

Unannounced Finance Inspection Report 10 August 2017



Rosemary Lodge

Type of Service: Residential
Address: 9 Fennel Road, Antrim, BT41 4PB
Tel No: 02894428877
Inspector: Joseph McRandle

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 44 beds that provides care for residents living with a Learning Disability, Mental disorder excluding learning disability or dementia over 65 years, physical disability other than sensory impairment over 65 years, dementia and Old age not falling within any other category

3.0 Service details

Organisation/Registered Provider: Four Seasons (Bamford) Ltd Responsible Individual(s): Dr Maureen Claire Royston	Registered Manager: Ms Julie Beacom- Registration pending
Person in charge at the time of inspection: Ms Julie Beacom	Date manager registered: Ms Julie Beacom- Registration pending
Categories of care: Residential Care (RC) LD – Learning Disability I - Old age not falling within any other category MP(E)- Mental disorder excluding learning disability or dementia – over 65 years PH(E)- Physical disability other than sensory impairment – over 65 years DE - Dementia	Number of registered places: 44

4.0 Inspection summary

An unannounced inspection took place on 10 August 2017 from 10:30 to 15:00.

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, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis, members of staff involved in managing residents' finances having adult safeguarding training, recording the reconciliations of residents' monies, controls surrounding the bank accounts used to retain residents' monies, the financial policies and procedures operated at the home, facilitating journeys on behalf of residents, retaining signed consent forms within residents' files, informing residents of increases in fees, offering support to residents or their representatives for managing residents' finances, retaining records of charges to residents, retaining records of amounts paid by residents for charges, up to date residents' agreements, recording transactions undertaken on behalf of residents, retaining

receipts from transactions, hairdresser and member of staff signing records, good audit procedures, person depositing monies on behalf of resident signing records and issuing receipts to person depositing monies.

One area requiring improvement was identified in relation to updating residents' inventory records with items brought into the home by, or on behalf of, residents following admission.

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	1

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

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

4.2 Action/enforcement taken following the most recent care inspection dated 24 May 2017

The most recent inspection was an unannounced care inspection undertaken on 24 May 2017. Other than those actions detailed in the QIP no further actions were required to be taken following the most recent 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 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 manager and the home's Business Support Administrator.

The following records were examined during the inspection:

- Four residents' finance files
- Four residents' individual written agreements
- Monies held on behalf of residents
- A sample of records of reconciliations of monies held on behalf of residents
- Four residents' consent forms authorising members of staff to make purchases on behalf of residents
- The residents' guide
- Records of safe contents

- A sample of payments for fees paid by, or on behalf of, two residents
- A sample of payments for hairdressing service
- A sample of payments for taxi journeys
- A sample of purchases undertaken on behalf of three residents
- A sample of monies deposited at the home on behalf of three residents
- A sample of records from residents' comfort fund
- Policy for Maintenance of Personal Allowance Records
- Policy for Personal Allowance Reference Codes
- Policy for Personal Allowance Deposits
- Policy for Management and Recording of Personal Allowance
- Policy for Personal Allowance Repayment on Death or Discharge
- Policy for Management of Bank Account and Cash Float
- Policy for Personal Allowance Statements and Overspend Recovery
- Policy for Personal Allowance Reconciliation
- Policy for Personal Allowance Withdrawals

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 24 May 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last finance

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.

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 staff members with access. Monies held on behalf of residents were counted, the amount retained agreed to the balance recorded at the home.

A safe contents book was in place and up to date at the time of the inspection. A sample of valuables held on behalf of two residents was examined. Records agreed to the items held in the safe place. Records also showed that the items held were checked on a regular basis.

Discussion with the manager confirmed that members of staff involved in managing residents finances had received training in relation to the safeguarding of vulnerable adults. The manager was able to demonstrate knowledge of their specific role and responsibilities in relation to any concerns raised in relation to residents' finances.

Discussion with staff confirmed that there were no finance related restrictive practices in place for any resident.

