

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

Name of Registered Agency: Vivid Healthcare	Name of Registered Person: Vivid Healthcare Search Limited Mr Jacob Jayson (Responsible Individual)
Address of Registered Agency: Vivid Healthcare 131 Finsbury Pavement, London EC2A 1NT	
Issue Date: 14 April 2026	FTC Ref: FTC000255
Regulation not complied with: <i>The Nursing Agencies Regulations (Northern Ireland) 2005</i> <i>Registered person – general requirements and training</i> <i>Regulation 10. —</i> <p align="center"><i>(1) The registered provider and the registered manager shall, having regard to the size of the agency, its statement of purpose and the number and needs of the service users, carry on or (as the case may be) manage the agency with sufficient care, competence and skill.</i></p>	
Specific failings to comply with regulations: During an announced inspection of Vivid Healthcare (RQIA ID: 020707) on 19 March 2026, serious concerns were identified regarding the lack of robust governance arrangements and managerial oversight of the agency. Discussion with the Manager confirmed that they are employed in their role on a part time basis alongside other professional commitments. The agency’s Head of Nursing confirmed that the Manager may, at times, have to dedicate time to manage complaints within another service unrelated to Vivid Healthcare (RQIA ID: 020707). Whilst such part time arrangements are not necessarily concerning, the shortfalls outlined below raise concerns in regard to the adequacy of current managerial arrangements. It was noted that the Manager’s working pattern and availability within the agency is variable and typically communicated to staff on a Friday for the following week. The Manager was also unable to identify the Agency’s Adult Safeguarding Champion. Discussion with the Manager further highlighted that they had limited awareness of	

the agency's monthly monitoring arrangements; these arrangements are discussed in more detail further below.

Staff management arrangements were also considered. Review of a sample of staff selection and recruitment records demonstrated that full employment histories had not been obtained for staff; in addition, it was noted that not all staff had received formal supervision in keeping with the Agency's own policy.

Review of the agency's Statement of Purpose and Service User Guide evidenced that these were not in keeping with the Regulations; it was disappointing to note that an area for improvement to address these deficits had been identified during an inspection on 5 March 2024 and for a second time on 11 July 2024.

The management of accidents and incidents was also considered. Review of governance records and discussion with staff evidenced that the procedure for reporting accidents / incidents had not been communicated effectively to staff. It was further identified that there was no record of any incidents having occurred despite a previous incident being identified by the Inspector.

Serious deficits were also identified in regard to oversight of adult safeguarding concerns. Review of information provided during and after the inspection highlighted that, an incident had occurred which involved a registered nurse supplied by the agency. Feedback from the Manager during and following the inspection did not assure the Inspector that this incident had been appropriately identified and managed by the agency as a potential safeguarding incident. It was also noted that there was no Annual Safeguarding Report in place for 2025.

It remains a matter of serious concern that despite the quality of managerial arrangements and oversight being highlighted during a Serious Concerns meeting convened by RQIA on 15 March 2024, the aforementioned deficits remain ongoing.

While monthly monitoring reports had been undertaken and were available for inspection, it was concerning to note that the inspection findings outlined above had not been identified; as such, RQIA is concerned that the quality assurance arrangements are insufficiently robust so as to identify deficits and address them in a meaningful, consistent and timely manner. These deficits are particularly disappointing given that an area for improvement in regard to the quality of monthly monitoring reports was made during a previous inspection on 11 July 2024.

There is insufficient evidence that despite assurances received from the agency, during a Serious Concerns meeting on 15 March 2024, necessary and sustained improvement in regard to monthly monitoring arrangements have been achieved.

Action required to comply with regulations:

The Responsible Individual shall ensure that:

- The manager maintains a consistent, effective, and meaningful management presence within the agency, sufficient to provide appropriate oversight of all

aspects of service delivery; the manager's working pattern will also be proactively monitored by the Responsible Individual

- The hours worked by the manager are accurately recorded on the duty rota and communicated to relevant staff within the service in a timely manner
- A system is embedded to ensure that all staff are employed in accordance with robust selection and recruitment procedures, and best practice standards
- Monthly quality monitoring reports are conducted under Regulation 20, in a sufficiently robust manner so as to identify, drive and sustain improvements
- Monthly quality monitoring reports are reviewed and signed by the Responsible Individual and Manager in a meaningful and timely manner
- A copy of monthly quality monitoring reports is maintained within the agency and made available upon request to RQIA and/or other appropriate third parties in keeping with Regulation
- All staff receive regular, formal supervision in line with the agency's policy and best practice guidance
- A system is implemented and maintained which ensures that all adult safeguarding concerns are identified, recorded and managed in keeping with best practice guidance; this includes meaningful trend analysis of all adult safeguarding incidents by the manager
- The manager completes Adult Safeguarding Training specific to Northern Ireland and of a level commensurate to their role
- The agency's Statement of Purpose and Service User Guide are reviewed and updated in keeping with Regulation and best practice guidance
- A robust system is developed and maintained so as to ensure that all accidents and incidents are appropriately recorded, reviewed, and subject to regular trend analysis by the manager in order to quality assure service delivery and drive any necessary improvements.

The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 14 June 2026

Signed.....
Elaine Connolly

Director of Adult Care Services

This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Agencies Regulations (Northern Ireland) 2005

It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.