



The Regulation and
Quality Improvement
Authority

Bond Search & Selection Ltd
RQIA ID: 020085
21 James Street South
Belfast
BT2 7GA

Inspector: Joanne Faulkner
Inspection ID: IN025341

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**Unannounced Care Inspection
of
Bond Search and Selection Ltd**

31 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced care inspection took place on 31 March 2016 from 10.30 to 13.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the quality improvement plan appended to this report. This inspection was underpinned by The Nursing Agencies Regulations (Northern Ireland) 2005, and The DHSPSS The Nursing Agencies Minimum Standards (2008).

2. Actions/Enforcement Taken Following the Last Inspection

There were no further actions required to be taken following the last inspection.

3. Actions/Enforcement Resulting From This Inspection

Enforcement action did not result from the findings of this inspection.

4. Inspection Outcome

The details of the QIP within to this report were discussed with the registered manager as part of the inspection process. The timescales for completion commence from the date of inspection

	Requirements	Recommendations
Total Requirements and Recommendations Made	0	2

5. Service Details

Registered Organisation/Registered Provider Bond Search and Selection Ltd/Jonathan Mark St Clare	Registered Manager: Tanya-Rose Mitchell
Person in Charge of the Agency at the Time of Inspection: Tanya-Rose Mitchell	Date Registered: 11 December 2014
Number of Service Users in Receipt of a Service on the Day of Inspection: 6	Number of Registered Nurses, Health Visitors and Midwives on the Agency's Books: 12

Bond Search and Selection Ltd is a registered nursing agency; the registered office is located in the centre of Belfast. The agency supplies registered nurses to a number of nursing homes.

6. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to establish the level of compliance achieved with respect to the following themes:

Theme 1: Nurse Training - The agency has procedures in place to ensure all nurses are appropriately trained and qualified for their roles.

Theme 2: Vulnerable adults and children are protected from abuse.

7. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with the registered manager
- Review of records
- Observation during inspection of the premises
- Evaluation and feedback

Prior to inspection the following records were examined:

- Notifiable events submitted since the previous care inspection
- Written and verbal communication received since the previous care inspection

The following records were examined during the inspection:

- Staff training and induction records
- Dates of staff supervision/appraisal
- Selected policies and procedures
- Accident and incident records
- Record of complaints
- Safeguarding of Vulnerable Adults referral information
- Staff Handbook
- Quality monitoring feedback
- Training and Development Policy (October 2014)
- Whistleblowing Policy (October 2015)
- Agency staff recruitment checklists

Staff questionnaires were completed by three staff members following the inspection; they indicated the following:

- Two staff are very satisfied with training provided in relation to safeguarding vulnerable adults and children.
- Staff are very satisfied that they have the knowledge, skills and competencies to carry out their job role.
- Staff have been provided with a staff handbook.
- Staff are satisfied that they receive regular supervision.

A comment made by one staff member in relation to costs relating to training was discussed with the registered manager prior to the issuing of the report; the inspector was informed that the matter would be discussed at all staff supervision sessions.

Comments of a service user:

- “The agency meets our needs and requirements.”
- “We receive details of staff training and experience; this is included in the staff profile.”
- “I have no concerns; the manager is approachable and responsive to comments made.”
- “The manager phones regularly to check that I am satisfied with the service provided.”
- “Communication is good; I would have no hesitations in contacting the manager if I had concerns or issues.”
- “They provide us with continuity of staff.”

The inspector would like to thank the registered manager, the service user and staff for their support and co-operation throughout the inspection process.

8. The Inspection

8.1 Review of Requirements and Recommendations from Previous Inspection

There were no further actions required to be taken following the last inspection.

8.2 Theme 1: Nurse Training - The agency has procedures in place to ensure all nurses are appropriately trained and qualified for their roles.

Is Care Safe?

The agency’s staff training and development policy, October 2014, outlines the induction programme provided to staff prior to employment; it was noted that the content is in accordance with RQIA guidance on mandatory training. It was identified by the inspector that the agency has in place an electronic system for recording training and identifying when training updates are required; the manager stated that the database is reviewed monthly.

