

Inspection Report

Name of Service: First Choice Selection Services Ltd

Provider: First Choice Selection Services Ltd

Date of Inspection: 8 May 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:	First Choice Selection Services Ltd
Responsible Individual:	Mr Paul Crean
Registered Manager:	Mrs Lauren Qaddouhi (Acting)
Service Profile	
<p>First Choice Selection Services Ltd is a nursing agency which supplies registered nurses to a range of settings. These include Health and Social Care Trust (HSCT) facilities and care homes.</p> <p>First Choice Selection Services Ltd also acts as a Recruitment Agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate Recruitment Agencies.</p>	

2.0 Inspection summary

An announced inspection took place on 8 May 2025, between 9.35 am to 2.35 pm and was conducted 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 last care inspection on 16 April 2024; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection found that there were satisfactory processes in place to ensure the nurses being supplied were providing safe care. Details and examples of the inspection findings can be found in the main body of the report.

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

As a result of this inspection, the previous areas for improvement, with the exception of one, were assessed as having been addressed by the provider. One area for improvement will be reviewed at the next inspection. No new areas for improvement were identified. Details can be found in the main body of this report.

For the purposes of the inspection report, the term 'service user' describes the commissioning Trust into which the agency nurses are supplied to work.

We wish to thank the Responsible Individual, staff and service users for their support and cooperation during the inspection.

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 areas for improvement issued, registration information, and any other written or verbal information received from staff or the commissioning trust.

Throughout the inspection process inspectors will seek the views of 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.

Information was provided to service users and staff on how they could provide feedback on the quality of services. This included an electronic survey.

3.2 What people told us about the service

As part of the inspection process we spoke with a number registered nurses and service users. The information provided indicated that those we spoke with did not have any concerns in relation to the agency.

Representatives from the commissioning Trusts said they were satisfied with the service provided by First Choice Selection Services Ltd. One representative told us "We have no concerns regarding the supply of nurses from the agency; this is a good agency and good communication from the agency."

Nurses provided feedback, indicating they were very satisfied with the training provided by the agency and that they felt very supported in their role. One told us that "First Choice is an excellent agency. I get regular supervision and an annual appraisal."

3.3 Inspection findings

3.3.1 Staffing Arrangements

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

The Responsible Individual advised that there were no newly recruited nurses since the previous inspection. The Responsible Individual confirmed that recruitment was managed in accordance with the Regulations and Standards. It was confirmed by the Responsible Individual that all pre-employment checks are completed before nurses commence employment and have direct engagement with patients. An area for improvement made at the previous inspection regarding recruitment is carried forward for review at the next inspection.

There was a system in place for all newly recruited nurses to complete a comprehensive induction, to ensure they were competent to carry out the duties of their role in line with the agencies policies and procedures. The induction included specific training.

3.3.2 The systems in place for identifying and addressing risks

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.

It was positive to note that registered nurses have supervisions planned in accordance with the agency's policies and procedures. Procedures were in place for appraising registered nurses' performance and they confirmed that appraisals had taken place. Registered nurses told us they felt supported and involved in discussions about their personal development.

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 Liberty Safeguards (DoLS), Adult Safeguarding, Dysphagia and Haemovigilance as appropriate to their job roles.

The agency's provision for the welfare, care and protection of service users was reviewed. The organisation's adult safeguarding policy and procedures were reflective of the Department of Health's (DoH) regional policy and clearly outlined the procedure for staff in reporting concerns. 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 area manager was identified as the agency's ASC. It was established that systems and processes were in place to manage the safeguarding and protection of adults at risk of harm. The annual safeguarding position report had been completed.

3.3.4 The arrangements to ensure robust managerial oversight and governance

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.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure.

Review of the complaints record and discussion with the Responsible Individual evidenced that no complaints had been recorded since the previous care inspection.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been previously identified where action is required to ensure compliance with Regulations.

	Regulations	Standards
Total number of Areas for Improvement	1*	0

* An area for improvement is carried forward for review at the next inspection.

This inspection resulted in new no areas for improvement being identified. Findings of the inspection were discussed with Mr Paul Crean, Responsible Individual, as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 12(d) Schedule 3 Stated: First time To be completed by: Immediately from the date of inspection	<p>The registered person shall ensure that full information is available this is specifically in relation to two written reference, one of which is from the current / most recent employer and reasons for leaving employment are included.</p> <hr/> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>

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