

Unannounced Finance Inspection Report 23 January 2017



SENSE

Type of Service: Residential Care Home
Address: 41 Edenvale Avenue, Eden, Carrickfergus BT38 7NP
Tel no: 02893362792
Inspector: Briega Ferris

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of SENSE took place on 23 January 2017 from 10:00 hours to 14:30 hours.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the home was delivering safe, effective and compassionate care, and if the service was well led.

Is care safe?

A safe place was available in the home; discussion established that controls were in place to ensure residents' money and valuables were safeguarded. One area for improvement was identified during the inspection. This related to ensuring that the registered person write to the HSC trust to seek an urgent response in respect of the concerns the home had previously raised regarding the management of the identified resident's money.

Is care effective?

Controls to ensure residents' money and valuables were safeguarded were found to be in place; however two areas for improvement were identified during the inspection. These related to: ensuring that written confirmation of the appointee details for one identified resident are requested from the social security agency and ensuring that records of money and valuables/possessions are reconciled, recorded and signed and dated by two people at least quarterly.

Is care compassionate?

Discussion with staff members evidenced an empathic attitude to ensuring residents' money and valuables were appropriately safeguarded. No areas for improvement were identified.

Is the service well led?

Governance arrangements were found to be in place however two areas for improvement were identified during the inspection. These related to: ensuring that each resident or their representative is provided with an individual written agreement which sets out the terms and conditions of their residency in the home and ensuring that each resident or their representative is provided with a written personal monies authorisation/agreement. The written authorisation/agreement should be retained on the resident's records and updated as required.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (Updated 2011).

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	4

Details of the quality improvement plan (QIP) within this report were discussed with Patrick Black, 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.

1.2 Actions/enforcement taken following the most recent finance inspection

Other than those actions detailed in the previous QIP, there were no further actions required to be taken following the last inspection.

2.0 Service details

Registered organisation/registered person: SENSE/Collette Gray	Manager: Patrick Black (Registration pending)
Person in charge of the home at the time of inspection: Patrick Black (Registration pending)	Date manager registered: Patrick Black - application received - "registration pending"
Categories of care: RC-SI	Number of registered places: 10

3.0 Methods/processes

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that there had been one incident notified to RQIA in relation to a resident's money and valuables. This matter was discussed with the manager and finance manager and an update was provided. There is further discussion in relation to this matter in section 4.3 of the report.

The record of calls made to RQIA's duty system was also reviewed and this did not identify any relevant issue. The care inspector for the home was contacted and confirmed that with the exception of the one incident referred to above, there were no other matters to be followed up from the previous care inspection.

During the inspection, we met with Patrick Black, the manager; Pamela Kinkead, finance manager and the home administrator. A poster detailing that the inspection was taking place was positioned at the entrance of the home, however no visitors or relatives chose to meet with the inspector.

The following records were examined during the inspection:

- The “Residents’ Guide”
- Four resident finance files
- A sample of bank statements maintained for residents
- A sample of residents’ income and expenditure records
- A sample of charges to one resident for the use of transport services
- A sample of charges to one resident for care and accommodation
- HSC trust payment remittance for January 2017
- A sample of finance related policies
- The record of safe contents “Record of residents valuables”
- One signed personal monies authorisation

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 17 January 2017

The most recent inspection of the home was an unannounced care inspection. The inspection did not result in a quality improvement plan being issued.

4.2 Review of requirements and recommendations from the last finance inspection dated 17 June 2009

A finance inspection of the home was carried out on 17 June 2009 on behalf of RQIA; the findings from this inspection were not brought forward to the inspection on 23 January 2017.

4.3 Is care safe?

The home employed an administrator and evidence was reviewed which confirmed that she had recently undertaken training on the Protection of Vulnerable Adults (POVA). The home administrator also noted that regular finance training was available.

