

Inspection Report

27 April 2023



Top Class Nursing Services

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: Top Class Healthcare Ltd	Registered Manager: Mrs Marina Mary Burns
Responsible Individual: Mrs Acknowledge Ngwena	Date registered: 15 February 2023
Person in charge at the time of inspection: Mrs Acknowledge Ngwena	
Brief description of the agency operates: Top Class Nursing Services is registered with RQIA as a Nursing Agency and currently supplies registered nurses to various healthcare settings throughout Northern Ireland. The agency operates from an office located in Portadown.	

2.0 Inspection summary

An unannounced inspection was undertaken on 27 April 2023 between 9.50 a.m. and 2.00 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, service user involvement and the system for retaining records were also reviewed.

Areas for improvement identified related to the agency's quality monitoring process, the management of complaints and the management of records and information policy.

Good practice was identified in relation to the monitoring of nurses' registrations with the Nursing and Midwifery Council (NMC) and staff recruitment.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

For the purposes of the inspection report, the term 'service user' describes the hospitals or care homes the agency's nurses are supplied to work in.

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.

In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users.

As a public-sector body, RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of nursing agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from service users that the agency takes all reasonable steps to promote people's rights. People in receipt of nursing care have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. They should also experience their individual choices and freedoms.

Information was provided to service users and staff on how they could provide feedback on the quality of services. This included an electronic survey.

4.0 What people told us about the agency?

As part of the inspection process we spoke with a number of service users and registered nurses.

The information provided indicated that there were no concerns in relation to the agency.

Comments received included:

Service users' comments:

- "I have no issues with the agency. Good communication from the agency."
- "Staff profiles are provided prior to shift. The profiles include AccessNI details, professional registrations and training details."
- "I have used the agency from time to time. I have had no problems with the staff supplied."

Registered Nurses' comments:

- "Once successful at interview I had to bring all my documents including my passport and birth certificate to the office. An AccessNI was also completed. I had to complete an induction and all the training before I started on shift."
- "I am happy working for the agency."
- "A good agency to work for. Good training is provided and we are reminded when training needs to be updated."
- "The manager is very supportive and is at the end of the phone if you need to talk."

There were no responses 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?

Areas for improvement from the last inspection on 30 August 2022 Populate		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 19(1)(4)(5)(6) Stated: First time To be completed by: Immediately from the date of inspection and ongoing	<p>The registered person shall establish a procedure ("the complaints procedure") for considering complaints made to the registered person by a service user or a person acting on behalf of the service user. The registered person shall ensure that every complaint made under the complaints procedure is fully investigated. The registered person shall, within the period of 28 days beginning on and including the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the person who made the complaint of the action (if any) that is to be taken in response. The registered person shall maintain a record of each complaint, including details of the investigation made, the outcome and any action taken in consequence and the requirements of regulation 18 shall apply to that record.</p>	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.	
Area for improvement 2 Ref: Regulation 14(2)(a)	<p>The registered person shall ensure that each employee of the agency –</p> <p>(a) receives appropriate supervision;</p>	Met

<p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>Action taken as confirmed during the inspection: Discussion with the manager and review of staff records evidenced that this area for improvement had been addressed.</p>	
<p>Area for improvement 3</p> <p>Ref: Regulation 18(a) Schedule 4.3 and 4.4</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>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 –</p> <p>(a) kept up to date, in good order and in a secure manner; and</p> <p>An alphabetical index of service users, including the full name, address and telephone number of each of them and any serial numbers assigned to them.</p> <p>Action taken as confirmed during the inspection: Discussion with the manager and review of records evidence that this area for improvement had been addressed</p>	<p>Met</p>
<p>Area for improvement 4</p> <p>Ref: Regulation 18(a) Schedule 4(10)(a)(b)</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>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 –</p> <p>(a) kept up to date, in good order and in a secure manner; and</p> <p>10. Details of every allegation of abuse –</p> <p>(a) against a nurse; or</p> <p>(b) by a nurse (which is not the subject of a complaint made under regulation 19), who is employed by the agency, including details of the investigations made, the outcome and any action taken in consequence.</p> <p>Action taken as confirmed during the inspection: Discussion with the responsible individual confirmed that there were no adult safeguarding referrals made since the date of the last inspection. The responsible individual and manager had completed Adult Safeguarding Champion and Appointed Person Training on 22 September 2022.</p>	<p>Met</p>

<p>Area for improvement 5</p> <p>Ref: Regulation 20(3)(4)</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>The registered person shall ensure that the system referred to in paragraph (1) shall provide for consultation with service users and persons acting on behalf of service users.</p> <p>The registered manager shall ensure that the agency delivers services effectively on a daily basis and reports as required to the registered person.</p> <p>Action taken as confirmed during the inspection: Review identified that the current monitoring officer lacks experience to effectively undertake the role. This area for improvement is stated for a second time.</p>	<p>Partially met</p>
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5.2 Inspection findings

5.2.1 What systems are in place for staff recruitment and are they robust?

A review of the agency's staff recruitment records confirmed that pre-employment checks including criminal record checks (AccessNI), were completed and verified before registered nurses were supplied to the various health care settings.

5.2.2 What are the arrangements to ensure robust managerial oversight and governance?

A review of the records confirmed that all registered nurses were appropriately registered with the NMC. Information regarding registration details, renewal and revalidation dates was monitored by the responsible individual; this system was reviewed and found to be in compliance with regulations and standards. The responsible individual confirmed that staff would not be permitted to work if their professional registration lapses.

