

Announced Finance Inspection Report 17 August & 22 August 2017











Summerhill

Type of Service: Residential

Address: 31 Upper Gransha Road, Bangor, BT19 7QF

Tel No: 0289146 1185

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 23 beds that provides care for residents living with Sensory impairment, dementia, old age not falling within any other category and physical disability other than sensory impairment over 65 years.

3.0 Service details

Organisation/Registered Provider: Summerhill Residential Home Ltd	Registered Manager: Mr Hugh Frederick Warden
Responsible Individual(s):	
Mr Hugh Frederick Warden	
Person in charge at the time of inspection: Mr Hugh Frederick Warden	Date manager registered: 01 April 2005
Categories of care:	Number of registered places:
Residential Care (RC)	23
SI- Sensory impairment	Maximum of 7 residents in DE category of care
I - Old age not falling within any other category	
DE – Dementia	
PH(E)- physical disability other than sensory	
impairment- over 65 years	

4.0 Inspection summary

An announced inspection took place on 17 August 2017 from 11:00 to 12:00 and 22 August 2017 from 10:45 to 13:15. Less than thirty minutes notice was given prior to the inspection.

During the inspection on 17 August 2017 records relating to the inspection could not be accessed. The registered manager stated that records were located within the home. The inspector and the registered manager agreed to suspend the inspection to allow the registered manager time to locate the records. The inspection resumed on 22 August 2017.

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, staff receiving training in adult safeguarding, updating records of residents' personal possessions, informing residents or their representatives of increases in the weekly fee, providing support for residents to undertake journeys outside of the home, retaining records of charges to residents and retaining records of amounts paid by residents for fees.

Areas requiring improvement were identified in relation to: implementing financial policies and procedures, updating the residents' guide to include the costs for additional services, updated written agreements to be in place for all residents, ensure terms and conditions for charging residents when temporarily absence from home is consistent with Health and Social Care Trust contract, review system of recording services provided by hairdresser and update residents'

written agreements with provision informing residents of the policies for paying for additional services e.g., the hairdresser and not undertaking purchases 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 Mr Hugh Frederick Warden, 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 28 March 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 28 March 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.

During the inspection the inspector met with the registered manager.

The following records were examined during the inspection:

- Five residents' finance files
- Three residents' individual written agreements
- The residents' guide
- A sample of records of fees received for three residents
- A sample of records for hairdresser
- Policy for staff receiving gifts
- 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 28 March 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. The 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.

Discussion with the registered manager confirmed that it was policy at the home for residents to manage their own finances. No monies or valuables were held on behalf of residents at the time of the inspection.

A place was provided at the home if residents required monies or valuables to be held for safekeeping. At the time of the inspection there were satisfactory controls around the physical location of the safe place and the staff members with access.

Discussion with the registered manager confirmed that all staff had received training in relation to the safeguarding of vulnerable adults. As in line with good practice records showed that members of staff had signed statements confirming that they had read and understood the vulnerable adult safeguarding policy. The registered manager was able to demonstrate knowledge of their specific role and responsibilities for 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.

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 and staff receiving training in adult safeguarding.

RQIA ID: 1657 Inspection ID: IN029398

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 registered manager confirmed that no member of staff 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 registered manager also confirmed that no member of staff acted as an agent for any resident, i.e. a person authorised by a resident or their representative to collect social security benefits on the resident's behalf.

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 staff confirmed that no bank accounts were managed on behalf of any resident.

Discussion with the registered 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 following admission for which staff had been informed of.

Policies and procedures for the management and control of residents' finances were not in place at the time of the inspection. The policies need to reflect all of the practices currently operated at the home e.g. the procedure for paying the hairdresser and podiatrist for services provided to residents. This was identified as an area for improvement.

The procedure for paying the hairdresser and podiatrist is discussed under section 6.7 of this report.

Areas of good practice

There were examples of good practice found in relation to: updating records of residents' personal possessions and informing residents or their representatives of increases in the weekly fee.

Areas for improvement

One area for improvement was identified during the inspection. This related to implementing financial policies and procedures. The policies should reflect all of the procedures undertaken on behalf of residents.

	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 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 registered 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 for residents outside of the home and offering support to residents for managing their own monies.

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 service users in order to deliver safe, effective and compassionate care.

Review of records confirmed that copies of payment remittances from 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 Trusts on behalf of residents and the contribution owed by residents towards their fee. Records were also available showing the weekly fee charged to private residents.

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

Discussion with the registered manager also confirmed that the current amount charged for the third party contribution was agreed with the Health and Social Care Trust and residents were

not paying an additional amount towards their fee over and above the amount agreed with the Health and Social Care Trusts.

Review of records showed that details of the amount of fees paid by, or on behalf of, residents were retained at the home. A review of a sample of payments made by, or on behalf of, three residents showed that the amounts paid agreed to the contribution owed by each resident.

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 guide did not show the costs for additional services provided to residents e.g. hairdressing and chiropody services. This was identified as an area for improvement.

