

# **Nursing Agency Inspection**

Name of Nursing Agency: Balmoral Healthcare Agency Ltd

Nursing Agency ID No: 10677

Inspection No: 20904

Date of Inspection: 4 December 2014

Inspector's Name: Michele Kelly

The Regulation And Quality Improvement Authority Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS Tel: 028 8224 5828 Fax: 028 8225 2544

# **General Information**

| Name of agency:  | Balmoral Healthcare Agency Ltd   |
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| Address:   | 146 Malone Road<br>Belfast<br>BT9 5LH                                      |
| Telephone number:  | 028 9038 0808  |
| E mail address:  | karen.moffett@gonursing.co.uk  |
| Registered organisation/<br>Registered provider:                                 | Balmoral Healthcare Agency Ltd<br>Mrs Amanda McCully                       |
| Registered manager:  | Mrs Karen Moffett  |
| Person in Charge of the agency at the time of inspection:                        | Mrs Karen Moffett  |
| Categories of care:  | Nursing Agency   |
| Number of registered nurses, health visitors and midwives on the agency's books: | 36   |
| Date and type of previous inspection:  | Primary Announced Inspection<br>10 March 2014<br>10.00 hours - 13.15 hours |
| Date and time of inspection:   | Primary Unannounced Inspection 4 December 2014 14.30 hours – 17.00 hours   |
| Name of inspector:   | Michele Kelly  |

Inspection ID: IN020904

#### Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect nursing agencies. A minimum of one inspection per year is required.

This is a report of an inspection to assess the quality of services being provided. The report details the extent to which the standards measured during the inspection were met.

### **Purpose of the Inspection**

The purpose of this inspection was to ensure that the service is compliant with relevant regulations and minimum standards. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services. For this reason, inspection involves in-depth examination of an identified number of aspects of service provision.

The aims of the inspection were to examine the policies, procedures, practices and monitoring arrangements for the provision of the nursing agency's service, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Nursing Agencies Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Agency Minimum Standards Minimum Standards (July 2008)

Other published standards which guide best practice may also be referenced during the inspection process.

#### Methods/Process

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

- Discussion with the registered manager
- Examination of records
- File audit
- Evaluation and feedback.

Any other information received by RQIA about this registered provider and its service delivery has also been considered by the inspector in preparing for this inspection.

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### **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 DHSSPS Nursing Agencies Minimum Standards:

#### Standard 2:

There are policies and procedures in place that direct the quality of services provided by the nursing agency.

#### • Standard 3:

Clear, documented systems are in place for the management of records in accordance with legislative requirements.

#### Standard 11:

There are arrangements in place to respond promptly to requests for private nursing care.

#### Standard 12:

Safe effective nursing care, that is based on continuous assessment, is planned and agreed with the patient, is accurately recorded in care plans and is regularly reviewed.

#### • Standard 13:

There are accurate and up to date case records for private patients who receive care in their own homes by nurses supplied by the nursing agency.

#### Standard 14:

Consent to treatment and care is obtained from private patients who receive care in their own home.

#### Standard 15:

There are arrangements in place to ensure that agency nurses manage medicines safely and securely in private patients' own homes.

The inspector rated the centre's compliance level against each criterion.

The table below sets out the definitions that RQIA has used to categorise the service's performance:

| Guidance - Compliance Statements |  |   |
|----------------------------------|--|---|
| Compliance statement             | Definition   | Resulting Action in Inspection Report   |
| 0 - Not applicable               |  | A reason must be clearly stated in the assessment contained within the inspection report.   |
| 1 - Unlikely to become compliant |  | A reason must be clearly stated in the assessment contained within the inspection report.   |
| 2 - Not compliant                | Compliance could not be demonstrated by the date of the inspection.  | In most situations this will result in a requirement or recommendation being made within the inspection report.                           |
| 3 - Moving towards<br>compliance | Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.      | In most situations this will result in a requirement or recommendation being made within the inspection report.                           |
| 4 - Substantially<br>Compliant   | Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.                      | In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report. |
| 5 - Compliant                    | Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken. | In most situations this will result in an area of good practice being identified and comment being made within the inspection report.     |

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### **Profile of service**

Balmoral Healthcare Agency Ltd is a nursing agency operating out of their offices located at 146 Malone Road Belfast. The service currently has registered nurses available for placement within Northern Ireland. The nursing agency mainly supplies registered nurses to Health and Social Care Trust hospitals, nursing homes and also supplies nurses for private nursing in peoples own homes.