As noted above, discussion was held regarding a notification RQIA had received from the home in relation to an adult safeguarding referral. The home had made a referral to the NHSCT safeguarding team in respect of concerns relating to the management of an identified resident’s money.

Subsequent to the referral, it was noted that in December 2016, the home had provided a timeline to the HSC trust, a timeline of relevant events and correspondence in relation to this matter. The manager noted that at the time of the inspection, a response from the NHSCT had not been received. It was clear that the home had taken measures to ensure that the identified resident did not experience deprivation as a result of the concerning circumstances which had led to the notifying the NHSCT of a potential adult safeguarding matter.

The inspector noted that the registered person should write to the HSC trust to seek an urgent response in respect of the concerns the home had previously raised with the trust in regard to this matter.

A recommendation was made in respect of this finding. Following the inspection, a copy of correspondence from SENSE to the NHSCOT was shared with RQIA in respect of this recommendation.

With the exception of the above matter, the manager confirmed that there were no current suspected, alleged or actual incidents of financial abuse. The manager also confirmed that there were no 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 and valuables belonging to residents were lodged with the home for safekeeping.

The home had a written record of any items held for safekeeping on behalf of individual residents; entries into the record had been signed and dated by two people.

There is further commentary on arrangements to reconcile these records in section 4.4 of the report.

Areas for improvement

One area for improvement was identified during the inspection. This related to ensuring that the registered person write to the HSC trust to seek an urgent response in respect of the concerns the home had previously raised regarding the management of an identified resident's money.

Number of requirements	0	Number of recommendations	1
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4.4 Is care effective?

Discussion with the manager and finance manager identified that a representative of the home may be acting as nominated appointee for one identified resident i.e. officially managing the resident's social security benefits. A review of the identified resident's file evidenced that official appointee confirmation details were not on file. It was noted that written confirmation of the appointee details for the identified resident should be requested from the social security agency.

If correspondence received details that a representative of the home is acting as appointee for the resident, the details should be held within the resident's records and should be reflected in the resident's individual agreement with the home including the records to be kept regarding the appointment.

A recommendation was made in respect of this finding.

On the day of inspection, 10 residents were living in the home and had done so for some time. For each of the 10 residents discussed, the manager and finance manager were able to clearly identify who was managing each resident's personal monies. In most cases, this was a family representative and in an identified number of cases, the HSC trust was acting as appointee for

the resident. In only one case (as detailed above) did the finance manager identify that an appointee arrangement may be in place with SENSE.

The finance manager explained that (with the consent of the residents' representatives) SENSE had arranged for bank accounts to be set up for each resident. The names on a sample of the accounts viewed on inspection evidenced that the accounts were held under the SENSE umbrella but the name of the individual resident was clearly detailed in the account name to identify that the monies belonged to the named resident.

In order for the respective residents to access their personal monies, monies were transferred into each resident's "SENSE" bank account by direct transfer or by cheque. The finance manager noted that bank statements from the accounts were received by SENSE at head office in Birmingham; however she noted that she reviewed the statements personally.

Discussion established that a number of residents were contributing part of their care and accommodation costs from their social security benefits. A sample of the residents' bank statements were reviewed (on the finance manager's laptop computer) and it was noted that the amount of money being transferred from the total (amount of benefits) received monthly agreed to the amounts detailed in the HSC trust payment remittance which detailed the residents' contributions.

In a number of other cases, the home were in receipt of money directly from the family/friends of residents to pay for items purchased by the home on behalf of residents, such as clothing, toiletries or other sundries.

Books were maintained by staff which detailed records of income and expenditure for each resident. The books detailed the receipt of cash withdrawn on behalf of each resident from their individual "SENSE" bank account and of cash spent on behalf of each resident; a standard financial/cash ledger format was in use within the book.

The sample of records evidenced that a daily check of the balance in residents' ledgers to the balance in hand was carried out. The home administrator confirmed that this was done at each morning's staff handover. The records reflected that at each month-end, the administrator carried out a check of transactions from the previous month, which she signed and dated.

