

Inspection Report

Name of Service: Hive Healthcare

Provider: Hive Workforce Ltd

Date of Inspection: 9 December 2024

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Hive Workforce Ltd
Responsible Individual:	Ms Tanya McLaughlin
Registered Manager:	Ms Tanya McLaughlin
<p>Hive Healthcare operates a nursing agency in Northern Ireland. The agency proposes to supply and place registered nurses into independent sector nursing homes, NHS hospitals and community primary care sites. Nurses have been supplied into independent sector nursing homes since the agency's registration in August 2024.</p> <p>Hive Healthcare 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 announced inspection took place on 9 December 2024, between 9.30 a.m. to 11:30 a.m. and 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 and whistleblowing was also reviewed.

No areas for improvement were identified.

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

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the agency was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this agency. This included registration information and any other written or verbal information received from service users or staff.

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.

During the inspection process inspectors will seek the views of those working for the agency.

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

3.2 What people told us about the service

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

Staff spoke very positively in regard to the agency. One told us that "Hive Healthcare, Nursing Agency have provided me with professional guidance and support, second to none. I receive regular communication in the form of updates regarding my shifts, CPD requirements and upcoming opportunities. This ensures my practice is up to date and that I benefit from regular, straightforward feedback."

There were no responses to the electronic survey.

3.3 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 20 August 2024 by a care inspector. No areas for improvement were identified.

3.4 Inspection findings

3.4.1 Staffing Arrangements

A review of the agency's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

The manager agreed to review the interview process, this is specifically in relation to the questions asked of registrants. This will be reviewed at future inspections.

3.4.2 The systems in place for identifying and addressing risks

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. No referrals had been made by the agency to the NMC.

It was good to note that registered nurses have supervisions planned 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 Liberties Safeguards (DoLS), adult safeguarding, Dysphagia, National Early Warning Score (NEWS) as appropriate to their job roles.

The agency's provision for the welfare, care and protection of service users was reviewed. The organisation's adult safeguarding policy and procedures were reflective of the Department of Health's (DoH) regional policy and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC). The manager is aware that an annual Adult Safeguarding Position report is required. This will be reviewed at future inspections. was reviewed and found to be satisfactory.

Staff were required to complete adult safeguarding training during induction and every two years thereafter.

All staff had been provided with training in relation to medicines management. No medication errors have been reported.

3.4.4 The arrangements to ensure robust managerial oversight and governance

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.

No complaints had been received since the last inspection. There is a process in place for managing complaints and the manager is aware that an annual complaints statement is required. This will be reviewed at future inspections.

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

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

The manager is aware that an annual quality report is required. This will be reviewed at future inspections.

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

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Tanya McLaughlin, Responsible Individual, as part of the inspection process and can be found in the main body of the report.



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