



**Making Social Care
Better for People**

inspection report

NURSES AGENCY

A1 Medical & General Ltd

**Lansdowne House
63 Balby Road
Balby
Doncaster
DN4 0RE**

Lead Inspector
Janet McBride

Key Announced Inspection
12th June 10:45

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this agency are those for *Nurses Agencies*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	A1 Medical & General Ltd
Address	Lansdowne House 63 Balby Road Balby Doncaster DN4 0RE
Telephone number	01302 323957
Fax number	01302 327007
Email address	a1medicalgeneral@btconnect.com
Provider Web address	a1medicalgeneral.com
Name of registered provider(s)/company (if applicable)	Mrs Linda Patricia Bedford
Name of registered manager (if applicable)	Mrs Linda Patricia Bedford
Type of registration	Nurses Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 12th December 2005

Brief Description of the Service:

A1 Medical and General Limited is a Nurses agency situated in Doncaster, they supply both nurses and care staff to Hospitals, Care homes, Prison and Industry. The agency does offer nursing care to individuals in their own homes if required, over a 24-hour period.

It is owned and managed by Linda Bedford who has several years of relevant experience in the business.

Information about the service is available to organisations and individuals and their families via the home's Statement of Purpose and the Service User Guide. The service had a range of fees dependent on the care provided and staff provided e.g. carer or nurse. Fees range from £12:21 to £28:40 per hour, as of June 2007. Additional charges are made for bank holidays and mileage for further information contact the agency.

SUMMARY

This is an overview of what the inspector found during the inspection.

One inspector carried out this Key Announced Inspection at the office of A1 Medical and General Nurse Agency. This took place on the 12th June 2007 for 5:45 hours.

Prior to the inspection the manager submitted a pre-inspection questionnaire giving information regarding the agency and services provided.

Analysis of this information and other relevant documentation for example, notifications and complaints were carried out before the inspection.

Prior the inspection comment cards were sent out to the agency for them to distribute. Five were sent to organisations that use the service, four were received back. Five were sent to staff members three were received back, and one was sent a person receiving care in their own home from the agency, this was received back. They were asked to comment on the standard of care, staff skills, attitude, and how the needs of people using the service were met.

All the comments made on the surveys are included in this report.

During the inspection documentation and records were examined for example, recruitment, staff training files, staff rotas, complaint records and discussion with the manager and management team.

The inspector would like to thank all the staff at the agency and the organisations receiving services for their co-operation in the inspection process.

No issues or concerns were raised at this inspection.

What the service does well:

The registered manager and the managerial team had the knowledge, experience and expertise between them to ensure the effective and efficient running of the agency. Staff working at the agency understood the importance of offering sufficient information to organisations and individuals who may want to use the services of the agency. Comprehensive and up to date information about the agency and the services they provided was available for prospective people who wanted to use the agency. The certificate of registration was prominently displayed at the office so that the people visiting the office were able to check the registration status.

Good recruitment practices and selection of nurses met the legislative requirements and complied with the employment law, including identification and qualifications.

All staff supplied by the agency know the standard of conduct expected of them, and are aware of the agencies policies and procedures.

Surveys received back confirmed that all staff were happy working at the agency, stating they were well supported and offered training.

Organisations that use the agency gave very positive and complimentary about the agency they were confident in the abilities of the agency and staff they provided. Overall there was a high degree of satisfaction expressed.

The agency monitors the quality of placements for both people who use the service and staff, they were able to evidence that the agency consult, measure and review various issues. Complaints, allegations and incidents were taken seriously and followed up promptly.

What has improved since the last inspection?

The agency provided documentary evidence that they acted upon the good practice recommendation made on the last inspection report.

What they could do better:

No issues or concerns were raised at this Inspection.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Information (Standard 1)

Registered Persons (Standard 2)

Recruitment and Supply of Nurses (Standards 3-6)

Complaints and Protection (Standards 7-11)

Management and Administration (Standards 12-18)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Information

The intended outcome for Standard 1 is:

1. Prospective service users have the information they need about the agency in order to make an informed decision on whether to engage its services.

JUDGEMENT – we looked at the outcome for standard:

1

People who use the service experience Good Quality outcomes in this area.

This judgement has been made from evidence gathered during the inspection. This included a visit to this service and seeking the views and experiences of organisations and people who use the service. Prospective organisations and individual people who use the agency had comprehensive up to date information about the agency and the services they provided.

EVIDENCE:

The certificate of registration was prominently on display in the main office, along with the agency's relevant insurance certificate. The nurse agency supplies nurses and care staff to nursing homes, hospitals, prisons and nurses to individual's own homes if required.

Discussions took place with the responsible individual and staff, which confirmed they had a good understanding of the importance of providing good information to people who may use the service.

