

Inspection Report

Name of Service: Healthnet Homecare Ltd

Provider: Healthnet Homecare (UK) Ltd

Date of Inspection: 28 January 2025

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

1.0 Service information

Organisation/Registered Provider:	Healthnet Homecare (UK) Ltd
Responsible Individual/Responsible Person:	Mrs. Jill Doyle
Registered Manager:	Ms. Heather McNeely
Service Profile – Healthnet Homecare is registered with RQIA as a Nursing Agency. Its offices are located in Swadlincote, South Derbyshire, England. The agency supplies nurses to patients within their own homes to support the management of complex conditions via specialised therapies. Healthnet Homecare is commissioned by all five of the Health and Social Care Trusts in Northern Ireland.	

2.0 Inspection summary

An announced inspection took place on 28 January 2025, between 9.20 a.m. and 12.50 p.m. It was carried out by care inspector. The inspection was facilitated by the manager and Head of Clinical Quality.

The inspection was undertaken to evidence how the agency is performing in relation to the regulations and standards; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to patients and that the agency was well led. Details and examples of the inspection findings can be found in the main body of the report.

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.

No areas for improvement were identified.

For the purposes of the inspection report, the term 'service user' describes the Health and Social Care Trusts who commission the agency.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the agency was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the 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 registration information, and any other written or verbal information received from service users.

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

3.2 What people told us about the service

No responses were received to the electronic survey.

3.3 Inspection findings

3.3.1 Staffing Arrangements

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 patients' homes.

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.

3.3.2 Systems in place to identify and address risk

It was positive to note that registered nurses had supervisions undertaken in accordance with the agency's policies and procedures.

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. Going forward, agency staff present at inspection agreed to ensure these reports were always completed by the registered individual.

The agency has an identified adult safeguarding champion. The adult safeguarding champion position report was reviewed and found to be satisfactory.

3.3.3 Managerial Oversight

Ms. Heather McNeely has been registered manager of the agency since 14 October 2024.

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.

The manager was aware of the type of incidents which are required to be notified to RQIA. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

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 available for review along with current certificates of public and employers' liability insurance.

4.0 Quality Improvement Plan/Areas for Improvement

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



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