### **Summary of Inspection**

This is the annual unannounced inspection report for Balmoral Healthcare Ltd which was undertaken on 4 December 2014 by Michele Kelly from the Regulation and Quality Improvement Authority (RQIA) starting at 2.30 hours and finishing at 17 .00 hours

The inspection sought to establish the compliance being achieved with respect of: The Nursing Agencies Regulations (Northern Ireland) 2005, the DHSSPS Minimum Standards for Nursing Agencies (2008).

The Registered Manager, Ms Karen Moffett was in attendance throughout the inspection.

The previous inspection occurred on 10 March 2014 and resulted in one requirement and two recommendations. Review of these three matters showed compliance.

The focus for this inspection was to examine a selected number of criteria from standards extracted from DHSSPS Nursing Agencies Minimum Standards document (2008). To validate compliance levels for seven of the above standards, the inspector had a lengthy discussion with the registered manager and undertook a review of relevant documentation held at the nursing agency. Feedback was provided at the end of the inspection to the registered manager.

The certificates of registration and indemnity insurance were clearly displayed within the premises.

Robust systems were in place to recruit staff as outlined in the recruitment policy and procedures. Four personnel files reviewed were found to be fully compliant with the legislation and systems were in place to check the registration status of nurses with the NMC.

The registered manager is actively involved in the recruitment, assessment and placement of all nurses. Records are held regarding placement of nurses and the decision making process in this regard.

A number of policies and procedures were reviewed, which included Absence of the Registered Manager, Orientation and Induction and Management and Control of Operations. It is evident that there has been significant activity in relation to reviewing and updating policies and procedures since the last inspection.

### • Standard 2:

A review of five criteria for this standard evidenced that there are policies and procedures in place in accordance with Appendix 3: The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Agency Minimum Standards Minimum Standards (2008) Policies are centrally indexed and three policies were viewed on the day of inspection. These had been dated and signed and were subject to at least three yearly review by the registered provider and manager. The manager discussed how feedback from nurses and clients would help inform policy and procedure.

The agency was judged to be 'compliant' with this standard.

#### Standard 3:

Clear, documented systems are in place for the management of records in accordance with legislative requirements.

A review of seven criteria for this standard evidenced that systems are in place for the management of records in accordance with legislative requirements. The agency has a Management of Records and Information policy which sets out arrangements for the creation, use and storage of records.

The agency was judged to be 'compliant' with this standard

#### Standard 11:

There are arrangements in place to respond promptly to requests for private nursing care.

The agency has clear policies and procedures in place for responding to requests to provide nursing care within a patient's own home. Following referral, all patients are assessed by a member of the nursing team and a care plan is developed with the patient and in line with the protocols of the contracting trust. A copy of the Service User Guide is provided to all new patients.

The agency was judged to be 'compliant' with this standard

### Standard 12:

Safe effective nursing care, that is based on continuous assessment, is planned and agreed with the patient, is accurately recorded in care plans and is regularly reviewed.

All patients have an assessment undertaken by the nurse manager who develops a person centred care plan.

The provision of nursing care and re-assessment of the patient's ongoing care needs, are agreed with the patient and/or their representative and recorded at each visit. A copy of all records is held in the patient's home.

Systems are in place to provided ongoing clinical supervision for the nurses, annual competency assessments and appraisal.

Patients are encouraged to participate in their care and have the opportunity to provide feedback on the service provided.

The agency was judged to be 'compliant' with this standard.

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#### Standard 13:

There are accurate and up to date case records for private patients who receive care in their own homes by nurses supplied by the nursing agency.

The agency has guidelines for records, record keeping and access to patient records which is used in conjunction with the management of records policy. At the time of inspection there were no patients being provided with care in their own home by the agency's nurses.

The agency was judged to be 'compliant' with this standard.

#### Standard 14:

Consent to treatment and care is obtained from private patients who receive care in their own home.

The agency has a policy and procedure in place for obtaining consent to treatment.

Following referral and assessment, the agency nurses provide patients with information regarding their treatments, possible side effects and expected outcomes prior to obtaining consent to treatment.

The agency was judged to be 'compliant' with this standard.

#### Standard 15:

There are arrangements in place to ensure that agency nurses manage medicines safely and securely in private patients' own homes.

