

# Inspection Report

4 September 2023



## Jark (Belfast) Healthcare Services 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

<b>Organisation/Registered Provider:</b> Jark (Belfast) Healthcare Services Limited	<b>Registered Manager:</b> Miss Jamie Lauren Adams
<b>Responsible Individual:</b> Mrs Searlain McCormack	<b>Date registered:</b> 2 May 2018
<b>Person in charge at the time of inspection:</b> Mrs Searlain McCormack	
<b>Brief description of the agency operates:</b>  Jark (Belfast) Healthcare Services Limited is a nursing agency; the office is located in Belfast. The agency was supplying registered nurses to a Health and Social Care Trust (HSCT).  Jark (Belfast) Healthcare Services Limited also acts as a recruitment agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate recruitment agencies.	

## 2.0 Inspection summary

An announced inspection was undertaken on 4 September 2023 between 10.30 am and 3.45 pm. 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 induction, training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), service user involvement, restrictive practices, dysphagia management and Covid-19 guidance was 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 Trusts 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?**

The information provided by service users indicated that there were no concerns regarding the standard of nurses provided by the agency. There were no responses 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 10 June 2021 by a care inspector. No areas for improvement were identified.

### **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. The manager advised that there had been no referrals made to the NMC since the date of the last inspection.

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 for receiving feedback on registered nurses' practice. However, the manager advised that there was a low response rate to written requests for feedback and that feedback was generally provided verbally. The manager confirmed that systems were being improved to capture the verbal feedback provided by service users.

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).

All staff had undertaken training in relation to Adult Safeguarding.

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.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. The manager advised that no complaints had been received in relation to registered nurses since the date of the last inspection.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) 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 and displayed appropriately 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 Miss Jamie Lauren Adams, Registered Manager and Mrs Searlain McCormack, Responsible Individual, as part of the inspection process and can be found in the main body of the report.



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