

# Inspection Report

**Name of Service: Clinical 24 Staffing Limited**

**Provider: Clinical 24 Staffing Limited**

**Date of Inspection: 16 October 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>                                                                                                                                                                                                                                                                                                                    | Clinical 24 Staffing Ltd |
| <b>Responsible Individual:</b>                                                                                                                                                                                                                                                                                                                              | Mr. Adrian Treacy        |
| <b>Registered Manager:</b>                                                                                                                                                                                                                                                                                                                                  | Mr. William King         |
| <b>Service Profile:</b><br><br>Clinical 24 Staffing Ltd is registered as a nursing agency. The agency currently provides registered nursing support to care homes.<br><br>Clinical 24 Staffing Ltd also acts as a Recruitment Agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate Recruitment Agencies. |                          |

## 2.0 Inspection summary

An announced inspection took place on 16 October 2025, between 09.00 a.m. and 1.00 p.m. A care inspector carried out the inspection.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The inspector also reviewed the reporting and recording of accidents and incidents, complaints, whistleblowing, Dysphagia management and the placement of registered nurses.

The inspector identified good practice in relation to recruitment, management of complaints, and training. There were good governance and management arrangements in place.

There were no Areas for Improvement identified during this 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 any previous areas for improvement issued, registration information, and any other written or verbal information received from relatives, staff or the commissioning trust.

Throughout the inspection, the inspector will seek the views of those working for and using the agency and review a sample of records to evidence how the agency is performing in relation to the regulations and standards.

The inspector provided information to nursing staff and other stakeholders on how they could provide feedback on the quality of services. This included an electronic survey.

#### 3.2 What people told us about the agency?

Throughout the inspection, the RQIA inspector spoke with service users and registered nurses, for their opinions on the quality of the care and support, as well as their experiences of using or working in the agency.

The inspector contacted nursing staff employed by the agency. One nurse reported that Clinical 24 Ltd is 'a practical and effective employment agency, and had no issues with the agency, which provides her with shifts, and payroll is always on time'.

The inspector had the opportunity to speak to a nursing home manager who used the agency, who reported no issues with staff supplied by the agency.

### 4.0 Inspection findings

#### 4.1 What are the systems in place for identifying and addressing risks?

The inspector reviewed the agency's provision for the welfare, care and protection of service users. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff in reporting concerns. There was an identified Adult Safeguarding Champion (ASC).

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns in the agency setting.

Staff were required to complete adult safeguarding training during induction and every two years thereafter.

The manager was aware that he must inform RQIA of any safeguarding incident concerning one of the agency's nurses, which had been reported to the Police Service of Northern Ireland (PSNI).

The agency provided staff with training appropriate to the requirements of their role.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training.

The inspector discussed the placement of nurses and the manager confirmed that nurses were placed according to their skills and experience based on a clinical discussion at interview.

The inspector viewed supervision and appraisal records held by the agency and found these to be up to date, in line with NMC guidance.

#### **4.2 What systems are in place for recruitment and are they robust?**

The inspector reviewed the agency's staff recruitment records and confirmed that all pre-employment checks, including criminal record checks (AccessNI) and appropriate professional references, were completed and verified before staff members commenced employment and had direct engagement with service users. The inspector confirmed that the agency made regular checks to ensure that staff held appropriate registration with the Nursing and Midwifery Council (NMC). There was a system in place for the manager to check NMC registrations on a monthly basis.

#### **4.3 What arrangements are in place for staff induction and training?**

There was evidence that newly appointed nurses had completed a structured orientation to the agency. Local clinical induction took place at clinical level.

The agency has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The inspector reviewed the training matrix maintained by the agency and found all training to be up to date. The agency uses a system which sends out reminders to individual nurses when training is about to expire. The system does not allow booking of nurses whose training has expired.

#### **4.4 What are the arrangements to ensure robust managerial oversight and guidance?**

There were monthly monitoring arrangements in place in compliance with regulations. A review of the reports of the agency's monthly quality monitoring established that there was engagement with service users and staff.

The reports included details of complaints accident/incidents, safeguarding matters; staff recruitment and training, and staffing arrangements.

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

The agency's registration certificate was up to date and displayed appropriately, along with the certificate of insurance, which demonstrated the required level of cover.

There was a system in place to ensure that the agency managed complaints in accordance with its policy and procedure of the agency. The agency continues to review the incidence of complaints as part of the monthly quality monitoring process.

The inspector reviewed records of regular staff supervision as well as annual appraisals. Examination of appraisal and supervision records indicated that the agency carried these out regularly as per the policies and procedures of the agency, as well as NMC guidance.

## **5.0 Quality Improvement Plan/Areas for Improvement**

The inspector found no areas for improvement during this inspection. The inspector discussed the findings of the inspection with Mr. William King (Registered Manager) and Mrs. Miriam Palk (Chief Nurse ICG Group) as part of the inspection process. These can be found in the main body of the report.



The Regulation and  
Quality Improvement  
Authority

## The Regulation and Quality Improvement Authority

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