

# C and S Recruitment Agency Nursing and Care Services Nurse Agency

2/3  
48 West George Street  
Glasgow  
G2 1BP

Telephone: 01412660382

**Type of inspection:**  
Unannounced

**Completed on:**  
30 May 2024

**Service provided by:**  
C & S Recruitment Limited

**Service provider number:**  
SP2022000113

**Service no:**  
CS2022000158

## About the service

C and S Recruitment Agency Nursing and Care Service operates from an office base located in the city centre of Glasgow. The provider is registered to supply or introduce adult registered nurses to NHS services, independent healthcare services and registered care services within the Greater Glasgow and Clyde health board areas. At the time of this inspection, the service employed six nursing staff.

The service aims "to support care homes and hospitals to help patients achieve their own personal goal".

The service was registered with the Care Inspectorate on 17 June 2022.

## About the inspection

This was an unannounced follow up inspection which took place between 28 May 2024 and 30 May 2024. The inspection was undertaken with a mix of virtual technology and onsite visit. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with two staff and management
- reviewed documents.

**Key messages**

- The provider had made improvements since the last inspection.
- The service was operating within its geographical conditions of registration.
- A new manager had been appointed.
- Quality assurance processes had commenced to monitor standards.
- Recruitment processes had improved.
- Staff training and development processes had improved.

**From this inspection we evaluated this service as:**

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership and staffing?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

## How well do we support people's wellbeing?

3 - Adequate

We completed a follow up inspection to measure the action taken in response to two outstanding requirements made at the last inspection. The requirements related to operating within the conditions of registration and management arrangements. Sufficient progress had been made to meet these requirements.

We changed the evaluation of this key question to adequate.

Please see the section of this report entitled "What the service has done to meet any requirements made at or since the last inspection" for further information.

## How good is our leadership and staffing?

3 - Adequate

We completed a follow up inspection to measure the action taken in response to four outstanding requirements made at the last inspection. Two requirements have been assessed as being met.

Although progress had been made towards the remaining two requirements, further time was required to evidence full compliance (See requirement 1 and requirement 2 and Area for Improvement 1).

We changed the evaluation of this Key Question to adequate.

Please see the section of this report entitled "What the service has done to meet any requirements made at or since the last inspection" for further information.

### Requirements

1. By 22 July 2024, the provider must ensure that people experience care which is provided by staff who have been safely recruited and inducted into their new roles. To do this they must:

a) Ensure that recruitment is undertaken in line with the "Safer recruitment through better recruitment" guidance.

This is in order to comply with Regulation 9 (2)(b) and Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am confident that people who support and care for me have been appropriately and safely recruited." (HSCS 4.24)

2. By 27 May 2024, the provider must ensure that quality assurance processes are carried out effectively and in a manner which achieves improvements in the provision of the service. To do this the provider must ensure:

a) Regular feedback is sought from those who purchase nurse hours on the performance of the registered nurses, ensuring that when required appropriate actions are taken.

- b) An analysis of incidents and the actions taken are evidenced.
- c) Routine and regular management audits are completed across all areas of the service provided.
- d) Clear action plans with timescales are devised where deficits and/or areas for improvement have been identified.
- e) Action plans are regularly reviewed and signed off as complete once achieved by an appropriate person.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

**We have extended this requirement to 22 July 2024.**

### Areas for improvement

1. The provider should ensure staff supervision is carried out in accordance with the provider's policy and procedures to ensure staff are supported to discuss and develop their roles and reflect on practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 27 May 2024, the provider must operate within the service's conditions of registration.

This is to comply with Public Services Reform (Scotland) Act 2010, section 78(3)(b).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed." (HSCS 4.23)

**This requirement was made on 3 May 2024.**

## Action taken on previous requirement

The service had identified the areas which were outwith the NHS Greater Glasgow and Clyde locations. The placing of nurses outwith this area had stopped. The management team were aware that only services within the geographical location stipulated on the conditions of registration could be provided with nurses. The service had developed a map of the area they could provide nurses within to support compliance.

## Met - within timescales

### Requirement 2

By 27 May 2024, the provider must ensure that there is a consistent management presence providing appropriate and effective leadership within the care service.

This is to comply with Regulations 7(2)(c), 9(2)(b) and 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed." (HSCS 4.23)

**This requirement was made on 3 May 2024.**

## Action taken on previous requirement

A new manager had been appointed since the last inspection. The manager was working with the provider to make the required improvements to the service. The oncall system had been enhanced to take account of the new management arrangements. The oncall contingency plan had been reviewed. This provided a second registered nurse being available should the manager not be able to support staff. This provided reassurance that staff would have access to support whilst working in services.

