

# Inspection Report

**Name of Service:** Reliance Healthcare NI  
**Provider:** Reliance Healthcare NI  
**Date of Inspection:** 17 February 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>	<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> Reliance Healthcare NI is registered with RQIA as a nursing agency. It operates from offices located in Belfast. The agency supplies registered nurses to local care homes.	

## 2.0 Inspection summary

An announced inspection took place on 17 February 2025, between 9.55 am and 1.15 pm. It was conducted by a care inspector.

The inspection examined the agency's governance arrangements, reviewing areas such as staff recruitment, professional registrations, staff inductions and adult safeguarding. The reporting and recording of incidents and accidents, complaints and whistleblowing was also reviewed.

The inspection was undertaken to evidence how the agency is performing in relation to the Regulations and Standards; and to assess progress with the area for improvement identified during the last care inspection on 10 July 2023.

Enforcement action resulted from the findings of this inspection. A Serious Concerns meeting was held on 4 March 2025 with the Responsible Individual and Registered Manager to discuss identified shortfalls in regard to the quality of governance arrangements and managerial oversight within the agency; and monthly monitoring arrangements. Details of these deficits can be found in the body of this report.

In the course of the meeting, the Responsible Individual provided a full account of the actions taken/to be taken in order to drive improvement and ensure that the concerns raised at the inspection are addressed.

During the meeting, RQIA decided to allow the Responsible Individual a period of time to demonstrate that the necessary improvements have been made and advised that a further inspection may be undertaken to ensure that the concerns had been addressed in an effective and consistent manner.

The area for improvement identified at the previous inspection was not met and is stated for a second time.

For the purposes of the inspection report, the term 'service user' describes the settings 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 area for improvement issued, registration information, and any other written or verbal information received from service users or staff.

As a public-sector body, RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of nursing agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from service users that the agency takes all reasonable steps to promote people's rights. People in receipt of nursing care have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. They should also experience their individual choices and freedoms.

During the inspection process, inspectors will seek the views of service users and those working for the agency. 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 to the electronic survey.

### **3.3 Inspection findings**

#### **3.3.1 Staffing Arrangements**

A review of the agency's staff recruitment records confirmed that enhanced criminal record checks (AccessNI) were completed and verified before registered nurses were supplied. However, there was not sufficient evidence of gaps in employment records being explored or explanations recorded. An area for improvement has been stated for the second time in this regard.

There was no evidence available that the agency's Staff Handbook had been provided to registered nurses supplied by the agency. This has been identified as an area for improvement.

### 3.3.2 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 NMC 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 good to note that registered nurses had supervisions undertaken in accordance with the agency's policies and procedures.

There was no system in place to ensure that the registered nurses were placed into settings where their skills closely matched the needs of patients. An area for improvement has been identified in this regard.

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, Falls Prevention, Pressure Ulcer Prevention and Medicines Management as appropriate to their job roles.

### 3.3.3. Managerial Arrangements

RQIA were not assured that the manager's working pattern was such that they maintained a meaningful and consistent presence within the agency so as to ensure robust and effective oversight. This has been identified as an area for improvement.

Several policies such as Matching Skills and Expertise of Nurses to the Requirements of Placements and Absence of the Registered Manager were unavailable during the course of the inspection. This has been identified as an area for improvement.

There were no monthly quality monitoring arrangements in place in compliance with Regulations and Standards. Monthly monitoring reports quality assure service provision/care delivery, identify deficits and drive improvement in an effective and sustained manner. This has been identified as an area for improvement.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and robust records were retained.

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

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.

The Statement of Purpose required updating with RQIA's contact details and those of the Patient Client Council. The person in charge was also signposted to Part 2 of the Nursing Agencies Minimum Standards (2008), to ensure the Statement of Purpose included all the relevant information. The person in charge subsequently submitted the revised Statement of Purpose to RQIA within two weeks of the inspection and this was noted to be compliant.

