

Announced Care Inspection Report 18 July 2019



Homecare Nursing Services

Type of Service: Nursing Agency
Address: Callan House, Hill Street, Milford, BT60 3NZ
Tel No: 02837511333
Inspector: Michele Kelly

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a nursing agency which was registered in January 2012 to supply nurses to a range of healthcare settings and to work with service users in their own homes. The nursing agency has not been considered operational until the present time. The applicant nurse manager who is also the training manager is currently supplied to train, assess competence and delegate nursing tasks to non –nursing staff to meet the needs of service users in their own homes.

3.0 Service details

Organisation/Registered Provider: Homecare (NI) Ltd Responsible Individual: Ms Mairead Mackle	Registered Manager: Mrs Nicola Finlay - application received - "registration pending".
Person in charge at the time of inspection: Mrs Nicola Finlay	Date manager applied: Application received 5 March 2019

4.0 Inspection summary

An announced inspection took place on 18 July 2019 from 10.00 to 12.30 hours.

This inspection was underpinned by the Nursing Agencies Regulations (Northern Ireland) 2005 and the Nursing Agencies Minimum Standards, 2008.

The inspection determined if the agency was delivering safe, effective and compassionate care and if the service was well led.

There was evidence identified throughout the inspection process that the agency promotes service users' human rights; this was evident in relation to the areas of consent, autonomy, equality, decision making, privacy, confidentiality and service user involvement.

Evidence of good practice was found in relation to staff recruitment and communication with service users and other relevant stakeholders.

Areas requiring improvement include supervision and monthly monitoring.

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.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	2

Details of the Quality Improvement Plan (QIP) were discussed with Nicola Finlay, manager and the Head of Quality and Compliance as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 7 February 2019

Homecare Nursing Services was registered as a nursing agency on 16 January 2012. Further inspections took place on 6 November 2015 and 20 February 2018. During an inspection of the agency on 7 February 2019, the inspector was advised that the agency had remained non-operational since registration.

Following a meeting with responsible individual and representatives from the agency, RQIA issued a Notice of Proposal on 22 May 2019 to impose a condition on registration to require the registered provider to notify RQIA eight weeks prior to the date the service is proposing to become operational. The notice of proposal was not adopted as RQIA had subsequent discussions with representatives from the Northern Health and Social Care Trust and based on these discussions it was established that the service was operational.

5.0 How we inspect

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

- discussion with the Head of Quality and Compliance and the manager.
- examination of records
- evaluation and feedback

Prior to inspection the following records were analysed:

- previous RQIA inspection report
- any correspondence received and issued by RQIA since the previous inspection

The following records were viewed during the inspection:

- recruitment records
- staff induction and training records
- policies relating to safeguarding and managing complaints
- electronic care plan and review records
- Statement of Purpose
- Service User Guide

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 7 February 2019

The most recent inspection of the agency was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 7 February 2019

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

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

The inspector reviewed staffing arrangements in place within the agency. The manager is the only professional nurse supplied to work in the service users' own homes. The manager's role includes demonstrating complex nursing tasks while training healthcare assistants, assessing competence of healthcare assistants, completing spot checks on the quality of delegated nursing care provided and responding to service user and relatives' concerns about nursing care practices.

The agency's recruitment policy outlines the procedures for ensuring that required staff pre-employment checks are completed prior to commencement of employment. The agency retains a record of checks completed. Staff recruitment records viewed indicated that required checks had been completed for the manager and that the agency's recruitment process is robust.

The agency requires registered nurses to complete a two day induction and in addition to complete training in a range of mandatory areas prior to their commencement of employment. A record of induction provided to staff is maintained; records viewed outline the information and support provided to staff during the induction process.

The agency has systems in place to provide a rolling programme of training which involves an annual training update for staff including eLearning and practical sessions for manual handling. The inspector discussed the complex nursing tasks required by the service users and was informed that the manager delegates these to healthcare assistants following an intensive period of training, demonstration and shadowing which the manager oversees. The manager's previous experience and training has prepared her for this role and the manager discussed how representatives from pharmaceutical and medical appliance companies had provided training in respect of equipment in use in individuals' homes. However the inspector advised that as many of the nursing interventions are highly skilled it would be important that the manager accessed regular updates and training in these practices from a Health and Social Care provider. The head of quality and compliance agreed to contact the relevant Health and Social Care Trust (HSCT) to source this educational provision. This matter will be reviewed at the next inspection.

The head of quality and compliance is the agency's Adult Safeguarding Champion and demonstrated appropriate knowledge as to how to address matters if and when they arise. This helps to ensure the safety and wellbeing of service users and support appropriate protection planning and investigation. They confirmed that they had attended training provided by a HSCT

and had effective systems in place to provide the annual safeguarding position report required by March 2020. There have been no safeguarding matters referred by the nursing agency.

The agency's supervision and appraisal policies outline the processes for staff supervision and appraisal; the head of quality and compliance provided the inspector with the manager's dates of supervision and appraisal following the inspection. It was confirmed that the head of quality and compliance supervises and appraises the manager; an area for improvement is stated in respect of the manager accessing local clinical supervision in addition to current arrangements.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff recruitment and induction.