## Met - within timescales

### Requirement 3

By 27 May 2024, the provider must ensure that people experience care which is provided by staff who have been safely recruited and inducted into their new roles. To do this they must:

- a) Ensure that recruitment is undertaken in line with the "Safer recruitment through better recruitment" guidance.
- b) Ensure that new staff complete a formal induction into their new role.

This is in order to comply with Regulation 9(2)(b) and Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am confident that people who support and care for me have been appropriately and safely recruited." (HSCS 4.24)

**This requirement was made on 3 May 2024.**

**Action taken on previous requirement**

The service had refreshed the induction process with the current staff team. This had provided staff with information required regarding the service and the expectations. The induction process was ongoing during the inspection.

We sampled the recruitment of two new nurses to the service. The recruitment process was still underway. The service had completed and documented a robust interview with the new staff. Identification checks had been completed and used to apply for a criminal convictions check. We discussed the reference process with the management team. They displayed a clear understanding of the reference process to ensure that individuals were safeguarded.

Although we saw progress, the recruitment process had not fully concluded at the time of the inspection. Therefore, we made a new requirement within Key Question 2 – "How good is our leadership and staffing?" of this report.

**Met - within timescales****Requirement 4**

By 27 May 2024, the provider must submit notifications to the Care Inspectorate in accordance with guidance entitled: - "Records that all registered care services (except childminding) must keep and guidance on notification reporting".

This is in order to comply with regulations 4(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed" (HSCS 4.23).

**This requirement was made on 3 May 2024.**

**Action taken on previous requirement**

The regular notifications required were being submitted as expected. During the inspection we discussed and demonstrated the elements of the E-Forms system relating to updates and the messaging functionality. The management team demonstrated an understanding of the importance of ensuring that information submitted is detailed and demonstrated actions taken. This helps give assurance of the responsiveness of the management team.

**Met - within timescales****Requirement 5**

By 27 May 2024, the provider must ensure that quality assurance processes are carried out effectively and in a manner which achieves improvements in the provision of the service. To do this the provider must ensure:

- a) Regular feedback is sought from those who purchase nurse hours on the performance of the registered nurses, ensuring that when required appropriate actions are taken.
- b) An analysis of incidents and the actions taken are evidenced.

- c) Routine and regular management audits are completed across all areas of the service provided.
- d) Clear action plans with timescales are devised where deficits and/or areas for improvement have been identified.
- e) Action plans are regularly reviewed and signed off as complete once achieved by an appropriate person.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

**This requirement was made on 3 May 2024.**

### Action taken on previous requirement

Since the last inspection, the service had requested feedback from services that staff had been supplied to. There had not been responses to these requests or services were unable to identify the nurses provided due to the time that had passed. The management team responded to this by updating timesheet documents to allow for direct feedback at the end of each shift. This reassured us that the management team were trying different ways to engage with services. We saw one example of positive feedback being provided this way. The service should continue to develop how they seek feedback on the services provided.

The service had provided staff with self-evaluation questionnaires. The management team were in process of recruiting a data analyst to support in the analysis of the feedback provided. This would allow for trends and patterns to be identified.

The quality assurance processes were newly introduced in the service and more time was required to demonstrate that feedback from stakeholders informed how the service was run.

We have extended the timescale of this requirement., see Key Question 2 – "How good is our leadership and staffing?" of this report.

### Not met

## Requirement 6

By 27 May 2024, the provider must ensure that staff have appropriate training and support in accordance with their role. To do this, the provider must at a minimum:

- a) Implement a training plan based on analysis of current needs of people using the service.
- b) Ensure staff have opportunities for reflection and development through individual supervisions and team meetings.
- c) Implement monitoring and assessment of staff competence through on-site observations of staff practice.



This is to comply with section 8(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes". (HSCS 3.14)

**This requirement was made on 3 May 2024.**

#### Action taken on previous requirement

The management team had introduced an electronic overview of training. This allowed monitoring of training completed and courses outstanding. This had resulted in a monthly training plan. Training needs had been discussed with the staff team.

Since the last inspection, staff meetings had been introduced. This allowed the new manager to be introduced to the staff team. A new supervision schedule had been introduced. We asked that initial supervisions were brought forward. This would allow a baseline supervision with each staff member and allow staff to discuss their views (see area for improvement 1 in Key Question 2 "How good is our leadership and staffing?").

Some staff had received medication competency assessments. The management team commenced onsite observations at the time of the inspection. This gave the opportunity to monitor staff practice whilst working in a service. The management team advised that this was a positive experience as allowed them to meet with the staff member on shift and those that they were supporting. We were advised this will continue to be routine practice for the service.

**Met - within timescales**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People's rights are promoted and respected	3 - Adequate
1.2 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our leadership and staffing?	3 - Adequate
2.1 Safer recruitment principles, vision and values positively inform practice	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
2.3 Staff have the right skills and are confident and competent	3 - Adequate

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

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