

# Announced Finance Inspection Report 20 April 2017



## Mainstay DRP, Rathdree Supported Housing Service

Type of Service: Domiciliary Care Agency

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced inspection of Mainstay DRP, Rathdree Supported Housing Service took place on 20 April 2017 from 10.00 to 16.30 hours.

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

### Is care safe?

Arrangements were in place to ensure that service users' monies were physically safeguarded; the finance and estates manager had also received safeguarding service users' finance training. However, a number of concerns arose in relation to the agency's arrangements to ensure service users' monies were appropriately safeguarded and two areas for improvement were identified. These related to ensuring that the practice of staff consuming food and drinks part-paid for by service users ceases and ensuring that a full review of the charges to service users from April 2016 is carried out and restitution made to service users where it is determined amounts have been inappropriately charged. The registered person must also engage with the HSC trust(s) to ensure that there is appropriate engagement with service users and their representatives regarding any future charges to be made to service users.

### Is care effective?

The agency had mechanisms in place to record income and expenditure on behalf of service users; however, three areas for improvement were identified during the inspection. These related to ensuring that income and expenditure records and associated documents are completed in a manner which is consistent with the agency's policies and procedures and ensuring that the transport policy is reviewed and updated to include detailed information on charges to service users.

### Is care compassionate?

Discussion with staff identified that they supported individual service users with managing their monies, and they described the principles relating to how specific support tasks should be reflective of the wishes, capabilities and needs of individual service users. However, one area for improvement was identified during the inspection. This related to the registered person ensuring that the views of service users are considered when policies, procedures and practices are being reviewed.

### Is the service well led?

Weaknesses in governance and oversight arrangements were identified during the inspection. It was noted that documents (including individual written agreements) which should be in place in line with the agency's policies in procedures were not available on a sample of service user files or were out of date. A review of the service user's guide, dated 29 October 2015, (now updated), contained a statement which created a direct link between a service user's tenancy arrangements and the payment of shared costs within their own home. In addition, a review of a sample of service users' files also failed to evidence any relevant discussion and agreement to individual financial arrangements. One area for improvement was identified during the inspection.

This related to ensuring that each service user is provided with an up to date, written individual agreement. Any changes to a service user's written agreement should be agreed in writing by the service user or their representative.

This inspection was underpinned by The Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the (DHSSPS) Domiciliary Care Agencies Minimum Standards, updated August 2011.

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	2	5

Details of the Quality Improvement Plan (QIP) within this report were discussed with Christine McLean, registered manager, and Helen Owen, registered person, 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 this inspection, RQIA were concerned regarding the agency's arrangements in place to ensure service users' monies were appropriately safeguarded. The main areas of concern related to:

- staff on duty consuming food and drinks part-paid for by service users; the introduction of charges shared equally between service users for pest control, maintenance and cleaning as part of a cost rationalisation process by the agency; inconsistency and contradictions in the methods used and explanations provided by staff in relation to shared costs and failings to ensure that appropriate and transparent financial support documentation (as per the agency's policies and procedures) were on file for all service users;
- a statement within the service user's guide which purported to make a link between sharing household costs and the security of a service user's tenancy;
- the absence of written individual service user agreements for all service users and amendments to service user agreements lacking evidence that the changes had been agreed with individual service users or their representatives and
- the absence of evidence to identify that service users had been consulted with or had agreed to the introduction of additional charges from 1 April 2016, or other changes to financial arrangements in place to support them to manage their money.

As a result of the concerns identified during the inspection, RQIA referred the matter to the South Eastern Health and Social Care Trust (SEHSCT).

In accordance with RQIA's Enforcement Policy and Procedures, a serious concerns meeting was held with the registered person at RQIA offices on 2 May 2017. The agency's corporate services manager also attended this meeting. During the serious concerns meeting the registered persons were informed of the referral of these matters to the Trust.

