

# Inspection Report

5 March 2024



## Vivid Healthcare

**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>Registered Provider:</b> Vivid Healthcare Search Limited	<b>Registered Manager:</b> Mr. Alan Price
<b>Responsible Individual:</b> Mr. Jacob Jayson	<b>Date registered:</b> 19 February 2024
<b>Person in charge at the time of inspection:</b> Mr. Alan Price	
<b>Brief description of the agency operates:</b> Vivid is a nursing agency which operates from offices located in London. The agency provides registered nurses to NHS hospitals in Northern Ireland.	

## 2.0 Inspection summary

An announced inspection was undertaken on 5 March 2024 between 8.25 a.m. and 12.40 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 training and adult safeguarding. complaints, whistleblowing and the system for retaining records were also reviewed.

Enforcement action resulted from the findings of this inspection. A number of breaches of Regulations and Standards were identified. This gave rise to concerns regarding effective governance and oversight within the agency. The breaches were in relation to the absence of monthly quality monitoring reports; the process for matching nurse competency and skills to placements; the agency's Statement of Purpose and Service User Guide; the absence of key policies; one policy lacked sufficient detail and required further improvement. It was also noted that multiple areas for improvement identified at the previous inspection had not been actioned.

A Serious Concerns Meeting was held on 15 March 2024 with Mr. Jacob Jayson, Responsible Individual, Mr, Jourdane Nolan, Director of Nursing and Mr. Alan Price, Registered Manager to discuss these shortfalls.

At this meeting, the Responsible Individual and Director of Nursing provided a full account of the actions already taken in order to drive forward improvement and ensure the deficits noted at the inspection were being addressed.

During the meeting, RQIA were assured that all necessary steps will be taken to ensure compliance with the required Regulations and Standards.

A Quality Improvement Plan was issued outlining the areas for improvement required in relation to the concerns identified.

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

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 they had no concerns in relation to the agency.

Comments received included:

#### **Service users' comments:**

- "We have had no issues but Vivid are not supplying very many nurses to us at present."
- "We have had no complaints about Vivid."

**Registered Nurse's comments:**

- "I am very satisfied working with Vivid and am really impressed with them. Their communication is transparent. If they promise anything, they deliver. I feel very well supported. The manager is very good. My training was of a good standard. I'm confident if I raised any concerns, they would be dealt with."

No responses were received 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 16 August 2022 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was approved by the care inspector and was validated during this inspection.

<b>Areas for improvement from the last inspection on 16 August 2022</b>		
<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 15 <b>Stated:</b> First time <b>To be completed by:</b> Immediate from the date of the inspection.	The registered person shall ensure that the staff handbook is further developed to include mandatory training requirements for Northern Ireland. <b>Action taken as confirmed during the inspection:</b> The required developments to the staff handbook had not been carried out.	<b>Not met</b>
<b>Area for Improvement 2</b> <b>Ref:</b> Regulation 15 <b>Stated:</b> First time <b>To be completed by:</b> Immediate from the date of inspection	The registered person shall ensure that the staff handbook is amended to exclude all references to medical staff in order to make it specific to nursing. <b>Action taken as confirmed during the inspection:</b> The required amendments to the staff handbook had not been carried out.	

<b>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</b>		<b>Validation of compliance</b>
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 9.1</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection.</p>	<p>The registered person shall ensure the safeguarding policy and training includes the regional policy 'Adult Safeguarding Prevention and Protection in Partnership', 2015.</p>	<b>Not met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>The Safeguarding Policy and training did not include the regional policy 'Adult Safeguarding Prevention and Protection in Partnership 2015.'</p>	
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 6</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection.</p>	<p>The registered person shall ensure that mandatory training includes the Mental Capacity (DoL) (No 2 Regulation Northern Ireland) 2019 and the Mental Health Order 1986.</p>	<b>Not met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>There was no evidence available that the mandatory training included the Mental Capacity (DoL) (No 2 Regulation Northern Ireland) 2019 and the Mental Health Order 1986.</p>	
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 6</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection.</p>	<p>The registered person shall ensure that the registered manager has completed training on Deprivation of Liberties level 3. Safeguarding (DoLS).</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>This area for improvement related to the previous manager. A new registered manager has recently been appointed. Assurance was received after the inspection that they are scheduled to complete this training.</p>	