Areas of good practice

There were examples of good practice found in relation to providing a place for residents to deposit items for safekeeping, the controls surrounding the safe place, up to date safe register, reconciling safe contents on a regular basis and members of staff involved in managing residents' finances having 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.

Review of records and discussion with the manager confirmed that no member of staff acted as an appointee for any resident, i.e. a person authorised by the Social Security Agency (SSA) to receive and manage the social security benefits on behalf of an individual.

Discussion with the manager 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.

The inspector commended the manager and the home's business support administrator on the strong controls in place for reconciling residents' monies. Review of records showed that the reconciliation between the monies held on behalf of residents and the records of monies held were undertaken on a weekly basis. The records were signed by the member of staff undertaking the reconciliation and countersigned by a senior member of staff. Review of records also confirmed that the home's business support administrator checked and countersigned the reconciliations at least monthly.

Discussion with staff confirmed that no bank account belonging to any resident was managed at the home. Staff confirmed that a number of residents' personal allowance monies were held within a business bank account. Review of statements from the bank account confirmed that the monies held within the account belonged to residents and were not used for the management of the home, as in line with regulation 22 (1) of The Residential Care Homes Regulations (NI) 2005.

Good controls were observed in relation to the management of the bank account. Review of records showed that the monies held within the account were reconciled to the bank statements on a weekly basis.

Review of records and discussion with staff confirmed that a comfort fund was operated on behalf of residents. Monies held for the fund at the time of the inspection were counted and agreed to the balance recorded at the home. A bank account was operated to retain the monies within the fund. Discussion with staff confirmed that purchases from the fund were for the benefit of all residents. A review of a sample purchases showed that receipts were in place from the purchases. Two members of staff had signed each of transactions recorded.

The controls in place for the bank account used to retain the comfort fund monies corresponded to the controls surrounding the bank account retaining residents personal allowance monies.

Discussion with the manager and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. The manager was unsure if the records were up to date with items brought into the home by or in behalf of residents for which staff had been informed about e.g. televisions or items of furniture located within residents' bedrooms. This was identified as an area for improvement.

Comprehensive 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 confirmed that the procedures undertaken by staff on behalf of residents were reflected within the policies.

Areas of good practice

There were examples of good practice found in relation to: recording the reconciliations of residents' monies, controls surrounding the bank accounts used to retain residents' monies, and the financial policies and procedures operated at the home.

Areas for improvement

One area for improvement was identified during the inspection. This related to updating residents' inventory records with items brought into the home by, or on behalf of, residents following admission.

	Regulations	Standards
Total number of areas for improvement	0	1

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.

The home did not provide a transport scheme at the time of the inspection. Discussions with the 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.

The manager and business support administrator were commended on the good practice of consent forms being in place authorising members of staff to purchase goods and services on behalf of residents. The forms permitted members of staff to pay the hairdresser and included a list of the essential items e.g. toiletries that staff were permitted to purchase on behalf of residents. A price list for the hairdresser was included with the consent forms. A review of four residents' files showed that consent forms were retained within all four files. The forms were signed by the residents or their representatives and a representative from the home.

A provision was included within the residents' agreements for residents or their representatives to be informed one month in advance of any increase in fees. Review of records evidenced that copies of letters sent to residents or their representatives informing them of previous increases in fees were retained at the home.

Discussion with the manager confirmed that arrangements were in place to offer support to residents for managing their own monies.

Areas of good practice

There were examples of good practice found in relation to: facilitating journeys on behalf of residents, retaining signed consent forms within residents' files authorising staff to pay for additional services or purchase identified items, informing residents of increases in fees and offering support to residents or their representatives for managing residents' finances.

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.

Review of records confirmed that copies of payment remittances from the health and social care trusts showing the weekly fee charged for each care managed resident were retained at the home. The remittances also showed the amount of fees paid by the trust on behalf of residents and the contribution owed by residents towards their fee. Records were also available showing the weekly fee charged to private residents.

Review of records showed that details of the amount of fees paid by, or on behalf of, residents were retained at the home. Review of a sample of payments made by two residents, showed that the amounts paid agreed to the contribution owed by each resident.