The agency has a range of policies and procedures in place for the management and administration of medication in the patient's own home. Nurses are issued with relevant information regarding the medication to be administered and any specific treatment protocols. The nurse manager regularly reviews records in relation to the administration of medication to ensure compliance with policy and procedure.

The agency was judged to be 'compliant' with this standard.

There were no areas for service improvement identified at the time of inspection and this is commendable.

The overall outcome of the inspection would indicate that the agency is providing a high quality service with safe and effective patient care.

The inspector would like to extend her gratitude to Ms Karen Moffett and the staff of Balmoral Healthcare Agency Ltd for the hospitality and contribution to the inspection process.

# Follow-Up on Previous Issues

| No. | Regulation<br>Ref.      | Requirement  | Action Taken - As Confirmed During This Inspection   | Inspector's<br>Validation Of<br>Compliance |
|-----|-------------------------|--|--|--|
| 1   | Regulation (12) (1) (b) | The registered manager is required to ensure all staff receive annual appraisals as discussed within theme two standard 6.5 and 6.7. | The system of organising annual appraisals schedules mandatory appointments for all nurses and aims to ensure three appraisals occur each week. Files examined evidenced that this process is ongoing. | Compliant                                  |

| No. | Minimum<br>Standard Ref. | Recommendations  | Action Taken - As Confirmed During This Inspection  | Inspector's Validation Of Compliance |
|-----|--------------------------|--|---|--------------------------------------|
| 1   | Standard 7.3             | It is recommended that the registered manager in consultation with staff should consider ways of ensuring evidence of staff competence.  Restated from 19 March 2013 | Clients provide feedback<br>on nurses placed, on a<br>regular basis. Twice<br>yearly supervision<br>sessions take place and<br>each nurse completes a<br>skills competency sheet<br>which is updated. | Compliant                            |
| 2   | Standard 1.12            | The registered manager is recommended to ensure that monthly monitoring reports summarise the comments of service users.   | Comments of service users and complaints and/or incidents are discussed at weekly staff meetings and reported on monthly following the monthly managers meeting.                                      | Compliant                            |

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| Criterion Assessed: 2.1 Policies and procedures as identified in Appendix 3 for the management of the nursing agency and supply of nurses are in accordance with statutory requirements.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| There are policies and procedures in place as identified in Appendix 3 in accordance with statutory requirements that guide and direct the quality of services provided by Balmoral Healthcare   | Compliant        |
| Inspection Findings:   |                  |
| There are policies and procedures in place as identified in Appendix 3 for the management of the nursing agency and supply of nurses in accordance with statutory requirements. The inspector viewed three policies; Absence of the Registered Manager, Orientation and Induction and Management and Control of Operations. These policies had been reviewed by the registered manager and provider and were dated and signed. | Compliant        |

| Standard 2: There are policies and procedures in place that direct the quality of services provided by the nursing agency.  |                  |  |
|---|------------------|--|
| Criterion Assessed: 2.2 There are arrangements to ensure that policies and procedures are developed with input from staff, private patients who receive care in their own homes and managers from the settings where nurses are placed.   | Compliance Level |  |
| Provider's Self Assessment:   |                  |  |
| Balmoral Healthcare does not currently supply nurses to any private Homecare clients. However, policies and procedures remain under 3 yearly review as per RQIA standards. There is a client/member evaluation process in use and all negative findings/comments are responded to and documented. There is also a comprehensive complaints procedure in place for clients and members. All are recorded, documented, investigated and reviewed for closure/outcomes.  | Compliant        |  |
| Inspection Findings:  |                  |  |
| The quality of services is monitored by the registered person on an ongoing basis through evaluations completed by clients and agency nurses. These are recorded monthly in a monitoring report. The registered manager also makes regular weekly and sometimes daily contacts with clients regarding the quality of service provided by the agency. Information obtained from formal and informal contacts is used to ensure service improvement and may influence the development of policy and procedures. | Compliant        |  |

| Criterion Assessed: 2.3 Policies and procedures are centrally indexed and compiled into a policy manual.                               | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All policies and procedures are centrally indexed and compiled into a policy manual  | Compliant        |
| Inspection Findings:   |                  |
| On the day of inspection Policies and procedures are centrally indexed and available in a policy manual in accordance with Appendix 3. | Compliant        |