## 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.

### 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. The agency had not made any referrals to the NMC.

The agency had been supplying nurses in Northern Ireland for several months. It was good to note that the manager had commenced supervisions of registered nurses in accordance with the agency's policies and procedures.

The system in place to ensure that the registered nurses were placed into settings where their skills closely matched the needs of patients was found to be inadequate. This has been identified as an area for improvement.

Nurses were provided with training appropriate to the requirements of the settings in which they were placed. It was noted that the Deprivation of Liberties Safeguarding (DoLS) training did not reflect local legislation. This is stated as an area for improvement for the second time.

The content of the Adult Safeguarding policy and training was reviewed and was noted not to reflect the regional guidance in Northern Ireland. This area for improvement is stated for the second time.

There were no monthly quality monitoring arrangements in place in compliance with Regulations and Standards. An area for improvement has been identified in this regard.

A review of the agency's Complaints Procedure found it did not include contact details for RQIA. It included references to medical and allied health professional regulatory bodies. An area for improvement has been identified. Discussion took place with the manager to ensure that a complaints log was in place detailing the nature of the complaint, actions taken, outcomes and complainant's satisfaction.

No incidents had occurred that required investigation under the Serious Adverse Incident (SAI) procedure.

The alphabetical list of staff employed by the agency was up to date.

Several policies such as Management of Records and Matching skills and Expertise of Nurses to the Requirements of Placements were unavailable. An area for improvement has been identified.

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 and Service User Guide required improvement in keeping with the Regulations. This is identified as an area for improvement.

A review of the Staff Handbook found this did not include reference to mandatory training requirements for Northern Ireland and referred to medical staff. Two areas for improvement are stated for the second time.

## 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>	5*	4*

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

Areas for improvement and details of the QIP were discussed with Mr. Alan Price, Registered Manager and Ms. Paris Dunphy, Compliance Manager on the day of inspection. 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 15</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The registered person shall ensure that the staff handbook is further developed to include mandatory training requirements for Northern Ireland.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the registered person of Vivid healthcare Ltd, I am committed to ensuring that our agency maintains the highest standards of compliance in accordance with local requirements and regulations in Northern Ireland.</p> <p>To address the specific standard in question, I have designated the Head of Nursing within our agency to oversee and ensure its achievement. With their expertise and dedication, I am confident that we will not only meet but exceed the expectations outlined by the RQIA.</p> <p>Furthermore, our team is actively engaged in ongoing training and development initiatives to stay abreast of any updates or changes in regulatory frameworks. We understand the importance of compliance in delivering quality care to our clients, and it remains a top priority for us.</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 15</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The registered person shall ensure that the staff handbook is amended to exclude all references to medical staff in order to make it specific to nursing.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the registered person of Vivid Healthcare LTD, I am dedicated to upholding the highest standards of compliance in accordance with local requirements and regulations in Northern Ireland.</p> <p>To ensure that the standard in question is fully achieved, I have allocated both the Head of Nursing and the Head of Compliance within our agency to oversee its implementation. Their combined expertise and commitment will guarantee a comprehensive approach to compliance, leaving no room for oversight. They liaise with the Registered Manager for any clinical support in relation to the handbook.</p>



