

Inspection Report

13 May 2021



Carrik Care Ltd

Type of service: Nursing Agency
Address: 29 West Street, Carrickfergus, Antrim, BT38 7AR
Telephone number: 028 9332 1244

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Carrik Care Ltd	Registered Manager: Mrs Ghada Ahmed Ragab Abdou
Responsible Individual: Mrs Ghada Ahmed Ragab Abdou	
Person in charge at the time of inspection: Office Manager	Date manager registered: 29 November 2016
Brief description of how the service operates: Carrik Care Ltd is a nursing agency which operates from offices located in Carrickfergus. The agency currently supplies nurses to care homes.	

2.0 Inspection summary

The care inspector undertook an announced inspection on 13 May 2021 at 10.00 am.

RQIA received intelligence/information on 1 April 2021 which raised concerns in relation to recruitment practices specifically relating to two references not being obtained before supplying nurses to a service user. In response to this information RQIA decided to undertake an inspection. The inspection findings substantiated the concerns raised. An area for improvement has been stated in this regard.

Good practice was identified in relation to checks of nurses Nursing and Midwifery Council (NMC) registrations, supervision, appraisal, appropriate placements of nurses and management of complaints. Good practice was also found in relation to a system in place for disseminating Covid-19 related information to staff.

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.

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.

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

The inspection focused on contacting the service users and staff to find out their views on the service and reviewing relevant documents relating to the agency's governance and management arrangements. This included checking how nurses' registrations with the NMC were monitored.

We discussed any complaints and incidents during the inspection with the person in charge and we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in accordance with Regulation 20.

Information was provided to service users, staff and other stakeholders to request feedback on the quality of service provided. This included an electronic survey to enable staff and service users to feedback to the RQIA.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

4.0 What people told us about the service?

The information provided by service users indicated that there were no concerns in relation to the agency. All confirmed that they were satisfied with the standard of the nurses being supplied and the responsiveness of the agency to any issues that may occur. Staff told us that they were happy with the support provided by the nursing agency.

Service user comments:

- "We never have any concerns or issues with Carrik Care."
- "The standard of care is good."
- "We have a good relationship with XXXX."

Staff comments:

- "I am happy working with Carrik Care."
- "I know what to do about adult safeguarding concerns."
- "I get enough training."
- "I don't have any problems."

5.0 The inspection

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

The last inspection to Carrik Care Ltd was undertaken on 30 January 2020 by a care inspector; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 Are there robust systems in place for staff recruitment?

The review of a number of staff recruitment records identified a deficit in the recruitment process. It was established that a nurse had been supplied to a service user before their two references were received by the agency. An area for improvement has been made in this regard as this relates to one nurse and the first time the nursing agency has been non-compliant with Regulation 12, Schedule 3 in relation to references.

It was noted that a system was in place to ensure that staffs' skills were appropriately reviewed ahead of staff being placed into a care home. Staff were provided with training appropriate to the requirements of the health care setting they were being placed in.

There was evidence that the nursing agency had a robust system in place to monitor alerts issued by the Chief Nursing Officer (CNO). This ensures that the appropriate checks are undertaken before the nurses are employed.

5.2.2 Are there robust governance processes in place?

The monthly quality monitoring processes were reviewed 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.

There was a system in place to ensure that staff received supervision, appraisal and training in keeping with the agency's policies and procedures.

It was noted that the nursing agency had not made any adult safeguarding referrals to the Northern Health and Social Care Trust (NHST) since the last inspection on 30 January 2020. The person in charge provided us with a copy of the adult safeguarding position report 2020/2021. The agency's adult safeguarding report was reviewed and found to be satisfactory.

It was established that the agency had received a number of complaints since the last inspection on 30 January 2020. Review of records confirmed that these had been dealt with in accordance with the policy and procedures and that the complainants were satisfied with the outcome.

It was established during discussions with the person in charge that the agency had not been involved in any Serious Adverse Incidents (SAI's)/Significant Event Analysis's (SEA's) or Early Alert's (EA's).

It was confirmed that the alphabetical lists of service users and staff held by the agency were up to date.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and infection prevention and control (IPC) practices.

A review of the records confirmed that all staff provided are appropriately registered with the NMC. Information regarding registration details and renewal dates are monitored by the manager; this system was reviewed and found to be in compliance with Regulations and Standards.

6.0 Conclusion

As a result of this inspection one area for improvement was identified in respect of the recruitment processes.

7.0 Quality Improvement Plan/Areas for Improvement

Area for improvement has been identified where action is required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005.

	Regulations	Standards
Total number of Areas for Improvement	1	0

Areas for improvement and details of the Quality Improvement Plan were discussed with the person in charge, as part of the inspection process. The timescales for completion commence from the date of inspection.

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) Schedule 3</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall ensure that no nurse is supplied by the agency unless –</p> <p>(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.</p> <p>This relates specifically to two written references relating to the person being obtained before commencement of employment with the nursing agency.</p> <p>Ref: 5.2.1</p> <p>Response by registered person detailing the actions taken: The inspection carried out following an information received by RQIA re- sending a staff to cover a shift without receiving one of the references. The staff has left our employment now and her file stored away. So, we cannot do anything about her.</p> <p>Generally, we don't send any staff without having both references, abiding by the law. If this happened once, it's an oversight from our team and won't happen again.</p> <p>Actions:</p> <ul style="list-style-type: none"> - Files of any new recruit will be reviewed by the manager before sending them to cover shifts. - 6 monthly audit will be carried out by our compliance staff to highlight any shortcomings.

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