

Unannounced Finance Inspection Report 06 February 2018



Rocky Acres

Type of Service: Residential
Address: 8 Portavogie Road, Ballyhalbert, BT22 1BU
Tel No: 028 4275 8715
Inspector: Briega Ferris

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 13 beds that provides care for older residents, or those living with dementia.

3.0 Service details

Organisation/Registered Provider: Rocky Acres Responsible Individual(s): Margaret Cully Jean Cully	Registered Manager: Margaret Cully
Person in charge at the time of inspection: Margaret Cully	Date manager registered: 01 April 2005
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia	Number of registered places: 13

4.0 Inspection summary

An unannounced inspection took place on 06 February 2018 from 10.15 to 12.45 hours.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

The inspection assessed progress with any areas for improvement identified during and since the last finance inspection (if any) 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 adult safeguarding training; the availability of a safe place in the home (although this was not used to store money or valuables belonging to residents); in relation to listening to and taking account of the views of residents and the availability of written policies and procedures to guide record keeping and financial practices in the home.

An area of improvement was identified in relation to ensuring that each resident or their representative is given written notice of all changes to their individual written agreement, which are agreed in writing by the resident or their representative.

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 shared with Margaret Cully, registered manager, as part of the inspection process. The timescales for completion commence from the date of 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.

During the inspection, the inspector met with the registered manager, who is also the responsible individual. The deputy manager was not scheduled to be in the home on the day of the inspection. A poster detailing that the inspection was taking place was positioned in a prominent position in the home, however no visitors or representatives chose to meet with the inspector.

The following records were examined during the inspection:

- The resident guide
- Written policies and procedures in respect of:
 - Gifts to staff, due for review 1st April 2020
 - Policy on residents' records and reporting arrangements, to be reviewed April 2018
 - Resident's money and valuables and are safeguarded
 - Complaints Policy- recording, due for review 2021
 - Whistleblowing, revised November 2016
- A sample of charges in respect of care and accommodation fees
- Three residents' individual written agreements with 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 January 2018

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

6.2 Review of areas for improvement from the last finance inspection

The home has not previously received an RQIA finance inspection.

6.3 Inspection findings

6.4 Is care safe?

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

The registered manager confirmed that adult safeguarding training was mandatory for all staff. Records were reviewed which confirmed that the deputy manager (the key person with financial administration responsibilities) had most recently received this training in October 2017. The registered manager explained that it was the home's policy not to hold money or valuables in the home which belonged to residents and therefore none were being held on the day of inspection.

Discussions established 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, however as noted above, this was not used to store money or valuables belonging to residents.

Areas of good practice

There were examples of good practice found, adult safeguarding training was mandatory for all staff and a safe place was available in the home.

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.

Arrangements in place for the home to receive the personal monies of any resident directly were discussed. The registered manager confirmed that no representative of the home was acting as nominated appointee for any resident (i.e.: managing and receiving social security benefits on a resident's behalf). In addition, she explained that no personal monies were otherwise received on behalf of residents from any source.

She explained that the cost of services attracting an additional charge such as hairdressing or personal toiletries were met by the home in respect of the payment of a third party top up charge. She noted that podiatry services were provided to residents via the Health and Social Care Trust and that any additional items over and above (such as extra toiletries, clothing etc) were supplied by families.

The home did not therefore engage in purchases of goods or services on behalf of any resident and no income and expenditure records were therefore maintained.

Invoices were maintained to detail the charges levied to residents for the care and accommodation and a sample identified that the correct amounts had been charged.

The inspector discussed how residents' property (within their rooms) was recorded and requested to see the completed property records for three randomly sampled residents. The registered manager reported that these were held on each resident's care file and the files were provided for review. The registered manager provided a copy of the template used to record property which was entitled "Inventory of Possessions" and a copy of the completed template was evidenced on a fourth resident's file.

A review of the three sampled files identified that the records were not on file. The registered manager reported that a number of the records had been archived in January 2018 and that the requested records had also been inadvertently archived. Records of the "Inventory of Possessions" for the three residents sampled were subsequently provided to RQIA.

During the inspection, the registered manager confirmed that no bank accounts were managed on behalf of residents; the home did not operate a comfort fund nor did the home provide transport services to residents.

Areas of good practice

There were examples of good practice found: a sample of charges for care and accommodation identified that the correct amounts had been charged.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

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

The arrangements to support residents with their money on day to day basis were discussed with the registered manager. As noted above, the registered manager explained that no residents' monies or valuables were handled or safeguarded by the home in any way.

Discussion established that the home had a number of methods in place to encourage feedback from residents or their representatives in respect of any issue, including ongoing day-to-day feedback, relative and resident meetings and satisfaction questionnaires.

Areas of good practice

There were examples of good practice identified for example, in relation to listening to and taking account of the views of residents.

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 residents in order to deliver safe, effective and compassionate care.

The resident guide encompassed a range of information for a new resident, including general information regarding fees payable and the goods and services receivable in respect of the total weekly charge. The guide also contained a sentence regarding the third party top up but did not reflect the comments from the registered manager in respect of the specific goods and services which were covered by this portion of the total weekly fee payable.

Advice was provided to the registered manager in respect of considering making more explicit, those additional goods and services provided in respect of the third party top up charge payable per week.

A range of written policies and procedures were easily accessible and addressed practices in the home including record keeping and gifts to the home. Policies were also evidenced which addressed the management of complaints and whistleblowing.

Discussion was held regarding the individual written agreements in place with residents and three residents were sampled to review the agreements in place. This review evidenced that all three residents had a signed agreement on their files; however only one of the three agreements detailed the up to date weekly fee arrangements for the resident. The remaining two residents' agreements detailed fees payable for the 2016/2017 year.

Updating all residents' agreements to reflect the up to date fee arrangements (which should be agreed in writing by the resident or their representative) was identified as an area for improvement.

A review of the individual written agreement template identified that it made reference to a range of additional goods and services provided in respect of the "weekly fee". This included hairdressing services which the registered manager had explained was part of the third party top up charge specifically. Advice was provided to the registered manager in respect of considering making more explicit within the individual written agreement template, those additional goods and services provided in respect of the third party top up charge payable per week, not simply the total (overall) weekly fee payable.

Areas of good practice

There were examples of good practice found for example, in respect of the availability of written policies and procedures to guide record keeping and financial practices in the home and each resident sampled had an individual written agreement in place with the home (albeit a number of these required updating).

Areas for improvement

One area for improvement was identified during the inspection. This related to updating all residents' agreements to reflect the up to date fee arrangements. These changes should be agreed in writing by the resident or their representative.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were shared with Margaret Cully, registered manager and responsible individual, 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 DHSSPS Residential Care Homes Minimum Standards (Updated August 2011).

<p>Area for improvement 1</p> <p>Ref: Standard 4.6</p> <p>Stated: First time</p> <p>To be completed by: 07 March 2018</p>	<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>Response by registered person detailing the actions taken: This is an will be done. We do not receive information regarding the new fees until April of each year therefore the 2018 agreements were not given to Residents until after this date - hence the reason why they hadn't been updated..</p>

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



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