At the meeting, the registered person provided RQIA with a written action plan and accompanying documents outlining what actions they had taken to date and will take in future to address RQIA's concerns. Specifically, the registered person advised that the agency had

engaged an independent financial consultant to review charges to service users which were introduced in April 2016 onwards and that restitution would be made to service users, where appropriate. The registered person also provided a commitment that they would work alongside the HSC trust(s) to ensure that there was appropriate engagement with service users and their representatives regarding any future charges to be made to service users.

A copy of the updated service users' guide was provided and when examined, was found to be satisfactory. The registered person provided assurances that the updated service user guide would be shared and discussed with service users. The registered person also provided assurances that each service user would be provided with an updated individual service user agreement, which having engaged with the HSC trust(s), each service user and their representative, would appropriately reflect individual financial arrangements for each service user.

The registered person provided RQIA with assurances that there would be appropriate, meaningful engagement with service users and their representatives in respect to the review and implementation of new policies, procedures and practices. RQIA was also advised of the registered person's plans to engage an independent advocate to support service users in this process.

Representatives were advised that RQIA will continue to monitor the quality of service provided in the agency and will carry out an inspection to assess full compliance with the regulations.

## 1.2 Actions/enforcement taken following the most recent finance inspection

The agency had not previously received an RQIA finance inspection.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Mainstay DRP/Helen Owen	<b>Registered manager:</b> Christine McLean
<b>Person in charge of the agency at the time of inspection:</b> Christine McLean	<b>Date manager registered:</b> 15 January 2009

### 3.0 Methods/processes

An unannounced care inspection of the agency was carried out on 29 March 2017. During the inspection, concerns were identified by the inspector in relation to financial and charging arrangements for services.

Following the care inspection, RQIA considered information received from a number of sources relating to concerns about the management of service users' finances. In light of the inspection findings and information received subsequently, a finance inspection was scheduled.

The registered manager was notified of the inspection, late afternoon on 19<sup>th</sup> April 2017.

On the day of the inspection, the inspectors met with the registered manager, the finance and estates manager and two support workers.

The following records were examined during the inspection:

- Rathdree Supported Housing Project Service User's Guide, dated 29 October 2015
- Written Policies and Procedures including those in respect of:
  - "Supported Living Safeguarding Service users' Monies Policies and Procedures" dated January 2017
  - "Policy in relation to staff meals" dated January 2017
  - "Transport policy" dated January 2017
  - "Procedure for Residents going on holiday" dated March 2011
- A sample of service users' files
- A sample of "Statement of Account" documents for service users covering the period from 1 April 2016 to 31 December 2016
- A sample of service users' "cashflow" sheets detailing individual income and expenditure
- The communal "housekeeping" cashflow sheet for April 2017
- The staff duty rota for the period 27/03/17 to 26/04/17

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 29 March 2017

The most recent inspection of the agency was an unannounced care inspection. A draft report of the inspection findings was issued to the registered manager on 26 April 2017 and the QIP from this inspection will be validated by the care inspector at the next care inspection.

### 4.2 Review of requirements and recommendations from the last finance inspection

As noted above, the agency had not previously received an RQIA finance inspection.

### 4.3 Is care safe?

Discussion with the registered manager established that there were no current suspected, alleged or actual incidents of financial abuse, and she confirmed that the agency had a safe place in to enable cash or valuables belonging to service users to be deposited for safekeeping.

The registered manager also reported that there were no finance-related restrictive practices in place for any service user. However, during the inspection a number of service user agreements were reviewed; two service users' agreements detailed that a maximum of £50 could be held within each service user's personal cash tin and a maximum of £25 could be spent on any one item; these amounts had not been reviewed in several years. This matter was discussed with the registered person in the serious concerns meeting on 2 May 2017 and she acknowledged that this was a restrictive practice and was inappropriate.

Discussion with the registered manager established that staff on duty in service users' homes consumed food and drinks part-paid for by service users. She explained that the agency contributed the same amount of money per week into the "housekeeping" money as each service user. The registered manager confirmed that this contribution was to cover the cost of staff consuming breakfast, lunch, dinner and beverages during the day; these arrangements were also outlined in the written "Policy in relation to staff meals" dated January 2017. She confirmed that none of the service users had a formal needs assessment which required staff to eat with them or eat the same meal as service users.

