

Inspection Report

13 December 2022











Peninsula Care Services

Type of service: Nursing Agency
Address: First Floor, 3 Church Street, Newtownards, BT23 4AN
Telephone number: 028 9182 8921

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

| Organisation/Registered Provider: | Registered Manager: |
|-----------------------------------|---------------------------|
| Peninsula Care Services Ltd | Mr Tiago Moreira (Acting) |
| | |
| Responsible Individual: | |
| Mr Jonathan Cook | |

Person in charge at the time of inspection:

Mr Jonathan Cook

Brief description of the agency operates:

Peninsula Care Services is a nursing agency which operates from offices located in Newtownards. The agency currently supplies registered nurses to a number of private nursing homes and the South Eastern Health and Social Care Trust (SEHSCT).

2.0 Inspection summary

An announced inspection was undertaken on 13 December 2022 between 10.40 a.m. and 1.45 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training.

Adult safeguarding arrangements, complaints, whistleblowing, and the system for retaining records were also reviewed; this included the system for managing alerts issued by the Chief Nursing Officer (CNO)

An area for improvement identified related to staff supervision.

Good practice was identified in relation to the monitoring of nurses registrations with the Nursing and Midwifery Council (NMC). There were good governance and management arrangements in place.

For the purposes of the inspection report, the term 'service user' describes the hospitals or care homes, the agency's nurses are supplied to work in.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users.

As a public-sector body, RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of nursing agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from service users that the agency takes all reasonable steps to promote people's rights. People in receipt of nursing care have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. They should also experience their individual choices and freedoms.

Information was provided to service users and staff on how they could provide feedback on the quality of services. This included an electronic survey.

4.0 What people told us about the agency?

During the inspection we spoke with a number of service users.

The information provided indicated that there were no concerns in relation to the agency.

Comments received included:

Service users' comments:

- "The agency is very good with communication. The nurses supplied are more than competent and are very reliable. I find the agency easy to work with and they are very approachable. They keep in touch regularly. The agency skill match the nurses to our requirements."
- "We have no problems with the service. There is good communication. We have no complaints at all. The residents are very happy with the care provided by the nurse."

There were no responses to the electronic survey.

5.0 The inspection

5.1 What has this agency done to meet any areas for improvement identified at or since last inspection?

The last care inspection of the agency was undertaken on 17 June 2021 by a care inspector. No areas for improvement were identified.

5.2 Inspection findings

5.2.1 What systems are in place for staff recruitment and are they robust?

A review of the agency's staff recruitment records confirmed that pre-employment checks including criminal record checks (AccessNI) were completed and verified before registered nurses were supplied to the various health care settings.

The person in charge had a robust system in place to monitor alerts issued by the Chief Nursing Officer (CNO) for Northern Ireland. This indicated that the appropriate checks were undertaken before the registered nurses were employed.

5.2.2 What are the arrangements to ensure robust managerial oversight and governance?

A review of the records confirmed that all registered nurses were appropriately registered with the NMC. Information regarding registration details, renewal and revalidation dates was monitored by the manager; this system was reviewed and found to be in compliance with regulations and standards.

There was a system in place to monitor alerts issued by the CNO for Northern Ireland.

Whilst it was good to note that supervisions had been undertaken with the registered nurses in response to any issues about their practice being raised, the review of the supervision records identified significant gaps in relation to the completion of planned supervisions. This meant that supervisions had not been undertaken in accordance with the agency's policies and procedures. An area for improvement has been identified in this regard.

Advice was given in relation to formalising the process of registered nurses receiving feedback on their practice. The manager agreed to further develop the policy and procedures in this regard.

There was a system in place to ensure that the registered nurses were placed into settings where their skills closely matched the needs of patients. Nurses were provided with training appropriate to the requirements of the settings in which they were placed.

The content of the Adult Safeguarding policy and training was reviewed and was noted to reflect the regional guidance in Northern Ireland.

There were quality monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the agency's quality monitoring established that there was engagement with service users and staff. It was noted that the reports routinely monitored any incidents as part of the monthly checks to identify any patterns or trends.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. No complaints were received since the last inspection.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures.

The alphabetical list of staff employed by the agency was up to date.

Records were retained in accordance with the Nursing Agencies Regulations.

The agency's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

The manager had submitted an application to RQIA for registration as manager; this will be reviewed in due course.

6.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005

| | Regulations | Standards |
|---------------------------------------|-------------|-----------|
| Total number of Areas for Improvement | 1 | 0 |

The area for improvement and details of the QIP were discussed with Responsible Individual and Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan

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

Area for improvement 1

Ref: Regulation 14 (2)(a)

Stated: First time

To be completed by: Immediate from the date of the inspection. The registered person shall ensure that each nurse receives appropriate supervision.

Ref: 5.2.2

Response by registered person detailing the actions taken: Annual supervision matrix has been implemented with monthly sessions taking place to ensure each nurse receives adequate supervisions in a continuous and supportive manner. These dates have been sent to the nurses to ensure they are able to attend the required sessions.

^{*}Please ensure this document is completed in full and returned via Web Portal





The Regulation and Quality Improvement Authority

7th Floor, Victoria House 15-27 Gloucester Street Belfast BT1 4LS

Tel 028 9536 1111

Email info@rqia.org.uk

Web www.rqia.org.uk

@RQIANews