| Criterion Assessed: 2.4 Policies and procedures are dated when issued, reviewed or revised.                     | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| All policies are dated when issued, reviewed or revised by the Registered Manager                               | Compliant        |
| Inspection Findings:  |                  |
| All policies and procedures are dated when first issued and any reviews or revisions are also dated and signed. | Compliant        |

| Standard 2: There are policies and procedures in place that direct the quality of services provided by the new  | ursing agency.   |
|---|------------------|
| Criterion Assessed: 2.5 Policies and procedures are subject to a systematic three yearly review, and the registered person ratifies any revision to or introduction of new policies and procedures.   | Compliance Level |
| Provider's Self Assessment:   |                  |
| There is a systematic 3 yearly review of all policies in place. As I have only been Registered Manager for 1 year to date, I am currently updating, reviewing and revising all policies when appropriate.   | Compliant        |
| Inspection Findings:  |                  |
| The inspector viewed the policy manual and it was evident that policies are reviewed at least three yearly. The registered manager and the registered person are involved in all reviews of policies and procedures. It was evident that the registered provider is responsible for the ratification of revisions to existing policies and the introduction of new policies and procedures. | Compliant        |

| Criterion Assessed: 3.1 Where agency nurses are supplied to provide nursing care to private patients in their own homes those patients have access to their records in accordance with the Data Protection Act 1998.                               | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All homecare patients have access to their records in accordance with the Data Protection Act. Balmoral Healthcare also hold master copies of any files/notes made in the office.  | Compliant        |
| Inspection Findings:   |                  |
| There are no nurses being supplied at present to provide nursing care to private patients in their own homes. The manager confirmed that in the past when they had private patients in their own home, the records were available to the patients. | Compliant        |

| Criterion Assessed: 3.2 The policy and written procedures for the management of records detail arrangements for the creation, use, retention, storage, transfer, disposal of and access to records.                               | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| There is a comprehensive policy in place for the Management of Records  | Compliant        |
| Inspection Findings:  |                  |
| The Management of Records and Information Policy (November 2014) and the Data Protection Policy and procedure contain detail and guidance for the creation, use, retention, storage, transfer, disposal of and access to records. | Compliant        |

| Criterion Assessed: 3.3 Records required under The HPSS (Quality Improvement and Regulation)(NI) Order 2003 (Regulations) are available in the nursing agency for inspection at all times.  | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| All records are available in the nursing agency office for inspection as per Schedule 4 Regulations   | Compliant        |
| Inspection Findings:  |                  |
| On the day of inspection all records requested were made available to the inspector. The agency has a bespoke computerised system which records information as required by Schedule 4 and is programmed to provide alerts for indemnity insurance, NMC status and training needs. | Compliant        |

| Criterion Assessed: 3.4 The information held on record is accurate, up to date and necessary.       | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| The information held on record as per schedule 4 Regulations is accurate, up to date and necessary. | Compliant        |
| Inspection Findings:  |                  |
| Records inspected were current, necessary and confirmed by the manager as accurate.                 | Compliant        |

| Criterion Assessed: 3.5 Nursing care records are written and maintained in accordance with NMC guidelines.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| Nursing Care records are written and maintained in accordance with NMC guidelines. We also provide training on Record Keeping to our Members   | Compliant        |
| Inspection Findings:   |                  |
| The inspector examined historic records of a private patient cared for in their own home by agency staff. These records had been written and maintained in accordance with NMC guidelines. | Compliant        |

| Standard 3: Clear, documented systems are in place for the management of records in accordance with legislative requirements.   |                  |  |
|---|------------------|--|
| Criterion Assessed:   | Compliance Level |  |
| 3.6 Agency staff are trained to create, use, manage and dispose of records in line with good practice and legislative requirements.   |                  |  |
| Provider's Self Assessment:   |                  |  |
| Training is provided in Balmoral Healthcare on Record keeping in line with good practice and legislative requirements and NMC guidelines  | Compliant        |  |
| Inspection Findings:  |                  |  |
| The registered manager informed the inspector that Balmoral Healthcare have provided training on record keeping for all staff. The content of the training was viewed by the inspector and there was evidence in training records of nursing staff attendance at this training. | Compliant        |  |

