

# Announced Finance Inspection Report 9 November 2016



**2-1-2 Old Hollywood Road**  
Residential Home  
212 Old Hollywood Road, Hollywood, BT18 9QS  
Tel No: 028 9042 5554  
Inspector: Joseph McRandle

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

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced inspection of 212 Old Hollywood Road took place on 9 November 2016 from 10:15 to 15:30 and 28 November 2016 from 9:30 to 11:30. Less than twenty four hours' notice was given prior to the inspection.

During the inspection a number of concerning matters arose relating to how the registered provider was managing residents' finances. Following the inspection the registered manager attended a meeting with RQIA on 20 December 2016 to discuss the concerns arising from the inspection. At this meeting, the registered manager provided RQIA with assurances that the areas of concern were being addressed.

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?**

Evidence was reviewed which confirmed that a safe place was provided within the home for the retention of monies and valuables belonging to residents.

Discussion with the registered manager confirmed that staff had received training in relation to the safeguarding of residents' monies.

No areas of improvement were made.

### **Is care effective?**

Evidence confirmed that a reconciliation of resident's monies was undertaken on a regular basis. One area of improvement was identified in relation to the system of reconciling residents' monies and valuables. A recommendation was made.

Evidence confirmed that no copies of letters sent to residents or their representatives informing them of previous increases in fees were retained within residents' files. A recommendation was made.

Evidence confirmed that a bank account was operated on behalf of one resident. One area of improvement was identified in relation to the management of the resident's bank account. A recommendation was made.

Evidence confirmed that the inventory of residents' personal possessions and items of furniture were not regularly updated following admission to the home. A recommendation was made.

Evidence confirmed that the policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies did not reflect all of the procedures currently operated at the home e.g. the procedure for staff to purchase items on behalf of residents. A recommendation was made.

**Is care compassionate?**

Evidence confirmed that residents' agreements included a provision which allowed the registered provider to apply an interest charge to residents for late payment of their fee. One area of improvement was identified in relation to this finding. A recommendation was made.

Evidence confirmed that a transport scheme was operated at the home. Transport agreements detailing the terms and conditions of the scheme, including the rate per mile were issued to the residents and their representatives. One area of improve was identified, this was in relation to ensuring that two signatures were recorded on the documents used to provide the details of journeys undertaken by residents. A recommendation was made.

Evidence confirmed that the financial arrangements for a number of residents were not included within their written agreements. A recommendation was made for these arrangements to be included within the agreements.

**Is the service well led?**

Evidence confirmed that a resident's guide was in place at the time of inspection which included the details of the services provided to residents as part of the weekly fee. The guide also included a list of the charges for additional services provided at the home e.g. hairdressing.

Evidence confirmed that written agreements were in place for residents. The agreements reviewed did not show the current weekly fee. A recommendation was made for residents' agreements to be updated.

Areas of improvement were identified in relation to the controls in place for the purchasing of items undertaken on behalf of residents. A requirement was made.

Evidence confirmed that residents enjoyed a takeaway meal every Saturday night. The registered manager confirmed that the meal was in place of the scheduled evening meal. The inspector highlighted to the registered manager that meals were included in the fees received from the Health and Social Care Trusts and that residents should not be paying for the takeaway meals in this instance. One requirement and one recommendation were made.

During the inspection on 28 November 2016 the registered manager informed the inspector that the practice of purchasing takeaway meals had been suspended pending an upcoming meeting with representatives from the South Eastern Health and Social Care Trust (SEHSCT). The manager stated that the current practice of providing takeaway meals would be discussed during the meeting.

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

**1.1 Inspection outcome**

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	3	10

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mr Thomas Alan Edwin Kerr, 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

There has been no previous RQIA finance inspection of 212 Old Hollywood Road.

## 2.0 Service details

<b>Registered organisation/registered provider:</b> Cornerstone Care Limited 212 Ltd	<b>Registered manager:</b> Irene McBurney
<b>Person in charge of the home at the time of inspection:</b> Mr Thomas Alan Edwin Kerr	<b>Date manager registered:</b> 26 June 2014
<b>Categories of care:</b> RC-LD, RC-LD(E)	<b>Number of registered places:</b> 6

## 3.0 Methods/processes

Prior to the inspection, it was ascertained that no incidents involving residents' finances had been reported to RQIA in the last twelve months. The record of calls made to RQIA's duty system was reviewed and did not identify any relevant issues. Contact was also made with the inspector who had most recently visited the home.

During the inspection the inspector met with the registered manager. No relatives or visitors chose to meet with the inspector.

