



The Regulation and
Quality Improvement
Authority

Inspection Report

Name of Service: Lucas Love Healthcare
Provider: Lucas Love Healthcare
Date of Inspection: 13 May 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

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| Organisation/Registered Provider: | Lucas Love Healthcare |
| Responsible Individual/Responsible Person(s): | Ms Catherine Jaffrey |
| Registered Manager: | Miss Nicola McLean |
| Service Profile – Lucas Love Healthcare is a nursing agency operating from premises located in Belfast. The agency currently supplies nurses to nursing homes in various Trust areas. Lucas Love also acts as a Recruitment Agency and supplies Health Care Assistants (HCAs) to various healthcare settings. RQIA does not regulate Recruitment Agencies. | |

2.0 Inspection summary

An unannounced inspection was undertaken on 13 May 2025 between 10.15 am and 2.05 pm by a care Inspector.

This inspection was undertaken to evidence how the agency is performing in relation to the regulations and standards; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led. The last care inspection of the nursing agency was undertaken on 30 November 2023 by a care inspector. No areas for improvement were identified.

The inspection found that there were good processes in place to ensure the nurses being supplied were providing safe care; and that the agency was well led. Details and examples of the inspection findings can be found in the main body of this report.

Service users reported that they were satisfied with the standard of nurses supplied.

As a result of this inspection no areas for improvement were identified. Details can be found in the main body of this report.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the agency was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the 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 registration information, and any other written or verbal information received from service users.

Throughout the inspection process inspectors seek the views of the service users, who use the nurses supplied by the agency; and review/examine a sample of records to evidence how the agency is performing in relation to the regulations and standards.

3.2 What people told us about the service

Services users who spoke with the inspector gave positive feedback in relation to the agency and nurses supplied in the various settings they were supplied to work in. Where concerns were raised in relation to nurses performance, these were dealt with "quickly and professionally".

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

Safe staffing begins at the point of recruitment and continues through to staff induction, regular training and continued supervision and support.

A review of the agency's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before nurses were supplied. It was good to note that the agency conducted further character reference checks where the latest employer's references provided confirmation of dates of employment only.

A review of the records confirmed that all registered nurses were appropriately registered with the Nursing and Midwifery Council (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 interview process was reviewed and written records were retained by the agency of the nurses' capability and competency in relation to their job role. Newly recruited nurses completed an induction that offered additional training modules tailored for the care settings in which they were supplied.

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 had completed training appropriate to the requirements of the settings in which they were placed.

Procedures were in place for appraising nurse performance and nurses were provided with supervision on a regular basis.

3.3.2 Quality of Management Systems

There has been no change in the management of the agency since the last inspection. Miss Nicola McLean has been the manager in this agency since 7 August 2015.

A review of a sample of records evidenced that a robust system for reviewing the quality of care and staff practices was in place; this included monthly quality monitoring reports and an annual quality review report.

Complaints were managed appropriately and it was good to note the manager liaised with the Nursing and Midwifery Council (NMC) in relation to any concerns arising around the nurses' practice. Complaints were reviewed on a regular basis and where trends were identified, measures were put in place to address the matter.

With respect to oversight of nurses working patterns and adequate rest periods, it was positive to note that weekly checks were undertaken to ensure that nurses were not working excess hours in line with the European Working Time Directive. There was a system in place to ensure that any restrictions placed on the number of hours a nurse should work, was highlighted within the electronic system for ease of monitoring.

Agencies are required to have a person known as the Adult Safeguarding Champion (ASC), who has responsibility for implementing the regional protocol and the agency's adult safeguarding policy. The manager was identified as the appointed ASC for the agency. The annual safeguarding position report had been completed and deemed satisfactory.

There was evidence that the agency responded to any concerns, raised with them or by their processes, and took measures to improve practice and/or the quality of services provided by the agency, as necessary.

4.0 Quality Improvement Plan/Areas for Improvement

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



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