It was highlighted that there was a risk to service users in continuing with the current arrangement, as there was no distinction between what the agency had purchased and what belonged to service users. The importance of protecting service users' choices and preferences while shopping for groceries and other items was also emphasised. The registered manager undertook to cease the operation of this practice from the date of the inspection.

A requirement was made to ensure that the practice of staff consuming food and drinks part-paid for by service users must cease from the date of the inspection.

During the serious concerns meeting held on 2 May 2017, the registered person confirmed that the practice had ceased; she also provided RQIA with a copy of the agency's updated "Policy in

relation to staff meals” dated April 2017. The updated policy stated that “Staff food is purchased, stored and prepared separately to the service users’ food. Petty cash should be used to purchase food consumed by staff. Service users do not provide any food that is consumed by staff.” The registered person provided an assurance to RQIA that the updated policy would be implemented by staff during the week ending Friday 5 May 2017.

Discussion with staff and a review of a sample of service users’ files identified that the agency had introduced a number of additional charges to service users for costs previously met by the agency. These charges were introduced from April 2016 and included the cost of: pest control; maintenance to service users’ homes; cleaning service users’ homes and hand hygiene products for staff use including alcohol gel and disposable hand towels.

Discussion with the finance and estates manager identified inconsistencies and contradictions in the description of the methods used to divide the cost of services shared between service users. It was noted that costs for maintenance had been divided equally between all service users irrespective of personal usage of the services.

Discussion with the finance and estates manager towards the beginning of the inspection identified that shared costs were reviewed on a quarterly basis with either a balancing charge due from individual service users or a refund due back for the period in question. (There is further discussion regarding the basis of the charges in section 4.4 of this report).

However, towards the end of the inspection, the finance and estates manager reported that this process took place on an annual basis and that charges had not yet been made to service users. Clear, consistent descriptions of what had been charged to service users and on what basis was notably absent on the day.

During the serious concerns meeting on 2 May 2017, the registered person acknowledged that there had been failings in the implementation of the introduction of additional charges to service users. Evidence was provided to RQIA which identified that the agency had engaged with service users or their representatives in advance of the implementation (this is further discussed in section 4.5 of this report). However, she accepted that the agency had failed to ensure that at service level, the correct procedures had been followed to ensure an effective, transparent implementation of the charges to service users with accurate charges based on their individual usage of the services attracting an additional charge.

At the serious concerns meeting, the registered person provided RQIA with a written action plan and accompanying documents outlining what actions had been taken to date and will be taken in future to address RQIA’s concerns relating to the introduction and implementation of the above charges. The registered person advised that they had engaged an independent financial consultant to review the charges to service users which were introduced in April 2016 onwards and provided an assurance that restitution would be made to service users, where appropriate.

The registered person also noted that they would work alongside the HSC trust(s) to ensure that there was appropriate engagement with service users and their representatives regarding any future charges to be made to service users.

A requirement was made to ensure that a full review of the charges to service users from April 2016 is carried out. The registered person must ensure that restitution is made to service users where it is determined that amounts have been inappropriately charged.

The registered person must engage with the HSC trust(s) to ensure that there is appropriate engagement with service users and their representatives regarding any future charges to be made to service users.

Following the inspection, confirmation was received from the registered person that the finance and estates manager had received safeguarding service users' finance training.

### Areas for improvement

Two areas for improvement were identified during the inspection. These related to: ensuring that the practice of staff consuming food and drinks part-paid for by service users ceases and ensuring that a full review of the charges to service users from April 2016 is carried out and restitution made to service users where it is determined amounts have been inappropriately charged. The registered person must also engage with the HSC trust(s) to ensure that there is appropriate engagement with service users and their representatives regarding any future charges to be made to service users.

<b>Number of requirements</b>	2	<b>Number of recommendations</b>	0
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#### 4.4 Is care effective?

