

Unannounced Finance Inspection Report 23 October 2018



Tullywest Manor

Type of Service: Residential Address: 12 Tullywest Road, Saintfield, BT24 7LX Tel No: 028 9751 1234 Inspector: Joseph McRandle

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Assurance, Challenge and Improvement in Health and Social Care



This is a residential care home registered to provide care for up to 26 persons in the categories of care detailed in section 3.0 of this report.

Organisation/Registered Provider: Tullywest Manor Responsible Individual(s):	Registered Manager: Philip James McCleery
Anne McCleery Dr. James McKelvey	
Person in charge at the time of inspection: Philip James McCleery	Date manager registered: Registration pending
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia PH - Physical disability other than sensory impairment PH(E) - Physical disability other than sensory impairment – over 65 years	Number of registered places: 26

An unannounced inspection took place on 23 October 2018 from 10.45 to 13.00 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, members of staff involved in managing residents' finances receiving adult safeguarding training, maintaining records of reconciliations of residents' monies, updating the inventory of residents' property following admission to the home, facilitating journeys on behalf of residents, offering support to residents for managing their own finances, retaining records of charges to residents, retaining records of amounts paid by residents for fees, signed written agreements in place with residents, written agreements showing the current fee and individual charges for agreed itemised services e.g. hairdressing, written agreements showing current amount of third party payments and informing residents of increases in fees.

One area requiring improvement was restated for a second time under standards. This was in relation to ensuring that the hairdresser, podiatrist and a member of staff sign the records of the services provided to 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.

	Regulations	Standards
Total number of areas for improvement	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Philip James McCleery, 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.

The most recent inspection of the home was an unannounced care inspection undertaken on 14 June 2018. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

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 manager of the home.

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 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:

- three residents' finance files
- three residents' written agreements
- a sample of remittances from health and social care trusts showing fees paid on behalf of residents
- a sample of records of fees paid by three residents
- cash held on behalf of three residents
- a sample of records of reconciliations between residents monies held and records of monies held
- a sample of records of monies deposited on behalf of two residents
- the residents' guide

- a sample of copies of invoices from the hairdresser and podiatrist
- a sample of invoices issued to residents for hairdressing and podiatry services
- financial policies and procedures
- property records for one resident.

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 manager at the conclusion of the inspection.

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

Areas for improvement from the last finance inspection		
Action required to ens Homes Regulations (N	ure compliance with The Residential Care	Validation of
Requirement 1	The registered person must provide an updated	compliance Met
itequiterione i	written agreement to each resident (or their	inot
Ref: Regulation 5 (1)	representative) accommodated at the home.	
(a) (b) & (2) (a)	The agreement must comply with the	
Otata da Einat tina a	requirements under regulation 5 of The	
Stated: First time	Residential Care Homes Regulations (Northern Ireland) 2005 and meet standard 4.2 of the	
To be Completed by:	DHSSPS Residential Care Homes Minimum	
13 November 2015	Standards.	
	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 and the third party. The method of payment and the details of the person paying the fee must also be included in the agreement.	
	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	

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	resident or their representative is unable or chooses not to sign this must be recorded. 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. A provision should be included in the resident's agreement informing residents that they will be informed of any increase in fees by the legislative timeframe. Copies of the signed agreements must be retained within residents' files. Action taken as confirmed during the inspection : A review of three residents' files evidenced that signed written agreements were retained within all three files. The agreements showed the current fee paid on behalf of residents and the method of payment for the fees. All three agreements were signed by the residents or their representatives and a representative from the home. A review of the three agreements evidenced that since the previous finance inspection a provision had been included within the agreements stating that residents would be informed, in writing, of increases in fees within the legislative timescale.	
Requirement 2 Ref: Regulation 5 (2) (a) Stated: First time	The registered person must ensure that residents or their representatives are informed in writing at least 28 days in advance of any increase in fees. A copy of the correspondence should be retained in residents' files.	
To be Completed by: From the date of next increase in fees	Action taken as commed during the inspection: A review of two residents' files evidenced that copies of correspondence forwarded to the residents to inform them of an increase in fees were retained within the files. A review of records evidenced that residents were informed of the increase within the legislative timescale.	Met
Requirement 3 Ref: Regulation 13 (1)	The registered person must ensure that the details of any additional charge for accompanying residents on outside	Met

