

Inspection Report

Name of Service: Health One Group Limited

Provider: Health One Group Limited

Date of Inspection: 10 December 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:	Health One Group Ltd
Responsible Individual:	Mrs Jaya Shree Ajith
Registered Manager:	Mrs Jaya Shree Ajith
Service Profile – Health One Group Limited is a nursing agency that operates throughout Northern Ireland, providing nurses to health and social care providers who require nursing services. Health One Group Limited 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 10 December 2025, from 9.45 am to 1:30 pm. This was conducted by a care Inspector.

The inspection was undertaken to evidence how the agency was performing in relation to the regulations and standards, to assess progress with the area for improvement identified, by RQIA, during the last care inspection on 7 January 2025, and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

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 reporting and recording of accidents and incidents, complaints and whistleblowing was also reviewed.

As a result of this inspection the previous area for improvement was assessed as having been addressed by the provider. No areas for improvement were identified during this inspection.

For the purposes of the inspection report, the term 'service user' describes the locations 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 trust.

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

3.2 What people told us about the service and their quality of life

Through active listening, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Staff told us "the management and staff are wonderful and they are highly professional and they have a reliable service. They are also very approachable and attentive towards everything".

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.

Review of the agency's staff recruitment records confirmed that pre-employment criminal record checks (AccessNI) were completed and verified before staff members commenced employment and were supplied to the various healthcare settings.

There was evidence that full employment histories and reasons for leaving previous employments were consistently available. The agency retained completed induction and orientation documentation for their registered nurses.

The policy and system in place to ensure that the registered nurses were placed into settings where their skills closely matched the needs of patients was robust.

Nurses had completed training appropriate to the requirements of the settings in which they were placed.

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.

Procedures were in place for appraising staff performance and staff confirmed that appraisals had taken place. A system is in place to monitor supervisions and appraisals.

3.3.2 Quality of Management Systems

Mrs Jaya Shree Ajith has been the registered manager in this agency since 18 June 2024.

The agency was visited each month by a representative of the registered provider to complete a monthly monitoring review. The reports of these visits evidenced a robust system for reviewing the quality of the agency. Some advice was shared as to how these reports could be further enhanced. This will be reviewed at future inspections.

An Annual Quality Report for this agency was available and found to be satisfactory.

Complaints management was reviewed, a system is in place for the management of complaints. The manager reported that no complaints had been received.

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 safeguarding policy. A specific individual was identified as the agency's ASC. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

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 Mrs Jaya Shree Ajith, Manager / Responsible Individual, as part of the inspection process and can be found in the main body of the report.



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