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| Criterion Assessed: 3.7 Records are held securely for the period of time as specified in DHSSPS guidelines and disposed of in accordance with legislation.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| Records are retained securely as per DHSSPS guidelines and disposed of in accordance with legislation. All records are kept in filing cabinets in locked rooms within the building when the office is empty. All out of date documents are shredded. | Compliant        |
| Inspection Findings:   |                  |
| The Management of records and information policy details requirements for the storage and archival of records and is as specified in DHSSPS guidelines.  | Compliant        |

| Standard 11: There are arrangements in place to respond promptly to requests for private nursing care.   |                  |  |
|--|------------------|--|
| Criterion Assessed:  | Compliance Level |  |
| 11.1 The policy and procedures detail the arrangements for dealing with requests from people who are seeking agency nurses to provide private nursing care in their own homes.   |                  |  |
| Provider's Self Assessment:  |                  |  |
| There are procedures in place for dealing with requests for private homecare. An initial enquiry form is completed by the staff member taking the enquiry and passed onto the Nurse Manager for follow up. Balmoral Healthcare only supplies Registered Nurses for private homecare. We are no longer RQIA registered as a Domiciliary Agency.                                       | Compliant        |  |
| Inspection Findings:   |                  |  |
| While there are no nurses currently providing private nursing care to patients in their own homes, the manager outlined the process from enquiry to provision. This involved visits from the nurse manager where assessment and matching of staff begin the process. In the past nurse have been supplied by the agency to supplement and assist care commissioned by the HSC Trust. | Compliant        |  |

Compliant

| Standard 11: There are arrangements in place to respond promptly to requests for private nursing care.  |                  |  |
|---|------------------|--|
| Criterion Assessed: 11.2 An identified nurse employed by the nursing agency visits patients in their own homes, carries out and records an assessment of nursing care needs using validated assessment tools, prior to supplying a nurse. Information received from other care providers, if appropriate, is used in this assessment. Any associated factors or risks are documented. | Compliance Level |  |
| Provider's Self Assessment:   |                  |  |
| The Nurse Manager will discuss the clients needs and make a home assessment visit before a contract to supply staff commences. Care will always be co-ordinated with any GP/District Nursing teams involved and contact will be maintained for the duration of the contract   | Compliant        |  |

The patient records of a private patient to whom the agency were previously providing care evidenced that the

nurse manager assesses nursing care needs in the patient's own home and works in conjunction with other care providers to ensure a full assessment of need and risk is undertaken at the beginning of the contract to provide

**Inspection Findings:** 

nursing care.

| Standard 11: There are arrangements in place to respond promptly to requests for private nursing care.   |                  |  |
|--|------------------|--|
| Criterion Assessed: 11.3 An identified nurse with skills and expertise matches and selects appropriate nurse(s) to the requirements of the patient.  | Compliance Level |  |
| Provider's Self Assessment:  |                  |  |
| Only identified nurses with the appropriate skills, previous experience and level of expertise required will be placed with a particular patient.  | Compliant        |  |
| Inspection Findings:   |                  |  |
| The nurse manager ensures that nurses with the appropriate skills and expertise are matched and placed with each patient receiving care. The registered manager confirmed this process on the day of inspection. | Compliant        |  |

There are arrangements in place to respond promptly to requests for private nursing care.

| Criterion Assessed: 11.4 All information including associated factors and risks are given to the nurse(s) prior to placement.  | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| The allocated nurse will receive all information prior to any placement commencing. Specific training required will be arranged. Induction training, equipment training and work shadowing will be arranged if necessary   | Compliant        |
| Inspection Findings:   |                  |
| Balmoral Healthcare has a policy, "Responding to Requests for Private Nursing Care" which details the processes involved in ensuring nurses are fully informed before being placed with a patient in their own home. The registered manager stated that any supplementary training or support would be provided to ensure nurses were adequately prepared to meet the needs of private patients. | Compliant        |

| Standard 11: There are arrangements in place to respond promptly to requests for private nursing care.  |                  |
|---|------------------|
| Criterion Assessed: 11.5 A service user's guide that provides comprehensive, up-to-date information about the nursing agency in an accessible format, is given to the patient. (Appendix 1) | Compliance Level |
| Provider's Self Assessment:   |                  |
| The Service Users Guide will be provided to the patient as detailed in Appendix 1 before placements commence and any queries answered.  | Compliant        |
| Inspection Findings:  |                  |
| The agency has a service user guide which the registered manager confirmed is given to each patient.  | Compliant        |

