



Announced Care Inspection Report 11 March 2021



First Choice Selection Services Ltd

Type of Service: Nursing Agency

Address: Cathedral Terrace, 23 Church Street, Belfast, BT1 1PG

Tel No: 028 9031 3693

Inspector: Aveen Donnelly

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

First Choice Selection Services Ltd is a nursing agency which supplies registered nurses to a range of settings. These include Health and Social Care Trust (HSCT) facilities and care homes.

3.0 Service details

Organisation/Registered Provider: First Choice Selection Services Ltd	Registered Manager: Not applicable
Responsible Individual: Mr Paul Crean	
Person in charge at the time of inspection: Senior Healthcare Manager	Date manager registered: Ms Lauren Crean – application not yet submitted

4.0 Inspection summary

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.

The last care inspection was undertaken on 27 March 2019.

Since the date of the last care inspection, a number of correspondences were received in respect of the agency. Whilst RQIA were not aware of any specific concerns in relation to the agency, the decision was made to undertake an onsite inspection approach, adhering to social distancing guidance.

An announced inspection took place on 11 March 2021 from 09.00 to 10.45 hours.

We reviewed recruitment records for staff employed by the agency to ensure that the relevant pre-employment checks had been undertaken before they were supplied to the various healthcare settings. We checked that all staff were registered with the Nursing and Midwifery Council (NMC) and that there was a system in place for ongoing monitoring of staff registrations. We reviewed Covid-related information which had been disseminated to staff.

An area for improvement was identified relating to the need to develop formalised supervision processes.

Good practice was identified in relation to appropriate checks being undertaken on an annual basis before nurses were supplied to the various health care setting and on an annual basis thereafter. Good practice was also found in relation to system in place of disseminating Covid-related information to staff.

Feedback received from health care settings the nurses were supplied to was generally positive.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with person in charge, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

4.2 Action/enforcement taken following the most recent care inspection dated 27 March 2019

No further actions were required to be taken following the most recent inspection on 27 March 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, to obtain feedback in relation to the performance of the registered nurses provided. Comments received are detailed within the report.

We checked the recruitment records, to ensure that the appropriate checks were in place before nurses were supplied to the various health care setting.

- Recruitment records specifically relating to Access NI and the Nursing and Midwifery Council (NMC) registration

We discussed any complaints and incidents that had been received by the agency with the manager and in addition we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 20 of Nursing Agencies Regulations (Northern Ireland) 2005.

A poster was provided for nurses detailing how they could complete an electronic questionnaire.

6.0 What people told us about this agency

No feedback was received from the registered nurses. Positive feedback was received by the healthcare settings, in relation to the performance of the registered nurses provided. Comments are detailed below:

- "We have no concerns, the nurse that works here is deeply valued and well trained."

6.0 The inspection

There were no areas for improvement made as a result of the last care inspection.

6.1 Inspection findings

The review of the nurses' records confirmed that appropriate checks were in place before nurses were supplied to the various health care setting and that AccesNI checks were also undertaken again on an annual basis.

We discussed a specific incident relating to a nurses' NMC' registration. The person in charge advised and the review of records confirmed that registration checks were now been undertaken on a monthly basis, to prevent recurrence of the incident.

We reviewed the quality monitoring processes to ensure that complaints and any incidents were routinely monitored as part of the monthly checks in line with Regulation 20 of Nursing Agencies Regulations (Northern Ireland) 2005.

Discussion with the person in charge identified that feedback had been obtained from the healthcare settings, in relation to the performance of the nurses supplied. However, there was no system in place for formalised supervisions to be undertaken. Advice was given in relation to the need for the supervision process to be developed, to specifically address the nurses' progress towards their revalidation with the NMC. An area for improvement has been made in this regard.

Discussion also took place in relation to the ongoing acting management arrangements. The person in charge advised that an application for registered manager would be submitted within a specified timescale. When submitted, this will be reviewed by RQIA.

Areas of good practice

Good practice was identified in relation to appropriate checks being undertaken on an annual before nurses were supplied to the various health care setting and on an annual basis thereafter. Good practice was also found in relation to system in place of disseminating Covid-related information to staff.

Areas for improvement

An area for improvement was identified relating to the need to develop formalised supervision processes, to monitor in particular, the nurses' progress towards their revalidation with the NMC.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the person in charge, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005

<p>Area for improvement 1</p> <p>Ref: Regulation 14 (2)</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that each employee of the agency receives appropriate supervision.</p> <p>This relates specifically to, but is not limited to, the need to monitor nurses' progression towards their NMC revalidation.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>First Choice will perform supervisions bi-annually on all nursing staff employed.</p> <p>These will both aim to be proactive supervisions. However, there may be a need for reactive supervisions if a concern is raised by a client or by the staff member themselves.</p> <p>First Choice will also complete one appraisal annually with all healthcare staff employed.</p> <p>First Choice will update their online monitoring system to include 2 sets of supervisions yearly with a countdown mechanism in place to adhere to this and monitor when supervisions and appraisals are due.</p> <p>Supervision records will be stored separately in a locked cabinet and will not be included in personnel files as the information contained within is confidential.</p>



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Authority

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