Discussions established that the registered person was acting as nominated appointee for three service users i.e.: managing their social security benefits. Evidence of the official social security confirmation of these details was requested, however this was not provided on the day. The registered person was contacted by email following the inspection and she confirmed that while BF57's were not in place, these had already been requested from the Social Security Agency.

During the inspection, the registered manager reported that the agency was currently arranging for the registered person to take over the role of appointee for the remaining service users (this issue is further discussed in section 4.5 of this report).

Discussion established that "Statement of account" documents were in place for individual service users and were drafted on a quarterly basis. A sample of these documents was reviewed and these were noted to set out the amount of total income received on behalf of the individual service user during the period and the expenditure incurred, including on utilities and shared costs. As noted earlier in this report, the basis for a number of the charges to service users since April 2016 will form part of a comprehensive review of charges to each service user. In the serious concerns meeting held with RQIA on 2 May 2017, the registered person informed RQIA that an independent financial consultant had been engaged to carry out this review and where appropriate, restitution would be made to individual service users for any charges inappropriately levied.

A review of a sample of service users' files evidenced correspondence relating to a service user who had experienced a shortfall in the amount of rent allowance receivable and accordingly, owed the agency the resulting difference in rent. The service user's file contained a one page document from the Housing Executive, the remainder of which was not on file; therefore it was not possible to confirm the amount of the shortfall from the Housing Executive. A copy letter was on file addressed to the service user setting out the total amount due, however there was no evidence to confirm that the letter had been sent to or otherwise shared with the service user.



Alongside these two documents was a “Consent/Authorisation form” which requested that the shortfall be charged to the service user. This document template was required to be signed by a member of staff and the service user’s “Representative/Appointee” (the option for the service user to sign the form was not explicit). The form had been signed by the registered manager and counter signed under “Representative/Appointee” by another person. In the serious concerns meeting held with RQIA on 2 May 2017, the registered person confirmed that the person who had signed in this place was also a member of staff.

It was highlighted during the meeting that the staff member was neither the service user’s representative nor their appointee and therefore should not have signed the document. The importance of staff understanding the significance of signing documents impacting on service users’ monies was stressed during the meeting. It was also noted that staff should be aware of their responsibilities to ensure that where at all possible, service users or their representatives are fully engaged and in agreement with significant withdrawals made from service users’ monies.

A recommendation was made to ensure that staff are reminded of their responsibilities to ensure that their actions in recording income and expenditure and any associated documents is in keeping with the agency’s policies, procedures and “Safeguarding service users’ finances” training.

A review of the monthly “Cashflow” sheets for a sample of service users and for the communal “Housekeeping” money was carried out. It was noted that entries were made on a pre-printed template which included columns for the date, the details, whether the entry was a lodgement or withdrawal, the running balance and space for two staff members to sign. Additional columns were in place to record whether, in respect of each entry, a receipt was available and what reference number it had been given and there was an additional column for a check of the balance.

It was noted however, that the second staff signature column for each entry was routinely not completed. In addition, one cashflow sheet evidenced that errors on the face of the sheet had not been properly dealt with; numbers had been changed without initialling the change and errors had been scribbled out, making it difficult to read the original entry. This practice was not in accordance with the agency’s procedures.

A recommendation was made to ensure that entries on cashflow sheets are signed by two people at all times and that any errors made on the sheets are correctly dealt with ie: a clear line drawn through the error, which is initialled by the person making the entry and a clear entry made underneath.

It was noted that the agency operated a transport scheme, and references to transport charges were made on a sample of statement of account records provided for review. The operation of the transport scheme and the associated charges were not examined as part of this inspection. However, a copy of the agency’s “Transport policy” was reviewed and it was noted that this did not include details as to the mechanism for charging service users for transport.

A recommendation was made for the transport policy to be revised to detail the arrangements for charging service users for transport services, including how the cost per mile for transport services is arrived at. The registered person should ensure that RQIA’s Guidance on Transport Schemes for Nursing Home, Residential Care Home and Supported Living Domiciliary Care Service Providers, May 2013 is referred to in respect of the expected content of a transport policy.