Stated: First time	appointments are incorporated into the resident's guide and the resident's agreement.	
To be Completed by: 13 November 2015	The registered person must confirm that there is an escort policy and procedure for accompanying vulnerable residents to appointments outside of the home, including the procedure for those residents with no next of kin (A copy of this information should be enclosed when returning the Quality Improvement Plan).	
	Confirmation that a copy of the escort policy has been forwarded to the referring Health and Social Care Trust should also be forwarded.	
	Action taken as confirmed during the	
	inspection: Discussion with the manager confirmed that since the previous finance inspection in 2015 the provision within the residents' guide for charging residents for escort duties had been removed. The manager confirmed that residents were never charged escort duties. Residents' relatives or their representatives would accompany them to pre-arranged appointments.	
Action required to ens Homes Minimum Stan	ure compliance with DHSSPS Residential Care dards, August 2011	Validation of compliance
Recommendation 1	It is recommended that the registered person	Met
Ref: Standard 21	updates the policies and procedures operated at the home to include all of the financial	
Stated: First time	procedures undertaken by staff on behalf of residents.	
To be Completed by: 13 November 2015	A record should be retained showing that staff have read and understood the policies and procedures.	
	Action taken as confirmed during the inspection: A review of the policies and procedures evidenced that the policies were updated since	

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	home at the time of the inspection.	
Recommendation 2 Ref: Standard 15.7	It is recommended that the registered person ensures that the hairdresser, podiatrist and a member of staff signs the relevant books to confirm that the service took place.	
Stated: First time	The full details of the service provided, including the cost, should be recorded.	
To be Completed by: From the date of inspection	Action taken as confirmed during the inspection: A review of a sample of invoices from the hairdresser and podiatrist showed that since the previous finance inspection in 2015 the names of the residents receiving the service, the service provided to the residents, the amounts charged to residents and the date the service took place were recorded on the invoices. It was noticed that the hairdresser and podiatrist had not signed the records along with a member of staff to confirm that the service took place. The comments in the returned QIP from the previous finance inspection in 2015 stated that the records were being signed. This was discussed with the manager and the area for improvement has been restated for a second time.	Not met
Recommendation 3	It is recommended that the registered person ensures that the policy and procedure for	Met
Ref: Standard 21 Stated: First time To be Completed by:	payment to the hairdresser and podiatrist are reviewed. This should include the procedure for any reimbursement from residents when the home pays the hairdresser or podiatrist on the residents' behalf.	
13 November 2015	A record should be retained showing that staff have read and understood the policies and procedures.	
	Action taken as confirmed during the inspection: A review of the policies and procedures evidenced that the policies were updated since the previous finance inspection on 1 October 2015. The current policy is for the hairdresser and podiatrist either to be paid directly by residents or paid by the home on the residents'	

	behalf. The home would subsequently invoice residents for the service paid by the home. A record of the names of the members of staff who had read and understood the revised policies and procedures was retained in the home at the time of the inspection.	
Recommendation 4 Ref: Standard 15.7 Stated: First time To be Completed by: From the date of inspection	It is recommended that the registered person ensures that a member of staff signs the receipt along with the clothes supplier to confirm that the resident received the items purchased. Action taken as confirmed during the inspection: Discussion with the manager and a review of records confirmed that the clothes supplier visits the home occasionally, normally once or twice a year. A sample of a receipt for one resident showed that the clothes supplier had signed the receipt along with a member of staff.	Met
Recommendation 5 Ref: Standard 15.7 Stated: First time To be Completed by: From the date of inspection	 It is recommended that the registered person ensures that all transactions made on behalf of residents are recorded accurately, this should include The date the transaction took place. Adequate details of the transaction The registered person must ensure that correction fluid is not used to amend entries. Each transaction undertaken should be recorded separately along with two signatures. Action taken as confirmed during the inspection: Discussion with the manager confirmed that the only transactions undertaken on behalf of residents since the previous finance inspection in October 2015 are those involving the hairdresser, podiatrist, clothes supplier and when monies are deposited at the home on behalf of residents. A review of a sample of records evidenced a significant improvement in the recording process since the last finance inspection. The full details of the transactions were recorded including the	Met

