

Inspection Report

11 October 2024



Top Class Nursing Services

Type of service: Nursing Agency
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www.rqia.org.uk

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: <p>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.</p> <p>Top Class Nursing Services also acts as a Recruitment Agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate Recruitment Agencies.</p>	

2.0 Inspection summary

An unannounced inspection was undertaken on 11 October 2024 between 9.55 a.m. and 4.25 p.m. The inspection was conducted by two care inspectors. The registered manager was also present at the inspection.

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 and the systems for retaining records were also reviewed.

An area for improvement was stated for a third and final time in relation to monthly quality monitoring.

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

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 they had no concerns in relation to the agency.

Comments received included:

Service users' comments:

- "I have no concerns or issues regarding the agency. The nurses supplied by the agency perform satisfactorily. I always receive the nurse's profile prior to them attending a shift. A photograph of the nurse is included in the profile."
- "I have no concerns regarding the nurses supplied by the agency. Good communication from the agency."

Registered Nurses' comments:

- "There is good training provided by the agency. The training includes face to face training for moving and handling and first aid. When I started with the agency I got a good induction and was provided with a staff handbook."
- "I had a detailed induction and was well supported by the agency. I had to complete all training before I started with the agency. Regular supervision provided."

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?

The last care inspection of the agency was undertaken on 27 April 2023 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 27 April 2023		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 20(3)(4) Stated: Second time	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. The registered manager shall ensure that the agency delivers services effectively on a daily basis and reports as required to the registered person.	Not Met
	Action taken as confirmed during the inspection: Quality monitoring reports contained limited engagement with service users and staff and limited review of incidents. Until addressed this area for improvement will be stated for a third and final time.	
Area for improvement 2 Ref: Regulation 19(1)(4)(5)(6) Stated: First time	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.	Met
	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	
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the responsible individual confirmed that this area for improvement had been addressed. Review of complaint records evidenced that this area for improvement had been addressed.	
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008		Validation of compliance
Area for improvement 1 Ref: Standard 2.1 Stated: First time	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.	Met
	This relates specifically to the management of records and information policy.	
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the responsible individual confirmed that this area for improvement had been addressed. Review evidenced that a management of records and information policy had been developed.	

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 manager; this system was reviewed and found to be in compliance with regulations and standards.

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, as appropriate to their job roles.

The agency has an electronic system for retaining dates for staff training; the manager advised that if individual staff fail to complete required training updates they are blocked from being available for supply.

Whilst there were quality monitoring arrangements in place the reports contained limited engagement with service users and staff and limited review of incidents. Reports also contained details pertaining to HCA which are not to be included in these reports. Until addressed this area for improvement will be stated for a third and final time.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the agency's quality monitoring process.

The manager advised that no incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

Records viewed were retained in accordance with the Nursing Agencies Regulations.

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

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

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

The area for improvement and details of the QIP were discussed with Mrs Acknowledge Ngwena, Responsible Individual, and Mrs Marina Burns, Registered 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: Third time To be completed by: Immediate from the date of inspection	<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>With regards to the action required to ensure that the compliance with regulation 20 is strictly followed. The RM and the RI discussed with the External Auditor that the Monthly Quality Monitoring Reports pertaining to Healthcare Assistants (HCA) are not to be included on the The Monthly Quality Monitoring Report in line with Regulation 20.</p> <p>The Monthly Quality Monitoring Report is for the Registered Nurses only and a separate file will be devised for the HCA audits for our own information. The External Auditor will be contacting Nursing and Residential homes where we supply Registered nurses and our Nurses as a way of checking our practise. More robust measures has been put in place to ensure that the Nursing Agency is delivering quality service which is effective continuously and also our staff are happy with the service we deliver to them.</p> <p>If the home manager is not available at the time of audits, the External Auditor must talk to the deputy manager or the Nurse In Charge to get the feedback regarding the Nursing Agency. If unable to obtain a verbal report on the day of the audit this must be followed up with an email. The same applies to the staff, the External Auditor must contact our Registered Nurses, if one is not available she must try to contact the next one before the end of her visit. The external Auditor also will be checking the way the Agency is handling all complaints and safeguarding issues pertaining our registered nurses. The Monthly Quality Monitoring Report will be showing detailed reports regarding mandatory trainings, robust recruitment procedures,</p>

	registered nurses supervisions and yearly appraisals.
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