

Inspectorate of Mental Health Services 2013 REPORT

Glenmalure 24-hour Nurse Staffed Community Residence, South Lee Mental Health Services

OVERVIEW

An inspection of this community residence was carried out following a newspaper article alleging that €500 belonging to a mental health client at Glenmalure House was spent at a greyhound track. The article was published in a national daily newspaper on 21 January 2013.

An inspection was carried out on 22 January 2013.

This consisted of a visit to Glenmalure House, a meeting with nursing staff and nursing management of the residence and an inspection of its financial arrangements in relation to residents' monies. During the inspection, residents were informed of the visit but no resident requested to speak with the inspector. Residents were greeted during the course of the inspection by the inspector.

The inspector found that the €500 spent at the greyhound track was part of a "social fund" account paid into on a weekly basis by all residents of Glenmalure House for use by all residents and that the money did not come out of any one resident's account. No receipt or receipts had been retained for this night out.

SERVICE DESCRIPTION

Glenmalure House was a 24-hour supervised community residence located on the Blackrock Road, in the south side of Cork City, approximately two kilometres from the city centre. It was a double-fronted red brick residence of three floors set in a residential area. It opened as a community residence in 1980. It had eighteen beds in eleven bedrooms. Glenmalure House blended in nicely with adjacent houses on the road.

On the day of this inspection there were fifteen residents, all of whom were voluntary. There were no wards of court. There were seven male residents and eight female residents. The age profile of the residents was from 30 years of age to 70. Length of stay varied from one year to 33 years, when the residence was first opened. Two residents had an intellectual disability and mental illness. There was evidence of active rehabilitation: a resident was admitted in each of 2010, 2011 and 2012, a resident was discharged in 2011 and there were three further discharges in 2012, one to a housing association apartment, one to their own home and one to a nursing home.

FINANCIAL ARRANGEMENTS

All residents were either on disability allowance or drew pensions. Each resident had their own bank account, post office account or credit union account and, bar one resident, controlled their own finances. The bank account of one resident, who had an intellectual disability and mental illness, was managed by their family with the

resident's agreement. Staff of the residence did not hold residents' monies or control any bank account, post office account or credit union account belonging to a resident.

Glenmalure House had a "Social Fund Policy for Glenmalure House", a "Policy on Rent Money (Glenmalure House)" and a policy and procedures for Petty Cash which was an old Southern Health Board policy.

Petty Cash was money which belonged to staff and was a system in which staff paid €2.00 per day or €7.00 per week towards the consumption of food that was prepared and cooked in the kitchen of the residence. These monies, paid by staff, were subsequently used for the purchase of items such as light bulbs, clocks, kitchen utensils etcetera, for use in the residence. The Petty Cash account did not involve monies belonging to residents. The books in relation to the Social Fund and Rent Money were made available to the inspector. Receipts were also maintained. The book in relation to Petty Cash was not requested by the inspector as these monies were staff monies.

A Health Service Executive (HSE) internal audit conducted on 15th June 2012 found that:

"Glenmalure House has a Protocol on Staff Meals which indicates that staff pay €2 per day or €7 per week in cash in respect of meals provided by the Unit. Details of cash received and monies expended are maintained in a Meal Money/Petty Cash Book with income used to purchase small items for use in the house (e.g. potato peeler, bulbs etc.)."

Residents at Glenmalure House did not pay their rent by Direct Debit to a HSE bank account from their own individual bank accounts. Staff maintained that this was an unsatisfactory arrangement and they would prefer a system to be put in place by senior management for residents' rent to be paid by direct debit to the HSE bank account.

The HSE internal audit found that:

"The analysis of the Rent Payments Book also indicated that from January 2003 (when this particular book was used for the first time) to July 2007, each individual entry was ticked and certified each week by staff, indicating that amounts received were checked prior to lodgement. Similarly, lodgements were made by staff at that time. However from mid-2007 to the date of audit, there is no indication on the Rent Payments Book that income received was checked. The total amount of cash received in any one week is not currently totalled on the rent book or in the current receipt book. A lodgement is prepared fortnightly and collected by a security company. However, in the absence of evidence of a balancing exercise, it is not possible to ascertain if amounts lodged in the bank are in accordance with amounts received."

The HSE internal audit recommended that:

“Management should review income procedures and documentation on a regular basis to ensure that there is adequate evidence that all income is received on a timely basis and lodged in full at set intervals.”

In addition to a flat charge of €100.00 rent per week to cover bed and board, each resident also voluntarily contributed €6.00 to the social fund on a weekly basis. This money was collected from residents and lodged into a bank account under the name of two members of staff. The social fund catered for Christmas parties, birthday parties, visits to the opera house, the greyhound track, annual holiday in Rosscarbery, flowers for the hallway, summer concerts in the Marquee, payment of the TV channels, TV licence, and daily newspapers.

The HSE internal audit found that:

“Section 14.7.5 of National Financial Regulation 14 [N.F.R. 14] states that residences are not permitted to hold separate bank accounts. Staff at Glenmalure House collect €6 from each resident every week and this money is used to buy newspapers, birthday cakes, flowers for the house, pay for extra TV channels etc. At intervals, any outstanding monies are lodged to a bank account... which staff call the Social Fund Account. A number of different bank accounts have been used for this purpose. The operation of such a bank account where residents’ funds are pooled and managed by HSE staff is contrary to HSE financial regulations.”

The HSE internal audit recommended that:

“Finance Management, South Lee Mental Health Services should ensure that the terms of the National Financial Regulations are adhered to in respect of the operation of bank accounts.”

