

# Inspection Report

30 January 2023



## Emergency Personnel Limited

Type of service: Nursing Agency

Address: Exchange Tower, 1 Harbour Exchange Square, London, E14  
9GE

Telephone number: 020 7407 6620

[www.rqia.org.uk](http://www.rqia.org.uk)

---

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> Emergency Personnel Limited	<b>Registered Manager:</b> Ms Carla-Marie Page
<b>Responsible Individual:</b> Mr Joshua Garnham	<b>Date registered:</b> Registration pending
<b>Person in charge at the time of inspection:</b> Mr Joshua Garnham	
<b>Brief description of the accommodation/how the service operates:</b> Emergency Personnel Limited is a nursing agency which operates from an office located in England. The agency currently supplies nurses to a number of acute hospital settings in the Northern Health and Social Care Trust (NHSCT) area.	

## 2.0 Inspection summary

An announced inspection took place on 30 January 2023 between 10.00 a.m. and 11.00 a.m. This inspection was conducted by a care inspector.

During an inspection conducted on 20 October 2022, significant concerns were identified in relation to: the fitness of the nurses and the failure of the agency to appropriately address concerns that had been raised in relation to the nurses' practice. Concerns were also identified in relation to the recruitment process, complaints management and the quality monitoring processes. Following a meeting with the Responsible Individual, five Failure to Comply (FTC) notices were issued on 4 November 2022; the date of compliance was 16 December 2022. The outcome of subsequent inspections on 16 December 2022 and 16 January 2023 evidenced that management of the agency had taken appropriate action to comply with four FTC notices; however, insufficient progress had been made to comply with one remaining FTC notice. The date of compliance for this remaining FTC notice was extended to 27 January 2023.

This inspection was planned to assess compliance with the actions detailed in the remaining FTC notice. The outcome of this inspection evidenced that management of the agency had taken appropriate action to comply with the FTC notice.

The areas for improvement identified at a previous inspection were carried forward to be reviewed at the next inspection

No new areas for improvement were identified.

For the purposes of the inspection report, the term 'service user' describes the health care settings 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.

To prepare for this inspection we reviewed information held by RQIA about this agency. This included: the remaining FTC Notice, the previous quality improvement plan issued, registration information, and any other written or verbal information received from service users, staff or the Commissioning Trust.

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.

A range of documents were examined to determine that effective systems were in place to manage the agency.

The findings of the inspection were discussed with the management team at the conclusion of the inspection.

### **4.0 What people told us about the service**

Due to the specific inspection focus, service users were not consulted with as part of the inspection process.

### **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 January 2023 by two care inspectors. A Quality Improvement Plan (QIP) was issued. Given that the focus of this inspection was on the actions outlined in the remaining FTC notice, the areas for improvement outlined in the QIP were not reviewed and will be carried forward to the next inspection.

Areas for improvement from the last inspection on 16 January 2023		
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 4(1)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	<p>The registered person shall ensure the Statement of Purpose is reviewed and includes the types of settings to which the nurses will be supplied.</p> <p><b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	Carried forward to the next inspection
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 15(2)(e)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	<p>The registered person shall ensure that the Staff Handbook includes the frequency of the mandatory training requirements.</p> <p><b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	Carried forward to the next inspection
<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 24(a)(b)(c)(d)(f)(g)(h)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	<p>The registered person shall ensure that a policy is developed in relation to the agency's requirement to notify RQIA of specified events, as outlined in the regulations (Notice of Changes).</p> <p><b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	Carried forward to the next inspection
<b>Area for improvement 4</b>  <b>Ref:</b> Regulation 14(2)(a)  <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 policy on Supervision to ensure that it reflects good practice.</p> <p><b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b></p>	Carried forward to the next inspection

