

Unannounced Finance Inspection Report 19 January 2017



Ashbrook Care Home

Type of Service: Nursing Home
Address: 50 Moor Road, Coalisland, Dungannon BT71 4QB
Tel No: 02887741010
Inspector: Briega Ferris

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Ashbrook Care Home took place on 19 January 2016 from 09:30 to 14:10 hours.

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

Is care safe?

A safe place in the home was available and staff members were familiar with controls in place to safeguard service users' money and valuables; no areas for improvement were identified.

Is care effective?

Controls to ensure service users' money and valuables were safeguarded were found to be in place and operating effectively, however three areas for improvement were identified during the inspection. These related to: ensuring that records of podiatry treatments are also signed by a representative of the home to verify the treatment provided and the associated cost to each service user; ensuring that records of property and personal possessions in each service user's room are brought up to date and are reconciled by two people at least quarterly and ensuring that for any service user who does not have a record (of furniture and personal possessions), that a record is duly completed.

Is care compassionate?

Discussion with staff members evidenced an empathic attitude to ensuring service users' money and valuables were appropriately safeguarded. No areas for improvement were identified.

Is the service well led?

Governance and oversight arrangements were found to be in place however three areas for improvement were identified during the inspection. These related to: ensuring that the content of the home's standard agreement is compared with Standard 2.2 of the Care Standards for Nursing homes. Having done so, each service user should be provided with an up to date individual written agreement which sets out their individual, up to date fee details and financial arrangements; ensuring that any changes to a service user's agreement (including fees and financial arrangements) are agreed in writing by the service user or their representative and ensuring that a detailed written authorisation is obtained from each service user or their representative to spend the service user's money on identified goods and services to pre-agreed expenditure limits. The written authorisation should be retained on the service user's records and updated as required.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the (DHSSPS) Care Standards for Nursing Homes, April 2015.

For the purposes of this report, the term 'service users' will be used to describe those living in Ashbrook Care Home which provides both nursing and residential care.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	5

Details of the quality improvement plan (QIP) within this report were discussed with Gillian Larmour, registered 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.

1.2 Actions/enforcement taken following the most recent finance inspection

A finance inspection of the home was carried out on 11 February 2009 on behalf of RQIA. The findings from the inspection were not brought forward to the finance inspection on 19 January 2017.

2.0 Service details

Registered organisation/registered person: Ashbrook Home Ltd/Marcus James Mulgrew	Registered manager: Gillian Larmour
Person in charge of the home at the time of inspection: Gillian Larmour	Date manager registered: 26 July 2016
Categories of care: NH-PH, RC-I, NH-DE, NH-I, NH-MP(E)	Number of registered places: 68

3.0 Methods/processes

Prior to the inspection, the record of notifiable incidents reported to RQIA in the last twelve months was reviewed; this established that none of these incidents related to services users' money or valuables. The record of calls made to RQIA's duty system was reviewed and this did not identify any relevant issues; the previous inspector to visit the home was also contacted prior to the inspection and they confirmed there were no matters to be followed up.

During the inspection, the inspector met with Gillian Larmour, the registered manager, the home's administrator and the home's finance administrator. A poster detailing that the inspection was taking place was positioned at the entrance of the home, however no visitors or relatives chose to meet with the inspector.

The following records were examined during the inspection:

- The home's patient guide
- A sample of written policies including those in respect of:
 - "Gifts to staff and donations policy" – February 2016
 - "Residents comfort fund policy" – February 2016
 - "Residents finance policy" – February 2016
 - "Whistleblowing Policy" – March 2016
 - "Complaints- management guidance notes" – March 2016
- Five service user finance (income and expenditure) files
- A sample of income, expenditure and reconciliation records
- A sample of records for hairdressing and podiatry services facilitated in the home
- A sample of income and expenditure records relating to the service users' comfort fund
- The record of safe contents – "Monthly check of residents' private valuables in safe"
- Five service user agreements
- Four records of service users' personal property (in their rooms)

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 29 November 2016

The most recent inspection of the home was an unannounced medicines management inspection; a QIP was not issued as a result of the inspection.

4.2 Review of requirements and recommendations from the last finance inspection dated 11 February 2009

As noted above, a finance inspection of the home was carried out on 11 February 2009 on behalf of RQIA. The findings from the inspection were not brought forward to the finance inspection on 19 January 2017.

4.3 Is care safe?

The home had a full time administrator and a finance administrator, both of whom were present during the inspection. Evidence was reviewed which confirmed that they had recently both received training on the Protection of Vulnerable Adults (POVA). Both administrators were familiar with the controls in place to safeguard service users' money and valuables in the home; and both could clearly describe these to the inspector.

