

Unannounced Care Inspection Report 28 March 2019



Provident Healthcare NI

Type of Service: Nursing Agency
**Address: 2nd Floor, Richview Regeneration Centre, Donegall Road,
Belfast, BT12 6FQ**
Tel No: 028 9508 3306
Inspector: Bridget Dougan

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

Provident Healthcare NI is a nursing agency which was registered in April 2018 to supply registered nurses to a range of healthcare settings and to work with service users in their own homes. To date the agency has not been operational.

3.0 Service details

| | |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| Organisation/Registered Provider: Provident Healthcare NI Ltd Responsible Individual: Mr Stanley Jasi | Registered Manager: Ms Gwyneth Musekiwa-Muronzi . |
| Person in charge at the time of inspection: Mr Stanley Jasi | Date manager registered: 4 April 2018 |

4.0 Inspection summary

An unannounced inspection took place on 28 March 2019 from 13.30 to 15.30.

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 procedures in place regarding monitoring the quality of the service.

Areas for improvement were identified during the inspection in respect of the review and development of recruitment and induction policies.

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 | 0 | 2 |

Details of the Quality Improvement Plan (QIP) were discussed with Mr Stanley Jasi, responsible individual, as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 31 November 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 31 November 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:

- the previous care inspection report
- all communications with RQIA

The following information was examined during the inspection:

- Statement of Purpose
- Service User Guide
- recruitment policy and procedure
- whistleblowing policy and procedure
- safeguarding policy and procedure
- supervision and appraisal policy and procedure
- record keeping policy
- quality monitoring policy
- complaints policy

The findings of the inspection were provided to Mr Stanley Jasi, responsible individual, at the conclusion of the inspection.

| | Regulations | Standards |
|----------------------------------------------|-------------|-----------|
| Total number of areas for improvement | 0 | 2 |

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 31 November 2017

The most recent inspection of the agency was an announced care pre-registration 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 30 November 2017

| Areas for improvement from the last care inspection | | |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Action required to ensure compliance with The Nursing Agencies Minimum Standards 2008 | | Validation of compliance |
| Area for improvement 1 Ref: Standard 1.8 Stated: First time | The registered person shall ensure the statement of purpose is reviewed and includes the information listed in section 2 of the Nursing Agencies Minimum Standards (requirements for registration). Submit updated statement of purpose together with the returned Quality Improvement Plan. | Met |
| | Action taken as confirmed during the inspection: The statement of purpose had been reviewed and included the information listed in section 2 of the Nursing Agencies Minimum Standards. | |
| Area for improvement 2 Ref: Standard 1.10 Stated: First time | The registered person shall ensure the service user's guide is reviewed and includes the information listed appendix 1 of the Nursing Agencies Minimum Standards (requirements for registration). Submit updated service user's guide together with the returned Quality Improvement Plan. | Met |
| | Action taken as confirmed during the inspection: The service user's guide had been reviewed and included the information listed appendix 1 of the Nursing Agencies Minimum Standards. | |