| Standard 11: There are arrangements in place to respond promptly to requests for private nursing care.  |                  |
|---|------------------|
| Criterion Assessed: 11.6 A written service contract is provided by the nursing agency within seven days of commencement of the service. The patient and / or their representative and the nursing agency each has a copy of the contract that is signed and dated by the patient or representative and the registered manager of the nursing agency. (Appendix 2) | Compliance Level |
| Provider's Self Assessment:   |                  |
| 2 copies of the service contract as per Appendix 2, are signed by the patient or their representative and the Balmoral Nurse Manager before service commences and each party retains a copy for their records.  | Compliant        |
| Inspection Findings:  |                  |
| The agency document, "Terms and Conditions of Business" contains the service contract between the nursing agency and the patient and /or their representative. A copy is signed and retained by each party.   | Compliant        |

| Criterion Assessed: 12.1 The agency nurse implements an person-centred nursing care plan that is based on an initial assessment of the patient's care needs and is agreed with the patient.      | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| A comprehensive care plan will be completed according to the assessment of the patient's needs and care required. All will be discussed with the patient and their relatives.                    | Compliant        |
| Inspection Findings:   |                  |
| The historic file presented on the day of inspection contained a comprehensive care plan which had been agreed by all parties involved in the patients care and agreed by their representatives. | Compliant        |

| Criterion Assessed: 12.2 The provision of nursing care and re-assessment of the patient's ongoing care needs, are agreed with the patient, monitored and recorded on a day-to-day basis. | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| Every care intervention given will be recorded in the patient's care plan and the patient's requests and wishes carefully noted. Any changes to care will be carefully documented.       | Compliant        |
| Inspection Findings:   |                  |
| The inspector viewed recordings of nursing assessment and interventions in the file presented. These were person centred and reflective of NMC guidelines.                               | Compliant        |

| Criterion Assessed: 12.3 The results and outcomes of any treatment and care are clearly explained to patients and any options available to them are discussed.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All treatment and care will be discussed with the patient or their relative if the patient is very unwell and unable to understand. Any alternative options will be discussed and recorded. There will be continuous co-operation with the multi-disciplinary team involved. | Compliant        |
| Inspection Findings:   |                  |
| The registered manager confirmed the information stated in the self-assessment, and discussed how principles of consent to treatment are met with each patient, or their representative, if the patient is too ill to consent or lacks capacity.                             | Compliant        |

| Criterion Assessed: 12.4 The nursing care plan and ongoing care needs are reviewed and agreed with patients and their representatives at time intervals as recorded.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All care will be continuously assessed and recorded in the care plan as per NMC guidelines and legislation   | Compliant        |
| Inspection Findings:   |                  |
| As well as reviewing care at appointed intervals with patients and their relatives, there was evidence in the file presented of multidisciplinary involvement with the agency in the evaluation of care and progress. The nurse manager in the case described visited several times a week to co-ordinate care and review planned interventions. | Compliant        |

| Criterion Assessed: 12.5 Arrangements are in place to ensure that private patients in their own homes are kept fully informed of issues relating to the care provided by the agency nurse(s) and that they are enabled to make comments about the quality of care provided.  | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All patient care is discussed and documented. Client evaluation forms will be left with the patient for them or their relatives to complete and send back to the agency at any time. Communication will be encouraged at all times.  | Compliant        |
| Inspection Findings:   |                  |
| The agency has a system for ensuring comments about the quality of care provided is recorded on client evaluation forms. These are discussed at weekly meetings and inform monthly reports. Informally the registered manager makes regular contacts with patients and/or their representatives to ensure they are kept fully informed about the input of agency nurses. | Compliant        |

| Criterion Assessed: 12.6 Where the agency remains the employer of the nurse, there should be effective clinical supervision arrangements in place.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| Effective clinical supervision arrangements are in place within Balmoral Healthcare for all Registered Nurses irrespective of their place of work. Confidential records are kept and the nurse undergoing supervision is given a copy for her records.         | Compliant        |
| Inspection Findings:   |                  |
| There were records of bi annual supervision which had been undertaken by the registered manager. On occasion supervision is held with a group of nurses but the registered manager explained how individual sessions can be arranged if requested or required. | Compliant        |

There are accurate and up to date case records for private patients who receive care in their own homes by nurses supplied by the nursing agency.

