

Unannounced Finance Inspection Report 5 March 2019









24 Pettigo Road

Type of Service: Residential

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Inspector: Joseph McRandle

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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 eight registered beds which provides care for residents living with a learning disability.

3.0 Service details

Organisation/Registered Provider: Praxis Care Group/Challenge	Registered Manager: Beverley Delap
Responsible Individual(s): Andrew James Mayhew	
Person in charge at the time of inspection: Team Leader	Date manager registered: 18 December 2017
Categories of care: Residential Care (RC) LD - Learning Disability LD (E) – Learning disability – over 65 years	Number of registered places: 8 LD and LD(E) with associated physical disability

4.0 Inspection summary

An unannounced inspection took place on 5 March 2019 from 10.45 to 12.45 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, maintaining signed records of the reconciliations between the items held in the safe place and the records of the items held, policies and procedures reflecting the financial operational areas of the home, members of staff involved in managing residents' finances receiving adult safeguarding training, reconciling residents' monies, signed consent forms in place authorising staff to make transactions against residents' bank accounts, maintaining a list of staff members authorised to make transactions against the bank accounts and updating the inventory of residents' property following admission to the home.

Further evidence of good practice was found in relation to: retaining copies of residents' financial arrangements within their files, providing support for residents to undertake journeys outside of the home, the residents' guide detailing the services included in the weekly fee, up to date written agreements in place, written agreements showing costs of additional services provided to residents, system in place for recording transactions undertaken on behalf of residents and retaining receipts from the transactions.

No areas for improvement were identified during the inspection.

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the team leader, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 10 January 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 10 January 2019. 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.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues (there were no financial issues identified), the returned QIP from the previous finance inspection and the previous finance inspection report.

During the inspection the inspector met with the person in charge.

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 following records were examined during the inspection:

- two residents' finance files
- two residents' individual written agreements
- monies held on behalf of two residents
- records of monies held on behalf of two residents
- a sample of residents' bank statements
- a sample of monies deposited at the home on behalf of one resident
- a sample of residents' items held in the safe place
- a sample of the records of items held in the safe place
- a sample of records of reconciliations between residents monies held and records of monies held
- a sample of records from purchases undertaken on behalf of two residents
- the residents' guide
- financial policies and procedures
- one resident's record of personal property.

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 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 10 January 2019

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.

6.2 Review of areas for improvement from the last finance inspection dated 2 August 2017

Areas for improvement from the last finance inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005.		Validation of compliance
Area for improvement 1 Ref: Regulation 13 (1) (a)	The registered person shall ensure that a record is retained within residents' files of the outcome from discussions with residents'	
Stated: First time	representatives, including representatives from the Health and Social Care Trusts, prior to the withdrawal of significant amounts of	
To be completed by: 03 August 2017	monies for purchases made on behalf of residents.	
	Action taken as confirmed during the inspection: Discussion with the person in charge confirmed that it is now the policy at the home for records to be maintained of the outcome of discussions with residents' family members and representatives from the Health and Social Care Trusts prior to the withdrawal of significant amounts for purchases.	Met
Area for improvement 2 Ref: Regulation 13 (1) (a)	The registered person shall review the reasonableness of the amount reimbursed to the resident, identified during the inspection, for the concert ticket purchased on behalf of	Met
Stated: First time	the staff member accompanying the resident.	

RQIA should be informed of the outcome of To be completed by: 31 August 2017 the review indicating if a further reimbursement had been made. Action taken as confirmed during the inspection: Discussion with the person in charge confirmed that it is now the policy at the home for records to be maintained of discussions with residents' family members and representatives from the Health and Social Care Trusts prior to the withdrawal of significant amounts for purchases. Since the previous finance inspection on 2 August 2017 a further refund was made to the resident. Area for improvement 3 The registered person shall implement a robust system for recording residents' transactions in order to improve the accuracy Ref: Regulation 19 (2) Schedule 4 (9) of recording and to facilitate the audit process. Errors should be crossed out and a new line Stated: Second time used to record the transaction. A reason for the error should be recorded and initialled by To be completed by: the staff member recording the transaction. 31 August 2017 The policy for accurate recording of residents' transactions should be strengthened with staff. Action taken as confirmed during the inspection: A review of six purchases undertaken by members of staff evidenced a significant improvement in the recording process. Good Met practice was observed as the amounts deducted to make the purchases and the remaining monies returned from the purchases were recorded separately. Two signatures were recorded against all of the transactions reviewed. Receipts from the purchases reviewed were retained at the home at the time of the inspection. Discussion with the person in charge confirmed that since the previous finance inspection on 2 August 2017 the policies and procedures for recording transactions had been strengthened with staff. The person in charge also confirmed that all staff members receive training in the management of residents' monies and valuables.

Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
Area for improvement 1 Ref: Standard 20.14 Stated: First time	The registered person shall ensure that the current policy for recording residents' holidays is strengthened with staff in order that residents receive the correct amount of monies remaining from the holidays.	
To be completed by: 31 August 2017	Action taken as confirmed during the inspection: Discussion with the person in charge confirmed that since the previous finance inspection on 2 August 2017 the policies and procedures for recording residents' holidays had been strengthened with staff. Discussion with the person in charge also confirmed that it is now the policy at the home for records to be maintained of the outcome of discussions with residents' family members.	Met
	discussions with residents' family members and representatives from the Health and Social Care Trusts in relation to planned holidays.	
Area for improvement 2 Ref: Standard 20.14 Stated: First time	The registered person shall cease recording the term "loan" within residents' transaction books. A system should be implemented which correctly records the reason for the withdrawal from residents' monies.	
To be completed by: 31 August 2017	Action taken as confirmed during the inspection: Discussion with the person in charge and a review of records confirmed that staff no longer use this term when recording transactions undertaken on behalf of residents.	Met
Carried forward regulati	ons or standards	L
Area for improvement	each resident (or their representative) which detail the current fees and financial arrangements in place in respect to the resident.	
Ref: Regulation 5 (1) (a) (b) Stated: First time	The practice of using correction fluid to update agreements should cease immediately.	
To be completed by: 13 March 2015	Individual resident agreements should comply with requirements under Regulation 5 of the Residential Homes Regulations (Northern Ireland) 2005 and meets Standard 4.2 of the DHSSPS Minimum Standards for residential Homes, which detail the minimum components of the agreement.	

A copy of the signed agreement by the resident or their representative and the registered person must be retained in the resident's records. Where the resident or their representative is unable to, or chooses not to sign the agreement, this must be recorded. Action taken as confirmed during the inspection: A review of two residents' files evidenced that up to date agreements were retained in both files. The agreements showed the current amount of the weekly fee paid on behalf of the two residents and the amount paid by the residents. The details of the residents' financial arrangements were included within their agreements. The use of correction fluid to amend the agreements had ceased since the previous finance inspection on 2 August 2017. The written agreements are discussed further under section 6.7 of this report. The registered person shall ensure that all staff engaged in any tasks Area for improvement involving residents' monies and valuables are appropriately trained. Written evidence should be available to confirm that the relevant staff Ref: Regulation 14 (4) have received the training. Stated: First time Action taken as confirmed during the inspection: Discussion with the person in charge confirmed that all staff members To be completed by: receive training in the management of residents' monies and 13 March 2015 valuables. The person in charge also confirmed that staff members had recently completed on-line training in relation to adult safeguarding. The registered person shall be assured that no resident has suffered Area for improvement any financial loss due to the record keeping found during the 3 inspection. **Ref**: Regulation 14 (4) A reconciliation of residents' records should be undertaken to Stated: First time ascertain if any loss has occurred. Residents must be reimbursed for any deficits found. To be completed by: 13 March 2015 Action taken as confirmed during the inspection: Discussion with staff confirmed that following the inspection on 2 August 2017 residents' monies were reconciled and no residents suffered any financial loss due to the record keeping found during the previous finance inspection.

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and

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 two residents were counted, the amount retained agreed to the balance recorded at the home.

An up to date safe contents book was in place. A review of the book and the safe place evidenced that valuables were held on behalf of residents at the time of the inspection. Valuables held on behalf of two residents were examined, the records agreed to the items held in the safe place. Records showed that in line with good practice, the valuables held were checked on a regular basis. Two signatures were recorded against the records examined.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. A review of the policies and procedures evidenced that they reflected the financial operational areas of the home.

Discussion with the person in charge 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 residents.

Areas of good practice

There were examples of good practice found in relation to: providing a place for residents to deposit items for safekeeping, maintaining signed records of the reconciliations between the items held in the safe place and the records of the items held, policies and procedures reflecting the financial operational areas of the home 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

6.5 Is care effective?

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

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

Discussion with the person in charge and a review of records confirmed that reconciliations (checks) between the monies held on behalf of residents and the records of monies held were

undertaken on a daily basis. In line with good practice two signatures were recorded against the records of the reconciliations.

