

Inspection Report

22 June 2021



Mayday Healthcare Plc

Type of service: Nursing Agency
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Coyle Personnel Plc	Registered Manager: Mr Benjamin Brown
Responsible Individual: Mr Nicholas Paul Poturicich	Date registered: 18 October 2019
Person in charge at the time of inspection: Mr Benjamin Brown	
Brief description of the agency operates: Mayday Healthcare Plc is a nursing agency operating out of an office located at Grosvenor Place, London. The agency currently supplies nurses to private nursing homes and to a number of Trust acute settings within Northern Ireland (NI).	

2.0 Inspection summary

The care inspector undertook an announced inspection on 22 June 2021 between 10am and 2.40pm.

The inspection focused on staff recruitment and the agency's governance and management arrangements.

Good practice was identified in relation to criminal records checks and reference checks being undertaken before nurses were supplied to the various health care settings and on an annual basis thereafter. Good practice was also found in relation to the system in place for disseminating Covid-related information and guidance to staff.

The service users' feedback did not identify any specific concerns relating to the nurses' practice. All service users described performance issues as having been dealt with in a responsive manner by the agency. Despite this, the review of the complaints records identified that appropriate action was not consistently recorded in response to complaints. An area for improvement was made in this regard.

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 in respect of the agency. This included the previous inspection report and written and verbal communication received since the previous care inspection.

The inspection focused on contacting the service users and staff to obtain their views of the agency and reviewing relevant documents relating to the agency's governance and management arrangements. This included checking how nurses' registrations with the Nursing and Midwifery Council (NMC) were monitored.

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

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

4.0 What people told us about the agency?

The service users' feedback did not identify any specific concerns relating to the nurses' practice. All service users described performance issues as having been dealt with in a responsive manner by the agency.

No staff responded to the electronic survey.

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 the agency was undertaken on 12 March 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 the agency's staff recruitment records confirmed that recruitment was managed in accordance with the Regulations and Minimum Standards, before nurses are supplied to the various health care settings. Records viewed evidenced that criminal record checks (Access NI) had been completed for staff.

There was a system in place to ensure that the nurses' skills were appropriately matched to the placement.

Nurses were provided with training appropriate to the requirements of the hospitals they were being placed in. This included DoLS training appropriate to their job roles.

The manager had a robust system in place to monitor alerts issued by the Chief Nursing Officer (CNO) for Northern Ireland. This indicated that the appropriate checks are undertaken before the nurses are employed.

5.2.2 Are there robust governance processes in place?

The quality monitoring processes were reviewed, to ensure that complaints and incidents were routinely monitored as part of the monthly checks in line with Regulation 20.

The review of the complaints records identified that appropriate action was not consistently recorded in response to complaints/incidents. The agency had not consistently recorded the outcomes to all complaints. There was also the need for more detail to be recorded on the complaints recording template. An area for improvement has been made in this regard.

It was established during discussions with the manager 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).

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

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 to staff.

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.

The agency had a process in place to refer nurses to the NMC as appropriate, should any concerns about their practice arise.

There was a policy in place relating to the agency's system for records retention. The manager was aware that records are required to be retained for a period of eight years, following the date of the last entry. All requested records were available for inspection.

6.0 Conclusion

RQIA were assured that appropriate training had been provided to the nurses, to ensure that they were providing safe, effective and compassionate care. However, an area for improvement was made in relation to the complaints management process. This was in relation to the agency being well led. Details can be found in the Quality Improvement Plan included.

7.0 Quality Improvement Plan/Areas for Improvement

An 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

An area for improvement and details of the Quality Improvement Plan were discussed with Benjamin Brown, manager, 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 19 (6)</p> <p>Stated: First time</p> <p>To be completed by: 22 August 2021</p>	<p>The registered persons must ensure that a record of each complaint is maintained, including details of the investigations made, the outcome of any action taken in consequence and the requirements of regulation 18 shall apply to that record.</p> <p>Ref: 5.2.2</p>
	<p>Response by registered person detailing the actions taken: All complaints will be audited monthly for quality assurance purposes. This will be reflected in the Monthly Monitoring report compiled by the Registered Manager and Responsible Person. In addition to ensuring that every record meets the requisite standard outlined by the RQIA, complaints analysis will inform future planning for agency- highlighting areas for improvement across the business.</p>

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