



# RQIA Provider Guidance 2016-17

## Nursing Agencies

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

# What we do

The Regulation and Quality Improvement Authority (RQIA) is the independent body that regulates and inspects the quality and availability of Northern Ireland's health and social care (HSC) services. We were established in 2005 under The Health and Personal Social Services (Quality, Improvement and Regulation)(Northern Ireland) Order 2003 to drive improvements for everyone using health and social care services.

Through our programme of work we provide assurance about the quality of care; challenge poor practice; promote improvement; safeguard the rights of service users; and inform the public through the publication of our reports. RQIA has three main areas of work:

- We register and inspect a wide range of independent and statutory health and social care services.
- We work to assure the quality of services provided by the HSC Board, HSC trusts and agencies - through our programme of reviews.
- We undertake a range of responsibilities for people with mental ill health and those with a learning disability.

We inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

RQIA registers and inspects a wide range of health and social care services. These include: nursing, residential care, and children's homes; domiciliary care agencies; day care settings/centres; independent health care; nursing agencies; independent medical agencies; residential family centres; adult placement agencies; voluntary adoption agencies, school boarding departments and young adult supported accommodation (inspected only).

# The four domains



# How we will inspect

We will inspect every nursing agency at least once every year. Our inspectors are most likely to carry out unannounced inspections, however from time to time we need to give some notice of our inspections.

During our inspections we will inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

When we inspect a nursing agency, we aim to:

- seek the views of the people who use the service, or their representatives. In some cases we will do this before our inspection visit
- talk to the manager and available staff on the day of the inspection
- examine a range of records including policies, care records, incidents and complaints
- provide feedback on the day of the inspection to the manager on the outcome of the inspection
- provide a report of our inspection findings and outline any areas for quality improvement where failings in compliance with regulations and/or standards are identified.

Our inspections are underpinned by:

- The Nursing Agencies Regulations (Northern Ireland) 2005
- The Nursing Agencies Minimum Standards (2008)
- Previous inspection outcomes and any information we have received about the service since the previous inspection

# What we look for when we inspect

To help us to report on whether the care is safe, effective and compassionate and whether the service is well led, we will look for evidence against the following indicators. The evidence listed for each indicator provides examples of what may be reviewed and should not be considered exhaustive.

## Is care safe?

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

### Indicator S1

There are, at all times, suitably qualified, competent and experienced persons working in the service in such numbers as are appropriate for the health and welfare of service users.

#### Examples of Evidence

- Arrangements are in place to ensure that the selection of nurses for supply to any care/treatment setting is made by an identified nurse with appropriate skills and expertise
- The agency has a structured induction programme
- The agency has a procedure in place for induction of nurses required for short notice/ emergency arrangements
- A system is in place to ensure that nurses receive supervision and appraisal in accordance to the required standard and records are retained
- Arrangements are in place to ensure nurses providing clinical care are aware of the local clinical supervision arrangements and how to access these
- Pre-employment checks are undertaken
- There is a written policy and procedure for nurse recruitment

### Indicator S2

The service promotes and makes proper provision for the welfare, care and protection of service users.

#### Examples of Evidence

- Safeguarding training is provided during induction and updated in accordance to the required standard
- The policies and procedures are in line with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership', July 2015
- All suspected, alleged or actual incidents of abuse are fully and promptly investigated in accordance with regional adult safeguarding procedures.
- Where shortcomings in systems are highlighted as a result of an investigation, additional identified safeguards are put in place
- Nurses are aware of their duty in relation to raising concerns about poor practice

**Indicator S3**

There are systems in place to ensure that unnecessary risks to the health, welfare or safety of service users are identified, managed and where possible eliminated.

**Examples of Evidence**

- There are arrangements in place to ensure the nursing agency appropriately assesses the needs and requirements of each request for an agency nurse placement
- Notifiable events when appropriate are reported to RQIA and other relevant organisations
- Arrangements are in place to assure the agency that the nurse's NMC registration is maintained
- The selection of nurses for supply is made by an identified nurse with appropriate skills and expertise who reviews previous roles, practice experience and competency of each nurse and matches appropriate nurse(s) to the requirements of the placement setting

**Indicator S4**

The premises and grounds are safe, well maintained and suitable for their stated purpose.

**Examples of Evidence**

- The registered premises are suitable for the purposes of the agency as set out in the Statement of Purpose

# Is care effective?

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

## Indicator E1

The service responds appropriately to and meets the assessed needs of the people who use the service.

### Examples of Evidence

- Record keeping is in accordance with legislation, standards and best practice guidance
- A policy and procedure is available which supports the creation, storage, recording, retention and disposal of records in accordance to the data protection act
- The agency's Statement of Purpose and Service User Guide makes appropriate references to the nature and range of service provision and where appropriate, includes guidance for nurses and agencies on the implementation and use of restrictive practices
- The provision of nursing care and re-assessment of the patient's ongoing care needs, are agreed with the patient, monitored and recorded on a day-to-day basis. (private patients)
- The provision of care is regularly evaluated and reviewed (private patients).

## Indicator E2

There are arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals.

