

# Inspection Report

8 December 2022



## Prohealth 24 Ltd

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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> Coyle Personnel Plc	<b>Registered Manager:</b> Mr Benjamin Brown
<b>Responsible Individual:</b> Mr Nicholas Paul Poturicich	<b>Date registered:</b> 18 October 2019
<b>Person in charge at the time of inspection:</b> Mr Benjamin Brown	
<b>Brief description of the agency:</b> Prohealth 24 Ltd. is a nursing agency which operates from offices located in England. The agency currently supplies nurses to a number of acute settings within the Southern Health and Social Care Trust hospitals.	

## 2.0 Inspection summary

An announced inspection was undertaken on 8 December 2022 between 09:30 a.m. and 3.30 p.m. by the care inspector.

The inspection focused on the agency's governance and management arrangements as well as staff recruitment, staff' registrations with the Nursing and Midwifery Council (NMC), adult safeguarding, notifications, complaints, whistleblowing, supervision, training, the management of Chief Nursing Officer alerts and retention of records.

Progress with any areas for improvement identified during and since the last inspection was reviewed.

Good practice was identified in relation to the monitoring of nurses registrations with the NMC.

Areas for improvement were identified in relation to staff training, the monthly monitoring report and the annual quality report.

Service users consulted with said that they were very satisfied with the quality of the nurses supplied and with the responsiveness of the agency's management.

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

### 3.0 How we inspect

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.

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 any previous inspection report and Quality Improvement Plan (QIP), and written and verbal communication received since the previous care inspection.

The inspection focused on contacting the service users 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.

The areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

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

Service users and nurses were invited to complete an electronic survey to provide feedback to the RQIA.

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 service users indicated that there were no concerns in relation to the agency. All confirmed that they were satisfied with the standard of the nurses being supplied.

No responses were received to the survey monkey.

## 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 28<sup>th</sup> July 2021 by a care inspector. Two areas for improvement previously identified were not reviewed and had been carried forward for review during this inspection.

Areas for improvement from the last inspection on 28 <sup>th</sup> July 2021		
<b>Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005</b>		<b>Validation of compliance</b>
<b>Area for Improvement 1</b> <b>Ref:</b> Regulation 20 <b>Stated:</b> First time	The registered person shall review the system for undertaking quality monitoring visits to ensure they are undertaken by someone with the required level of experience and skill; the monitoring visits shall include the views of nurses currently being supplied and those of the commissioning trusts.	<b>Partially met</b>
	<b>Action taken as confirmed during the inspection:</b> Whilst improvements were noted in the standard of the quality monitoring report, there continued to be a lack of stakeholder feedback. This area for improvement was partially met and is stated for the second time.	
<b>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</b>		<b>Validation of compliance</b>
<b>Area for Improvement 1</b> <b>Ref:</b> Standard 9.4 <b>Stated:</b> First time	The registered person shall review the content of the adult safeguarding training to ensure that it is aligned to the Northern Ireland regional guidance.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> There was evidence that this area for improvement was met.	

## 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 a 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?

There was no change of management since the last inspection. Mr Benjamin Brown has been the Registered Manager in this agency since 2020.

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, Dysphagia, National Early Warning Score (NEWS) and the Management of Actual or Potential Aggression (MAPA), as appropriate to their job roles. However, a review of governance records did not provide assurance that nursing staff had undertaken all the necessary training elements required by the clinical settings to which the agency supplies nursing staff. An area for improvement has been identified.

It is acknowledged that training in respect of Falls and Pressure Area Care is in the process of being developed. These areas of training will be followed up at future inspection.

Supervisions and appraisals were undertaken in keeping with the agency's policy and procedures.

There was a system in place to ensure that the working patterns of nurses were monitored to ensure they have adequate rest periods. Advice was given in regards to documenting any action taken in respect of any incidences where a nurse may not have adhered to the agency's policy in this regard.

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. However, it did not include feedback from the service users or nurses. An area for improvement has been stated for the second time in this regard.

There was a policy and procedure in place to manage complaints. No complaints had been received since the date of the last inspection.

The annual quality report did not adequately review the quality of services, nor did it include stakeholder feedback. This was identified as an area for improvement.

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 agency; this system was reviewed and found to be in compliance with regulations and standards.

There had been no Fitness to Practice referrals made to the NMC.

The agency was aware of the need to retain records of any clinical supervisions that the registered nurses had availed of during long term placements.

There was a system in place to obtain feedback on the registered nurses' practice.

There had been no adult safeguarding concerns raised in respect of the nurses since the date of the last inspection.

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

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

## 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 and the Nursing Agencies Minimum Standards (2008)

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	1*	1

\* the total number of areas for improvement includes one that has been stated for a second time.

The Areas for improvement and details of the QIP were discussed with the person in charge and the Registered Manager, 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>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 20  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	<p>The registered person shall review the system for undertaking quality monitoring visits to ensure they are undertaken by someone with the required level of experience and skill; the monitoring visits shall include the views of nurses currently being supplied and those of the commissioning trusts.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b>            Continued efforts will be made to ensure adequate feedback is received from service users. The RM is in process of creating new internal structures to ensure that this is managed more robustly.</p>
<b>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 1.13  <b>Stated:</b> First time  <b>To be completed by:</b> 31 March 2023	<p>The registered person shall ensure that the quality of services provided is evaluated on at least an annual basis and follow-up action taken. Key stakeholders are involved in this process.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b>            The procedures for candidates who receive feedback from client hospitals will be reviewed. In line with RQIA guidance, each incident will be reported on prover portal with evidence of action plan for each nurse. This will dislose the robust mechasims the agency will enact to safeguard public protection and ensure support nurses practice.</p>

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



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