

# Care service inspection report

Full inspection

**ana recruitment**  
**Nurse Agency**

35 Albert Street  
Aberdeen



HAPPY TO TRANSLATE

Service provided by: UK Private Healthcare Limited trading as ana recruitment professionals

Service provider number: SP2003002340

Care service number: CS2003010413

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

### Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

[www.careinspectorate.com](http://www.careinspectorate.com)

 [@careinspect](https://twitter.com/careinspect)

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of information	5	Very Good
Quality of care and support	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership	5	Very Good

### What the service does well

People who access the service, and their employees, are kept informed about what it sets out to deliver.

People who use the service experienced a consistent service that was reliable and well run.

Feedback from clients and staff, who took part in the inspection activity, was very positive.

### What the service could do better

The recruitment process would be enhanced through further development of the interview process, in particular how prospective staff demonstrated their competency. Actions to achieve this had commenced between the inspection visits.

A review of the policies and procedures was recommended to ensure they clearly reflected guidance that was based on best practice. Completion of this would further inform staff practice.

### **What the service has done since the last inspection**

There had been a continued focus on identifying new and innovative ways of seeking feedback about people's experience of using the service.

### **Conclusion**

The service ethos is "to provide a first class service to our clients by providing proactive and positive staffing solutions to the healthcare sector."

The manager and office staff team were keen to fully engage with the inspection process. They demonstrated a commitment to ensuring the provision of a service that met their clients' needs.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com).

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of information - Grade 5 - Very Good**

**Quality of care and support - Grade 5 - Very Good**

**Quality of staffing - Grade 5 - Very Good**

**Quality of management and leadership - Grade 5 - Very Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

We undertook a first unannounced inspection visit between 9:00am and 2:30pm and then a second semi-announced visit between 9:00am and 12:00pm in May 2015. A further visit was undertaken on 12 May 2015 to give verbal feedback.

We took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

Care Standards Questionnaires (CSQs) were sent to 20 staff members of which four were returned.

During this inspection process we gathered evidence from various sources, including the following:

We spoke with:

- the manager
- office staff
- four registered nursing staff
- three clients.

We looked at:

- staff recruitment files
- staff training plan
- quality assurance records
- accident and incident records
- minutes of staff meetings

- electronic database
- Certificate of Registration.

### **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

### **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

### **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firescotland.gov.uk](http://www.firescotland.gov.uk)

## The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

## Taking the views of people using the care service into account

See section Quality Theme 0 - Statement 1 for comments.

## Taking carers' views into account

Not applicable to this service.

### 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

#### Quality Theme 0: Quality of Information

Grade awarded for this theme: 5 - Very Good

##### Statement 1

“We ensure that service users and carers participate in assessing and improving the quality of the information provided by the service.”

##### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be very good. We reached this conclusion after we viewed participation records and spoke with clients and staff.

Clients and staff were given opportunities to express their views about the service provided by the agency. This was demonstrated through a number of ways, for example:

- Periodically throughout the year questionnaires were sent to clients and staff. On return the feedback was collated and action points were identified in response to any issues that had been identified. This information was made available to people in order to ensure they were kept informed. Where response to questionnaires had been poor contact was made via telephone and/or e-mail to ascertain views.
- There were systems in place that allowed clients and staff to comment on whether the placement was still appropriate. These included review meetings at the services, staff feedback forms, e-mail and telephone feedback, and spot checks to observe practice.

- There continued to be an emphasis placed on developing innovative ways of engaging with clients and staff. Examples of these included attendance at fundraising events, support of clients' charity events, prize giving events where a prize would be given to those who attended, and giving feedback and a 24-hour management support helpline.

Feedback from clients spoken with included:

- "There is always good communication between the agency staff and us."
- "They are always quick to respond to requests for staff."
- "They try to provide the same staff where possible, this helps with continuity."
- "Staff are on time and wearing their identification badges."
- "If we have any concerns we only have to ring the office and they sort it out."
- "They are very reliable."
- "I have no concerns about the service they provide."
- "Any issues are sorted out quickly."
- "They are really, really good. Communication and on-call service are both excellent."
- "Staff are prompt, reliable. I am happy with the quality of staff provided."
- "I was provided with information before the service started."