The following records were examined during the inspection:

- Three residents' finance files.
- The residents' guide.
- The statement of purpose
- Three residents' written agreements.
- Code of Behaviour for Staff, Volunteers and Visitors
- Records of transactions made on behalf of three residents.
- Copies of invoices forwarded to residents' for transport costs.
- Records from bank account managed for one resident
- Records of safe contents.
- Financial policies and procedures.
- Transport policy for residents.
- Policy on takeaway meals
- Property records for one resident.

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 15 September 2016.

The most recent inspection of the home was an unannounced care inspection. No requirements or recommendations were listed during this inspection.

### 4.2 Review of requirements and recommendations from the last Finance inspection.

There has been no previous RQIA finance inspection of this home.

### 4.3 Is care safe?

A safe place was provided within the home for the retention of monies and valuables belonging to residents. Monies held on behalf of one resident were counted, the amount retained agreed to the balance recorded at the home. No valuables were held on behalf of residents at the time of the inspection. There were satisfactory controls around the physical location of the safe place and the staff members with access.

Discussion with the registered manager confirmed that staff had received training in relation to safeguarding residents' monies. Review of the "Code of Behaviour for Staff, Volunteers and Visitors" stated that staff and volunteers receive training including guidelines on the handling of vulnerable adult's money. The registered 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 the registered manager confirmed that there were no finance related restrictive practices in place for any resident.

#### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
-------------------------------	----------	-----------------------------------	----------

### 4.4 Is care effective?

Review of records and discussion with the registered manager confirmed that no member of staff at the home 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 registered 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.

Discussion with the registered manager confirmed that monies held on behalf of residents were reconciled on a monthly basis. There were no records to confirm that residents' monies were reconciled by the home at least quarterly, as in line with standard 15.12 of the DHSSPS Residential Care Homes Minimum Standards (2011).

A recommendation is listed within the QIP of this report in relation to this finding.

A provision was included in the residents' agreements for residents or their representatives to be informed 28 days in advance of any increase in fees. Review of three residents' files evidenced that no copies of letters sent to residents or their representatives informing them of previous increases in fees were retained within the files.

A recommendation is listed within the QIP of this report in relation to this finding.

Discussion with the registered manager and review of records confirmed that a bank account was operated on behalf of one resident. The inspector and registered manager discussed the arrangements in place for managing the bank account. Following the discussion the registered manager agreed to contact the SEHSCT to discuss the possibility of transferring the monies into a Patient Private Property (PPP) account at the Trust.

A recommendation is listed within the QIP of this report in relation to this matter.

Discussion with the registered manager and review of records confirmed that an inventory of residents' property was maintained when residents were admitted to the home. Discussion with staff also confirmed that these records were not always updated following admission e.g. televisions located in residents' bedrooms.

A recommendation is listed within the QIP of this report for residents' records of personal possessions and items of furniture to be reviewed and brought up to date. Any additional items brought into the home or items that have been disposed of (for which staff have been informed of) should be recorded. The records should be signed and dated by two members of staff; the records should be reconciled at least quarterly.

Policies and procedures for the management and control of residents' finances were in place at the time of the inspection. The policies did not reflect all of the procedures currently operated at the home e.g. the procedure for staff to purchase items on behalf of residents and the procedure for residents being charged for takeaway meals.

A recommendation is listed within the QIP of this report for the policies and procedures to be reviewed and updated to reflect all of the practices undertaken on behalf of residents. The policies should include a procedure for staff returning receipts from purchases within a reasonable time period. A record should be maintained showing that all staff have read and understood the revised policies and procedures.

### **Areas for improvement**

Five areas for improvement were identified during the inspection. These related to reviewing the system of recording the reconciliations of residents' monies, update residents' files with copies of correspondence informing them of any increase in fees, update records of residents' personal possessions and items of furniture following admission and reviewing and updating the financial policies and procedures operated at the home.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>5</b>
-------------------------------	----------	-----------------------------------	----------

#### 4.5 Is care compassionate?

Review of three resident's agreements showed that a provision was included which allowed the registered provider to apply an interest charge to residents for late payment of their fees. Discussion with the registered manager and review of records confirmed that no residents were previously charged for late payments. Following a discussion with the inspector the registered manager agreed to review the agreements with the consideration of the provision being removed as the majority of residents' fees are paid by the Health and Social Care Trusts. The registered manager also agreed to discuss the findings with the SEHSCT.

A recommendation is listed within the QIP of this report in relation to this finding.

