

Ross Lodge / Ross House RQIA ID: 1710 288 Moyarget Road Dervock Ballymoney BT53 8EG

Inspector: Joe McRandle Inspection ID: 023353

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Announced Enforcement Compliance Inspection of Ross Lodge / Ross House

10 August 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced enforcement compliance inspection took place on 10 August 2015 from 12.30 to 14.30 hours. The purpose of the inspection was to assess the level of compliance achieved by the home regarding two failure to comply notices issued on 7 May 2015. The areas for improvement and compliance with the regulations were in relation to maintaining records specified in schedule 4 of the regulations, (FTC/RCH/1710/2015-16/01(E)) and the prevention of residents being placed at risk of abuse (FTC/RCH/1710/2015-16/02 (E)). The date for compliance with the notices was 10 August 2015.

FTC Ref: FTC/RCH/1710/2015-16/01(E) and FTC Ref: FTC/RCH/1710/2015-16/02(E)

Evidence was available to confirm that the registered persons made the necessary improvements to comply with The Residential Care Homes Regulations (Northern Ireland) 2005 as set out in the notices.

1.1 Enforcement Taken Following the Last Finance Inspection

An announced finance inspection was undertaken on 22 April 2015. This identified issues with regards to the management of residents' finances.

These matters were referred to the Northern Health and Social Care Trust (NHSCT) under the Adult Safeguarding arrangements.

In accordance with RQIA's Enforcement Policy, RQIA wrote to the registered persons and outlined the intention to serve notices of failure to comply with the Residential Care Homes Regulations (Northern Ireland) 2005. The registered persons attended a meeting with RQIA on 5 May 2015.

In light of the inspection findings and discussions held with the registered persons on 5 May, RQIA issued two notices of failure to comply with the Regulations, in respect of Regulation 19 (2) and Regulation 14 (4) of the Residential Care Homes Regulations (Northern Ireland) 2005.

The timescales for compliance and actions required to comply with these regulations were outlined within the notices FTC/RCH/1710/2015-16/01 and FTC/RCH/1710/2015-16/02, and within the Quality Improvement Plan accompanying the report from the inspection on 22 April 2015. The date for compliance with the notices was 6 July 2015.

An enforcement compliance inspection was carried out on 6 July 2015. Evidence was not available during the inspection to validate full compliance with the above failure to comply notices. Following discussions with senior management at RQIA on 7 July 2015 a decision was made to extend the compliance date of the notices up to the legislative timeframe of 90 days. The date for compliance with the extended notices was 10 August 2015.

At the time of issuing this report the NHSCT Adult Safeguarding investigation was still ongoing.

1.2 Actions Resulting From This Inspection

FTC Ref: FTC/RCH/1710/2015-16/01(E) and FTC Ref: FTC/RCH/1710/2015-16/02(E)

As indicated above, evidence was available to confirm that the registered persons made the necessary improvements to comply with The Residential Care Homes Regulations (Northern Ireland) 2005 set out in the notices.

No further enforcement action was taken as a result of this inspection.

*All enforcement notices for registered agencies/services are published on RQIA's website at: http://www.rqia.org.uk/inspections/enforcement_activity.cfm

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	2	0

The details of the QIP within this report were discussed with Mrs Joyce McKinney, Registered Person and Mrs Barbara Creelman, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person:	Registered Manager:	
Mr Alex McKinney and Mrs Joyce McKinney	Barbara Creelman	
Person in Charge of the Home at the Time of	Date Manager Registered:	
Inspection:	Registration pending	
Barbara Creelman		
Categories of Care:	Number of Registered Places:	
RC-LD, RC-LD(E), RC-PH, RC-PH(E)	13	
Number of Patients/Residents Accommodated	Weekly Tariff at Time of Inspection:	
on Day of Inspection:	£91.07 – Respite Tariff	
6 (permanent residents)	£407.59 - £624.06 Permanent Tariff	

3. Inspection Focus

The inspection sought to assess the level of compliance with the required actions indicated within the two failure to comply notices issued on 7 May 2015 and extended following an inspection on 6 July 2015. The date for compliance on the extended notices was 10 August 2015.

Methods/Process

Specific methods/processes used in this inspection include the following:

- discussion with the manager and staff
- discussion with the registered person
- review of residents' records since previous finance inspection

4. The inspection

4.1 FTC Ref: FTC/RCH/1710/2015-16/01(E)

Notice of Failure to Comply with Regulation 19 (2) of the Residential Care Homes Regulations (Northern Ireland) 2005

19 (2) The registered person shall maintain in the home the records specified in schedule 4.

Following the last finance inspection on 6 July 2015, all of the actions in relation to this notice had been addressed.