It was positive to note that registered nurses had supervisions undertaken in accordance with the agency's policies and procedures.

There was a system in place to ensure that the registered nurses were placed into settings where their skills closely matched the needs of patients. Nurses were provided with training appropriate to the requirements of the settings in which they were placed. This training included Deprivation of Liberty Safeguards (DoLS), adult safeguarding, dysphagia and moving and handling, as appropriate to their job roles.

The quality monitoring processes were reviewed to ensure that these arrangements were in line with Regulation 20 of Nursing Agencies Regulations (Northern Ireland) 2005. The

reports provided evidence that key stakeholders were consulted regarding the quality of service.

The reports included details of the review of; accident/incidents; professional registrations; staff recruitment and training. Discussion with the responsible individual confirmed following the last inspection a registered nurse had completed a number of quality monitoring visits. However, monitoring arrangements had changed and the most recent monitoring visit had been completed by a monitoring officer who had not any relevant experience. This area for improvement is stated for a second time.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. The responsible person confirmed that no complaints were received since the date of the last inspection.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs).

The alphabetical list of staff employed by the agency was up to date.

Records were retained in accordance with the Nursing Agencies Regulations. Discussion with the responsible individual identified a management of records and information policy was not in place. An area for improvement has been identified in this regard.

The agency's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

6.0 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).

	Regulations	Standards
Total number of Areas for Improvement	2*	1

* the total number of areas for improvement includes one that has been stated for a second time and one which is carried forward for review at the next inspection.

Areas for improvement and details of the QIP were discussed with Mrs Acknowledge Ngwena, Responsible Individual and Mrs Marina Burns, 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	
Area for improvement 1 Ref: Regulation 20(3)(4) Stated: Second time To be completed by: Immediately from the date of inspection and ongoing	<p>The registered person shall ensure that the system referred to in paragraph (1) shall provide for consultation with service users and persons acting on behalf of service users.</p> <p>The registered manager shall ensure that the agency delivers services effectively on a daily basis and reports as required to the registered person.</p> <p>Ref: 5.2.2</p> <p>Response by registered person detailing the actions taken:</p> <p>All staff to be given full 3 days of office induction before they start their duties.</p> <p>AccessNI to be applied for before they sign the contract.</p> <p>As part of the robust recruitment process 2 good references will be obtained before they sign their contracts as well</p> <p>As an agency we appointed an external auditor who is a qualified registered nurse who comes monthly to review our services and communicates with the customers and staff to ensure that quality service is delivered always. Any shortfalls the auditor will report back to the registered manager</p> <p>NMC register to be checked before they start their first shift, and every month NMC register will be checked to ensure that there are no restrictions on their practice.</p> <p>Staff Profiles to be sent to the customers before they commence their first shifts.</p> <p>Training Matrix is in place to monitor staff trainings</p> <p>The registered manager will be contacting the home managers where ever Top Class Nursing Agency is sending their staff to work to see if our staff need any further trainings and also the Registered Manager will be contacting the staff after their first shift as a way of supporting them.</p> <p>Three form of staff supervisions will be carried out by the registered manager per year.</p>

<p>Area for improvement 2</p> <p>Ref: Regulation 19(1)(4)(5)(6)</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>The registered person shall establish a procedure ("the complaints procedure") for considering complaints made to the registered person by a service user or a person acting on behalf of the service user.</p> <p>The registered person shall ensure that every complaint made under the complaints procedure is fully investigated.</p> <p>The registered person shall, within the period of 28 days beginning on and including the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the person who made the complaint of the action (if any) that is to be taken in response.</p> <p>The registered person shall maintain a record of each complaint, including details of the investigation made, the outcome and any action taken in consequence and the requirements of regulation</p> <p>Ref: 5.1</p> <p>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.</p>
<p>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</p>	
<p>Area for improvement 1</p> <p>Ref: Standard 2.1</p> <p>Stated: First time</p> <p>To be completed by: 31 May 2023</p>	<p>The registered person shall ensure policies and procedures as identified in Appendix 3 for the management of the nursing agency and supply of nurses are in place and in accordance with statutory requirements.</p> <p>This relates specifically to the management of records and information policy.</p> <p>Ref: 5.2.2</p> <p>Response by registered person detailing the actions taken:</p> <p>Top Class Nursing Agency deals with staff and clients' information which needs to be stored securely. The Archiving and storing of Records Management Policy is in place to guide us on the importance of proper records management.</p> <p>All archived records are stored in a manner which complies with statutes, regulations and insurance requirement.</p> <p>Records management is very important to the delivery of our services in orderly, efficient and accountable manner.</p>

	<p>Effective records management will help the nursing agency to ensure that we have the right information at the right time to make the right decisions.</p> <p>Records such as staff rota records and payslips etc will be archived in a safe storage with the contents recorded on the outer package and to be retained for 8 years.</p> <p>All records which are stored electronically, the computers are applied with login details.</p> <p>Disposal of documents such as staff information must be shredded before disposal after 8 years. A good size shredder is in place in the office.</p> <p>Disposal of electronically stored data, Top Class Nursing agency will make sure that these items such as memory sticks, computer hard drives and any data media storage will be fully wiped before disposal</p> <p>Disposal, Archiving and Storing of Records Management Policy is available upon request.</p>
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