During discussion, the registered manager confirmed that there were no current suspected, alleged or actual incidents of financial abuse, nor were there any finance-related restrictive practices in place for any service user.

The home had a safe place available for the deposit of cash or valuables belonging to service users; the inspector was satisfied with the location of the safe place and the persons with access. On the day of inspection, cash belonging to a number of service users was lodged with for safekeeping, no valuables belonging to service users were being held.

The home had a written record of items previously held for safekeeping on behalf of individual service users; it was noted that these had been reconciled monthly and were signed and dated by two people. A clear record of the safe contents (excluding items previously held for safekeeping) was also held; this again evidenced that the record had been reconciled monthly, with the reconciliation signed and dated by two people.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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4.4 Is care effective?

Discussion with staff established that no representatives of the home were acting as nominated appointee for any service user in the room. The home was, however, in direct receipt of the personal monies for two identified service users from a HSC trust. The home had a service users' bank account in place which was appropriately named in favour of the service users.

Every so often, an amount of money would be withdrawn from the service users' bank account to top up the float of cash held in the home in respect of the identified service users and conversely, when the balance of cash in the home was deemed high, a transfer was made to the service users' bank account. For the two identified service users, a sample of records reviewed supported the amounts and timings of receipts of personal monies directly.

In the majority of cases, the home were in receipt of money from the family/friends of service users in order to pay for additional services facilitated within the home for which there was an additional charge, such as hairdressing, newspapers, podiatry or other sundries. Countersigned receipts were provided to those making deposits.

A sample of the records of income and expenditure maintained on behalf of service users was reviewed and these were found to be meticulously maintained. Clear, detailed records made using a standard financial ledger format were evidenced; entries were routinely signed by two people.

A computerised, up to date balance of monies held in for service users both in cash and in the service users' bank account was maintained. The home administrator noted that this allowed for a real-time picture of how much money was deposited for safekeeping, which was also helpful in advising families should they enquire for the purposes of topping up the balance.

A review of a sample of the records identified that, over time, a monthly reconciliation of the money held on behalf of service users was recorded and signed and dated by two people. The inspector traced a sample of transactions recorded in the records and was able to locate the relevant documents; for example, a receipt for expenditure or a receipt for a lodgement which had been made.

As noted above, hairdressing and podiatry treatments were being facilitated within the home. Records were in place to evidence the service users treated on any given day and the cost of the respective treatments. A review of a sample of the hairdressing records evidenced that all of the required information as outlined in Standard 14.13 of the Care Standards for Nursing Homes was being recorded. It was noted however, that records of podiatry treatments while signed by the podiatrist, had not been signed by a representative of the home.

A recommendation was made in respect of this finding.

The inspector discussed how service users' property (within their rooms) was recorded and requested to see a sample of the completed property records for five service users. Three property books were provided within which four of the five records requested were located. Within the records for the four service users, there was evidence of inconsistency in the record keeping. For example, two of the records were unsigned, while two were signed by one person; the majority of the records reviewed had not been dated.

The inspector highlighted that Standard 14.26 of the Care Standards for Nursing Homes requires that each service user's record of personal property is kept up to date and is reconciled by two people at least quarterly.

A recommendation was made to ensure that each service users' record of property is brought up to date and is duly reconciled on this basis.

The record of property for the fifth service user was not located during the inspection. It was noted that each service user must have a record of the furniture and personal possessions which they have brought into their rooms.

A requirement was made in respect of this finding.

Discussion established that the home also administered a service users' comfort fund; an appropriately named bank account was in place. A written policy and procedure was also in place to guide the administration of the fund. A sample of the records of income and expenditure for the fund was reviewed; these were maintained with the same controls as individual service users' records of personal monies. Again these records were reconciled and signed and dated by two people on a monthly basis.

During the inspection, the registered manager confirmed that the home did not provide transport to service users.

Areas for improvement

Three areas for improvement were identified during the inspection. These related to: ensuring that records of podiatry treatments are also signed by a representative of the home to verify the treatment provided and the associated cost to each service user; ensuring that records of property and personal possessions in each service user's room are brought up to date and are reconciled by two people at least quarterly and ensuring that for any service user who does not have a record (of furniture and personal possessions) that a record is duly completed.

Number of requirements	1	Number of recommendations	2
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4.5 Is care compassionate?

Day to day to day arrangements in place to support service users were discussed with the registered manager and both administrators. Each member of staff described specific examples of how the home supported a number of service users with their money. Discussion with the registered manager and the home administrator established that arrangements to safeguard a service users' money would generally be discussed with the service user or their

representative at the time of the service user's admission to the home. Staff described the sensitivities around these discussions with empathy.

