

# Unannounced Finance Inspection Report 07 December 2017



## River House

**Type of Service: Residential Care**

**Address: 114 Milltown Road, Belfast, Antrim, BT8 7XP**

**Tel No: 02890 648314**

**Inspector: Joseph McRandle**

[www.rgia.org.uk](http://www.rgia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home with 8 beds that provides care and support for four adults with a learning disability.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Parkcare Homes No2 Ltd  <b>Responsible Individual(s):</b> Nicola Cooper	<b>Registered Manager:</b> Mark Beattie
<b>Person in charge at the time of inspection:</b> Mark Beattie	<b>Date manager registered:</b> 5 July 2017
<b>Categories of care:</b>  Residential Care (RC) LD - Learning Disability LD (E) – Learning disability – over 65 years	<b>Number of registered places:</b> 8

### 4.0 Inspection summary

An unannounced inspection took place on 7 December 2017 from 10.30 to 14.30 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, reconciling monies held on behalf of residents for one of the safe places, updating inventory of residents' property following admission to the home, retaining copies of residents' financial arrangements within their files, providing support for residents to undertake journeys outside of the home and the residents' guide detailing the services included in the weekly fee.

Areas requiring improvement were identified in relation to: strengthening the financial policies and procedures with staff, providing refresher training to staff in relation to the handling of residents' monies, recording of the reconciliations between the monies held on behalf of residents and the records of monies held for one of the safe places, ensuring that residents' agreements are updated to show the current fee paid on behalf of residents, ensure copies of signed agreements are held within residents' files, issuing statements of income and expenditure to residents, revise written agreements to remove provision for late payment of fees for residents for whom the fees are paid by the health and social care trusts, the retention of receipts from purchases made on behalf of residents, develop and implement a revised system for recording transactions on behalf of residents, undertake an investigation in order to ascertain the total amount of residents' monies for which no valid receipts are available and for copies of the registered provider regulation 29 reports to be forwarded to RQIA until further notice. 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
<b>Total number of areas for improvement</b>	6	5

Details of the Quality Improvement Plan (QIP) were discussed with Mark Beattie, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the findings of this inspection.

As a result of the inspection RQIA were concerned that the quality of the service within River House was below the standard expected with regard to the recording of transactions undertaken on behalf of residents and the controls in place for the monies held in one of the safe places. Due to the standard of recording RQIA could not be assured that the monies withdrawn were used to purchase items on behalf of residents. The findings from the inspection were reported to senior management in RQIA, following which a decision was made to hold a serious concerns meeting. A meeting is scheduled with representatives from River House for Wednesday 10 January 2018. During the meeting RQIA will seek assurances as to how the concerns will be addressed.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

#### 4.2 Action/enforcement taken following the most recent care inspection dated 11 October 2017.

Other than those actions detailed in the QIP, no further actions were required to be taken following the most recent inspection on 11 October 2017.

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: recent written and verbal communication received since previous care inspection, notifiable events submitted in relation to finance issues, there were no financial issues identified. The inspector from the previous inspection was contacted who confirmed that there were no issues to follow up.

During the inspection the inspector met with the registered manager and the home's administration officer.

The following records were examined during the inspection:

- two residents' finance files
- two residents' written agreements
- cash held on behalf of residents
- a sample of records of safe contents
- Transaction books belonging to two residents
- A sample of records of reconciliations between residents monies and records of monies held
- A sample of records of monies deposited on behalf of one resident
- the residents' guide
- Policy for service users funds
- one resident's records of personal property

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 11 October 2017

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

### 6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

## 6.3 Inspection findings

### 6.4 Is care safe?

**Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.**

Two safe places were 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 and the members of staff with access for one of the safe places. Monies held on behalf of residents were counted, the amount retained agreed to the balance recorded at the home. Discussion with staff confirmed that an additional safe place was used to facilitate members of staff undertaking purchases on behalf of residents. Discussion with staff also confirmed that transaction books were retained for each resident. The books were used to record the monies lodged into the additional safe place and to record the details of any transactions undertaken on behalf of residents by members of staff.

Policies and procedures for the management and control of residents’ finances were in place at the time of the inspection. Good practice was observed as the procedure for recording transactions undertaken on behalf of residents was attached to the residents’ transaction books. Concerns were raised during the inspection as a review of the transaction books showed that members of staff involved in making the transactions were not adhering to the procedure attached to the books. An area for improvement has been listed within the QIP of this report for the financial policy and procedure in place at the home for the recording of transactions undertaken on behalf of residents to be strengthened with staff.