	date the transaction tools place	
	date the transaction took place.	
	A review of a sample of records evidenced that	
	no correction fluid was used since the previous	
	•	
	finance inspection and that each transaction was	
	recorded separately with two signatures.	
Recommendation 6	It is recommended that the registered person	
	ensures that the system of recording transactions	
Ref: Standard 21	on behalf of residents and the system for the	
	retention of receipts are reviewed in order to	
Stated: First time	facilitate recommendation 5 and to aid the audit	
	process.	
To be Completed by:	Action taken as confirmed during the	
From the date of the	inspection:	Met
inspection	A review of records evidenced that the system for	
mopodion	recording transactions on behalf of residents had	
	significantly improved since the last finance	
	inspection on 1 October 2015. A review of a	
	sample of records showed that the full details of	
	the transactions were recorded and that receipts	
	were retained for the transactions reviewed.	
Recommendation 7	It is recommended that the registered person	Met
	obtains written consent from residents or their	
Ref: Standard 15.2	representatives for staff to make purchases or	
	payments from resident's monies. A list of the	
Stated: First time	items members of staff are authorised to	
	purchase and the services authorised to be paid	
To be Completed by:	e.g. hairdresser should be included	
13 November 2015		
	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).	
	Action taken as confirmed during the	
	inspection:	
	Discussion with the manager confirmed that	
	since the previous finance inspection in 2015 it is	
	the policy at the home that no purchases are	
	undertaken on behalf of residents by members of	
	staff. The inspector was informed by the	
	manager that residents or their representatives	
	purchased essential items e.g. toiletries when	
	required.	
	The services for the hairdresser were included	
	within the revised written agreements which were	
	signed by residents or their representatives.	
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It is recommended that the registered person ensures that monies held on behalf of residents are reconciled at least quarterly. A record should be maintained of the reconciliation. The record should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff. Action taken as confirmed during the inspection : Discussion with the manager 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 quarterly basis. The records of the reconciliations were signed by the person undertaking the reconciliation and countersigned by a senior member of staff.	Met
It is recommended that the registered person ensures that an up to date inventory is maintained of furniture and personal possessions brought into the home by, or on behalf of, residents. The record should give clear details of the items listed. A reconciliation of these records should be undertaken regularly (at least quarterly). Action taken as confirmed during the inspection : Discussion with the manager 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. Clear details of the items were recorded. Discussion with the manager also confirmed that records were updated with items acquired and disposed of after admission for which staff had been made aware of.	Met
It is recommended that the registered person ensures that a record is maintained at the home showing how the amount charged to residents for	Met
	ensures that monies held on behalf of residents are reconciled at least quarterly. A record should be maintained of the reconciliation. The record should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff. Action taken as confirmed during the inspection: Discussion with the manager 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 quarterly basis. The records of the reconciliations were signed by the person undertaking the reconciliation and countersigned by a senior member of staff. It is recommended that the registered person ensures that an up to date inventory is maintained of furniture and personal possessions brought into the home by, or on behalf of, residents. The record should give clear details of the items listed. A reconciliation of these records should be undertaken regularly (at least quarterly). Action taken as confirmed during the inspection: Discussion with the manager 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. Clear details of the items were recorded. Discussion with the manager also confirmed that records were updated with items acquired and disposed of after admission for which staff had been made aware of. It is recommended that the registered person

Stated: First time	accompanying them to appointments outside of the home was determined.	
To be Completed by: 13 November 2015	Action taken as confirmed during the inspection: Discussion with the manager confirmed that since the previous finance inspection in 2015 the provision within the residents' guide for charging residents for escort duties by members of staff had been removed. The manager confirmed that residents were never charged escort duties. Members of residents' families or their representatives would accompany them to pre- arranged appointments.	

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 three residents were counted, the amounts retained agreed to the balance of monies recorded at the home.

No valuables were held on behalf of residents. A register of contents held in the safe place was available and up to date at the time of the inspection.