The registered manager confirmed that agency staff are not provided until all of the necessary pre-employment checks and documentation relating to training have been received and verified. They stated that staff are alerted when training updates are required. It was noted that from records viewed and discussion with the manager that staff are provided with a staff handbook during their induction.

Training records viewed indicate that staff have completed the required mandatory training, and in addition, training specific to meet the requirements of individual service users.

The registered manager could describe instances when staff are required to complete specific training to meet the needs of individual clients.

The agency requests that service users complete a monthly questionnaire in relation to staff provided; these were viewed by the inspector. The manager stated that the agency contact service users by phone to obtain feedback in relation to the service provided; a record is maintained.

Is Care Effective?

Prior to employment agency staff are required to complete the required mandatory training; a record of training completed is maintained and was viewed during the inspection.

It was noted from records viewed that staff are provided with annual supervision and appraisal. The registered manager stated that staff are encouraged to liaise at any time with the agency in relation to their individual training needs and it was noted that training is discussed during supervision and appraisal meetings.

The registered manager stated that service users are informed of the process for contacting the agency to provide feedback and to discuss concerns in relation to the competency of staff provided. It was identified from discussion with the manager and from records viewed that the agency has a process for obtaining the views and comments of service users in relation to staff provided and for addressing competency issues with staff.

The registered manager stated that when concerns relating to staff members are identified the agency will address the concerns with the staff nurse immediately, and whilst the process is ongoing the staff member would not be provided to work. They discussed the benefits of ensuring staff complete updated training when issues have been identified.

Is Care Compassionate?

The agency has a process for obtaining the views of service users; the registered manager described the process for engaging with the relevant service users in order to obtain feedback. It was noted from record viewed that service users are encouraged to identify their individual requirements in relation to staff to be provided.

Areas for Improvement

There were no areas for improvement identified within Theme 1.

Number of Requirements	0	Number Recommendations:	0
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8.3 Theme 2: Vulnerable adults and children are protected from abuse.

Is Care Safe?

The inspector viewed the agency's policy for safeguarding of vulnerable adults and children, October 2014. It outlines the procedures to be followed and makes relevant reference to current legislation and regional protocols issued by the Health and Social Services Board. It was identified that the agency is required to review and update their policy in line with DHSSPS guidance issued in July 2015.

The registered manager stated that staff are required to complete training in protection of vulnerable adults and safeguarding children during induction; it is planned that staff will be required to complete training annually. The inspector viewed records of induction and training which indicated that staff have completed relevant training. It was noted that staff are required to complete an assessment and evaluation of training provided.

It was identified that staff are provided with details of the process for reporting any suspected, alleged or actual incidents of abuse being identified.

The registered manager could describe the process for reporting of any incidents of suspected, alleged or actual abuse and the mechanism for liaising with the appropriate bodies in relation to any investigation they are required to be involved in. They could describe their role in providing relevant information to the NMC.

Is Care Effective?

From records viewed and discussion with the manager it was identified that staff are required to complete safeguarding vulnerable adults training during induction; it includes information in relation to types and indicators of abuse and the agency's policy and procedures in relation to protection of vulnerable adults and children. Electronic records viewed indicate that staff provided by the agency have completed the relevant training.

The registered manager could describe the safeguards implemented by the agency to ensure vulnerable adults; children and young people are protected from abuse. These included the arrangements in place that ensure that pre-employment checks are completed and considered, and that staff provided have completed relevant training. The manager stated that the agency monitors the NMC register monthly for any changes.

The registered manager described their role and responsibility regarding reporting and investigation in the event of an allegation of abuse being made, and the processes for engaging with the health and social care trusts. Records viewed and discussions with the registered manager indicate that appropriate actions have been taken and procedures followed.

Is Care Compassionate?