The recording of transactions undertaken on behalf of residents is discussed further under section 6.7 of this report.

Discussion with the registered manager confirmed that members of staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults. Due to the concerns identified during the inspection in relation to staff not adhering to the home’s financial policies and procedures, an area for improvement has been listed within the QIP of this report for members of staff to receive refresher training in relation to the management of residents’ finances.

No valuables were held on behalf of residents at the time of the inspection. Discussion with staff confirmed that there were no finance related restrictive practices in place.

**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**

Two areas for improvement were identified during the inspection. These related to: strengthening the financial policies and procedures with staff and providing refresher training to staff in relation to the management of residents’ monies and the controls surrounding residents’ monies.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	2	0

**6.5 Is care effective?**

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

Discussion with the registered 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 staff 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 staff and review of records confirmed that reconciliations between the monies held on behalf of residents in one of the safe places and the records of monies held were undertaken on a regular basis. A procedure was attached to the books used to record transactions undertaken by members of staff. The procedure instructed staff to reconcile residents' monies held in the additional safe place twice a day and record the findings at the back of each transaction book.

A review of the transaction books showed that the last recorded reconciliation was 08 August 2017. Further examination of the records showed that members of staff had recorded throughout the books that they had checked the monies held after 08 August 2017. It was noticed however that the amounts held at the time of being checked were not recorded. An area for improvement has been listed within the QIP of this report for the reconciliations of all monies held on behalf of residents to be undertaken as in line with the home's policies and procedures. The reconciliations should be accurately recorded and the records should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.

Discussion with staff confirmed that no bank accounts were managed on behalf of any resident. Discussion with staff also confirmed that no comfort fund was maintained on behalf of residents.

Discussion with the registered manager confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Review of records for one resident showed 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 reconciling monies held on behalf of residents for one of the safe places and updating the inventory of residents' property following admission to the home.

### Areas for improvement

One area for improvement was identified during the inspection. This was in relation to the recording of the reconciliations between monies held and the records of monies held on behalf of residents for one of the safe places.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	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 two residents' files showed that copies of the residents' recorded financial arrangements were retained within their files.

The home did not provide a transport scheme at the time of the inspection. Discussion with the registered manager confirmed that alternative arrangements were in place to support residents wishing to undertake journeys; this included the use of taxis which were paid for by the residents or their representatives.

## 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
<b>Total number of areas for improvement</b>	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 the registered manager confirmed that copies of payment remittances from the Health and Social Care Trusts showing the weekly fee for each care managed resident were not retained at the home. The registered manager stated that details of the amounts paid by, or on behalf of, residents were retained at the home's head office. Discussion with staff 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 signed written agreements were retained within both files. The two agreements reviewed were not in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards (2011) as they did not show the current weekly fee paid by, or on behalf of, residents. One agreement did not show the name of the resident the agreement belonged to. This was identified as an area for improvement.

Discussion with staff confirmed that revised agreements between the residents and Priory Adult Care had recently been issued to residents or their representatives. Review of records also confirmed that only a small number of agreements had been signed and returned by the residents' representatives. During the discussion the registered manager agreed to follow up on the outstanding agreements. This was identified as an area for improvement.

A review of the revised agreement showed that a provision was included which stated that "Each service user for whom funds are held or their financial representative must be provided with a statement on request or at least once a month detailing all income, expenditure and the balance held". Discussion with staff and review of records confirmed that no statements have been provided to residents or their representatives. This was identified as an area for improvement.

The resident's agreement also included a provision which allowed the registered provider to apply an interest charge to care managed residents for late payment of their fees. Discussion with the registered manager confirmed that no residents were previously charged for late



payments. It was highlighted during the inspection that these residents could not be responsible for the late payment of fees as the agreements were between the residents and the registered provider. An area for improvement has been listed for the provision to be removed from care managed residents for whom the fees are paid by the health and social care trusts.

A review of records showed amounts of monies recorded against a number of residents under the heading "unpresented credits and debits". Discussion with staff confirmed that the amounts represented residents' monies that had been signed out by members of staff to make purchases for which no receipts were returned from the purchases. Staff also confirmed that receipts were not always returned when requested. On examining one record, no details were available of the amount spent on behalf of a resident. Discussion with staff confirmed that the monies were used to pay for three catering classes on behalf of the resident. A receipt was printed by staff on the day of the inspection. This practice was not in line with the home's policies and procedures. This was identified as an area for improvement.

