

2 November 2020

Mr P Warren - Gray  
Valley Nursing Home (MPS) Limited  
No. 6 & 7 Key Point Office Village,  
Nix's Hill, Alfreton,  
Derbyshire,  
DE55 7FQ

Dear Mr Warren – Gray

### **Unsatisfactory Performance – Management of Clients Monies**

Further to my letter of 27 May 2020, including Trust Performance Notice, and our meeting of 23 July 2020 in relation to the Trusts concerns in respect of systems of governance, risk management and control with the management of clients monies within the Valley Nursing Home, which were highlighted as 'Unacceptable' in the Internal Audit report, further actions are required.

A short note of the meeting is attached; if you wish to note any changes due to inaccuracies please advise Mrs Pamela McCartney by Friday 6 November 2020.

The file of evidence submitted has been reviewed by the Trust Team and some concerns remain as noted below.

1. **Personal Monies Account** – The position on this has not improved, there has been an increase in the balance due to be paid out in respect of former residents. Further information on improvement is required.
2. **Residents Personal Monies Reconciliation** - There is no copy of the bank statement to facilitate check with the balances. The reconciliation provided does not agree to the lists of balances for each resident. A fully reconciled PA account with support bank statement is required
3. **'Comfort Fund' Reconciliation** – Clarification is required as the bank account is called the Residents Personal Accounts. The cash amount held should be reflected in the Sage ledger, not just the bank balance amount. Failure to record all the monies (cash) on the ledger reduces the controls over the monies held and there is no record of cash income/expenditure.
4. **'Negative' Accounts** - The list of 'Negative' accounts reflects nil balances for all the clients named. Clarification is required as to where there are any 'exceptions' to clearing balances.

Can I ask that you respond to the concerns above directly to Fiona Jones ([Fiona.Jones@southerntrust.hscni.net](mailto:Fiona.Jones@southerntrust.hscni.net)) to allow us to seek to resolve this matter and see improvement embedded that can then be evidenced in the internal audit re-audit.

In respect of your ongoing arrangements to transfer business to a new Provider there are a number of housekeeping financial arrangements that would be expected as part of due diligence and I would ask that these are given due attention. It would be my understanding that these would include but not be limited to resolution of the 4 issues detailed above. It would also be the Trust's expectation that there is a detailed and documented handover of the Residents' Personal Monies to the new Provider with an audit trail from the existing to new bank accounts and of the migration of the individual residents' records to the new Provider's accounting system. This record of the handover must be retained for review by the Trust.

Should you have any queries regarding this please do not hesitate to contact Mrs Monica McAlister Director of Older Peoples Services on 028 3760783 or my office directly.

Yours sincerely



**Mr B Beattie**  
**Director of Older Persons Services (Interim)**

Copy:

Mr S Devlin, Chief Executive, SHSCT

Mr B McNeany, Director of Mental Health and Disability Services

Dr B Brown, Director of Older Peoples Services, Western Health and Social Care Trust

Mr V Ryan, Assistant Director Disability Services, Western Health and Social Care Trust

Mrs M McAlister, Assistant Director of OPPC

Mrs D Hanlon, Head of Adult Safeguarding

Mr J McEntee, Assistant Director of Disability Services

Mrs J McGall, Assistant Director of Mental Health

Mrs A Rutherford, Assistant Director of Finance and Procurement

Mrs F Jones, Senior Financial Manager

Mrs L Leeman, Assistant Director of Performance Improvement

Mrs D Livingstone, Head of Contracts

Mrs M Mitchell, Responsible Individual, HCI

Mr J Gray, COE, MPS Care Limited

**Meeting with The Valley Nursing Home  
23 July 2020 via Zoom**

**Unsatisfactory Performance – Management of Clients Monies**

In attendance

Southern Trust	MPS Care Ltd	Health Care Ireland
Mr Brian Beattie Interim Director of Older People Services (Chair) Mrs Fiona Jones Senior Financial Manager Mrs Lesley Leeman Assistant Director Performance Improvement	Mr P Warren Gray Home Owner Mr J Gray – General Manager Ms Rebekah Ridgely – Finance Officer	Mrs Mandy Mitchell (RI) Mr Barry Casey – Finance Director Ms Mary Stevenson (Operational Manager) Gemma

**1.0 Purpose of Meeting**

Ref: Trust letter of 27 May 2020 and Internal Audit Report on Management of Clients Monies  
Ref: Action Plan submitted to Trust by MPS Care Ltd.

Mr Beattie set out the purpose of the meeting and context of concerns, which related back to previous Internal audit in 2014. The Trusts view is that the good work to address issues at that time have been lost and the Trust is concerned about sustainability of management actions. These issues in the context of other ongoing issues of concerns at The Valley are collectively of concern

The Action Plan, prepared jointly by HCI in respect of current residents and MPS in respect of former residents, was acknowledged and had been reviewed by the Trust teams.

**2.0 Review of Action Plan**

Updates on the Actions plan were provided and discussed and potential dates for completion of actions. Fiona Jones, on behalf of the Trust, acknowledged the work and advised that documentation was required to evidence the Action Plan. Further, for areas which remain outstanding, confirmation was required whether these are on target to be met.

**Action – File of Evidence to be submitted to Trust. Mr Joel Gray advised this would be submitted within the week (Friday 31 July 2020)**

There was acknowledgement of challenges, which may prevail in one or two areas and any such areas to be specifically identified. Joel identified returning of agreements and challenges with accounts of deceased as challenging. Mr Paul Warren Gray advised he had sought legal advice on the management/repatriation of deceased funds and a process is being built in to procedures to ensure identification of legal status of next of kin to avoid such issues going forward

**Action – The Valley to advise the Trust directly of any issues causing difficult or not achievable within the timescales**

Fiona noted specific concern regarding negative balance from a governance perspective.

Mary Stevenson provided an update on the detailed work ongoing to ensure, moving forward, there was a clear plan for current residents including a spend profile and triggers to avoid negative balance including the sourcing of additional funds to cover profile as necessary. Mary noted spend profile were high compared to other homes

Fiona advised if the Valley Care Home was not getting Personal Allowances in from relatives, then processes needed to be in place to trigger a conversation with Trust staff to avoid a restriction on funds impact on clients day to day activities. It was re-affirmed by all parties that there was no intent to develop a scheme that would be too rigid that would negatively impact on clients, however a strong governance process was required to manage this

**Action – Joel Gray advised MPS would link with the Trust directly in respect of issues he was addressing for users no longer in service**

### **3.0 General Issues**

Mary Stevenson identified there were challenges/ delays in sourcing or contacting a Trust key worker. She noted that a list of current key workers has been provided by Deborah Hanlon from the Trust and was waiting same from the Western Trust. Mary also advised that there were examples where key workers appeared to be content that clients maintained a negative balance. Brian Beattie advised this this did not sound like best practice, which he would seek to address

**Action – Mary to provide any specific examples of poor practice from key workers to Aileen Mulligan, SHSCT for follow up**

Paul asked if this issue could be progressed quickly, as HCI and MPS were keen to resolve the issues and to re-open the home to admissions. Lesley Leeman advised that the performance management process would not be formally concluded until the evidence had been reviewed and a re-audit was undertaken by Internal Audit as per the extant process. Lesley did note that the closure to admissions was related to a number of other parallel process and that pending assurances and confidence building in these issues this ongoing internal audit process would not prevent review of the admissions process.

### **4.0 Conclusion**

B Beattie thanked all those present for attending today and for the open and frank nature of discussions, as well as the commitment to resolving any outstanding issues as soon as possible.

**Meeting Ended**