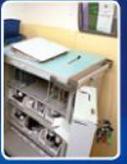


# Unannounced Finance Inspection Report 06 November 2017



## Breffni Lodge

**Type of Service: Residential Care Home**  
**Address: 3 Wandsworth Road, Belfast, BT4 3LS**  
**Tel No: 028 9065 3335**  
**Inspector: Briega Ferris**

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

Assurance, Challenge and Improvement in Health and Social Care

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

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home with 22 beds that provides care for older residents and/or those living with dementia.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Breffni Lodge  <b>Responsible Individual(s):</b> Mark John Uprichard	<b>Registered Manager:</b> Regina Brady
<b>Person in charge at the time of inspection:</b> Regina Brady	<b>Date manager registered:</b> 16 May 2013
<b>Categories of care:</b> Residential Care (RC) I - Old age not falling within any other category DE – Dementia	<b>Number of registered places:</b> 22

### 4.0 Inspection summary

An unannounced inspection took place on 06 November 2017 from 09.30 to 16.25 hours.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standard (Updated 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.

There were examples of good practice found for example, in relation to the availability of a safe place to enable residents to deposit money or valuables; clear descriptions of the controls in place in the home to safeguard residents' money and valuables and evidence that income and expenditure records had been regularly reconciled.

Areas requiring improvement were identified for example, in respect of improving how residents' income and expenditure is recorded; updating policies and procedures and in respect of providing up to date individual agreements to residents which are consistent with the regulatory framework.

Two residents spoken with expressed their contentment with the current arrangements to support them in managing their money; they were clear on who they would speak with should they decide in future that they did not want the current arrangements to continue.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents experience.

## 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	4	6

Details of the Quality Improvement Plan (QIP) were discussed with Regina Brady, 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.

## 5.0 How we inspect

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 residents' 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 two matters to be followed up were addressed during discussions with the registered manager.

During the inspection, the inspector met briefly with the shift leader and subsequently with the registered manager, and two residents. Discussions established that the home did not employ an administrator.

The following records were examined during the inspection:

- The residents' guide
- The statement of purpose
- Draft written policies and procedures addressing: "Resident's Money and Valuables", "Accounting and Financial Control Arrangements" and Resident's Clothing, Laundry and Furniture"
- Written policy and procedure "Standard 15: Residents' money and valuables are safeguarded" dated May 2013
- One record of residents' personal property (in their room)
- A sample of residents' income and expenditure records
- Four residents' care files
- One resident's individual written agreement
- Evidence of the reconciliation of residents' monies and valuables
- A sample of treatment records for hairdressing and private podiatry services facilitated within the home

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 October 2017

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

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

The home has not previously received an RQIA finance inspection.

## 6.3 Inspection findings

### 6.4 Is care safe?

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

Discussions with the registered manager confirmed that adult safeguarding was mandatory for all staff in the home. She was able to clearly describe the day to day controls in the home to safeguard residents' money and valuables. 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 resident.

The home had a safe place available for the deposit of cash or valuables belonging to residents; 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 residents was lodged for safekeeping; valuables belonging to one resident were being held.

The record of valuables held for one resident had been written into the duplicate receipt book, the same book used to record the deposit of cash. On the back of the page on which the record had been made was a note "reconciled", this had been dated and initialled by two people.

It was noted that the home should have a composite written safe record/register to clearly record the contents of the safe place; this was not in place on the day and was highlighted as an area for improvement. The safe record should be reconciled to the safe contents by two people at least quarterly.

#### **Areas of good practice**

There were examples of good practice found for example; a safe place was available to enable residents to deposit money or valuables.

## Areas for improvement

One area for improvement was identified during the inspection in relation to introducing a written safe record to provide a composite record of the safe contents.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	1

### 6.5 Is care effective?

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

The registered manager confirmed that no representatives of the home were acting as nominated appointee for any resident (ie: managing a resident's social security benefits on their behalf). She also reported that the home was not in direct receipt of the personal monies of any resident from either a HSC trust or other appointed representative e.g.: a Solicitor.

The registered manager described how the home was in receipt of money from the families of residents in order to pay for additional goods or services for which there was an additional charge, such as hairdressing, podiatry, or other sundries.

On the day of inspection, the home was holding monies for safekeeping for a small number of residents. It was noted that for the majority of residents, the home paid for additional goods and services required by residents, the cost of which was subsequently billed to the relevant resident's representative.

Records were available to detail the amounts paid by the home on goods and services. The registered manager reported that on a weekly basis, the details of same were sent to the home's accountant who would in due course provide updated statements to the manager for individual residents. The registered manager reported that these were in turn provided to representatives, or settled from amounts on deposit for the small number of residents with cash deposited to pay for those goods and services.