From a review of a sample of the finance records, there was evidence of engagement with other professional stakeholders. For example in order to ensure that identified service users had sufficient funds lodged with the home to ensure that they each had access to their money, if required.

Discussion with the registered manager identified that the home had a range of methods in place to encourage feedback from families or their representatives in respect of any issue, including ongoing verbal feedback, relatives/service users' meetings and questionnaires. It was noted that feedback from a service users/relatives survey was clearly displayed in the foyer of the home. The home's service user guide contained a range of information for a new service user, including that in respect of service users bringing personal property into the home; the services available in the home for which an additional fee was payable (e.g. hairdressing); details regarding fees and funding-related matters, and signposting to advocacy services.

Arrangements for service users to access money outside of normal office hours were discussed with the registered manager. The registered manager explained the contingency arrangement in place in the home to ensure that this could be facilitated if required.

Areas for improvement

No areas for improvement were identified during the inspection.

4.6 Is the service well led?

The home had a range of written policies and procedures addressing matters relating to finances and safeguarding service users' money and valuables and these were easily accessible by staff on the day. A file specifically containing finance policies was provided for review, this included policies which outlined the home's controls to safeguard service users' money deposited for safekeeping; the administration of the service users' comfort fund and gifts and donations to the home.

Policies including those addressing the management of complaints and whistleblowing were also evidenced. Discussion with staff evidenced that they were clear about the home's complaints handling processes and escalating any concerns.

There was a clear organisational structure within the home; as noted earlier, discussion established that those involved in supporting service users with their money on a daily basis were familiar with their roles and responsibilities in relation to safeguarding service users' money and valuables.

Individual service user agreements were discussed and a sample of five service users' files was selected for review. Each of the five service users sampled had a signed, written agreement in place with the home. In each case, this detailed the fee arrangements which were in place at the time each respective service user was admitted to the home.

As noted in section 4.4 above, the home was in direct receipt of the personal allowance monies for two identified service users (personal allowance monies were being paid directly by a HSC trust to the home for safekeeping). These arrangements were not detailed within the two identified service users' written agreements. The inspector noted that Standard 2.2 of the Care Standards for Nursing homes details that a service user's individual agreement should detail the arrangements for any financial transactions undertaken on behalf of a service user and the records to be kept. In addition, it was noted that for instance, the cost of additional services facilitated within the home which attract an additional fee, was not detailed in the home's standard agreement.

The inspector discussed this with the registered manager and noted that the content of the home's standard agreement should be compared with 2.2 of the Care Standards for Nursing homes. Having done so, each service user should be provided with an individual written agreement which sets out their individual, up to date fee details and financial arrangements.

A recommendation was made in respect of this finding.

Within the sample of five agreements, it was noted that four service users had been admitted at least one year ago. For these service users, their records contained copies of letters sent to the service users' representatives over time, which advised of changes to the fee arrangements (in light of regional increases in weekly tariffs). The letters noted that "...all other terms and conditions in the service user agreement remain unchanged." The fifth service user had been admitted less than one year ago and therefore there had been no relevant change to be advised of.

The inspector discussed these findings with the registered manager and noted that Standard 2.8 of the Care Standards for Nursing Homes states that "any changes to a service user's agreement are agreed in writing by the resident or their representative..."

It was acknowledged that while there was evidence that service user's representatives had been clearly advised of the changes to fees, the change to each service user's agreement had not been agreed in writing.

A recommendation was made in respect of this finding.

Discussion was held regarding written personal monies authorisations between the service user/their representative and the home. The documents are in place to provide the home with authority to use the service users' personal monies to purchase goods and services on their behalf. A file containing "Resident's representative pre-authorisation forms" was provided for review. The five service users whose agreements had been requested were chosen again in order to review the personal monies authorisations in place with the home. For each of the five service users, monies were deposited with the home for safekeeping.

Within the sample of five service users were two identified service users whose personal money was sent directly from a HSC trust to the home on a regular basis in order to be safeguarded on their behalf.

A review of the file identified that while two of five service users had a signed personal monies authorisation on the file, the remaining three service users did not. The two service users whose personal money was received directly by the home did not have a signed personal monies authorisation form on the file.

These findings were discussed with the registered manager. It was noted that while it was important for a written authorisation to be in place for any service user where the home were purchasing goods and services for the service user, it was, in particular, important to have these documents in place for those service users where a financial arrangement was in place with the home such as that described for the two service users above.