A review was undertaken of the books used to record the transactions undertaken on behalf of residents. Discussion with the administration officer confirmed that members of staff signed out residents' monies from one of the safe places to be lodged into the additional safe place to facilitate purchases undertaken on behalf of residents.

One record showed monies were signed out by a member of staff on 10 November 2017 to be lodged in the additional safe place. There was no corresponding entry in the resident's transaction book confirming that the amount was lodged into the safe place. There were also no details recorded to show if the monies were withdrawn and used to make a purchase. Discussion with staff could not confirm if the monies were spent or if any monies were returned to the safe place. A request was made during the inspection for the registered manager to contact the member of staff who had received the monies in order to confirm if the monies were spent. Concerns were raised as the member of staff could not be identified.

A review of a transaction book for another resident showed that monies were withdrawn by a member of staff to make a number of purchases. Receipts were available from some of the purchases, there was no recorded explanation for the variance to show if the remaining monies from the purchases were spent or returned to the safe place. One other record showed that the time the money was lodged into the safe place was recorded instead of the amount being lodged. It was noticed that transactions were not recorded in chronological order i.e. transactions were recorded on different pages in the transaction books which were not in date order. A number of the entries only had one signature recorded against them. An area for improvement has been listed within the QIP of this report for the registered person to develop and implement a revised system for recording transactions on behalf of residents. The revised system should facilitate the recording of the full details of the transaction, accommodate accurate recording and show the member of staff receiving and returning residents' monies.

It was highlighted to the registered manager that due to the standard of recording, assurances could not be made that monies withdrawn by members of staff were used to purchase items on behalf of residents. An area for improvement is listed within the QIP of this report for the registered person to undertake an internal investigation in order to ascertain the total amount of residents' monies for which no valid receipts are available from the transactions undertaken by members of staff. Residents should be reimbursed any monies withdrawn that cannot be accounted for. The investigation should be from when the home initially opened.

An area for improvement has been listed within the QIP of this report for copies of the registered provider regulation 29 reports to be forwarded to RQIA until further notice. The reports should include a review of the working practices and controls surrounding residents' finances.

The concerns raised during the inspection were subsequently referred to the Adult Safeguarding Team at the Belfast Health and Social Care Trust.

### 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.

### Areas for improvement

Eight areas for improvement were identified during the inspection. These related to: ensuring that residents' agreements are updated to show the current fee paid on behalf of residents, ensure copies of signed agreements are held within residents' files, issuing statements of income and expenditure to residents, revise written agreements to remove provision for late payment of fees for residents for whom the fees are paid by the health and social care trusts, the retention of receipts from purchases made on behalf of residents, develop and implement a revised system for recording transactions on behalf of residents, undertake an investigation in order to ascertain the total amount of residents' monies for which no valid receipts from purchases are available and for copies of the registered provider regulation 29 reports to be forwarded to RQIA until further notice.

	Regulations	Standards
<b>Total number of areas for improvement</b>	3	5

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mark Beattie, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

## 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 and DHSSPS Residential Care Homes Minimum Standards, August 2011.