The registered person should also ensure that a copy of the updated policy is shared with the HSC trust and that its contents are shared and discussed with service users and their representatives.

### Areas for improvement

Three areas for improvement were identified during the inspection. These related to ensuring that staff are reminded of their responsibilities to ensure that their actions in recording income and expenditure and any associated documents is in keeping with the agencies policies, procedures and “Safeguarding service users’ finances” training; ensuring that entries on cashflow sheets are signed by two people at all times and that any errors made on the sheets are correctly dealt with i.e.: a clear line drawn through the error, which is initialled by the person making the entry and a clear entry made underneath and ensuring that the transport policy is revised to detail the arrangements for charging service users for transport services, including how the cost per mile for transport services is arrived at.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	3
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#### 4.5 Is care compassionate?

Discussion with staff identified that they supported individual service users with managing their monies, and they described the principles in respect of how specific support tasks should be reflective of the wishes, capabilities and needs of individual service users.

During the inspection, the manner in which changes to how service users were supported to manage their money was reviewed. In respect of the introduction of new charges to service users from 1 April 2016, evidence was sought to establish how the agency had appropriately discussed, consulted with and agreed new arrangements with service users.

A review of a sample of service users’ files identified that there was limited evidence that service users had been consulted with in respect of changes to how they were supported to manage their money. Within a sample of files reviewed, a copy of a letter dated February 2016 from the registered person was identified on only one service user’s file. This letter set out the rationale for the introduction of additional charges by the agency (as detailed in section 4.3 of this report).

No evidence was identified during the inspection to confirm that service users had been consulted with or had agreed to the introduction of the additional charges from April 2016. On querying this with the registered manager, it was reported that the proposed changes may be recorded in the minutes of the tenants’ meetings. These were requested for review, however, the record of tenants meetings could not be located by the end of the inspection.

Discussions with the registered manager identified that it was the registered person’s intention to take over the Appointee role for the remaining tenants in the scheme. On querying the reason for this, she reported that this was planned in order to “safeguard the staff”. No evidence was available to suggest that this major change in the management of service users’ social security benefits had been discussed and agreed with the service users or their representatives or HSC trust representatives.

In the serious concerns meeting held on 2 May 2017, the issues above were discussed. Emailed copies of the records of tenants meetings were included in a set of documents provided to RQIA and these were discussed.

The registered person acknowledged RQIA's observation that original, signed copies of the tenants meetings which evidenced that the introduction of charges had been discussed at the time were not available.

The registered person provided RQIA with a number of other documents which purported to identify how the agency had consulted with service users, their representatives and other stakeholders prior to the introduction of the additional charges in April 2016. Documents included a copy of an unsigned letter addressed "Dear Tenant" this letter had "December 2015" hand written at the top. It explained that from 1 December 2016, "...all costs outside of the funded care and support programmes will have to be met by service users."

The registered person clarified that this letter was sent to all of the service users in error, as the arrangements to introduce charges for the additional services had yet not been finalised. She noted that a further letter had been sent to the service users in February 2016 apologising for this error and explaining in more detail, the background to the introduction of the charges. (A copy of this letter was identified on one service user's file during the inspection).

In addition, copies of email correspondence dated January 2016 from the agency's corporate services manager and registered person to the SEHSCT were provided. This correspondence detailed communication with the HSC trust regarding the agency's plans to send a letter to service users' families in respect of charges to service users. Copies of emails also detailed a request from the HSC trust to meet with agency representatives to discuss the matter.

During the serious concerns meeting, the registered person provided a commitment that they would work alongside the HSC trust(s) to ensure that there was appropriate engagement with service users and their representatives regarding any future charges to be made to service users. Assurances were also provided that there would be appropriate, meaningful engagement with service users and their representatives in respect to the review and implementation of new policies, procedures and practices. RQIA was also advised of the registered person's plans to engage an independent advocate to support service users in this process.

