

# Inspection Report

10 September 2024



## Direct Medics Ltd

Type of service: Nursing Agency  
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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<b>Organisation/Registered Provider:</b> Direct Medics	<b>Registered Manager:</b> Mrs Jean Margaret Knapton
<b>Responsible Individual:</b> Mr Paul Owen Mulvenna	<b>Date registered:</b> 9 May 2016
<b>Person in charge at the time of inspection:</b> Mrs Jean Margaret Knapton	
<b>Brief description of the agency operates:</b>  Direct Medics is a nursing agency operating from premises based in Belfast. The agency currently supplies nurses to all five Health and Social Care Trusts (HSCT).	

## 2.0 Inspection summary

An announced inspection was undertaken on 10 September 2024 between 10.00 a.m. and 17.00. The inspection was conducted by two care inspectors.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing and the system for retaining records were also reviewed.

Enforcement action resulted from the findings of the inspection. Serious concerns were identified in relation to management oversight, staff supervision, recruitment and quality monitoring.

A serious concerns meeting was held on the 19 September 2024 with Mr Paul Owen Mulvenna, Responsible Individual, Jean Knapton, Registered Manager, and members of the management team to discuss these shortfalls.

During the meeting the Responsible Individual provided a full account of the actions taken and those to be taken in order to drive improvement and ensure that the concerns raised at inspection were addressed.

Areas for improvement identified recorded in the Quality Improvement Plan relate to staff supervision, recruitment and quality monitoring.

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

### 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 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?

As part of the inspection process we spoke with a number of service users and contacted a number of registered nurses.

No responses were received from any of the registered nurses but the information provided from service users indicated that there were no concerns in relation to the agency.

Comments received included:

#### **Service user's comment:**

- "We have a good working relationship with Direct Medics. Any issues with their staff are dealt with promptly by nurse manager Jean Knapton."

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 15 August 2024 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 criminal record checks (AccessNI) were completed as part of pre-employment checks. Reasons for leaving employments, gaps in employment histories and references from current / most recent employer were not consistently available.

This finding was discussed with the Responsible Individual during the serious concerns meeting on 19 September who acknowledged that recruitment practice required change. Assurances were provided that the agency had reviewed their process. This is identified as an area for improvement.

### 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 Nursing and Midwifery Council (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. Records had been retained of any referrals the agency made to the NMC. The agency has agreed to inform RQIA of all future NMC referrals.

A review of arrangements for ensuring that registered nurses received supervision evidenced that the system was not in keeping with Regulation. This finding was discussed with the Responsible Individual during the serious concerns meeting on 19 September who acknowledged that the supervision practice required change. Assurances were provided that the agency had reviewed their process. This is identified as an area for improvement.

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, as appropriate to their job roles.

The Adult Safeguarding policy shared during inspection did not reflect the regional guidance in Northern Ireland. This finding was discussed with the Responsible Individual during the serious

concerns meeting on 19 September and RQIA was provided with the current Adult Safeguarding policy following the inspection.

Whilst there were quality monitoring arrangements in place in compliance with Regulations and Standards, the reports contained limited evidence of engagement with service users and staff. This finding was discussed with the Responsible Individual during the serious concerns meeting on 19 September who acknowledged that the quality monitoring reports required change. Assurances were provided that the agency had reviewed their process. This is identified as an area for improvement.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the agency's quality monitoring process.

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 Statement of Purpose, Service User Guide and Staff Handbook required updating. This finding was discussed with the Responsible Individual during the serious concerns meeting on 19 September who shared a time bound action plan in relation to these documents. These documents will be reviewed at a future inspection.

## 6.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	3	0

Areas for improvement and details of the QIP were discussed with Mr Paul Owen Mulvenna, Responsible Individual, as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005</b>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 12 (1)(d)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediately from the date of inspection</p>	<p>The registered person shall ensure that no nurse is supplied by the agency unless full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.</p> <p>Ref: 5.2.1</p> <p><b>Response by registered person detailing the actions taken:</b></p> <p>It is assumed that reference to Schedule 3 is specifically in reference to the following item:</p> <p>5. Two written references relating to the person, including a reference from the person's present or most recent employer, if any.</p> <p>The above was discussed at length at both the inspection and at the Serious Concerns meeting, at which RQIA representatives confirmed that the term, "a reference from the person's present or most recent employer" should be taken to mean that, if the most recent work undertaken by a prospective candidate was via an agency, then the most recent employer must be taken to be the agency and a non-clinical reference sought. This is counter to our understanding of best practice which would have been to seek a clinical reference regardless of whether the prospective candidate was previously employed by a clinical organisation or an agency. It is our position that a reference from an agency does not support a candidate's application as well as a clinical reference does, however the requirement is noted and the agency will adjust its practice to focus on the employer, even if this leads to more brief and less relevant references on file.</p>

<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 14 (2) (a)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediately from the date of inspection</p>	<p>The registered person shall ensure that each nurse receives appropriate supervision.</p> <p>Ref: 5.2.2</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b> Concerns have been raised via email to RQIA on 25/09/2024 regarding the potential misinterpretation of Regulation 14 (2) by RQIA and subsequent impact upon agency action. Response from RQIA awaited, to inform further action. nim</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 20 (1)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediately from the date of inspection</p>	<p>The registered person shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency.</p> <p>Ref: 5.2.2</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b> The above would imply that no action is undertaken by the Registered Manager in respect of Regulation 20 (1) which is not the case. As evidenced at inspection and discussed further at the Serious Concerns meeting, monthly monitoring does take place. However, it was the view of the inspector that the monitoring did not probe the services enough. This is arguably a subjective stance as Regulation 20 (1) does not lay out in detail exactly the nature of, or extent to which the registered person must introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency.</p> <p>Nevertheless, the agency has reviewed and enhanced arrangements for further probing the quality of services provided, and applied enhanced monitoring effective 1st September 2024.</p>

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





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