



The Regulation and
Quality Improvement
Authority

Inspection Report

Name of Service: Public Health Agency - Sessional Vaccinators Service

Provider: Public Health Agency

Date of Inspection: 16 April 2025

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

1.0 Service information

Organisation/Registered Provider:	Public Health Agency
Responsible Individual:	Mr Aidan Dawson
Registered Manager:	Mrs Deirdre Ward
Service Profile: Public Health Agency - Sessional Vaccinators Service is a Nursing Agency set up to support Vaccination programmes across primary care and community pharmacy services in Northern Ireland.	

2.0 Inspection summary

An announced inspection took place on 16 April 2025, between 9.45 am and 12.45 pm by a care Inspector.

The inspection was undertaken to evidence how the agency is performing in relation to the regulations and standards; and to assess progress with the areas for improvement identified, by RQIA, during the pre-registration inspection on 20 February 2023; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that the nurses provided safe, effective and compassionate care in the various settings they were supplied to work in. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the agency, such as recruitment, induction; and the monthly and annual quality reports. There was also a need for an Adult Safeguarding Champion to be identified within the organisation.

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

As a result of this inspection all previous areas for improvement identified were assessed as having been addressed by the provider. Full details, including new areas for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

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 the previous Quality Improvement Plan issued, registration information, and any other written or verbal information received from service users and nurses.

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 and their quality of life

Services users told us that the standard of the nurses provided by the agency was 'very good' and described the nurses as being 'first class', 'very compliant', 'really on top of things' and always 'able to hit the ground running'. Others described the nursing agency as a 'brilliant service' and a 'real asset' and that they 'don't know they didn't use them years ago'.

3.3 Inspection findings

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

There had been no new nurses employed since the agency first registered as a Nursing Agency. However, it was identified that there had been a number of nurses who are currently employed by the Public Health Agency (PHA) who had transferred internally to work in the Sessional Vaccinators Service. It was identified that criminal records checks (AccessNI) had not been undertaken in respect of all the nurses who had transferred internally. An area for improvement has been identified to ensure that AccessNI checks are completed, regardless of whether they commenced work in the Sessional Vaccinators Service by means of Internal Transfer, Expression of Interest, Secondment or Medical Redeployment.

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.

There was evidence that all newly appointed nurses completed a structured induction process, to ensure they were competent to carry out the duties of their job in line with the agency's policies and procedures.

There was a structured induction programme which included the completion of all mandatory training requirements and shadowing of a more experienced nurse. However, an area for improvement has been identified to ensure that an induction proforma is developed and implemented for all new nurses.

Written records were retained by the agency of the nurses' capability and competency in relation to their job role.

All nurses must maintain their registration for as long as they are in practice. This includes renewing their registration and completing Post Registration Training and Learning. Records of all staff training were retained and the manager maintained oversight of the training records to ensure compliance. Nurses had completed training appropriate to the requirements of the settings in which they were placed.

There was a process in place to ensure that the nurses received regular supervision. Given that all of the nurses had substantive posts in other health and social care settings, advice was given in relation to offering nurses one to one supervisions, if they wished, when they attend the group supervisions offered. This would enable the nurses to raise any concerns they may have and/or to identify any training need they may have. The manager welcomed this advice.

There was a system in place to provide the nurses with an annual appraisal.

There had been a change in the management of the agency since the last inspection. Mrs Deirdre Ward has been the manager in this agency since 1 January 2024.

There was a system in place for reviewing the quality of care and staff practices. However, the written reports of these visits did not include feedback from service users or the nurses being supplied. An area for improvement has been identified.

Additionally, advice was given in relation to ensuring the Responsible Individual was sent the reports on a monthly basis.

An annual quality report had not been completed. An area for improvement has been identified.

Review of incident records identified that they were managed appropriately.

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. Whilst there had been no safeguarding concerns identified involving any of the agency's nurses, there was no individual identified as the appointed ASC for the agency. An area for improvement has been identified.

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

Areas for improvement have been identified where action is required to ensure compliance with the Regulations and the Standards.

	Regulations	Standards
Total number of Areas for Improvement	1	4

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Deirdre Ward, Manager, 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	
Area for improvement 1 Ref: Regulation 12 (1)(d) Stated: First time To be completed by: Immediate from the date of the inspection	The Registered Person shall ensure that AccessNI checks are undertaken on all new staff, regardless of whether a check has already been undertaken for their substantive post. Ref: 3.3 Response by registered person detailing the actions taken: This will be undertaken for future recruitment exercises.
Action required to ensure compliance with The Nursing Agencies Minimum Standards, 2008	
Area for improvement 1 Ref: Standard 6.1 Stated: First time To be completed by: Immediate from the date of the inspection	The Registered Person shall ensure that an induction proforma is developed and implemented for all new nurses. Ref: 3.3 Response by registered person detailing the actions taken: All new nurses will complete induction which will be recorded in line with organisational procedure.
Area for improvement 2 Ref: Standard 1.12 Stated: First time To be completed by: Immediate from the date of the inspection	The Registered Person shall ensure that the monthly quality monitoring reports include feedback from service users and from the nurses being supplied. Ref: 3.3 Response by registered person detailing the actions taken: This has been actioned and feedback will be actively sought.

<p>Area for improvement 3</p> <p>Ref: Standard 1.13</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that a review of the quality of the service is undertaken on an annual basis.</p> <p>Ref: 3.3</p> <hr/> <p>Response by registered person detailing the actions taken: This will be actioned and an annual report will be produced.</p>
<p>Area for improvement 4</p> <p>Ref: Standard 9.1</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that there is an Adult Safeguarding Champion (ASC) identified in keeping with the regional policy on safeguarding.</p> <p>Ref: 3.3</p> <hr/> <p>Response by registered person detailing the actions taken: This has been raised with Senior Management Team. As the organisation is undergoing a period of change, we anticipate this role being incorporated within this process.</p>

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The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA



Tel: 028 9536 1111



Email: info@rqia.org.uk



Web: www.rqia.org.uk



Twitter: @RQIANews