Review of records and discussion with staff confirmed that a transport scheme was operated at the home. Transport agreements detailing the terms and conditions of the scheme, including the rate per mile were issued to the residents and their representatives. A sample of records were examined, the records showed the date of the journey, the names of the residents undertaking the journey and the number of miles incurred. The total miles incurred were divided equally among the residents and subsequently invoiced to the residents on a monthly basis. Only one signature was recorded against the transport sheets used to show the details of the journeys.

A recommendation is listed within the QIP of this report for two signatures to be recorded to confirm that the journeys took place.

Review of three residents files showed that the financial arrangements for each resident were not included within their written agreements, as in line with standard 4.2 of the DHSSPS Residential Care Homes Minimum Standards (2011) e.g. the arrangements for managing a bank account on behalf of a resident and the arrangements for making purchases on behalf of residents.

A recommendation is listed within the QIP of this report, for residents' agreements to include their financial arrangements.

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

#### Areas for improvement

Three areas for improvement were identified during the inspection. These related to: reviewing the provision of charging interest to residents for late payment of fees, the recording of two signatures against the journeys undertaken by residents and the recording of residents' financial arrangements within their written agreements.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>3</b>
-------------------------------	----------	-----------------------------------	----------

#### 4.6 Is the service well led?

Review of records confirmed that copies of payment remittances from Health and Social Care Trusts showing the weekly fee for each care managed resident were retained at the home.

The remittances also showed the amount of fees paid by the Trusts on behalf of residents and the contributed to be paid directly by the residents towards their fee (if applicable).

A resident's guide was in place at the time of inspection which included the details of the services provided to residents as part of the weekly fee. The guide also included a list of the charges for additional services provided at the home e.g. hairdressing.

The guide included a written agreement which was issued to residents on admission to the home. Review of three residents' files evidenced that individual written agreements were in place for all three residents. The agreements did not show the current weekly fee paid by, or on behalf of, the residents. All three agreements were not signed by the resident or their representative.

A recommendation is listed within the QIP of this report for written agreements to be updated with the current fee charged to residents. The agreements should be signed by the resident or their representative (if resident lacks capacity to make decisions in relation to the agreement).

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.

Review of records of purchases made by staff showed that on three occasions monies belonging to one resident were withdrawn and handed over to the same staff member. No details of the purchases were recorded on the resident's transaction sheet and no receipts were available from the purchases made by the member of staff. Only one signature was recorded against the transactions.

The inspector raised concerns with the registered manager in relation to the absence of records. The registered manager stated that the receipts were available and made a request for time to locate them. RQIA agreed with the request and the inspection was postponed until 28 November 2016. The records had still not been located by the time the inspection resumed on 28 November.

A declaration signed by the registered manager and staff member was provided to the inspector during the inspection on 28 November 2016. The declaration stated that the monies handed to the staff member on the three identified dates were used to purchase clothing and toiletries for the resident.

A requirement is listed within the QIP of this report for the system of recording purchasing on behalf of residents to be reviewed. Receipts must be retained from all purchases and the full details of the purchase must be recorded. At least two signatures must be recorded against the transactions at all times.

A recommendation has been previously listed within this report in relation to updating the policies and procedures operated at the home to include purchases made on behalf of residents and the return of receipts.

During the inspection on 9 November 2016 the registered manager informed the inspector that residents' enjoyed a takeaway meal every Saturday night. The registered manager stated that the home paid for the meal and the cost was subsequently divided amongst the residents



availing of the meal. When asked by the inspector, the registered manager confirmed that the meal was in place of the scheduled evening meal.

During the discussion with the registered manager, the inspector highlighted that the cost of meals was included in the fees received from the Health and Social Care Trusts, therefore residents should not be paying for takeaway meals in this instance.

During the inspection on 28 November 2016 the registered manager informed the inspector that the practice of purchasing takeaway meals had been suspended pending an upcoming meeting with representatives from the SEHSCT. The manager stated that the current practice of providing takeaway meals would be discussed during the meeting.

A requirement is listed within the QIP of this report for the charging of takeaway meals to residents which are in place of scheduled meals to cease with immediate effect.

A further requirement is listed for the registered manager to inform RQIA of the outcome of the discussions with the SEHSCT. The discussions should facilitate the reimbursement to residents for the meals previously paid for.

A recommendation is also listed within the QIP in relation to updating the policy and procedure operated at the home for takeaway meals.

### Areas for improvement

Five areas for improvement were identified during the inspection. These related to updating residents' agreements with the current fee, reviewing the system of recording purchases made on behalf of residents, the practice of charging residents' for a takeaway meal in place of a scheduled meal, informing RQIA of the outcome of discussions with SEHSCT in relation to takeaway meals and the updating of the policy and procedure on takeaway meals.

