

Announced Care Inspection Report 26 July 2018



Peniel Nursing Care Services

Type of Service: Nursing Agency

**Address: City East Business Centre, 68-72 Newtownards Road, Belfast,
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Tel No: 07803361587

Inspector: Caroline Rix

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Peniel Nursing Care Services is a nursing agency which was registered 24 January 2018. The agency intends to supply and place nurses into nursing home facilities and staff into residential care homes and health and social care trust settings within the greater Belfast area. The nursing agency has not yet become operational.

3.0 Service details

Organisation/Registered Provider: Peniel Healthcare Services Responsible Individual: Mrs Stella Law	Registered Manager: Mrs Stella Law
Person in charge at the time of inspection: Mrs Stella Law	Date manager registered: 24/01/2018

4.0 Inspection summary

An announced inspection took place on 26 July 2018 from 13.15 to 15.15 hours.

This inspection was underpinned by the Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to the staff induction programme and handbook developed and the preparation in relation to matching staff to placement requests.

Areas requiring improvement were identified in relation to review of the following documents; staff recruitment procedure, training and development procedure, the adult safeguarding policy and procedure, complaints procedure and updating the service user's guide, developing a procedure for reviewing the quality of services provided and developing their policies and procedures manual in compliance with minimum standards.

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.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	3	4

Details of the Quality Improvement Plan (QIP) were discussed with Stella Law, the registered person/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 10 August 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 10 August 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- Previous inspection report and QIP
- All communication with the agency.

During the inspection the inspector met with registered person/manager Stella Law.

The following records were examined during the inspection:

- A range of policies and procedures relating to recruitment, induction, complaints management, safeguarding and incident reporting
- Staff training matrix
- Statement of purpose
- Service user guide.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the registered person/manager Stella Law at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 10 August 2017

The most recent inspection of the agency was a pre-registration care inspection. The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 10 August 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 4 (1) and (2) Stated: First time	4.—(1) The registered person shall compile in relation to the agency a written statement (in these regulations referred to as “the statement of purpose”) which shall consist of a statement as to the matters listed in Schedule 1. (2) The registered person shall supply a copy of the statement of purpose to the Regulation and Improvement Authority and shall make a copy of it available on request for inspection at the agency premises by every service user and the service user’s representative.	Met
	Action taken as confirmed during the inspection: The inspector confirmed that the Statement of Purpose had been revised and contains all the elements required in Regulation 4. The registered person/manager had provided a copy of the revised Statement of Purpose to the Regulation and Improvement Authority.	
Area for improvement 2 Ref: Regulation 5 (1)(c) Stated: First time	5.—(1) The registered person shall produce a written service user’s guide which shall include— (c) a summary of the complaints procedure established in accordance with regulation 19; and The registered person shall supply a copy of the service user’s guide to the Regulation and Improvement Authority and every service user and, upon request, to the service user’s representative.	Not met
	Action taken as confirmed during the inspection: The inspector reviewed the service user’s guide. This document did not contain the updated complaints summary section as required.	

<p>Area for improvement 3</p> <p>Ref: Regulation 19(5)</p> <p>Stated: First time</p>	<p>19.—(5) The registered person shall, within the period of 28 days beginning on and including the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the person who made the complaint of the action(if any) that is to be taken in response.</p>	<p style="text-align: center;">Met</p>	
<p>Action taken as confirmed during the inspection: The inspector reviewed the complaints procedure which had been revised with complainant response details required.</p>	<p style="text-align: center;">Not met</p>		
<p>Area for improvement 4</p> <p>Ref: Regulation 12(1)(d)</p> <p>Stated: First time</p>		<p>12.—(1) The registered person shall ensure that no nurse is supplied by the agency unless— (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.</p>	<p style="text-align: center;">Not met</p>
<p>Action taken as confirmed during the inspection: The inspector reviewed the staff recruitment procedure. This document did not contain all elements of pre-employment information to be obtained in line with schedule 3.</p>	<p>Area for improvement 5</p> <p>Ref: Regulation 15</p> <p>Stated: First time</p>	<p>15.—(1) Where the agency is acting as an employment business, the registered person shall prepare a staff handbook and provide a copy to every member of staff.</p>	
<p>Action taken as confirmed during the inspection: The inspector confirmed that the employee handbook had been developed and contained the required information.</p>	<p>Area for improvement 6</p> <p>Ref: Regulation 20 (1)</p> <p>Stated: First time</p>	<p>20.—(1) The registered person shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency.</p>	<p style="text-align: center;">Not met</p>
<p>Action taken as confirmed during the inspection: The inspector found that the registered person had not developed a procedure or system for reviewing at appropriate intervals the quality of services provided by the agency.</p>			