The registered manager stated that, prior to placement, agency staff nurses are provided with the relevant information to ensure they are aware of the appropriate action to be taken in the event of a suspicion of, or actual abuse. Records viewed indicate that staff provided by the agency have completed the relevant training and are required to complete a training competency evaluation.

The agency has a process for recording of all incidents of suspected, alleged or actual abuse identified; records viewed indicate that appropriate procedures have been followed.

The agency's 'Whistleblowing Policy', October 2015, outlines the responsibility of staff in highlighting concerns relating to poor practice and the procedures to be followed. It was identified that reference is made as to the role of RQIA in relation to whistleblowing.

Areas for Improvement

There was one area for improvement identified within Theme 2:

Standard 2.1

This relates specifically to the agency's Safeguarding of Vulnerable Adults and Children Policy which requires updating in line with DHSSPS July 2015 guidance.

Number of Requirements	0	Number Recommendations:	1
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8.4 Additional Areas Examined

8.4.1 Complaints

The agency's complaints policy outlines the procedure for handling complaints. It was verified from records viewed and discussion with the manager that the agency has received no complaints for the period 1 January 2014 to 31 March 2015.

8.4.2 Quality Monitoring

It was noted from records viewed and discussions with the manager that agency seeks the views of service users in relation to the quality of the services provided; a record is maintained. However, it was noted that the agency did not have in place a robust system for reviewing the quality of services provided by the agency.

Areas for Improvement

There was one area for improvement identified:

Standard 1.12

It is recommended that the registered person monitors the quality of services in accordance with the nursing agency's written procedures and completes a monitoring report on a monthly basis. This report summarises the comments of people who use the services and/or their representatives about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the nursing agency is being managed in accordance with minimum standards.

Number of Requirements	0	Number Recommendations:	1
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9. Quality Improvement Plan

The issues identified during this inspection are detailed in the Quality Improvement Plan. Details of this Quality Improvement Plan were discussed with the registered manager as part of the inspection process. The timescales commence from the date of inspection.

Registered providers/managers 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 Quality Improvement Plan 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 your premises. 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.

9.1 Statutory Requirements

This section outlines the actions which must be taken so that the Registered Person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Nursing Agencies Regulations (Northern Ireland) 2005.

9.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Nursing Agencies Minimum Standards (2008). They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

9.3 Actions Taken by the Registered Manager/Responsible Person

The Quality Improvement Plan will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The responsible person 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 to be assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 2.1</p> <p>Stated: First time</p> <p>To be Completed by: 30 June 2016</p>	<p>It is recommended that the registered person ensures that policies and procedures, as identified in Appendix 3 for the management of the nursing agency and supply of nurses, are in place and in accordance with statutory requirements.</p> <p>This relates specifically to the agency's Safeguarding of Vulnerable Adults and Children Policy.</p>		
	<p>Response by Registered Person(s) Detailing the Actions Taken: The policy for Safeguarding of Vulnerable Adults and Children has now been updated to reflect that the appropriate authorities will carry out any investigation required rather than Bond Healthcare.</p>		
<p>Recommendation 2</p> <p>Ref: Standard 1.12</p> <p>Stated: First time</p> <p>To be Completed by: 31 May 2016</p>	<p>It is recommended that the registered person monitors the quality of services in accordance with the nursing agency's written procedures and completes a monitoring report on a monthly basis. This report summarises the comments of people who use the services and/or their representatives about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the nursing agency is being managed in accordance with minimum standards.</p>		
	<p>Response by Registered Person(s) Detailing the Actions Taken: A report template has now been designed to record the quality of services in accordance with Bond Healthcare's procedures to include the findings of any complaints, incidents and comments from service users and any action taken in order to improve the quality of services being provided</p>		
Registered Manager Completing QIP	TANYA MITCHELL	Date Completed	18/05/2016
Registered Person Approving QIP	JONATHAN ST.CLARE	Date Approved	18/05/2016
RQIA Inspector Assessing Response	Joanne Faulkner	Date Approved	24/05/16

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to agencies.team@rqia.org.uk from the authorised email address