<b>Number of requirements</b>	<b>3</b>	<b>Number of recommendations:</b>	<b>2</b>
-------------------------------	----------	-----------------------------------	----------

## 5.0 Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Thomas Alan Edwin Kerr, 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/manager 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 this 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 the RQIA would apply standards current at the time of that application.

### 5.1 Statutory requirements

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

### 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered provider(s) may enhance service, quality and delivery.

### 5.3 Actions taken by the registered manager/registered provider

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered provider will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to [agencies.team@rqia.org.uk](mailto:agencies.team@rqia.org.uk) and assessed 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/manager 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/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

## Quality Improvement Plan

### Statutory requirements

<p><b>Requirement 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> 31 May 2017</p>	<p>The registered provider must ensure that the system of recording purchasing made on behalf of residents is reviewed in order to improve the accuracy of recording and to aid the audit process.</p> <p>The system must include the retention of receipts from purchases undertaken by staff at all times. Where a receipt is not available, the record must be annotated to reflect this. At least two signatures must be recorded against the transactions at all times.</p>
	<p><b>Response by registered provider detailing the actions taken:</b> A new system has been implemented for retaining all receipts from purchases undertaken by staff. There has been an updated recording sheet created. The policy also states that all transactions must be signed by two staff, the Manager, Deputy, or Provider and a second member of staff.</p>
<p><b>Requirement 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> 29 November 2016</p>	<p>The registered provider must ensure that the practice of charging residents for takeaway meals in place of a scheduled meal ceases immediately.</p>
	<p><b>Response by registered provider detailing the actions taken:</b> At present there are no charges to residents for takeaway meals until such times as we receive feedback from the Trust.</p>
<p><b>Requirement 3</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered manager must inform RQIA of the outcome of the discussions with the SEHSCT in relation to charging residents for takeaway meals. The discussions should facilitate the reimbursement to residents for the meals previously paid for.</p>
	<p><b>Response by registered provider detailing the actions taken:</b> Awaiting response from the BHSCT regarding this matter.</p>

<b>Recommendations</b>	
<b>Recommendation 1</b> <b>Ref:</b> Standard 15.12 <b>Stated:</b> First time <b>To be completed by:</b> 31 May 2017	<p>The registered provider should ensure that the system of reconciling monies held on behalf of residents is reviewed in order to facilitate the audit process. The reconciliations should be undertaken at least quarterly.</p> <p>The record of the reconciliation should be signed by the person undertaking the reconciliation and countersigned by a senior member of staff.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            A document has been created to allow the home to hold monies and valuables in the homes' safe for residents. Reconciliation of monies held for residents has commenced and will be undertaken at least quarterly.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            The policy has been updated stating all correspondence sent to residents or their representatives regarding increases in fees will be retained in residents files. This will be the procedure in the future.</p>
<b>Recommendation 2</b> <b>Ref:</b> Standard 4.7 <b>Stated:</b> First time <b>To be completed by:</b> 31 May 2017	<p>The registered provider should ensure that copies of correspondence sent to residents or their representatives informing them of any increase in fees are retained within residents' files.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            The policy has been updated stating all correspondence sent to residents or their representatives regarding increases in fees will be retained in residents files. This will be the procedure in the future.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            The BHSCT is now appointee for the resident and 99.5% of the monies have been transferred to the Patients Bank in the Trust. 0.5% of monies remain in the account to keep it open until the trust arrange the transfer of his DLA payment to the trust. Once the DLA payments have been transferred to the trust we will close the account. The trust have not specified a time period for this action to be completed.</p>
<b>Recommendation 3</b> <b>Ref:</b> Standard 16.1 <b>Stated:</b> First time <b>To be completed by:</b> 30 June 2017	<p>The registered provider should ensure that the SEHSCT is contacted in relation to the possibility of transferring the monies from the resident's bank account, identified during the inspection, into a Patient Private Property (PPP) account at the Trust.</p> <p>The registered provider should inform RQIA of the outcome of the discussions.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            The BHSCT is now appointee for the resident and 99.5% of the monies have been transferred to the Patients Bank in the Trust. 0.5% of monies remain in the account to keep it open until the trust arrange the transfer of his DLA payment to the trust. Once the DLA payments have been transferred to the trust we will close the account. The trust have not specified a time period for this action to be completed.</p>
	<p><b>Response by registered provider detailing the actions taken:</b>            The BHSCT is now appointee for the resident and 99.5% of the monies have been transferred to the Patients Bank in the Trust. 0.5% of monies remain in the account to keep it open until the trust arrange the transfer of his DLA payment to the trust. Once the DLA payments have been transferred to the trust we will close the account. The trust have not specified a time period for this action to be completed.</p>