Feedback from staff spoken with included:

- "I am able to contact the office staff at any time should I have any concerns."
- "I can ring the agency anytime if I have any concerns or need support."
- "I have worked with them for many years. They are a good agency."
- "I had an induction when I started."
- "They have a professional approach."
- "Office staff are always very reliable."
- "I can choose where I go to work."
- "They are always keen to get my feedback about the service."
- "I have flexibility in when and where I get to work."
- "I have received an appraisal, this was a helpful process."
- "I would know who to speak with if I had any concerns."
- "There are various ways to communicate with the agency. I get e-mail updates which include new procedures/practice issues."

- "I am provided with all relevant information about the service I am working in before I go."

### Areas for improvement

In order to demonstrate an ongoing process of service evaluation and development it is important to continue to explore new ways of seeking feedback.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 2

"We provide full information on the services offered to current and prospective service users. The information will help service users to decide whether our service can meet their individual needs."

### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be excellent. We reached this conclusion after we viewed the agency brochure, database system, and communication and participation records. We also took into account findings of Quality Theme 0 - Statement 1.

Clients were provided with information needed to make a decision about whether to use the service or not. This was demonstrated on review of the information pack that was given to prospective clients. We found this to be well presented in a language and format that was easy to understand. Information was seen to include the stated aims of the service inclusive of type of service provided, information on how the quality of the service was to be monitored, information about how to make complaints or express concerns, details of the charging/contractual arrangements, and contact names and details.

An assessment of the client's service and what they needed was undertaken prior to staff being provided. This was to ensure that staff could be made aware of people's care needs and the type of environment they would be working in. Staff spoken with and review of the electronic database demonstrated this in practice.

A number of methods were used to determine whether the service and placement of staff were still appropriate. Examples of these are referenced in Quality Theme 0 - Statement 1.

### Areas for improvement

The management team should continue to review and evaluate information provided to ensure that users are kept informed about what can be expected from the service.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

### Statement 1

“We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.”

#### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be very good. We reached this conclusion after we took into account findings in Quality Theme 0 - Statements 1 and 2.

The grade awarded for Quality Theme 0 - Statement 1 has also been applied to this Quality Statement.

#### Areas for improvement

See Quality Theme 0 - Statement 1 for more information.

#### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“We ensure our service provides care staff who are most suitable to meet individual service user needs. The care and treatment received by the individual service user, is supported by evidence based practice and up to date policies and

procedures. These reflect current legislation (where appropriate Scottish legislation).”

### **Service Strengths**

At this inspection we found the performance of the service for this Quality Statement to be very good. We reached this conclusion after we viewed documentation and spoke with clients and staff. We also took into account findings of Quality Theme 0 - Statements 1 and 2.

Effective communication systems were in place to ensure that details of what the client required was recorded. On viewing the electronic database we were able to see that these records included the name of service, type of service, when staff were required, and what type of nurse was required, for example qualifications, skills and experience.

Where possible the agency endeavoured to supply the same nurse, or nurses, so that continuity in practice could be achieved. This practice was confirmed in feedback provided by clients who were spoken with.

Review of the electronic database showed that a record was maintained of staff skills, knowledge and experience. Information was seen to contain specific details about the types of services staff preferred to work in. This information was used to ensure appropriate placement of staff when requests were received.

### **Areas for improvement**

We viewed a number of policies and procedures. These included Adult Support and Protection (ASP) and infection control. In doing so, we saw that there were areas of development needed to ensure they gave detailed direction to staff that reflected best practice guidance. It was agreed with the manager that a review would be undertaken of all policies and procedures and appropriate amendments would be made. On completion new guidance would be shared with staff. This process will be reviewed at the time of the next inspection.

**Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

### Statement 2

“We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.”

### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be very good. We reached this conclusion after we viewed a number of staff personnel files and observed one person's interview being conducted.

Staff were appropriately recruited. This was demonstrated when we viewed four staff personnel files. We saw the completion of application forms, taking up of two written references, one being from the current or last employer, police record checks, and registration with a regulatory body.

An induction programme was followed to ensure staff had appropriate support when commencing employment. This took the form of formal classroom based learning and sharing of information needed to ensure best practice guidance was followed in key areas. Examples of this were health and safety, ASP, infection control, and moving and handling.

### Areas for improvement

We had the opportunity to sit in and observe the interview process in practice. What was evident in this instance was that there was little attempt to test the

competency of the person in relation to practical experience. This is important to show the discussions at interview and demonstrate the decision-making process.

