

Nursing Agency Inspection

Name of Nursing Agency: North West Recruitment

Nursing Agency ID No: 10689

Inspection No: IN021053

Date of Inspection: 23 March 2015

Inspector's Name: Norma Munn

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:	North West Recruitment	
Address:	19 Carlisle Road Derry Londonderry BT48 6JN	
Telephone number:	028 77723514	
E mail address:	shaunairwin@northwestcareandsupport.com	
Registered organisation/ Registered provider:	Trust Caring & Nursing Agency NI Ltd Mr Philip Stewart	
Registered manager:	Ms Shauna Irwin	
Person in Charge of the agency at the time of inspection:	Ms Shauna Irwin	
Categories of care:	Nursing Agency	
Number of registered nurses:	8	
Date and type of previous inspection:	18 February 2014 Primary announced inspection	
Date and time of inspection:	23 March 2015 12.00 – 15.00 hours	
Name of inspector:	Norma Munn	

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.

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.

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 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 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.

Profile of Service

North West Recruitment is a nursing agency operating out of their new offices located at 19 Carlisle Road, Derry, County Londonderry BT48 6JN.

The service currently has eight registered nurses available for temporary placement. The nursing agency mainly supplies registered nurses to Health and Social Care Trust hospitals, North West Independent Hospital, and nursing homes. The nursing agency currently operates throughout the Western Trust only.

Ms Shauna Irwin is the Registered Manager, Mrs Dallas, a registered nurse, is the Chief Executive and the Responsible Person is Mr Philip Stewart.

Summary of Inspection

This is the annual unannounced inspection report for North West Recruitment which was undertaken on 23 March 2015 by Norma Munn, inspector from the Regulation and Quality Improvement Authority (RQIA) starting at 12:00 hours and finishing at 15:00 hours.

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

Ms Shauna Irwin, Registered Manager was in attendance throughout the inspection.

The previous inspection occurred on 18 February 2014 and resulted in no requirements and no recommendations being made.

The focus for this inspection was to examine a selected number of criteria from the following standards extracted from the minimum standards documentation for nursing agencies 2008.

In discussion it was confirmed that the agency did not supply nurses to clients in their own homes and therefore only the standards below were viewed.

Standard 2: There are policies and procedures in place that direct the quality of services provided by the nursing agency.

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 (2008).

A number of policies and procedures were reviewed, which included, records management, protection of vulnerable adults and safeguarding children, whistleblowing, absence of the Registered Manager, monitoring the quality of services and orientation and induction of staff. Policies reviewed were centrally indexed, dated and signed and were subject to at least three yearly review by the chief executive and manager. The Registered Manager discussed how feedback from nurses and clients would help inform policy and procedure.

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

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 policy which sets out arrangements for the creation, use and storage of records.

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

To validate compliance levels for each 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.

Since the last inspection no complaints had been received.

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 Shauna Irwin and the staff of North West Recruitment for their hospitality and contribution to the inspection process.

Follow-Up on Previous Issues from previous Inspection

No requirements or recommendations from previous inspection.

Standard 2: There are policies and procedures in place that direct the quality of services provided by the nu 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:	
North West Recruitment has policies in place as identfied in Appendix 3 for the management of the nursing agency all policies are currently under review completion will be in January 2015. The key policies for this requirement are in place -Absence of the Registered Manager, Orienation and induction, Mnagement and Control of Operations.	Compliant
Inspection Findings:	
There were 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 six policies which included; records management, protection of vulnerable adults and safeguarding children, whistleblowing, absence of the Registered Manager, monitoring the quality of services and the orientation and induction of staff. These policies had been reviewed by the Registered Manager and Chief Executive 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:		
North West Recruitment does not supply nurses to private homecare cilents. North West Recruitment has a quality assurance and quality improvement systems in place. Reference (Policy 35). There is a written policy (Policy 11) on Consultation with private patients and their representatives and (Policy 27) Obtaining comments from people who use the nursing agency. Polices and procedures are developed with input from staff and private patients who receve care in their own home and managers from settings where nurses are placed.	Compliant	
Inspection Findings:		
The monitoring and auditing quality of service policy was reviewed. This policy details how feedback is obtained and used to improve the quality of service the agency provides. Discussion with the Registered Manager confirmed that feedback is obtained from staff and clients. This feedback is used to further develop policies and procedures already in place.	Compliant	

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

Criterion Assessed: 2.3 Policies and procedures are centrally indexed and compiled into a policy manual.	Compliance Level
Provider's Self Assessment:	
All policies are centrally indexed and numbered into a policy manual these are avaible within the agency office.In addtion polices can be emailed directly via request.	Compliant
Inspection Findings:	
Policies and procedures reviewed were centrally indexed, well organised and available for inspection.	Compliant

Standard 2:

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

Criterion Assessed: 2.4 Policies and procedures are dated when issued, reviewed or revised.	Compliance Level
Provider's Self Assessment:	
North West Recruitment policies and procedures have a issue number ,date when reviewed and revised these are authorised by the Registered Manager.	Compliant
Inspection Findings:	
Policies and procedures reviewed had been dated when issued and reviewed.	Compliant

Standard 2:
There are policies and procedures in place that direct the quality of services provided by the nursing 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:	
North West Recruitment polices and procedures are subject to a 3 yearly systematic review. All polices and procedures are currently being reviewed completion date for ratification is January 2015. (Reference Policy 39). Evidence of previous 3 years policies are avaible on site.	Compliant
Inspection Findings:	
Policies and procedures examined had all been reviewed in 2015. The Registered Manager and Chief Executive for the agency had ratified every policy examined.	Compliant

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Criterion Assessed:	Compliance Level
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.	
Provider's Self Assessment:	
Where agency nurses are supplied to provide nursing care to private patients in their own home North West Recruitment has a system in place for the Disclosure of patient information(Reference Policy 13) Management of records and information(Reference Policy 22). North West Recruitment will also hold master copies of any file /notes made in the agency office. The agency has never delivered a service to cilents in their own home.	Compliant
Inspection Findings:	
Discussion with the Registered Manager confirmed that the agency does not supply nursing care to private patients in their own homes.	Not applicable

Standard 3: Clear, documented systems are in place for the management of records in accordance with legislative requirements.				
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:				
North West Recruitment has a written policy and procedure for the Management of records which includes details on the creation ,use,retemtion ,storage ,transfer,disposal of and access to records. Reference Policy 22	Compliant			
Inspection Findings:				
The management of records policy (January 2015) contained detail and guidance for the creation, use, retention, storage, transfer, disposal of and access to records.	Compliant			

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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:	
The records required under The HPSS(Quality Improvement and Regulation)(NI) order 2003 (Regulations) are available in the nursing agency for inspection at all times. The agency is currently Implementing a bespoke IT nursing agency system configuration for this system is April 2015.	Compliant
Inspection Findings:	
On the day of inspection all records requested were made available to the inspector.	Compliant

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Criterion Assessed:	Compliance Level
3.4 The information held on record is accurate, up to date and necessary.	
Provider's Self Assessment:	
North West Recruitment in accordance with the policy and procedure ensures that the information that is held on file is current ,accurate ,up to date and is necessary for the agency to hold such information.Reference Management of Records Policy 22.	Compliant
Inspection Findings:	
Records inspected were current, necessary and confirmed by the Registered Manager as accurate.	Compliant

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Criterion Assessed: 3.5 Nursing care records are written and maintained in accordance with NMC guidelines.	Compliance Level
Provider's Self Assessment:	
North West Recruitment has a written policy on record keeping in accordance with the NMC guidelines(Reference Policy 54)	Compliant
Inspection Findings:	
The Registered Manager confirmed that the agency did not supply nurses to clients in their own homes. However, nurses employed by the agency maintain written records in accordance with NMC guidelines and have attended training on record keeping.	Compliant

Standard 3: Clear, documented systems are in place for the management of records in accordance with legislative requirements.				
Criterion Assessed: 3.6 Agency staff are trained to create, use, manage and dispose of records in line with good practice and	Compliance Level			
legislative requirements. Provider's Self Assessment:				
North West Recruitment registered manager and health care recruitment team has current training in Data Protection. This is available for review within the staff personnel file. New staff recruited will have this completed by Feb 2015.	Moving towards compliance			
Inspection Findings:				
The Registered Manager informed the inspector that record keeping training has been provided for all staff. The content of the training was viewed by the inspector and there was evidence that the training was in line with current legislation.	Compliant			

Standard 3:			
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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:	
In accordance with DHSSPS guidelines records are held securely for the period of time as specified and disposed of in accordance with Legislation. Reference policy 22.All records are kept in filing cabimets in locked office.	Compliant
Inspection Findings:	
The management of records policy detailed the requirements for the storage and archival of records and is as specified in DHSSPS guidelines.	Compliant

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Ms Shauna Irwin, 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:

Norma Munn
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT



Quality Improvement Plan

No requirements or recommendations resulted from the **primary unannounced** inspection of **North West Recruitment** which was undertaken on **23 March 2015** and I agree with the content of the report.

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

SIGNED:	9	SIGNED:	<u>5) a</u>
NAME:	Registered Provider	NAME:	Sharra Manager
DATE	15. April . 205	DATE	15.aeei1.205
Approved	by: M. Handey	Date 6 7 15	