<p><b>Recommendation 4</b></p> <p><b>Ref:</b> Standard 8.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered provider should ensure that the inventory of residents' possessions and items of furniture is reviewed and brought up to date. Any additional items brought into the home or items that have been disposed of (for which staff have been informed of) should be recorded. The records should be signed and dated by two members of staff; the records should be reconciled at least quarterly.</p>
<p><b>Recommendation 5</b></p> <p><b>Ref:</b> Standard 20.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered provider should ensure that the policies and procedures operated at the home are updated to include all of the financial procedures undertaken by staff on behalf of residents e.g. the procedure for staff to purchase items on behalf of residents.</p> <p>The policy should include a provision for staff to return receipts from purchases made on behalf of residents within a reasonable time scale.</p> <p>A record should be retained showing that staff have read and understood the policies and procedures.</p> <p><b>Response by registered provider detailing the actions taken:</b> The policy now states that all purchases and receipts must be returned within four days. Recording form has now included a date when receipts have been received by home. The updated policy has been read by staff and signatory form completed to show staff have read policy.</p>
<p><b>Recommendation 6</b></p> <p><b>Ref:</b> Standard 4.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered provider should ensure that the residents' agreements are reviewed in relation to the application of an interest charge for late payments for those residents whose fees are paid by the Health and Social Care Trusts.</p> <p>The revised agreements should be issued to residents or their representatives. A signed copy of the updated agreements should be retained within residents' files.</p> <p><b>Response by registered provider detailing the actions taken:</b> The residents agreements have been reviewed and the interest charge for late payments has been removed. The updated individual agreements have been issued to next of kin and a signed copy will be kept in residents file when returned.</p>

<p><b>Recommendation 7</b></p> <p><b>Ref:</b> Standard 20.14</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 29 November 2016</p>	<p>The registered provider should ensure that the records showing the details of residents' journeys are signed by the driver and a second member of staff.</p> <p><b>Response by registered provider detailing the actions taken:</b> Records show two signatures are required however this has been reiterated at the staff meeting and documented in the staff minutes.</p>
<p><b>Recommendation 8</b></p> <p><b>Ref:</b> Standard 15.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered provider should ensure that details of residents' financial arrangements are included in their agreements e.g. the arrangements for managing a bank account on behalf of a resident, identified during the inspection, and the arrangements for making purchases on behalf of residents.</p> <p><b>Response by registered provider detailing the actions taken:</b> The revised individual agreement will include the charge agreed by the Health Trust and the arrangements for making purchases on behalf of residents. The arrangements for managing a bank account on behalf of a resident is no longer required.</p>
<p><b>Recommendation 9</b></p> <p><b>Ref:</b> Standard 4.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 017</p>	<p>The registered provider should ensure that updated written agreements are in place for all residents accommodated at the home.</p> <p>The agreements should detail the current amount paid by the Health and Social Care Trust and the current contribution paid by residents.</p> <p>Agreements should be signed by residents or their representatives (if resident lacks capacity to make decisions in relation to the agreement) and a representative from the home. Where a resident or their representative is unable or chooses not to sign this should be recorded.</p> <p>Copies of the signed agreements should be retained within residents' files.</p> <p><b>Response by registered provider detailing the actions taken:</b> All residents have been issued with new agreements which details the current cost of the placement. Agreements have been issued to next of kin for signing. If a representative is unable or chooses not sign, this will be recorded on the agreement, dated and signed by Manager of the Home. All signed copies will be retained in the residents file in future.</p>

<p><b>Recommendation 10</b></p> <p><b>Ref:</b> Standard 20.10</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 30 June 2017</p>	<p>The registered provider should ensure that the policy and procedure on takeaway meals is updated to show that residents will not be charged for meals that are already paid for by the Health and Social Care Trusts.</p> <hr/> <p><b>Response by registered provider detailing the actions taken:</b> A new policy and procedure on takeaway meals will be updated once we received feedback from the Trust. Until such times as this is addressed with feedback from the Trust residents will not be charged for takeaway meals.</p>
---	---

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



The Regulation and  
Quality Improvement  
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email [info@rqia.org.uk](mailto:info@rqia.org.uk)

Web [www.rqia.org.uk](http://www.rqia.org.uk)

 @RQIANews