Review of records and discussion with staff confirmed that records were maintained of the social security benefits received on behalf of the residents identified during the announced inspection on 23 April 2015. Records confirmed that a Christmas bonus had been received on behalf of residents and subsequently paid over to the residents. The records also confirmed that residents did not receive a fuel allowance payment.

Review of records and discussion with staff confirmed that correspondence was forwarded to the Social Security Agency requesting confirmation that the registered person acted as an appointee for a number of residents. At the time of inspection on 10 August 2015 the registered persons received confirmation for one resident however, confirmation letters were still outstanding for two residents. The registered person agreed to follow this finding up with The Social Security Agency.

Review of records and discussion with staff confirmed that the registered person had forwarded correspondence to the Office of Care and Protection (OCP) requesting confirmation if the registered person acted as a power of attorney for the resident identified during the inspection on 23 April 2015. At the time of inspection on 10 August 2015 the registered person was still awaiting confirmation. The registered person agreed to follow this matter up with OCP.

A requirement is listed within the QIP to this report with regard to confirmation of appointeeship and power of attorney.

Review of records and discussion with staff confirmed that the resident identified during the inspection on 23 April 2015 had been refunded their personal allowance monies. Records also showed that the registered person had informed the NHSCT of the details of the refund.

Review of records and discussion with staff confirmed that a record of the financial arrangements for each resident had been retained in the residents' files.

4.2 FTC Ref: FTC/RCH/1710/2015-16/02 (E)

Notice of Failure to Comply with Regulation 14 (4) of the Residential care Homes Regulations (Northern Ireland) 2005

14 (4) The registered person shall make arrangements by training persons employed or by other measures, to prevent residents being harmed or suffering abuse or being placed at risk of harm or abuse.

Following the last finance inspection on 6 July 2015, all of the actions in relation to this notice with the exception of one had been addressed.

Discussion with staff confirmed that an amount of monies would be refunded to residents following a review of records going back over the last four years. We were informed that the registered persons were still in discussions with the NHSCT as part of the safeguarding investigation. We were also told that the monies would be paid to residents once an agreement was reached with the NHSCT.

Review of records and discussion with staff confirmed that records were maintained of the journeys undertaken by residents. The date of the journey, the destination and the miles incurred by residents were included in the record.

We noticed that agreements were not in place with residents for the transport scheme recently introduced by the registered persons. We were told that the agreements would be issued to residents or their representatives once the draft transport policies and procedures had been implemented.

A requirement is listed within the QIP for the transport policy to be implemented and agreements detailing the terms and conditions of the transport scheme to be issued to residents or their representatives.

Review of records and discussion with staff confirmed that staff had been trained in the safeguarding of residents' finances. A record of the staff members involved in the training was maintained at the home.

5 Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Joyce McKinney, Registered Person and Mrs Barbara Creelman, Registered 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 your premises. 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.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Residential Care Homes Minimum Standards. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to finance.team@rgia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan						
Statutory Requirement	Statutory Requirements					
Requirement 1 Ref: Regulation 19 (2)	The registered person must ensure that written confirmation is obtained from The Social security Agency of the name of the person at the home acting as appointee for the residents identified during the inspection.					
Stated: Second time To be Completed by: 28 August 2015	The registered person must ensure written confirmation is obtained from the Office of Care and Protection for the registered person to act as power of attorney for the resident identified during the inspection.					
G C C C C C C C C C C C C C C C C C C C	Response by Registered Person(s)Detailing the Actions Taken: The registered person requested in writing from the Office of Care and Protection confirmation they were to act as power of attorney for the resident. This was received.					
Requirement 2 Ref: Regulation14 (4) Stated: Second time To be Completed by: 28 August 2015	The registered person must ensure that agreements are in place between the registered persons and residents or their representatives detailing the terms and conditions of the transport scheme. The needs and resources of residents must be considered when applying the charge for using the minibus. The agreement should include a provision for residents or their representatives to opt out of using the minibus.					
	Response by Registered Person(s)Detailing the Actions Taken: Travel agreement and scheme was drawn up and sent to NHSCT for approval. Mileage rate was decided considering costs of the minibus, this was also sent to the NHSCT for approval. The registered person has now had each resident or their representative sign the travel aggreement. The residential home has had the travel scheme in place from the 1 st of Sept.					

I agree with the content of the report.			
Registered Manager	B. Creelman	Date Completed	16/10/2015
Registered Person	J. McKinney	Date Approved	16/10/2015
RQIA Inspector Assessing Response	Joe McRandle	Date Approved	21/10/15

Please provide any additional comments or observations you may wish to make below:

^{*}Please complete in full and return to nursing.team@rqia.org.uk from the authorised email address*