## **7.2 Actions to be taken by the service**

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

## Quality Improvement Plan

### Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 December 2017</p>	<p>The registered person shall ensure that the financial policy and procedure for the recording of transactions undertaken on behalf of residents is strengthened with staff.</p> <p>Ref: 6.4</p> <p><b>Response by registered person detailing the actions taken:</b> On 08/12/17 the registered manager and admin convened an emergency meeting which was attended by the Deputy Manager and all Senior Support Workers (SSW). This meeting comprised feedback from RQIA Finance inspection, the importance of safeguarding residents' monies and refresher training on the financial policy and procedures as follows:</p> <ol style="list-style-type: none"> <li>1. Weekly Allowance for each resident is provided by the Admin</li> <li>2. This is signed out of the Admin office by the Admin, and signed by the Senior in Charge when being placed in the safe in the Seniors Office, as it has always been done in the past. However, in line with the new procedure, it must also be noted in each individuals notebook, and signed by the Senior , Admin and countersigned by the registered manager.</li> <li>3. Only the Senior in charge should have access to the safe in the office and anyone requiring money for a resident must request it from the Senior in Charge.</li> <li>4. As per regulations, EVERY TIME money is taken from the safe, it MUST be recorded in the book, as 'Money Out', and a balance of what remains in the residents envelope recorded. A reason for the expenditure must be noted and this needs to be signed by the Senior and the person taking the money.</li> <li>5. When the resident returns to River House, the change and receipts need to be immediately returned to the office - the amount of change returned needs to be added to the notebook, as 'Money In', and the new balance of cash held recorded and signed by the Senior and the member of staff. Receipts are to be placed in the envelope as normal. If no receipt was available, one must be written at the time, and signed by 2 staff- the Senior in Charge and the member of staff that accompanied the resident.</li> <li>6. The money will be reconciled on a weekly basis, as has always been the case.</li> <li>7. All notebooks have been re-ruled to reflect this system and SSW's are to complete sequential records from today onwards.</li> <li>8. The notebooks will be sampled daily and signed off by the registered manager to ensure that this procedure is adhered to.</li> </ol> <p>The registered manager has carried out follow up training individually with all SSW's to ensure understanding and to re-emphasise the importance of this procedure.</p>
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<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018</p>	<p>The registered person shall ensure that members of staff receive refresher training in relation to the safeguarding of residents' monies.</p> <p>Ref: 6.4</p> <p><b>Response by registered person detailing the actions taken:</b></p> <p>On 08/12/17 the registered manager and admin convened an emergency meeting which was attended by the Deputy Manager and all Senior Support Workers (SSW). This meeting comprised feedback from RQIA Finance inspection, the importance of safeguarding residents' monies and refresher training on the financial policy and procedures as follows:</p> <ol style="list-style-type: none"> <li>1. Weekly Allowance for each resident is provided by the Admin</li> <li>2. This is signed out of the Admin office by the Admin, and signed by the Senior in Charge when being placed in the safe in the Seniors Office, as it has always been done in the past. However, in line with the new procedure, it must also be noted in each individuals notebook, and signed by the Senior , Admin and countersigned by the registered manager.</li> <li>3. Only the Senior in charge should have access to the safe in the office and anyone requiring money for a resident must request it from the Senior in Charge.</li> <li>4. As per regulations, EVERY TIME money is taken from the safe, it MUST be recorded in the book, as 'Money Out', and a balance of what remains in the residents envelope recorded. A reason for the expenditure must be noted and this needs to be signed by the Senior and the person taking the money.</li> <li>5. When the resident returns to River House, the change and receipts need to be immediately returned to the office - the amount of change returned needs to be added to the notebook, as 'Money In', and the new balance of cash held recorded and signed by the Senior and the member of staff. Receipts are to be placed in the envelope as normal. If no receipt was available, one must be written at the time, and signed by 2 staff- the Senior in Charge and the member of staff that accompanied the resident.</li> <li>6. The money will be reconciled on a weekly basis, as has always been the case.</li> <li>7. All notebooks have been re-ruled to reflect this system and SSW's are to complete sequential records from today onwards.</li> <li>8. The notebooks will be sampled daily and signed off by the registered manager to ensure that this procedure is adhered to.</li> </ol> <p>The registered manager has carried out follow up training individually with all SSW's to ensure understanding and to re-emphasise the importance of this procedure.</p>
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<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 12 (b)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 15 January 2018</p>	<p>The registered person shall develop and implement a system for regular reconciliations between the monies held in the additional safe place and the records of the monies held on behalf of residents. The system should facilitate accurate and up to date recording. The records should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Ref: 6.5</p>
	<p><b>Response by registered person detailing the actions taken:</b></p> <p>On 08/12/17 the registered manager and admin convened an emergency meeting which was attended by the Deputy Manager and all Senior Support Workers (SSW). This meeting comprised feedback from RQIA Finance inspection, the importance of safeguarding residents' monies and refresher training on the financial policy and procedures as follows:</p> <ol style="list-style-type: none"> <li>1. Weekly Allowance for each resident is provided by the Admin</li> <li>2. This is signed out of the Admin office by the Admin, and signed by the Senior in Charge when being placed in the safe in the Seniors Office, as it has always been done in the past. However, in line with the new procedure, it must also be noted in each individuals notebook, and signed by the Senior , Admin and countersigned by the registered manager.</li> <li>3. Only the Senior in charge should have access to the safe in the office and anyone requiring money for a resident must request it from the Senior in Charge.</li> <li>4. As per regulations, EVERY TIME money is taken from the safe, it MUST be recorded in the book, as 'Money Out', and a balance of what remains in the residents envelope recorded. A reason for the expenditure must be noted and this needs to be signed by the Senior and the person taking the money.</li> <li>5. When the resident returns to River House, the change and receipts need to be immediately returned to the office - the amount of change returned needs to be added to the notebook, as 'Money In', and the new balance of cash held recorded and signed by the Senior and the member of staff. Receipts are to be placed in the envelope as normal. If no receipt was available, one must be written at the time, and signed by 2 staff- the Senior in Charge and the member of staff that accompanied the resident.</li> <li>6. The money will be reconciled on a weekly basis, as has always been the case.</li> <li>7. All notebooks have been re-ruled to reflect this system and SSW's are to complete sequential records from today onwards.</li> <li>8. The notebooks will be sampled daily and signed off by the registered manager to ensure that this procedure is adhered to.</li> </ol> <p>The registered manager has carried out follow up training individually with all SSW's to ensure understanding and to re-emphasise the importance of this procedure.</p>