<p>Area for improvement 7</p> <p>Ref: Regulation 14(1)and (2)(a)</p> <p>Stated: First time</p>	<p>14.—(1) Where the agency is acting as an employment business, the registered person shall, having regard to the size of the agency, its statement of purpose and the number and needs of the service users, take all reasonable measures to ensure that there is at all times an appropriate number of suitably qualified, skilled and experienced persons employed for the purpose of the agency.</p> <p>(2) The registered person shall ensure that each employee of the agency- (a) receives appropriate supervision;</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The inspector confirmed that the agency has measures in place to ensure that there is at all times an appropriate number of suitably qualified, skilled and experienced persons employed for the purpose of the agency. The procedure for providing appropriate staff supervision has been developed.</p>		
<p>Action required to ensure compliance with The Nursing Agencies Minimum Standards 2008</p>		<p>Validation of compliance</p>
<p>Area for improvement 1</p> <p>Ref: Standard 2 Appendix 3</p> <p>Stated: First time</p>	<p>The registered person shall ensure there are policies and procedures in place that direct the quality of services provided by the nursing agency.</p>	<p>Not met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The inspector found that the registered person had not developed all the policies and procedures required to direct the quality of services provided by the nursing agency.</p>		
<p>Area for improvement 2</p> <p>Ref: Standard 9</p> <p>Stated: First time</p>	<p>The registered person shall expand their adult safeguarding policy and procedure to ensure adults at risk of harm are protected from abuse.</p> <p>The registered person shall supply a copy of the adult safeguarding policy and procedure to the Regulation and Improvement Authority.</p>	<p>Not met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The adult safeguarding policy and procedure was not available and up to date at the time of inspection.</p>		

Area for improvement 3 Ref: Standard 6 Stated: First time	The registered person shall expand the staff training and development procedure to ensure all staff are appropriately trained and qualified for their roles.	Not met
	Action taken as confirmed during the inspection: The inspector reviewed the staff training and development policy and procedure. The procedure did not detail the subjects and update frequency the staff training must be completed by staff.	
Area for improvement 4 Ref: Standard 8.16 Stated: First time	The registered person shall advise the complainant of their right to approach the NI Public Services Commissioner of Complaints if they remain dissatisfied with the outcome of the relevant complaints procedure.	Not met
	Action taken as confirmed during the inspection: The complaints procedure reviewed by the inspector did not contain the information for complainants on the timescale and referral if remains dissatisfied with the outcome of their complaint.	

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

A range of policies and procedures were reviewed relating to staff recruitment, induction and training. The inspector found that a number of policies and procedures were up to date and compliant with related regulations and standards.

However, the staff recruitment procedure did not provide clear information in relation to obtaining two written references for prospective employees. This area was discussed with the registered person/manager as it had been stated during their previous inspection and an area for improvement has been restated in relating to updating their staff recruitment procedure in line with Regulation 12.

The induction programme and associated documentation reflects the proposed delivery of a structured orientation and induction for newly appointed staff which was found to be satisfactory.

Staff training and induction arrangements were examined and the agency has in place a training and development procedure. However, this procedure should be expanded to include a number of subject areas that are considered to be mandatory and specify the frequency each subject should be updated. This area was discussed with the registered person/manager as it had been stated during their previous inspection and an area for improvement has been restated.

The staff handbook has been developed which outlines a range of information for staff in relation to their responsibilities.