A recommendation was made for the registered person to ensure that the views of service users are considered when policies, procedures and practices are being reviewed.

During the meeting, the registered person reported that her taking on the role of appointee for service users had been requested by the HSC trust; this was based on potential risks to individual service users' monies. The registered person explained that the rationale for the proposed arrangements was to ensure that the agency could appropriately support service users by having oversight of the receipt of service users' social security benefits and bank/savings accounts.

Documents provided by the registered person during the meeting included email correspondence from SEHSCT trust representatives to the registered person dated April 2017. This detailed confirmation that the HSC trust had requested the registered person take over as nominated appointee for the three service users for whom she is currently acting in that role.

## Areas for improvement

One area for improvement was identified during the inspection. This was in relation to the registered person ensuring that the views of service users are considered when policies, procedures and practices are being reviewed.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	1
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### 4.6 Is the service well led?

A review of the agency's "Supported Living Safeguarding Service users' Monies Policies and Procedures" dated January 2017, identified a range of documents to detail the arrangements in place to support service users with their monies. These encompassed the individual service user agreement, including appendices detailing the current rates of benefits and charges template and a financial management care plan and a financial support assessment. It was noted that the policy entitled "Financial Controls for Service Users' Monies" stated that "The specific financial arrangements for each service user shall be included in his/her Financial Management Care Plan, attached to the Service user's Individual Agreement/Tenancy agreement and signed off by the Registered Manager".

A range of service user files was reviewed and inconsistent practice was evidenced regarding service users having the above documents on their files. A review of a sample of service user files evidenced that either a written agreement consistent with the minimum standards was absent or had not been updated since the service user took up their tenancy. One service user's agreement contained detail regarding the expected costs of transport provision provided by the agency. Their agreement evidenced that the cost of the transport per mile at the time the agreement was signed had subsequently been crossed through in pen, and a new, higher, cost inserted. There was no evidence that these changes had been agreed in writing by the service user or their representative.

A recommendation was made to ensure that each service user has an up to date, written individual agreement in place. Any changes to a service user's written agreement should be agreed in writing by the service user or their representative.

During the serious concerns meeting on 2 May 2017, the registered person provided RQIA with a copy of an updated "individual service users agreement" template, dated April 2017. This template was noted to contain an appendix detailing a breakdown of the individual service user's income and anticipated expenditure. It was acknowledged that the template required further review to ensure that it was consistent with the minimum standards and accurately reflected the individual financial arrangements of each service user. RQIA highlighted that the statement on the first page of the template "You were admitted to the facility on..." was inconsistent with the model of care provision.

At the meeting, the registered person provided a commitment that each service user would be provided with an updated individual service user agreement. Assurances were also provided to RQIA that the registered person would engage appropriately with the HSC trust(s) and each service user and their representative in order to appropriately reflect individual financial arrangements to be detailed in each service user's agreement.

A copy of the current service user's guide, dated 29 October 2015, was provided during the inspection. A review of the guide identified that it stated "as a service user you will pay money each week to cover shared household expenses such as: electricity, oil, food, cleaning material, Sky TV, window cleaning. This money is recorded. Your agreement to pay towards household costs is a condition of your tenancy." Concerns were noted that the service user guide created a direct link between a service user's tenancy arrangements and the payment of shared costs within their own home.

In the serious concerns meeting held on 2 May 2017, the registered person provided a copy of the updated service users' guide; this was examined and found to be satisfactory. The registered person also noted that the service users' guide would continue to be updated as appropriate and that it would be shared and discussed with service users.

During the inspection, a review of one service user's file evidenced that they had borrowed from the communal housekeeping money of a house which they did not live in. Discussion with a member of care staff confirmed that this had occurred on a number of occasions.

This matter was discussed in the serious concerns meeting held on 2 May 2017. In the meeting, the registered person acknowledged RQIA's concerns regarding the weaknesses in governance arrangements which had facilitated the service user borrowing from others without their consent. The registered person accepted that this should not have happened and provided a commitment that governance and oversight arrangements would be strengthened.