An information pack was given to organisations and individual people who use the agency. This contained an introduction to the agency, mission statement, statement of purpose, what services they could offer, a contract for services with terms and conditions, complaints policy, quality assurance information and testimonials from other people who had used the agency, All of this information was clear and well presented.

Key information such as, how to contact the agency at any time including out of office hours and who was the point of contact in an emergency was available.

Registered Persons

The intended outcome for Standard 2 is:

2. Service users are assured of the integrity of the agency and have confidence that it is run by a fit person or organisation.

JUDGEMENT – we looked at the outcome for standard:

2.

People who use the service experience Good Quality outcomes in this area.

This judgement has been made from evidence gathered during the inspection. This included a visit to this service and seeking the views and experiences of organisations and people who use the service. The registered person and the managerial team had the knowledge, experience and expertise between them for the effective and efficient running of the agency.

EVIDENCE:

The agency had a management structure in place, each with delegated areas of responsibility and accountability.

The registered manager had a number of years experience of running an agency. Since the last inspection she had completed NVQ level 7 and diploma in management. One other person within the management team is also on NVQ 4 management course.

Recruitment and Supply of Nurses

The intended outcomes for Standards 3 - 6 are:

- 3.** The process for recruitment and selection of nurses meets all the requirements of legislation and employment law including that related to equal opportunities and anti-discriminatory practice.
- 4.** Service users are confident that nurses supplied by the agency will provide good quality care and will not jeopardise the safety of patients.
- 5.** The agency has documentary evidence demonstrating the personal identification, registration, ongoing eligibility to be employed as a nurse, and relevant qualifications of each nurse to be supplied.
- 6.** Nurses supplied by the agency are competent and trained to undertake the activities for which they are employed and responsible.

The Commission considers Standards 3, 4 and 6 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

3, 4, 5 and 6.

People who use the service experience Excellent Quality outcomes in this area.

This judgement has been made from evidence gathered during the inspection. This included a visit to this service and seeking the views and experiences of organisations and people who use the service. Good recruitment practices that ensured staff had the ability, skills and experience to carry out their role. The agency matched staff carefully to each organisation, this promoted good standards of care. Staff had been trained to ensure they worked in a safe manner.

EVIDENCE:

Three nurses' recruitment files were checked. This established that the agency's process for recruitment meets all the requirements of legislation and employment law. References enhanced criminal record bureau, protection of vulnerable adults and protection of children's act checks are made prior to appointment, and are renewed every year for nurses. Records showed documentary evidence of personal identification, registration and qualification of each staff member, certificates relating to qualifications were seen in staff files.

Identification badges are issued to each member of staff that had details of qualifications and the PIN number.

Records are kept for all nurses supplied including Nursing and Midwifery Council (NMC) confirmation of registrations are checked on periodically, the agency can also access information on line for nurses removed or suspended from the register.

Systems were in place to ensure appropriate checks were carried out on staff health and suitability. All three staff files had records stating that their immunisation had been checked and that the current status was satisfactory.

The staff handbook contained a lot of information e.g. health and safety, complaints and medication policies. This was a comprehensive and well presented document. Comments on surveys indicated that all staff were aware of policies and procedures, roles and responsibilities and training and development.

Nurses commented on the organisation they worked for and all comments were very positive these are just a few "very supportive and understanding in all aspects of working with the agency" "manager supports us 100%" and "we can contact the manager if we have any concerns or worries".

Surveys completed by organisations that use staff from the agency were equally as positive e.g. "the agency ensures that staff they supply are appropriately skilled to meet our needs" "staff are professional and knowledgeable".

Complaints and Protection

The intended outcomes for Standards 7 - 11 are:

- 7.** Service users are confident that their complaints will be listened to, taken seriously and acted upon.
- 8.** Service users who are also patients are protected from abuse, where the agency is an employment business.
- 9.** Service users who are patients are protected by the agency's procedures for assistance with medication, where the agency is an employment business.
- 10.** Action is taken to protect confidentiality of information relating to service users who are also patients, their carers and advocates.
- 11.** The health, safety and welfare of service users who are also patients, and of nurses, are promoted and protected, where the agency is an employment business.

The Commission considers Standards 7, 8, 9 and 11 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

7, 8, 9, 10 and 11.

People who use the service experience Excellent Quality outcomes in this area.

This judgement has been made from evidence gathered during the inspection. This included a visit to this service and seeking the views and experiences of organisations and people who use the service. The agency showed in all aspects of its working practice that the safeguarding of people who use services was paramount. Complaints, allegations and incidents were taken seriously and followed up promptly.