<b>Area for improvement 5</b> <b>Ref:</b> Regulation 10(1) <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 agency is being managed with sufficient care, competence and skill.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<b>Area for improvement 6</b> <b>Ref:</b> Regulation 12(1)(b) <b>Stated:</b> First time <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that no nurse is supplied by unless they have the qualifications, knowledge skills and competencies necessary. This relates to weighting of interview questions and non-adherence to the agencies interview process.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<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 9.1 <b>Stated:</b> Second time <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure the adult safeguarding policy and procedure is reviewed and is in accordance with regional policies and procedures.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<b>Area for improvement 2</b> <b>Ref:</b> Standard 1.12 <b>Stated:</b> Second time <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that the quality monitoring policy and procedure includes the monthly quality monitoring of the service by the registered person.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	

<b>Area for improvement 3</b>  <b>Ref:</b> Standard 1.13  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that the quality monitoring policy and procedure includes the annual quality review of the service and the involvement of key stakeholders.  <b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	<b>Carried forward to the next inspection</b>
<b>Area for improvement 4</b>  <b>Ref:</b> Standard 4.1  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that the policy and procedure for staff recruitment details the recruitment process and complies with legislative requirements and DOH guidance.  <b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	<b>Carried forward to the next inspection</b>
<b>Area for improvement 5</b>  <b>Ref:</b> Standard 1.16  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall further develop the policy on professional registrations, to ensure that it reflects the need for the NMC live register to be checked on a monthly basis.  <b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	<b>Carried forward to the next inspection</b>
<b>Area for improvement 6</b>  <b>Ref:</b> Standard 6.3  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that the policy on training is further developed to include the frequency of mandatory updates.  <b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	<b>Carried forward to the next inspection</b>



<b>Area for improvement 7</b>  <b>Ref:</b> Standard 1.10  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure the service user's guide is reviewed and includes the type of settings to which the nurses will be supplied.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	
<b>Area for improvement 8</b>  <b>Ref:</b> Standard 6.1  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that an Induction policy is developed, separate from being included within the staff handbook.	<b>Carried forward to the next inspection</b>
	<b>Action required to ensure compliance with this Standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</b>	

## 5.2 Inspection findings

**FTC Ref: FTC000206E2**

**Notice of failure to comply with Regulation 12 (2) of *The Nursing Agencies Regulations (Northern Ireland) 2005***

### **Review of quality of service provision**

#### ***Regulation 20***

- (1) *The registered person shall introduce and maintain a system for reviewing at appropriate intervals the quality of services provided by the agency.*
- (2) *The registered person shall supply to the Regulation and Improvement Authority a report in respect of any review conducted by him for the purposes of paragraph (1) and shall make a copy of the report available upon request for inspection by service users and persons acting on behalf of service users.*
- (3) *The system referred to in paragraph (1) shall provide for consultation with service users and persons acting on behalf of service users.*
- (4) *The registered Manager shall ensure that the agency delivers services effectively on a daily basis and reports as required to the registered person.*

**In relation to this notice the following six actions were required to comply with this regulation:**

The registered person shall ensure that:

1. quality monitoring reports are robustly and comprehensively completed in keeping with Regulation; the reports must contain a time bound action plan outlining how areas for improvement are to be addressed and/or kept under meaningful review by the Responsible Individual
2. that quality monitoring reports evidence meaningful and timely review by the Manager
3. that quality monitoring reports contain feedback from relevant stakeholders
4. the person with the responsibility of undertaking the monthly quality monitoring visits reviews nurses' recruitment and selection records and complaints records; the quality monitoring report should include a system for identifying all records sampled during such visits
5. the quality monitoring reports are reviewed and signed by the Responsible Individual
6. that a copy of monthly monitoring reports is maintained within the agency and made available upon request to RQIA and/or other appropriate third parties in keeping with Regulation

