

Announced Care Inspection Report 02 March 2021



Just Nurses

Type of Service: Nursing Agency

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Inspector: Aveen Donnelly

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

1.0 What we look for



2.0 Profile of service

This is a nursing agency which supplies nurses to a range of healthcare settings including four Health and Social Care Trusts.

3.0 Service details

Organisation/Registered Provider: BHSCT – The Placement Group Responsible Individual: Paul Carnera	Registered Manager: Not applicable
Person in charge at the time of inspection: Manager	Date manager registered: Polly Adgey - application received - “registration pending”.

4.0 Inspection summary

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

The last care inspection was undertaken on 30 January 2020.

Since the date of the last care inspection, a number of correspondences were received in respect of the agency. Whilst RQIA were not aware of any specific concerns in relation to the agency, the decision was made to undertake an onsite inspection approach, adhering to social distancing guidance.

An announced inspection took place on 02 March 2021 from 10.00 to 14.30 hours.

We reviewed recruitment records for staff employed by the agency to ensure that the relevant pre-employment checks had been undertaken before they were supplied to the various healthcare settings. We checked that all staff were registered with the Nursing and Midwifery Council (NMC) and that there was a system in place for ongoing monitoring of staff registrations. We reviewed Covid-related information which had been disseminated to staff. The inspection also assessed progress with any areas for improvement identified during and since the last inspection.

Areas requiring improvement related to the recruitment processes, particularly in relation to the appropriateness of references, employment histories, gaps in employment and the need for reasons for leaving employment to be recorded. Further areas for improvement were made, in relation to the need to audit all recruitment records, to identify and rectify deficits; and in relation to further developing the adults safeguarding policy, to ensure that the procedure for monitoring staff involvement in safeguarding incidents is robust.

Evidence of good practice was found in relation to staff registrations with the NMC. Good practice was also found in relation to system in place of disseminating Covid-related information to staff.

Feedback received from the four trusts, who used the nurses, was very positive. The manager of the agency was consistently praised in terms of her responsiveness to any issues raised.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	2	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with the manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

4.2 Action/enforcement taken following the most recent care inspection dated 30 January 2020

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 30 January 2020.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, to obtain feedback in relation to the performance of the registered nurses provided. Comments received are detailed within the report.

We checked the recruitment records, to ensure that the appropriate checks were in place before nurses were supplied to the various health care setting.

Recruitment records specifically relating to Access NI and the NMC registration.

We discussed any complaints and incidents that had been received by the agency with the manager and in addition we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 20 of Nursing Agencies Regulations (Northern Ireland) 2005.

A poster was provided for nurses detailing how they could complete an electronic questionnaire.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

6.0 What people told us about this agency

Positive feedback was received in relation to the performance of the registered nurses provided. Comments are detailed below:

- “At present we have experienced no difficulties.”
- “With regards to communication and any problem solving we request, Just Nurses are great and always respond in a very timely manner.”
- “The nurses have been of a fair standard in terms of supply to (Trust). The responsiveness of the agency has always been excellent. The registered manager is very thorough with any issues we have come across.”
- “Just Nurses have a nurse manager that replies and acts very quickly if we have any concerns raised with them.”

Registered Nurses provided the following comments:

- “I am so pleased with Just Nurses and would like to give them all my praises. They are one of the best agencies I have worked with. They are very accommodating and always check on me to make sure I am comfortable with the placements.”
- “Just Nurses are an excellent agency to work with and indeed work for.”
- “Excellent agency who are very attentive to your needs. Always accommodating.”
- “I have worked shifts that have been organised in a timely manner. Paid on time. They listened to any concerns I had and were always available if required.”
- “I have had a very positive experience from the signing up with Just Nurses, the training provided and the ongoing support from Recruitment Consultant and Nurse Manager. Recognition of my skills and praise for my work is always a bonus and it is appreciated especially in this stressful and unprecedented time with Covid.”
- “Very efficient recruitment and ensuring all training up to standard and up to date. They also remind me if anything is almost due to be renewed. Excellent communication emails and ensuring shifts are suitable for my skills and vice versa.
- “Helpful support throughout pandemic. Highly recommend this agency and staff.”

6.0 The inspection

Areas for improvement from the last care inspection dated 30 January 2020		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2008		Validation of compliance
Area for improvement 1 Ref: Standard 3.4 Stated: First time To be completed by:	The registered person shall ensure that the information held on record is accurate, up to date and necessary. Older versions of policies and procedures should be archived in accordance with the records management policy and procedure.	Met