Areas for improvement

One area for improvement has been identified and refers to ensuring the manager accesses clinical supervision on placement.

	Regulations	Standards
Total number of areas for improvement	0	1

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

The inspector reviewed the agency's arrangements for appropriately responding to and meeting the needs of people who use the service. Information relating to the nature and range of services provided is outlined within the Statement of Purpose and Service User Guide

The agency provides care as commissioned by the relevant HSCT. The inspector viewed an electronic sample of service users' care records, which included detailed and relevant referral information. The manager confirmed that at the commencement of the service, service users are provided with the agency's statement of purpose and service user guide, details of how to report a complaint or compliment and contact numbers for during and outside regular office hours.

Care plans were noted to be very person centred and contain very specific protocols for each service user. The inspector was advised that the manager works closely with the HSCT multi-disciplinary team especially the district nurses to ensure service users' nursing requirements are met. The manager explained that nursing tasks are delegated to health care assistants when competence has been achieved and the healthcare assistant has indicated they are confident to proceed.

The manager assures the competency of healthcare assistants by regular unannounced spot checks and feedback from service users and their families. The manager also has a responsibility to escalate concerns to the HSCT about any element of the care provided within these complex arrangements. The inspector viewed evidence that the manager completed

reviews of care and attended trust reviews and escalated concerns about nursing care to trust professionals.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records and reviews, communication between service users and agency staff and other key stakeholders.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The agency's staff handbook and information provided to all staff during their initial induction includes a number of key policies including the agency's confidentiality policy.

The agency has on call arrangements in place to ensure that staff and service users can report concerns they may have or to access support and guidance at any time including out of hours. The person in charge described the processes for engaging with service users in order to obtain feedback; this includes questionnaires and calls to the service users and their families to obtain their views as to the quality of the service provided.

Discussions during the inspection indicated that the promotion of values such as dignity, choice, equality and respect were embedded in the culture and ethos of the organisation. The manager described how service users and families are involved in their care planning and review and described the processes for ensuring their expectations are met.

Systems to promote and achieve effective communication with service users, the agency's registered nurses and other relevant stakeholders were evident on inspection.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the provision of compassionate care and the involvement of service users.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The inspector reviewed the agency's management and governance systems in place to meet the needs of service users.

Currently, monthly quality monitoring reports for the agency's domiciliary care business include information pertaining to the nursing agency activity. The inspector advised as the agency is now operational the quality of services of the nursing agency should be monitored by the registered person and a separate report completed on a monthly basis to ensure the nursing agency is being managed in accordance with minimum standards. This is an area for improvement.

The inspector discussed the systems in place to ensure staff were registered with the relevant regulatory body such as the Nursing and Midwifery Council (NMC). Information regarding registration details and renewal dates are monitored by the agency. The inspector viewed evidence that the manager had recently completed revalidation with NMC and was currently registered.

The agency has a range of policies and procedures in place. As the agency is now operational the inspector advised that all policies should be reviewed and updated in accordance with the Minimum Standards, relevant legislation and guidelines. This will be reviewed at the next inspection.

The inspector discussed arrangements in place that relate to the equality of opportunity for service users and the importance of the staff being aware of equality legislation whilst recognising and responding to the diverse needs of service users. The agency has not provided access to specific equality and diversity training. However, the importance of this was inherent within all training, induction and the supervision process.

The inspector noted that the agency collects equality information in relation to service users, during the referral process. The data provided is used effectively and with individual service user involvement to provide person centred care.

Some of the areas of equality awareness identified during the inspection include:

- effective communication
- service user involvement
- adult safeguarding
- equity of care and support
- individualised person centred care
- disability awareness

Areas of good practice

There were examples of good practice found throughout the inspection in relation to maintaining good working relationships.

Areas for improvement

One area for improvement is made and refers to ensuring the registered person monitors the quality of services and completes a monitoring report on a monthly basis.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Nicola Finlay, manager, 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 Nursing Agencies Regulations (Northern Ireland) 2005 and/or the Nursing Agencies Minimum Standards, 2008.

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 Minimum Standards, 2008	
Area for improvement 1 Ref: Standard 7.4 Stated: First time To be completed by: 18 October 2019	<p>The registered person shall ensure that the nurse on a clinical placement should be made aware of the local clinical supervision arrangements and how to access these.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken: Clinical Nurse's training records were up to date and complied with NMC, clinical nurse is registered with HSC Clinical Education Centre and avails of training provided.</p>
Area for improvement 2 Ref: Standard 1.12 Stated: First time To be completed by: Immediate and ongoing	<p>The registered person shall monitor the quality of services in accordance with the nursing agency's written procedures and complete a monitoring report on a monthly basis</p> <p>Ref: 6.7</p> <p>Response by registered person detailing the actions taken: Monthly monitoring returns are included with the agency's domiciliary care services monitoring returns, however since inspection these have been separated.</p>

Please ensure this document is completed in full and returned via Web Portal



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