The agency's arrangements for adult safeguarding were discussed with the registered person/manager. The adult safeguarding policy and procedure was not available for review at the time of inspection. The agency's adult safeguarding policy and procedure must reflect the DHSSPS regional policy 'Adult Safeguarding Prevention and Protection in Partnership', 2015. The registered person/manager is required to review and update their adult safeguarding policy and procedure in line with the DHSSPS guidance to include the identification and role of an adult safeguarding champion. This area was discussed with the registered person/manager as it had been stated during their previous inspection and an area for improvement has been restated.

Areas of good practice

There were examples of good practice found during the inspection in relation to the planned staff induction programme and handbook developed.

Areas for improvement

Areas for improvement were identified in relation to expanding the following documents; their staff recruitment procedure, training and development procedure and the adult safeguarding policy and procedure.

	Regulations	Standards
Total number of areas for improvement	1	2

6.5 Is care effective?

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

The agency's arrangements for appropriately responding to and meeting the needs of the people who use the service were detailed within the agency's Statement of Purpose.

The registered person/manager could describe the process for matching nursing staff to placement requests which included completion of a profile reflecting; qualifications, training, experience, knowledge and skills.

The compulsory registration with the Nursing and Midwifery Council (NMC) was discussed and the registered person/manager was knowledgeable in this regard. A computerised system is in place to monitor registration status of all nurses on a monthly basis.

The inspector reviewed the agency's arrangements in place to monitor, audit and review the effectiveness and quality of care being delivered. The proposed arrangements for quality assurance of the services provided by the agency were discussed with the registered person/manager.

The inspector found that the registered person/manager had not developed a procedure or system for reviewing at appropriate intervals the quality of services provided by the agency and this has been identified as an area for improvement restated from the previous inspection.

Areas of good practice

There were examples of good preparation found during the inspection in relation to matching staff to placement requests.

Areas for improvement

An area for improvement was identified in relation to developing a procedure for reviewing the quality of services provided by the agency.

	Regulations	Standards
Total number of areas for improvement	1	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The inspector confirmed that the agency has measures in place to ensure that there is at all times an appropriate number of suitably qualified, skilled and experienced persons employed for the purpose of the agency.

The procedure for providing appropriate staff supervision has been developed. The inspector reviewed the complaints procedure which had been revised with complainant response details required following their previous inspection. However, the information regarding the role of the Northern Ireland Public Services Ombudsman and RQIA in relation to unresolved complaints had not been retained and has again been identified as an area for improvement.

The inspector reviewed the service user's guide. However, this document did not contain the updated complaints summary section as discussed with the registered person/manager during the previous inspection and restated as an area for improvement.

Areas for improvement

Areas for improvement were identified in relation to the review of their complaints procedure and updating the service user's guide.

	Regulations	Standards
Total number of areas for improvement	1	1

6.7 Is the service well led?

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

The inspector found that the registered person/manager had not developed all the policies and procedures required to direct the quality of services provided by the nursing agency. This area was discussed with the registered person/manager as it had been stated during their previous inspection and an area for improvement has been restated.

It was noted that an indexed manual of policies and procedures relevant to the operation of the nursing agency had been prepared. However a number of policies and procedures were not yet developed in accordance with Appendix 3 of the minimum standards. The inspector was advised that when completed, the policies and procedures will be made available to staff both electronically and in hard copy.

As identified within section 6.5 above, the inspector found that the registered person/manager had not developed a procedure or system for reviewing at appropriate intervals the quality of services provided. This area was discussed with the registered person/manager and has been identified as an area for improvement restated from the previous inspection.

Areas for improvement

An area for improvement has been identified in relation to developing their policies and procedures manual in compliance with minimum standards.

