

Unannounced Whistleblowing Inspection Report 30 October 2020











Top Class Nursing Services

Type of Service: Nursing Agency

Address: 1 Castle Street, Portadown, Co. Down, BT62 1BA

Tel No: 028 4176 1100

Inspector: Corrie Visser and Jim McBride

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a nursing agency which supplies nurses to independent sector nursing homes and residential homes.

3.0 Service details

Organisation/Registered Provider: Top Class Healthcare Ltd	Registered Manager: Acknowledge Ngwena
Responsible Individual: Acknowledge Ngwena	
Person in charge at the time of inspection: Acknowledge Ngwena	Date manager registered: 3 March 2019

4.0 Inspection summary

An unannounced inspection took place on 30 October 2020 from 10.00 to 12.30 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.

RQIA received whistleblowing information in relation to the domiciliary agency within Top Class and made a decision to undertake an inspection on the nursing agency. The concerns raised were in relation to recruitment of staff being undertaken by individuals without the appropriate training. It is not the remit of RQIA to investigate whistleblowing concerns made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care. However, if RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required; this may include an inspection of the agency.

On the day of inspection, the agency was found to be in compliance with the regulations and standards. We did not find evidence to substantiate the reported concerns by the whistle blowers.

The QIP from the previous inspection was not reviewed as this inspection focused on the whistle blowers' information submitted to RQIA. The QIP will be carried over to a future inspection of the service.

RQIA will continue to monitor and review the quality of service provided by the agency and may carry out further inspections to assess compliance with the regulations and minimum standards.

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	*3	**2

- * Three regulations were not reviewed and are carried over to the next inspection.
- ** Two standards were not reviewed and are carried over to the next inspection.

Details of the Quality Improvement Plan (QIP) were discussed with Ms Acknowledge Ngwena, responsible individual, 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 24 June 2020

The completed QIP was returned and approved by the care inspector.

Due to concerns regarding the recruitment processes within the agency found on the 24 June 2020, a serious concerns meeting was held with the responsible individual on 3 July 2020. RQIA were provided with assurances that the agency would become compliant with the regulations in relation to recruitment.

5.0 How we inspect

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

- the information received by RQIA from the whistle blowers
- previous inspection report and Quality Improvement Plan (QIP)
- all correspondence or information received by RQIA since the previous inspection

Three areas for improvement identified at the last care inspection were reviewed during this inspection and were deemed as met.

Five areas for improvement identified at the last care inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

The most recent inspection of the agency was an unannounced care inspection.

6.1 Review of areas for improvement from the last care inspection dated 24 June 2020

Areas for improvement from the last care inspection		
Action required to ensure Regulations (Northern Ire	e compliance with The Nursing Agencies eland) 2005	Validation of compliance
Area for improvement 1 Ref: Regulation 12 (1) (a) (d) (2) Stated: First time To be completed by: Immediate and ongoing	The registered person shall ensure that no nurse is supplied by the agency unless:- (a) he is of integrity and good character; (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3. Action taken as confirmed during the inspection: We reviewed the records of two recently recruited members of staff and found that the agency had completed all pre-employment checks before a date of employment was provided.	Met
Area for improvement 2 Ref: Regulation 20 (1) Stated: First time To be completed by: Immediate and ongoing	The registered person shall shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency. The registered person shall complete a monitoring report on a monthly basis. This report summarises the comments of people who use the services and/or their representatives about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the nursing agency is being managed in accordance with minimum standards. 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 will be carried forward to the next care inspection.	Carried forward to the next care inspection

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Area for improvement 3	The registered person shall provide to each	
Ref: Regulation 14 (4)	nurse who is employed for the purposes of the agency a written statement of the terms and	
	conditions on which he will be supplied to work	
Stated: First time	for, and under the control of, a service user.	Carried forward
To be completed by:	Action taken as confirmed during the	to the next care
Immediate and ongoing	inspection:	inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this	
	inspection and this will be carried forward to	
	the next care inspection.	
Area for improvement 4	The registered person shall ensure the	
Ref: Regulation 4	statement of purpose is reviewed and includes the information listed in schedule 1 of the	
J	Nursing Agencies Regulations (Northern	
Stated: First time	Ireland) 2005.	Carried forward
To be completed by:	Action taken as confirmed during the	to the next care
Upon return of completed	inspection:	inspection
Quality Improvement Plan	Action required to ensure compliance with this regulation was not reviewed as part of this	
	inspection and this will be carried forward to	
	the next care inspection.	
Action required to ensure	e compliance with The Nursing Agencies	Validation of
Minimum Standards 2008		Validation of compliance
	The registered person shall ensure that newly	
Minimum Standards 2008		
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction.	compliance
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Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by:	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by:	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by:	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the information listed in appendix 1 of the Nursing Agencies Minimum Standards.	compliance
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2 Ref: Standard 11.5	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the information listed in appendix 1 of the Nursing	Carried forward to the next care
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2 Ref: Standard 11.5 Stated: First time To be completed by: Upon return of completed	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the information listed in appendix 1 of the Nursing Agencies Minimum Standards. Action taken as confirmed during the inspection: Action required to ensure compliance with this	Carried forward
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2 Ref: Standard 11.5 Stated: First time To be completed by:	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the information listed in appendix 1 of the Nursing Agencies Minimum Standards. Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this	Carried forward to the next care
Minimum Standards 2008 Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate and ongoing Area for improvement 2 Ref: Standard 11.5 Stated: First time To be completed by: Upon return of completed	The registered person shall ensure that newly appointed staff, are required to complete structured orientation and induction. Action taken as confirmed during the inspection: We reviewed two staff recruitment files and found evidence that the staff had received the appropriate induction prior to commencement of employment. The registered person shall ensure the service user's guide is reviewed and includes the information listed in appendix 1 of the Nursing Agencies Minimum Standards. Action taken as confirmed during the inspection: Action required to ensure compliance with this	Carried forward to the next care

