

# Inspection Report

28 January 2022



## Optimum Nurse

Type of service: Nursing Agency

Address: Movilla House, 2 Berkshire Road, Newtownards, BT23 7HH

Telephone number: 028 9182 8999

[www.rqia.org.uk](http://www.rqia.org.uk)

---

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation/Registered Provider:</b> Homecare Services (NI) Ltd t/a Optimum Nurse  <b>Responsible Individual:</b> Mrs Lesley Catherine Megarity	<b>Registered Manager:</b> Mr John Paul Watson  <b>Date registered:</b> 23 March 2017
<b>Person in charge at the time of inspection:</b> Heather Murray, Quality and Development Manager	
<b>Brief description of the agency operates:</b>  Optimum Nurse is a registered nursing agency; the agency's office is located in Newtownards. The agency currently supplies registered nurses to operate as part of a team providing 24 hour nursing care to a patient with complex needs who resides in their family home. The model of care has been developed in conjunction with the Northern Health and Social Care Trust (NHSCT) to specifically meet the assessed needs of the individual.	

## 2.0 Inspection summary

An unannounced inspection was undertaken on 28 January 2022 between 10.00 a.m. and 12.00 p.m. by the care inspector.

The inspection focused on reviewing relevant documents relating to the agency's governance and management arrangements, as well as recruitment, staff registrations with the Nursing and Midwifery Council (NMC), adult safeguarding, notifications, complaints, whistleblowing, Deprivation of Liberty Safeguarding (DoLS), monthly quality monitoring and Covid-19 guidance.

Evidence of good practice was found in relation to recruitment, staff training, monthly quality monitoring reports and staff registrations with the NMC. Good practice was also found in relation to all current Covid-19 guidance and the use of personal protective equipment (PPE) guidelines, Covid-19 education and management including infection prevention and control (IPC) measures.

The service user's relative said that they were satisfied with the standard of the nurses being supplied and the responsiveness of the agency to any issues that may occur.

RQIA were assured that this agency is supplying nurses who are providing safe, effective and compassionate care; and that the agency is well led.

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.

### 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.

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

The inspection focused on contacting the service user's relatives and staff to find out their views on the agency and reviewing relevant documents relating to the agency's governance and management arrangements. This included checking how registered nurses' registrations with the NMC were monitored by the agency.

We discussed any complaints and incidents during the inspection with the manager and we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in accordance with Regulation 20.

Information was provided to service users, staff and other stakeholders to request feedback on the quality of service provided. This included an electronic survey to enable staff and service users to feedback to the RQIA. No responses from the electronic survey were received.

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

### 4.0 What people told us about the agency?

The information provided by the service user's relative indicated that there were no concerns in relation to the agency. All confirmed that they were satisfied with the high standard, training and the skills and knowledge of the nurses being supplied and the responsiveness of the agency to any issues that may occur. Comments received included:

- "I am definitely happy."
- "They are all very good."
- "It is important to be talking to him and telling him what they are doing. They are working well with him and they are all familiar faces to him."

One staff member told us that they were happy with the support provided by the nursing agency. Comments received included:

- "The manager is very approachable."
- "Everything is grand and runs ship shape."
- "The agency is very well organised."

## **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 inspection of the agency was undertaken on 11 February 2021 by a care inspector; no areas for improvement were identified.

## **5.2 Inspection findings**

### **5.2.1 Are there robust systems in place for staff recruitment?**

The review of the agency's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards by the Human Resources (HR) department which is located at the organisation's head office. We noted that AccessNI and all pre-employment checks are completed before staff commence employment and have direct engagement with the service user.

A review of the records confirmed that all staff provided by the agency are currently registered with the NMC. We noted that there was an electronic system in place for recording staff registration and a process for monitoring this information on a monthly basis. The person in charge advised that staff are not permitted to work if their professional registration lapses.

There was a good system in place to ensure that the nurses' skills were appropriately placed. Nurses were provided with training appropriate to the requirements of the settings they were being placed in. This included DoLS training appropriate to their job roles. Nurses spoken with demonstrated that they have an understanding that patients who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act.

The manager had a robust system in place to monitor alerts issued by the Chief Nursing Officer (CNO) for Northern Ireland. This indicates that the appropriate checks are undertaken before the nurses are employed.

### **5.2.2 Are there robust governance processes in place?**

The quality monitoring processes were reviewed, 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.

The agency's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflect information contained within the Department of Health's (DOH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlines the procedure for staff in reporting concerns. A review of the records evidenced that there had not been any incidents reported to RQIA since the last inspection. The agency has an identified Adult Safeguarding Champion (ASC).

Discussions with the person in charge demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns.

It was established during discussions with the manager that the agency had not been involved in any Serious Adverse Incidents (SAIs), Significant Event Analyses (SEAs) or Early Alerts (EAs).

There was a system in place to ensure that staff received supervision and training in accordance with the agency's policies and procedures.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and IPC practices.

## 6.0 Conclusion

Based on the inspection findings and discussions held we are satisfied that this agency is providing safe and effective care in a caring and compassionate manner; and that the agency is well led by the manager/management team.

## 7.0 Quality Improvement Plan/Areas for Improvement

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report. Findings of the inspection were discussed with the Quality and Development Manager, as part of the inspection process and can be found in the main body of the report.

	Regulations	Standards
Total number of Areas for Improvement	0	0



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](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)

Assurance, Challenge and Improvement in Health and Social Care