#### 4.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	4*	2

\* the total number of areas for improvement includes one that has been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with the Responsible Person and manager as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005</b>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 12(1)(d)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate and ongoing from the date of inspection</p>	<p>The Registered Person shall ensure that for any nurse supplied by the agency, any gaps in employment are fully explored and the reasons recorded.</p> <p>Ref: 3.3.1</p> <p><b>Response by Registered Person detailing the actions taken:</b> The Registered Person alongside the Nurse Manager will continue to explore and record all and any gaps of employment before the commencement of any shifts within the agency. This will be researched before any interviews and the application forms and will be discussed in great length during any and all interview .</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 15(1)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall ensure that a robust system is in place which can evidence that each registered nurse employed by the Agency has been supplied with a copy of the Staff Handbook in a timely manner. This system must evidence meaningful and ongoing oversight by the Registered Manager</p> <p>Ref: 3.3.1</p> <p><b>Response by Registered Person detailing the actions taken:</b> All staff of the agency have a copy of the staff handbook and going forward the Registered Manager will supply, explain the Staff Handbook to all staff employed by the agency and also sign, date, record of all parties and document of doing so.</p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 10(1)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall, having regard to the size of the agency, its statement of purpose and the number and needs of the service users, carry on or (as the case may be) manage the agency with sufficient care, competence and skill.</p> <p>This relates specifically to evidence being retained of the manager's regular and meaningful presence within the agency</p> <p>Ref: 3.3.3</p> <p><b>Response by Registered Person detailing the actions taken:</b> The Registered person will continue their active role on a daily basis, manage and liaise with other senior members of the team but mainly the nurse manager. The Registered Person, Nurse Manager &amp; Administration Manager will also continue to heavily liaise with all nurses/care assistants providing continued support to all of our team within the agency. All decisions, information is</p>

	<p>always discussed. Any change to numbers and needs of the service users will be immediately updated. Going forward &amp; recently any presence by the senior management mainly the manager has been documented and recorded and we will continue to do so.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 20(1)(2)(3)(4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall develop and implement an effective system for reviewing, at appropriate intervals, the quality of services provided by the agency. This relates specifically to the completion of robust quality monitoring reports on a monthly basis; these reports must be available upon request in keeping with Regulation.</p> <p>Ref: 3.3.3</p> <p><b>Response by Registered Person detailing the actions taken:</b> The Responsible Person has implented a new and improved quality monitoring monthly report. This will be of great help to the agency going forward. All quality monitoring monthly reports are stored within the offices of the agency and discussed/shared with the nurse manager of the agency. All reports will be avaiailable going forward in order to keep up with the regulation. The Responsible Person understands how important these reports are and will aim to demonstrate to our Inspector a higher standard in these reports for the agency.</p>
<p><b>Action required to ensure compliance with Nursing Agencies Minimum Standards (2008)</b></p>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall ensure that a robust system is developed and implemented so as to ensure that the Agency matches skills and expertise of nurses to the requirements of placements; this system must evidence meaningful and ongoing oversight by the Registered Manager.</p> <p>Ref: 3.3.2.</p> <p><b>Response by Registered Person detailing the actions taken:</b> The Registered Manager of the Agency has updated and provided a copy of this policy to the Regulators and this copy has been discussed, updated with all of our Nurses within the agency and a copy is kept in our offices.</p>

<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall ensure that policies and procedures are in place and are subject to systematic review. This specifically refers to the Matching Skills and Expertise of Nurses to the Requirements of Placements and Absence of the Registered Manager Policies</p> <p>Ref: 3.3.3</p>
	<p><b>Response by Registered Person detailing the actions taken:</b></p> <p>The Registered Person has discussed and ensured all policies and procedures continue to be in place alongside the new and updated policy form the matching skills and expertise of nurses to the requirements of placements. The absence of the registered manager has been and will continue to be addressed in our offices. The potential of any absence of the nurse manager would be addressed immediately by the registered person for the smooth continuation of the agency.</p>

*\*Please ensure this document is completed in full and returned via the Web Portal\**



The Regulation and  
Quality Improvement  
Authority

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