| Criterion Assessed: 13.1 The policy and written procedures for managing case records of care and treatment planned and given to private patients detail arrangements for the creation, use, retention, storage, transfer and access to those records.  | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| There is a policy in place for managing case records of care. Private patients are given details of these arrangements   | Compliant        |
| Inspection Findings:   |                  |
| The inspector viewed the following policies which contain written procedures to detail the creation, use, storage retention transfer and access to case records.  "Management of Records and Information"  "Responding to Requests for Private Nursing Care"  "Data Protection"  "Administration of Medicines for Patients cared for in their own Home"  All of the above policies had been reviewed in November 2014. | Compliant        |

There are accurate and up to date case records for private patients who receive care in their own homes by nurses supplied by the nursing agency.

| Criterion Assessed 13.2 All entries in case records are contemporaneous; dated, timed, and signed, with the signature accompanied by the name and designation of the signatory.  | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| Records are kept according to the NMC Code of Conduct for Record keeping and company policy  | Compliant        |
| Inspection Findings:   |                  |
| The historic file presented had examples of entries to case records which were contemporaneous; dated, timed and contained signatures. As stated previously Balmoral Healthcare has included training in Record keeping for all agency nurses. | Compliant        |

| Criterion Assessed: 13.3 Any alterations or additions are dated, timed, and signed, and made in such a way that the original entry can still be read.   | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| Records are kept according to the NMC Code of Conduct for Record keeping and company policy   | Compliant        |
| Inspection Findings:  |                  |
| The content of the training given in record keeping directs nurses to ensure that alterations or additions are dated, timed and signed in such a way that the original entry can still be read. | Compliant        |

| Criterion Assessed: 13.4 Agency nurses record all care given and recommendations in patients' case record.  | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| All interventions of care are recorded in patients care plan  | Compliant        |
| Inspection Findings:  |                  |
| Agency nurses working in a patient's own home are required to record all interventions. This process is monitored by the nurse manager and registered manager who reviews progress notes and care plans on a regular basis. | Compliant        |

| Criterion Assessed: 13.5 Where private patients, decline to have records kept in their own homes, this is documented, dated, signed and retained in the nursing agency.  | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| If the patient declines to keep records in their home, they will be retained in the nursing agency and documented as so.   | Compliant        |
| Inspection Findings:   |                  |
| The registered manager confirmed that if a patient declined to have records kept within their own homes, the decision would be documented and dated. Records would then be stored securely in the agency office. | Compliant        |

| Criterion Assessed:  13.6 Case records are kept in the homes of private patients for one month, or until the service is concluded, after which time they are transferred, with patients' permission, to the nursing agency in accordance with procedures. | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| All records are returned to the Agency within one month of completion of care. They are usually collected by the Nurse Manager.   | Compliant        |
| Inspection Findings:  |                  |
| The inspector viewed the records of a patient who had previously received care from agency nurses. They had been transferred to the agency offices where they were stored in locked filing cabinet within a secure office.                                | Compliant        |

| Standard 14:<br>Consent to treatment and care is obtained from private patients who receive care in their own home.   |                  |  |
|---|------------------|--|
| Criterion Assessed: 14.1 There is a written policy on obtaining consent to treatment and care that adheres to NMC Code of Professional Conduct and DHSSPS guidelines. | Compliance Level |  |
| Provider's Self Assessment:   |                  |  |
| There is a Consent policy that is referenced by NMC Standards of Conduct, DHSSPS Good Practice in Consent and Dept of Health Reference guide to Consent.              | Compliant        |  |
| Inspection Findings:  |                  |  |
| The agency has a policy "Consent to treatment" which has been devised in accordance with guidance within NMC and DHSSPS publications.                                 | Compliant        |  |

| Standard 14:<br>Consent to treatment and care is obtained from private patients who receive care in their own home.   |                  |  |
|---|------------------|--|
| Criterion Assessed: 14.2 There are written guidelines for agency nurses when a patient does not have the capacity or refuses to give consent to treatment or care.  | Compliance Level |  |
| Provider's Self Assessment:   |                  |  |
| The Consent policy covers the issues relating to where the patient does not have the capacity or refuses to give consent to treatment or care.  | Compliant        |  |
| Inspection Findings:  |                  |  |
| The policy in relation to consent provides guidance where there are issues of capacity or refusal to engage in treatment. The registered manager confirmed that in the event of this happening the nurse manager would liaise with the patient's representative and the multidisciplinary team within the commissioning trust to reach a solution in the best interests of the patient. | Compliant        |  |

| Standard 14:<br>Consent to treatment and care is obtained from private patients who receive care in their own home.   |                  |  |
|---|------------------|--|
| Criterion Assessed:  14.3 Nursing procedures are explained to patients informing them of the implications of the treatment and any options available to them. This is documented in nursing care records. | Compliance Level |  |
| Provider's Self Assessment:   |                  |  |
| All nursing procedures will be explained to the patient before being carried out. All interventions of care are recorded in the patient's notes.  | Compliant        |  |
| Inspection Findings:  |                  |  |
| It is clear within the policy "Consent to Treatment" that the agency encourages nurse to provide full explanations regarding the implications of treatment and other options if available to patients     | Compliant        |  |