However, the records did not evidence that a reconciliation of money had been carried out, recorded and signed and dated by two people at least quarterly.

In addition, a review of the "Record of residents valuables" book also failed to evidence that such reconciliations had taken place. The three most recent checks of the valuables had been recorded in June 2014, July 2015 and July 2016.

A recommendation was made in respect of this finding.

The inspector traced a sample of transactions recorded in the records and was able to locate the relevant evidence in relation to either a lodgement or withdrawal made on behalf of the residents.

Discussion with the manager and finance manager established that no services were facilitated within the home which attracted an additional fee. Staff noted that residents availed of hairdressing services in the community and the home paid for podiatry treatments for the residents.

The recording of residents' property (within their rooms) was discussed and a sample of property records for three residents was requested. Each of the three residents had a written record of property held on their care file which had been signed by one person. There was evidence that the records had been kept up to date over time.

The home had a residents' comfort fund; the manager and administrator confirmed that when money was raised, this was divided equally between each of the residents in the home. A review of a sample of four resident income and expenditure ledgers evidenced that an equal amount of money had been recorded in individual ledgers in December 2016 following fundraising activity.

The manager and finance manager confirmed that the home provided transport to residents, using three vehicles. The finance manager highlighted that previously, the transport scheme had been administered differently to the current arrangements. She noted that the NHSCT had carried out a financial audit of the home and had highlighted this matter. She reported that SENSE finance and senior representatives were liaising with the NHSCT to ensure that information regarding residents' previous use of the scheme was provided to the NHSCT. She noted that this would most likely result in a repayment being made to residents, where appropriate. Correspondence from the finance manager following the inspection indicated that this process should be completed by in February 2017.

On the day of inspection, the finance manager explained that the transport scheme was being administered on the basis that residents were charged an identified amount per mile, which was based on the previous year's running costs for vehicles used in the scheme. Residents paid for actual miles travelled and where more than one resident shared the same journey, the cost per mile was shared equally between those residents making the journey.

A sample of recent journeys undertaken by one resident was reviewed, this identified that the journey records agreed to the charges made. These records had been sent to the NHSCT, as nominated appointee for the identified resident.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to: ensuring that written confirmation of the appointee details for one identified resident are requested from the social security agency and ensuring that records of money and valuables/possessions are reconciled, recorded and signed and dated by two people at least quarterly.

Number of requirements	0	Number of recommendations:	2
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4.5 Is care compassionate?

Day to day arrangements to support residents with their money and valuables were discussed with the manager and finance manager.

Both staff members described specific examples of how the home supported a number of residents with their money. Specific discussion was held regarding one identified resident for whom the home had notified the NHSCT about a potential adult safeguarding matter.

Discussion with the manager established that the home had a range of methods in place to encourage feedback from families or their representatives in respect of any issue.

Arrangements for residents to access money outside of normal office hours were discussed with the manager. He explained that access to the safe place by senior staff was possible on all shifts worked in the home.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

A copy of the home's written "Finance Policy" addressing matters relating to safeguarding money and valuables, and record keeping requirements was available.

There was a clear organisational structure within the home; discussion established that those involved in supporting residents with their money on a daily basis were familiar with their roles and responsibilities in relation to safeguarding residents' money and valuables.

Individual resident agreements were discussed and a sample of four resident finance files were selected for review. Three of the four residents did not have a signed written agreement with the home on their files. There was evidence on two of the three files to identify that the home had sought to provide an up to date written agreement to the resident or their representative. On both files, agreements had been updated in July 2016, alongside copies sent for signature to the respective representatives.

One resident's file evidenced that a response had been received from the NHSCT as appointee for the resident. A second resident's representative had not responded to the correspondence attaching the resident's agreement for signature. The remaining resident's file (which did not contain any written agreement) failed to evidence how the home had sought to provide the resident or their representative with a written agreement.