### Areas for improvement

One area for improvement was identified during the inspection. This related to ensuring that each service user is provided with an up to date, written individual agreement in place. Any changes to a service user's written agreement should be agreed in writing by the service user or their representative.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	1
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### 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Christine McLean, registered manager, and Helen Owen, registered person, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 nursing agency. 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.

## 5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

## 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and the (DHSSPS) Domiciliary Care Agencies Minimum Standards, updated August 2011. They promote current good practice and if adopted by the registered provider/manager 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](mailto: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.



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address [info@rqia.org.uk](mailto:info@rqia.org.uk)

<b>Quality Improvement Plan</b>	
<b>Statutory requirements</b>	
<b>Requirement 1</b> <b>Ref:</b> Regulation 14 (d) <b>Stated:</b> First time <b>To be completed by:</b> 20 April 2017	<p>The registered provider must ensure that the practice of staff consuming food and drinks part-paid for by service users must cease from the date of the inspection.</p> <p><b>Response by registered provider detailing the actions taken:</b></p>
<b>Requirement 2</b> <b>Ref:</b> Regulation 14 (d) <b>Stated:</b> First time <b>To be completed by:</b> 20 August 2017	<p>The registered provider must ensure that a full review of the charges to service users from April 2016 is carried out and that restitution is made to service users where it is determined that amounts have been inappropriately charged. The registered person must liaise with the HSC trust(s) to ensure that there is appropriate engagement with service users and their representatives regarding any future charges to be made to service users.</p> <p><b>Response by registered provider detailing the actions taken:</b></p>
<b>Recommendations</b>	
<b>Recommendation 1</b> <b>Ref:</b> Standard 8.3 <b>Stated:</b> First time <b>To be completed by:</b> 20 June 2017	<p>The registered provider should ensure that staff are reminded of their responsibilities to ensure that their actions in recording income and expenditure and any associated documents is in keeping with the agencies policies, procedures and “Safeguarding service users’ finances” training.</p> <p><b>Response by registered provider detailing the actions taken:</b></p>
<b>Recommendation 2</b> <b>Ref:</b> Standard 8.15 <b>Stated:</b> First time <b>To be completed by:</b> 20 June 2017	<p>The registered provider should ensure that entries on cashflow sheets are signed by two people at all times and that any errors made on the sheets are correctly dealt with i.e.: a clear line drawn through the error, which is initialled by the person making the entry and a clear entry made underneath.</p> <p><b>Response by registered provider detailing the actions taken:</b></p>



<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Standard 8.15</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 20 August 2017</p>	<p>The registered provider should ensure that the transport policy is revised to detail the arrangements for charging service users for transport services, including how the cost per mile for transport services is arrived at. The registered person should also ensure that RQIA's Guidance On Transport Schemes for Nursing Home, Residential Care Home and Supported Living Domiciliary Care Service Providers May 2013 is referred to in respect of the expected content of a transport policy. The registered person should also ensure that a copy of the updated policy is shared with the HSC trust and that its contents are shared and discussed with service users and their representatives.</p>
<p><b>Recommendation 4</b></p> <p><b>Ref:</b> Standard 1.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 21 April 2017</p>	<p>The registered provider should ensure that the views of service users are considered when policies, procedures and practices are being reviewed.</p>
<p><b>Recommendation 5</b></p> <p><b>Ref:</b> Standard 4</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 20 August 2017</p>	<p>The registered provider should ensure that each service user is provided with an up to date, written individual agreement. Any changes to a service user's written agreement should be agreed in writing by the service user or their representative.</p>
	<p><b>Response by registered provider detailing the actions taken:</b></p>
	<p><b>Response by registered provider detailing the actions taken:</b></p>

*\*Please ensure this document is completed in full and returned to [finance.team@rqia.org.uk](mailto:finance.team@rqia.org.uk) from the authorised email address\**



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