When we viewed staff files we saw that there was not a formal process of verification of references in place. This would be important to ensure that the accuracy of information received to support a person's application had been tested.

In response to the above, the manager was able to show how the recruitment process had been reviewed and strengthened. It had also been identified that staff training had been planned to ensure consistency in how the new policy/procedure was implemented. The revised practice would form the focus of future inspection activity.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

"We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice."

### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be excellent. We reached this conclusion after we spoke with some staff and looked at training records.

We were aware that all staff were required to demonstrate six months experience prior to applying to register with the agency. This, along with a record of skills, type of experience and registration with an appropriate regulatory body (the Nursing and Midwifery Council (NMC)), was used to ensure staff had the necessary skills and knowledge needed.

We were able to see that there was a focus on training. This was demonstrated by an ongoing process which ensured that refresher training was planned and undertaken in a timely manner. An accurate record was maintained of nurse Continuing Professional Development (CPD) required by the NMC. It was made clear that should staff not attend planned training they were stopped from working until it had been completed.

The staff handbook viewed demonstrated the provision of important information, for example proper record keeping including the reporting of accidents/incidents and complaints.

Staff spoken with confirmed:

- "I applied to work with the agency because of their good reputation."
- "It is a good agency to work for. There is a focus on training and I am always getting reminders about updates in plenty of time."

The implementation of 'spot checks' as a means of observing staff in practice had been highlighted as a way of developing the way staff were being supported and their practice monitored. This process had commenced and its ongoing implementation would enhance existing systems in place to ensure staff maintained their professionalism at all times.

### Areas for improvement

An annual appraisal process had been developed but had not been fully implemented. The manager confirmed that it was expected that this process would be rolled out to all staff on a phased approach to ensure that all staff would have undergone an appraisal by the end of the year. The completion of this process will be a focus of future inspection activity.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 1

“We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.”

#### Service Strengths

The grade awarded for Quality Theme 0 - Statement 1 has also been applied to this Quality Statement.

#### Areas for improvement

See Quality Theme 0 - Statement 1 for more information.

#### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 4

“We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide”

#### Service Strengths

At this inspection we found the performance of the service for this Quality Statement to be very good. We reached this conclusion after we spoke with clients and staff and looked at quality assurance records.

People were informed about what the service set out to provide. This was achieved by the accessibility of the Certificate of Registration and the detailed information pack provided prior to the service being accessed.

Clients and staff were actively encouraged to be involved in measuring the quality of the service they received. For more information see Quality Theme 0 - Statement 1.

There was a management team in place. It was evident that each staff member had clearly defined roles and responsibilities. We saw that information about the complaints procedure was readily accessible. We felt confident that there would be a prompt response to any queries or concerns people may have. This was confirmed through discussions with clients spoken with confirming that they were aware of how to raise concerns should they have any. Those staff spoken with said that they felt well supported and that they were able to express any concerns, should they have any.

We were able to see how incidents and events were investigated with remedial actions identified and achieved. This minimised the risk of potential reoccurrence.

We saw a number of quality assurance processes being used to determine how the service was performing. This included weekly management staff meetings, visits to clients, use of questionnaires and feedback forms, and regular telephone contact with staff and clients.

### **Areas for improvement**

There were some inconsistencies in how outcomes/actions, identified as part of the quality assurance systems, were demonstrated as being achieved. This was because of a lack of clear documentation to capture how solutions and preventative measures had been implemented. It was agreed that a more consistent approach would be taken to ensure that a process of ongoing review, development and improvement could be demonstrated.

We discussed how the development of an annual plan would assist in a more structured and proactive approach being taken to the development of the

service. The inclusion of timescales attached to actions would ensure the achievement of more measurable outcomes.

**Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## **5 What the service has done to meet any requirements we made at our last inspection**

**Previous requirements**

There are no outstanding requirements.

## **6 What the service has done to meet any recommendations we made at our last inspection**

**Previous recommendations**

There are no outstanding recommendations.

## **7 Complaints**

No complaints have been upheld, or partially upheld, since the last inspection.

## 8 Enforcements

We have taken no enforcement action against this care service since the last inspection.

## 9 Additional Information

## 10 Inspection and grading history

Date	Type	Gradings	
23 Jul 2012	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
10 Nov 2010	Announced	Care and support	Not Assessed
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
22 Aug 2008	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good

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### Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

[www.careinspectorate.com](http://www.careinspectorate.com)

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