The residents' guide included a written agreement which was issued to residents on admission to the home. Review of five residents' files evidenced that written agreements were in place for three of the residents. The three agreements reviewed referred to the regulations prior to The Residential Care Homes Regulations (Northern Ireland) 2005. The agreements did not show the details of the fee paid by, or on behalf of, the residents e.g. the amount paid by the Health and Social Care Trust and the amounts paid by residents and the third parties. One of the agreements reviewed was not signed by the resident or their representative. An area for improvement was listed within the QIP of this report for signed agreements to be in place for all residents. The agreements should show the breakdown of the fee paid by, or on behalf of, the residents including the third party contribution.

The terms and conditions of the written agreement referred to the arrangements for the payment of fees when residents were temporarily absent from the home. An area for improvement was listed within the QIP for the registered person to ensure that these arrangements are consistent with the terms and conditions of the contract between the registered persons and the Health and Social Care Trust.

Discussion with staff confirmed that it was policy for the hairdresser and podiatrist to be paid by the home and the home would subsequently invoice the residents or their representatives for the service provided. Discussion with the registered manager confirmed that the hairdresser retained a book to record the services provided to residents.

A review of the hairdresser's book showed that the full details of the service provided to residents were not recorded. The records did not show the year the service was provided or details of the hairdressing treatment provided to the residents. The amount charged to each resident was recorded in the book. Records showed that the hairdresser had signed the records, it was noticed that a member of staff had not signed the records along with the hairdresser to confirm the service took place. This was identified as an area for improvement.

Discussion with the registered manager confirmed that records provided by the hairdresser were used to invoice the residents or their representatives. A sample of six payments to the hairdresser was examined, the amounts invoiced to the residents, by the home, agreed to the records provided by the hairdresser.

Discussion with the registered manager confirmed that no purchases were undertaken on behalf of residents by members of staff. The inspector was informed by the registered manager that residents or their representatives purchased essential items e.g. toiletries when required. There was no provision within the residents' agreements informing residents (prior to signing the agreement) of the policies for paying for additional services e.g. the hairdresser and not undertaking purchases on behalf of residents. This was identified as an area for improvement.

Areas of good practice

There were examples of good practice in relation to retaining records of charges to residents and retaining records of fees paid by residents.

Areas for improvement

Five areas for improvement were identified during the inspection. These related to: updating the residents' guide to include the costs for additional services, updated written agreements to be in place for all residents, ensure terms and conditions for charging residents when temporarily absence from home is consistent with Health and Social Care Trust contract, review system of recording services provided by hairdresser and update residents' agreements with provision informing residents of policy for paying hairdresser and podiatrist and the policy of not undertaking purchases on behalf of residents.

	Regulations	Standards
Total number of areas for improvement	0	5

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Hugh Frederick Warden, 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, 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 Web Portal for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan	
Action required to ensure Standards, August 2011.	e compliance with DHSSPS Residential Care Homes Minimum
Area for improvement 1 Ref: Standard 21.1 Stated: First time	The registered person shall ensure that financial policies and procedures are implemented at the home. The policies should include all of the financial procedures operated at the home e.g. the procedure for paying the hairdresser and podiatrist for services provided to residents.
To be completed by: 22 September 2017	A record should be retained showing that staff have read and understood the policies and procedures.
	Ref: 6.5
	Response by registered person detailing the actions taken: This has been completed as outlined
Area for improvement 2 Ref: Standard 3.2	The registered person shall update the residents' guide to show the costs for additional services provided to residents e.g. hairdressing and chiropody services.
Stated: First time	Ref: 6.7
To be completed by: 22 September 2017	Response by registered person detailing the actions taken: This has been completed
Area for improvement 3 Ref: Standard 4.2	The registered person shall ensure that signed written agreements are in place for all residents. The agreements should show the breakdown of the fee paid by, or on behalf of, residents.
Stated: First time To be completed by:	The details of the person(s) paying the additional third party contribution directly to the home should also be included within the relevant agreements.
30 September 2017	Ref: 6.7

	Response by registered person detailing the actions taken: Ongoing rollout of updated agreements has begun
Area for improvement 4 Ref: Standard 4.8	The registered person shall ensure that the arrangements for the payment of fees when care managed residents are temporarily absent from the home are consistent with the terms and conditions of the contract between the registered person and the Health and Social
Stated: First time	Care Trust.
To be completed by: 30 September 2017	Ref: 6.7
	Response by registered person detailing the actions taken: This has been done
Area for improvement 5 Ref: Standard 20.14	The registered person shall implement a system to ensure that the full details of the services provided by the hairdresser are recorded. The records should include the exact date the service was provided and
Stated: First time	the details of the treatment provided to residents. A member of staff should sign the records along with the hairdresser
To be completed by: 15 August 2017	to confirm the service took place and to facilitate the invoicing process.
	Ref: 6.7
	Response by registered person detailing the actions taken: This is now in place
Area for improvement 6 Ref: Standard 4.2	The registered person shall update the residents' agreements with a provision informing residents or their representatives (prior to signing the agreement) of the policies for poving for additional convices a g
	the agreement) of the policies for paying for additional services e.g. the hairdresser and the purchase of essential items e.g. toiletries.
Stated: First time	Ref: 6.7
To be completed by: 30 September 2017	Response by registered person detailing the actions taken: The new agreements cover this (see above)

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





The Regulation and Quality Improvement Authority 9th Floor

Riverside Tower 5 Lanyon Place BELFAST

BT1 3BT

Tel 028 9051 7500
Fax 028 9051 7501
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews