank account could not be reviewed as they were retained at the home's head office at the time of the inspection.

Review of records and discussion with staff confirmed that a residents' comfort fund was not in place at the time of the inspection.

Records confirmed that residents or their representatives were informed in advance of any increase in fees as in line with The Residential Care Homes Regulations (Northern Ireland) 2005.

Discussion with the manager confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Review of records for two residents showed 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: updating records of residents' personal possessions following admission and informing residents in advance of increases in the weekly fee.

Areas for improvement

One area for improvement was identified during the inspection. This related to recording evidence that residents' monies were reconciled at least quarterly.

	Regulations	Standards
Total number of areas for improvement	0	1

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.

The home did not provide a transport scheme at the time of the inspection. Discussion with the 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.

The manager was commended on the good practice of consent forms ("personal money contracts") being in place authorising members of staff to purchase goods and services on behalf of residents. The forms permitted members of staff to pay the hairdresser and included a list of the essential items e.g. toiletries that staff were permitted to purchase on behalf of residents. A review of two residents' files, for which purchases were made by members of staff, showed that consent forms were retained within both files. The forms were signed by the residents or their representatives and a representative from the home.

Discussion with staff confirmed that it was policy for toiletries to be purchased in bulk for residents from one supplier. It was noticed that this arrangement was not included within the residents' personal monies contracts or the financial policies and procedures operated at the home. This was identified as an area for improvement.

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: facilitating journeys on behalf of residents, retaining signed consent forms within residents' files authorising members of staff to pay for additional services or purchase identified items and offering support to residents for managing residents' finances.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to updating residents money contracts and the financial policies and procedures with the arrangement for purchasing toiletries in bulk for residents from one supplier.

	Regulations	Standards
Total number of areas for improvement	0	2

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. The remittances confirmed that residents were not paying a contribution towards their fee and that the Health and Social Care Trusts were paying the full amount of the fees.

A weekly third party contribution was paid on behalf of care managed residents. Discussion with the manager confirmed that the third party contribution was not for any additional services provided to residents but the difference between the tariff for Glenalina Lodge and the regional rate paid by the Health and Social Care Trusts.

Discussion with staff confirmed that care managed 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 and a list of additional services charged to residents e.g. hairdressing.

The residents' guide included a written agreement which was issued to residents on admission to the home. Review of four residents' files evidenced that individual written agreements were in place for all four residents. It was noticed that two of the agreements were not in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards (2011) as they did not show the current weekly fee paid by, or on behalf of, the two residents.

All four agreements reviewed were signed by the resident or their representative and a representative from the home. An area for improvement was identified for residents' agreements to be updated to show the current fee paid by, or on behalf of, residents.

As in line with regulation 5 (3) of The Residential Care Homes Regulations (NI) 2005 all of the agreements reviewed showed the current amount of the additional third party contribution paid on behalf of the residents.

It was noticed that the terms and conditions within the agreements for care managed residents included a number of provisions for charging residents for the late payment of fees and for the method of paying the fees. The manager was advised that these arrangements may not be in line with the contract between the registered person and the Health and Social Care Trusts. This was identified as an area for improvement.

Review of records and discussion with staff confirmed that 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 sample of records of three payments to the hairdresser and one to the podiatrist were reviewed for four residents. Records showed the name of the residents receiving the service, the service provided to the residents and the amount charged to each resident. Records also showed that receipts were available from all four transactions. Review of records showed that the amount deducted from residents' monies to pay the hairdresser and podiatrist agreed to the amounts recorded on the hairdressing and podiatrist's receipts. As in line with good practice the hairdresser, the podiatrist and a member of staff had signed the records to confirm that the service took place.

Good practice was observed in relation to the audit process as the number on the receipts from the payments to the hairdresser and podiatrist were recorded against the entries recorded within the transaction sheets showing the amounts withdrawn from residents' monies to pay for these services.

A review of four records of purchases undertaken by staff, on behalf of four residents, showed that in line with good practice, the details of the purchases were recorded in the residents' transaction sheets. Receipts from the purchases were available and two signatures were recorded against each of the transactions.

One record of monies deposited at the home on behalf of one resident was reviewed. The amount deposited was recorded in the resident's transaction sheet. Two signatures were recorded against each of the transactions. It was noticed that in line with good practice, a receipt was issued to the person depositing the monies. It was also noticed that the person depositing the monies was one of the signatories on the receipt.

