

Inspection Report

Name of Service: Just Nurses

Provider: The Placement Group Holdings PLC

Date of Inspection: 20 October 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:	The Placement Group Holdings PLC
Responsible Person:	Mr Steve Porter
Registered Manager:	Mrs Caroline Malone
Service Profile – Just Nurses is a nursing agency, which supplies registered nurses to Health and Social Care Trusts (HSCT) in Northern Ireland. This agency also acts as a Recruitment Agency and supplies Health Care Assistants (HCAs). RQIA does not regulate Recruitment Agencies.	

2.0 Inspection summary

An announced inspection took place on 20 October 2025, from 9.10 a.m. to 4:00 p.m. 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 19 February 2024, 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.

The inspection established 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. Details and examples of the inspection findings can be found in the main body of the report.

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

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.

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.

Service users told us that the agency provide a good standard of nurses and any issues/incidents are responded to promptly.

Staff told us they had received pastoral care, which they believed, was a unique feature for this agency. Others remarked on the commitment of the agency to the holistic wellbeing of their Nurses.

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 all pre-employment checks including criminal record checks (AccessNI) were completed and verified before staff members were supplied.

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. Nurses had completed training

appropriate to the requirements of the settings in which they were placed. The training system and oversight of training compliance was found to be robust.

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.

3.3.2 Quality of Management Systems

There has been a change in the registered manager of the agency since the last inspection. Mrs Caroline Malone has been the registered manager in this agency since 20 May 2025.

Service users and staff commented positively about the agency.

The agency was visited each month by a representative of the registered provider to consult with service users and staff and to examine all areas of the running of the agency. The reports of these visits evidenced a robust system for reviewing the quality of the agency.

The annual quality report was reviewed and noted to include stakeholder feedback.

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. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

The annual safeguarding position report had been completed.

Complaints were managed appropriately with evidence viewed of shared learning.

There was evidence that the agency responded to any concerns, raised with them or by their processes, and took measures to improve practice and the quality of services provided by the agency.

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 Caroline Malone, as part of the inspection process and can be found in the main body of the report.



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