**Action taken by the registered persons:**

1. The agency is using the exemplar template created by RQIA so all relevant domains will be reviewed. The agency had made improvements to the content of these reports to ensure compliance with this regulation. Time bound action plans were identified to drive improvement within the agency. The agency had also referred to the ongoing enforcement action taken against their agency to ensure they become and remain compliant with the regulations. The Responsible Individual completes the monthly quality monitoring reports to ensure they have a complete and robust overview of the services being delivered by the agency. This action has been assessed as met.
2. There is a section in the report for the report to be signed by the manager to provide assurances that they had oversight of the information. During the inspection, a monthly monitoring report was reviewed and there was evidence that the manager had reviewed the reports. This action has been assessed as met.
3. As the agency is non-operational, they do not have any stakeholders to consult however there were sections in the report where feedback from service users obtained will be recorded. The agency was aware that this feedback required to be sought by the monitoring officer. This action has been assessed as met.
4. From reviewing the reports submitted, recruitment, complaints and training were reviewed. Key findings were identified from reviewing complaints. This action has been assessed as met.
5. The agency is currently non-operational therefore the reports have not been fully completed; however there is a section in the report for the registered person to sign. The Responsible Individual is also the person undertaking the monitoring reports therefore will have full oversight of the agency. This action has been assessed as met.
6. Three reports were submitted to RQIA to evidence the system they have in place and will take forward when they are operational. This action has been assessed as met.

Evidence was available to validate compliance with the Failure to Comply Notice..



## 6.0 Quality improvement plan

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>	6*	8*

\* the total number of areas for improvement includes six regulations and eight standards that are carried forward for review at the next inspection.

Areas for improvement and details of the QIP were discussed with Mr Joshua Garnham, Responsible Individual and Mr Will Hobson, Head of Operations, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 4(1)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure the Statement of Purpose is reviewed and includes the types of settings to which the nurses will be supplied.  Ref: 5.1  <b>Response by registered person detailing the actions taken:</b> The statement of purpose has been reviewed and includes the types of settings to which the nurses will be supplied
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 15(2)(e)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that the Staff Handbook includes the frequency of the mandatory training requirements.  Ref: 5.1  <b>Response by registered person detailing the actions taken:</b> The staff handbook has been reviewed and includes the mandatory training requirements and the frequency trainings need to be completed
<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 24(a)(b)(c)(d)(f)(g)(h)  <b>Stated:</b> Second time  <b>To be completed by:</b> Immediate from the date of the inspection	The registered person shall ensure that a policy is developed in relation to the agency's requirement to notify RQIA of specified events, as outlined in the regulations (Notice of Changes).  Ref: 5.1  <b>Response by registered person detailing the actions taken:</b> A notice of changes policy has been developed which outlines the agencies requirements to notify the RQIA of events such as change in personal details
<b>Area for improvement 4</b>  <b>Ref:</b> Regulation 14(2)(a)  <b>Stated:</b> Second time	The registered person shall review the policy on Supervision to ensure that it reflects good practice.  Ref: 5.1

<b>To be completed by:</b> Immediate from the date of the inspection	<b>Response by registered person detailing the actions taken:</b> The policy on supervision has been reviewed and amended to ensure that further information is provided following best practice. The policy outlines what supervisions are and who will be conducting the supervision including their contact details. Feedback will be obtained following the nurses' first placement and a formal supervision will be organised after the first 3 months and 6 monthly thereafter. Furthermore, a formal supervision will also be organised within 14 days of any incident or complaint received.
---	---

