

RQIA Inspection Report

19 July 2021



Direct Healthcare 24 Plc

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

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: Direct Healthcare 24 Plc is a nursing agency which operates from offices located in England. 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

A care inspector undertook an announced inspection on 19 July 2021 between 10.00 am and 12.15 pm.

The Regulation and Quality Improvement Authority (RQIA) had completed an unannounced inspection on 14 May 2021 which resulted in a Failure to Comply (FTC) notice being issued. The FTC notice related to the agency's failure to retain records in keeping with the regulations and minimum standards.

The inspection sought to assess the level of compliance achieved in relation to the FTC notice issued on 11 June 2021:

Failure to Comply Notice

FTC Reference: FTC000154

The date of compliance with the notice was 19 July 2021.

During this inspection, evidence was available to validate compliance with the FTC.

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

- the requirements as indicated in the failure to comply notice **FTC Ref: FTC000154**
- the registration status of the agency
- written and verbal communication received since the previous care inspection
- previous care inspection reports.

The following methods and processes used in this inspection include the following:

- a discussion with the manager and responsible individual
- review of information relating to the failure to comply notice.

As this inspection focused solely on the actions included in the FTC Notice, the areas for improvement previously made were not reviewed as part of this inspection and have been carried forward.

4.0 What people told us about the service

The information provided by service users indicated that there were generally no concerns regarding the standard of nurses provided by the agency and that any incidents or training requirements were managed accordingly. The agency's response was described as being professional and timely, with action plans and training updates provided when incidents have occurred.

5.0 The inspection

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

Significant concerns were identified during the last inspection undertaken on 14 May 2021. The concerns related to the records not being retained in line with the Regulations and Standards. This suggested that the registered persons were not knowledgeable in respect of the legislative requirements as they apply in Northern Ireland. As a consequence, RQIA held a meeting with the responsible individual and the registered manager on 10 June 2021, with the intention of issuing two Failure to Comply (FTC) notices.

At the meeting, RQIA did not receive the all the necessary assurances provided regarding records retention. It was therefore decided that the FTC notice would be issued in relation to records retention practices, with the date of compliance to be achieved by 19 July 2021. Actions required to be taken were detailed in the FTC notice. For this reason, this was not included in the Quality Improvement Plan (QIP). Following discussions at the meeting, RQIA made the decision not to serve the second FTC notice pertaining to the fitness of the responsible individual.

Areas for improvement from the last inspection on 14 May 2021		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005		Validation of compliance
Area for Improvement 1 Ref: Regulation 20 Stated: First time	The registered person shall review the system for undertaking quality monitoring visits to ensure they are undertaken by someone with the required level of experience and skill; the monitoring visits shall include the views of nurses currently being supplied and those of the commissioning trusts.	Carried forward to the next inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008		Validation of compliance
Area for Improvement 1 Ref: Standard 9.4 Stated: First time	The registered person shall review the content of the adult safeguarding training to ensure that it is aligned to the Northern Ireland regional guidance.	Carried forward to the next inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

5.2 Inspection outcome

5.2.1 Failure to Comply Notice

FTC Ref: FTC000154

Notice of failure to comply with The Nursing Agencies Regulations (Northern Ireland) 2005

Regulation 18

The registered person shall ensure that the records specified in Schedule 4 are maintained, are available at all times for inspection and that they are –

- (a) *kept up to date, in good order and in a secure manner; and*
 (b) *retained for a period of not less than eight years beginning on the date of the last entry.*

In relation to the notice, the following four actions were required to comply with this regulation.

The registered persons must ensure that there is a policy and procedure for the management of records detailing the arrangements for the creation, use, retention, storage, transfer and disposal of and access to those records.

The registered persons must ensure that an audit is undertaken of all nurse records, to determine the number of records which have been disposed of. A record of the audit must be retained and available for inspection.

The registered persons must ensure that records are retained to clearly demonstrate the procedure undertaken to retrieve those records which were erroneously disposed of.

The registered persons must ensure that The Information Commissioner's Office in Northern Ireland (NI) is informed about the number and detail of all records that have been destroyed.

During this inspection the policy on records management was reviewed. Advice was given in relation to including a section on the procedure for managing subject data access requests. The inspector reviewed a recent written request from a registered nurse and was satisfied with the response provided by the agency.

The written response provided by the responsible individual outlined the steps taken to retrieve the records which were erroneously destroyed. It was good to note that all records had been retrieved. This was verified following review of the audits undertaken. Given that all the documents were retrieved, there was no longer a need for the Information Commissioner's Office in NI to be informed.

6.0 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notice.

7.0 Quality Improvement Plan/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 The Nursing Agencies Minimum Standards, 2008. Both areas for improvement were previously made at the last care inspection. Given that this inspection focused solely on the actions outlined in the FTC, compliance with the areas for improvement was not reviewed. These areas for improvement, relating to the well led domain, have been carried forward to the next inspection.

	Regulations	Standards
Total number of Areas for Improvement	*1	1

* The total number of areas for improvement includes one that has been stated for a second time.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 20 Stated: Second time To be completed by: 11 August 2021	The registered person shall review the system for undertaking quality monitoring visits to ensure they are undertaken by someone with the required level of experience and skill; the monitoring visits shall include the views of nurses currently being supplied and those of the commissioning trusts. Ref: 5.1
	Response by registered person detailing the actions taken: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008	
Area for improvement 1 Ref: Standard 9.4 Stated: First time To be completed by: 11 August 2021	The registered person shall review the content of the adult safeguarding training to ensure that it is aligned to the Northern Ireland regional guidance. Ref: 5.1
	Response by registered person detailing the actions taken: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.

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



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