Discussion with the person in charge confirmed that bank accounts were in place for all residents. A review of a sample of the bank statements confirmed that the bank accounts were in the name of the residents. Discussion with the person in charge also confirmed that authorised members of staff would make withdrawals from the bank accounts on behalf of the residents. A sample of one resident's records showed that an amount was withdrawn from the resident's bank account and the corresponding amount was lodged into the resident's monies held at the home on the same day. In line with good practice two signatures were recorded against all of the records relating to the withdrawal and lodgement of the monies. Bank receipts from the transaction were also available at the time of the inspection and signed by two members of staff.

A review of two residents' files evidenced that consent forms were retained within their files which authorised staff to make transactions against the bank accounts. The forms were signed by the residents' representatives and a representative from the home. In line with good practice a list of the staff members authorised to make transactions against the bank accounts were also maintained at the home.

Discussion with the person in charge confirmed that no comfort fund monies were maintained on behalf of residents.

Discussion with the person in charge confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Discussion also confirmed that the records were updated with items acquired and disposed of after admission for which staff had been made aware of. A review of one resident's records confirmed that their inventory of personal possessions was up to date.

Areas of good practice

There were examples of good practice found in relation to: reconciling residents' monies, signed consent forms in place authorising staff to make transactions against residents' bank accounts, maintaining a list of staff members authorised to make transactions against the bank accounts 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

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.

Good practice was observed as a review of a resident's file showed that a copy of the resident's recorded financial arrangements was retained within their file.

The home did not operate a transport scheme at the time of the inspection. Discussion with the person in charge confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of vehicles provided by the home at no cost to the residents.

Areas of good practice

There were examples of good practice found in relation to retaining copies of residents' financial arrangements within their files and providing support for residents to undertake journeys outside of the home.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 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.

Discussion with staff confirmed that copies of payment remittances from the Health and Social Care Trusts showing the weekly fee for each care managed resident were retained at the home's head office. Discussion with staff also confirmed that records of fees received from residents were also held at head office.

Discussion with the person in charge confirmed that copies of correspondence forwarded to residents' notifying them of the latest increase in fees were retained at head office. Discussion with the person in charge also 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 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 two residents' files evidenced that copies of written agreements were retained within both files. The agreements gave the details of the terms and conditions for staying at the home and the services included within the weekly fee. A list of the services provided to residents at an additional cost was also included within the agreements.

It was noticed that one agreement reviewed was signed by a representative from the home and the resident. Discussion with the person in charge confirmed that the resident lacked the capacity to understand the agreement they had signed. Following a discussion, the person in charge agreed to share a copy of the agreement with the resident's representative at the Health and Social Care Trust and to retain a record within the resident's file showing the date the agreement was forwarded to the Trust.

A review of records and discussion with staff confirmed that a book was maintained for each resident. The books were used to record the details of transactions undertaken on behalf of

residents, including the purchase of items and payments for additional services e.g. hairdressing. The books were also used to record monies deposited at the home on behalf of residents.

A review of records from six purchases undertaken by members of staff on behalf of two residents showed that the details and the amount of the purchases were recorded. Good practice was observed as the amounts deducted to make the purchases and the remaining monies returned from the purchases were recorded separately. Two signatures were recorded against all of the transactions reviewed. Receipts from the purchases reviewed were retained at the home at the time of the inspection.

Good practice was also observed as a petty cash voucher was attached to each receipt from the purchases undertaken on behalf of residents. The voucher gave details of the amount withdrawn to make the purchase, the amount of the purchase and the remaining amount from the purchase returned by the member of staff. The voucher also gave details of the staff member receiving the monies to make the purchase. The corresponding petty cash number was recorded against the entries in the residents' transaction books.

Two records of monies deposited at the home on behalf of a resident were reviewed. The amounts deposited were recorded in the resident's transaction book. In line with good practice receipts were issued to the person depositing the monies.

Areas of good practice

There were examples of good practice found in relation to: the residents' guide detailing the services included in the weekly fee, up to date written agreements in place, written agreements showing costs of additional services provided to residents, system in place for recording transactions undertaken on behalf of residents, retaining receipts from transactions.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.





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