



*Making Social Care
Better for People*

inspection report

NURSES AGENCY

Platinum Plus Healthcare Ltd

**Torbay Innovations Centre
South Devon College
Vantage Point, Long Road
Paignton
Devon
TQ4 7EJ**

Lead Inspector
Clare Medlock

Unannounced Inspection
4th March 2009 10:00a

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

Reader Information	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
Further copies from	0870 240 7535 (telephone order line)
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI
Internet address	www.csci.org.uk

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

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

SERVICE INFORMATION

Name of service	Platinum Plus Healthcare Ltd
Address	Torbay Innovations Centre South Devon College Vantage Point, Long Road Paignton Devon TQ4 7EJ
Telephone number	01803 540687
Fax number	01803 540687
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Platinum Plus Healthcare Ltd
Name of registered manager (if applicable)	Mr Michael Ellis
Type of registration	Nurses Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection N/A

Brief Description of the Service:

Platinum Plus Healthcare Ltd is a small newly registered nurses agency offering nursing services to people in their own homes and within community hospital settings in Devon.

This nurses agency operates from a business centre within South Devon College in the seaside town of Paignton. The office is a secure fully accessible premises. There is some disabled parking directly outside the office, and other spaces but these need to be booked via the agency in advance. There are other parking facilities within walking distance. The agency operates from a small office but has access to training and meeting rooms within the self-contained business centre.

The manager and responsible individual are members of the management team. Together they are responsible for the day to day running of the office, recruitment of staff, assessing new clients and performing reviews for people receiving care at their own homes.

The registered manager is a first level registered nurse and the co director of the business.

Fees for this agency vary and depend upon the length of shift and qualifications of the staff that are provided. A detailed quote regarding fees can be obtained from the manager of this agency. Copies of the statement of purpose and service user guide are provided to all new clients and can be requested from agency staff.

SUMMARY

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

The quality rating for this service is **2 star**. This means the people who use this service experience good quality outcomes.

This first inspection was announced a short time before the site visit to ensure the manager would be present for this first inspection. The site visit took place on Wednesday 4th March 2009.

Prior to this inspection we requested an Annual Quality Assurance Assessment from the agency. The AQAA is a self-assessment record that focuses on how well outcomes are being met for people using the service. It also gave us some numerical information about the service. The document contained sufficient information and was provided at this inspection ahead of the submission date.

During our visit we spoke to the manager, looked at staff recruitment records, training records, policies and procedures and computer systems. We did this because we wanted to understand how well the systems work and how people are protected by these systems.

All this information helps us to develop a picture of how the agency is managed and what it is like to receive a service from Platinum plus nurses agency.

What the service does well:

Platinum Plus healthcare nurses agency provides a very small family run service. The agency supplies registered nurses to people's own homes and local community hospital settings.

When nursing services are offered, the service is tailor made for each client. Information provided to clients and people who use the service is good. This enables people to decide whether the agency can meet their needs.

There are thorough recruitment checks to ensure staff are suitable to work with vulnerable adults. Staff are checked against the criminal records bureau police register and the protection of vulnerable adults and child registers to show they are suitable to work with vulnerable people.

Staff have access to comprehensive induction and other training programmes.

Records kept by the agency are done to a high standard. Information given to staff is extensive to ensure they have enough information and guidance to work in a safe way.

Communication between staff, clients and the office staff is good.

Confidential information is handled appropriately at the branch and the office is suitable for the business. People are protected by staff checks, training and induction. The safety of people is considered a priority by the agency and systems are in place to ensure both people and staff are safe when care is provided.

The manager and responsible individual have the skills and experience to run the agency in an effective way. Complaints are effectively managed.

The manager has a clear understanding of the nature of the service they provide and identify short term and long term plans to improve and develop the service.

What has improved since the last inspection?

This is the first inspection performed on this nurses agency

What they could do better:

Minor changes to some documents are needed to provide clearer information for people who use the service. The statement of purpose, service user guide and complaints register should be separated for each of the domiciliary care agency and nurses agency. This will mean that people who are considering using the service are aware of what each agency can provide. Separating the complaints registers will also make it easier for the manager to monitor trends in concerns and where they come from.

The agency also need to improve the policies and record keeping on what they do if a member of staff applies for a job with a conviction on their CRB (criminal records bureau). This will show that the agency have taken satisfactory steps to protect vulnerable people.

Improvements to the recruitment process record keeping are also recommended to show that recruitment procedures are more robust. The application form should be amended to include details of the next of kin. More information as to the physical and mental well being of the member of staff should be also be obtained.

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

CONTENTS

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:

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

Sufficient information is available for new clients to decide whether the agency can meet their needs.

Minor changes to the way information is provided would clarify exactly what services the agency provide.

EVIDENCE:

Certificates to show this nurses agency are registered with the Commission for Social Care Inspection (CSCI) are displayed on the office wall along with valid insurance certificates.