For residents who had cash on deposit with the home, records of income and expenditure were maintained in a spiral bound ledger book which had been used for many years. It contained the income and expenditure records for any resident for whom the home had held money in the past and it was noted to be in poor condition. The records for residents were spread throughout the book and expenditure receipts had been stapled to the pages which had significantly compromised the integrity of the records.

Income and expenditure receipts were available and a sample of transactions was traced to the corresponding lodgement receipt or expenditure receipt. On reviewing the records it was noted that bar a few entries, transactions recorded had not been signed.

The inspector advised the registered manager to cease the use of the book and instead to introduce an alternative method which would capture all of the information required, including two signatures for transactions. The registered manager noted that an alternative method was already in place for recording the home's petty cash and that this method could therefore be used for residents' monies.

This was identified as an area for improvement.

The sample of income and expenditure records reviewed established that reconciliations were being carried out and recorded by two people at least quarterly. On checking balances of monies held in the safe place for residents, one resident's balance of cash was found to be £50.00 over the recorded balance.

The most recent receipt written stated that £50.00 had been given to the resident; the receipt had only been signed by one member of staff. The member of staff was on duty on the day of inspection and the registered manager requested that they join the discussions to assist with the query. The member of staff confirmed that the receipt had been written in error and should have detailed that £50.00 was given to the home for the resident, not given to the resident. The inspector highlighted to the staff member the vulnerable position they had put themselves in by failing to have the receipt signed by a second member of staff. It was noted that staff handling cash should always have a second person to verify the entry and highlighting this message to staff was emphasised to the registered manager.

On reviewing a sample of the income and expenditure records, it was noted that a Boots loyalty points card had been used when making purchases of toiletries on behalf of residents. The registered manager reported that Boots was the home's provider of medication for residents and as such, benefited from a discount on items purchased there; she noted that this was passed onto the residents.

The registered manager confirmed that the card used had been hers personally; however she was no longer in possession of it, as Boots were planning to issue a joint discount and points card and this had not yet been received by the home.

The registered manager reported that the Boots card was only used when making purchases for residents and that the points earned had been used to purchase Christmas gifts for the residents. On the day of inspection, the registered manager could not provide any written evidence of how the Boots points had been redeemed.

The practice of using a personal loyalty card without having evidence of how the points earned have benefited the residents was identified as an area for improvement.

As noted above, hairdressing and private podiatry treatments were being facilitated within the home. A sample of records were reviewed which were found to detail the date, the name of the resident, the treatment received (and the cost) and the signature and/or name of the person who had provided the treatments.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see the property records for three residents. A review of the care files identified that only one resident had a written record of property on their file. This had been dated May 2016 but the "staff completing" section had not been signed by the person making the record. The remaining two residents did not have a record on their file. The registered manager reported that the records could have been archived. She advised that it was planned that these records would be updated on an annual basis, however this had not yet been addressed for all the residents in the home.

It was noted that each resident in the home should have a record which is easily accessible to enable it to be kept up to date.

This was identified as an area for improvement.

Discussions with the registered manager and a review of one resident’s care file evidenced that the resident had been formally assessed as “not to have capacity in regards to (their) personal finances.” It was highlighted that should this be the case for any resident, the registered manager is required to notify the referring trust (at least annually or as specified in the resident’s agreement) of the amount of money or valuables held by the home on behalf of the resident.

On the day of inspection, the home was holding a sum of cash in the safe place belonging to the resident. The residents’ file provided no evidence that the referring trust had been written to as required.

This was identified as an area for improvement.

Discussion established that the home did not operate any bank accounts for residents, either individually or jointly; the home did not provide transport services to residents nor did the home operate a comfort fund for donations.

**Areas of good practice**

There were examples of good practice found for example, in relation to evidence that residents’ money and valuables had been regularly reconciled and treatment records available to detail hairdressing and private podiatry services facilitated in the home.

**Areas for improvement**

Four areas for improvement were identified during the inspection. These related to income and expenditure records; the use of personal loyalty/points cards when making purchases for residents and records of residents’ furniture and personal possessions which they have brought into their rooms.

	Regulations	Standards
<b>Total number of areas for improvement</b>	3	1

**6.6 Is care compassionate?**

**Residents and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

Day to day to day arrangements in place to support residents were discussed with the registered manager. She described specific examples of how the home supported a number of residents with their money. Discussion established that arrangements to safeguard a resident’s money would be discussed with the resident or their representative prior to, or at the time of the resident’s admission to the home.

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. This included ongoing verbal feedback, and annual quality review.

Arrangements for residents to access money outside of normal office hours were discussed with the registered manager. The registered manager explained that the shift leader on duty had access to the safe place; therefore residents had access to their monies at all times.

