

Inspection Report

Name of Service:	Next Step Nursing Limited
Provider:	Next Step Nursing Limited
Date of Inspection:	12 February 2026

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation:	Next Step Nursing Limited
Responsible Individual/Responsible Person:	Mrs. Jocelyn Navarro
Registered Manager:	Mrs. Jocelyn Navarro
Service Profile Next Step Nursing Ltd holds a registration with RQIA as a Nursing Agency. The agency operates from an office located in Croydon. The agency is currently supplying one nurse. Next Step Nursing 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

A care Inspector carried out an announced inspection on 12 February 2026, between 9.00 am and 12.45 pm.

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 reviewed the agency's arrangements for the reporting and recording of accidents and incidents, complaints, quality monitoring and whistleblowing. The Inspector also reviewed the training records for the one nurse registered with the agency.

The Inspector did not identify any areas for improvement during this inspection.

The Inspector identified good practice in relation to recruitment, policies and procedures and staff training. There were good governance and management arrangements in place.

For the purposes of the inspection report, the term 'service user' describes the care locations to which the agency supplies nursing staff.

3.0 The inspection

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how Next Step Nursing Ltd was performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, the Inspector reviewed a range of information about the agency. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users.

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.

3.2 What people told us about the agency?

As part of the inspection process, the Inspector contacted a number of service users in whose clinical areas the nurse completed shifts.

The information provided indicated that there were no concerns in relation to the agency.

3.3 What has this agency done to meet any areas for improvement identified at or since the last inspection?

A care Inspector completed an announced inspection of this agency on 15 October 2024. The Inspector did not identify any Areas for Improvement.

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 agency'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 she was knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

The nurse had completed adult safeguarding and Mental Capacity Act (MCA) training as per the policies and procedures of the agency and the requirements of the Northern Ireland Framework for Agency Use.

The Inspector confirmed that the agency retained records in accordance with the Nursing Agencies Regulations.

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

The Inspector reviewed the agency's staff recruitment records and confirmed that pre-employment checks including criminal record checks (AccessNI) were completed and verified before the agency supplied the nurse to the clinical area.

The Inspector reviewed the agency's records and confirmed that the nurse held a current registration with the Nursing and Midwifery Council (NMC). The manager confirmed that she monitored information regarding registration details, renewal and revalidation dates on a monthly basis. The Inspector reviewed this system, which was confirmed to comply with regulations and standards. The manager was aware that she had to retain any records of referrals to the NMC.

It was good to note that the manager had completed supervision sessions and an appraisal with the nurse in accordance with NMC guidance and the policies and procedures of the agency.

There was a system in place to ensure that the agency place the nurse into settings where her skills closely matched the needs of patients.

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

The Inspector viewed evidence that the agency provided the nurse with an orientation and induction programme. The nurse receives local clinical induction in the individual clinical setting.

The agency has maintained a record for the nurse of all training, including induction and professional development activities undertaken.

The Inspector reviewed the training matrix maintained by the agency and confirmed that the nurse had completed all the training, which is required under the Northern Ireland Framework for Agency Use.

4.4 What are the arrangements to ensure robust managerial oversight and governance?

The Inspector reviewed the agency's quality monitoring arrangements and confirmed that they complied with Regulations and Standards. A review of the reports of the agency's monthly monitoring established that there was engagement with service users and staff. The Inspector noted that the reports routinely monitored any incidents as part of the monthly checks to identify any patterns or trends.

The agency had a system in place to monitor and manage complaints in accordance with the agency's policy and procedure. The Inspector confirmed that the agency had managed complaints appropriately. The Inspector also confirmed that the agency reviewed complaints as part of the agency's quality monitoring process.

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

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

5.0 Quality Improvement Plan/Areas for Improvement

The Inspector did not identify any Areas for Improvement during this inspection. The Inspector discussed the findings of the inspection with Mrs Jocelyn Navarro (Registered Manager) and Mr. Charles Safapour (Managing Director) as part of the inspection process. These can be found in the main body of the report.



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