Staff reported that there was one bank account for the Social Fund. This was held under the name of two present members of staff in Glenmalure. It was contended by staff of Glenmalure that if there was no pooled social fund then items such as birthday cakes, flowers, newspapers and the TV channels could no longer be provided by staff. This would mean for example an ad hoc celebration of some residents’ birthdays, if those residents decided to celebrate their birthday by spending money on it, and the possibility of no celebration for others should that be their wish. Glenmalure, it was asserted by staff, was home for all residents living within and having a social fund was a way of making it as homely as possible for all residents across the board. However, staff voiced that they would prefer that the Social Fund account was not held in their names but having discussed this with the local bank there was no other practical alternative to managing such an account although the present situation was contrary to the National Financial Regulations [N.F.R. 14/Guidelines on Charges for in-patient Services]. It was acknowledged by staff that the present arrangement benefitted residents who may be more socially active and receive money from the social fund to go, for example, to the opera house or to a concert than other residents who might wish to remain less socially active.

But staff felt it was the fairest system possible. It was €500.00 from this social fund that had been used for the residents' night out at the greyhound track and not money from any one resident's account as had been represented in the headline of the newspaper article, "€500 belonging to mental health client spent at greyhound track".

It was reported to the inspector by a member of nursing management that the service was exploring the possibility of the residents operating their own social fund bank account as a community.

An anomaly raised by staff to the inspector was that staff who accompanied residents on outings on a supervisory level, for example, to the opera house or to a concert or to the greyhound track, would have their ticket paid out of the Social Fund, a fund to which staff did not contribute. The service indicated that this was an aspect of its financial procedures it was reviewing.

The HSE internal audit found that:

"Glenmalure House does not comply with the terms of the above regulations [N.F.R. 14/Guidelines on Charges for In-Patient Services] in the methodology used to assess the charge applicable to residents. The regulations state that the financial charge applicable should be based on an assessment of each individual client's financial position. In this residence, a flat charge of €100 per week is currently levied on each client irrespective of means. Control weaknesses were also identified in the collection, recording and lodgment of monies received."

The HSE internal audit recommended that:

"South Lee Mental Health Services Management, in conjunction with Finance Management, H.S.E. South should ensure that charges levied on clients at Glenmalure House are in compliance with all relevant laws and regulations."

The HSE internal audit found that:

"...residents are charged €100 per week irrespective of the number of nights in an individual week that they reside at the residence. It was also noted that if a client does not reside at Glenmalure for a period of time (e.g. for holiday purposes or for hospital care), they are charged a full weeks patient charge for the first week of absence. No charge is then levied if they are absent beyond one week. N.F.R. 14 specifies that rent payments should be adjusted pro-rata if a resident resides at the hostel for 5 nights instead of 7 nights. However, the regulation does not indicate the charge to be applied if a resident is absent and their accommodation is reserved for them until they return."

The HSE internal audit recommended that:

"South Lee Mental Health Services Management, in conjunction with Finance Management, H.S.E. South should undertake a review of charges made in respect of days/weeks when a client is not in residence but their accommodation is retained for

them in their absence, to ensure that all charges raised are supported by appropriate regulations and processes.”

INTERVIEW WITH RESIDENTS

No resident requested to speak to the inspector. Residents were greeted during the course of the inspection.

SUMMARY

Glenmalure House was an 18-bed community residence with an active rehabilitation programme. The standard of care was high as evidenced by inspection of a sample of clinical files. There was evidence of regular team review and regular review of each resident's multidisciplinary individual care plan which was also signed by the resident. There was also evidence of multidisciplinary team input into the clinical files. Staff of the residence presented as being positive, progressive and proactive. A number of staff of Glenmalure House were on the editorial committee of *Speak Your Mind – The Magazine for Positive Mental Health*.

Each resident had their own bank account, post office account or credit union account and, bar one resident, controlled their own finances. The bank account of one resident, who had an intellectual disability and mental illness, was managed by their family with the resident's agreement. Staff of the residence did not hold residents' monies or control any account belonging to a resident.

CONCLUSION

The HSE conducted an internal audit of the procedures and controls relating to Glenmalure House on 15 June 2012. The audit report identified specific areas that needed to be addressed. In particular it stated that the operation of a social fund bank account where residents' funds are pooled and managed by HSE staff is contrary to HSE financial regulations. It could be argued also in this regard that having a social fund is a paternalistic feature of our mental health system and not a feature of a true recovery model in which self-direction, personal autonomy, empowerment, choice, hope and responsibility are facilitated.

The HSE internal audit also identified control weaknesses in the collection, recording and lodgement of monies received from residents of Glenmalure. The audit, however, stopped short of making a recommendation on how these "control weaknesses" might be remedied. The onus for ensuring that any control weaknesses are remedied must be placed on Finance Management, HSE-South, and South Lee Mental Health Services Management in conjunction with staff of Glenmalure House to devise a more robust and secure method of collection of rent monies from residents.

RECOMMENDATIONS

1. The findings of the audit in its entirety should be addressed by Finance Management, HSE-South, and South Lee Mental Health Services Management in conjunction with nursing staff and management of Glenmalure House.
2. A system should be put in place by Finance Management, HSE South, for residents of Glenmalure to pay their rent by Direct Debit to a HSE bank account.
3. Consideration should be given to the possibility of the residents of Glenmalure operating their own Social Fund bank account as a community.
4. The complaints procedure should be displayed in a prominent area of Glenmalure House.