Two residents spoken with expressed their contentment with the current arrangements to support them in managing their money; they were clear on who they would speak with should they decide in future that they did not want current arrangements to continue.

### Areas of good practice

There were examples of good practice found in respect of the arrangements in place to support individual residents spoken with during the inspection and mechanisms to obtain feedback and views from resident and their representatives.

### Areas for improvement

No areas for improvement were identified during the inspection.

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

#### 6.7 Is the service well led?

**Effective leadership, management and governance which creates a culture focused on the needs and experience of residents in order to deliver safe, effective and compassionate care.**

The residents' guide was requested and the registered manager obtained this and the statement of purpose from the foyer of the home.

The statement of purpose included a brief statement detailing that the home could "keep a small amount of money for each resident who are unable to handle their affairs." The document also noted that "...receipts will be kept for all purchases made on behalf of residents and two signatures will be present". As noted in section 6.5 of this report, two signatures were not being consistently recorded against transactions and ensuring that a standard financial ledger format is used (including two signatures) was identified as an area for improvement.

The resident guide detailed that hairdressing services were available and it noted that a price list was included in the appendix to the guide; however the guide did not contain an appendix. The guide contained the tariffs for the home from the period April 2016 to April 2017 and did not therefore detail the current tariffs effective from April 2017 onwards.

Ensuring that the resident guide is reviewed and updated was identified as an area for improvement.

Written policies and procedures were discussed with the registered manager. The registered manager reported that the home was currently reviewing all financial policies and procedures and several draft policies were provided to the inspector. These policies addressed "Resident's Money and Valuables", "Accounting and Financial Control Arrangements" and Resident's

Clothing, Laundry and Furniture". The registered manager also provided a copy of the home's policy entitled "Standard 15: Residents' money and valuables are safeguarded"; she noted that this was the current policy used in the home. A review of this policy identified that it was dated May 2013. The inspector highlighted that this policy should have been updated by May 2016, at the latest, as policies should be subject to at least, a three yearly review.

This was identified as an area for improvement.

Individual resident agreements were discussed with the registered manager and a sample of three residents chosen in order to review individual agreements in place between the home and each resident or their representative. The registered manager advised that the documents were contained within the care files and these were provided for review.

A review of the three files identified that two residents did not have a written agreement on their file. This was discussed with the registered manager who advised that the agreement for one of the residents which had been signed had been provided to another representative of the resident, as the agreement had been signed by the wrong person. There was no evidence on file to reflect this nor had a copy of the original document been made. No explanation was provided as to why the second resident did not have a signed agreement on their file.

The inspector highlighted that there was therefore no evidence that those residents or their representatives had been provided with an individual written agreement, as required by Regulation 5 of the Residential Care Homes Regulations (Northern Ireland) 2005.

The registered person must ensure that each resident or their representative is provided with an individual written agreement detailing the up to date terms and conditions of their stay in the home and including as a minimum, the content of standard 4.2 of the (DHSSPS) Residential Care Home's Minimum Standards, (updated August 2011). Any financial arrangement in place must also be reflected in the resident's agreement with the home.

This was identified as an area for improvement.

The file for a third resident was reviewed and this was noted to contain an agreement which had not been signed by the resident or their representative. There was no evidence that the agreement had been shared with a Solicitor who was detailed to be the resident's financial controller, nor the resident's HSC trust representative.

It was also highlighted that, each resident's written agreement with the home should be updated to reflect any changes to fees payable or any other matter as detailed in the agreement. Changes to the agreement should be agreed in writing with the resident or their representative.

This was identified as an area for improvement.

On the day of inspection, the home did not have any written authorisations in place to spend residents' monies on identified goods and services or set out any individual arrangements to support identified residents with their monies. The registered manager noted that the home had been preparing to introduce these documents with residents to duly define the scope of what the home had authority to purchase and a template for adaptation was shown to the inspector.

The introduction of said authorisations detailing any additional financial arrangement in place for residents was identified as an area for improvement.

## Areas of good practice

There were examples of good practice found for example, in respect of the development of written financial policies and procedures to guide practice in the home and in respect of plans to implement written authorisations to provide the home with authority to spend residents' monies on identified goods and services.