	<p>Additionally, as part of our proactive measures, we have initiated the redevelopment of our staff handbook to be specific to the jurisdiction of Northern Ireland. This comprehensive handbook will provide clear guidance and instructions tailored to the local regulatory landscape, ensuring that all staff members are well-informed and equipped to meet compliance standards effectively.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 20</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The registered person shall introduce and maintain a system for reviewing, at appropriate intervals, the quality of the services provided by the agency. This relates specifically to the completion of monitoring reports on a monthly basis.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the Registered Person of Vivid Healthcare LTD, I am fully committed to maintaining exemplary levels of compliance in alignment with the pertinent local statutes and regulations in Northern Ireland.</p> <p>To guarantee the complete attainment of the standard under review, I have instituted a robust monitoring system that is presently in progress to assess the quality and efficacy of the services rendered by our agency. This initiative encompasses the generation of monthly monitoring reports, meticulously designed to furnish direct feedback to the registered manager and accurately reflect the operational dynamics of our provision in Northern Ireland. Furthermore, the registered manager is tasked with diligently maintaining clinical records in strict adherence to the regulations stipulated by the Regulation and Quality Improvement Authority (RQIA), ensuring their readiness for inspection at any given time.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 15</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The registered person shall establish a procedure for managing complaints. This shall include the address and phone number of RQIA.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the Registered Person of Vivid Healthcare LTD, I am deeply committed to upholding superior standards of compliance, meticulously aligning our operations with the</p>

	<p>pertinent local statutes and regulations governing healthcare in Northern Ireland.</p> <p>To ensure the thorough fulfillment of the standard under review, I have assigned the Registered Manager with the responsibility of implementing a comprehensive complaints policy specifically tailored to the jurisdiction of Northern Ireland. This policy has already been successfully deployed and is actively employed in practice. Notably, it encompasses all necessary details, including the contact information for the Regulation and Quality Improvement Authority (RQIA), the Patient Client Council (PCC), and the Northern Ireland Public Services Ombudsman (NIPSO), thereby facilitating seamless communication channels for addressing grievances.</p>
<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Regulation 6</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from date of inspection</p>	<p>The registered person shall keep the Statement of Purpose and Service User Guide under review.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b></p> <p>As the registered person of Vivid Healthcare LTD, I am dedicated to upholding the highest standards of compliance in accordance with local requirements and regulations in Northern Ireland.</p> <p>To ensure that the standard in question is fully achieved, the head of Nursing will oversee the annual review of the Statement of Purpose and Service User Guide. The Registered Manager is currently implementing a policy and procedure system for our Northern Ireland operations. These will reflect all our practices in line with the regulations, including how these documents will be reviewed amongst senior professionals within the agency, with the head of nursing holding responsibility for their completion. The Registered Manager will ensure that the Head of nursing completes this task annually, or when a change requires that the documents are updated.</p>
<p><b>Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008</b></p>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 6</p> <p><b>Stated:</b> Second time</p>	<p>The registered person shall ensure that mandatory training includes the Mental Capacity (DoL) (No 2 Regulation Northern Ireland) 2019 and the Mental Health Order 1986.</p> <p>Ref: 5.2.2</p>

