

# Inspection Report

22 June 2021



## T-Gem Healthcare

Type of service: Nursing Agency  
Address: 17 Main Street, Dundrum, BT33 0LU  
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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> Amanda Lacey t/a T-Gem Healthcare	<b>Registered Manager:</b> Mrs Mandy Lacey
<b>Responsible Individual:</b> Mrs Mandy Lacey	<b>Date registered:</b> 12 September 2019
<b>Person in charge at the time of inspection:</b> Mrs Mandy Lacey	
<b>Brief description of the agency operates:</b>  T-Gem Healthcare is a nursing agency which operates from offices located in Dundrum. The agency has been supplying one nurse to health care settings within the South Eastern Health and Social Care Trust (SEHSCT) area.	

## 2.0 Inspection summary

The care inspector undertook an announced inspection on 22 June 2021 between 9.30 am and 12 noon.

The inspection focused on staff recruitment and the agency's governance and management arrangements.

Good practice was identified in relation to appropriate checks being undertaken before nurses were supplied to health care setting and on an annual basis thereafter. Good practice was also found in relation to system in place of disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place.

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 and any written or 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 Nursing and Midwifery Council (NMC) were monitored by the agency.

We discussed any complaints and incidents 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.

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 provide feedback to the RQIA.

#### 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. They confirmed that they were satisfied with the standard of the nurse being supplied and the responsiveness of the agency to any issues that may occur. Staff told us that they were happy with the support provided by the nursing agency.

No electronic feedback was received prior to the issue of the report.

##### Service user comments:

- "The nurse has adapted well."
- "We have no bother at all with the nurse."
- "We are very happy with the standard of work of the nurse."

##### Staff comments:

- "I love working in the General Practitioner (GP) surgery."
- "I have done Deprivation of Liberty Safeguards DoLS level three training."
- "If I had any concerns in relation to safeguarding I would raise them."

#### 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 15 December 2020 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, before nurses are supplied to the health care setting. The manager told us that no new nurses were recruited since the last inspection on 15 December 2020.

There was a good system in place to ensure that the nurses' skills were appropriate to the setting in which they were to be placed in and the nurse was provided with the appropriate training.

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?

An examination of quality monitoring processes used by the agency found that areas such as complaints and incidents were reviewed monthly. Where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed.

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

It was noted that the nursing agency had not made any adult safeguarding referrals to the SEHSCT since the last inspection on 15 December 2020. A review of the agency's adult safeguarding arrangements identified that these were satisfactory; the latest position report was available for inspection.

The manager reported that no complaints were received since the last inspection. A review of the system to manage complaints confirmed that this was in keeping with good practice

It was noted 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).

It was confirmed that the alphabetical lists of service user and staff held by the agency were up to date.

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

A review of the records confirmed that all staff provided were appropriately registered with the NMC. Information regarding registration details and renewal dates were monitored by the manager; this system was reviewed and found to be in compliance with Regulations and Standards.

## 6.0 Conclusion

Based on the inspection findings and discussions held we are satisfied that this nursing 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.

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

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Mandy Lacey, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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