Area for improvement 3 Ref: Standard 9.1 Stated: First time	The registered person shall ensure the adult safeguarding policy and procedure is reviewed and is in accordance with regional policies and procedures.	Comical formulard
To be completed by: Upon return of completed Quality Improvement Plan	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 will be carried forward to the next care inspection.	Carried forward to the next care inspection
Area for improvement 4 Ref: Standard 9.2 Stated: First time	The registered person shall ensure there are written procedures for safeguarding children and young people, consistent with regional policies and procedures.	
To be completed by: Upon return of completed Quality Improvement Plan	Action taken as confirmed during the inspection: The responsible individual submitted the safeguarding children and young people policy and procedure to us prior to the inspection which is consistent with regional policies and procedures.	Met

6.2 Inspection findings

Information received from a whistleblower by the RQIA prior to this inspection raised concerns regarding the recruitment of staff and training; in particular to the domiciliary agency however the registered manager/responsible individual are the same for both agencies therefore we decided to undertake an inspection of the nursing agency.

We reviewed two full recruitment records for recently recruited staff and noted that all preemployment checks had been undertaken by the agency prior to the nurses being supplied. The agency was in compliance with Regulation 12 of the Nursing Agency Regulations (Northern Ireland) 2005. The staff members had also received an appropriate induction by the agency and further inductions would be undertaken on site. The staff members had undertaken appropriate training which provided them with the skills and knowledge to undertake their role. It was also noted that the staff members were appropriate registered with the Nursing and Midwifery Council (NMC) and evidence of this was contained in the recruitment files.

On the day of inspection, we were unable to substantiate the whistleblowers' concern received by RQIA.

	Regulations	Standards
Total number of areas for improvement	3	2

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection. The previous areas for improvement identified during the inspection on 24 June 2020 were not reviewed in their entirety during this inspection and are carried forward to the next care inspection. Details of the QIP were discussed with Ms Acknowledge Ngwena, responsible individual, 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 Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

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

Area for improvement 1

Ref: Regulation 20 (1)

Stated: First time

To be completed by: immediate and ongoing

The registered person shall shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency. The registered person shall complete a monitoring report on a monthly basis. This report summarises the comments of people who use the services and/or their representatives about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the nursing agency is being managed in accordance with minimum standards.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Ref: 6.1

Response by registered person detailing the actions taken:

Area for improvement 2

Ref: Regulation 14 (4)

Stated: First time

To be completed by: Immediate and ongoing

The registered person shall provide to each nurse who is employed for the purposes of the agency a written statement of the terms and conditions on which he will be supplied to work for, and under the control of, a service user.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Ref: 6.1

Response by registered person detailing the actions taken:

Area for improvement 3

Ref: Regulation 4

Stated: First time

To be completed by: upon return and f completed Quality Improvement Plan The registered person shall ensure the statement of purpose is reviewed and includes the information listed in schedule 1 of the Nursing Agencies Regulations (Northern Ireland) 2005.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Ref: 6.1

Response by registered person detailing the actions taken:

Action required to ensure 2008	e compliance with The Nursing Agencies Minimum Standards,
Area for improvement 1	The registered person shall ensure the service user's guide is
Ref: Standard 11.5	reviewed and includes the information listed in appendix 1 of the Nursing Agencies Minimum Standards.
Stated: First time	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried
To be completed by: upon return of completed	forward to the next care inspection.
Quality Improvement Plan	Ref: 6.1
	Response by registered person detailing the actions taken:
Area for improvement 2	The registered person shall ensure the adult safeguarding policy and procedure is reviewed and is in accordance with regional policies and
Ref: Standard 9.1	procedures.
Stated: First time	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried
To be completed by: upon return of completed	forward to the next care inspection.
Quality Improvement Plan	Ref: 6.1
	Response by registered person detailing the actions taken:

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



A completed Quality Improvement Plan from the inspection of this service is not currently available. However, it is anticipated that it will be available soon.

If you have any further enquiries regarding this report please contact RQIA through the e-mail addressinfo@rqia.org.uk





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