<p>13 February 2020</p>	<p>Action taken as confirmed during the inspection: The review of the policy folder identified that a robust system was in place, to ensure that they were systematically reviewed.</p>	
<p>Area for improvement 2 Ref: Standard 3.7 Stated: First time To be completed by: With immediate effect from the date of this inspection</p>	<p>The registered person shall review the system for storing staff supervision records to ensure they are held in a secure manner within staff personnel records.</p> <p>Action taken as confirmed during the inspection: We reviewed the system in place for storage of supervision records and were satisfied that this had been addressed.</p>	<p>Met</p>
<p>Area for improvement 3 Ref: Standard 1.8 Stated: First time To be completed by: 28 February 2020</p>	<p>The registered person shall ensure the Statement of Purpose and Service User Guide has been reviewed and updated to reflect the name of the current registered manager.</p> <p>Action taken as confirmed during the inspection: The review of both documents confirmed that this had been addressed.</p>	<p>Met</p>
<p>Area for improvement 4 Ref: Standard 8.1 Stated: First time To be completed by: 28 February 2020</p>	<p>The registered person shall ensure the complaints policy and procedure has been reviewed and amended and is in accordance with legislation and Department of Health (DOH) 2019 guidance on complaints management.</p> <p>Action taken as confirmed during the inspection: The review of the complaints policy identified that it had been further developed in keeping with the DOH Guidance.</p>	<p>Met</p>

6.1 Inspection findings

The review of three staff records identified deficits in the recruitment processes. Whilst two references had been received for each staff member, concerns were identified in relation to the references not being sought from the last employer. In two of the three records reviewed, the agency had sought the reference from the last agency placement, as opposed to seeking the reference from the nurses' last employer. Whilst we acknowledge the merits in viewing this as the most appropriate place to get feedback on the nurses' practice, the last agency placement would not ordinarily be aware of any broader performance issues, nor

would they be aware of any safeguarding issues the nurse may have been involved in. In the third record, neither of the two references were recent.

The review of the recruitment records also identified deficits in relation to the recording of employment histories. This was evidenced in two records reviewed. In one record, two references had been received from employers that had not been included in the previous employment history. In the second record, information from HMRC identified that the nurse had previously worked in an identified agency. This was not included in the previous employment history. Reasons for leaving were not recorded in any of the records reviewed. Gaps in employment were also evident in two of the three records reviewed. These matters were discussed with the manager and the responsible person, by way of an enhanced feedback meeting, held on 21 April 2021. An area for improvement has been made in this regard, to ensure that the recruitment processes are in keeping with the regulations and standards. A further area for improvement has been made, to ensure that an audit of all recruitment records to identify and rectify any deficits.

Governance and Management Arrangements

We reviewed the quality monitoring processes to ensure that complaints and any incidents were routinely monitored as part of the monthly checks in line with Regulation 20 of Nursing Agencies Regulations (Northern Ireland) 2005. Discussion with the manager and a review of the records confirmed that any concerns regarding nurses' performance, had been managed appropriately. However, advice was given in relation to further developing the adults safeguarding policy to ensure that the procedure for monitoring staff involvement in safeguarding incidents is robust. This related specifically to the need to amend the application form and the supervision proforma to include a question regarding any current safeguarding investigations the nurse may be involved in. An area for improvement has been made in this regard.

There was a system in place to monitor nurse registrations with the NMC.

We reviewed the system in place for disseminating Covid-related information to staff.

The manager had a robust system in place to monitor alerts issued by the Chief Nursing Officer (CNO).

Areas of good practice

Evidence of good practice was found in relation to staff registrations with the NMC. Good practice was also found in relation to system in place of disseminating Covid-related information to staff.

Areas for improvement

Areas requiring improvement related to the recruitment processes, particularly in relation to the appropriateness of references, employment histories, gaps in employment and the need for reasons for leaving employment to be recorded. Further areas for improvement were made, in relation to the need to audit all recruitment records, to identify and rectify deficits; and in relation to further developing the adults safeguarding policy, to ensure that the procedure for monitoring staff involvement in safeguarding incidents is robust.

	Regulations	Standards
Total number of areas for improvement	2	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP 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 the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005	
<p>Area for improvement 1</p> <p>Ref: Regulation 12 (1)(d)</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that no nurse is supplied by the agency unless full and satisfactory information is available to him in respect of each of the matters specified in Schedule 3.</p> <p>This relates specifically to: Full employment histories, together with satisfactory explanation of any gaps in employment Reasons for leaving previous position References are received from the nurses' present or most recent employer.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: We can confirm that we are meeting this requirement.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 20 (1)</p> <p>Stated: First time</p> <p>To be completed by: 02 June 2021</p>	<p>The registered person shall undertake an audit of all recruitment records to identify and rectify any deficits.</p> <p>Records of the audits, including any remedial action taken, must be retained for inspection purposes.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: The audit of recruitment records for our active nurses is in progress. Records are being reviewed and where corrections are required these are being undertaken. Records are being kept of all remedial work undertaken.</p>
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008	
<p>Area for improvement 1</p> <p>Ref: Standard 9.2</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall further develop the application form and supervision form to ensure that staff involvement in safeguarding incidents is captured at the start of employment and during supervisions, on an ongoing basis.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: This is now complete. Specific safeguarding questions have been added to the Application Form, Supervision Form and Reference Template. There is also a specific safeguarding question already on the Annual Appraisal form.</p>



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