



The Regulation and  
Quality Improvement  
Authority

Angels Recruitment Agency Ltd  
RQIA ID: 10676  
77 Creggan Road  
Rosemount, Londonderry  
BT48 9DA

Inspector: Amanda Jackson  
Inspection ID: IN022838

Tel: 07732833407/02871 377792  
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**Unannounced Care Inspection  
of  
Angels Recruitment Agency Ltd**

**18 January 2016**

The Regulation and Quality Improvement Authority  
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BT1 3BT

Tel: 028 9051 7500 Fax: 028 9051 7501

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## 1. Summary of Inspection

An unannounced care inspection took place on 18 January 2016 from 10.00 am to 15.00 hours. Overall on the day of the inspection the Agency was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the quality improvement plan appended to this report. This inspection was underpinned by The Nursing Agencies Regulations (Northern Ireland) 2005, and The DHSPSS Nursing Agencies Minimum Standards (2008).

## 2. Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

## 3. Actions/Enforcement Resulting From This Inspection

Enforcement action did not result from the findings of this inspection.

## 4. Inspection Outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	<b>0</b>	<b>5</b>

The details of the QIP within to this report were discussed with the Registered Person, Mr Daniel Duddy and the agency administrator as part of the inspection process. The timescales for completion commence from the date of inspection

## 5. Service Details

<b>Registered Organisation/Registered Provider</b> Angels Recruitment Agency Ltd/Mr Daniel James Duddy	<b>Registered Manager:</b> Mr John Martin Jackson (Acting)
<b>Person in Charge of the agency at the time of Inspection:</b> Mr Daniel Duddy	<b>Date Registered:</b> Current Acting Manager
<b>Number of service users in receipt of a service on the day of Inspection:</b> One	<b>Number of registered nurses, health visitors and midwives on the agency's books:</b> Three

## 6. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to establish the level of compliance achieved with respect to the following themes: Nurse Training and Vulnerable adults and children are protected from abuse.

## 7. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed:

- Previous inspection report
- Previous quality improvement plan.

Specific methods/processes used in this inspection include the following:

- Discussion with the registered provider and the agency administrator
- Examination of records
- File audits
- Evaluation and feedback.

The following records were examined in the inspection:

- Three staff recruitment records including Access NI records/pre-employment checks
- Agency policy file
- Policy for the absence of the registered manager
- Policy on management of records
- Three staff contracts of employment
- Three staff supervision and appraisal records
- Three staff training records

- Training and development policy and procedure
- Training plan/schedule
- Training records overview compliant with standard 6.6
- Induction programme
- Three monthly monitoring reports (June, July and August)
- Annual quality report 2014
- Vulnerable adults policy and procedure
- Child safeguarding policy and procedure
- Whistleblowing policy and procedure
- Staff handbook.

Discussions with one of two staff members took place following the day of inspection via telephone. The feedback from staff discussion supported the staff member to be happy within their role and working for Angels Recruitment Agency Ltd. The staff member described training as appropriate to their needs, delivered regularly and ongoing covering a range of mandatory areas in line with RQIA training guidelines (2012). The staff member presented an appropriate knowledge in the area of vulnerable adults in line with theme two of this report. The staff member discussed appropriate and ongoing line management support and informed the inspector that supervisions and appraisals take place at varying intervals during the year.

The inspector also spoke with the manager of the one facility which the agency supply staff into. This discussion took place during the inspection day (via telephone regarding the quality of staffing and care provision provided by Angels Recruitment Agency Ltd. The manager expressed satisfaction with the service and staff provided via the agency stating Angels Recruitment Agency Ltd provide a professional and responsive service with appropriately trained and competent staff.

The inspector would like to extend gratitude to the registered provider and administrator of Angels Recruitment Agency Ltd for their hospitality and contribution to the inspection process.

## **8. The Inspection**

### **Profile**

Angels Recruitment Agency Ltd is a nursing agency operating from 77 Creggan Road, Londonderry, BT48 9DA. The service currently places three nurses into one supported living facility.

### **8.1 Review of Requirements and Recommendations from Previous Inspection**

The previous inspection of the agency was an announced care inspection dated 20 March 2015. The completed QIP was returned and approved by the inspector.

## 8.2 Review of Requirements and Recommendations from the Previous Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 23	The registered person must give notice to RQIA where the registered manager is absent for a period of 28 days or more detailing information set out in paragraphs 2 (a) to (e).	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Following the previous inspection notification was submitted to RQIA regarding the current acting manager.	
<b>Requirement 2</b>  <b>Ref:</b> Regulation 12 (1)	The registered person must ensure that the following information is in place for each nurses prior to commencement of employment: <ul style="list-style-type: none"> <li>• two satisfactory written references, including one from the present or most recent employer</li> <li>• details of the persons health record</li> <li>• full employment history, with a satisfactory written explanation of any gaps in employment.</li> </ul>	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Records reviewed for the three current staff members were found to have been reviewed following the previous inspection and all required matters addressed in accordance with Regulation 12 (1) and requirement two.	
<b>Requirement 3</b>  <b>Ref:</b> Regulation 18	The registered person must review the recruitment records of all staff to ensure that full and complete recruitment records are in place.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> As detailed under requirement two above.	

Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 2.1	The registered person should ensure that all policies and procedures as identified in Appendix 3 are in place and in line with current legislation.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Review of the policies files during inspection confirmed a review of policies and procedures had taken place following the previous inspection and appeared to be compliant with Standard 2.1 and Appendix 3. The inspector reviewed a sample of policies from appendix 3 during this process.	
<b>Recommendation 2</b> <b>Ref:</b> Standard 2.1	The registered person should ensure that the policy for the absence of the registered manager is revised in accordance with statutory requirements.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The stated policy was reviewed during inspection, dated October 2015 and found to be compliant.	
<b>Recommendation 3</b> <b>Ref:</b> Standard 2.2	The registered person should ensure that feedback from staff and clients is used to develop policies and procedures.	<b>Not Met</b>
	<b>Action taken as confirmed during the inspection:</b> This matter was discussed during inspection and confirmed not to have taken place to date due to the size of the agency.	
<b>Recommendation 4</b> <b>Ref:</b> Standard 4.4	The registered person should ensure that a record is retained of the date the Access NI check was sent, the date received, the enhanced certificate number and the action taken by the agency.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Records reviewed for the three current staff members were found to be in accordance with Standard 4.4 and recommendation four.	

<p><b>Recommendation 5</b></p> <p><b>Ref:</b> Standard 3.2</p>	<p>The registered person should ensure that the policy on the management of records includes arrangements for the creation, use, retention, storage, transfer, disposal and access in line with DHSSPS guidance.</p> <p><b>Action taken as confirmed during the inspection:</b> The stated policy was reviewed during inspection, and found to be compliant. The agency has been advised to ensure dates of policy development and review are retained on all policies for future review.</p>	<p><b>Met</b></p>
<p><b>Recommendation 6</b></p> <p><b>Ref:</b> Standard 3.3, 3.4</p>	<p>The registered person should ensure that the following records for all nurses are accurate, up to date and available for inspection:</p> <ul style="list-style-type: none"> <li>• copies of terms and conditions</li> <li>• annual appraisals</li> <li>• supervision.</li> </ul> <p><b>Action taken as confirmed during the inspection:</b> Records reviewed for the three current staff members were found to be in accordance with Standard 3.3 and 3.4 and recommendation six with exception to evidence of annual appraisals.</p>	<p><b>Partially met</b></p>
<p><b>Recommendation 7</b></p> <p><b>Ref:</b> Standard 3.6</p>	<p>The registered person should keep a record of training carried out to include:</p> <ul style="list-style-type: none"> <li>• the date of the training</li> <li>• the name and qualification of the trainer</li> <li>• content of the training</li> <li>• names and signatures of attendees.</li> </ul> <p><b>Action taken as confirmed during the inspection:</b> Records reviewed for the three current staff members were found to be partially met in accordance with Standard 3.6 and recommendation seven with the absence of trainer qualifications for all training areas reviewed during inspection. Staff training records in the areas of manual handling, infection control and medication were not available for review during inspection and have been required for submission with the QIP attached to this report.</p>	<p><b>Partially met</b></p>

## **8.2 Theme 1: Nurse Training -The agency has procedures in place to ensure all nurses are appropriately trained and qualified for their roles.**

### **Is Care Safe?**

Angels Recruitment Agency Ltd is a small nursing agency with three nurses employed and one part time nurse manager overseeing the recruitment process. The agency currently supply's nurse's to one facility. The agency is not a recruitment agency involved in the supply of care staff and therefore is not registered with Department of Employment and Learning (DEL).

The agency has a training and development policy that had been approved, signed and dated. The policy was found to be in compliance with the RQIA mandatory training guidelines (2012).

There was evidence that the training needs of individual nurses are identified and records viewed confirmed that the agency had systems in place to provide nurses with a range of mandatory training compliant with RQIA mandatory training guidelines (2012). The agency do not currently provide any additional training and this was discussed during inspection for consideration. The staff training records could not be made available for review during inspection in the area of manual handling, medication and infection control in respect of staff sign in sheets. This matter is recommended for attention and submission of training records with the QIP for inspector review.

Information examined indicated that each new nurse must complete an induction prior to any placement. Training records examined provided evidence that three nurses employed by the agency had completed mandatory training but all staff employed with the agency where long term and hence induction records were not available for review. Completion and retention of new staff induction records were discussed during the inspection day for future review.

