

Inspection Report

16 March 2023











TTM Healthcare Ltd

Type of service: Nursing Agency Address: 55-59 Adelaide Street, Belfast, BT2 8FE Telephone number: 028 9099 5166

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Registered Manager:

TTM Healthcare Ltd Ms Genevieve Gavin

Responsible Individual:

Ms Paula McDonnell

Date registered:
2 March 2022

Person in charge at the time of inspection:

Ms Genevieve Gavin

Brief description of the agency operates:

TTM Healthcare Ltd is a nursing agency which currently supplies nurses to Health and Social Care (HSC) Trust facilities in Belfast, Western and South Eastern HSCT areas.

TTM Healthcare Ltd also acts as a recruitment agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate Recruitment Agencies.

2.0 Inspection summary

An announced remote inspection was undertaken on 16 March 2023 between 10.00 a.m. and 2.15 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 and service user involvement were also reviewed.

Good practice was identified in relation to the monitoring of nurses' registrations with the Nursing and Midwifery Council (NMC) and follow up from incidents and complaints. There were good governance and management arrangements in place.

No areas for improvement were identified.

For the purposes of the inspection report, the term 'service user' describes the hospitals or care homes that 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 sourced spoke to two 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:

- "The nurse we have from TTM is excellent."
- "There have been no staff performance issues raised to my office with any of their staff."

Registered Nurses' comments:

- "I'm happy with TTM."
- "The face to face training we had recently was very beneficial."
- "All is well."

No responses were received 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?

Due to the coronavirus (Covid-19) pandemic, the Department of Health (DoH) directed RQIA to continue to respond to ongoing areas of risk identified in services. An inspection was not undertaken in the 2020-2021 OR 2021-2022 inspection years, due to the impact of Covid-19.

The last care inspection of the agency was undertaken on 30 September 2019 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 30 September 2022		
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008		Validation of compliance
Area for Improvement 1 Ref: Standard 1.12 Stated: First time	The registered person shall ensure the monthly quality monitoring reports summarises the comments of service users and staff about the quality of the service provided. Ref: 6.4 Action taken as confirmed during the inspection: Inspector confirmed monthly quality monitoring reports were available and included comments from service users and staff at the time of inspection.	Met
Area for Improvement 2 Ref: Standard 1.13 Stated: First time	The registered person shall ensure that the views of service users and staff are included in the annual quality report. Ref: 6.4 Action taken as confirmed during the inspection: Inspector confirmed annual quality reports were available and included views of service users and staff at the time of inspection.	Met

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

Records were retained of clinical supervisions that the registered nurses had availed of during long term placements.

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 Liberties Safeguards (DoLS), adult safeguarding, Dysphagia and the Management of Actual or Potential Aggression (MAPA), as appropriate to their job roles.

The content of the Adult Safeguarding policy and training was reviewed and was noted to reflect the regional guidance in Northern Ireland.

There were quality monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the agency's quality monitoring established that there was engagement with service users and staff. It was noted that the reports routinely monitored any incidents as part of the monthly checks to identify any patterns or trends.

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.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures.

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

Records were retained in accordance with the Nursing Agencies Regulations.

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

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms. Genevieve Gavin, Registered Manager, Ms. Cliona O'Gara, Business Manager, Ms. Jane Boland, Recruitment Consultant, Northern Ireland and Ms. Charlotte Lostak, Quality and Compliance Manager as part of the inspection process and can be found in the main body of the report.





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