

# Inspection Report

**Name of Service:** Reliance Healthcare NI  
**Provider:** Reliance Healthcare NI  
**Date of Inspection:** 24 July 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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| <b>Organisation/Registered Provider:</b>  | <b>Reliance Healthcare NI</b>     |
| <b>Responsible Individual/Responsible Person:</b>   | <b>Mr. Raymond Patrick Murphy</b> |
| <b>Registered Manager:</b>  | <b>Mrs. Geetha Rajappan</b>       |
| <b>Service Profile –</b><br>Reliance Healthcare NI is registered with RQIA as a nursing agency. It operates from offices located in Belfast. The agency supplies registered nurses to several local care homes. |                                   |

## 2.0 Inspection summary

An announced inspection took place on 24 July 2025, between 10 a.m. and 12.30 pm. It was carried out 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 17 February 2025; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection found that the nurses provided safe, effective and compassionate care in the settings they were supplied to work in and that the agency was well led.

As a result of this inspection all of the previous areas for improvement were assessed as having been addressed by the provider and 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 care homes that the agency's nurses are supplied to work in.

## **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 service users or staff.

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 and their quality of life**

No responses were received from nurses or service users.

### **3.3 Inspection findings**

#### **3.3.1 Staffing (recruitment and selection, induction and training)**

A review of the agency's staff recruitment records confirmed that pre-employment checks including criminal record checks (AccessNI), were completed and verified before registered nurses were supplied to the various health care settings.

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.

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. This system is overseen by the manager.

Nurses were provided with training appropriate to the requirements of the settings in which they were placed. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding, Dysphagia and Malnutrition Universal Screening Tool (MUST).

### 3.3.2 Quality of Management Systems

Mrs Geetha Rajappan has been registered manager of the agency since it was registered with RQIA on 2 September 2022. There was a system in place to record the manager's presence within the agency.

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. It was noted that the reports routinely monitored any incidents as part of the monthly checks to identify any patterns or trends.

The inspector suggested a small number of improvements to the reports. The registered individual welcomed these suggestions and it was agreed these would be implemented immediately. The next report was received from the registered individual and this evidenced the suggestions had been adopted.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. The manager had completed training in the management of complaints.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure. Advice was given to the manager regarding the development of a procedure that assured they were formally made aware of any incident or accident involving an agency nurse. This will be reviewed at the next inspection.

The alphabetical list of staff employed by the agency was up to date.

Records were retained in accordance with the Nursing Agencies Regulations.

The agency's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

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. A specific individual was identified as the agency's ASC. It was positive to note that the ASC's training update had been scheduled. The annual safeguarding position report had been completed.

It was positive to note, in keeping with the standards, that there was a procedure in place for the systematic review of the agency's policies and procedures.

### 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 Mr. Ray Murphy, registered individual and Mrs. Geetha Rajappan, registered manager, as part of the inspection process and can be found in the main body of the report.



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