Discussion with the agency acting manager confirmed supervision and appraisal processes are in place. The agency has a system for staff supervision which was evidenced during inspection however staff appraisal processes were not available for review during inspection and have been recommended for review.

On the day of the inspection there was evidence that administration systems are well organised and records requested for review were made available to the inspector.

### **Is Care Effective?**

The training files relating to three nurses were examined and contained evidence of documentary evidence of the nurse's previous learning, professional development and practice experience. Newly recruited staff files could not be reviewed as the agency has not recruited recently hence the inspector was unable to review details of previous learning and practice experience for such staff members.

Arrangements in place to ensure that skills and expertise of each nurse is matched to the requirements of placements were not available for review at inspection as stated above (no staff recently recruited). All current staff where long-term and have been placed in the aligned facility over a substantial period of time.

Arrangements were in place to check that each nurse is registered with NMC at employment commencement and ongoing on an annual basis.



Records examined found that the training needs of three nurses had been identified and the required training had been met by the agency with exception to those.

### **Is Care Compassionate?**

There was evidence within the monthly monitoring reports that the effect of the nurses training is evaluated as part of quality monitoring. This report is currently completed by the acting manager and is recommended for completion by the registered provider ongoing. The inspector also recommended review of the current template in line with the RQIA template for monthly quality monitoring.

The review of staff training records and quality feedback through monthly monitoring informed the inspector there are arrangements in place to ensure nurses are appropriately trained and qualified for their roles.

Feedback from the one facility manager (via telephone) on the inspection day regarding staff placements was found to be positive with the manager discussing a professional and efficient service provided by Angels Recruitment Agency Ltd with appropriately skilled and competent staff.

### **Areas for Improvement**

The agency is required to review their current monthly quality monitoring process and template in accordance with Standard 1.12.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## **8.3 Theme 2: Vulnerable adults and children are protected from abuse.**

### **Is Care Safe?**

The agency had policies and procedures for protecting vulnerable adults and children in accordance with legislation, DHSSPS guidance, regional protocols and procedures issued by Health and Social Services Board and the relevant HSC trust however the vulnerable adults policy was not current and up to date with the most recent DHSSPS guidelines for safeguarding adults. The child protection policy is also recommended for review regarding definitions and contact details for appropriate professionals. The agency administrator confirmed the agency was not providing a service to children at this time. Receipt of the revised child protection policy post inspection confirmed definitions and contact details had been updated.

Staff training records examined confirmed that procedure for protecting vulnerable adults is included in the training programme for staff most recently completed in 2015. Annual training due to commence in 2016 will include training for all staff in the area safeguarding children and young people despite the agency not supplying staff into children services.

There is a written policy on "Whistle Blowing" and procedures that identify to whom staff report concerns about poor practice.

The agency administrator reported to date there had been no reported issues or concerns regarding the protection of vulnerable adults and children. The agency administrator appeared fully familiar with the reporting of any such event and this was also discussed with the acting manager via telephone following the inspection.

### **Is Care Effective?**

On the day of the inspection the agency administrator told the inspector of the range of safeguards the agency had implemented to ensure vulnerable adults and children are protected from abuse. This included the arrangements in place that ensure all necessary pre-employment checks are completed and considered. Pre-employment checks reviewed during inspection including nurses NMC registration and Access NI.

The agency administrator reported that she was confident that prior to placement agency nurses were provided with the relevant information to ensure they took appropriate action in the event of a suspicion of, or actual abuse. The registered person was confident with the role of the agency acting manager and responsibility regarding any investigation in the event of an allegation of abuse being made.

### **Is Care Compassionate?**

The acting manager is a trained registered nurse and is fully involved in the recruitment process. There was evidence that the agency had appropriate pre-employment checks completed.

The agency administrator discussed how nurses employed complete an induction that includes training in all aspects of abuse and the protection of vulnerable adults and children. As all staff have been with the agency long-term induction training was not available for review during inspection. Refresher training is provided for nurses on an annual basis. The agency administrator confirmed that the agency currently operate a supervision programme for nurses employed. Review of this process during inspection confirmed a consistent approach and timeframe for supervision.

Discussion with the agency administrator, review of training materials and discussions with one nurse demonstrated that the agency promotes the core values of care and takes account of the minimum standards and regulations in respect of this theme.

There was evidence to confirm that the agency had arrangements in place to obtain service users views about nurses regarding their performance and competencies, this was reviewed in the monthly quality monitoring reports presented at inspection. The agency administrator expressed they had no concerns about their nurses practice and confirmed they were in receipt of nurse's training regarding the protection of vulnerable adults. The inspector reviewed three staff records in this area during inspection.

