

# **Announced Care Inspection Report 27 February 2020**



## **Direct Healthcare 24 Plc**

**Type of Service: Nursing Agency**  
**Address: 10 Lower Grosvenor Place, London, SW1W 0EN**  
**Tel No: 08448404404**  
**Inspector: Aveen Donnelly**

[www.rqia.org.uk](http://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

Direct Healthcare 24 Plc is a nursing agency operating out of an office located at 10 Lower Grosvenor Place, London. The agency currently supplies registered nurses to Health and Social Care Trust (HSCT) hospitals within Northern Ireland.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Coyle Personnel Plc  <b>Responsible Individual:</b> Mr Nicholas Paul Poturicich	<b>Registered Manager:</b> Mr Benjamin Brown
<b>Person in charge at the time of inspection:</b> Mr Benjamin Brown	<b>Date manager registered:</b> 18 October 2019

### 4.0 Inspection summary

An unannounced inspection took place on 27 February 2020 from 10.30 to 15.30 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 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 Access NI and staff' registrations with the Nursing and Midwifery Council (NMC). There was a good system in place to ensure that staff skills were appropriately placed. Staff were provided with training appropriate to the requirements of the hospitals they were being placed with. Discussion with the manager confirmed that there was good management oversight of the adult safeguarding procedures.

An area for improvement, previously made in relation to the recording of full employment histories was not met and has been stated for the second time. A new area for improvement has been made in relation to the monthly quality monitoring reports.

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
<b>Total number of areas for improvement</b>	2	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Benjamin Brown, 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 31 January 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 31 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, notifiable events, 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 with representatives of three 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).

The inspector also reviewed the following records:

- Staff training records, particularly in relation to Management of Actual and Potential Aggression (MAPA)
- Monthly quality monitoring reports undertaken in keeping with regulation 20 of the Nursing Agencies Regulations (Northern Ireland) 2005
- Adult safeguarding records
- Staff recruitment records.

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 partially met.

The inspector would like to thank the manager for their support and co-operation throughout the inspection process.

## 6.0 The inspection

Areas for improvement from the last care inspection dated 31 January 2019		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2008		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 13 (d) Schedule 3 (8)  <b>Stated:</b> First time	The registered person shall ensure that no domiciliary care worker 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.  This relates specifically to the need for full employment histories to be recorded, together with a satisfactory written explanation of any gaps in employment.	<b>Partially met</b>
	<b>Action taken as confirmed during the inspection:</b> The review of the records confirmed that full employment histories were not evidenced in the recruitment process. The inspector acknowledged that full professional histories had been recorded. However the regulations stipulate the need for full employment histories and not just professional work histories. This area for improvement has been stated for the second time.	

## 6.1 Inspection findings

The review of the staff' records confirmed that appropriate checks were generally in place before nurses were supplied to the various health care setting. However, as discussed in section 6.0, an area for improvement previously made in relation to full employment histories has been stated for the second time. An area for improvement has also been made in relation to the monthly quality monitoring visits, which should include a review of the area for improvement made in the previous RQIA Quality Improvement Plan (QIP). Advice was given in relation to using the template for monthly quality monitoring, which is available on the RQIA website.

There were processes in place for identifying, managing and where possible eliminating unnecessary risk to patients health, welfare and safety. It was noted that a curriculum vitae was completed for each nurse, outlining their skills and experience. This information is sent to the service users in advance of supply, to ensure that the service users are satisfied with the experience of the registered nurse being supplied. The review of three records confirmed that this system was effective.

Records relating to Access NI and verification of current NMC registration were in place and were monitored on a regular basis.

The review of the staff training matrix confirmed that all staff were compliant with the mandatory training requirements. Training in MAPA had also been provided to nurses, as appropriate to the relevant healthcare settings. The review of the content of the MAPA training was also deemed to be satisfactory. There was a process in place to ensure that all staff received refresher training on an annual basis.

Discussion with the manager and a review of records confirmed that there was good management oversight of any adult safeguarding concerns. There was a system in place to ensure that staff received supervision in keeping with the agency's policies and procedures. Complaints and incidents were analysed on a regular basis, to ensure that patterns or trends were identified. Where staff training needs were identified, this was provided. The manager was knowledgeable in relation to the adult safeguarding procedures and it was evident that there was good governance and management oversight of the agency in this regard.

The service users consulted with spoke positively in relation to the quality of nurses being supplied by the agency. All confirmed that they were satisfied with the quality and standard of the nurses being supplied and the responsiveness of the agency to any issues that may occur.

### Areas of good practice

Evidence of good practice was found in relation to Access NI and staff' registrations with the Nursing and Midwifery Council (NMC). There was a good system in place to ensure that staff skills were appropriately placed. Staff were provided with training appropriate to the requirements of the hospitals they were being placed in. Discussion with the manager confirmed that there was good management oversight of the adult safeguarding procedures.

### Areas for improvement

An area for improvement, previously made in relation to the recording of full employment histories was not met and has been stated for the second time. A new area for improvement has been made in relation to the monthly quality monitoring reports.

	Regulations	Standards
<b>Total number of areas for improvement</b>	2	0

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Benjamin Brown, manager, 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 Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

### **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><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 13 (d) Schedule 3 (8)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection</p>	<p>The registered person shall ensure that no domiciliary care worker 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>This relates specifically to the need for full employment histories to be recorded, together with a satisfactory written explanation of any gaps in employment.</p> <p>Ref: 6.0 and 6.1</p>
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 20 (1)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection</p>	<p><b>Response by registered person detailing the actions taken:</b> I can confirm that with immediate effect following the RQIA audit of Direct Healthcare 24 Ltd, full employment histories will be completed (back to high school) for all candidates and any gaps explained satisfactorily. Previously there had been a misunderstanding and employment history had only been recorded from completion their professional qualification- this has now been rectified.</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>This refers specifically to the need for the monthly quality monitoring reports to include a review of the employment histories obtained as part of the recruitment process.</p> <p>Ref: 6.1</p> <p><b>Response by registered person detailing the actions taken:</b> I can confirm that there is a new process of monitoring agency quality. This had been completed previously, however with advice from Aveen our assigned RQIA Inspector a more suitable template has been sourced and completed.</p>



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