Consent to treatment and care is obtained from private patients who receive care in their own home.

| Criterion Assessed: 14.4 Completed consent forms are maintained within individual nursing care records.                           | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| Consent will be documented in the patient's notes and care records depending on what the procedure involves.                      | Compliant        |
| Inspection Findings:  |                  |
| The registered manager confirmed that a copy of the signed consent form is to be retained in the individual patient care records. | Compliant        |

There are arrangements in place to ensure that agency nurses manage medicines safely and securely in private patients own homes.

| Criterion Assessed: 15.1 The policy and procedures cover all activities concerned with the management of medicines for private patients. These are in accordance with legislative requirements and current best practice as defined by professional bodies and national standard setting organisations. | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| There is a Medicines Management policy for the administration of medicines with reference to up to date advice on best practice and legislation.  | Compliant        |
| Inspection Findings:  |                  |
| The registered manager confirmed that the policy in relation to Management of Medications takes account of current NMC guidelines on the administration of medicines.   | Compliant        |

There are arrangements in place to ensure that agency nurses manage medicines safely and securely in private patients own homes.

| Criterion Assessed: 15.2 The agency provides private patients and their carers with information, in an accessible format, on the circumstances in which nurses may administer or assist in the administration of medicines.   | Compliance Level |
|---|------------------|
| Provider's Self Assessment:   |                  |
| Nurses must follow the NMC Code of Conduct for the Admin of Medicines and adhere to company policy.  Pharmaceutical administration information supplied with the drugs must be adhered to. Patients and carers will be advised appropriately.   | Compliant        |
| Inspection Findings:  |                  |
| Nurses are issued with relevant information regarding the medication to be administered and specific treatment protocols. The registered manager confirmed that patients and their representatives are involved in all aspects of care planning and would be made aware of the circumstances in which nurses may administer or assist in the administration of medications in the service user guide. The nurse manager monitors the administration of medications by agency staff regularly when care is being provided at home. | Compliant        |

There are arrangements in place to ensure that agency nurses manage medicines safely and securely in private patients own homes.

| Criterion Assessed: 15.3 Medicine errors and incidents that occur in private patients' home are reported, in accordance with procedures, to the appropriate authority.   | Compliance Level |
|--|------------------|
| Provider's Self Assessment:  |                  |
| All medicine errors or incidents must be reported in the first instance to the Nurse Manager at Balmoral Healthcare who will record all details according to company policy. A thorough investigation will be completed and documented. According to the findings/outcome, the nurse may require further training or updates in Admin of Medicines. If necessary, the incident will be referred to the appropriate Authorities for consideration, eg. RQIA or NMC. | Compliant        |
| Inspection Findings:   |                  |
| As stated previously, at the time of inspection the agency was not providing care to a private patient in their own home. The registered manager confirmed the processes to be followed following a medication error as detailed within the self –assessment.  | Compliant        |

Inspection ID: IN020904

### **Quality Improvement Plan**

The details of the Quality Improvement Plan appended to this report were discussed with Ms Karen Moffett, Registered Manager, as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

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.

Enquiries relating to this report should be addressed to:

Michele Kelly
The Regulation and Quality Improvement Authority
9<sup>th</sup> Floor
Riverside Tower
5 Lanyon Place
Belfast



No requirements or recommendations resulted from the **primary announced** inspection of **Balmoral Healthcare Agency** which was undertaken on **4 December 2014** and I agree with the content of the report.

Please provide any additional comments or observations you may wish to make below:

| SIGNED:    | franda Mally.       | SIGNED: | Kraffea                         |
|------------|---------------------|---------|---------------------------------|
| NAME:      | Registered Provider | NAME:   | KAREN MOFFET Registered Manager |
| DATE       | 28/1/15             | DATE    | 23/1/15                         |
| Approved i | oy: Alukely         | 3/3/45  |                                 |