The inspector discussed the recording of residents' transactions with the manager. It was noticed that a number of entries had either been written over or scored out. No initials were recorded against the amendments and no explanation for the errors was recorded. Records also showed that correction fluid was used on a number of the entries in the residents' transaction sheets. A review of the financial policies and procedures operated at the home confirmed that policies were in place to prevent the above practices. An area for improvement was identified within the QIP of this report for a revised system of recording residents' transactions to be implemented in order to improve the accuracy of recording and to facilitate the policies and procedures operated at the home.

Review of records showed that as in line with good practice a list of signatures of staff authorised to make purchases or payments on behalf of residents was maintained at the home.

Areas of good practice

There were examples of good practice found in relation to: the residents' guide detailing the services included in the weekly fee and the costs for additional services, retaining records of charges to residents, retaining records of amounts paid by residents for fees, written agreements in place with residents, recording transactions undertaken on behalf of residents, retaining receipts from transactions, hairdresser and podiatrist signing records, issuing a receipt to person depositing money on behalf of residents and maintaining a list of signatures of staff authorised to undertake transactions on behalf of residents.

Areas for improvement

Three areas for improvement were identified during the inspection. These related to updating residents' agreements to show the current fee, updating agreements for care managed residents to be consistent with the health and social care trusts' contracts and implement a revised system for recording transactions on behalf of residents.

	Regulations	Standards
Total number of areas for improvement	0	3

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Peter Bradley, 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, 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 Standards, August 2011.

Area for improvement 1

Ref: Standard 15.12

Stated: First time

To be completed by: 02 March 2018

The registered person shall develop and implement a system for recording the reconciliations of monies held on behalf of residents. The reconciliations should be undertaken and recorded at least quarterly.

The record of the reconciliations should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff to evidence that they have taken place.

Ref: 6.5

Response by registered person detailing the actions taken:

Reconciliations are now completed at the end of each month by the Home Administrator and Management. These are signed off and filed away in the reconciliation file as evidence.

Area for improvement 2

Ref: Standard 4.2

Stated: First time

To be completed by:

16 March 2018

The registered person shall update the residents' written money contracts with a provision informing residents or their representatives of the policy for members of staff to purchase toiletries in bulk for residents from one supplier.

The provision should allow residents or their representatives to agree or opt out of the arrangement.

Ref: 6.6

Response by registered person detailing the actions taken:

Moving forward the home has decided to no longer buy items in bulk.

Residents agreements still valid.

Area for improvement 3

Ref: Standard 20.10

Stated: First time

To be completed by: 09 March 2018

The registered person shall ensure that the financial policies and procedures operated at the home are updated to include the policy for members of staff to purchase toiletries in bulk for residents from one supplier.

A record should be retained showing that staff have read and understood the revised policies and procedures.

Ref: 6.6

Response by registered person detailing the actions taken:

Moving forward the home has decided to no longer buy items in bulk. Residents agreements still valid.

Area for improvement 4	The registered person shall ensure that residents' written agreements are updated to show the current fee paid by, or on behalf of, residents,
Ref: Standard 4.2	including the current amount charged for the third party contribution.
Stated: First time	Ref: 6.7
To be completed by: 16 March 2018	Response by registered person detailing the actions taken: Written agreements have been amended and posted to relevant people.
Area for improvement 5	The registered person shall ensure that the written agreements for care managed residents are consistent with the terms and conditions
Ref: Standard 4.2	of the contracts between the registered person and the health and social care trusts e.g. charging residents for the late payment of fees.
Stated: First time	Ref: 6.7
To be completed by:	
16 March 2018	Response by registered person detailing the actions taken: Terms and conditions of care managed residents are currently under review and are due to be re-written.
Area for improvement 6 Ref: Standard 20.14	The registered person shall implement a robust system for recording residents' transactions in order to improve the accuracy of recording and to facilitate the policies and procedures operated at the home.
Stated: First time	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
To be completed by:	the staff member recording the transaction.
02 March 2018	The practice of writing over records and the use of correction fluid should cease immediately.
	Ref: 6.7
	Response by registered person detailing the actions taken: The finance section of the Homes CareBlox software is now operational. All transactions and corrections are now recorded electronically.

^{*}Please ensure this document is completed in full and returned via Web Portal*





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