<p><b>To be completed by:</b> Immediate from date of inspection</p>	<p><b>Response by registered person detailing the actions taken:</b></p> <p>As the Registered Person of Vivid Healthcare LTD, I am steadfastly dedicated to maintaining the utmost standards of compliance, meticulously aligned with the specific requirements and regulations governing healthcare practices in Northern Ireland.</p> <p>In pursuit of ensuring the complete fulfillment of the this standard, proactive steps have been initiated. Both the Head of Nursing and the Compliance Manager have commenced constructive dialogues with esteemed local training providers in Northern Ireland. Concurrently, the Registered Manager is actively seeking out mental health-specific training tailored to the nuances of Northern Ireland, particularly covering topics such as Mental Capacity (DoL) and the Mental Health Order (1986).</p> <p>As the Registered Person, I am fully committed to providing unwavering support to the Registered Manager in acquiring the requisite training essential for meeting the unique requirements in Northern Ireland. It is imperative that our team possesses the necessary knowledge and skills to effectively manage our nurses deployed in the region, thereby ensuring the seamless delivery of healthcare services in accordance with local regulations and standards.</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 9.1</p> <p><b>Stated:</b> Second time</p>	<p>The registered person shall ensure the safeguarding policy and training includes -the regional policy 'Adult Safeguarding Prevention and Protection in Partnership', 2015.</p> <p>Ref: 5.2.2</p>
<p><b>To be completed by:</b> Immediate from date of inspection</p>	<p><b>Response by registered person detailing the actions taken:</b></p> <p>As the Registered Person of Vivid Healthcare LTD, I am firmly committed to maintaining unparalleled levels of compliance in strict adherence to the local mandates and regulations governing healthcare practices in Northern Ireland.</p> <p>To guarantee the comprehensive achievement of this standard, proactive measures have been initiated. The Head of Nursing and the Compliance Manager have commenced dialogue with reputable local training providers in Northern Ireland with the assistance of the Registered Manager. Additionally, the Registered Manager has been scheduled to undergo safeguarding training facilitated by a local provider. This strategic investment aims to empower the Registered Manager in continuing the pivotal role of a safeguarding champion within our agency, thereby further fortifying our</p>

	<p>commitment to regulatory compliance and the welfare of our clientele.</p> <p>The Registered Manager will oversee the implementation of the policy he has developed and implemented.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from date of inspection</p>	<p>The registered person shall ensure the selection of nurses for supply ensures appropriate matching of nurses by reviewing previous roles, practice experience and competency.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the registered authority of Vivid Healthcare LTD, I am committed to ensuring exceptional levels of compliance, guided by a steadfast commitment to uphold the regulatory standards governing healthcare practices in Northern Ireland.</p> <p>To ensure the thorough attainment of this standard, proactive steps have been taken. Following collaborative discussions with the Registered Manager and Head of Nursing, and with the valuable input from recruitment consultants and the compliance team, a comprehensive approach has been established. Henceforth, the registered manager will exercise full oversight over all documentation preceding the placement of any registered nurse in Northern Ireland.</p> <p>This concerted effort is reflected in the development of our policy titled 'Matching Skills and Expertise of Nurses to the Requirements of Placements', signifying our dedication to ensuring optimal alignment between the skills of our nursing staff and the specific demands of each placement.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from date of inspection</p>	<p>The registered person shall ensure policies and procedure are in place and are subject to systematic review. This relates specifically to Management of Records and Matching skills and Expertise of Nurses to the Requirements of Placements policies.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b> As the registered Person of Vivid Healthcare Ltd, I wholeheartedly endorse and support the initiative of our Registered Manager in developing and implementing policies and procedures that surpass the minimum standards set by the Regulation and Quality Improvement Authority (RQIA). Specifically, the implementation of the 'Matching Skills and Expertise of Nurses' policy, which has been in effect since</p>

	<p>post-inspection early March, reflects our commitment to excellence in healthcare provision. Furthermore, I am actively collaborating with the Registered Manager to establish an effective governance system wherein policies and procedures are not only routinely reviewed but also subject to senior-level discussions and agreement within the agency. I am fully committed to providing the necessary resources, information, and training updates to empower the Registered Manager in fulfilling their role effectively. Additionally, as we navigate the early stages of our contracts in Northern Ireland, I am supporting the Registered Manager in conducting monthly visits to the region. These visits serve multiple purposes, including facilitating nurse visits where necessary, gathering pertinent information to enhance our nurses' preparedness for placements outside England, and gaining insights into local legislation and healthcare practices. Furthermore, these visits are instrumental in fostering strong relationships with our service users. This proactive approach will enable the Registered Manager to continually update the Northern Ireland registered nurse induction pack, ensuring our nurses are well-prepared for their placements. Moreover, these visits offer opportunities to conduct Clinical Supervision, Appraisals, or Revalidation confirmation meetings as needed, further enhancing our commitment to quality care provision.</p>
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