	Regulations	Standards
Total number of areas for improvement	0	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 registered person/manager Stella Law, 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/or 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) Schedule 3 (5)</p> <p>Stated: Second time</p> <p>To be completed by: 18 September 2018</p>	<p>The registered person shall ensure that no nurse is supplied by the agency unless— (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3 (5).</p> <p>Ref: 6.4</p>
	<p>Response by registered person detailing the actions taken:</p> <p>When this Agency becomes operational, the registered person will ensure that all satisfactory information as in schedule 3(5) are available before staff are placed. It is our policy to provide the highest quality of service to all of its Clients. To provide this quality of service, we recognise that all staff must undergo training and development that equips them to perform their work competently and must provide evidence of that training records. Staff are provided with access to appropriate training and development and we expect Agency workers to reciprocate this commitment by attending on a regular basis to their own development activities.</p> <p>In the interests of services users Safety, all agency workers should be able to access mandatory training courses and advice regarding Professional Development</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 5 (1)(c)</p> <p>Stated: Second time</p> <p>To be completed by: 18 September 2018</p>	<p>The registered person shall produce a written service user's guide which shall include—</p> <p>(c) a summary of the complaints procedure established in accordance with regulation 19.</p> <p>Ref: 6.6</p>
	<p>Response by registered person detailing the actions taken:</p> <p>The agency service user's guide is update to include the appropriate information that is in-line with requirements in regulation 19.</p>
<p>Area for improvement 3</p> <p>Ref: Regulation 20 (1)</p> <p>Stated: Second time</p>	<p>The registered person shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency.</p> <p>Ref: 6.5</p>
<p>To be completed by: 18 September 2018</p>	<p>Response by registered person detailing the actions taken:</p> <p>We have developed system where on monthly customer survey system to get feedback from our client as to the quality of service The Agency aim to be a provider of choice within its area and believes that it will accomplish this aim by ensuring that it</p>

	<p>meets the expectations of its Clients, families of Clients, staff, and all other associated Stakeholders. We will monitor satisfaction levels in all key areas of its operations, and will review, evaluate, and implement improvements, where necessary, on a continuous basis.</p>
<p>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</p>	
<p>Area for improvement 1 Ref: Standard 6 Stated: Second time To be completed by: 18 September 2018</p>	<p>The registered person shall expand the staff training and development procedure to ensure all staff are appropriately trained and qualified for their roles. The procedure should detail the subjects and frequency the staff updated training must be completed. Ref: 6.4</p> <p>Response by registered person detailing the actions taken: We will ensure that all our Nurses are professional Nurses qualified to work as Nurses in their field of professionalism, periodically provide them access to training for further updates. We will ensure the quality of staff through safe recruitment practices. Following the standard recruitment process and before an agency worker is offered a work placement, he or she will be taken through a formal work place induction process in line with the clients requirements</p>

<p>Area for improvement 2</p> <p>Ref: Standard 9</p> <p>Stated: Second time</p> <p>To be completed by: 18 September 2018</p>	<p>The registered person shall expand their adult safeguarding policy and procedure to ensure adults at risk of harm are protected from abuse. The registered person shall supply a copy of the adult safeguarding policy and procedure to the Regulation and Improvement Authority.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken: Our adult safeguarding policy and procedure has been expanded in line with local adult safeguarding policy. We have adopted same policy as the Northern Ireland adults safeguarding documentation and copies will be made available as requested.</p>
<p>Area for improvement 3</p> <p>Ref: Standard 8 (4) and (16)</p> <p>Stated: First time</p> <p>To be completed by: 18 September 2018</p>	<p>The registered person shall expand their complaints procedure to include the role of the Northern Ireland Public Services Ombudsman and RQIA in relation to unresolved complaints.</p> <p>Ref: 6.6</p> <p>Response by registered person detailing the actions taken: Our complaint procedure has been expand as requested.</p>
<p>Area for improvement 4</p> <p>Ref: Standard 2 Appendix 3</p> <p>Stated: Second time</p> <p>To be completed by: 18 September 2018</p>	<p>The registered person shall ensure there are policies and procedures in place that direct the quality of services provided by the nursing agency.</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: There are policies and procedure in place that will drive the quality of services that the agency will provided when the the agency commence it's business operations. The Agency aim to be a provider of choice within its area and believes that it will accomplish this aim by ensuring that it meets the expectations of its Clients, families of Clients, staff, and all other associated Stakeholders. We will monitor satisfaction levels in all key areas of our operations, and will review, evaluate, and implement improvements, where necessary, on a continuous basis.</p>

Please ensure this document is completed in full and returned via Web Portal



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