

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

Name of Registered Establishment: JACE Medical	Name of Registered Person: Dr John Doherty
Address of Registered Agency: JACE Medical (RQIA ID: 021171) Units 1, 2, 9 & 10 The Vale Centre, BT47 3GE	
Issue Date: 21 July 2026	FTC Ref: FTC000260
Regulation not complied with: <i>The Independent Healthcare Regulations (Northern Ireland) 2005</i> <i>Fitness of the registered person</i> <i>Regulation 13.—</i> <i>(1) The registered provider and the registered manager shall, having regard to the size of the establishment or agency, the statement of purpose and the number and needs of the patients, carry on or (as the case may be) manage the establishment or agency with sufficient care, competence and skill.</i>	
Specific failings to comply with regulations: During an announced inspection on 24 June 2026 and 2 July 2026 concerns were raised regarding the lack of robust managerial oversight and governance arrangements within JACE Medical as follows: • Areas for improvement identified at the previous inspection on 30 July 2025 relating to clinical record keeping, completion of endoscopy and surgical registers, recovery staffing, pathology services, staff induction and medicines management had not been addressed and improvements had not been fully implemented or sustained. • A review of patient records identified deficiencies in clinical documentation, including inconsistent completion of World Health Organisation (WHO) surgical safety checklists, operation notes, recovery records and Venous Thromboembolism (VTE) risk assessments.	

- Surgical and endoscopy registers were not completed to the required standard and it was evidenced that pathology and specimen collection logs had been completed inconsistently.
- A robust audit and assurance programme was not in place to sufficiently identify deficits and take appropriate actions to drive improvement.

Action required to comply with regulations:

The registered person must ensure that:

- An effective, comprehensive and meaningful quality monitoring report is completed fortnightly which reviews and monitors progress with the actions specified in Failure to Comply Notices FTC000260 and FTC000261. Where progress is still required, the quality monitoring report must evidence:
 - The monitoring officer's escalation of deficits and concerns
 - An impact assessment of concerns on safe care and patients welfare
 - An improvement plan that assures patient safety and welfare is protected.
- Endoscopy and surgical registers are fully and accurately completed and routinely audited to ensure compliance.
- Clinical records, including patient operation notes, (WHO) surgical safety checklists, VTE risk assessments, recovery records, patient discharge checklists and pathology specimen records are fully and accurately completed and routinely audited.
- Audit and quality assurance systems are in place to monitor compliance across all aspects of care and service delivery, including the management of medicines. When a deficit is identified through the audit process, there is a quality improvement plan in place that evidences:
 - The action(s) that have been put in place to prevent reoccurrence of the deficit in the short, medium and long term.
 - The action(s) that have been implemented to assure the necessary improvements are made and sustained across the hospital.

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: 21 October 2026

Signed

M. Cross

Director of Independent Healthcare and Responsible Officer

This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Independent Health Care 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.

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Address of Registered Agency: JACE Medical (RQIA ID: 021171) Units 1, 2, 9 & 10 The Vale Centre, BT47 3GE	
Issue Date: 21 July 2026	FTC Ref: FTC000261
Regulation not complied with: <i>The Independent Healthcare Regulations (Northern Ireland) 2005</i> <i>Staffing</i> <i>Regulation 18.—</i> <i>(1) The registered person shall, having regard to the nature of the establishment or agency, the statement of purpose and the number and needs of patients, ensure that there is at all times an appropriate number of suitably qualified, skilled and experienced persons employed in or for the purposes of the establishment or, as the case may be, for the purposes of the agency.</i> <i>(2) The registered person shall ensure that each person employed in or for the purposes of the establishment or, for the purposes of the agency –</i> <i>(a) receives mandatory training and other appropriate training, supervision and appraisal;</i>	
Specific failings to comply with regulations: During the announced inspection on 24 June 2026 and 2 July 2026 review of staffing arrangements evidenced that two registered endoscopy nurses had worked within JACE Medical without having been recruited in accordance with regulatory requirements and there was no evidence of having completed relevant training and induction. Review of the theatre/recovery staff allocation record demonstrated that recovery staff were not provided in sufficient numbers to ensure patients who had received a general anaesthetic had one to one recovery nurse supervision.	

Staff training records identified not all staff had completed up to date mandatory training as outlined in relevant legislation, standards and best practice guidance. Competency assessment frameworks were not available for review for three recently recruited bank nurses. In addition, the staff register was not accurate and up to date.

Action required to comply with regulations:

The registered person must ensure that:

- A comprehensive review of staffing arrangements, including training and competency of all staff working in JACE Medical is undertaken and that adequate numbers of appropriately trained staff are in place for each procedure undertaken in the hospital. Staff training and competency assessment records must be available for inspection.
- Robust arrangements must be in place to maintain a staff register in accordance with Schedule 3 Part II (6) of The Independent Health Care Regulations (Northern Ireland) 2005.
- At all times staff are recruited and employed in accordance with statutory legislation and mandatory requirements. This includes the receipt and review of a satisfactory AccessNI enhanced disclosure check prior to commencement of employment.
- The staff recruitment policy and procedure contains details of all the required information as listed within Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005.
- Robust monitoring systems are implemented to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.
- All newly recruited staff, regardless of their employment status (permanent, bank, or agency), complete a robust induction programme relevant to their role and responsibilities. Records of induction must be retained and available for review.

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: 21 October 2026

Signed

A handwritten signature in black ink that reads "M. Cross". The signature is written in a cursive style with a large 'M' and a distinct 'C'.

Director of Independent Healthcare

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