### Examples of Evidence

- The agency has arrangements in place to complete regular audits and review of service provision. This should be informed by the agencies quality assurance policy and procedure
- The agency maintains a record of any compliments/complaints made by service users
- The agency seeks feedback from service users and/or their representatives on their views regarding the quality of care and support provided by nurses employed by the agency

## Indicator E3

There are robust systems in place to promote effective communication between service users, staff and other key stakeholders.

### Examples of Evidence

- The agency has systems in place to record, monitor and retain service user comments and agency feedback regarding the performance of nursing staff
- The agency maintains records of its contact with service users, and agencies to which it provides staff

# Is care compassionate?

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

## **Indicator C1**

There is a culture/ethos that supports the values of dignity and respect, independence, rights, equality and diversity, choice and consent of service users.

### **Examples of Evidence**

- Staff are aware of the agency's policy and procedure on confidentiality and nurses can demonstrate how they ensure confidentiality
- The agency has robust systems in place to monitor the performance of nursing staff
- There are agreed joint protocols to ensure continued quality monitoring of agency nurse practice
- The agency maintains a record of any comments made by service users and or representatives

## **Indicator C2**

Service users are listened to, valued and communicated with, in an appropriate manner.

### **Examples of Evidence**

- The agency has appropriate systems to ensure that nurses can report concerns they may have regarding a placement
- The agency has a whistleblowing policy and procedure
- The agency seeks and records the views of service users on a regular basis
- There are arrangements in place for involving service users to make informed decisions (private service users)
- There are arrangements for providing information in alternative formats (private service users)
- There is a system to ascertain and take into account the service user's wishes and feelings (private patients)
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## **Indicator C3**

There are systems in place to ensure that the views and opinions of service users, and or their representatives, are sought and taken into account in all matters affecting them.

### **Examples of Evidence**

- The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided
- Service user consultations about the standard and quality of care are carried out on a regular basis
- The agency publishes its findings regarding service user satisfaction.
- The agency has an action plan to develop and improve on the services it provides
- There are systems in place to ensure that service users and service providers can comment on their experience of agency nursing staff

# Is the service well led?

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

## Indicator L1

There are management and governance systems in place to meet the needs of service users.

### Examples of Evidence

- The agency ensures that policies and procedures are reviewed every three years.
- Policies are retained in a manner which is easily accessible
- The agency has appropriate governance arrangements that report on the management of risk
- The agency maintains and implements a complaints policy and procedure in accordance to legislation and DHSSPS standards
- Records are kept of all complaints and these include details of all communications with complainants, the result of any investigation, the outcome and the action taken
- Staff know how to record and manage complaints
- Appropriate governance systems are in place to audit complaints and identify learning
- The agency has an incident policy and procedure which details reporting arrangements to RQIA and other relevant agencies

## Indicator L2

There are management and governance systems in place that drive quality improvement.

### Examples of Evidence

- The agency has a quality improvement programme and associated records
- The agency manages incidents/notifiable events in accordance to local and regional guidelines
- Audits of incidents are undertaken and outcomes are disseminated to staff and service providers
- There are robust systems to assure continued nurse supervision, performance review and performance management
- The agency has a training programme that ensures that nursing staff are appropriately trained
- The agency has systems in place to assure that all nursing staff has completed their required up to date mandatory training

### Quality Improvement

- There is evidence of a systematic approach to the review of available data and information, in order to make changes that improve quality, and add benefit to the organisation and patients

## Indicator L3

There is a clear organisational structure and all staff are aware of their roles, responsibility and accountability within the overall structure.

### Examples of Evidence

- There is a defined organisational and management structure that identifies the lines of accountability, specific roles and details responsibilities of all staff
- Staff are aware of their roles and responsibilities and actions to be taken should they have a concern
- The registered person/s has an understanding of their roles and responsibilities under legislation
- Service users and/or representatives are aware of roles of nurse within the agency and who to speak with if they want advice or have issues/concerns

**Indicator L4**

The registered person/s operates the service in accordance with the regulatory framework.

**Examples of Evidence**

- The Statement of Purpose and Service User Guide are kept under review, revised when necessary and updated
- Registered person/s respond to regulatory matters (e.g. notifications, reports/QIPs, enforcement)
- RQIA certificate of registration is on display and reflective of service provision
- The agency has responded to previous RQIA quality improvement plans

**Indicator L5**

There are effective working relationships with internal and external stakeholders.

**Examples of Evidence**

- There are collaborative working arrangements with external stakeholders e.g. service providers/ private service users and HSC Trusts
- Arrangements are in place for nurse to access their line manager
- There are arrangements in place to support nursing staff (e.g. supervision, appraisal and performance review)
- Discussion with nursing staff confirms that there are good working relationships and that management are responsive to suggestions/concerns
- Nursing staff comments are listened to, recorded and responded to

# Inspection reports

Our inspection reports will reflect the findings from the inspection. Where it is appropriate, a Quality Improvement Plan (QIP) will detail those areas requiring improvement to ensure the service is compliant with the relevant regulations and standards. Where either no requirements or recommendations result from the inspection this will be reflected in the report.

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

Once the inspection report is finalised and agreed as factually accurate, it will be made public on RQIA's website



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