## Areas for improvement

Five areas of improvement were identified as part of the inspection. These related to updating the home's resident guide; updating relevant policies and procedures; providing an individual written agreement (which is consistent with the regulatory framework) to each resident; ensuring that written agreements are kept updated with any changes agreed in writing and ensuring that the financial arrangements in place to support residents (including authorisation to make purchases of goods or services) are agreed in writing.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	4

### 7.0 Quality improvement plan

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

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

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

### 7.1 Areas for improvement

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

### 7.2 Actions to be taken by the service

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

## Quality Improvement Plan

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

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 19 (2) Schedule 4 (9)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 13 November 2017</p>	<p>The registered person shall ensure that a standard financial ledger format is used to clearly and accurately detail transaction for residents. This format captures the following information each time an entry is made on the ledger: the date; a description of the entry; whether the entry is a lodgement or a withdrawal, the amount; the running balance of the resident's cash total held and the signatures of two persons to verify the entry in the ledger.</p> <p>The book being used to record income and expenditure on the day of inspection should no longer be used and instead a clear, detailed record should be available setting out the information as above.</p> <p>Ref: 6.5</p>
	<p><b>Response by registered person detailing the actions taken:</b> The ledger has been replaced with an individual sheet for each resident reflecting the guidance above.</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 07 November 2017</p>	<p>The registered person shall ensure that representatives of the home do not use personal loyalty cards to benefit from purchases made on behalf of residents in the home.</p> <p>Ref: 6.5</p>
	<p><b>Response by registered person detailing the actions taken:</b> Loyalty card no longer in use. Last used September 2016.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 19 (2) Schedule 4 (10)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 27 November 2017</p>	<p>The registered person shall ensure that a record is maintained of the furniture and personal possessions which each resident has brought into their room.</p> <p>Ref: 6.5</p>
	<p><b>Response by registered person detailing the actions taken:</b> An inventory detailing furniture and personal possessions is done on admission and then annually. We rely on the residents/representatives informing us of any subsequent items brought into the home and removed from the home between these times.</p>

<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 5</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 27 November 2017</p>	<p>The registered person shall ensure that each resident is provided with a written agreement which specifies the fees payable by or in respect of the resident for the provision of accommodation and personal care. The written agreement must detail the method of payment of the fees and the person(s) by whom the fees are payable.</p> <p>(The content of each resident's individual agreement must be consistent with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards).</p> <p>Ref: 6.7</p>
<p><b>Response by registered person detailing the actions taken:</b> Residents agreements have been updated as detailed above and have been issued to current residents and issued upon admission.</p>	
<p><b>Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).</b></p>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 15</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 13 November 2017</p>	<p>The registered person shall ensure that a written safe record is introduced to provide a composite record of the safe contents. The safe record should be reconciled to the safe contents by two people at least quarterly. Evidence of the reconciliations should be signed and dated by two people.</p> <p>Ref: 6.4</p>
<p><b>Response by registered person detailing the actions taken:</b> Introduced and reconciliations in place.</p>	
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 15.8</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 November 2017</p>	<p>The registered person shall ensure that if any resident has been assessed as incapable of managing their affairs, the amount of money or valuables held by the home on behalf of the resident is reported in writing by the registered manager to the referring trust at least annually or as specified in the resident's agreement.</p> <p>Ref: 6.5</p>
<p><b>Response by registered person detailing the actions taken:</b> This is noted and implemented.</p>	
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 20.9</p> <p><b>Stated:</b> First time</p>	<p>The registered person shall ensure that the residents' guide is updated to reflect the current tariffs payable and includes the appendix/appendices referenced in the body of the guide.</p> <p>Ref: 6.7</p>
<p><b>To be completed by:</b> 13 November 2017</p>	<p><b>Response by registered person detailing the actions taken:</b> Resident's guide has been updated to reflect the current tariffs and include any appendix that has been referenced.</p>

<b>Area for improvement 4</b> <b>Ref:</b> Standard 21.5 <b>Stated:</b> First time <b>To be completed by:</b> 06 December 2017	<p>The registered person shall ensure that policies and procedures are subject to a systematic three yearly review. The financial policies should be reviewed and updated as necessary.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b>  Finance policy and procedures have been updated.  The three yearly review has been noted.</p>
<b>Area for improvement 5</b> <b>Ref:</b> Standard 4.6 <b>Stated:</b> First time <b>To be completed by:</b> 06 December 2017	<p>The registered person shall ensure that the resident or their representative is given written notice of all changes to the agreement and these are agreed in writing by the resident or their representative. Where the resident or their representative is unable to sign or chooses not to sign, this is recorded.</p> <p>Ref: 6.7</p> <p><b>Response by registered person detailing the actions taken:</b>  Any changes to the written agreements will be actioned as detailed above.</p>
<b>Area for improvement 6</b> <b>Ref:</b> Standard 15.2 <b>Stated:</b> First time <b>To be completed by:</b> 06 December 2017	<p>The registered person shall ensure that the current arrangements to support residents with their monies and the records to be kept (including arrangements for making purchases of goods and services on behalf of residents) are detailed in writing within the resident's individual agreement.</p> <p>Ref: 6.5</p> <p><b>Response by registered person detailing the actions taken:</b>  The home's arrangements to support residents with their monies are fully detailed in the updated resident's agreement.</p>

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



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