

Announced Care Inspection Report 12 March 2020











Mayday Healthcare Plc

Type of Service: Residential Care Home

Address: 10 Lower Grosvenor Place, London, SW1W 0EN

Tel No: 08703430043 Inspector: Aveen Donnelly

www.rqia.org.uk

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

Mayday Healthcare Plc is a nursing agency operating out of an office located at Grosvenor Place, London. The agency currently supplies registered nurses to hospitals within the Southern Health and Social Care Trust (SHSCT), Northern Health and Social Care Trust (NHSCT) and Belfast Health and Social Care Trust (BHSCT).

3.0 Service details

Organisation/Registered Provider: Coyle Personnel Plc	Registered Manager: Mr Benjamin Brown
Responsible Individual: Mr Nicholas Paul Poturicich	

•	Date manager registered: 18 October 2019

4.0 Inspection summary

An announced inspection took place on 12 March 2020 from 09.30 to 11.15 hours.

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.

The inspection aimed 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 Access NI and staff' registrations with the Nursing and Midwifery Council (NMC).

Representatives from the healthcare settings where the nurses had been supplied stated that they were happy with the quality of nurses being provided by the agency.

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Nick Poturicich, registered person, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent care inspection dated 29 January 2019

No further actions were required to be taken following the most recent inspection on 29 January 2019.

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 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 being supplied. The inspector spoke representatives of the healthcare settings where the nurses had been supplied. Comments are detailed within the report.

We ensured 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 process for monitoring registrations with the Nursing and Midwifery Council (NMC).

A poster was provided for nurses detailing how they could complete an electronic questionnaire. No staff responded.

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

6.0 The inspection

Areas for improvement from the last care inspection dated 31 January 2019		
Action required to ensure	Validation of	
Regulations (Northern Ire	compliance	
Area for improvement 1	The registered person shall ensure that no	
Ref: Regulation 13 (d)	domiciliary care worker is supplied by the agency unless—	
Schedule 3 (8)	(d)full and satisfactory information is available in relation to him in respect of each of the	
Stated: First time	matters specified in Schedule 3.	
	This relates specifically to the need for full employment histories to be recorded, together	Met
	with a satisfactory written explanation of any	
	gaps in employment.	
	Action taken as confirmed during the	
	inspection:	
	The records reviewed confirmed that full	
	employment histories had been recorded.	

6.1 Inspection findings

The review of the nurses' records confirmed that appropriate checks were in place before nurses were supplied to the various health care settings. Records relating to Access NI and verification of current NMC registration were in place and were monitored on a regular basis.

The service users spoken with spoke positively in relation to the quality of nurses being supplied by the agency. Comments are detailed below:

• "No concerns with the quality of the staff provided, as far as I am aware, since they started to provide staff."

- "The nurses that we now have working with us from Mayday work well within the environment and the wards have no issues at present with their working ethos."
- "We enjoy a good relationship with this agency and they are very responsive and helpful when we require their services. We would have a number of their trained nurses working across our Directorates and there would be minimal issues in relation to the performance of their staff members."

The feedback received indicated that where matters were raised in relation to the quality of the registered nurses' work, the agency took appropriate action accordingly.

Areas of good practice

Evidence of good practice was found in relation to undertaking pre-employment checks with Access NI and in relation to the process for monitoring the nurses' registrations with the Nursing and Midwifery Council (NMC).

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.





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