A recommendation was made to ensure that a detailed written authorisation is obtained from each service user or their representative to spend the service user's money on identified goods and services to pre-agreed expenditure limits. The written authorisation must be retained on the service user's records and updated as required.

Areas for improvement

Three areas for improvement were identified during the inspection. These related to: ensuring that the content of the home's standard agreement is compared with standard 2.2 of the Care Standards for Nursing homes. Having done so, each service user should be provided with an up to date individual written agreement which sets out their individual, up to date fee details and financial arrangements; ensuring that any changes to a service user's agreement (including fees and financial arrangements) are agreed in writing by the service user or their representative and ensuring that a detailed written authorisation is obtained from each service user or their representative to spend the service user's money on identified goods and services to pre-agreed expenditure limits. The written authorisation should be retained on the service user's records and updated as required.

Number of requirements	0	Number of recommendations	3
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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 Gillian Larmour, registered manager, 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 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The Nursing Homes Regulations (Northern Ireland) 2005

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and DHSSPS Care Standards for Nursing Homes (2015). They promote current good practice and if adopted by the registered person(s) 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 **the web portal** 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.

Quality Improvement Plan	
Statutory requirements	
Requirement 1 Ref: Regulation 19 (2) Schedule 4 (10) Stated: First time To be completed by: 19 March 2017	<p>The registered provider must ensure that a record of furniture and personal possessions brought by a service user into the room occupied by them is maintained throughout their stay in the home. Records of furniture and personal possessions belonging to all of the service users in the home must be reviewed and brought up to date.</p> <p>Response by registered provider detailing the actions taken: A new inventory record has been created and details of all furniture and personal possessions brought into the Care Home by new residents and existing residents will be recorded. The inventory for each resident will be maintained up to date.</p>
Recommendations	
Recommendation 1 Ref: Standard 14.13 Stated: First time To be completed by: 23 January 2017	<p>Where any service is facilitated within the home (such as, but not limited to, hairdressing, chiropody or visiting retailers) the person providing the service and the service user or a member of staff of the home signs the treatment record or receipt to verify the treatment or goods provided and the associated cost to each service user.</p> <p>Response by registered provider detailing the actions taken: This recommendation is being actioned with the treatment record of all individuals providing services in the care home being signed by the person providing the service as well as the service user or a member of staff.</p>
Recommendation 2 Ref: Standard 14.26 Stated: First time To be completed by: 19 March 2017	<p>The registered provider should ensure that an inventory of property belonging to each service user is maintained throughout their stay in the home. The inventory record is reconciled at least quarterly. The record is signed by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p>Response by registered provider detailing the actions taken: This recommendation has been actioned with the process of updating the inventory of property belonging to each service user. This record will be reconciled quarterly and signed by the member of staff reconciling the inventory and a senior member of staff.</p>
Recommendation 3 Ref: Standard 2.2 Stated: First time To be completed by: 19 February 2017	<p>The registered provider should ensure that the content of the home's standard agreement is compared with 2.2 of the Care Standards for Nursing homes. Having done so, each service user should be provided with an up to date individual written agreement which sets out their individual, up to date fee details and financial arrangements.</p> <p>Response by registered provider detailing the actions taken: This recommendation has been actioned with the care home's standard agreement now being reflective of Standard 2.2. Each service user will be issued with an updated agreement.</p>

<p>Recommendation 4</p> <p>Ref: Standard 2.8</p> <p>Stated: First time</p> <p>To be completed by: 19 February 2017</p>	<p>The registered provider should ensure that any changes to the individual written agreement (with service users) are agreed in writing by the service user or their representative. The individual agreement is updated to reflect any increases in charges payable. Where the service user or their representative is unable to or chooses not to sign the revised agreement, this is recorded.</p> <p>Response by registered provider detailing the actions taken: This recommendation has been actioned and in future if changes are made to the individual agreement they will be agreed in writing with the service user or their representative. Also, this individual agreement will be updated to reflect any increases in charges payable. If the service user or representative are unable to or choose not to sign this will be recorded.</p>
<p>Recommendation 5</p> <p>Ref: Standard 14.6, 14.7</p> <p>Stated: First time</p> <p>To be completed by: 19 February 2017</p>	<p>The registered provider should ensure that a detailed written authorisation is obtained from each service user or their representative to spend the service user's money on identified goods and services to pre-agreed expenditure limits. The written authorisation must be retained on the service user's records and updated as required.</p> <p>Response by registered provider detailing the actions taken: This recommendation has been actioned with written authorisation obtained from all service users or their representatives in relation to expenditure of the service user's money on identified goods and services with limits agreed to. This written authorisation is retained on the service user's record and updated when required.</p>



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