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 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 and members of staff involved in managing residents' finances receiving adult safeguarding training.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Discussion with the manager and review of records 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 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 the manager and 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 quarterly basis. In line with good practice two signatures were recorded against the records of the reconciliations.

Discussion with the manager confirmed that no bank accounts were managed on behalf of any resident and no comfort fund monies were maintained on behalf of residents.

Discussion with the manager and a review of records 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 maintaining records of reconciliations of residents' monies and updating the inventory of residents' property following admission to the home.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

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

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 and offering support to residents for managing their own finances.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

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. Records were also available showing the weekly fee charged to private residents.

Review of records showed that details of the amount of fees paid by, or on behalf of, residents were retained at the home. Review of a sample of payments made by three residents showed that the amounts paid agreed to the contribution owed by each resident. Discussion with the manager 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 review of two residents' files evidenced that copies of correspondence forwarded to the residents notifying them of the latest increase in fees were retained within their files.

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 written agreement which was issued to residents on admission to the home. A review of three residents' files evidenced that copies of signed written agreements were retained within all three files. The agreements were in line with the financial components of standard 4.2 of the Residential Care Homes minimum standards 2011 as they included the current fee charged to residents, the individual charges for agreed itemised services e.g. hairdressing and the method of payment for the fees.

Review of records confirmed that a weekly third party contribution (top up) 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 Tullywest Manor 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.

Discussion with the manager confirmed that no purchases were undertaken on behalf of residents. The inspector was informed by the manager that residents or their representatives purchased essential items e.g. toiletries when required.

Discussion with the manager also confirmed that it was policy for the hairdresser and podiatrist either to be paid directly by residents or paid by the home on the residents' behalf. The home would subsequently invoice residents for the service provided. The hairdresser and podiatrist provided invoices after providing the service to residents. A review of a sample of invoices from the hairdresser and podiatrist showed that the names of the residents receiving the service, the service provided to the residents, the amounts charged to residents and the date the service took place were recorded on the invoices.

It was noticed that the hairdresser and podiatrist had not signed the records along with a member of staff to confirm that the service took place. An area for improvement was listed during the previous finance inspection for the records to be signed. The comments in the returned QIP from the registered person confirmed that the area for improvement had been met. This was discussed with the manager and identified as an area for improvement for a second time.

A review of the corresponding invoices forwarded to residents agreed to the amounts recorded on the invoices from the hairdresser and podiatrist. Good practice was observed as the corresponding invoice numbers from the hairdresser and podiatrist were recorded on the invoices forwarded to residents. The records also showed the date the invoices were paid by the residents.

Two records of monies deposited at the home on behalf of two residents were reviewed. The amounts deposited were recorded at the home. No receipts were issued to the persons depositing the monies however they were required to sign the record of the deposit along with a member of staff. A review of the sample taken during the inspection confirmed that the person depositing the monies had signed the records along with a staff member.

The inspector discussed with the 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. Tullywest Manor did not collect any equality data on residents and the manager was advised to contact the Equality Commission for Northern Ireland for guidance on best practice in relation to collecting the data.

Areas of good practice

There were examples of good practice found in relation to: retaining records of charges to residents, retaining records of amounts paid by residents for fees, signed written agreements in place with residents, written agreements showing the current fee and individual charges for agreed itemised services e.g. hairdressing, written agreements showing current amount of third party payments and informing residents of increases in fees.

Areas for improvement

An area for improvement was identified under standards for the hairdresser, podiatrist and a member of staff to sign the records of the services provided to residents.

	Regulations	Standards
Total number of areas for improvement	0	1

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Philip James McCleery, 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.

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.

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			
Area for improvement 1	The registered person shall ensure that the hairdresser, podiatrist and a member of staff signs the relevant books to confirm that the service		
Ref: Standard 15.7	took place.		
Stated: Second time	Ref: 6.7		
To be completed by: 24 October 2018	Response by registered person detailing the actions taken: Senior staff, Hairdresser and Podiatrist have been instructed to ensure that this practice commences.		

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





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Assurance, Challenge and Improvement in Health and Social Care