

# Inspection Report

20 October 2022



## Oberon Agency

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> Oberon Agency  <b>Responsible Individual:</b> Mrs Brenda McKay	<b>Registered Manager:</b> Mrs Caroline Malone  <b>Date registered:</b> 28/06/2022
<b>Person in charge at the time of inspection:</b> Mrs Caroline Malone	
<b>Brief description of the agency:</b>  Oberon Agency is a nursing agency which supplies registered nurses to a range of health care providers. The nurses are supplied into a variety of hospital facilities within the Health and Social Care Trusts and also to one care home.	

## 2.0 Inspection summary

An announced inspection was undertaken on 20 October 2022 between 9.10 a.m. and 2.35 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 and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), Service user involvement, Restrictive practices, Dysphagia management and Covid-19 guidance was also reviewed.

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 was identified, this related to recruitment.

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?

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

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

Comments received included:

Service users' comments:

- "Happy with service, and nurses provided."
- "Extremely happy with the invaluable support from the agency."
- "No concerns whatsoever, I would happily accept any nurse back."

Registered Nurses' comments:

- "Good communication from the office, training and supervisions up-to-date."
- "Plenty of shifts available."
- "Management are easy to approach."
- "There is always someone to speak to and any issues get sorted quickly."

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 11 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. There was evidence of gaps of employment being explored, but reasons for leaving former employment were not always recorded. An area for improvement has been identified in relation to this finding.

The manager 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. Records had been retained of any referrals the agency made to the NMC.

It was good 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. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding and Dysphagia, as appropriate to their job roles.

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. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the agency's quality monitoring process.

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.

## 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
<b>Total number of Areas for Improvement</b>	1	0

The area for improvement and details of the QIP were discussed with the Registered Manager and the 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, which includes verification of the reasons for leaving former care employment</p> <p>Ref: 5.2.1</p> <p><b>Response by registered person detailing the actions taken:</b> Oberon Agency registered person will question the nurse to establish the reasons for any gaps in employment, and must be satisfied that a full explanation has been provided which is reasonable. Verification, so far as reasonably practical will be obtained as to why the worker ceased work or left previous employment will be checked prior to being offered a placement. A record of the decision to proceed in this knowledge will be recorded in full.</p>



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