A requirement was made to ensure that each resident is provided with an individual written agreement which sets out the terms and conditions of their residency in the home.

The sample of files was also reviewed to identify whether written personal monies authorisations (providing the home with the authority to spend the resident's personal money) were in place. A review of the four files evidenced that only one resident had a signed personal monies authorisation in place.

A recommendation was made to ensure that each resident or their representative is provided with a written personal monies authorisation/agreement. The written authorisation/agreement should be retained on the resident's records and updated as required.

Areas for improvement

Two areas for improvement were identified during the inspection. These related to: ensuring that each resident or their representative is provided with an individual written agreement which sets out the terms and conditions of their residency in the home and ensuring that each resident or their representative is provided with a written personal monies authorisation/agreement. The

written authorisation/agreement should be retained on the resident's records and updated as required.

Number of requirements	1	Number of recommendations	1
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5.0 Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Patrick Black, manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 the RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider/s meets legislative requirements based on Residential Care Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards (Updated 2011). They promote current good practice and if adopted by the registered provider(s) may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to finance.team@rqia.org.uk for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan	
Statutory requirements	
<p>Requirement 1</p> <p>Ref: Regulation 5 (1) (a) (b)</p> <p>Stated: First time</p> <p>To be completed by: 23 February 2017</p>	<p>The registered provider must ensure that each resident is provided with an individual written agreement which sets out the terms and conditions of their residency in the home.</p> <p>Response by registered provider detailing the actions taken: Service Level Agreements have been reissued to appropriate family members/Trust representatives</p>
Recommendations	
<p>Recommendation 1</p> <p>Ref: Standard 16.7</p> <p>Stated: First time</p> <p>To be completed by: 23 February 2017</p>	<p>The registered provider should write to the HSC trust to seek an urgent response in respect of the concerns the home have raised with the HSC trust regarding the management of the identified resident's money.</p> <p>RQIA should be provided with a written update on progress regarding how the home's concerns have been addressed and how the outstanding matters discussed during the inspection have been appropriately resolved. This update should be provided to RQIA by 23 March 2017.</p> <p>Response by registered provider detailing the actions taken: A letter was emailed to the named social worker on 03/02/17 and the RQIA finance inspector was copied into this email. A further email was sent to the named social worker on 15/03/17 requesting an update. The registered manager will inform the inspector when he receives a response.</p>
<p>Recommendation 2</p> <p>Ref: Standard 15.10</p> <p>Stated: First time</p> <p>To be completed by: 23 February 2017</p>	<p>The registered provider should ensure that written confirmation of the appointee details for the identified resident are requested from the social security agency.</p> <p>If correspondence received details that a representative of the home is acting as appointee for the resident, the details should be held within the resident's records and should be reflected in the resident's individual agreement with the home including the records to be kept regarding the appointment.</p> <p>Response by registered provider detailing the actions taken: This information was held at Head Office and this has subsequently been forwarded to the finance inspector</p>

<p>Recommendation 3</p> <p>Ref: Standard 15.12</p> <p>Stated: First time</p> <p>To be completed by: 7 February 2017</p>	<p>The registered provider should ensure that a reconciliation of money/possessions held by the home on behalf of residents is carried out and evidenced and recorded, at least quarterly.</p> <hr/> <p>Response by registered provider detailing the actions taken: Reconciliations which are completed by the administrator are now being checked on a quarterly basis by the registered manager.</p>
<p>Recommendation 4</p> <p>Ref: Standard 15.2</p> <p>Stated: First time</p> <p>To be completed by: 23 February 2017</p>	<p>The registered provider should ensure that each resident or their representative is provided with a written personal monies authorisation/agreement. The written authorisation/agreement should be retained on the resident's records and updated as required.</p> <hr/> <p>Response by registered provider detailing the actions taken: These have been reviewed and reissued to appropriate family members/Trust representatives</p>

Please ensure this document is completed in full and returned to finance.team@rqia.org.uk from the authorised email address



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