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <p>Area for improvement 3</p> <p>Ref: Standard 8.1</p> <p>Stated: First time</p> | <p>The registered person shall ensure the complaints policy and procedure is reviewed and meets the requirements of the HPSS Complaints Procedure and is in accordance with the relevant legislation and DHSSPS guidance. Submit amended complaints policy and procedure together with the returned Quality Improvement Plan.</p> | <p style="text-align: center;">Met</p> |
| <p>Action taken as confirmed during the inspection:</p> <p>The complaints policy and procedure had been reviewed and was in accordance with the relevant legislation and DHSSPS guidance.</p> | | |
| <p>Area for improvement 4</p> <p>Ref: Standard 9.1</p> <p>Stated: First time</p> | <p>The registered person shall ensure the adult safeguarding policy and procedure is reviewed and is in accordance with legislation, DHSSPS guidance, regional protocols and procedures issued by Health and Social Services Boards and HSC Trusts. Submit amended adult safeguarding policy and procedure together with the returned Quality Improvement Plan.</p> | <p style="text-align: center;">Met</p> |
| <p>Action taken as confirmed during the inspection:</p> <p>The adult safeguarding policy and procedure is reviewed and is in accordance with legislation, DHSSPS guidance, regional protocols and procedures issued by Health and Social Services Boards and HSC Trusts.</p> | | |
| <p>Area for improvement 5</p> <p>Ref: Standard 9.1</p> <p>Stated: First time</p> | <p>The registered person shall ensure there are written procedures for safeguarding children and young people, consistent with legislation, DHSSPS guidance and regional procedures. Submit child protection policy/procedures together with the returned Quality Improvement Plan.</p> | <p style="text-align: center;">Met</p> |
| <p>Action taken as confirmed during the inspection:</p> <p>The inspector reviewed the written procedures for safeguarding children and young people and noted they were consistent with legislation, DHSSPS guidance and regional procedures.</p> | | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <p>Area for improvement 6</p> <p>Ref: Standard 1.21</p> <p>Stated: First time</p> | <p>The registered person shall submit a copy of the agency's indemnity insurance cover. This should be submitted together with the returned Quality Improvement Plan.</p> | <p>Met</p> |
| <p>Action taken as confirmed during the inspection:</p> <p>Evidence of the agency's indemnity insurance cover was submitted with the returned Quality Improvement Plan and was also displayed in the agency at the time of the inspection.</p> | | |
| <p>Area for improvement 7</p> <p>Ref: Standard 11.1</p> <p>Stated: First time</p> | <p>The registered person shall ensure that a policy and procedure is developed on responding to requests for private nursing care in patients own homes. This should be submitted together with the returned Quality Improvement Plan.</p> | <p>Met</p> |
| <p>Action taken as confirmed during the inspection:</p> <p>A policy and procedure was in place with regard to responding to requests for private nursing care in patients own homes.</p> | | |

6.3 Inspection findings

The responsible individual informed the inspector that, although the organisation has been registered as a nursing agency since 04 April 2018, they have not yet recruited or been involved in the supply of nurses. The inspector was informed that the agency has recently advertised for nurses and a number of enquiries have been received in response to this advertisement. No formal interviews have been conducted to date.

The statement of purpose and service user guide were reviewed and found to be satisfactory.

Policies and procedures are maintained on an electronic system, and are also available in a paper format retained in the office for use by staff.

The agency's staff recruitment policy and procedure dated August 2016 stated "a professional reference taken from the current or previous employer is sought. More references are obtained if possible". This is not compliant with the Nursing Agencies Minimum Standards, 2008 and an area for improvement was discussed with the responsible individual.

The agency did not have a staff induction policy and an area for improvement has been made in this regard.

Staff training and development procedure was viewed and confirmed that all the required mandatory update training subjects are included within the agency's training programme.

The agency's policies and procedures in relation to safeguarding adults, safeguarding children and whistleblowing were reviewed and found to be satisfactory.

The agency's policy and procedure relating to complaints was viewed. The inspector noted that it was in accordance with the relevant legislation and DHSSPS guidance.

The inspector examined management and governance processes which have been developed. The quality monitoring policy and procedure contained a variety of processes to ascertain and respond to the views of service users including; monitoring visits, phone contact details, review meetings, monthly monitoring and an annual quality satisfaction survey.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to procedures in place regarding monitoring the quality of the service provided.

Areas for improvement

Areas for improvement were identified in relation to a notification of the proposed absence of the registered manager and the review and development of recruitment and induction policies.

| | Regulations | Standards |
|----------------------------------------------|-------------|-----------|
| Total number of areas for improvement | | 2 |

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Stanley Jasi, responsible individual, 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 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 Minimum Standards, 2008 | |
| Area for improvement 1 Ref: Standard 4.1 Stated: First time To be completed by: With immediate effect | The registered person shall review the recruitment policy and procedure and ensure it complies with legislative requirements and DHSSPS guidance. Ref: 6.3 Response by registered person detailing the actions taken: Based on the advise from the RQIA inspector, Our Recruitment policy has been reviewed to ensure it complies with legislative requirements and DHSSPS guidance. The copy of the policy has been attached to the QIP. |
| Area for improvement 2 Ref: Standard 2.1 Stated: First time To be completed by: With immediate effect | The registered person shall ensure a staff induction policy and procedure is in place. Ref: 6.3 Response by registered person detailing the actions taken: Based on the advise from the RQIA inspector, Our staff induction policy and procedure has been developed. The copy of the policy has been attached to the QIP. |

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



The **Regulation** and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9051 7500
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)