### **Areas for Improvement**

The agency is required to review the vulnerable adults policy and procedure to ensure the policy is in line with nursing agency regulations and standards.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## **Additional areas examined**

### **Incidents and Complaints**

The agency has not received any complaints since the previous inspection and no notifiable incidents have been reported.

### **Registered manager**

The inspector discussed the ongoing matter of the acting manager who has been in place for one year. The registered provider explained that the registered manager will hopefully be returning to post in the near future. Should this matter not occur then the agency will proceed to register the current acting manager.

### **Quality Improvement Plan**

The issue(s) identified during this inspection are detailed in the Quality Improvement Plan. Details of this Quality Improvement Plan were discussed with the registered provider Mr Daniel Duddy and the agency administrator as part of the inspection process. The timescales commence from the date of inspection.

Registered providers/managers should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider/manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

## **8.3 Statutory Requirements**

This section outlines the actions which must be taken so that the Registered Person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Nursing Agencies Regulations (Northern Ireland) 2005.

## **8.4 Recommendations**

This section outlines the recommended actions based on research, recognised sources and The Nursing Agencies Minimum Standards (2008). They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

## **8.5 Actions Taken by the Registered Manager/Responsible Person**

The Quality Improvement Plan will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The responsible person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to [agencies.team@rqia.org.uk](mailto:agencies.team@rqia.org.uk) to be assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home/agency/service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

## Quality Improvement Plan

### Recommendations

#### Recommendation 1

Ref: Standard 2.2

Stated: Second time

To be Completed by:  
18 April 2016

The registered person should ensure that feedback from staff and clients is used to develop policies and procedures.

**Response by Registered Person(s) Detailing the Actions Taken:**

#### Recommendation 2

Ref: Standard 3.6

Stated: Second time

To be Completed by:  
18 March 2016

The registered person should keep a record of training carried out to include:

- the dates of the training;
- the name and qualification of the trainer or the training agency;
- content of the training programme; and
- the names and signatures of those attending the training event.

Staff training records in the areas of manual handling, medication and infection control are required for submission with the QIP for all three staff members.

**Response by Registered Person(s) Detailing the Actions Taken:**

#### Recommendation 3

Ref: Standard 3.3 and 3.4

Stated: Second time

To be Completed by:  
31 January 2016 and ongoing.

The registered person should ensure that the following records for all nurses are accurate, up to date and available for inspection:

- annual appraisals.

**Response by Registered Person(s) Detailing the Actions Taken:**

#### Recommendation 4

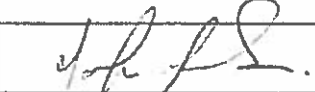

Ref: Standard 1.12

Stated: First time

To be Completed by:  
31 January 2016 and ongoing.

The registered person monitors the quality of services in accordance with the nursing agency's written procedures and completes a monitoring report on a monthly basis. This report summarises the comments of people who use 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.

**Response by Registered Person(s) Detailing the Actions Taken:**

<b>Recommendation 5</b> <b>Ref: Standard 9.1</b> <b>Stated: First time</b> <b>To be Completed by:</b> <b>18 March 2016</b>	Procedures for protecting vulnerable adults are in accordance with legislation, DHSSPS guidance, regional protocols and procedures issued by Health and Social Services Boards and HSC Trusts.		
	<b>Response by Registered Person(s) Detailing the Actions Taken:</b>		
<b>Registered Manager Completing QIP</b>		<b>Date Completed</b>	16.3.16
<b>Registered Person Approving QIP</b>		<b>Date Approved</b>	16.3.16
<b>RQIA Inspector Assessing Response</b>	a. jackson	<b>Date Approved</b>	8/6/16

*\*Please ensure the QIP is completed in full and returned to [agencies.team@rqia.org.uk](mailto:agencies.team@rqia.org.uk) from the authorised email address\**

# ANGELS RECRUITMENT AGENCY

## Quality Improvement Plan

Returned

Recommendation 1. Standard 2:2

To be implemented at each Training day. Also at supervision of staff. Each monthly monitoring form completed the client will be encouraged to voice their views.

Recommendation 2. Standard 3:6

Postponed till April. All staff to complete Mandatory training as per guidelines.

Recommendation 3. Standard 3:3

Annual Appraisals completed and retained in staff filing cabinet.

Recommendation 4. Standard 1:12

Monitoring ongoing and Annual Report from previous year (monitoring forms) to be completed and returned to agency by end of April by our independent Auditor.

Recommendation 5 Standard 9:1

Vulnerable Adult and Children Policy updated according with request.

Signed  Nurse Manager

Signed  Registered person

Date 06-04-16

As requested in line with hand written reply from 16-03-16.