The statement of purpose and service user guide are documents used to inform managers, health care professionals, people and their families about the service Platinum nurses agency provides. Both documents were detailed and reflected the service that is provided over both agencies. Minor changes were recommended to separate the information provided for people receiving care from the domiciliary care side of the agency from the nurses part of the agency.

Currently the agency part of the business is small. One registered nurse is employed who works in peoples own homes and occasionally in a local community hospital.

After the initial enquiry the agency provide clients and managers with a letter of introduction, an abridged service user guide and information on the CSCI. The information to be provided will contain information on how to complain and details of rates.

All surveys and all people we spoke with were extremely positive about the services provided by the registered nurse. One person said 'they were very, very good. I can't speak highly enough'. Another described staff as 'professional' and 'faultless'

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:

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

The manager and responsible individuals have the knowledge and experience to efficiently run the agency.

EVIDENCE:

The manager is a qualified level 1 nurse who spent several years working with the Royal Navy as a trauma nurse and also had experience of community and primary care nursing. He is an NVQ assessor and teaches at the South Devon College on the Health and Social Care Course. He has attended several management courses whilst in the navy but is currently doing a formal nationally recognised management course.

The manager was able to provide evidence of how he keeps up to date with the post registration education and practice requirements needed for nurses on the professional register.

The responsible individual has previously worked as a domiciliary care co-ordinator for another provider for several years. She has NVQ level 3 in care, NVQ assessors award and Registered Manager's award.

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):

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

People who use the service can be confident that the staff that care for them have a good standard of pre employment checks and induction.

Minor improvements would show the recruitment process is more robust.

EVIDENCE:

There is only one registered nurse working at the agency and this is the manager. He has passed the 'fit person process' required by CSCI to become the registered manager for this agency. The manager was keen to show staff files of the domiciliary care agency to show the standard process followed when recruiting new staff.

Staff provide a completed application form, details of employment history, names of references and declarations regarding criminal history. Minor omissions were noted on the application form including detailed statement of

physical and mental health of the applicant and details of the applicants next of kin. The manager gave assurances that these would be included.

All staff have an interview where different scenario questions are given and responses recorded. All interviews are face to face and performed at present by the manager who is a registered nurse. The agency continue to look at ways to improve the service. The AQAA stated that 'the interview procedures could follow a more standardised format to ensure equality is further maintained' and that they 'could have set questions which all applicants are required to answer as well as some questions which may be particularly relevant to the level of post being applied for'.

The manager then checks references, identity, driving licence and car insurance. The manager explained that at this point checks would be made to ensure the nurse is actively registered with the Nursing and midwifery council (NMC). The manager was able to show how this will be recorded for staff.

A CRB (Criminal Records bureau-police check) and POVA (Protection of vulnerable adults register) check is performed at the branch. A decision whether to clear a positive CRB is done by the manager and responsible individual. Discussions confirmed that this process is informal and that there are no records or policies in place to follow, should this be the case. A discussion was held about satisfying the CSCI regulations by keeping proof of identity following the criminal records bureau check. This is reported on later in this report.

Staff will have a formal induction, which covers infection control, fire safety, food hygiene, COSHH(Control of substances hazardous to health), Riddor (accident reporting) and health and safety. Staff will also be told about the protection of vulnerable adults, moving and handling and information about the agency's issues such as uniform, contract, timesheets and the on site library where staff can look at medical and nursing reference books. We saw evidence of this process within domiciliary care files.

The manager told us all staff would be provided with the General social care council code of practice, nursing and midwifery codes of practice and handbook.

Each member of staff has a file where recruitment records, supervision records, contract of employment, car insurance, NMC PIN number and evidence of union membership is stored. Disciplinary records will also be stored in these staff file.

The manager said the recruitment records are easy to maintain at present because the agency only employ three staff. However, an audit document was provided which shows how staff files will be checked on a monthly basis.

The manager explained that he is able to receive clinical supervision from a colleague within the college and said that all registered nurses would receive regular supervision.

There are opportunities for staff to access further training. The manager, who teaches and assesses at South Devon College on the Health and Social Care Course, provides the majority of mandatory training within the agency. However external training partners are also used.

The manager explained that matching staff to people was easy at present because the agency only provide one registered nurse at present but gave assurances that skill mixes and qualifications and experience were considered when placements were arranged.

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):

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

People can be reassured that the systems and staff knowledge will protect people from abuse.

EVIDENCE:

People who used the service told us they knew who to complain to, although none of the respondents had made any complaints. All feedback about the agency was very positive.

The Commission for Social Care Inspection have not received any complaints regarding the agency since it has been registered. The agency have a clear complaints procedure, which is within the statement of purpose and service user guide. The complaints register was inspected and showed that one minor issue had been received about the ansaphone message being too quick.

Observation showed that this has been dealt with appropriate and in accordance with the agencies policy.