EVIDENCE:

There was a clear complaints procedure, this was clearly written and easy to understand it is separated into different headings, and contact details of the Commission for Social Care Inspection was documented. Wherever possible the managing director will visit the complainant within 24 hours to take a full record of the complaint.

The pre inspection questionnaire stated they had received five complaints since the last inspection. Records showed these complaints had been dealt with promptly and fully investigated with any follow up action being recorded. Comments on surveys from organisations that use the agency knew how to make a complaint and one said, "all concerns are discussed and outcomes relayed back to them".

Policy and procedures were in place for the protection of people from abuse, staff members were given information regarding these policies and procedures within the staff handbook. The registered person said allegations and incidents will be taken seriously and followed up promptly, including where nurses are involved. There is a clear procedure for reporting nurses to the Nursing and Midwifery Council (NMC) where there is evidence of misconduct.

There is a drug administration policy that is issued to Registered Nurses who have to sign to evidence their acceptance of the information; if at any time care staff administer medication they had completed an accredited medicines training course.

Nurses said that they followed the NMC standards for the administration of medication and complied with the Department of Health guidance. This ensured they had the skills and knowledge to administer medication safely.

The staff handbook contained health and safety policy that identified the responsibilities of the agency, for people using the service and the staff. The annual training schedule had sessions such as resuscitation, manual handling, health and safety, safe food handling, fire awareness and abuse.

Staff surveys confirmed that the nurses followed their NMC code of conduct and thereby maintained the correct procedures for safe working practices, confidentiality and data protection.

Management and Administration

The intended outcomes for Standards 12 – 18 are:

- 12.** Approved accounting and financial procedures are adopted to ensure the effective and efficient running of the business and its continued financial viability.
- 13.** There are designated premises suitably equipped for the purpose of the day to day operation and management of the service.
- 14.** An appropriate management structure and clear lines of accountability are in place.
- 15.** Nurses supplied by the agency know the standards of conduct expected of them and are aware of the agency's organisational policies, where the agency is an employment business.
- 16.** There is a written agreement between the Agency and nurses.
- 17.** Service users' and nurses' interests are safeguarded by the agency's record keeping policies and procedures.
- 18.** The agency operates in the best interests of service users and of nurses supplied by it.

The Commission considers Standards 15 and 18 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

14, 15 and 18.

People who use the service experience Excellent Quality outcomes in this area.

This judgement has been made from evidence gathered during the inspection. This included a visit to this service and seeking the views and experiences of organisations and people who use the service. An excellent management structure, which ensured that the agency delivered a well, organised consistent, reliable service.

EVIDENCE:

A copy of the agencies management structure was sent to the CSCI prior to the inspection. During the visit it was evident that the management structure was stable, comprised of experienced staff and well supported by the company. Each staff member had delegated areas of responsibility and accountability.

There was a comprehensive range of clear, accurate and accessible policies and procedures, in the staff handbook. The registered person said they were consistently up dated. A range of policies seen were well maintained, and showed evidence of being reviewed.

The staff handbook also contained general information about how the company worked, for example, cancellation of duties, office hours and travelling expenses. Additional information outlined the standards of conduct, induction record and the terms and conditions for the nurses employed.

The agency was aware of the need to keep records secure and the requirements of the Data Protection Act.

There were a number of ways in which quality was measured with evidence from a variety of sources, for example, sampling surveys, feedback from people who use services, and external validation.

The agency had the investors in people award.

The agency monitors the quality of placements for both people who use the service and staff for example, an internal audit by the agency is completed on a regular basis. Questionnaires are sent out to staff members and establishments to ask for feedback on the service. These are analysed and verbal feedback given to staff. Testimonials and letters from satisfied people who had used the service were held on file.

Feedback from the surveys sent out prior to the inspection were very positive and complimentary about the agency.

Example of comments received, "Used a variety of agencies over the past years and have no hesitation in promoting this agency as a thoroughly professional outfit". "It is a pleasure to be working with such a well run and professional company". "Feel very confident in the quality of service provided by the agency".

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Nurses Agencies have been met and uses the following scale.

4 Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

INFORMATION	
<i>Standard No</i>	<i>Score</i>
1	3

REGISTERED PERSON	
<i>Standard No</i>	<i>Score</i>
2	3

RECRUITMENT AND SUPPLY OF NURSES	
<i>Standard No</i>	<i>Score</i>
3	4
4	4
5	3
6	3

COMPLAINTS AND PROTECTION	
<i>Standard No</i>	<i>Score</i>
7	4
8	3
9	3
10	3
11	3

MANAGEMENT AND ADMINISTRATION	
12	X
13	X
14	4
15	4
16	X
17	X
18	4

Are there any outstanding requirements from the last inspection? No

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations

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