<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 12 (b)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 15 January 2018</p>	<p>The registered person shall develop and implement a revised system for recording transactions on behalf of residents. The revised system should facilitate the recording of the full details of the transaction; the amounts of monies returned from the purchases and identify the member of staff receiving and returning residents' monies. At least two signatures must be recorded against the transactions at all times.</p> <p>Ref: 6.7</p>
	<p><b>Response by registered person detailing the actions taken:</b></p> <p>On 08/12/17 the registered manager and admin convened an emergency meeting which was attended by the Deputy Manager and all Senior Support Workers (SSW). This meeting comprised feedback from RQIA Finance inspection, the importance of safeguarding residents' monies and refresher training on the financial policy and procedures as follows:</p> <ol style="list-style-type: none"> <li>1. Weekly Allowance for each resident is provided by the Admin</li> <li>2. This is signed out of the Admin office by the Admin, and signed by the Senior in Charge when being placed in the safe in the Seniors Office, as it has always been done in the past. However, in line with the new procedure, it must also be noted in each individuals notebook, and signed by the Senior , Admin and countersigned by the registered manager.</li> <li>3. Only the Senior in charge should have access to the safe in the office and anyone requiring money for a resident must request it from the Senior in Charge.</li> <li>4. As per regulations, EVERY TIME money is taken from the safe, it MUST be recorded in the book, as 'Money Out', and a balance of what remains in the residents envelope recorded. A reason for the expenditure must be noted and this needs to be signed by the Senior and the person taking the money.</li> <li>5. When the resident returns to River House, the change and receipts need to be immediately returned to the office - the amount of change returned needs to be added to the notebook, as 'Money In', and the new balance of cash held recorded and signed by the Senior and the member of staff. Receipts are to be placed in the envelope as normal. If no receipt was available, one must be written at the time, and signed by 2 staff - the Senior in Charge and the member of staff that accompanied the resident.</li> <li>6. The money will be reconciled on a weekly basis, as has always been the case.</li> <li>7. All notebooks have been re-ruled to reflect this system and SSW's are to complete sequential records from today onwards.</li> <li>8. The notebooks will be sampled daily and signed off by the registered manager to ensure that this procedure is adhered to.</li> </ol> <p>The registered manager has carried out follow up training individually with all SSW's to ensure understanding and to re-emphasise the importance of this procedure.</p>

<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018</p>	<p>The registered person shall ensure that an investigation is undertaken in order to ascertain the total amount of residents' monies for which no valid receipts are available from the transactions undertaken by members of staff. Residents should be reimbursed any monies withdrawn that cannot be accounted for. The investigation should be from when the home initially opened.</p> <p>Ref: 6.7</p>
<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Regulation 29 (5) (a)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018 until further notice</p>	<p><b>Response by registered person detailing the actions taken:</b> This investigation has been completed by the Administrator on site, and evidence of same is available when the RQIA Finance Inspector returns for a follow up visit. During this investigation, there were a number of missing receipts identified, and Priory are now making arrangements to have these amounts reimbursed to the clients. An additional review and checks have been made by a member of staff from the Priory Central Team to ensure that processes are robust and are being followed.</p> <p>The registered person shall provide RQIA with copies of the registered provider regulation 29 reports until further notice; these should include a review of the working practices and controls surrounding residents' finances.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> The regulation 29 report for January 2018 has been forwarded to RQIA. The registered person will ensure these are forwarded monthly until further notice.</p>
<p><b>Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011</b></p>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 4.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018</p>	<p>The registered person shall update the residents' written agreements in order to be in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards, August 2011.</p> <p>The agreements should show the current amount paid by the Health and Social Care Trust and the current contribution paid by residents. The agreements should also identify the resident for which it belongs to.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> There are copies of the 'Named Resident Agreement' which were issued in April 2017, placed in each resident file, and to date, only one family have returned a signed agreement. These are issued at the beginning of each financial year. When they are sent out in April 2018, an accompanying letter will be included to state that where a signed copy of the agreement is not returned, we will take that as acceptance of the terms contained within the agreement.</p>