Staff are issued with a handbook which contains detailed information on safe working practices, lone working, financial protection, safeguarding adults, record keeping and maintaining the security of a persons home. This information is also covered in the induction period. Training in safeguarding adults and the prevention of abuse is also covered at induction. The manager was aware of what to do if an allegation of abuse was reported to him. Flow charts with locally agreed multidisciplinary procedures were on display within the office.

A CRB (Criminal Records bureau-police check) and POVA (Protection of vulnerable adults register) check is performed at the branch. A decision whether to clear a positive CRB is done by the manager and responsible individual. Discussions confirmed that this process is informal and that there are no records or policies in place to follow, should this be the case.

The staff handbook also contains details about Confidentiality, record keeping, and data protection. The handbook also contains information on the codes of conduct, which include privacy and dignity. People told us their relative was 'treated with the utmost respect' by the nurses supplied by this agency.

The agency have a policy for the administration of medicines for care workers. This policy is within the staff handbook and explains the responsibilities of staff. All staff are expected to adhere to the Nursing and midwifery codes of practice with regards to handling medicines. The policy is very clear and includes information regarding prescriptions and what to do if an error is made.

Systems are in place to protect both people who use the service and staff when the service is being provided. Where care at home is provided by registered nurses, care Plans and initial assessments contain detailed risk assessments which cover looking for risks within the environment where staff work, risks of using equipment within the home, moving and handling risks, and risks when performing personal care and any tasks for the person.

Information is provided for staff in the handbook about entry to a person's home. Each person has a different method of entry and staff are provided with the information when providing care. Staff are issued with ID badges, which they show to people who use the service on arrival to the home. One person said 'they were always very professional in their uniform and always wore their badges'.

Staff are provided with a 'box of tricks', which contains equipment such as torch, panic alarm, personal protective equipment, first aid kit, resuscitation mask and incident forms. Staff are also issued with an identification badge with relevant information.

Staff all receive moving and handling, health and safety, first aid and medicine training before they are able to work. There is a manager on call during operational hours who is available for advice.

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):

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

The agency is well run and managed well.

EVIDENCE:

This nurses agency operates from a business centre within South Devon College in the seaside town of Paignton. The office is a secure fully accessible premises. There is some disabled parking directly outside the office and other parking facilities within walking distance. The agency operates from a small office but has access to training and meeting rooms within the self-contained business centre.

The office is well equipped. There are computer systems, telephones, fax machines and storage space available for use. First aid boxes and accident books are available for office staff to use.

Records and documents are well managed at the agency with appropriate secure storage and disposal of confidential documents. Policies and procedures are provided by the agency. The handbook provided to staff also contains information relating to some of the more important policies.

Each person receiving care at home from the registered nurse has a detailed assessment performed before the care package starts. The assessment includes detailed information regarding general health, home environment, medical history and medication. Other information about religion, race and family involvement is also listed.

Each person has a care plan, which clearly shows what care the person needs and requests. Each plan is written reflecting what the individual person needs support with. The care plans were well written and detailed. One relative who has extensive nursing experience said 'note taking was exceptional'.

Insurance certificates are displayed and are valid for no less than 5 million pounds. Financial viability was not inspected during this visit as this was performed as part of CSCI registration process. The agency have additional insurance for supply of registered nurses. In addition registered nurses are expected to provide evidence of indemnity insurance through union membership.

Quality assurance is to be performed in a variety of ways at the agency. Platinum provide people with a feedback form in their care plan. The AQAA also told us that the agency would seek the views of the people they provide a service to. This would be done by issuing all clients and their representative with a satisfaction survey every 6 months as part of the service review assessment. The AQAA also told us of future plans of how feedback will be obtained as the service grows.

Staff supervision is also a time where staff are able to reflect on incidents to see whether change in practices could improve the quality of care. This is seen as good practice.

The AQAA also told us that the agency are involved in local palliative care education groups which is helping the agency to adapt their ways of working and support cross organisational changes in palliative care practice.

The AQAA showed what barriers to improvement were present and what changes were needed in the future as the business grows.

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	2

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

RECRUITMENT AND SUPPLY OF NURSES	
<i>Standard No</i>	<i>Score</i>
3	2
4	3
5	3
6	3

COMPLAINTS AND PROTECTION	
<i>Standard No</i>	<i>Score</i>
7	2
8	2
9	3
10	3
11	3

MANAGEMENT AND ADMINISTRATION	
12	3
13	3
14	3
15	3
16	3
17	3
18	3

No

Are there any outstanding requirements from the last inspection?

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
1	NU1	The manager should separate the statement of purpose service user guide from the domiciliary service documents to show what services the nurses agency offer.
2	NU4	The manager should ensure information about next of kin and health statement are obtained for all staff.
3	NU7	The manager should separate the complaints register for the nurses agency and domiciliary agency
4	NU8	The manager should keep records and risk assessments about how staff with convictions on their CRB will be processed through the recruitment process

Commission for Social Care Inspection

South West

Colston 33

33 Colston Avenue

Bristol

BS1 4UA

National Enquiry Line:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI