

Inspection Report

11 August 2022



Just Nurses

Type of Service: Nursing Agency Address: Belfast City Office, 54 Elmwood Avenue, Belfast, Antrim, BT96AZ Tel No: 028 9553 1831

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <u>https://www.rqia.org.uk/</u>

1.0 Service information

| Organisation/Registered Provider: | Registered Manager: | | | |
|--|---|--|--|--|
| The Placement Group (Holdings) PLC | Mrs Polly Adgey | | | |
| Responsible Individual: | Date registered: | | | |
| Mrs Laurie Percival (Applicant) | 10 March 2021 | | | |
| Person in charge at the time of inspection: Mrs Polly Adgey | | | | |
| Brief description of the agency operates: | | | | |
| This is a nursing agency which supplies nurses to a range of healthcare settings including | | | | |
| Health and Social Care Tructo and care has | man The agency ourrently has 222 purses | | | |

Health and Social Care Trusts and care homes. The agency currently has 233 nurses available for supply within Northern Ireland.

2.0 Inspection summary

An announced inspection was undertaken on 11 August 2022 between 10.00 a.m. and 3.30 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction / training and adult safeguarding.

Adult safeguarding arrangements, complaints, whistleblowing, and the system for retaining records were also reviewed; this included the system for managing alerts issued by the Chief Nursing Officer (CNO).

Good practice was identified in relation to the monitoring of nurses registrations with the Nursing and Midwifery Council (NMC). There were good governance and management arrangements in place.

For the purposes of the inspection report, the term 'service user' describes the hospitals or care homes into which the agency supplies nursing staff work in.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users.

Following information received by RQIA on 1 July 2022 and subsequent discussion with the Manager concerning the management of an adult safeguarding incident, serious concerns were identified in relation to the lack of effective governance and managerial oversight. The agency was then invited to an intention to serve a Failure to Comply notice (FTC) meeting on 14 July 2022. Following review of information provided by the Responsible Individual and Manager during and following the FTC meeting, RQIA decided not to serve the FTC; a revised action plan submitted to RQIA by the Manager following the FTC meeting, informed the focus of this inspection.

As a public-sector body, RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of nursing agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from service users that the agency takes all reasonable steps to promote people's rights. People in receipt of nursing care have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. They should also experience their individual choices and freedoms.

Information was provided to service users and staff on how they could provide feedback on the quality of services. This included an electronic survey.

4.0 What people told us about the agency?

As part of the inspection process we contacted a number of service users and registered nurses.

The information provided indicated that there were no concerns in relation to the agency.

Registered Nurses' comments:

- "Management are brilliant."
- "Nothing is too much trouble, excellent communication."
- "I wouldn't want to work anywhere else."
- "Training was excellent."

There were a number of staff and service users that responded to the electronic survey. The respondents indicated that they were very satisfied that care provided was safe, effective and compassionate and that the service was well led. The written comments included;

- "They are very responsive to our needs and concerns. I definitely recommend Just Nurses to all."
- "I enjoy my work and do my best for those that I care for. Just Nurses have ensured that I am up to date with my training by providing opportunities for me to complete same."
- "Fantastic agency to be part of."

5.0 The inspection

5.1 What has this agency done to meet any areas for improvement identified at or since last inspection?

The last inspection of this agency was undertaken on 22 February 2022 by a care inspector.

| Areas for improvement from the last inspection on 22 February 2022 | | | |
|---|--|-----------------------------|--|
| Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005 | | Validation of compliance | |
| Area for improvement 1 Ref: Regulation 14 (2)(a) Stated: First time | The registered person shall ensure that each employee of the agency receives appropriate supervision; records of supervisions should be retained and include the dates nurses availed of clinical supervision undertaken on long term placements. | | |
| To be completed by: Immediate from the date of the inspection | Action taken as confirmed during the inspection: Review of governance records confirmed that robust arrangements were in place in regard to the scheduling of formal supervision sessions for staff; the records also evidenced that additional staff supervisions were conducted as and when needed. | Met | |
| Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008 | | Validation of compliance | |
| Area for improvement 1 Ref: Standard 1.15 Stated: First time To be completed by: | The registered person shall ensure that policy and procedure is further developed, to ensure reporting incompetence and poor performance is in line with guidelines issued by the DHSSPS; this refers to the process for requesting alerts to be raised by the Chief Nursing Officer (CNO). | Met | |

| Immediate from the date | | |
|-------------------------|---|--|
| of the inspection | | |
| | | |
| | Action taken as confirmed during the | |
| | inspection: | |
| | Discussion with the Manager confirmed that | |
| | the policy and procedure for CNO alerts had | |
| | been developed and evidence of CNO alerts | |
| | that had been made. | |
| | | |

| Area for improvement 2 Ref: Standard 9.1 | The registered person shall ensure the Adult Safeguarding policy and procedure is reviewed and is in accordance with regional policies and procedures. | |
|---|---|-----|
| Stated: First time To be completed by: Immediate from the date of the inspection | Action taken as confirmed during the inspection: Discussion with the Manager confirmed that the safeguarding policy had been reviewed and was in accordance with regional policy. | Met |

5.2 Inspection findings

5.2.1 What systems are in place for staff recruitment and are they robust?

A review of the agency's staff recruitment records confirmed that pre-employment checks including criminal record checks (AccessNI), were completed and verified before registered nurses were supplied to the various health care settings.

The manager had a robust system in place to monitor alerts issued by the Chief Nursing Officer for Northern Ireland.

5.2.2 What are the arrangements to ensure robust managerial oversight and governance?

A review of the records confirmed that all registered nurses were appropriately registered with the NMC. Information regarding nurses' registration details, renewal and revalidation dates was monitored by the manager; this system was reviewed and found to be in compliance with regulations and standards. Records had been retained of any referrals the agency made to the NMC.

It was good to note that supervisions had been undertaken with the registered nurses in response to matters such as: any issues about their practice being identified, for NMC revalidation purposes or on the nurse's request. It was noted that an action plan had been developed by the Manager following a review of supervision records which had identified gaps in relation to the completion of planned supervisions. Progress against this action plan will be reviewed for at a future inspection.

The action plan referred to in Section 3.0. was reviewed and it was noted that appropriate actions had been taken. There was clear communication and systems in place that will help prevent the agency's nursing staff from directly booking themselves into shifts which have not been authorised by the agency. There was also a system in place which gave the Manager effective oversight of nurses' working patterns and hours worked.

There was a system in place to ensure that the nurses were placed into settings where their skills closely matched the needs of patients. Nurses were provided with training appropriate to the requirements of the settings in which they were placed. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding, Dysphagia, National Early Warning Score (NEWS) and the Management of Actual or Potential Aggression (MAPA), as appropriate to their job roles.

The content of the Adult Safeguarding policy and training was reviewed and was noted to reflect the regional guidance in Northern Ireland.

There were quality monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the agency's quality monitoring established that there was engagement with service users and staff. It was noted that the reports routinely monitored any incidents as part of the monthly checks to identify any patterns or trends.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the agency's quality monitoring process.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures

The alphabetical list of staff employed by the agency was up to date.

Records were retained in accordance with the Nursing Agencies Regulations (Northern Ireland) 2005.

The agency's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

The responsible person (applicant) had submitted a registration application on 19 June 2022 to RQIA; this application remains ongoing at present.

6.0 Conclusion

RQIA was satisfied that the agency was providing nurses in a safe, effective and compassionate manner and that the agency was well led by the manager.

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the manager as part of the inspection process and can be found in the main body of the report.





The **Regulation** and **Quality Improvement Authority**

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