<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Regulation 10(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 that the agency is being managed with sufficient care, competence and skill.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> A robust system has been developed to ensure that all nurses are working within their scope of competence. During the initial recruitment stage, the registered manager will review the nurses experience, training and knowledge to ensure they have the relevant skill and competence for the required placement. The registered manager has further developed the clinical interview to ensure that it is more clinically robust. All nurses will complete a nursing skills declaration form which will identify the nurses area of competence. Prior to the nurses working, the registered manager will sign off the nurses in the designated area of competence once all required training and compliance has been completed.</p>
<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Regulation 12(1)(b)</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 no nurse is supplied by unless they have the qualifications, knowledge skills and competencies necessary. This relates to weighting of interview questions and non-adherence to the agencies interview process.</p> <p>Ref: 5.2</p> <p><b>Response by registered person detailing the actions taken:</b> The recruitment and compliance process has been developed to ensure the procedure is more robust. The registered manager will ensure that the nurses supplied are competent to work within the clinical area they are being supplied to. The system has been further developed to ensure the nurses clinical ward placement is recorded and the responsible individuals are notified. The interview has been further developed to ensure it includes a weighting of all questions and clinical questions have been developed in relation to the area the candidate is being interviewed for. The nurses' employment history will be reviewed to ensure that the nurses has the necessary experience and skill within the desired area prior to placement. Furthermore, all nurses will complete a nursing skills declaration form which will be reviewed in conclusive to all other clinical documentation and training prior to being signed off in the recommended area and skill set.</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 9.1</p> <p><b>Stated:</b> Second time</p>	<p>The registered person shall ensure the adult safeguarding policy and procedure is reviewed and is in accordance with regional policies and procedures.</p> <p>Ref: 5.1</p>

<p><b>To be completed by:</b> Immediate from the date of the inspection</p>	<p><b>Response by registered person detailing the actions taken:</b> The safeguarding policy and procedure has been reviewed and amended to ensure that it is in accordance with regional policies and procedures. The registered manager completed the adult safeguarding champion training which is outlined within the policy including contact details</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 1.12</p> <p><b>Stated:</b> Second 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 quality monitoring policy and procedure includes the monthly quality monitoring of the service by the registered person.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> The monitoring report is being reviewed and completed monthly by the registered manager and responsible individual</p>

<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 1.13</p> <p><b>Stated:</b> Second 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 quality monitoring policy and procedure includes the annual quality review of the service and the involvement of key stakeholders.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> The annual monitoring report has been reviewed and will be completed annually by the registered manager and the responsible individual</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 4.1</p> <p><b>Stated:</b> Second 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 policy and procedure for staff recruitment details the recruitment process and complies with legislative requirements and DOH guidance.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> The recruitment policy has been reviewed and amended to ensure that the policy contains the recruitment process and the details of the individuals involved, including their roles and responsibilities. All individuals involved have completed the relevant training and are competent within their role. The registered manager will ensure the recruitment process is followed and the nurses are fully compliant, skilled and trained prior to being signed off to work within their area of competence.</p>
<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Standard 1.16</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate from the date of the inspection</p>	<p>The registered person shall further develop the policy on professional registrations, to ensure that it reflects the need for the NMC live register to be checked on a monthly basis.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> A professional registration and qualification check procedure has been developed outlining those responsible for completing the NMC live register on a monthly basis and the rationale of why this is required.</p>

<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Standard 6.3</p> <p><b>Stated:</b> Second 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 policy on training is further developed to include the frequency of mandatory updates.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> The policy on training has been reviewed and amended to ensure that the policy contains all training requirements prior to work placement and the frequencies of when the training is required to be completed and updated.</p>
<p><b>Area for improvement 7</b></p> <p><b>Ref:</b> Standard 1.10</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 service user's guide is reviewed and includes the type of settings to which the nurses will be supplied.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> The service user's guide has been reviewed and amended and is in line with the recruitment process. The policy includes the settings to which the nurses will be supplied. It has been further developed to include the organisational structure and the key points of contact.</p>
<p><b>Area for improvement 8</b></p> <p><b>Ref:</b> Standard 6.1</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 that an Induction policy is developed, separate from being included within the staff handbook.</p> <p>Ref: 5.1</p> <p><b>Response by registered person detailing the actions taken:</b> An induction policy has been development separate from being included within the staff handbook. The induction policy outlines the induction process and procedure.</p>

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







The Regulation and Quality Improvement Authority  
James House  
2-4 Cromac Avenue  
Gasworks  
Belfast  
BT7 2JA