

Inspection Report

Name of Service: Florence

Provider: Florence Staffing Ltd

Date of Inspection: 13 March 2026

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:	Florence
Responsible Individual/Responsible Person:	Mr Dan Blake
Registered Manager:	Ms Mayvelyn Talag
Service Profile: Florence is registered with RQIA as a Nursing Agency and currently supplies registered nurses to care home providers within Northern Ireland. The agency operates from an office located in Glasgow. Florence, Nursing Agency, uses a booking platform of the same name, Florence App, through which, they supply their nurses. The agency also acts as a Recruitment Agency and supplies Health Care Assistants (HCA) to various healthcare settings. RQIA does not regulate the Florence App or the HCA element of the nursing agency.	

2.0 Inspection summary

An announced inspection took place on 12 March 2026, between 9.30 am and 2 pm by a care Inspector.

The last care inspection of the agency was undertaken on 26 September 2024 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the agency is performing in relation to the regulations and standards; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection found 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.

Service users said that they were very satisfied with the quality of nurses supplied.

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, registration information, and any other written or verbal information received from service users or nurses.

Throughout the inspection process inspectors seek the views of the service users, who use the nurses supplied by the agency; and review/examine 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

Services users told us that the quality of the nurses provided by the agency was excellent. The nurses were described as being 'hard working', 'respectful' and 'responsive'. A number of service users told us that the Florence nurses 'always integrate well into the team' and that they 'consistently demonstrate a high standard of professionalism, clinical competence, and reliability'; and that they 'show a clear understanding of the standards expected within a nursing home environment'. A comment also included that the nurses 'are capable of carrying out their shifts effectively and demonstrate a good level of training and professionalism'.

Service users also commented in relation to the running of the agency. They said what when any concerns were raised, these were addressed promptly and handled in a very professional manner by the agency. The agency was described as being 'quick to respond' to any matters raised and that communication was 'satisfactory'.

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

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 nurses were supplied. The employment application form required to be further amended to ensure that applicants provided details of the duties carried out as part of their previous roles; and for them to record their grade/position within these organisations. The manager agreed to implement this change with immediate effect.

The nurses were interviewed prior to employment. Following which, they completed an Induction. It was good to note that the nurses could not take any shifts until the Induction process had been completed. The nurses' clinical experience and skills were ascertained as part of the recruitment process, to ensure that they are supplied into settings which matched their area of expertise. Advice was given in relation to adding a small number of additional areas to the skills set, relating to various types of Non-Invasive Ventilation (NIV) which the nurses may encounter.

The booking platform used, enabled the nurses to view the profile of the care home in advance; this allowed them to view any required or essential skills the home required the nurses to have. The system would not permit a nurse to book a shift if they did not have the appropriate essential skill.

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.

The nurses had completed training appropriate to the requirements of the settings in which they were placed. Advice was given in relation to the need for the nurses to complete training in relation to dementia, wound care, palliative care and falls prevention, given that these areas of training would be required in care home settings. The manager agreed to add these training elements to the agency's mandatory training requirements. It was good to note that the nurses completed a Nurse in Charge competency assessment; this is good practice, given that agency nurses may often be required to be in charge of a care home on night duty.

Compliance with mandatory training requirements was overseen by the manager. The electronic records management system ensured that nurses were not permitted to take shifts if any of their mandatory training courses had not been completed. This system similarly prevented the nurses from taking any shifts, if they were not compliant with the agency's policy on supervisions or appraisals. This is good practice.

Information provided to the service users on the nurses being supplied was available on the Florence App. When any training was updated, the dates of same were updated live to the App; this ensured that the care homes would always have the most up to date information on the nurses.

There was also a system in place to manage nurses who were registered with the agency but who had not actively worked for the agency. Advice was given in relation to making this system more robust by clarifying the parameters for deeming a nurse's status as being 'inactive'.

3.3.2 Quality of Management Systems

There has been no change in the management of the agency since the last inspection. Ms Mayvelyn Talag has been the manager in this agency since 28 October 2024. The manager also works as a nurse for the agency. Advice was given in relation to the governance arrangements for this, particularly when the manager oversees the incidents and complaints processes. Following the inspection, a policy and procedure in relation to this was submitted to RQIA.

As described in section 3.2, the feedback received from service users, indicated that the agency was very well led.

Review of a sample of records evidenced that a robust system for reviewing the quality of care and staff practices was in place; this included monthly quality monitoring reports and an annual quality review report.

The Information System used enabled live information to be linked into the monthly monitoring report; this meant the person completing the reports had access each month to the number of nurses supplied to each setting, all incidents and any complaints.

Complaints were managed appropriately and were reviewed on a regular basis.

It was good to note the manager liaised with the Nursing and Midwifery Council (NMC) in relation to any concerns arising around the nurses' practice.

The manager had access to all the shifts the nurses completed on a daily basis. Advice was given in relation to developing the system, to alert the management team should a nurse schedule themselves to work too many days in succession. The manager welcomed this advice and agreed to consider this going forward.

The system enabled the care homes to provide feedback on the quality of the nurses' work and their reliability; and similarly, the nurses were able to provide feedback on their experience working in the care home. Where any issues are raised, these are relayed immediately to the manager for review and action as appropriate.

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. The annual safeguarding position report had been completed.

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

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 Ms Mayvelyn Talag, Manager, as part of the inspection process and can be found in the main body of the report.



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