

Inspection Report

30 May 2023



Red Group Personnel Limited

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

Organisation/Registered Provider: Red Group Personnel Limited	Registered Manager: Mr Benjamin Brown
Responsible Individual: Mr Nicholas Paul Poturicich	Date registered: 10 September 2020
Person in charge at the time of inspection: Mr Benjamin Brown	
Brief description of the agency operates: This is a nursing agency which operates from offices located in England. The agency currently supplies nurses to a number of Health and Social Care Trusts within Northern Ireland.	

2.0 Inspection summary

An announced inspection was undertaken on 30 May 2023 between 10.00 a.m. and 2.30 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 supervision. Adult safeguarding arrangements, complaints, whistleblowing, and the system for retaining records were also reviewed.

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?

During the inspection we spoke with a number of service users.

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

Comments received included:

Service users' comments:

- "They have supplied us with a small pool of staff. The communication with the agency is very good; we have an open line of communication with the agency. The management of any concerns and complaints are dealt with very timely. We have no issues with the supply of nurse; we have had no concerns with the agency. The nurses supplied have received training and are skill matched; skill matching is constantly reviewed. Any incidents are dealt with in an appropriate manner and there are good learning outcomes. Shared learning is communicated with the agency."
- "Communication with the agency was good. We had no issues with any of the nurses supplied; all was grand."

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 23 June 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.

Areas for improvement from the last inspection on 26 June 2022		
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008		Validation of compliance
Area for Improvement 1 Ref: Standard 1.13 Stated: First time	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.	Met
	Action taken as confirmed during the inspection: Following a review of the Annual Quality report, the inspector confirmed stakeholder feedback was included.	
Area for improvement 2 Ref: Standard 6.5 Stated: First time	The registered person shall ensure that the nurses undertake training in relation to Dysphagia.	Met
	Action taken as confirmed during the inspection: Following a review of the training records, the inspector confirmed nurses had undertaken training in Dysphagia.	

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 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. No referrals had been 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, Dysphagia and the Management of Actual or Potential Aggression (MAPA), 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.

The annual quality report was reviewed and included stakeholder feedback.

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).

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

6.0 Quality Improvement Plan/Areas for Improvement

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



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