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 and a list of additional services charged to residents e.g. hairdressing.

The resident's guide included a written agreement which was issued to residents on admission to the home. Review of four residents' files evidenced that individual written agreements were in place for all four residents. As in line with good practice, the agreements showed the current weekly fee paid by, or on behalf of, residents. All of the agreements reviewed were signed by the resident or their representative and a representative from the home.

Review of records confirmed that a weekly third party contribution (top up) was paid on behalf of care managed residents. Discussion with staff confirmed that the third party contribution was not for any additional services provided to residents but the difference between the tariff for Rosemary Lodge and the regional rate paid by the Health and Social Care Trusts.

As in line with regulation 5 (3) of The Residential Care Homes Regulations (NI) 2005 all of the agreements reviewed showed the current amount of the additional third party contribution paid on behalf of the resident and details of the person paying the additional charge.

Discussion with staff confirmed that care managed residents were not paying an additional amount towards their fee over and above the amount agreed with the Health and Social Care Trusts.

Review of records and discussion with staff confirmed that individual transaction sheets were maintained for each resident. The sheets were used to record the details of transactions undertaken on behalf of residents including purchases of items and payments for additional services e.g. hairdressing. The transaction sheets were also used to record monies deposited at the home on behalf of residents. Good practice was observed as the procedure for recording the above transactions was maintained at the front of the file used to retain the residents' transaction sheets.

A sample of records of payments to the hairdresser was reviewed for three residents. Records showed the name of the residents receiving the service, the service provided to the residents and the amount charged to each resident. Records also showed that receipts were available from all three transactions. Review of records showed that the amount deducted from residents'

monies to pay the hairdresser agreed to the amounts recorded on the hairdressing receipts. As in line with good practice the hairdresser and a member of staff had signed the records to confirm that the service took place.

Good practice was further observed in relation to the audit process as the number on the invoice from the hairdresser was recorded against the records of payments made to the hairdresser.

A sample of records of payments for residents undertaking journeys by taxi was reviewed. The taxi provider had issued an invoice which gave details of the names of the residents undertaking the journeys, the destination of the journeys and the amount charged to the residents. Review of records of the amounts deducted from two residents' monies to pay the taxi provider agreed to the amounts recorded on the taxi provider's receipt. As in line with the hairdressing records the number recorded against the payments made for the journeys corresponded to the number on the invoice provided by the taxi firm.

Three records of monies deposited at the home on behalf of three residents were reviewed. The amounts deposited were recorded in the residents' transaction sheets. Two signatures were recorded against each of the transactions. It was noticed that as in line with good practice the person depositing the monies was one of the signatures recorded. Discussion with staff confirmed that when monies were deposited outside of office hours two members of staff signed the records and the person depositing the monies was issued with a receipt. A review of records of monies deposited after hours for one resident showed that receipts were issued to the person depositing the monies.

Areas of good practice

There were examples of good practice found in relation to: retaining records of charges to residents, retaining records of amounts paid by residents for fees, up to date residents' agreements, recording transactions undertaken on behalf of residents, retaining receipts from transactions, hairdresser and member of staff signing records, good audit procedures, person depositing monies on behalf of resident signing records and issuing receipts to person depositing monies.

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

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Ms Julie Beacom, 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.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan

Action required to ensure compliance with DHSSPS Residential Care Homes Minimum Standards, August 2011.

<p>Area for improvement 1</p> <p>Ref: Standard 8.7</p> <p>Stated: First time</p> <p>To be completed by: 15 September 2017</p>	<p>The registered person shall ensure that the inventory of residents' possessions is reviewed and brought up to date. Any additional items brought into the home or items that have been disposed of e.g. televisions or items of furniture (for which staff have been informed of) should be recorded. The records should be signed and dated by two members of staff.</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken: Inventory of residents possessions are up-to-date and signed by two staff..</p>

Please ensure this document is completed in full and returned via Web Portal



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