<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 4.4</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018</p>	<p>The registered person shall ensure that copies of signed agreements are retained within all residents' files. Where the resident or their representative is unable to sign or chooses not to sign, this is recorded.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> There are copies of the 'Named Resident Agreement' which were issued in April 2017, placed in each resident file, and to date, only one family have returned a signed agreement. These are issued at the beginning of each financial year. When they are sent out in April 2018, an accompanying letter will be included to state that where a signed copy of the agreement is not returned, we will take that as acceptance of the terms contained within the agreement.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 4.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018 and thereafter</p>	<p>The registered person shall ensure that residents or their representatives are provided with a statement on request or at least once a month detailing all income, expenditure and the balance held as in line with the provision included within the resident's agreement.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> From January 2018, all families will receive statements monthly, or on request, detailing income, expenditure and balance held.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 4.8</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 31 January 2018</p>	<p>The registered person shall review the residents' agreements in order for the removal of the provision to apply an interest charge for the late payment of fees for which the fees are paid by the health and social care trusts.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> This is currently being actioned in conjunction with our Contracts Team.</p>

<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Standard 15.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by</b> 08 December 2017</p>	<p>The registered person shall ensure that receipts are returned by members of staff at all times (where possible) following purchases of items made on behalf of residents. Where a receipt is not available, the record must be annotated to reflect this.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b> On 08/12/17 the registered manager and admin convened an emergency meeting which was attended by the Deputy Manager and all Senior Support Workers (SSW). This meeting comprised feedback from RQIA Finance inspection, the importance of safeguarding residents' monies and refresher training on the financial policy and procedures as follows:</p> <ol style="list-style-type: none"> <li>1. Weekly Allowance for each resident is provided by the Admin</li> <li>2. This is signed out of the Admin office by the Admin, and signed by the Senior in Charge when being placed in the safe in the Seniors Office, as it has always been done in the past. However, in line with the new procedure, it must also be noted in each individuals notebook, and signed by the Senior , Admin and countersigned by the registered manager.</li> <li>3. Only the Senior in charge should have access to the safe in the office and anyone requiring money for a resident must request it from the Senior in Charge.</li> <li>4. As per regulations, EVERY TIME money is taken from the safe, it MUST be recorded in the book, as 'Money Out', and a balance of what remains in the residents envelope recorded. A reason for the expenditure must be noted and this needs to be signed by the Senior and the person taking the money.</li> <li>5. When the resident returns to River House, the change and receipts need to be immediately returned to the office - the amount of change returned needs to be added to the notebook, as 'Money In', and the new balance of cash held recorded and signed by the Senior and the member of staff. Receipts are to be placed in the envelope as normal. If no receipt was available, one must be written at the time, and signed by 2 staff- the Senior in Charge and the member of staff that accompanied the resident.</li> <li>6. The money will be reconciled on a weekly basis, as has always been the case.</li> <li>7. All notebooks have been re-ruled to reflect this system and SSW's are to complete sequential records from today onwards.</li> <li>8. The notebooks will be sampled daily and signed off by the registered manager to ensure that this procedure is adhered to.</li> </ol> <p>The registered manager has carried out follow up training individually with all SSW's to ensure understanding and to re-emphasise the importance of this procedure.</p>
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*\*Please ensure this document is completed in full and returned via Web Portal\**



The **Regulation** and  
**Quality Improvement**  
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

**Tel** 028 9051 7500

**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)

**Web** [www.rqia.org.uk](http://www.rqia.org.uk)

 [@RQIANews](https://twitter.com/RQIANews)