

Unannounced Care Inspection Report 30 March 2021



Homecare Nursing Services

Type of Service: Nursing Agency
Address: Callan House, Hill Street, Milford, BT60 3NZ
Tel No: 028 3751 1333
Inspector: Kieran Murray

www.rqia.org.uk

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

Homecare Nursing Services nursing agency’s registered office is located in Milford. 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 patients in their own homes within the Northern Health and Social Care Trust (NHSCT) area.

3.0 Service details

Organisation/Registered Provider: Homecare (NI) Ltd Responsible Individual(s): Ms Mairead Mackle	Registered Manager: Mrs Nicola Finlay – application received – “registration pending”.
Person in charge at the time of inspection: Head of Operations	Date manager registered: Application received 5 March 2019

4.0 Inspection summary

An unannounced inspection took place on 30 March 2021 from 09.30 to 12.30.

Since the last inspection on 18 July 2019, RQIA had made a small number of communications with the nursing agency. Whilst RQIA was not aware that there was any specific risk to the patients within Homecare Nursing Services. A decision was made to undertake an on-site inspection adhering to social distancing guidance.

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.

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

No areas requiring improvement were identified during the inspection.

Evidence of good practice was found in relation to:

- covid-19 education and management, including infection prevention and control (IPC) measures and updating of the policy;
- service user involvement;
- collaborative working;
- registrations with Nursing Midwifery Council (NMC); and
- records relating to Adult Safeguarding.

Nurse comments:

- “Have worked for Homecare Nursing Services for over 3 years and believe it to be an excellent service.”

Service user comments:

- “They are normally good at keeping us informed of any changes.”
- “The nurse manager will step in herself if short of staff.”
- “I have no concerns at this time.”

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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the head of operations, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent care inspection dated 18 July 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 18 July 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, quality improvement plan (QIP) and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service user to find out their views of the service.

We ensured that the appropriate recruitment staff checks were in place before nurses were supplied to health care settings.

- Recruitment records specifically relating to Access NI and NMC registration;
- Covid-19: guidance for Northern Ireland; and
- A range of documents, policies and procedures relating to the service were reviewed during the inspection and are referred to within the body of the report.

RQIA provided information to staff and other stakeholders that will support feedback on the quality of service delivery. This included 'Tell Us' cards and a staff poster to enable the stakeholders to feedback to the RQIA.

The information received from staff showed that the staff member was generally 'very satisfied' with the current care and support within the nursing agency. Comments made have been included in the report.

During the inspection we met with the head of operations and following the inspection a telephone communication with one service user.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

We would like to thank the head of operations and service user for their support and co-operation throughout the inspection process.

6.0 The inspection

Areas for improvement from the last care/finance inspection dated 18 July 2019		
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2005		Validation of compliance
Area for improvement 1 Ref: Standard 7.4 Stated: First time	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. Ref: 6.4	Met
	Action taken as confirmed during the inspection: We evidenced the manager had access to the Clinical Education Centre training site and had completed additional training through this training platform.	
Area for improvement 2 Ref: Standard 1.12 Stated: First time	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 Ref: 6.7	Met
	Action taken as confirmed during the inspection: We reviewed monthly monitoring reports and evidenced that Homecare Nursing Services had a separate report completed each month.	

6.1 Inspection findings

Recruitment:

Discussions with the head of operations identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 12, Schedule 3 and Standard 4 relating to Access NI. However, we were advised that the nursing agency had not employed any new registered nurses since the previous inspection on 18 July 2019.

We noted that the nursing agency had a system in place each month for monitoring registration status of staff with NMC and the head of operations confirmed that staff were aware that they are not permitted to work if their NMC registration had lapsed.

Management and Governance:

On the day of the inspection we noted that the nursing agency had not made any safeguarding referrals to the Northern Health and Social Care Trusts (NHSCT) since the last inspection.

The nursing agency maintains a policy relating to complaints and compliments; these records are recorded and managed in accordance with the nursing agency's policy and procedure. On the day of the inspection we noted that the nursing agency had not received any complaints since the last inspection undertaken on 18 July 2019. Feedback from the one service user/trust confirmed a good standard of service provision.

On the day of the inspection it was noted no incidents had taken place since the previous inspection.

We noted that monthly quality monitoring took place within the nursing agency.

Covid-19:

The head of operations was knowledgeable in relation to their responsibilities around Covid-19. On the day of the inspection the head of operations was aware of the guidance in relation to use of PPE for activities that brought them within two metres of patients. The head of operations told us they were aware of the need for staff to replace PPE between and how to appropriately dispose of used PPE.

We reviewed records relating to IPC policies, training and use of PPE which were in-line with the regional guidance. The policies and procedures had been updated to include Covid-19 and were available within the nursing agency office for staff to access.

The head of operations described how and where donning (putting on) and doffing (taking off) of PPE happened within the patients home.

The head of operations was aware of the need to ask and look out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste in patients or staff. It was positive to note that we had a wellness check carried out before entering the nursing agency.

Hand sanitisers were placed in different areas throughout the nursing agency for staff and visitors to use to ensure good hand hygiene.

The head of operations advised us that updates were attached to the Covid-19 on-line folder. We viewed this folder during the inspection and found the information contained within the folder to be appropriate. The head of operations also advised us that the manager attended the agency's Covid-19 committee meetings.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to NMC registration checks, safeguarding, monthly quality monitoring reports and compliance with Covid-19 guidance.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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