

# Inspection Report

**Name of Service:** Allied and Clinical Recruitments  
**Provider:** Allied and Clinical Recruitments Ltd  
**Date of Inspection:** 16 September 2025

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

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	Allied and Clinical Recruitments Ltd
<b>Responsible Person:</b>	Mrs Esther Olojugba
<b>Registered Manager:</b>	Mrs Esther Olojugba
<b>Service Profile</b> – Allied and Clinical Recruitments is a nursing agency which supplies nurses to the Southern Health and Social Care Trust (SHSCT), the South Eastern Health and Social Care Trust (SEHSCT), the Western Health and Social Care Trust (WHSCT) and the Belfast Health and Social Care Trust (BHSCT).	

## 2.0 Inspection summary

An announced inspection took place on 16 September between 12.30 p.m. and 15.00 p.m. The inspection was conducted by a care inspector.

RQIA held a Serious Concerns meeting on 28 May 2025 in respect of a lack of robust governance arrangements and managerial oversight, effective quality assurance of service provision and concerns in relation to staff recruitment.

The agency was able to provide assurance at the Serious Concerns meeting that actions were taken to address the concerns and to prevent reoccurrence.

This inspection was a focused inspection to ensure compliance and focused solely on the areas of concern discussed at the Serious Concerns Meeting.

As a result of this inspection the previous areas for improvement were assessed as having been addressed by the provider.

For the purposes of the inspection report, the term ‘service user’ describes the hospitals into which the agency’s nurses are supplied to work.

## 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, relatives, staff or the commissioning Trusts.

### **3.0 How we inspect**

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In preparation for this inspection, a range of information about the service was reviewed. This included the previous areas for improvement identified, registration information, and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust.

Due to the inspection being a focused, follow up inspection, staff and service users were not contacted for feedback.

#### **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.

Review of the agency's staff recruitment records confirmed that all pre-employment checks to include criminal record checks (AccessNI) were completed and verified before staff members commenced employment and had direct engagement with service users.

#### **3.3.2 Quality of Management Systems**

There has been no change in the management of the agency since the last inspection. Mrs Esther Olojugba has been the manager in this agency since 19 December 2019 and she is also the Responsible Individual.

A representative of the registered provider compiled a monthly report to examine all areas of the running of the agency. The reports of these visits were found to be adequate, with evidence that these reports had been reviewed by the registered manager. Some advice was shared in relation to further enhancing these reports, this will be reviewed at future inspections.

The complaints tracker was reviewed, there was evidence of the review of complaints by the manager. A system for shared learning from complaints has been established. Advice was

shared regarding the closure of complaints episodes and learning from complaints being recorded.

The annual quality report is in progress and will be reviewed at future inspections.

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. An annual safeguarding position report had been completed.

## **6.0 Quality Improvement Plan (QIP)/Areas for Improvement**

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



## The Regulation and Quality Improvement Authority

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

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**Tel:** 028 9536 1111



**Email:** [info@rqia.org.uk](mailto:info@rqia.org.uk)



**Web:** [www.rqia.org.uk](http://www.rqia.org.uk)



**Twitter:** @RQIANews